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## Art. I.—REPORT OF THE MEDICAL MISSIONARY SOCIETY'S HOSPITAL AT MACAO, CHINA, 1840-41.

By Wm. B. Diver, M.D., and B. Hobson, M.B., F.R.C.S.

[We have been favoured by Dr. Diver, who has recently returned to this country, and settled in Ohio, in the practice of his profession, with the following Report, which exhibits the advantages afforded to the Chinese by the benevolent exertions of the officers of the Medical Missionary Society of China, of which we have been for some years an honorary member. Whether any other important results are to flow from the establishment of the society remains yet to seen.]

In July, 1838, the Society's Hospital in Macao, as mentioned in a former Report, was first opened for the reception of patients. It was closed on the 5th of October following, in consequence of the absence of a medical officer to take charge of the establishment. On the 1st of July, 1839, it was re-opened: but, owing to the extraordinary events of that year, it was found necessary to suspend its operations on the 15th of the subsequent month. During that short space, 169 patients applied for medical aid. Although medicines were administered for some months afterwards to occasional applicants, the doors of the hospital were not again thrown open to receive either in or out-patients until August, 1840. From that time, the benefits of the institution have been conferred, without much interruption, on all who applied. The cases that have come under treatment have been various, but, as will be seen from the subjoined list, are chiefly surgical. A few of the more important ones were admitted into the wards, and if their circumstances required it, a small allowance of money was granted to buy rice and fuel. Many more would have gladly availed themselves of the convenience the wards afforded, had it been considered expedient at the time to receive them.

Of the diseases of the eye, which form such an essential and important class of the maladies of the Chinese, catarrhal and chronic ophthalmia, acute conjunctivitis, granular lids, entropium, pterygium and trichiasis, seem to be the most general. These ophthalmiæ, which the native physicians appear never to attempt to remedy, from neglect or irritation, usually excite a varicose state of the vessels of the conjunctiva, and a thickened vascular condition of the cornea and tarsi, terminating in opacity, leucoma and final loss of vision. In the catarrhal and acute ophthalmia, although the

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practice of employing local stimulants is not recommended by some high authorities in ophthalmic surgery, yet the use of nitrate of silver from 5 to 10 grs. to an ounce of distilled water, has been found very successful, joined with aperients, in their treatment. Strong solutions also of subacetate of lead, and sulphates of copper and zinc, have proved of the greatest service in the chronic ophthalmia with granulations and opacity.

Cutaneous diseases also form a principal part of the diseases of the Chinese. *Pustular Scabies* affects the lower orders to a great extent, and although often formidable in its appearance, is rapidly cured by the application of sulphur with some oxide of mercury. A similar kind of treatment has been very successful in curing *Psoriasis annulata.*

The ulcers, enumerated, include ulcerations succeeding wounds, injuries, and other causes, affecting different parts of the body, but chiefly the inferior extremities. They are very numerous among the working classes, arising probably, from the heavy weights borne, a poor vegetable diet, or want of cleanliness. From neglect and inappropriate applications, they often become large and indolent, but by means of ablution and dressings of warm water, escharotic solutions, or stimulating ointments, they speedily assume a healthy appearance. As it is difficult to obtain linen, a kind of paper, manufactured by the Chinese, which is soft, flexible, not easily rent, and peculiarly well adapted to spread ointments upon, has been in a great measure substituted, and in the place of oiled silk, oiled paper of a superior quality, also prepared by the natives, has been used with great advantage: this, brushed over with a thin coating of gum arabic, forms an efficient adhesive plaster for small wounds.

August 20th.—A native was brought into the Hospital with a gun shot wound of the thigh, received during the engagement which took place the day previous between H. B. M.'s troops and the Chinese stationed at the Barrier. The ball entered the anterior and upper portion of the thigh, passed close to the femoral artery in a transverse direction, and lodged in the adipose tissue under the skin on the opposite side. An incision was made over it, and the foreign body extracted without difficulty. The wound thus made was kept patulous for a few days with small strips of lint covered with simple cerate, to allow of the discharge of sloughs which came away and left the passage clean. Healthy granulations formed; the wound healed, and the patient was discharged.

