Notes of Observations
on
Thirteen Cases of Rheumatic Fever
by Peter Muir.

[Handwritten notes]

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The Following Notes were taken by me, whilst acting as an Assistant in England; and I have been induced to bring them forward, as the basis of this Thesis, on account of certain peculiarities which the cases exhibited; and also for the reason, that the results of the cases may be viewed as illustrative of a better understood mode of Treatment. — By this, it is not meant to be said, that the treatment of the cases was on a new principle, but, that probably the same, or even more satisfactory results would have been reached, had a different, or no active mode of medicinal treatment been adopted. They are not brought forward as a scientific investigation into the nature and theories of the "actions" and causes of Rheumatic Fever, but they are adduced merely as "Notes of Observation" on this disease, as each case of it presented itself as a "fact," and by its presence requiring to be regarded as such. — The cases for the most part occurred from the latter part of 1860 and the commencing months of 1861. — This it may be remembered was a season of almost unprecedented severity of temperature. The Thermometer in that district
The border of Worcestershire showed, from different observations by several instruments, on several occasions an average of 67. In fact, the 25th December 1860, was publicly chronicled in daily papers, as the 'oldest Christmas in the memory of the oldest inhabitant.' It is not by a statement, implied that extreme cold is itself a sure originator of Rheumatism, from facts are opposed to such a view. Yet in one of the cases, cold and dampness may be to have been, thunder suitable constituent conditions, the kindling spark; in some aroused from exposure to them after the duties to society consequent on the season, from exposure to them amid the duties of labouring life. In some respects probably, practitioner in a rural district has better opportunities of judging of the value and use of external circumstances, as causes, than a professional brother of the city, who must elicit history of a case by a long and subtle exploration of the patient. Whereas he, the country Physician, on account of his residence, has all the advantages of a personal knowlege of place, and patients, with their occa
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Case I

M.S. Fane's Daughter, aged 22, unmarried, was visited on the 22nd December 1860. She stated on enquiry, that she had been seized with "Chills + Shivering" on the evening of the 19th, after her return from market; but that since then she had been comparatively free from any uneasiness until the morning of the 22nd. On which morning feeling so stiff and painful over her whole body she said "resolved to have advice." She did not refer the seat of pain to any especial part of articulations, but she said, that there was no part entirely free from it. Had not been disturbed from sleep by it, but felt it on awaking at her usual hour in the morning. There was no headache, the eye was clear, and unconfused, yet the expression of the face was anxious. The pulse was full, regular, and about 95 per minute. The tongue was furred, and the appetite unimpaired.
The appearance of the tongue and the taste in the mouth to use her own words were "the same as the sometimes bad had after taking an aperient." There was slight nausea, and constipation. The urine was scanty and high-coloured, without any sediment. There was little or no thirst, and the skin was tolerably moist. The following mixture along with an aperient was prescribed. 

\[ \text{R. } \text{Liq. Ammon. Acet. Zyp, Petasae Acet. Zyp, Brut. Camphora Zyp, } 4 \text{ fl. oz. in 1 drachm.} \]

The patient was further instructed to be very careful in avoiding exposure to cold etc. Decr. 23d. Patient had slept very little on account of the pain, which was now intense, and as it were, centred in both ankles and the wrist of the right arm. These points were, on inspection, found to surround it with slight oedematous swelling and erythema. - Pulse 96. - Preparing per aspiration. Stools natural. Urine high, clotted, with thick and albuminous sediment. The expression of the face, and the tender man.
iner in which the left hand was used to raise the affected right one, were of themselves signs almost sufficient as diagnosis of Acute Rheumatism. — A draught of The Vin Atchici was now added to the mixture in use. Also a powder (6 grs of Pilo, Dover’s and 2 grs Calomel) was ordered to be taken at bedtime. The affected joints were also swathed in new flannel to keep around them.

Dec. 24. — Patient states that he feels better slept more comfortably. Pain still in left ankle, but has left the right wrist. It now felt in the right shoulder. Pulse 92. Heart action normal. Appetite is improved, nausea has ceased. Bowels regular. — Urine—coppery deposits.


Dec. 26. — Pain is now gone except in the left shoulder which it attacked during the night. It is not very severe. Patient looks cheerful. No unexplained abnormal state of the cardiac region.


