Original Communications.

OBSERVATIONS ON THE TREATMENT OF ASTHMA.

By T. L. PRIDHAM, Esq., Surgeon, Bideford, North Devon.

[Continued from p. 580.]

CASE IV. In my last paper, I recorded the history and the result of my treatment of *dyspeptic asthma* in two clergymen. I now have to relate a case in one of our own profession (which, however, he had been unable to follow, on account of his sufferings, for a long time); it will, I think, be read with interest; and I cannot do better than give an account of the patient, as sent to me by a near relation of his, who, with the father of the sufferer, are medical men of high standing in this county. It is as follows:—

"June 5th, 1860. In consequence of your observations on asthma, I am induced to send you the history of my nephew's case. When three years old (he is now thirty-three), he had severe skin disease, in fact, inflammation of the dermis, with much desquamation, arising from some constitutional error, which, being very troublesome, was sought to be cured by different medical men, and was modified, and at last repelled. At seven years old, he had his first attack of asthma, which has continued at intervals ever since; but he has at times the skin disease return; when his asthma leaves him, his bowels are regular, and tongue clean; his ejecta are clay coloured. His urine is suspended during an attack; on the subsiding of which there is an enormous secretion of it, dark coloured, and loaded with lithates. He has fearful headache on the approach of an attack; and the heart labours so much with palpitation, and such great irregularity, that his uncle, who sees him every day, sometimes fears rupture of some blood-vessel. He is often obliged to sit up all night in his chair, being quite unable to lie down. I fear his is now a hopeless case; but the poor fellow is very anxious to have your directions, which, I am sure, you will readily give, and it will be very satisfactory to his father and mother. When his attacks subside, he quickly rallies, comes down stairs, and walks about without dyspnoea. He eats no animal food; but broths, jellies, and vegetables."

In replying to this communication, I held out but little hope in this complicated case that my treatment would be of service, and I only gave some hints in the alteration and regularity in his diet, recommending solid food instead of so much liquid, and by no means to drink when animal food was taken into the stomach, and to avoid vegetables, pastry, fat, or any indigestible food. I at the same time requested an interview with the patient, and invited him to my house.

On August 3rd, I received the following communication from him:—"I have improved in health and strength under the advice given by you; but I must confess to one attack lately, which I attribute to my own folly in not confining myself to the quantity and quality of the food you recommended. I am very anxious to have a personal interview with you, and shall be in Bideford for that purpose in a few days."

Accordingly, on the 14th, he came to my house, where I had the opportunity of watching him for some days; and, in addition to the information I had received from his uncle, he said, that up to the last two months his attacks had increased in frequency and severity, with the increase of years; that it was quite impossible to describe the extent of his sufferings during an attack. The muscles of his chest became fixed, the action of his heart for a time suspended, and even life appeared to be extinct to those who watched over him. The severity of his attacks usually lasted for four or five days, and not unfrequently he was unable to lie down for a fortnight together. Sometimes a copious frothy expectoration would come on; and at other times there would be no cough; but an immense flow of urine much loaded with lithates would take place. During the period of an attack, the scaly eruption on the skin would lessen, and sometimes disappear. His body was thin; the face bloated, and had the appearance of a life of suffering; his eyelids were red and swollen; shoulders much raised, quite characteristic of an asthmatic subject; his pulse 60, and feeble; his lungs did not indicate actual disease, but were evidently emphysematous nearly in their whole extent. The stomach was distended; the secretions from the bowels were clay coloured;

the tongue was rather coated; and he had but little appetite. He told me he had consulted many medical men without ever deriving any satisfactory relief. Having first attended to the secretions from the bowels, and procured a more healthy secretion of bile, I recommended the sedative plan of treatment, with strict rules as to diet, finding out as nearly as possible how much animal food the stomach could digest without discomfort or inconvenience.

After a full explanation of my views as to the cause of *dyspeptic asthma*, and the remedy, both of which appeared new to him, the reasonableness of my arguments at once gave him confidence, and he said he was fully determined to carry out my system. In addition to what I had before suggested, I ordered him a pill, to be taken four times a day, composed of three grains of the extract of conium and one-eighth of a grain of the extract of belladonna. At the end of a few days, his remark was, on coming to my breakfast-table: "My lungs are perfectly free, and I have no uneasiness in my chest; and I do not ever remember to have been in such a state of freedom and enjoyment." On that day, he walked eight or ten miles towards the sea before dinner. On his return, he remarked that, considering the small amount of animal food which he took, his bodily strength perfectly surprised him.

