

CAMDEN GAZETTE.

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Volume I.

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PROSPECTUS.

IN taking the direction of a Public Journal, the Editor has no other object in view, than, by the exercise of an useful occupation to obtain an honest livelihood—to manage his paper in such a manner, that Society shall derive from it, the greatest possible benefit alloyed with the least possible evils.

It has been unfortunately the fact, that for the last fifteen or twenty years, scarcely a publication has been ushered into the United States, unshielded by party, and which has not been checked to some particular sect or career, has been marked by the praiseworthy discrimination of their patrons, and the improvement of the state of the country, can be expected from the impartiality of the Editor.

He will not become a party, sect, or interest, and in the humble talents of a citizen, he will not be able to sustain the weight of the Press. He will not be a party, sect, or interest, and in the humble talents of a citizen, he will not be able to sustain the weight of the Press. He will not be a party, sect, or interest, and in the humble talents of a citizen, he will not be able to sustain the weight of the Press.

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FOR THE CAMDEN GAZETTE.

NO. 2.

Is the Bilious fever of South-Carolina variable in its nature?

CONCLUDED.

In the first number of the present communication, I stated my belief, that the bilious and yellow fevers of our state are the same, varying only in point of violence, which is generally admitted at present. Viewing them as one and the same it becomes necessary to enquire, whether they can under any circumstance become contagious. Dr. RUSH is of opinion that the yellow fever is not in itself a contagious disease, but Dr. CAISON appears to favour a contrary belief. Dr. LIVING of Charleston, unequivocally states it to be an infectious disease, which does not extend its influence to the blacks. Dr. JACKSON, who was in the West Indies sometime, and who afterwards traversed the greater part of S. Carolina and Georgia, as surgeon to his Britannic Majesty's troops during our revolutionary struggle, gives it as his opinion that it is a contagious disease. Dr. LINDS authority is again opposed to his.

How a dispute of this kind should remain so long unsettled, is to me a matter of astonishment. In my conception the doctrine of contagion is so well established, its laws so well defined, and its phenomena so obvious, that there can be no doubt upon the subject. That the yellow fever can become infectious, when connected with the Typhus, or Jail fever, under close confinement there can be no doubt. But that the yellow fever, as it usually appears, is in itself a contagious disease, I am far from believing. The history of the disease carries conviction with it. We are told by Dr. HUNTER when the soldiers, who were infected with the yellow fever, were conveyed from Port Royal in Jamaica, to the interior of that island, they recovered, without communicating it to a single person. Charleston, S. Carolina, persons labouring under the disease, upon retiring to the country recover without propagating it. The only circumstance which places it in the reach of controversy, is the well known laws of contagion. Let us for a moment recur to the small pox as a proof. If

be transported from one extremity of the continent to the other, it will there retain all its violence, nor can we arrest its progress until the inhabitants have all been infected with the yellow fever, even when connected with the Jail fever. The miasm of the former, remains equally virulent, but the activity of the latter is constantly diminishing. Farther, the system in the first instance, is not susceptible of a second attack, but in the latter, it is equally liable; nor is this law confined exclusively to small pox. Pertussis, varicella, measles, and almost every disease admitted to be specifically contagious produces the same effect; I therefore conclude, that the yellow fever is not in itself a contagious disease. The evidence in my opinion is irresistible; those however, who are disposed to pursue the enquiry any further, are referred to Dr. RUSH's observations upon that subject; and the enquiry of Dr. CAISON as an appendix to Alliberts treatise on malignant intermittents.

The next enquiry is, does this change in the force and general character of bilious fever depend upon local causes? Can it depend upon that change which the face of our country undergoes, from the hand of the planter, mechanic, or an increase of population? Can it depend upon a change in diet, manners or habits? Can it be an alteration in our general manner of living? These have all been adduced, as causes adequate to an explanation, but unfortunately speculation and matter of fact do not go hand and hand. In support of such a conclusion. It must then depend upon some particular constitution of the atmosphere, predisposing to attacks of a particular description.