Dec. 30. Patient allowed to move about.
The room — a nutritious diet allowed. Was kept well without the powders.

Jan 2, 1861 — Convalescent —

Notes on Case I — This was the first case of acute Rheumatism which had occurred in that district for fifteen years, according to the testimony of the two practitioners in the place.

And taking along with this, the fact of two or three previous cases of continued fever in the neighborhood, this on a first view might easily enough have been mistaken for a case of that nature. The result of the treatment appeared so satisfactory that I determined to follow it again in a case which occurred on the 30th of Dec. or towards the end of the Case I. In this case there was never any peculiar odor or noticeable about the perspiration which then after the 4th day of the attack became very profuse. — Patient's feet had been wet with snow on the day on which she was seized with the chills. This case certainly ran clear of cardiac complications or visceral complications of any kind. There was no delirium during and part of the patient seemed subsequently restored to perfect
health

Case II.

F.B. Female, unmarried, aged 18, was seized on the 29th with slight pain. She states that, previous to this date, she was in perfect health. On seeing her on the 30th Dec. 1860, I found her suffering pain in almost every limb. She had been unable to sleep on account of its severity. The pain was not so much in the articulations, (both wrists only being surrounded by edematous swelling, with scarcely any erythematosus flush) but the pain was to use her own word "in the bones" or more properly in the aponeuroses of the muscles. Her pulse, which was naturally quick, was 108 per minute. Perspiration profuse on the face, but moist only on the affected limbs. The urine was high-coloured and deposited a copious sediment. The bowels were regular in their action — a powdered composition of 2 grs of Calomel with 6 grs of Caffein powder was prescribed to be taken.
At bedtime, and two tablespoonfuls of
the following mixture every 4 hours:

*A. Vin. Colonici 3g
Potass. Acet. 3g
Rig. Am. Acet. 3g
Pris. Camph. 7g*

The usual fore-cantems against exposure
to cold were also taken.

Dec. 31: Patient states that she feels
better all this still in fear of moving lest
she should have an attack of pain. Stays
tolerably well. Slight nausea which she
describes to the powder, increased furth-
and resembling that of Cast. Bowels regular.
Respiration nose profuse on extremity.
The cheeks cooler, and not so flushed. The
ceodema round the wrists is somewhat dimin-
ished. She entreats to be allowed to give
up the mixture, as she says it makes her uncomfortable, but the anxiously asks for the powder, whose request was acceded to.

Jan. 1, 1828: Going on favorably, sleep
well. Nausea gone, appetite improving. Her
distress is confined to gelicel. Pulse 100. Swelling
has left the wrists, but the pain still continues.
in the limbs — the complaints of thirst, an alkaline solution is allowed for allay it — no uneasiness in chest — expectoration clear and calm.

Jan. 3 to 14: Patient continued to improve slowly. On the last day (14th) she was allowed as she had lost strength considerably, and as the fever was now all but gone, she was allowed wine 3 oz. twice

Jan. 16: She was a great deal better and able to walk about the room and from this time onwards she had no relapse but continued to improve on till 25th Jan. or the 28th of her disease. When she appeared in perfect health.

Notes — The colchicum, whether owing to the constitution or the seat of the disease, does not appear applicable to every case. It has been called “anima articulorum”, and as the articulations were not much affected in this case, may it not be a question as to its being of more service in the disease when attacking the articulations than when attacking aponeuroses? In this case as in the former there was no marked acidity in the odour of the perspiration. —
Case III.

A. W. Female. Unmarried. Aged 24. Was seized with a sense of uneasiness and cold, on the afternoon of Jan. 2, 1861. On the morning of the same day she had been exposed to cold and wet whilst following her occupation of handling coals. This uneasy feeling continued on till Jan. 4, when she was seized with swelling and pain of the right ankle and left wrist. The pain was very intense, and the swelling edematous with a marked erythematous blush. The pulse was 100, thin hot, and feverish, but the eye was very clear and unswollen. The expression anxious, the urine deposited no sediments.

The Colonel & Dr. S. powder was prescribed as usual, with the Colchicum and Acetate of Potash mixture.

Jan. 5. Had slept well, is going on favorably. The pain has changed, or rather attacked the opposite wrist and ankle now, is not so intense in them as the first attacked ones. No weakness, appetite good, will keep on the physic regimen.