On September 13th, he wrote from his home:—"From the contents of your letter, it seems you have an idea that I have had an attack. Now, this is not the case; the fact is, I have altogether escaped a paroxysm, a most convincing proof, in my opinion, of the benefit I have derived from your treatment of my case. Your success is certainly a triumph; though I cannot help saying medical men are incredulous in the matter."

On February 5th following, my patient wrote me:—"I must crave your forgiveness for neglecting so long to send my usual bulletin; the truth is, I have so much improved in general health, that I have very little to complain of. Since I last wrote, no decided asthmatic symptoms have manifested themselves; and, with increased powers of digestion, I have ventured to increase the limited allowance of animal food you recommended me. This I find necessary to do, to meet the increased wear and tear of the system, from the great amount of exercise I take. I am constantly in the open air, frequently the greater part of the day away on some shooting or sporting excursion. I am surprised I have so much strength and vigour left in me. This week and the last have given me several opportunities of using my skates again; on each occasion, I have usually remained on the ice four or five hours at a time. I know you will not approve of my departing from your rules; and I cannot altogether acknowledge the prudence of it on my part; but when I tell you I have gained in weight and increased in flesh considerably, perhaps there is not so much to be said against this infraction."

This communication must, I think, be conclusive, that by the judicious system of diet and sedative plan which was followed at the commencement, the stomach had greatly regained the powers of digestion in my patient, and consequently that new life and energy were imparted to him by means of a healthy circulating fluid which now nourished his body. I did not, however, cease to warn him against the danger of overstepping the mark of prudence, being well assured, from frequent experience, that those who are predisposed to the disease can never eat and drink with impunity what other people can.

On April 2nd, my patient wrote:—"It is very gratifying for me to be able to state, for your information, that, as far as my old enemy, the asthma, is concerned, I have been perfectly free for many months, but am sorry to say I now suffer from congestion of the kidneys, which defies every remedy." Was it not probable that over exertion, and perhaps checked perspiration, was the cause of such an attack?

The next communication which I had from my patient (on 30th of October) was anything but satisfactory, as regarded his state; but, nevertheless, it is most convincing as regards my views as to the exciting cause of asthma in one predisposed to the disease. He wrote as follows:—"I really feel ashamed to address you, and, but for this feeling, I should have written to you long ago. I have no doubt in my own mind that you have already guessed the cause of my long silence. If you have not, let me at once make a clean breast of it, and tell you I have had two relapses of the old grievance, one following hard upon the other; brought on, not from anything amiss in your able and scientific treatment of my case, but from sheer neglect of your advice altogether. I am induced to make this humiliating confession, because I am perfectly certain that, had I dieted myself according to your rules, I should have remained perfectly

well. I am more than ever convinced of the truth of what you say, that the disease originates in the digestive organs. Yet, notwithstanding these convictions in my mind, and with every probability of uninterrupted health were I to live as abstemiously as you recommend, I feel the impossibility of doing so at all times and seasons, from want of proper control over the appetite. You cannot be aware how difficult it is to do this, and what a power of self-denial it requires; but you may have some notion of what I have to endure, when I tell you that daily I am almost ready to cry from hunger, since I have been under treatment, so ravenous is my appetite; I have never felt anything like it before; in fact, I feel like a starving man, bolting my meat fast and voraciously, and I fear I do not masticate my meat, in consequence, as I ought to do. I am often induced to chew a quid of tobacco, to allay my hunger; it has in some measure a good effect, I think. I am now perfectly well again, and I am resolved, suffer what I may, to suffer hunger rather than asthma. Of the two, I know which is the worst evil, as I have suffered such torture, such pain and agony in these last two attacks. I must and will keep them at bay, as I have the remedy in my own power, in your treatment."

On December 9th, my patient wrote me:—"My health is in every way improved, and, considering the severity of the weather, I consider I am wonderfully well, and I do believe that by strict attention to your rules, I shall weather the winter comfortably." On December 17th, 1857, he wrote:—"No doubt you are interested in the success of a case so difficult to treat as mine, and I am sure you will participate with me in the gratification I feel, when I say that for very many months I have been entirely free from any serious attacks of asthma. Now, when I think how much pain and suffering I have been spared, and the relief I have experienced, I cannot but feel deeply grateful to him who has been the cause of the enjoyment of improved health, such as I now enjoy; and, indeed, so improved is my general strength, that I am sometimes quite surprised at the amount of fatigue I am capable of enduring with impunity. I beg your acceptance of a hamper of game, of my own killing."