An attention to the diseases of Great Britain, France, and the United States, together with the treatment of them, may perhaps throw some light upon this interesting question. In Great Britain, it appears that inflammatory action, when it does supervene, is so mild, that practitioners of medicine seldomly have great recourse to the lancet in the present day. In France the practice is very different; bloodletting is there one of the first remedies, and it is not only repeated, but evacuations from the bowels are kept up to a very great extent. In the United States diseases still more inflammatory, require much more copious depletion. But has this been uniformly the case? Have

I have some doubts about the contagious nature of those diseases, but as they are generally admitted to be such, it may not be amiss to enumerate them. Are they not properly speaking epidemic diseases?

the disease of Great Britain, of France, and the United States, maintained the same uniform character? By no means; Sydenham's practice, specially on particular years, was depletion and his successors found it inadmissible at a subsequent period. In France, and the United States, practice has underwent similar revolutions. Dr. RUSH's preception (Dr. RUSH if I mistake not) and his colleagues rarely ever found it necessary to deplete rapidly. Dr. RUSH himself was compelled to adopt a very different practice and that practice was again revolutionized by his successors. Nor are these facts confined to Philadelphia. The medical history of South-Carolina furnishes abundant proofs which come within the narrow limits of my own observation. Upon the whole I am bound to say the Bilious fevers owe their existence to local causes, but the force of morbid action, or in other words their inflammatory or Typhoid action depends upon a particular constitution of the atmosphere predisposing to the one or the other. Having finished these preliminary remarks, I beg leave to sketch the outlines of a history of the disease itself.

The Bilious fever is a disease indigenous to warm climates and varies in appearance according to general and local circumstances. It differs from most other diseases in having periodical intermissions and returns of fever; when there is no obvious intermission exacerbations can always be discovered at particular hours. It sometimes commences its operation upon the system within twenty-four hours after an exposure to the predisposing cause, but has been known to remain quiescent for thirty days according to Dr. BAILEY. Whether it is possible for the fever to remain within us any longer, or whether the system generally eliminates itself in a shorter period, are points as yet not clearly ascertained.

The Types which it generally assumes appear to be either continued, remittent, Tertian, Semiterian, Subintrant or Quartan.

The name has been uniformly regulated, according to the period in which the revolution is performed. In a practical point of view, I do not think it necessary to adhere strictly to such an arrangement, but in conformity to custom, will describe those periods as laid down by authors.

The continued form of fever, is known to have commenced on a particular day, and continuing throughout its course, without any intermission, or remission of violence, consequently having no apyrexia.

2. A remittent is the same disease continued without an apyrexia, but undergoing at stated periods, a diminution of violence.

3. A tertian period consists of a regular intermittent, the paroxysms of which do not last above twelve hours vid. Cleghorn dis. med.

4. A Semiterian, is described by the same author, in the following words vid. page 90 "a fit begins on Monday noon, for example and goes off the same night. On Tuesday afternoon, a second fit comes on and gradually increases till Wednesday night, when it terminates. On Thursday morning there is another such intermission as happened on Tuesday morning, but on Thursday afternoon another long fit like the preceding commences and returning regularly every other day, leaves only a short interval of ten or twelve hours during the night and forty. The same name has been given to it by Celsius and Agethenus."

5. A Subintrant, is that particular form, in which a period scarcely subsides before another comes on.

6. A Quartan, is said by Cullen, to be a fever, with similar paroxysms and intermissions, of seventy-two hours. Of these Types, the remittent and Tertian, appear to be the most common.

Among the premonitory symptoms, of this complaint I think the following are the most prominent:

1. Loss of appetite, and lassitude.
2. Sickiness at stomach.
3. Foul tongue. This varies with the season, and nature of the disease. My much esteemed friend, and preceptor the late Dr. TRAVE whose medical skill, and extensive experience, qualified him for deciding, used to observe, that a whitish furred tongue, with spots, regularly arranged on its surface, always indicated the propriety of depletion. This is precisely the species of furred tongue, which generally occurs during the first plant of the sickly season. It however loses its appearance, within the first 4, 5, or 6 days, and assumes a bilious aspect. As the season becomes more advanced, the tongue acquires the latter appearance, from the commencement of an attack.
4. Stretching, or yawning.
5. Rigor.
6. Preternatural heat in the palms of the hands and feet.
7. Aching of the limbs.
8. Cold chills.
9. Pain in the head, and back. Active

disease appears to have its primary seat, in the vascular system, and as a free equable circulation appears to constitute health, any departure from it must depend upon an irregular and disproportioned excitement, in the part affected; hence those sensations, just as disease is about to disclose itself, I have enumerated the premonitory symptoms, as they ordinarily occur in attacks coming on gradually; but there are many instances in which the system receives no warning, and the disease is immediately ushered in, with the following symptoms, viz.