Cheerful. Jan. 9. was able to go about the room, without feeling fatigued or any uneasiness. Apparently in usual health.

Notes. This case lasted eleven days. At the commencement of it, from the severity of the symptoms I expected that it would have become complicated, both from the coldness of their home, and the habits of the patient. This was a case in which the disease was, so to speak, articcular, and in all the Colchicum mixture seemed to be attended with good results. This patient's sister was also attacked at the same time as detailed in the following:

Case IV.

Whilst visiting the above A.W. (Case III) my attention was called on Jan. 9, to her sister J.W., whose appearance presented alarming symptoms from the lividity of the lips and face generally. Her looks were haggard and denoted considerable suffering. There was also an evidence of laboured breathing. Yet she was not confined to bed, but working on her sister. On inquiry she stated that she was 16 years of age, and that she had experienced some
little uneasiness, for the last day or two, for chills which had been accompanied by pains in the joints, as first, but that the pains were now gone. — On further enquiry she stated that she now felt slight "fluttering" over the apex of the heart, and that during the last hour she had felt considerable palpitation. Percussion and Auscultation gave all the symptoms of effusion into the pericardium. The so-called pericardium effusion from fluid effused was well marked. She was ordered to bed. And Colonel C. of cinchona pills were prescribed, together with rubefacients for the fund of the chest. Decotion of Cinchona & the Iodide of Potas-
ium were also given. — The further history of the case is, that there never was any improvement in her symptoms, but gradually all her symptoms became more urgent. Her hands also began to swell on Jan. 14 — and she died on the 15.

Notes. This case was undoubtedly neglected at first. The pains which were felt at first being so slight, may be doubted as true
Acute Rheumatism. Yet when we look at the exciting cause cold and damp to which she was exposed along with her sister - the fact of the sister being attacked with the Rheumatic Fever - the subsequent Cardiac Complications - and further when we know that these complications may and often do supervene without their presence being at first observed - and when we learn the fatal termination of the case, there can scarcely be any doubt as to the true nature of the first slight pain. It seemed wonderful that the cardiac complications should have been so far advanced, and the patient still uncinfined to bed. But this may perhaps be accounted for by the fact of mind being constantly engaged by the duties which menial affections imposed upon her. - It is also the first complicated case that has as yet occurred. It lasted 14 days.

Case V -

E.O. Female, unmarried. Age 20. A domestic servant in the same house in which Case 20 occurred was seized on Jan. 7, with violent...
Frigor and shivering which lasted during a few hours, and immediately after she fell pain on her whole body. Suspecting from the symptoms which her mistress had suffered, what was the nature of her own case, she went to bed and took some gruel and light food. I visited her on the 8th Jan. and found her suffering from all the symptoms of Rheumatic Fever (particular). She was unable to ascribe, or to trace, the occurrence of the attack to any exciting cause. She was ordered to take the usual precautions against cold. Colchicum and magnesia were prescribed, &c. On the 19th Jan. she became feverish again, and had an aggravation of her symptoms. She again began to improve on the 23rd Jan. and was convalescent on the 30th of the same month.

Note. This was the first case in which there was a decided relapse, and perhaps it may be put as a question whether it was not connected with her state of health, as she menstruated on the 21st Jan. I had been looking for some effect which menstruation might have in aggravating or relieving the symptoms. This case seemed to have some
relation: But it is also to be borne in mind that the 21st was the 11th day of the disease referred to. On the other hand convalescence seemed to have fairly set in before the 19th Jan., and perhaps it is reasonable to suppose that there was some condition of the system which induced the relapse, and the elimination of the product causing this condition, seemed to have a relation to the subsequent recovery from the relapse; the recovery beginning on the 23rd or 24th day of the 2nd case of the menses.

Case VI.

O. C., aged 21, unmarried. Domestic servant, was seized with Chills & shiverings on Jan. 19th, but was apparently well again on Jan. 20th. On Jan. 21st she began to feel pain in her knee. On washing her on Jan. 22nd she was suffering from Rheumatic Fever, the most of her joints being implicated — she progressed favourably under treatment the same as for case 4, and was convalescent on Feb. 8th.

