

CAMDEN GAZETTE.

Number 13.

THURSDAY, June 27, 1816.

Volume I.

PRINTED BY P. W. JOHNSTON, KING-STREET, CAMDEN, (S. C.) FOR THE PROPRIETORS.

CONDITIONS OF THIS GAZETTE.

The price to Subscribers is THREE DOLLARS per annum, for fifty-two numbers, exclusive of postage; and in all cases where papers shall be delivered at the expense of the publisher, the price will be, including postage, FOUR DOLLARS a year, payable half yearly in advance.

Terms of advertising in this GAZETTE.

Advertisements not exceeding eight lines will be printed for FIFTY CENTS, for the first publication, and half that price for every subsequent insertion. Larger advertisements will be charged in proportion.

A liberal discount will be made on the bills of those who are constant or considerable customers in this line.

If no directions are given with an advertisement, it will be continued till forbid.

FOR THE CAMDEN GAZETTE.

As the Citizens of this place, and its vicinity, have been recently threatened with a return of the late Epidemic, it may not be amiss to furnish the public with a succinct account of the disease, as it appeared during the last winter. The following is a reply to the Circular Letter of Dr. DAVIS, of Columbia, in which is not only embraced a history of the complaint, but its probable causes, method of extension and treatment.

BY DR. LANGLEY.

Dear Sir.—Yours came to hand yesterday, requesting of me such information as was in my possession, relative to the late Epidemic Catarrh. Independent of personal regard, as a fellow labourer in the field of Science, I feel it a duty which I owe to humanity, to comply, as far as my slender abilities will allow. Nothing can be more desirable than a faithful history of such a malady. It is only by an attention to the origin, progress, and termination, of Epidemics, their vicissitudes, and difference of character, that their pathology can be understood with scientific precision. The history and treatment of this widely extended disease, demonstrates beyond the possibility of contradiction, that an Epidemic, may exist simultaneously in different sections of the same country, with characters very different, although marked by an identity of symptoms. It appears from the statements of many medical gentlemen in our country, that locality had its influence. In some situations, bleeding, cathartic, emetics and diaphoretics, with epispastics were the only remedies to be depended upon; in others, the lancet was used sparingly, and the milder species of Tonics were exhibited with advantage, after gentle evacuations. The history of what might with propriety be called, a Typhoid tertian, which occurred here, during the summer of 1813, establishes this opinion beyond the possibility of doubt. It personated, almost precisely the endemial fever of the summer, and autumnal seasons, yet admitted of scarcely any evacuations; stimuli and tonics were the only remedies to be depended upon from the commencement. Principles in medicine, are to the physician, what the compass is to the mariner. Exclude them, and we should be ever stumbling in darkness, without the possibility of discovering light. Had such an opinion, been mentioned to Cullen, Brown, or Hunter, they would have treated it as the chimera of a distorted imagination. Had a fact so notorious, attracted the attention of Dr. Barton, he would not have recommended the indiscriminate use of Bark, during most cases of bilious remittents of S. C. and Georgia, throughout every stage. Had it occurred to the illustrious Rush, his theory would have been modified, in such a manner, as to have met disease under every possible form and change. Pardon me for such an intrusion of private opinion. It appeared necessary, as preliminary to the answers which I now beg leave to present you with. You wish to ascertain

1. At what time the Epidemic Catarrh first appeared with us?
 2. What were its types, the best method of cure, and when it declined?
 3. You wish to know whether, I believe it to have been contagious, or propagated by some latent property in the atmosphere?
 4. Whether, it was confined to particular situations, and classes of people?
 5. Whether there was any method of prevention known?
- The Epidemic Catarrh, or what has been denominated Influenza, made its appearance here early in December last, and began to decline, in three or four weeks. It was by no means malignant, and yielded to simple remedies.

chilliness, slight pain in the head, hoarseness and sneezing. About ten or twelve hours after these symptoms had disclosed themselves the disease was ushered in by an increased activity of the pulse, flushed face, red watery eye, increased pain in the head, copious nasal discharge of an ichorous nature, with slight excoriation of the upper lip, and cough. The bowels were generally, in a natural state, but in some instances, constipation existed, and in others a diarrhoea. When the disease was more violent, in addition to these symptoms may be mentioned a pain in the side, sometimes erratic, at others fixed. There appears to have been an unusual secretion of bile, but the tunica albuginea seldom became tinged.

I examined the state of the urine in but few instances, but always observed it heightened in colour. The skin was generally dry during febrile paroxysms, which were of the remittent kind. The disease generally terminated about the fifth or sixth day, leaving no disagreeable impressions farther than a disposition to relapse after transitions of weather. It did not appear to be confined to any particular age, sex, condition or place, but was most common among the white males. When negroes were attacked, their cases appeared to be more violent, but not accompanied with many Catarrhal symptoms. In short, they seemed to assume more the character of Pneumonia and Pleurisy than that of Influenza.

