1892.
NEW ZEALAND.

CHOLERA AND MODE OF TREATING IT

(NOTES WITH REFERENCE TO).

Laid on the Table by the Hon. Mr. Seddon, with the Leave of the House.

WHEN CHOLERA IS EPIDEMIC

Avoid eating any green vegetables or much fruit. Never use strong purgatives—those which are called saline, such as Epsom salts. Castor oil should not under any circumstances be administered.

Cholera is curable in its early stages, but this stage is not frequently noticed owing to ignorance of its symptoms.

These are:—

Pulse quite distinct:

1. Disinclination for food.
2. Sense of depression and fatigue.
3. Feeling of relaxation, sometimes pains and cramps in the bowels.
4. One loose motion (perhaps only one) followed by others, each more loose than the preceding.
5. Nausea at stomach.
6. Vomiting, first of contents of stomach, afterwards of a colourless watery fluid.

Any one or two of these symptoms, when cholera is committing its ravages in a district or city, should be looked upon with suspicion, and the remedy taken. Symptoms 2, 3, and 5 are difficult to perceive in children; in them, a contracted appearance of the features, and darkness under the eyes, in addition to the purging and the vomiting, ought to give suspicion of cholera.

REMEDIES.

External.—As early as possible a very large mustard poultice, having mixed with it a heaped teaspoonful of powdered red pepper, to be placed across the small of the back so as to be over each kidney, and to be kept on at least one hour for an adult male.

Internal.—(1.) For an adult accustomed to take several glasses of wine or beer daily.

Rum or brandy	2 wineglassfuls.
Red pepper	4 grains (2 pinches).
Laudanum	40 drops.

(2.) For an adult unaccustomed to any stimulant (male or female).

Rum or brandy	1 wineglassful.
Red pepper	2 grains.
Laudanum	20 drops.

(3.) At fourteen years of age.

Rum or brandy	½ wineglassful.
Red pepper	1 grain.
Laudanum	12 drops.

(4.) At six to eight years.

Rum or brandy	1 dessertspoonful.
Red pepper	½ grain.
Laudanum	6 drops.

(5.) At two to five years.

Brandy	1 teaspoonful.
Peppermint-oil	1 or 2 drops.
Laudanum	3 drops.

The above doses to be mixed with a wineglassful to a tumblerful of as hot water as can be swallowed, and the whole to be taken at once. It is essential that the patient keep quiet in bed, and in a darkened room.

In schools and other places where many are living together it will be advisable to have a bottle or bottles ready of cholera-mixture, to be made thus:—

Brandy or strong rum	...	1 bottle
Laudanum	...	320 drops
Red-pepper powder	...	32 grains

mix.

Dose.

For an adult (if accustomed to stimulants)	2 wineglassfuls.
For an adult	1 wineglassful.
Fourteen years	½ wineglassful.
Six to eight years	1 dessertspoonful.
Two to five years	1 teaspoonful.

Also, under such circumstances, instead of mustard and red pepper, use two parts of coarse atta and one part of red pepper made into a poultice. If the first dose is rejected, give a second.

When there is no pulse perceptible, or it is very weak, the above mixture must on no account be given. The treatment should be,—

1. Mustard and red pepper poultice.
2. Saturated solution of camphor in spirit of wine.
   Dose—One to three drops in water every quarter of an hour.
3. Hot water enemas as hot as can be borne, having dissolved in them half an ounce of common salt, and thirty grains of carbonate of soda, to be injected every half-hour and retained as long as possible. These are useful in restoring warmth and the pulse in cases of extreme collapse.
4. As soon as the pulse begins to be felt, and the urine to be secreted, give, at short intervals, small quantities of light and easily-digested food.

N.B.—In every case send at once for a doctor.

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PETTENKOFER ON CHOLERA.

