

**AMOEBIIC OR TROPICAL
DYSENTERY:
ITS COMPLICATIONS AND
TREATMENT**

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Amoebic Or Tropical Dysentery: Its Complications and Treatment by W. Carnegie Brown

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W. CARNEGIE BROWN

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BY

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PREFACE.

SINCE Baly chose dysentery as the subject for the Goulstonian Lectures, sixty years ago, there have been many revolutionary changes in our conceptions of disease. At that time dysentery was still prevalent in Great Britain, smouldering for the most part in the slums and hovels of the poorer classes, but occasionally blazing out into virulent epidemics which attacked all sections and grades of society. Thanks to hygienic reform and progress, domestic interest in the condition has considerably narrowed ; for, although infection still lurks in the western districts of Scotland and Ireland, and lingers with a strange persistence in many of our most efficient lunatic asylums, dysentery has been practically banished from the general life of England.

From an Imperial and Colonial point of view, however, the study of this disease still remains a subject of pre-eminent importance. The recent development of industrial and agricultural activities in our tropical possessions and the increased facilities for communication have resulted in an enormous demand for the services of Europeans, and within the last thirty years the white population has multiplied five-fold. Of the protean climatic diseases which they have still to face, dysentery is second in prevalence only to malaria, and from all classes and races it annually claims an appalling number of victims.

The discovery that dysentery itself is not a single disease may be regarded as one of the most remarkable advances in modern medical science ; for, although in medicine it is impossible to claim that any theory of disease has been immutably settled, or that the

final word has been spoken, our conception of amœbic dysentery as a distinct and specific affection is definite and assured, and the pathology of the disorder is now a *chose jugée*. The literature of the subject, already very extensive, is rapidly increasing, and almost every month important additions are being made to our knowledge. The very scope and volume of these contributions is indeed so great that it tends to diminish their practical value; for, published as they are in all languages and in all parts of the world, and scattered through an enormous number of scientific journals, most of them are accessible only to those who make a special study of the subject. It is believed, therefore, that a general survey of the information which has recently been acquired with regard to amœbic dysentery and other protozoan infections of the human intestine may not be devoid of interest and utility.

For an accurate appreciation of the pathology of amœbic dysentery, a knowledge of the cardinal facts in the life-history of the specific organisms and of their relations to other intestinal protozoa is essential; and it is endeavoured in these pages to set forth as clearly as possible the outstanding features in the natural history of the entamœbæ. But no attempt has been made to give a complete account of this important group, or to trespass on the domain of pure zoology, and only those events in the development and reproduction of the parasites which have a direct bearing on amœbic dysentery have been fully considered. It is not pretended that the biological section is more than a narrative of the prominent phenomena for which a special relation to a distinct morbid process is claimed; and, as far as possible, the intricacies of detailed zoological description, which occasionally tend to obscure medical issues, have been avoided.

The book is, indeed, chiefly intended for the practising physician, and its principal aim is to emphasize the necessity of early diagnosis

and to lay down precise and comprehensible directions for the treatment of the various clinical types of amœbic dysentery. An attempt has been made to take into account the varying conditions under which the disease may have to be treated, and special regard is paid to the remedial measures which are best suited to the requirements of warm climates. The object of the work will be more than achieved if the instructions for the general management of cases and for the selection and use of suitable remedies prove of practical value and assistance.

I am indebted to Mr. A. Engel Terzi for the care and artistic skill which he has devoted to the illustrations, and to Miss May Sinclair for many valuable suggestions and much helpful criticism during the revision of the proofs.

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