As the Influenza, of this place was distinguished by inflammatory symptoms, it became necessary to deplete by blood-letting, cathartics, sometimes emetics—diaphoretics, were found necessary. In no instance do I know that Epispastics became indispensable. When emetics were used, antimonial preparations were preferred. Cathartics, were always most efficacious when combined with antimonials in such portions as to nauseate, and determine to the skin. In some instances, when much pulmonic irritation existed, pectoral mixtures calculated to counteract the cause, and keep up a discharge from the surface were administered with advantage. In no instance, did the disease prove fatal.

As is generally the case when an Epidemic prevails, many were disposed to believe it contagious. Nor were there wanting physicians credulous enough to advocate the opinion. Such an opinion, however, appears to me to be wholly unfounded if not inconsistent with its general character. If the disease ever was contagious, the opinion is not warranted by any observations which I have made during my practice. In the first place, there are certain laws assigned to contagion, which do not accompany the Influenza, and secondly it would not have subsided, so soon, if such had been the case.

Contagious diseases, are known, by their extending through whole communities, and not subsiding, until every member who had not been previously infected, has contracted them; which after having gone through their regular course, leaves the system insusceptible of a second attack. Now the progress of Influenza was very different; several individuals of the same family had it in its most regular form, without its extending through the whole, and when it began to subside all those who had been confined began to convalesce. I therefore conclude, that the Influenza, is neither an infectious nor contagious disease, unless there should exist a very strong predisposition in those, who officiate as attendants. It must therefore, be propagated, by some unknown cause in the atmosphere.

The Influenza was neither confined to particular situations, nor very particular, in the selection of its subjects. Its influence extended alike to swampy situations, and elevated spots. The hardy Yeoman, who toiled in our pine lands, the Mechanic whose occupations confined him to his house, and the gentleman, whose only business was pleasure and ease, were equally exposed to its attacks. I believe no method of arresting the progress of Influenza, has yet been discovered, all are nearly equally predisposed, during that particular constitution of atmosphere inducing it, and if there is any preventive, it must consist in temperance, guarding against sudden transitions, and an exclusion from night air. Perhaps there can be no better method, than wearing flannel next to the skin, a moderate use of evacuations when necessity requires it, and an application of thick clothing when coldness of weather points out the necessity.

Although the Influenza, left us without committing any extensive ravages, it was followed by an Epidemic of greater malignity

than has visited this country for many years. As a successor of the Influenza, it received the same name by people at large, but was known by the term "Epidemic" among the better informed. Why it should have received such a palpable misnomer, I am at a loss to conjecture. It was certainly entitled to no specific denomination, for it personated many diseases, but in not a solitary instance, did it assume the character, of a Catarrhal affection. I beg leave to transmit a concise account of its diagnostic symptoms, in ordinary cases. These were, cold chills, sometimes shivering, acute pain in the head, back and loins, breast, or side; and in many instances, all those symptoms existed at the same time. Secondly preternatural coldness of the hands, feet, and frequently the general surface, with a depressed and intermitting pulse. In many cases pulsation of the radial artery was apparently suspended, and a morbid perspiration, thrown out about the hands, feet, and forehead, sometimes this terminated in stupor. In two or three instances patients were seized with fits, of an epileptic kind and in two others a paralysis of one of the arms succeeded in a few hours. After the cold stage had subsided, a fever of an intermittent type came on, and continued from four to six, and twelve hours. An exacerbation of all those symptoms, except coldness and loss of pulse accompanied it. An intolerance of light was very distressing to many, particularly, when there was much determination to the head. When stupor did not exist, delirium frequently supervened. In milder cases, the patient enjoyed an exemption from the latter symptom.

Thirdly. After the first stage had subsided the action of the pulse, imparted a jarring shattered and intermitting sensation, alternating with a quick, low, and chorded appearance, nor did that jarring shattered feel desert the artery, until patients began to convalesce. It always indicated danger, and could not be removed until a favorable crisis denounced approaching recovery.

Fourthly. There was much anxiety about the precordia generally, and in violent cases, respiration became stertorous. A great degree of lassitude, with sighing, and short quick inspirations, were common, which never subsided without immediate depletion by bloodletting, and evacuations.

5th. The liver appeared to be the greatest sufferer in a majority of instances. There was a very unusual secretion of bile, and in some instances, there seemed to be an obvious enlargement of this viscus. It was known to be diseased, from a pain in the right shoulder, and hypochondrium, an incapacity for lying on the left side &c. &c. Fortunately however, this affection did not amount to confirmed Hepatitis; excitement appeared to be more diffused, for the spleen, lungs &c. appeared to participate in its sufferings.

