

Review.

LECTURES.—CHIEFLY CLINICAL. By Thomas King Chambers, M.D., Honorary Physician to H. R. H. the Prince of Wales; Physician to St. Mary's and the Lock Hospitals, London. 8vo. pp. 624. J. Churchill & Sons. 1861.

Of all the medical works published there are probably none that prove more acceptable to the profession than clinical lectures and reports of cases; we therefore hail with pleasure the appearance of this enlarged and improved edition of those of Dr. Chambers. He could not have selected for it a more appropriate and attractive title than the one he has adopted. Filled, as it is, with new and practical suggestions, it may be read with profit by medical men as well as students. Indeed, we all require works of this kind to win us from our old adopted methods, and give us new ideas. As usual, we will make a few selections from our author, to introduce him, as it were, to our readers, with the desire that all may know him better, and consult him for themselves.

Health consists in the constant and active metamorphosis of the tissues of the body, by their renewal from the food. Disease, our author holds to be a partial arrest of these changes, that the renewal flags, and that the constantly decomposing tissues, not being eliminated, constitute a sort of death in life. He considers successful medical treatment to be in the keeping up of vital action by fresh supplies of food, which of itself, he says, acts as a remedy, though all other treatment be neglected. And that medicines should never interfere with, or take the place of these materials of life.

He makes the startling assertion that three quarters of all the patients who die either of pneumonia or low fever, die of starvation.⁴⁰ That a person prostrated by fever or by inflammation of any important vital organ, ought not to be longer than two hours without food whilst awake. And that it may often be administered in doses of a few spoonfuls every hour night and day with decided advantage.⁴¹

He mentions, among others, the frequent deaths of hand-fed infants, who are ever timely warning us of their danger by their fetid evacuations, and yet are dosed with mercury, and allowed to die of insalubration.⁴²

Do all that you can, he says, to increase the appetite, and strengthen the digestive powers; and reckon the value of any remedy solely by the effect it has upon the desire for food. Should it lessen this, discontinue it, no matter by what authorities it has been recommended.⁴³

A physiological Fellow of our College used to call his patients his "mucous membranes;" nor was his term an exaggeration,⁴⁴ for in very few cases of the cases misadvised to by us has not the cause of death acted on the body through them, or shown itself by a perversion of their functions. Our drugs are chiefly intended to act on mucous membrane, and all are introduced into the body through

The office of a mucous membrane in health is to offer a passage for oxygen, water, fat, albumen, and other nutritive substances, and to serve as a defence for the tissues beneath. These functions it best fulfils when it is bedewed with a watery exhalation,⁴⁵ a constant dampness without visible fold, the only normal state indeed of this membrane.

MUCUS AND PUS.—When a mucous membrane becomes inflamed and red, its blood-vessels will be found relaxed and dilated from loss of vital elasticity,⁴⁶ and there is poured through it a quantity of slimy material, known by the name of mucus; this, on microscopic examination, will be seen to be composed of minute balls of transparent jelly with a granular aspect;⁴⁷ they are called "exudation globules," "mucous globules," and pus globules." Had they not been thus exuded they would have remained adherent to the basement membrane, and have eventually formed epithelium.

These globules, as long as they are of the heat of the body, possess the power of reproduction within themselves.⁴⁸ Beneath the microscope, if kept from cooling, the granules may be observed to coalesce in active haste to form the globules, which again increase by rapid subdivision.⁴⁹ Pus indicates greater deficiency of vitality than mucus.⁵⁰ Fresh pus globules also increase by subdivision, but complete their growth by becoming uniform and globular.⁵¹

FEVER.—Our author considers it far from being proved that typhus and typhoid fevers are not one common poison, modified by varying circumstances,⁵² and states that he has seen the two eruptions on a patient at the same time.⁵³

His mode of treatment forms a striking contrast to that of Dr. Tweedie, published on the 64th and 69th pages of this Journal. Dr. Chambers makes no distinction in it between the two forms, and therefore gives them both a name suitable alike for either—typh-fever.

Inclining, as he does, to the idea that the exciting cause of fever is a power or force, as light, heat, electricity or sound are held to be,⁵⁴ still he says it is difficult to avoid the conclusion that it is some ponderable agent, carried by the saliva into the stomach, from the great loathing of food always present at its commencement,⁵⁵ and the wonderful effect produced by an emetic of ipecac, when administered at an early stage.⁵⁶

Emetics.—He says he has always found an emetic, when given within the first four days, materially to lessen the severity of fever, and in some instances seemingly to cut it short. That he never knew them to do any harm, unless combined with antimony, which sometimes causes diarrhoea, and fails of doing good.⁵⁷

Nutrition and Hydrochloric Acid.—Our author says that during the past thirteen years, there have been registered under his care, in St. Mary's Hospital, 230 cases of continued fever.⁵⁸ That for the first half of this period all the patients, 109 in number, were treated on what may be termed general principles, that is to say, neutral salines three or four times a day, and mercury with chalk once or twice a day at first; and later in the disease, bark, ammonia, ether, and wine, when these remedies seemed required by the symptoms. Leeching and cupping were employed to the exterior of inflamed viscera, as occasion called, and food was administered at the ordinary four daily meal times.

During the past six years all that have been admitted, 121 in number, have been treated on an uniform plan of continuous nourishment. A teacup full of animal food, in a liquid form, has been given every two hours, day and night, when the patients have been awake, and between every dose of nutriment a dose of hydrochloric acid.⁵⁹ They have been sponged two or three times daily with