

**CLINICAL REPORT ON DROPSIES; WITH
OBSERVATIONS EXPLANATORY OF
THEIR PATHOLOGY AND
THERAPEUTICS: WITH AN APPENDIX ON
THE THEORY AND TREATMENT OF
ORGANIC DISEASE IN GENERAL**

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Clinical Report on Dropsies; With Observations Explanatory of Their Pathology and Therapeutics: With an Appendix on the Theory and Treatment of Organic Disease in General by Robert Venables

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ROBERT VENABLES

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J.H. 1825

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AN APPENDIX

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OF

ORGANIC DISEASE IN GENERAL.

By **ROBERT VENABLES,**

BACHELOR IN MEDICINE, AND LICENTIATE IN PHYSIC OF THE UNIVERSITY
OF OXFORD, PHYSICIAN TO THE HENLEY DISPENSARY, AND
CONSULTING PHYSICIAN TO THE POOR-HOUSE.

Ἄγαθὸν δὲ διδάσκαλος ἢ πρῆξεν.—Aretæus.

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TO
H. P. SPERLING, ESQ.
PRESIDENT;
THE REV. GEORGE SCOBELL, D. D.
RECTOR OF HENLEY;
THE VICE-PRESIDENTS AND SUBSCRIBERS
TO THE
HENLEY DISPENSARY:

AS AN ACKNOWLEDGMENT OF THE NUMEROUS ADVANTAGES
WHICH THEIR LIBERAL SUPPORT OF THIS
INSTITUTION HAS AFFORDED IN CULTIVATING A KNOWLEDGE
OF THE IMPORTANT DISEASES WHICH FORM THE
SPECIAL OBJECTS OF CONSIDERATION IN
THE FOLLOWING PAGES:

THIS WORK
IS MOST RESPECTFULLY INSCRIBED,
BY THEIR OBEDIENT
HUMBLE SERVANT,
THE AUTHOR.

ERRATA.

- Page 12, line 8, *dele* "gr."
— 24, — 11, *place the semicolon after* "size."
— 27, last line but one, *for* "thorax," *read* "thoracic."
— 31, note, *for* "obvious," *read* "cogent."
— 68, —, line 3, *for* "immersing," *read* "to immerse."
— 116, 5th line from bottom, *for* "rolling," *read* "by rolling."
— 234, note, line 2, *for* "lead," *read* "lard."

PREFACE.

WHEN I first determined to publish the result of my experience in the treatment of dropsies, I merely intended to have submitted the clinical history of some of the more important cases, with a view to establish the principles which I have adopted. The first impression of this work, and which was completed, ready for delivery to the publishers, on the day of the fire at Mr. Moyes's establishment, was totally destroyed by that unfortunate occurrence. By this delay, I have had an opportunity of adding several interesting cases, which have occurred since the time of first putting it to press.

I believe the view taken of the theory of dropsy is in some degree novel; and, as far as I am acquainted, no author has as yet professed to cure dropsies without the aid of diuretics. I certainly do not mean to advance this fact as a principle to be adopted in practice; but I think no one can read the

case of Sarah Burgess* attentively, without acknowledging that the history throws considerable light upon the nature of dropsies. The regarding fever as symptomatic, rather than the cause, of local affections, has tended much to obscure both their nature and theory, and to enervate our practice. The precepts too of Dr. Cullen, and the authority of his well-earned reputation, establishing a doctrine of fever, in which debility is looked upon as the principal source of the phenomena, have led the profession to adopt principles of treatment, which I do not hesitate to pronounce not only erroneous, but highly injurious. I have long regarded febrile and inflammatory action as the same in *essence*,† and differing merely in the extent of parts occupied by the morbid action. Let fever then, and the diseases in which febrile action prevails, or which are accompanied with these morbid manifestations, be treated as other inflammations of a similar description would be, and I am convinced, that diseases which are now regarded as obsti-

* Case XIV. † Vide Wilson Philip's Essay on Fever.

nate and incurable, will become infinitely more tractable, and in many instances yield to medical treatment. I have met with instances repeatedly among females, in whom the most distressing complaints, looked upon and treated as the results of constitutional debility, have readily yielded to a plan of treatment founded upon widely different principles. Constitutional debility I cannot regard as incompatible with an antiphlogistic regimen and plan of treatment for the cure of disease. Variola, measles, and typhus, are all considered as diseases of debility; and if a well-marked phlegmasia should supervene the termination of any of these diseases, or appear during the subsequent convalescence, no practitioner of any pretensions would hesitate to adopt the appropriate treatment for such complaints: all that is necessary is, to limit and adapt the vigour and extent of our means to the particular features and circumstances of the case. In regulating the treatment of inflammatory diseases, much may be done by careful and attentive reflection on the circumstances. Where there is a robust constitution, with strong arterial action,