6th. The tongue, during the first stage of this complaint, assumed a whitish furred cast; about the commencement of the second stage it was tinged with bile, and the third was certain to impart a dark hue about its base. When the disease became more protracted, its whole surface acquired a similar appearance, with this difference; during the two first stages, it preserved an uniform moisture, but no sooner had the third stadium arrived, than a dryness of the fauces, and whole surface of the mouth, became very distressing, nor could it be prevented by the most sedulous application of water, or acidulated gargarisms. Instead of a smooth dry surface, the tongue now presented a dry, dark, and rough aspect; fissures appeared in every direction, sordes accumulated, and large pieces apparently detached from the tongue, were removed by the patient. His stools were equally dark—if the bowels had not been constantly evacuated by active cathartics the surface was dry; but if properly managed a cutaneous discharge might be kept up with advantage.

7th. The bile discharged after taking an emetic, was generally thick, and ropy, resembling the yolk of an egg, now and then accompanied with a dark grumous substance of an atrabilious character.

8th. The countenance in cases which proved fatal, and in many which eventuated favourably was the hippocratic kind. The eye had a wild, quick irrelative look, but always became glassy and glaring before death, when the disease went regularly through its different stadia.

9th. The urine was heightened some in colour, but I had no opportunity of observing a sedimentitious deposit. I have been since informed, it was a very common circumstance.

10th. I discovered, no material influence upon the natural sympathies of the system. In cases approximating coma, it could not be expected that any morbid influence could be traced, and in others such effects were so slight, as not to attract notice.

11th. The appetite was entirely suspended during the violence of disease, but became remarkably strong, during convalescence.

12th. Inebriates were particularly liable to attacks, and they proved generally fatal without immediate attention.

13th. Blood when drawn, exhibited a sizy appearance, but contained an unusual quantity of serum notwithstanding. In many cases, a perfect coat of coagulable lymph was thrown up upon cooling, and in others a natural crisis of the blood, was destroyed. This fluid, seems not to have been sufficiently decarbonized in the lungs, for it was uncommonly dark. In cases of great violence, it was discharged from the vein guttatum after venesection, and it was only by giving drastic evacuations, that we were enabled to make it flow more freely.

14th. In many instances, the disease assumed the form of pneumonia, and peripneumonia notha, in others pleurisy, and in a majority an highly inflammatory fever running into a state of great depression. Its most common duration, was from four to five days, but if unskillfully managed, sometimes reached the 10th, 12th & 15th. Many opinions were at first entertained of its real character. Some thought it partook of a typhoid action, and others, assumed a midway position. Those however, who viewed it as one of an highly inflammatory character, treated it with quiversal success. This disease, has at length subsided and is succeeded by vernal intermittents, which partake of the same inflammatory nature. It has been said that the late Epidemic was supposed to be contagious, by a gentleman whose name I shall not take the liberty of mentioning, but the number of facts opposed to such a conclusion, has, I am of opinion, induced him to recede, if such was his real belief. Be that as it may, so great was the alarm, that many who were not compelled to remain, deserted the sick, and others were afraid to visit them during the reign of terror. Fear soon gave way to more correct and rational impressions. The unfortunate patient again received all that attention which the calls of humanity demanded, and visitants departed, without receiving that chastisement which contagion is disposed to inflict. It was confined to no particular situation, but seemed to be more general in some places than others. I have seen it in our sandhills, within the vicinity of swamps, and in Camden. Blacks and whites were alike subject to it; but the former were more frequently attacked than the latter, as a matter of course, consequent to a state of servitude. These unhappy creatures labour through the day, exposed to all weathers, and after business is over, instead of retiring to rest, indulge in the most reprehensible employments, that of night walking, sitting up and revelling in an excess of mirth. Such an exhaustion of the animal spirits, or excitability, induces a state of debility, calculated to invite the attacks of disease. No wonder then that they are the most common victims; these are the fit subjects for attack, whether blacks or whites, males or females. Superadded to such predisposing causes, may be mentioned old houses in a state of decay, filthy and badly ventilated. In short their manner of living, if adopted by the whites, would render them far more liable to afflictive maladies, of every description. The history of no epidemic, or pestilential disease, has yet told us that the negro is more susceptible of their influence, than the white, and although there may have been the greatest sufferers, during the late epidemic, I think it an additional proof that we were not constitutionally exempted.

From what has been said, it is obvious, that there was a general preventative; but in particular instances the disease was excited without any ostensible cause. The methods of prevention, which I would have proposed, could they have been adopted are

- 1st. To remove out of old houses into others which were warm, but well ventilated.
- 2d. To avoid an exposure to night air, cold and rain.
- 3d. To wear flannel next the skin, and adapt the clothing, to the state of the weather.
- 4th. To abstain, from an intemperate use, of ardent spirits.