

**OBSERVATION IN
MEDICINE, OR THE
ART OF CASE-TAKING**

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Observation in Medicine, or The Art of Case-Taking by John Southey Warter

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JOHN SOUTHEY WARTER

**OBSERVATION IN
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THE ART
OF
CASE - TAKING.

OBSERVATION IN MEDICINE

OR

THE ART OF CASE-TAKING:

INCLUDING

A SPECIAL DESCRIPTION OF THE MOST COMMON THORACIC
DISEASES, AND ABNORMAL STATES OF THE
BLOOD AND URINE.

BY

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LONDON.

ILLUSTRATED BY SIXTEEN WOOD ENGRAVINGS.

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TO
HENRY JEAFFRESON, M.D.

PHYSICIAN TO ST. BARTHOLOMEW'S HOSPITAL,

THIS LITTLE WORK
IS
BY KIND PERMISSION

MOST RESPECTFULLY DEDICATED

BY
THE AUTHOR.



PREFACE.

THE OBJECT with which this book is written is sufficiently indicated by its title. It is intended to supply to the working student such information as he is constantly requiring in his daily rounds, and to give him some hints as to the most common things he ought to observe. Care has been taken, by watching students in the wards, to find out the most common errors fallen into, and the best methods of avoiding these have in most cases been noted; but of course, in spite of this, a certain amount of practice is required before any student can expect to learn how to observe cases properly.

The method of arrangement adopted in the ensuing pages is the following. At the beginning a formula has been given to show how cases may be taken, but this of course may be altered to suit a physician's or clerk's particular fancy. Annexed to this is also a list of the principal things to be observed when a patient is in a fit, as I have found many students puzzled as to what to observe under such circumstances. In the ten chapters following, some of the most common symptoms noticed under each system have been described, and hints of various methods of examination, &c. have

here and there been introduced. It has been thought better, as an aid to the clerk's memory, to head each chapter with *all* the symptoms to be observed under that division or system, instead of only mentioning those points about which some detail is given. The last four chapters are devoted to the most common diseases of the heart and lungs, and abnormal states of the blood and urine.

The method of 'systems' has been adopted for two very simple reasons: because it is an aid to the memory, and in accordance with common sense. In the digestive system, for instance, it is very natural, seeing a dirty tongue, to enquire of the state of the appetite, &c., and then proceeding downwards to investigate the state of the whole alimentary canal. Nothing can be more vague than many notes I have seen taken,—the clerk rushes wildly from sleep to the state of the bowels; and notes the character of the pulse, in connection with the patient's history. Should a system be investigated and nothing be found wrong, the word *normal* may be written after it; or should anything wrong be detected, this may be mentioned, and then the words *otherwise normal* be added to complete the system. Systems may be taken in any order, but it is most convenient to begin with the one in which the disease exists, and then to pass on to the others that are most implicated.

I would most earnestly entreat the student to remember that although certain symptoms—as expression of face or posture—are generally characteristic of certain diseases, that in some cases these symptoms may be absent, or even altogether replaced by others. The

skill of a medical man consists in noting *every* symptom, and not any *one* in particular; and then having collected all the facts of the case, he is able to arrive at a conclusion from the comparison of the whole together.

The daily use of anatomy, physiology, and common sense, at the bedside, would, if it were properly used, teach a student almost half medicine: thus, for instance, in *mitral regurgitation*, or *obstruction at the mitral orifice*, a block occurs to the circulation entering freely the left side of the heart. Anatomy teaches us that the blood comes to this part from the lungs, and then common sense comes to our aid and tells us that the lungs will be congested. At this point the application of physiology teaches us that no congested organ performs its work properly, and so we expect, in consequence, cough, dyspnoea, &c. Following the same line of argument, we shall look for congestion of the vessels of the liver and stomach, and hence derangement of their functions, and sickness, &c. will occur. Passing farther downwards we find the whole portal circulation becoming retarded, and hence common sense will teach us to look for effusion into the abdominal cavity. Finally the whole systemic circulation becoming involved, œdema and anarsaca must necessarily occur.

The method of learning which I have found to be of most advantage, is to pay special attention in the wards during the day to one case,—as say a case of pneumonia,—and then at night to read up the subject carefully in some good book, as ‘*Watson’s Practice of Physic.*’ A clerk will find it advantageous to perform auscultation, &c. of a patient by himself, without any aid

from the physician. This note of investigation should be separately kept, and compared with the results of the examination made by the physician himself. Finally, on this point, when told to listen to a sound, and being asked afterwards, 'If it was heard?' say boldly out whether it was or not, even if your opinion differs from that of the physician. Be ready always to admit your own dulness of hearing or stupidity; but telling an untruth, to say nothing of its being wrong, will make you always lack confidence in your own powers of observation.

I have thought it advisable to introduce diagrams in the chapter on 'Diseases of the Heart,' as the subject of *murmurs* seems to puzzle many students. It must however be remembered that they are purely diagrammatic, and only devised for the purposes of teaching. Drawings of the microscopic appearance of some of the deposits in urine have also been introduced, and these have been mostly sketched from actual specimens of my own. One of the forms of 'phosphates'—the envelope one—is, I fancy, rare, for I have only met with it once in my researches. As I have been for the most part throughout these pages my own draughtsman, I must beg my reader's indulgence for any errors he may detect in the illustrations. They have been admirably engraved by Mr. Joyce, of Bolt Court. I cannot but fear that in compiling these remarks some important points have been here and there omitted; and I must hence beg my reader to overlook any such errors which he may detect in the following pages.

One great difficulty I have found in writing these pages, has been to avoid going too much into detail,