Note. This case lasted 21 days. — The regular period of her menstruation was Jan. 21st, but she did not menstruate at that time, nor for some months after the disease had left her.
Case VII

During the night of Jan. 22, I was called to see Mrs. P., a widow aged 53. whom I found suffering intense pain in what first appeared to be the liver. But on watching her more particularly, I noticed that this pain appeared to be of the nature of a stitch, but much more intense. It was also only during the act of inspiration which she felt the pain. She was unable to turn herself, or to sigh, or laugh. She stated that she had felt one cold shiver just before retiring to bed, and that she had got her feel well the day previous. I suspected from her account and symptoms that she was suffering from a severe attack of Acute Rheumatism of the Diaphragm. But as I had never seen a case of the same nature before, and as I was consequently in some doubt as to her illness, I prescribed an opiate, and again visited her (in company with the medical gentleman with whom I was associated) in about 4 hours later. She was still suffering from the very same kind of symptoms, except that the pain was now at a similar situation in the left side of the right side as before. We now positively, from consideration of her
symptoms and from negative ones also, came to the conclusion that it was indeed an attack of Acute Rheumatism in the Diaphragm. Another opiate was prescribed. And also the Nitrate of Potash. She began to be relieved on the same afternoon, and was convalescent on the 25th. She was consigned ill for 4 days.

Notes on this case also after the following 

Case VIII

Mr. W. a widow aged 45. was seized on Jan. 23 with precisely the same symptoms as those with which Case 7 had been seized the day previously. She had also got her feet wet. The same treatment was pursued & she was in her usual health again Jan. 6. being also 4 days ill.

Notes. The great similarity between these two cases, cannot, I think, be looked upon as any thing more than a coincidence. In the first case it might have been mistaken for the pain arising from the passage of a gall stone, especially as she had several times been seen by me, whilst suffering from such attacks. In both these cases the patients were considerably
above the ages of the previous cases.

**Case IV**

J. K. aged 14. Male. was seized on Feb 14 with febrile symptoms, which were followed on the 15th by an attack of Rheumatic fever (Articular). Colchicum in Mixture was prescribed, and Dover's powder and Calomel to be given at bedtime. He did well until the 22nd. When on visiting him, I observed, that, although he stated that he was better, he was breaking more hurriedly than usual. On percussion and Auscultation I found there were good grounds for suspecting that the pericardium and heart had become implicated. Calomel, Tepavin, were prescribed, and also the Jodoform Uperacina Barks were given, along with good diet. The cardiac complication rendered the patient very weak for about 2 months, or up till April 30, on which day I last saw him, and he stated that he was able to walk two miles with tolerable comfort.

**Note.** This was the first case of a male having been attacked. In this case I cannot tell why I write 20, but yet feel that
I observed, I cannot divest myself of the idea, but what the Colechicum had something to do in causing the Cardiac complications, I would merely put it as a question. Supposing that Acute Rheumatism is more likely to attack those joints which are most freely used; may the heart not be looked upon as a sort of joint in some cases, especially when Colechicum is developing its effects and by weakened force though increased activity, may it (the heart) not be rendered sequent to these more liable to become complicated in this rheumatic fever—The complication in this case was first observed on the 8th day of the fever, and as in Case IV its approach was very insidious, and not marked by any symptom noticeble by the patient. This is evident a strong reason why the heart should be examined daily in such cases.

Case X

On March 3d I visited H. M. Male aged 23. Married. Who I learned had been suffering from Acute Articular Rheumatism for a fortnight. The perforation was profuse
and sour-smelling. He had been treated with acetate of potash without colchicum. Dr. W. prescribed colchicum. The patient was convalescent by the 7th March. The disease lasted about 10 days. —

Note: The perspiration was not over the whole body, but only on and around the parts which were affected, and on the face — I was unable to ascertain the precise day of the disease on which I visited, but it was probably on or about the fourteenth, which would of course have to be taken into consideration in deciding as to what effect the colchicum might have had in curbing the disease. I am inclined to ascribe the improvement in a great measure to it in this case; — the patient himself, if any weight can be rested on his statement, that he was perfectly aware of its beneficial effect. This case was purely articular, and uncomplicated. — Another remark about the perspiration is, that I did not notice that it was sour-smelling in any of the female cases, or in that of the boy case IX. Yet it was
very strongly as in this case. He had been exposed to cold and wet climates to the attack.

