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Treatment Committee of the Medical Council (1855). Report on the results of the different methods of treatment pursued in epidemic cholera. [Metropolitan Report and Report on the Provinces throughout England and Scotland]. Report to the General Board of Health. London: Her Majesty's Stationery Office.

Title pages

GENERAL BOARD OF HEALTH.

R E P O R T

ON THE

RESULTS OF THE DIFFERENT METHODS
OF TREATMENT

PURSUED IN

EPIDEMIC CHOLERA.

ADDRESSED TO

THE PRESIDENT OF THE GENERAL BOARD OF HEALTH

BY THE

TREATMENT COMMITTEE OF THE MEDICAL COUNCIL.

Presented to both Houses of Parliament by Command of Her Majesty.

BIBLIOTH.
COLL. REC.
MED. F.



LONDON :

PRINTED BY GEORGE E. EYRE AND WILLIAM SPOTTISWOODE,
PRINTERS TO THE QUEEN'S MOST EXCELLENT MAJESTY.
FOR HER MAJESTY'S STATIONERY OFFICE.

1855.

GENERAL BOARD OF HEALTH.

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RESULTS OF THE DIFFERENT METHODS OF TREATMENT

PURSUED IN

E P I D E M I C C H O L E R A

IN THE

PROVINCES THROUGHOUT ENGLAND AND SCOTLAND IN 1854:

BEING SUPPLEMENTAL TO

THE METROPOLITAN REPORT,

ADDRESSED TO THE

PRESIDENT OF THE GENERAL BOARD OF HEALTH

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In order to judge correctly of the value of this evidence, it is necessary to examine, as far as may be possible, the degree of severity of the cases brought beneath this test. The only means at our command (on the present occasion at least) to make this examination is to consider the relative proportion which the cases of collapse bear to the number of deaths of their own classes respectively. Examining, therefore, the collapse cases with the number of deaths, we find that calomel and opium stands highest in the scale of success, and the order of preference appears as follows :

Calomel and opium	-	59.2 per cent.
Calomel (larger doses)	-	60.9
Salines - - -	-	62.9
Chalk and opium	-	63.2
Calomel (small doses)	-	73.9
Castor oil - -	-	77.6
Sulphuric acid	-	78.9

According to this result the superior success of calomel and opium in severer cases appears as a distinct fact, elicited by the present inquiry. It is accompanied by other facts, viz., the relative advantages of those other modes of treatment which follow in their order of success. This order marks the use of calomel in small doses, of castor oil, and of sulphuric acid, as actually to be deprecated in severe cases.

Chalk and opium, as shown above, stands at the head of the list in the general per-centages both in hospitals and in private practice, but in the comparison of the collapse cases with the number of deaths the average declines to the 4th rank.

In the hospital returns, though the cases of collapse are much fewer, those of consecutive fever exceed the general average under this form of astringent. The deductions which might be made from these facts would be more valuable were a greater number of cases recorded. From the present limited amount the Committee are not disposed to generalize, but to reserve the evidence for comparison with future returns. It may, however, be briefly suggested that an obvious method of accounting for the discrepancy between the success of this form of astringent remedy, in the general and in the severer cases, would be to use the further testimony of the excess of consecutive fever in the severer cases; the inference would consequently remain that this treatment had checked the passage to the collapse stage, and increased the number of cases which survived to pass into that of fever.

It is apparent, from the returns, that the success of various modes of treatment in the hospitals follows the same ratio as those in private practice. As far as it goes, this is a valuable and interesting testimony that there is something real in the result arrived at.

In this supplementary Report a Table is furnished (page 7) giving a collective statement of the whole number of cases examined in the Metropolitan Report, combined with the provincial cases noticed in the supplement and the metropolitan cases in the Appendix. It is worthy of remark, that the general averages of the cases, including the provincial, maintain exactly the same position in the order of success as was displayed in the Metropolitan Returns, with the single and small exception of sulphuric acid, which now precedes castor oil, leaving the latter to occupy the lowest place.

The two results are seen together, thus:—

	Per-Centage of Deaths in Total Cases.	
	Metropolitan Per-Centage.	Metropolitan and Provincial combined Per-Centage.
Of Eliminants - - - -	71·7	76·0
Stimulants - - - -	54·0	52·3
Alteratives (calomel and opium) -	36·2	35·8
Astringents (chalk and opium) -	20·3	27·3

	Per-Centage of Deaths in Collapse Cases.	
	Metropolitan Per-Centage.	Metropolitan and Provincial combined Per-Centage.
Calomel and opium - - - -	59·2	57·2
Calomel (large doses) - - - -	60·9	59·2
Salines - - - -	62·9	67·0
Chalk and opium - - - -	63·2	67·0
Calomel (small doses) - - - -	73·9	75·7
Castor oil - - - -	77·6	77·6
Sulphuric acid - - - -	78·9	76·5

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