Morge

Small pre without a prefix
Clinton James Ross

March 31st, 1862
Dr. Eppeliond defines it thus: Small pox
say, he is the product and is productive, of a morbid poison, which after a short time, develops from which in most cases is followed by an eruption, which passes through the stages of pimples, vesicles, pus, and leads with other succeeding symptoms, the disease runs a determinate course, leaving marks on the seats of ulcers and in most cases produces immunity to the system from a second attack.

The term variola, is probably of Mongolian origin; the term pox of Saxon origin and was used to signify a bag: the epithets "Pette" in France, and "Little" in England were used after the appearance of syphilis in the Great Pid in England, so that the former might not be confounded; in Scotland, however, is still used without any prejudice.
Dr. Hahn attempted to prove, early in the last century, that the Greeks and Romans were acquainted with the disease; and more recently Dr. Williams and Baron have pursued in the same path. But Rheas was the first who accurately described this dreadful disease, and also the first to refer to the writings of Galen, in proof of its having been known to the Greeks, but as Dr. Greenhill has shown in his admirable notes of his translation of Rheas, that the Contos of Galen was not so near the spot, but the Acne of Modern authors. Dr. Groove has endeavored to show that Acne was known in China and Hindostan long before the time of the immortal Hippocrates, but Dr. Gregory does not believe this statement, and he is moreover supported in this opinion by Dr. Friend and Mead, and many other physicians of learning and research; but it is not at all improbable, that this malady may have appeared and prevailed in China and the surrounding countries, long before it was known in Arabia n Syria, and that it may have taken a longer time to extend from China to Arabia and Syria, than it took from these latter countries to reach the western parts of Europe. Smallpox could not have been known to the Greeks or Hellen.
Early in the 7th Century, for there is not the slightest mention of it in the work of Isaias, in which all the diseases then known were described. Dr. Gregory says the first notice of a disease which looks like the Sreep fever, is to be found in the chapter of Procopius, De Bello Persico (lib. ii. cap. ii). Dr. G. adds that he does not agree with this view; for Procopius states that it was a malady attended with carbuncles and buboes, which, with other things mentioned by him, shows that it was to be considered Plague more than Sreep fever. Dr. Gregory says that it is a Sreep fever in 522, that soon after distinct traces of Sreep fever are no more to be found in Countries around the Red Sea; therefore it cannot be doubted that this fearful malady had prevailed a long time known in Arabia and the adjoining Countries, and in Western Europe some centuries before Phazes described it in the Sixth Century, and perhaps was known in China earlier.

Mr. Bruce, the celebrated Traveller, believed that the first epidemic of Sreep fever, of which any notice can be found occurred in 522. Then Dr. Broad says that, according to an Arabic Manuscript, that this malady arose for the first time in 572, the year that gave birth to the great Ismael in Arabia.
and that, it was introduced by an Egyptian.

Aeneas Tacticus says that it existed two years before this date and that it ravaged France

and Italy. Aeneas, who sat on the second Council

of Aegaeus says positively that in 570, it heavily afflicted

Italy and France. But it then ceased for some years

and reappeared in 580 in the same form as in the year.

570. Dr. Monfalcon states that Aeron, a physician of

Alexandria, at the beginning of the Seventh Century

first noticed the different symptoms and varieties

and treatment of smallpox and that in 640, during

the reign of Caliph Omar, when the migration of the

Arabs and Saracens into Egypt took place, the

disease appeared in such destructive a manner as to

lead many former writers to suppose, that it was

a new disease. It appears to have extended

during this Century, to all the Countries into

which these armed heroes went.

Phereas was the first to write with

decision and at length upon this disease, but

he does not presume to have been the first who

noticed it; for he gives extracts from the works of

Aeron and others who mentioned it, and it was

afterwards mentioned by other Arabian Authors.
It also appears to have been noticed in England about the ninth century, or perhaps earlier. After returning the Crusaders, the spread of the disease appeared more extended, and then prevailed in most of the temperate parts of Europe. Professor Bernard Gordon of Medicine at Bamfettier in the year 1385 mention the frequency and fatality of the disease in France at that time, but it does not seem to have been known locally in Norway and other Northern Countries. It seems to have been known long before this in Britain, for Dr. Grgory states that the word Plague was used to be found in several Latin manuscripts in the British Museum bearing dates prior to the year 900. From Europe it quickly crossed the Atlantic to America, and spread very fast to the inhabitants from this island with fearful destruction throughout the continent of America. In Canada, very great in the tropics, but appears to have been less fatal to the dark-skinned tribes. There was not much done with regard to the plague's prevalence or treatment of this most-feared malady, until the writings of the illustrious Sydenham; but the ancient physicians seemed to have placed great faith
in the treating regimen. So Sydenham must be the person described as having been the first who distinguished it from smallpox and reformed the treatment. I am not sure that this disease was known to the Ancient physicians, but I think that they confounded it with other diseases, producing an eruption over the skin.