Case XI

S. J. Female, age 19, unmarried — was attacked on March 2 with chills and shiverings, and on the following morning she suffered from pain in both knees. The usual restoratives were administered — regard to cold. Bicarbonate of Potash was given in small doses. On visiting her on March 3, she complained of pain in both hips, whereas the pain in the knees continued. The Bill of Potash was still continued — The frequently was seen. On March 5, she was unable to move anyone, and she complained of great pain in the lumbar region. She was more feverish and thinner than she had been. The bladder was distended and was obliged to pass the catheter in order to give her relief. On March 6, she was similarly of seceded, and again I had to pass the catheter. On March 7, her menopausal discharge began to flow, and the pain of a large quantity of urine immediately
and sour-smelling. He had been treated with Acetate of Potash without Colchicum.
I now prescribed Colchicum. The patient was convalescent by the 7th March. The
disease lasted about 22 days.

Note: The perspiration was not over the whole body, but only on and around
the joints which were affected, and on the face. I was unable to ascertain
the precise day of the disease on which I visited, but it was probably on or about
the fourteenth, which would of course have to be taken into consideration in
deciding as to what effect the Colchicum might have had in outwardly the disease.
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very strongly as in this case. He had been exposed to cold & wet precautions to the attack.

Case XI.

S. J. Female, age 19, unmarried. Was attacked on March 25th with chills and shivers, and on the following morning, she suffered from pain in both knees. The usual cautions were administered in regard to cold. Bicarbonate of Potash was given in 300 doses. On visiting her on March 31st, she complained of pain in both hips, whilst the pain in the knees continued. The PDE of Potash was still continued. The preparation was slowly. On March 5th, she was unable to bear any weight, and she complained of great pain in the lumbar region. She was more feverish and thirst than she had been. The bladder was distended, and I was obliged to pass the catheter in order to give her relief.

On March 6th, she was similarly affected, and again I had to pass the catheter. On March 7th, her catamenial discharge began to flow, and the pain & large quantity of urine immediately
before it began to flow during the night she had been unable to stop any. The uterine was stopped, and she was now treated on the expectant mode. She began to improve and continued to do so very slowly. On March 30th she was able to do some slight household duties.

On April 1st she had a slight relapse which caused her to keep her bed. On April 2nd I was again called to visit and found that the pains had returned in knees and ankles. Colchicum was now prescribed, along with Dover's powder and Calomel at bedtime. On April 3rd she was again seized with exactly the same symptoms as she had on March 5th. The pain in the back and inability to make water so that I was again obliged to put the catheter on this and the following day as she was on it suffering the same symptoms on April 5th she again menstruated, and her feverish and other symptoms again began to leave her. She was
Convallescent on April 12. The disease lasted about 6 weeks.

Note. The point of interest about this case was the evident of the febrile symptoms, an rheumatic pains before the two regular periods of menstruation which occurred during the course of the disease; but especially to be noted as conjoined with this was the paralysis of the bladder which was temporary, setting off as soon as the menstrual discharge began to flow; on each of these occasions several opinions might be offered as a cause of this increase in the symptoms, and of the paralysis. We might suppose the temporary congestion of the neighbouring organs acting through the sympathetic system and thus producing it. Or again we could suppose the cause to have originated in the brain itself, this cause being due to rheumatism having pined upon some part. However, I will not speculate upon it, but merely state the influence which the nervous system evidently had upon the disease; this influence having been probably called into action by the presence of...
The Rheumatic Fever, and the condition of the patient owing to the approaching menstural flow.

Case XII

P. S. Female aged 20, unmarried, was attacked with chills and shivering on March 14. These were followed by an attack of particular meningitis (Acute). Colchicum with the acetate of Potash was prescribed. The disease was uncomplicated and ran an ordinary course, the patient being convalescent on April 5th. The attack of disease lasted 23 days.

Note. There was nothing to note in particular about this case, except that I could not detect that the perspiration was acid one in its odor. Yet the perspiration (even before the administration of the potash) gave a strongly acid reaction with test paper.

Case XIII

E. S. Female aged 20, was attacked on March 18th. The fever ran an ordinary course, terminating in convalescence on April 16th. The case lasted 30 days.