On February 4th he wrote:—"I have, as yet, had no return of asthma. I have for some time past been enabled to dispense with your instructions for the regulation of my diet; if I do, however, feel any symptoms, I at once diet myself. The affection of my skin, I am happy to say, is fast disappearing."

Since this time, I have had no communication with my patient; but I have instead a hamper of game occasionally sent me from the south of Devon, as an indication that he is in the enjoyment of good health.

I have now given a history of this case over a space of nineteen months, in my patient's own words. I think no one who reads what he has recorded will for a moment doubt the success of the treatment which I adopted. He completely refers his attacks to a deviation from the rules laid down for him before the stomach had sufficiently regained the powers to digest more than the prescribed quantity. It is certain that if my patient has not been sufficiently careful in his mode of living, the whole of his symptoms may return on him again; for, as I have before stated, an asthmatic patient can never, with impunity, indulge in what are called the luxuries of life.

CASE V. The next case which I have to record is one of a gentleman in Staffordshire, aged 74, who had suffered from dyspeptic asthma for forty years. The disease had increased so much of late, that he now considered his end was near; and, having heard of the service I had rendered to a fellow-sufferer, he summoned me to come to him with all speed, and on August 20th, 1855, I found him suffering from that form of asthma which is generally more difficult to relieve than any other; that is, where the oppression on the breathing is constant, and there is no interval of rest. His tongue was brown, coated, and much swollen; his pulse 70; his lungs were completely emphysematous. The urine was scanty, and loaded with lithates; the secretions from the bowels were dark and offensive; the legs were swollen; palpitations of the heart were frequent; the complexion was sallow; he had no relish for food; the stomach was distended. Notwithstanding, he managed to get down a quantity of food, with porter, sherry, and port wine, which he appeared to think he was bound to drink as he had such a well stored cellar. He could not lie down in bed; but still he managed to get down stairs daily, and with difficulty walked a little in the open air.

There was in this case evidently much to be done in endeavouring to improve the secretions before any attempt could be made to treat his disease specifically. I therefore placed him at once under an alterative and saline treatment, at the same time

reducing the amount of his food as nearly as I could to the usual quantity adopted for the treatment of dyspeptic asthma; and his bowels were to be regulated by means of the following pill, taken at night.

℞ Pilulæ aloes cum myrrhâ gr. iij; pilulæ hydrargyri gr. j; extracti taraxaci gr. ij; extracti stramonii gr. ʒ. M. Fiat pil. ij horâ somni sumendæ.

Instead of wine and porter, I ordered weak brandy and water; and toast water *ad libitum* three hours after eating animal food. He was also permitted to drink soda or seltzer when very thirsty.

The patient having followed this plan for ten days, as he informed me by letter, with considerable advantage, I visited him again on my way into Derbyshire, whither I had occasion to go. His appearance in every way was improved; and his secretions more healthy. I did not now hesitate to place him on the sedative plan, and strict dietary system; and ordered him four grains of extract of conium four times a day, at the hours of seven, twelve, five, and ten.

On September 15th, I had the following account from him: "I am going on very well, and you may depend on my adhering strictly to your rules of diet, etc." On September 27th, he wrote: "I am still going on well." On October 24th, he reported: "The time is now drawing near when the restrictions you laid me under are in some degree to terminate, though I do not mean to transgress the strict rules of moderation either in eating or drinking. It affords me much pleasure to be able to say, as I am sure it will be to you to hear, that I have derived great benefit from your able advice. I can walk up hill much better. I have a good appetite, and sleep tolerably well; and my friends all say I look well in face; my complexion is much clearer than it was. I beg, my dear sir, in conclusion, to congratulate you that you have been the means, under Providence, of restoring me to so great a measure of health, which, at my time of life, could never have been expected." On Nov. 15th, he wrote: "I am still going on well. I continue my medicine, and have increased my diet a little, as you requested. I only wish I had adopted your mode of treatment many years ago." On Feb. 11th following, my patient wrote: "I feel tolerably well, but still feel the necessity of continuing your medicine, by which I am kept in so much comfort. I now take my glass or two of sherry, and do not limit myself so much to your system of dietary; but I do not drink at the time of eating animal food." I still occasionally hear from my patient when he requires my advice.

