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# OBSERVATIONS AND SUGGESTIONS

IN REGARD TO

# CHOLERA ASPHYXIA,

*Addressed to the Central Board of Health, London.*

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BY CHARLES BELL, M.D. F.R.C.P.E.

ONE OF THE PHYSICIANS TO THE CHOLERA HOSPITAL, DUMFRIES, IN 1832.

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*(From the London Medical Gazette.)*

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HAVING had extensive opportunities of observing the nature and progress of Cholera Asphyxia in 1832, during the whole of its continuance in Dumfries, where it appeared, I believe, in a more virulent form than in any other part of Europe, I hope I shall not be considered presumptuous in offering a few remarks on this most inscrutable disease, now that it has again come amongst us, when we are so little prepared for its reception. It is true that no human means could have prevented the approach of cholera; but there is every reason to believe that, by timely and judicious arrangements, the sufferings of the sick might have been greatly alleviated; and, by the blessing of Providence, much might have been done to limit the extent and mortality of the disease.

The experience I have had in the management of cholera induces me to speak with confidence on the subject. I had the joint charge, along with my friend, Dr. Grieve, of the Cholera Hospital in Dumfries, and, at the same time, had frequent opportunities of seeing the disease in private practice, arising from the melancholy

circumstance, that many of the better classes of society were affected; to which was added, the attendance in the districts when the medical officers appointed to that duty were unable to perform it, from over-fatigue or illness. I thus had a wide field for observation, of which I did my utmost to take advantage; and I trust the result of my experience may prove useful in allaying, on the present occasion, much needless alarm in regard to the contagion of cholera. I hoped that this subject had been set at rest; but I understand it is likely to be again revived in this town. Nothing can be more erroneous or injurious than giving encouragement to such an impression, and it is of the utmost importance that every means should be adopted to prevent its gaining ground among the people.

When cholera appeared in Dumfries, I resolved to lay aside all preconceived notions on the subject, and to form my opinion of the nature of the disease entirely on what came under my personal observation. With this view I visited every case within my reach, and endeavoured to ascertain its cause.

I spent from six to seven hours every day in the hospital, prescribing for the sick, and dissecting the dead. Having observed the dread that was generally entertained with regard to cholera patients being buried alive—a fear that was greatly increased by the regulation which rendered it necessary that the bodies should be buried within twelve hours after death,—I opposed such a gross infringement on the customs and prejudices of the people, and had the bodies kept four and five days. Frequently after that period I spent several hours inspecting them while I was surrounded by the dead. On one occasion I was so unfortunate as to wound myself severely when examining a body which had been kept five days; yet no bad effects resulted. Nor was the health of the inmates of the hospital in any way injured by the bodies being so long detained within its precincts, although the apartment in which the nurses spent much of their time when not on duty in the wards was on the same floor, and close to the dead-house.

The result of the practice in the hospital was certainly satisfactory, when we consider the virulent character of the disease in the town, and the very advanced stage at which the patients were generally brought to it; and it proved at the same time, in a striking manner, the non-contagious nature of cholera. By the cases which were reported to the Board of Health, it appeared that rather more than one-tenth of the inhabitants of the town were affected, and that above one-half of those died. From the hospital, more than one-third was dismissed cured. There were in the establishment four house-surgeons and fourteen nurses, and the only individual who was affected with cholera was a male nurse, who was taken from an infected locality, after several of his family had fallen victims to the disease; and he was employed principally in the districts, burying the dead.

I saw no case which could be traced as the result of contagion. The disease progressed along the ground floors; and there was no example of its spreading in upper stories of houses with common stairs, although there was no interruption to the intercourse between the apartments of the sick and the healthy in such situations. I may

here mention a case which illustrates the non-contagious nature of the disease very forcibly.

A highly respectable and wealthy farmer, sixty years of age, of broken constitution, who lived several miles from town, attended Dumfries market some time after cholera had apparently disappeared, and was induced to visit a brewery situated in the quarter where the disease lingered longest in its most virulent form. He spent some time tasting the different liquors made at the brewery, and finished off with a liberal allowance of whiskey. Within two days after this visit he was seized with a severe attack of cholera, which was followed by the consecutive fever. During the whole of this gentleman's illness he was attended by two sisters and a niece, all of whom were in a state of health most unfavourable for such a duty; and although I have observed these individuals partaking of the food which the patient left, yet none of them was affected with the disease; nor was it communicated to any of his friends, who visited him without reserve.

From these facts, I feel convinced that cholera was not communicated by contagion from one individual to another; but that it arose from some poison generated near the surface of the earth, just as we observe carbonic acid gas emitted in certain localities. The nature of this poison is wholly unknown; but it is very certain that it occurs with greater virulence in close, damp, and filthy situations; and that in such places its influence on the human system will be more difficult to overcome; and should the physician be so fortunate as to be the means of arresting the progress of the disease in an individual in such a locality, a relapse is very likely to occur, and will inevitably cut off the patient.

Under these circumstances, therefore, I deeply regret that it should have been resolved upon by the authorities to treat the poor in their own houses: such an attempt will prove an utter failure, and be a certain source of disappointment; while it will expose the friends and attendants of the sick to an attack of the disease, which they might otherwise avoid, thereby tending materially to encourage the impression that it is contagious. The result of this will be to deprive the sick, in many in-

stances, of the comfort of having their friends around them, which is always an accessory to their cure. It appears to me it would be as reasonable to expect to reanimate a person in a state of anæsthesia, while surrounded by a dense atmosphere of ether or chloroform, as to cure a patient in such circumstances; and it would not be more surprising to find his attendants thrown into the same state as himself.

I trust that no encouragement will be given to this "penny wise and pound foolish" system of economy; otherwise it will lead to great distress and ultimate expense. No time, therefore, ought to be lost in providing suitable comforts and accommodation, with proper attendants, for the poor during the continuance of the present epidemic. Let hospitals be appointed for the sick who live in low and damp situations, from which they ought to be

removed immediately on being affected with the disease; and at the same time let a sufficient supply of nurses be collected for the attendance of those who live in the upper stories where the sick may be treated with advantage to themselves, and safety to their attendants. The propriety of these suggestions being acted upon without delay, appears to me to be fully substantiated by the results in Leith, where, I understand, every case has proved fatal. I have only further to recommend, that no outrage be committed against the feelings of the people, by the hasty burial of the dead, which only produces unnecessary alarm.

By such arrangements as these we may hope, under the blessing of Providence, to relieve the miseries of the poor, if not to circumscribe the ravages of cholera.

Edinburgh, October 12, 1848.