Note. Treatment & remarks same as case XII.
These then are the 13 cases of Acute Rheumatism or Rheumatic Fever, which occurred in a district which had been unvisited by it for a number of years. They were also the only cases which did occur at that period, except three of which I have no record but I was informed by the Medical Attendant on the case that these three all run a favourable course. — I would now offer a few remarks on the 13 cases the outline of whose history is briefly and imperfectly given in the foregoing pages. — It will be observed that the majority of the cases occurred in young unmarried females between the ages of sixteen and twenty-five years, and that of all the cases only two were in males. In other words about 85 per cent were females, and 15 per cent were males. This is contrary to the general rule, as in most cases, the male sex is more subject to the disease, probably owing to more frequent exposure to exciting causes of Rheumatic Fever. — This is
what experience has shown to be the case in many instances, yet it does not neces-
arily prove that females when exposed to the exciting causes of rheumatic fever, when a predisposition to it exists, are less liable to be affected by it, than males are. Further on the contrary I think that the pre-
young cases go a long way in proving that under certain conditions of this
system, they are more likely to be at
tracted by it than men are. A condition of system, evidently having in some
instances at least, an influence as a predisposing cause, or elimi-
ating agent, is the period of menstruation. This, I think, has been
noticed as influencing the disease in Cases V & XI. The fact of so
many of the females being unmarried, is partly to be accounted for by the reason that the disease oc-
curred in persons at an age, when the proportion of the married is much less than that of the
unmarried, and partly also, from
the fact, that married women are
more frequently engaged in house
hold duties, and consequently
left exposed to the exciting causes
of the disease, than the unmarried
in most instances among some orders
are; and, perhaps, on the whole, mar
ried females exhibit more care
and attention to their health others,
than do, their less fortunate sisters.
This would seem to be a reasonable
explanation at least, as the cases of
showed that married females when
exposed to the exciting causes are
equally as liable as unmarried.
As to the age the majority of cases
occurred between the ages of 14
and 25 years including both
sexes, and these as previously
stated except the man Case 10) were unmarried.
- The proportion of cases of
the 13 cases occurring between these
ages 14 & 25 was eleven, after or
above 25 only two cases. In other
words 85 per cent of all the cases or:

occurred before the age of 25, and 15 per

cent after that age, as is shown in this

Table.

<table>
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<td>45</td>
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<td>1</td>
<td>52</td>
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That in almost all the cases (at the
least 85 per cent) the existing cause
was the exposure to cold. In two out of
the 13 cases the cause was unknown, altho' in these it was also
probably exposure of similar nature.

As regards the application of the cold
in wet, it was in most of the cases of a
somewhat peculiar nature. The wet.
was such as is continuously applied from walking in snow. The flannel
is not suddenly applied, but continues
to soak through the leather of the
shoes, and its coldness when thus applied
is very intense. — Indeed the application
of such exciting causes seemed to be
very certain in the results which
induced —

That taking the whole of the cases into
consideration, complications of internal
viscera occurred in the proportioning
1 in 4½ or 2.3 per cent. And taking
the complicated cases by themselves
the cardiac complications were in
the proportion of 2 to 1 as regards
the complications of other viscera.
As far as these cases go, the complica-
tions are much more liable to suffer
from visceral complications than
females. But on the other hand I
would notice, that the acidity of
the odour from the perspiration which
most authors speak of, was by no means
so well marked in any of the female
cases as in that of the male (adult) case.

IV. The average duration of a pure, uncomplicated case in the above series was 21⅔ days, and that in any cases an expectant (or nearly so) moder treatment would perhaps be as benefinal as active remedies in the form of medicines internally. On the other hand the uncomplicated cases might make considerable progress without attracting any grave suspicions of even the patients' self, as is instance in the case of death which occurred in the girl aged 16. — In regards deaths there was only 1 death in the 13 cases — the duration of the individual uncomplicated case is as follows —

1. Lasted 11 days
2. .. 14 ..
2. .. 21 ..
2. .. 22 ..
2. .. 23 ..
1. .. 28 ..
1. .. 30 ..

8 average 21⅔ days —
This then is the thesis which I would submit, being at the same time well aware that it liable to to censure. Yet, as stated in the preface the cases are brought forward not as scientific investigation in the origin of Rheumatic Fever, whether from a "Rheum" or otherwise. It was not intended to enter into the theory of the special pathomorphology whether Lactic Acid or not. But they are simply such notes as an ordinary practitioner would be expected to make on the cases as occur. "Cutting with this apology for the imperfections, I now close the remarks on the 13 cases of Rheumatic Fever."

P.M.