CASE VI. My next case is that of a common carrier, aged 45, who consulted me about a year since. He was in the habit of travelling about fifteen miles daily, his labour being performed with the greatest difficulty. Seeing his distress and laboured breathing whilst on the road, and also perceiving that he bore the marks of an asthmatic subject, I one day asked him if he wished to get relieved of his complaint. "Yes, I do, sir; but I am told I shall never be better in this world. My sufferings have been long and great, and no one knows what I go through daily but myself. I am obliged to work hard all day, as you see me; and at night I can never lie down in bed to rest." I found, on inquiry, that he ate and drank as much as he could get down, and generally of the most indigestible food, partaking largely of public house beer by the roadside, which he candidly admitted he was always the worse for. His tongue was foul; his stomach distended; his eyes red and prominent; his urine dark and loaded; the bowels were habitually costive. I treated him with a few alterative doses and saline aperients for some days, and then commenced giving a pill of four grains of the extract of henbane four times a day. I wrote out a system of dietary for him; and, at the end of a month, he called on me to say he could now do his work as other men; and, in fact, he appeared to have a new life given to him. He was kept under treatment for three months, when he pronounced himself perfectly well. I begged him to continue to be moderate in his diet, both as to what he ate and what he drank, and more particularly not to drink at the time of eating animal food; all which he promised me strictly to observe. I met him a few days since on the road, when, with a cheerful countenance, he said, "I am quite well now, sir, as you may see." He was at the time walking up a pretty steep hill.

CASE VII. I shall conclude this paper with a short account of another case which has come under my care within the last few weeks. A farmer's son, aged 30, residing about six miles off, had been afflicted with asthma for six or seven years. He had been under the care of several medical men, who invariably told him that the only chance of getting better was to live well, which advice he followed as well as his circumstances

would admit. He laboured much in his breathing, with but short intervals of rest. His tongue was coated; his stomach painfully distended; the urine showed an acid deposit; the bowels were costive; the pulse 70, and feeble. The shoulders were much elevated; the countenance anxious. He was not able to lie down at night, and had a copious morning expectoration of a frothy mucus. The right lung was in an emphysematous state. He was in the habit of eating puddings and pies, much salt pork, and plenty of broth and vegetables. I ordered him some mild alterative pills and three grains of the extract of conium four times a day, and gave him the same directions as to diet as in the former case. At the end of a month, he said he was quite relieved, and wanted a more generous diet, as he wished to go to his labour on the farm again. I increased his animal diet to six ounces daily; and he now takes his place on his father's farm, and works as other men.

[To be continued.]

ON ALBUMINURIA, AND ITS FERRO-ALBUMINOUS TREATMENT.

By DAVID NELSON, M.D. Edin., formerly Physician to the Queen's Hospital, and Professor of Clinical Medicine, Queen's College, Birmingham.

IN treating the above subject, it is preferable to use the term albuminuria as a statement of fact, rather than the theoretical and uncertain name of Bright's disease, or fatty, or granular kidney, etc. This is especially desirable in all cases that have not as yet resulted in death, or been subjected to a *post mortem* examination; because it is now an established conclusion that the specific symptom of albuminous urine may arise from many and various changes occurring within the kidneys; or, on the other hand, may be accompanied with no detectable disease at all of an organic nature. Upon this latter point I had made up my mind several years ago, on the ground of personal observation, and am confirmed in such a view by the able and practical comments of Dr. Graves of Dublin, who says upon this subject, "What I wish to call your attention particularly to in this case is the state of the patient's urine. On his admission, we found that his urine was highly albuminous; when submitted to the action of heat, at a temperature of 170°, it coagulated rapidly, and showed distinct traces of the presence of a large quantity of albumen; yet, under the use of opium in moderate doses, this man's urine became, in two or three days, perfectly free from any trace of albumen, and has continued so ever since. Now this case alone would be a sufficient refutation of the opinions of those who look upon albuminous urine as a pathognomonic sign of disease of the kidneys, as described by Dr. Bright, and who are in the habit of marking such cases in the hospital as cases of 'Bright's kidney.'" He pertinently adds, "It appears rather strange that a man should have Bright's kidney to-day, and not have it the next day"; and concludes by saying, "We have had a great many instances of this kind". And so had Dr. Blackall, long prior to Dr. Bright, in his cases of serous urine, which is only another and older name for albuminuria.

I feel the more bound to insist upon this prefatory remark, in order to avoid any misconception as to the object of this paper; for, of course, it is not intended to import that the line of treatment pursued is curative or restorative of kidneys that have become disorganised, or, as one may say, disglanded; but simply to uphold and illustrate the doctrine that albuminuria, to a very great extent, and accompanied by the sundry symptoms of dropsy, etc., may exist for a length of time, and yet be subdued and staved off for indefinite periods by means of the remedies recommended.