The following remarks by the German hygienist Pettenkofer are interesting for their expression of views at variance with those of Professor Tyndall in his recent letters to the papers, and held by most authorities in this country:—

"The epidemic propagation of cholera is dependent not only upon the distribution of the infectious substance by intercourse and traffic, but equally (1) upon susceptibility of the locality into which the infection may happen to have been imported, and (2) upon individual susceptibility. A number of places, and even large cities, in spite of an importation of the infection have again and again withstood any extensive dissemination of the epidemic. Some places exhibit a chronic susceptibility for the disease, which is the case in India, the birthplace of cholera, where the mortality of those afflicted varies with the season, or, in other words, cholera assumes a deadly or mild form according as the season is favourable or not for its development.

"It is a mistake to suppose that the only source of the infection is the cholera patients themselves, or what they have touched or worn. Doctors and nurses in cholera hospitals do not as a rule catch the disease, whereas, on the other hand, an outbreak of cholera has often been observed in places where it was proved that no contagion had taken place: this was the case in Malta in 1865. This little island, from the moment the outbreak of cholera was telegraphed from Alexandria, was placed under a most vigilant quarantine, which went so far that any person from Malta who was obliged to communicate personally with the ships in quarantine (lying off an island isolated from Malta itself) was not allowed to return to Malta. In spite of this extreme vigilance cholera broke out in Malta with a severity neither greater nor less than in other years. Cleanliness of body, houses, and streets is the best preventive of cholera. A chronic disposition for cholera depends a good deal upon the drinking-water. Differences in age, temperament, bodily condition, &c., have a great influence on individual susceptibility for most diseases and epidemics, and more especially cholera. The chief thing during a cholera epidemic is to avoid any diet likely to cause diarrhœa, and, should an attack of simple diarrhœa occur, not to neglect it, but at once to call in medical advice.

"There is no great danger in nursing a cholera patient when removed from the infectious place, since not from the patient but in the place lies the danger of an infection."—*Neue Rheinische Kreuz Zeitung.*

NOTES ON THE TREATMENT OF CHOLERA IN LONDON, 1853 AND 1854, BY F. A. MONCKTON, AT THAT TIME ATTENDING THE LONDON HOSPITAL, AND CHOLERA-VISITING.

First diarrhœa, and then a general relaxation, causing the serum of the blood to pour from the bowels, cold of the extremities first, and then with collapse of the whole body.

Acidulated drinks (chiefly with sulphuric acid) with stimulants and laudanum proved most useful. Injecting the veins with brandy and water, or ammonia, only temporarily revived the patients, but saved no lives.

I believe if Dr. Richardson's artificial serum had been known and used it would have proved effective. I append the formula for making it.

The effect of the laudanum seemed twofold: first, by constipating and checking the peristaltic action of the bowels, and, secondly, by allaying the nervous terror, as it was noticeable that those who got scared died.

Mr. Butler, of the Madras Medical Service, found that the use of soda bibor. raised the percentage of recoveries from 50 to 75 per cent., and subsequently on using boracic acid in ten-grain doses every two hours, combined with soda bibor. or bicarb., every case recovered.

Richardson's blood-fluid for injection into the veins after collapse from cholera:—

White of egg (by weight)	4 oz.
Table salt	1 drachm.
Carb. soda	1 scruple.
Clarified animal fat	1 oz.
Pure glycerine	2 oz.
Water	1 pint.

In preparing, dissolve the salt and soda in water, and, having whipped the albumen, add that also; place mixture on water-bath, and raise the temperature to 135° F.; keep it stirred, and digest at that heat for one hour. This constitutes artificial serum, the albumen of which hydrates freely. Remove from fire. Now add the fat and glycerine together by heat, and then add it to previous mixture at about 120° F.; stir and cool to 80° F., and strain off any insoluble fat. The fluid thus obtained is pinkish colour, alkaline reaction, saline, sweetish taste, and specific gravity 1,038. It picks up semi-fluid blood, and diffuses it readily. It should be transfused at 106° F. and up to Oii (two pints) in quantity. (See *Medical Times*, August, 1866.)

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