

# **CHRONIC COLITIS: ITS CAUSATION, DIAGNOSIS AND TREATMENT**

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Chronic colitis: its causation, diagnosis and treatment by George Herschell & Adolphe Abrahams

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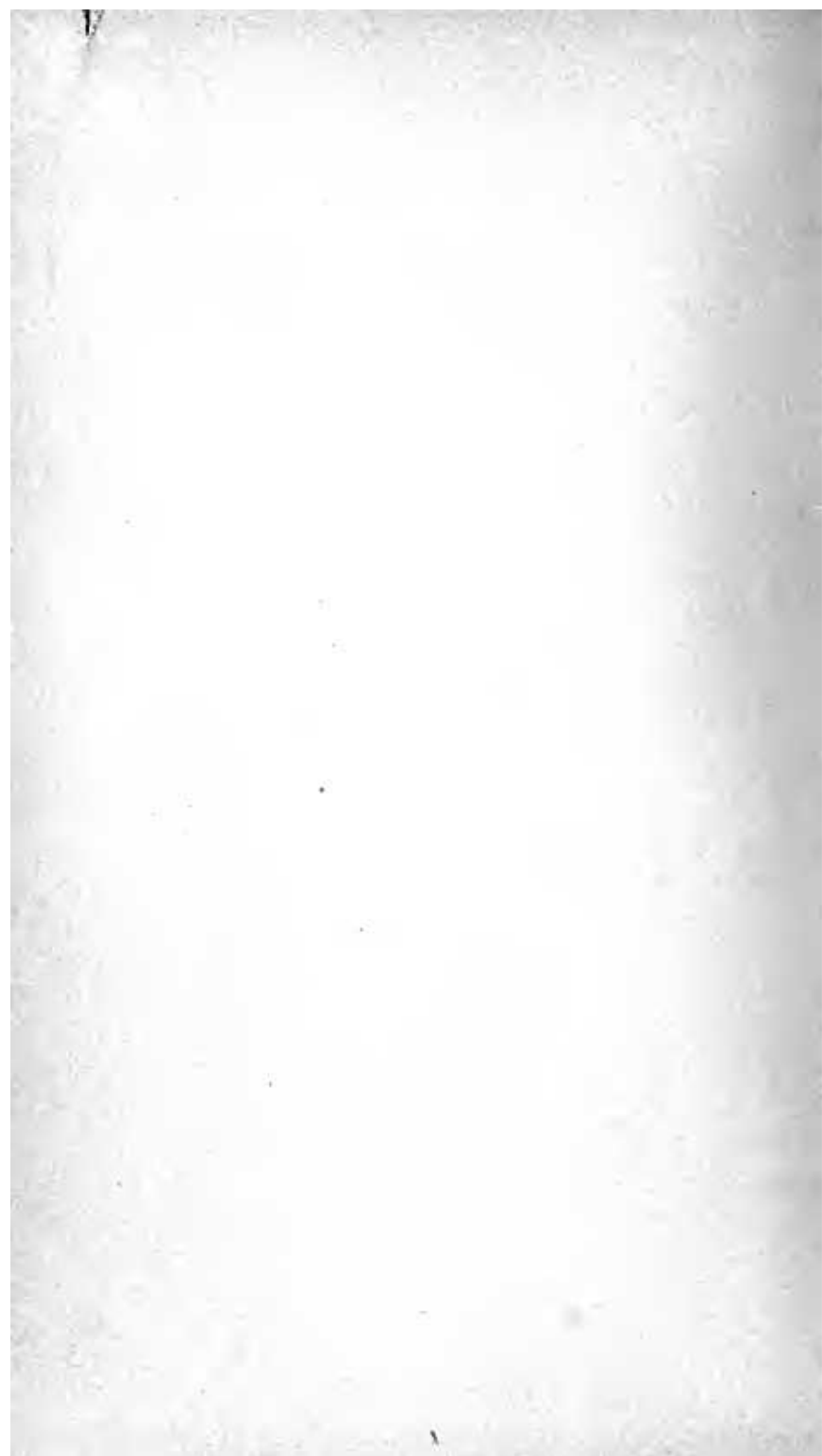
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**GEORGE HERSCHELL & ADOLPHE ABRAHAMS**

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AND TREATMENT**





# CHRONIC COLITIS 7

ITS CAUSATION, DIAGNOSIS  
AND TREATMENT

BY

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## PREFACE

Sept. 1914  
W. W. Cramer, D.C. 10-2-38

DURING the past fifteen or twenty years there has been a marked increase in the prevalence of chronic colitis. It is a condition which now shares with appendicitis the most important position among those diseases which, in the absence of discovery of any unavoidable universal alteration in human conditions, we regard ourselves as obliged to accept as the inevitable concomitants of advancing civilisation.

That appendicitis has largely increased during the period under consideration there is not the least possible doubt. In the case of chronic colitis, however, although an absolute increase is, if not equally certain, at least highly probable, the apparently greatly increased incidence is partly due to an improved capability of recognition. In no sense can chronic colitis be called a "new disease." The literature of the period abounds with admirable evidence of its prevalence among the aristocracy during the reign of Louis XIV. Voltaire



himself was evidently a sufferer, whilst Molière caricatures in his most amusing way the fashion for purgation and intestinal irrigation in his day when colitis was evidently *en vogue*.

A perusal of the almost innumerable monographs that have appeared on this subject leads to the conclusion that a great deal of confusion which has arisen was in reality avoidable. Different writers have held a diversity of opinions as to the conditions which may fairly be represented by the term colitis: in many cases it is evident that entirely different things have been called by the same name, in other cases the same thing has been called by different names. We would plead, therefore, in extenuation of any unduly dogmatic attitude in our views as to the pathology and classification of chronic colitis, that it is better to give a clear statement of what we really do recognise than to rest content with the system of stringing together a non-committal description out of euphuistic phrases. So far as we are aware, this is the first English manual that has appeared on this subject. We have endeavoured to embody the best that has issued from the Continental authorities who have for so long made this disease

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their special consideration. Whatever we have selected we have acknowledged, and our own contribution in criticism or recommendation of others' principles or of additional advice is the outcome of direct practical experience.

We make no excuse for the very elementary nature of much which appears, in fact we have purposely adopted this standpoint in order that the practitioner, who is of course *au fait* with the fundamental principles involved but who is denied the resources of a well-equipped laboratory, or who has not had an opportunity for special pathological training, may find a convenient work of reference in his diagnosis and treatment of one of the most chronic conditions it is possible for him to encounter.

36 HARLEY STREET,  
LONDON, 1914.

