

THE
BRITISH AMERICAN JOURNAL
OF
MEDICAL AND PHYSICAL SCIENCE.

Vol. V.]

MONTREAL, AUGUST, 1849.

[No. 4.

ART. XVI.—ON THE CALOMEL TREATMENT IN ALGIDE OR ASIATIC CHOLERA.

By ARCHIBALD HALL, M.D., L.R.C.S.E., Lecturer on Materia Medica, McGill College.

Dr. Graves of Dublin, in his recent second edition of his "clinical lectures," alluding to the treatment of Asiatic or Algide Cholera, by calomel, thus remarks: "Before we proceed further, I may observe, that the principle on which the calomel treatment was employed in cholera arose from almost constantly observing that there was a total deficiency of bile in the stools. Soon after the supervention of an attack, the alvine discharges were observed to be white, and without the slightest tinge of bile, and on this very remarkable symptom practitioners dwell almost exclusively, thinking that the patient's only chance lay in restoring the action of the liver. Now it is obvious that the absence of bile in the stools is no more a cause of the disease than is the deficiency of urea in the kidneys, or of serum in the blood. Viewing the disease in this light, it would be just as reasonable to give a diuretic to restore the secretion of the kidneys, as to give calomel to produce a flow of bile, &c. &c. I have, therefore, no hesitation in saying that the calomel treatment has no claim to merit on the ground of theory; and, as far as I have observed the results of it in this country, it seems to be of no practical value in the treatment of cholera."

With every deference for the high character of Dr. Graves, and to that position in the profession to which his talents justly entitle him, and which he has fairly earned, the experience of the calomel treatment in this city, during the present epidemic, is so completely at variance with the above recorded opinion, as to lead to a doubt whether it was fairly pursued in Ireland, or, that Dr. Graves has (what I do not believe) underrated it as a means of relief, for the purpose of advancing a new method of treatment, which might be deemed peculiarly his own. I allude to the treatment by *acetate of lead and opium* proposed by that gentleman.

Into the remote cause, inductive of that peculiar condition of the system characterised by the train of symptoms known under the name of Asiatic Cholera,

it is not my present purpose to inquire. It is a matter of little moment whether it be of an endemic or epidemic origin; whether terrestrial or atmospheric, whether depending on disturbed electrical equilibrium or of a fungoid character; at the present moment I deal with its effects, and no one who has witnessed the disease can question this statement, that superadded to the ordinary phenomena, there is witnessed a manifest impression upon the nervous centre of a depressing nature, and that this impression is antecedent to the evolution of the several symptoms which follow, and would appear to be inductive of them, varying in intensity, however, in different cases; prostrating the vital and dynamic forces at once in some, effecting its purpose more slowly but not less surely in others, and in a third class manifesting itself in a more manageable form in the shape of the diarrhœas now so prevalent.

Examining again into the pathological changes induced by the disease, in by far the majority of cases, we find, with the exception of congestion of the internal blood vessels, but insufficient causes of death. Sometimes the mucous membrane of the alimentary canal is found to be inflamed, at other times not; sometimes pulpy and thickened, at other times blanched and anæmic. Dr. Boehm, at present so worthily supplying Dr. Deiffenbach's place at Berlin, in a recent work shows that "the chief pathological alteration of the mucous membrane in cholera consists in a desquamation of the epithelium," by which it is often altogether thrown off, and that the process commences at the lower portion of the ileum where the injection of the bloodvessels is most distinctly seen. The liver is occasionally found congested, at other times perfectly healthy in appearance. The kidneys have always been found healthy, although suppression of urine is one of the most marked symptoms of the disease. The gall bladder is almost always found distended with bile. The bladder contracted; and the brain and spinal cord most usually normal in their appearances. What, then, is the cause of death, for there is nothing in these pathological alterations, which should not in analogous cases, afford the fairest anticipations of suc-