Both our and Van Swieten accepted and carried out the views of Sydenham, and demonstrated that this disease propagated itself by a specific virus, and among the Ancient physicians the contagiousness of this disease was known, and mentioned by many of the writers on this malady.

Procaustion appears to have been practised in various countries long before it was introduced into Great Britain, but there is no definite information as to the time, when it was first had recourse to in such circumstances brought it about. It seems to me, that it was only an experiment on the part of those professing the healing art, to try to alleviate the pain and misery that must have been experienced by those who suffered from this dreadful malady.
that led them as a last means to this expedient, which happily for those who might be exposed to this disease, immunity from it; and which was and has been the means of saving many thousand lives, which must otherwise have died.

In the 17th century, we find Voltaire writing in favour of it, and he says that the women of Crete and Sicily have been from times immemorial in the habit of communicating the disease to their children, at the early age of six months, by making an incision in the arm, and then inserting the contents of a pustule from the arm of another child. It is not improbable that it first took its origin from among these actions, but Mr. Monfalcon states that it was practiced from remote ages in Africa and in several parts of Asia, also in Greece and in the whole of England and in France.

Not much reliance can be placed on this statement, as he gives no authorities for it.

Birthstone likewise, in the Seventeenth Century, affirms that it was practiced in Denmark, by the Author, that it had Constantinople for its birthplace, in the year 1673.
It had been an usage for ages in Russia.
In England the first person was first made recipient of it by Dr. Jenner in 1774-18, and the practice was taken up until 1777, when Lady Mary Wortley Montagu had her little son inoculated at Constantinople, and her daughter in England in the year 1721.
We find that a successful inoculation of his prisoners took place who were condemned in Newgate, that the Prince of Wales suffered her own daughter to undergo the operation of inoculation in the year 1722. Both these in 1727 was the first writer in France who directed the attention of the public to inoculation, and stated that of the 20,000 who died of smallpox in Paris, a great number might have been saved had they only been submitted to this process for the first ten years of the commencement of inoculation in England. Dr. Gregory states it was very unfortunate and slow, and it happened otherwise when it was only fell into the hands of unskillful men who were tried upon the very royal subjects and the operation was practiced in the most injurious manner,
after this to effect its indication we find the clergy pronouncing in the strongest terms against it from the pulpit. Happily a good practice was not so easily to be blasted, and its good fame and reputation forever destroyed. A new phase of man life on its history in the year 1746, and at this time a Small Pox Hospital was founded for the safe care of inoculatio the year 1754. The College of Physicians gave forth the highest praise of the practice and speed and De la Condamine wrote a treatise in favour of it. And in the year 1763 the practice was especially adopted by Mr. Sutton and his son, who inoculated with the greatest success Ashville. A Dispensary was then opened in London, for the inoculation of the poor at their own houses first, but through the opposition of Mr. Osmundale, who succeeded the Suttons and was equally popular and decease. The institution was short-lived, but after this it took up the plan of inoculation inoculation, which carried it on. It was inoculated between the years 1790 and 1800.

"Dr. Jenner announced the discovery of vaccination in 1792." In 1888 inoculation of the
of patients was this continued, and in 1822 on the
six patients; and in the year 1840 inoculation was
introduced in Great Britain, the introduction of
which has bestowed upon the name of Lady Mary
Wortley Montagu an immortality, which stood
aloof, husband delicately wounded. Coned but ill
effort the debt of gratitude, which is due to
the memory.

Each case of Orieda goes through four
stages—first of incubation, primary fever—
chilblain and secondary fever. With regard to
the characters of the eruption, there had been a
good many divisions. But there are some cases in
which the eruption has been discovered upon the
body during the fever, here I shall follow that
which is laid down in almost all books, in
which the disease is divided into Orieda Oria
and Orieda Conflee.

