

THE CHRONIC DISORDERS OF THE DIGESTIVE TUBE

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The Chronic Disorders of the Digestive Tube by W. W. Van Valzah

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W. W. VAN VALZAH

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DISORDERS OF THE
DIGESTIVE TUBE**

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OF THE
DIGESTIVE TUBE

BY

W. W. VAN VALZAH, A.M., M.D.

Formerly Demonstrator of Clinical Medicine,
Jefferson Medical College

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PREFACE.

THIS little book, with the exception of the chapter on habitual constipation, is made up of communications during the past year to the *Journal of the American Medical Association*, the *New York Medical Journal*, and the *Medical Record*. I have been persuaded to combine and reprint these articles under one cover, in order to present to the profession, in an easily accessible form, a short and practical study of the chronic disorders of the alimentary tract. Originally intended for serial publication, no very great changes have been found necessary to adapt them to the present form.

Great pains have been taken to make each chapter complete in itself. This plan has both its advantages and disadvantages. It relieves the busy reader of the necessity of going through the book in order to find the author's treatment of a particular disorder; but it also renders it impossible to avoid repetition of certain basic and controlling principles. The importance (in the opinion of the writer) of these principles is a satisfactory explanation and apology for their frequent statement.

Popular opinion places seasickness among the disorders of the stomach. This contention is shown to be erroneous, and an attempt is made to explain the nature of this neglected disease. A justification for its consideration under this title may be found in the fact that to secure healthy digestion and motility before and during the voyage is the best way to prevent the gastro-intestinal disturbances secondary to this peculiar sensory form of vertigo.

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THE
CHRONIC DISORDERS
OF THE
DIGESTIVE TUBE.

CHAPTER I.

GENERAL THERAPEUTIC CONSIDERATIONS.

THE results of the surgical treatment of disease are palpable and often brilliant. The wonderful achievements and rapid advances of modern surgery are manifest, and its results can be built up into statistics that will not yield to scepticism's destroying touch. It is not so in medicine. Our great triumphs are in the prevention and control as well as in the cure of disease, and the entire good that we do cannot be known. The surgeon believes in the knife because he sees its power, recognizes its limitations, brings other powerful means to its aid, and proceeds, in a way often clearly marked out in every detail, to the accomplishment of a definite purpose. The physician's