It was in the year 1850 that I first specially bent my observation in this direction, having had several cases in hospital, most of which, under the then usual treatment by means of diuretics, alkalies, and sedatives, etc., proved fatal; while the first one to which the ferro-albuminous remedies were applied recovered beyond all expectation, and became, amongst the others, the subject of some clinical lectures at the College, which were published in this JOURNAL in the year 1852. To these particular lectures, and the cases contained in them, I would respectfully recall the attention of my brother members and the other readers of this publication on the present occasion, should they have these volumes in their libraries, and possess leisure to refer to them; but, in case it should be otherwise, it may be as well myself to refer to the views of

pathology therein broached, and their application to treatment. Thus it is observed, in reference to the varied nature of the disease, that it consists essentially in a deposit of foreign matter of low organisation within the proper tissues of the kidneys, which proper tissues thus become atrophied, and ultimately absorbed. These deposits, having no power to assume the glandular functions—although so far lying within, and having the rude outward form of a glandular apparatus—are not calculated to eliminate those excretions which ought thence to be drained, without at the same time showing a tendency to permit the most valuable reparative material in the blood (albumen) to escape along with them; and hence the common name of the complaint, from its principal symptom—albuminuria; although it must be admitted that the occasional manifestation of profuse albuminuria, in the course of other diseases tending to debilitate the nervous system and attenuate the blood, affords proof that it is possible to be sometimes a simply functional or accidental filtration of the nutrient fluids. These degenerations of structure, though all ranked under the one complimentary name of *Bright's disease*, may be of various kinds, according to the constitution of the patient and the nature of the inducing causes; and, though the most prevailing of these causes are impoverishment and debility of the body, proceeding from the scrofulous or syphilitic taint, anæmia, drunkenness, or abuse of mercury; yet another order of causes is to be looked for, in the form of local or accidental affections such as the kidneys are subject to, in common with other parts. Thus, without finding any prior deterioration of the general mass of the blood, or any evidence of a preceding local hyperæmia, we may be compelled to look for the primary source of the disorder in a simple perversion or loss of function in the renal nerves, by which the natural reactions are so modified, and the affinities so altered, that, instead of glandular or epithelial cells being formed and deposited as usual, we shall have a displacement of them by means of granular or tubercular matter, or fat. Here we would have no previous pressure, followed by absorption; but a simple death, and disappearance of the higher orders of structure, and a substitution of degenerate matters in their place. Next, the evil may proceed from a pure anæmia, in which the over-fibrinated blood may block up and ultimately obliterate the extreme vessels, thus cutting off the source of nutriment from the glandular structure, and substituting in its stead an impoverished lymph, destined, perhaps, to undergo still deeper degenerations in the course of time. Also we may have a protracted congestion, pressing upon the nervous filaments and delicate microscopic structures of the organs, thereby lowering their vitality, and preparing them to yield without resistance to the morbid precipitations which are sure to proceed from a vitiated and stagnant composite fluid like the blood. Then we may have a subacute inflammation, acting in a manner pretty similar to anæmia, so far as effects are considered, but more rapidly and expansively, in which large amounts of fibrinous exudation will be poured out, oppressing the proper structures, and leading to their destruction; while such exudation itself sinks into a lower form of organisation, and becomes the nidus of those fatty or tubercular depositions which are the last evidences of this terrible malady. Such secondary degenerations will be modified by the constitutional diathesis of each patient. Thus, in the more healthy habit, where the disease has proceeded from some accidental anæmia or local inflammation, we may only have a fibrinous or carnified kidney, without fat or tubercle; whereas, in the fatty habit, we shall have a sebaceous deposit; and in the scrofulous and mercurio-syphilitic patient, a mere granular *débris*, either generally diffused, or aggregated into larger or smaller masses, and perhaps intermixed with pus. In all cases gone to this degree, there will be found an obliteration of the vessels, so that the organ cannot be properly injected.

Now, besides the leading, though not altogether unexceptional feature of albuminuria, the symptoms that will appear in most cases are, dull pains in the loins, inclination to drowsiness, frequent but scanty micturition, nausea and epigastric tenderness, anasarca or general dropsy, and a pale puffy aspect of the countenance and flabbiness of the limbs, concomitant with a deficiency of the red particles of the blood. The facial appearance, giving a Flemish expression to persons in this country, is a very valuable one; for it will often give us a clue to the malady before its more annoying or dangerous symptoms excite attention; so much so, that the eye of the experienced physician sometimes draws its conclusion from the physiognomy alone; and I am the more satisfied of its value, because I have often found that it revealed the secret of renal disease,