This dreadful malady sets on with smart febrile
symptoms, rigor followed by heat and dryness of
the skin, a hard and frequent pulse, pain in the
epigastrium, with nausea, vomiting, and headache.
Sometimes wild delirium, and sometimes Con
Odelceins attend its outset.
It can only be confounded with diseases of the pancreas, and Dr. Watan mentions the following symptoms by which, it may be known from disorders of this class. Comings says he is one of these and pain in the back and this, and that when they are violent, they foretell a severe attack of the disease, and the pain may be said of the continuance of the nausea and vomiting during the appearance of the leucopenia. He had often noticed that acute pain in the loin was in most cases followed by a severe attack, and if the pain occurred between the shoulders it was of better prognostic. And if there was no pain in the back, it was considered a very favourable case. Early delirium, tetanus, or convulsions acquired facility in the following course of the disease, which always, especially in children. The leucopenia begins to show itself in the third day of the fever, and the earlier it comes, the more severe will be the fever. The leucopenia comes on first on the face, and seems to prefer this part of the body to any other, then it spreads to the neck and wrists, and from this to the trunk and Lastly, attacks the lower extremities. The pimples or papules gradually
written into festoons, the suppurations being completed about the eighth day, and about this time the festoons as a rule begin to break and the crusts to form; in from a five days time the scabs begin to fall off.

In variola diserta, the festoons are few and distinctly separated from one another, but in variola col follicles the festoons are close, and run together, thus is the worst form of the disease and real danger, whereas the disease with proper care and treatment is hardly ever dangerous. In the disease, the disease runs a more natural course, and the eruption is at first according to William Johnson the pimples gradually increase in magnitude, but it is not until the third day of their appearance, that a little fluid begins to form in their tummies, for two days after they increase in breadth only, and a darkish is observable in the center of many of them. It is the eighth day of the disease as fifth of the eruption, that they become perfectly turgid and round, during this time they are setting up the face swells, often to break, so that the eyelids are closed and the face presents.
a most unnatural and hideous appearance, and about the eighth day of the eruption, a dark spot appears at the base of the pustule, and breaks at that point and allows a portion of the matter to flow out. When the crust falls off, it leaves behind it a depression, if the patient has not been carefully watched during this stage, the same course takes place on the lower extremities. On the seventh day of the disease, when the coming out of the eruption, the headache ceases entirely, the pain in the back, the vomiting and the restless grief, abate and disappear, the pulse resumes its rate and frequency, and the skin its natural temperature. And about the seventh or eighth day of the eruption, there is always a return of fever, and this is designated the form of evacuation.

Baroela Evacuans. In this form the fever itself is generally more severe, the disturbance of the sensate functions is more common and intense, the sickness and pain the limbs and back is very distressing and severe. The eruption comes out clearer and more regularly distributed than in the other form, the pimples at first the
Mucous, and crowded together, and not often accompanied by a rash resembling scarlet fever in crisscrosses. The eruptions are not to be completely filled up as in the discrete form; they are flatter, less flamed, more irregularly depressed. And being of different color. In this form there is some indication of the febrile disturbance when the eruption makes its appearance, but it is not decided as in the discrete form; about the fifth or sixth day, fresh eruptions are apt to occur, which is shown in the form of inflammation.

The first importance distinction between these two forms is on what is called the secondary sear, which sets in about the seventh day of the disease. In eight of the eruption, when the inflammation is complete, and the desiccation has commenced, it is but slightly marked in the discrete, and very severe and dangerous in the confluent. And it is at this period that great care becomes necessary as to many poor sufferers perish in the effort to do so through the exhaustion. Both the discrete and confluent are accompanied by one throat, tonsils and fauces inflamed and become
swoothen and red, and about this stage of the disease, the face swells, but not as often as in the discrete; far more often in the confluent there is more a leprous delirium which may or may not last some days. The discharge is thin and abundant at first, but near the time of maturation it is often thick, coaggy, and difficult to get rid of. Salmon is a symptom of some impropriety to the prognosis, for if it ceases suddenly, and particularly if at the same time the swelling of the face prematurely and suddenly subsides, the danger of life is great. Stillman regards this symptom as a diagnostic and distinctive character, between true smallpox and a disease called by him epidermal fever.

The frights do not confine themselves to the surface of the body alone, as the inflammation of the fauces seems to depend upon the frights occurring upon this part; also the tongue, roof of the mouth, inside of the cheeks, uvula and velum, palate are thickly covered with them. Dr. Gregory has described the eruptions from the buccal membrane of the oral cavity, stomach and intestines, as being the seat of this disease.

...
especially of the Confluent form, and that it is most apt to occur in some cases or
when the Constitutional forms are weak and the febrile symptoms more a left adynamie and
that it is due to impure blood, which the lungs
are not able to detoxalize on account of the
air passages being stuffed up with viscid
phlegm, but what appears remarkable is that all
parts of the body seem to suffer from this dual-
frightful of all maladies, except the Conjunctive
Trombosis, and that where it failed vision or life
does not occur, that it is due to the secondar flow
which engenders an intense form of gout or rheum, which quickly spoils the delicate transparent tissue
of the eye.

