HEMORRHAGE IN TYPHUS FEVER.

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BY AD. LIPPE, M. D.

The hemorrhage during typhus fever may be twofold, viz., active and passive. The active hemorrhage generally appears during the height of the disease, and is known by bleeding of the nose; the more plethoric the patient, and the more inclined to congestions to the head, the more subject is he to hemorrhage; the bleeding of the nose will often occur when from the beginning of the disease the patient suffers from violent headache and delirium,—the true crisis has then arrived. It is advisable not to check this symptom, although it may incommode the patient very much, frequently compelling him to assume a sitting posture, the blood running down the posterior nares when in a horizontal position, and then descending to the throat, causing great distress; the brain, however, is very much relieved, the fever abates, and the bleeding will often cease of itself. In persons who have taken alcoholic beverages freely, it is apt to last longer and return at intervals. But should it be thought advisable to check this bleeding of the nose, Rhus tox. will be the proper remedy if the blood is bright red. In some cases the blood coagulates quickly in the nostril from which the bleeding takes place, and forms in it a heavy plug; in such cases, Crocus sativus is indicated,—it should never be checked by Mercurius, which remedy has no analogy to typhus, and its administration will invariably be followed by disastrous consequences. In rare cases the bleeding will occur from the nose, ears, eyes and mouth; this cannot be considered a crisis, and will find its remedy in Ipecacuanha, Elaps, Crotalus or Lachesis. In still more rare cases, the perspiration becomes bloody; and in that condition, Nux mosch., Lachesis or Arnica will be most likely also to correspond with the

other symptoms of the patient. But the most serious hemorrhage occurs in cases of protracted typhus fever, resembling the typhus putridus. The disease having run its course, no crisis may occur, or it may be but a partial crisis. The symptoms may often have been subdued by the appropriately applied medicines, yet it is apparent that the recovery is only a partial one; and in the second or third week, often on the twenty-first day of the disease, a hemorrhage from the bowels occurs,—the patient is much weakened by it, and it becomes necessary at once to find the proper remedy. The blood so discharged is very thin, of a dirty brown-red, or at once a pasty, blackish mass (like liver),—reacting like an alkali, and wanting in fibrine, it soon enters into putrefaction. Hypinosis is always present when this hemorrhage occurs in typhus; and in former days a hemorrhage of that kind was considered a fatal symptom, and as indicating a deuteropathic sepsis. The most important remedies are Alumina, Arsenic, Elaps, Lachesis, Crotalus, Arnica, Carbo veg., Phosphorus, Lycopodium, Nux mosch. and China.

Alumina will be indicated if there is a profuse discharge of a coagulated mass, resembling liver with serum, without pain, but great weakness. The desire to evacuate is not accompanied by pain, and, but for the great debility, the patient would not know but that he had a natural stool.

Arsenicum. The discharge is very offensive, preceded by pain in the abdomen, and there is present at the same time great restlessness with much thirst or pain in the small of the back.

Elaps. The blood is black but fluid.

Arnica. The blood is bright red but clotted.

Carbo veg. Great weakness and debility when the blood is discharged with the feces, or if mucus is passed with the blood.

Lachesis. If the blood is mixed with pus, very offensive.

Lycopodium. Large quantities of fluid blood are discharged even with the soft feces.

Nux mosch. Especially when there is present at the same time an induration of the liver, and fainting.

Other concomitant symptoms may, in a given case, indicate other remedies than those we have mentioned, but those cases will be rare.

For the last twenty years of my own practical experience, I can state that in this locality, Alumina, when administered in one single dose, highly attenuated, has checked all the hemorrhages from the rectum occurring in typhus, and that, during that period, no case of that kind has terminated fatally.

CASE FROM PRACTICE.

BY J. B. WOOD, M. D.

S. T., aged sixty-two years, had been occasionally troubled with diarrhœa for the past fifteen or twenty years. These attacks generally yielded to some simple domestic remedy, and, with the exception of an occasional cough, he enjoyed general good health until the autumn of 1865. His cough then became exhausting, and the diarrhœa returned with still greater severity. For a time he was undecided as to what to do, generally trying some one of the many remedies he thought did him good service before, but of no avail.

A short time before his death he placed himself under my care, and for a time seemed benefited by the use of Phosphoric acid, Arsenicum, and other kindred remedies. The stools were painless at the commencement of the disease, but he had a burning pain at the pyloric orifice of the stomach, and occasionally through the entire abdomen. The stools were thin, pus-like and watery, and of offensive odor, and contained no blood until a few days before his death, when he had a very troublesome tenesmus and discharges of almost pure blood.

About this period some kind friend informed the patient