1. Cold chill.
2. Fever.
3. Pain in the head and loins.
4. Dryness of Skin.
5. Tense pulse.
6. Costiveness or looseness according to the season. Other signs which are probably more characteristic of the disease, but not occurring uniformly shall be enumerated under the head of occasional symptoms. One or more of these always occur, but any of them may occur, to the exclusion of the rest, and those which appear first frequently subside, and others supply their places.

Occasional symptoms. These are

1. Flushed face.
2. Red watery eye.
3. Sensation of very great heat about the body.
4. Oppression at the breast.
5. Difficult respiration.
6. Pain in the side.
7. Dry parched tongue.
8. Throbbing of the carotids.
9. Great sickness at stomach and vomiting.
10. Throbbing or pulsatory motion of the abdomen.
11. Restlessness.
12. Inaction.
13. Semiholency.
14. Profuse sweats.
15. Coldness of the hands and feet.
16. Prostration.
17. Dark dry tongue.
18. Sordes about the teeth.
19. Cadaverous smell.
20. Yellowness of the skin and eyes.
21. Indistinct articulation.
22. Loss of speech.
23. Sinking and fluctuation of the pulse.
24. Coma.

It is my intention at some future period, to furnish the public with an account of the climate and diseases of South-Carolina, together with a succinct view of the manners and customs of its inhabitants and the influence of climate upon them. I shall not trouble the readers of the Gazette with an account of that variety of bilious fever which prevailed here in the summer of 1813. Yielding to Tonics and Stimuli from the commencement. In making this communication it has not been my intention to provoke a controversy or to oppose the leading principles of any medical writer. The view which I have taken of this disease, is the result of some study and much observation. Its want of coincidence with the writings of most medical gentlemen will not I hope appear as a disparagement. The principles which I have laid down are derived from faithful enquiry and I think lead to important practical conclusions.

WM. LANGLY, M. D.

An American traveller in Spain, writes from Madrid, that the restraints of law and moral obligation are scarcely known; the people think only of obeying the king and the inquisition. Farmers collect together in little villages for safety, not daring to live in detached houses, for fear of murderers and robbers. People travelling from Cadix to Madrid, go without arms, so that if they meet robbers on the way, their lives may be spared for submitting without resistance. Not an enclosure or forest tree was to be seen for 300 miles, except 40 or 50 trees on the Sierra Morena, (Brown Mountain) and a fence belonging to the king. There were a few olive orchards, without hedge or fence. "As far as the eye can extend, nothing is to be seen but clear fields, and the grass and stubble on them completely dry." The moral devastation of the mind equals the dreariness of the land; the monk and the monarch having completed what mischance began. Such a picture as this ought to teach some wisdom to the wisecracks who scoff at the idea of the "rights of man," and preach up hereditary right.

A Spanish ship from Africa for Havana, with 500 slaves and a large quantity of gold dust and ivory, has been captured off the Hole in the Wall, by an English Frigate, and sent into Bermuda. N. Y. paper.

Philadelphia, March 25.

Marshal Grouchy is at present in this city, and we understand he receives the hospitality of many distinguished families.

the idea of a party paper is rejected those who shall wish to discuss all or other subject of public interest that the columns of this Gazette be and free for all temperate disquisitions communications from the Political Philosopher and the Moralist, are all invited. The ebullitions of gall the literary effusions of taste and gaiety neither exhibited in the sober periods of a modelled to the fascinating the Muses, shall always find a noble temple of literature.

COMMITTEES.

the CAMDEN GAZETTE to be published a week, with a fair and legible Type, paper of medium size, in folio page columns.

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WANTED.

Apprentice to the Printing business wanted at the Office of the CAMDEN GAZETTE. A lad between 12 and 16 years of age, with respectable connections, correct in a good English education, might be obtained on reasonable terms. April 4.

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ed with elegance and accuracy, on the notice, at the Office of the CAMDEN GAZETTE, King-street.

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