In the Confluent form there
are many complications which are liable to present
themselves to the physician during the secondary
fever; dry septic tons inflammation attaching the
labienous cellular tissue leading to the for-
mation of Abeepes, enlargement of the glands
of the groin and apillea, which sometimes form
very troublesome and discharge, sloughs forms on
the hips and lacemes, and those parts most
Exposed to fever, phlebitis, and in some cases effusion takes place into the joints, and occasionally death is produced by alma flogities, which supervene upon the affection of the fauces. The variola vigres of loderham or bloody flux of grief, which is almost fatal, is indicative of the putrid diathesis, and the putrides instead of presenting their usual appearances and filled with pus are red and furible, and contain blood and air. In frequency there is a discharge of blood, from different parts of the body. Haemorrhage from the uterine often states place, and in pregnancy, women complain.

Abel-Hodson who prescribed Chanopy these antinim, says that the foetuses were presented any traces of the disease. And in these opinion he is supported by Cotennico.

But Dr. Read held that if a pregnant woman was affected with meeksey, that the child was forever exempt from an attack of the disease. Dr. Jenner has proved beyond doubt that the disease may be communicated to the foetus in utero.
(Provided the mother be exposed to the disease) and she has just ceased breast-feeding, also, Sr. Gregory has noticed the disease in children from six months old. Sr. Mitchell addresses the facts of a mother, who in her youth was affected with smallpox, and he says that she gave birth to a healthy child, which showed the symptoms of the disease and that nine days after the birth of the child, the pustules were in a state of maturation. There is no disease so contagious as smallpox, for this infection does not seem to be peculiar to the living body, but may be propagated from the dead body. And instances are not wanting to prove the latter statement, as it has been known to attach those who merely touched the dead body of one who had suffered from this plague during life.

Treatment — The older physicians endeavored to force out the poison of smallpox through the skin, for they considered the eruption to be the natural and only Cure, and therefore they did all in their power to promote it.
plentiful eruption, by administering to the sufferer a hot regimen, and almost suffocating him with bad clothes, and carefully excluding every breath of fresh air. But this system of treatment is now exploded; as it is thought that the life drugs are given the better for they cannot shorten the disease, or produce any wonderful effect upon the eruption. At the early stage, the patient should be kept quiet in bed, in a well ventilated room and his diet should be light and nutritious; and in the chin be supported by a gentle, fastening bandage from any grateful to the patient's suffering. The bowels are to be relieved by saline aperients and narcotics and irritability of the bladder. When the evacuation of theuckles proceeds slowly, the strength should be supported by nutritious food; in managing the secondary from the bowels should be kept gently open by mild fomentations, and injections be given if necessary. If the patient is very weak stimulants might be freely given; and to prevent the itching which may be very severe and
Cause a great Amount of suffering, it has been advised to apply Case Cold Cream or Cannon oil, but I should suspece that the former is more in the Cond. Agreeable to the patient, and when the pox which have burst the scabs off from a soundful stich is applied, to absorb the matter and prevent pitting. This treatment is in my opinion far preferable, to that of shutting the patient up in a hot room, or of disturbing him, as one phisician did his patients, with everything that was red. The prophylactic treatment, which is vaccination was discovered by Dr. Jenner in 1792, although it had a very hard struggle for existence, is now in Vogue in almost all parts of the world, the vaccine matter is introduced by a few small punctures in the arm and in two or three days the punctures is red and inflamed, and about the fourth day or fifth the vesicle becomes susceptible, by a small Column at elevation of the Cuticle, which contains a minute quantity of their transparent liquid, and like the scabula of small pox it is more prominent at its circumference than
At its centre, and consists of several small cells and in puncturing one of them a small drop of
pus escapes up to the length or eighth or beginning of the ninth day, the inflammation around the
eschar should extend to a very small distance.
After this the eschar is formed, which continues
to increase during the ninth and tenth days to
fade on the eleventh day, passing through
phases of blue and decline, sheds some
degree of hardness behind for two or three days.
By this time a brown crust should be formed
over the eschar, which gradually becomes hard
and generally detaches itself on the twentieth day.
The crater which it leaves should be well de-
fined, circular, slightly depressed, and dotted
with little pits. About the eighth day, there is
a slight febrile symptom in most cases which
removes away, and then somewhat like the
second day of smallpox, and seems to
prevent the immunity from this disease which
I have selected for my trials.