September 19th.—A man entered the wards with a gun shot wound of the foot, received during the *battle of the Barrier.* The ball entered the sole, as the foot was raised in the act of running, and passed through, injuring in its course the small bones of the instep.

The patient, upon being informed of the true state of the case; that time and patience were requisite to allow an opportunity for cure, expressed himself dissatisfied, and soon after was removed by his friends.

In April, a patient aged 24, was admitted with a gun shot wound of the leg: he stated, that he received the shot from a Portuguese soldier, who suspected him unjustly to be a thief. It was followed by much hemorrhage and pain. A native friend, seeing the ball near the outlet of the wound, forthwith by a gash cut it out. About two days afterwards, he came to the Hospital. The ball had entered posteriorly by the side of the tendo achillis, two inches above the inferior extremity of the fibula, leaving a round, ragged wound, and, comminuting that bone, remained flattened and uneven at the surface of the wound in front. The incision which had been made to extract it, was three inches in length, parallel and close to the anterior tibial artery. Several loose portions of bone were removed, warm water dressings applied, the leg rolled, and its position fixed.

The wound quickly granulated and healed, with the exception of a sinus anteriorly, which was kept open by portions of loose bone still left deeply in the wound. These gradually becoming more superficial, were taken out

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with little injury to the soft parts: in a month, the patient was dismissed, the leg being straight and strong.

In September, a boy aged 16, from the country, was admitted as a patient, with three large sloughing ulcers of the leg. His health was impaired, and his pulse quick and feeble: therapeutic agents were administered, and the ulcers at first poulticed, and afterwards dressed with solutions of nitrate of silver and sulphate of copper, and the ordinary stimulating ointments,—but no benefit followed their use; on the contrary, the ulcers assumed a phagedenic character, and attended with irritative fever; other remedies also equally failed in checking the progress of the ulceration. Opium, dissolved in nitric acid slightly diluted was now applied, and happily produced an immediate change; the deep sloughs of muscle, nerves and vessels were thrown off, and all the sores presented a healthy granulating appearance. The warm water dressing, with the occasional use of sulphate of copper in solution, now speedily healed them.

The abscesses usually met with are large and chronic. Those of the scalp are frequent. Carbuncles, which are so common in hot climates, often come under treatment. Acute rheumatism has not yet been observed, but on the contrary, chronic rheumatic pains of the joints and muscles are daily seen, arising probably from the usual causes of cold and damp in winter.

Wounds and contusions have been numerous: some have been severe from attacks by pirates. The chief character has been lacerated and superficial.

In September, a man aged 40, from the island of Honan, near Canton, entered the Hospital, suffering excruciating pain from retention of urine. On examining the patient, it was discovered that he was frequently subject to these seizures, but they were of short duration compared with the present, which had existed three days. The bladder was readily recognised, distended with fluid, and rising up to the umbilicus; the pulse quick, and countenance anxious. The urine was immediately drawn off by a silver catheter: it was dark, of strong ammoniacal odour, and exceeded two quarts. The next day it was necessary to renew the operation, and, for many days afterwards, changing the size of the catheter. The prostate was five times its natural size, and the urine deposited large quantities of thick, white sediment, which, on examination, was found to be chiefly the magnesio-phosphates. Active purging, with the daily use of the catheter, in three weeks restored him to his usual health; he returned subsequently to offer thanks, and continued well. As future attacks might reasonably be expected, a silver catheter was made for him at his own expense, which he learned how to use. Other cases of retention from stricture, or enlarged prostate, have been similarly treated; with the warmest thanks for the relief imparted.

Two cases of dislocation, one of the humerus into the axilla, and the other of the first phalanx of the thumb upon the anterior surface of the metacarpal bone, may just be noticed. Both had been dislocated for more than six weeks when they applied for admission. The first was occasioned by a fall from the mast to the deck of a ship, and the other from a blow. In the one case, extension and counter-extension were steadily maintained for two hours and a half, by means of ropes and pullies; and the other, for a considerable length of time, and repeatedly, by a small cord fixed with a clove hitch; but neither of them could be reduced, though the system was nauseated by tartarised antimony.

A few interesting cases of thickening and deposition of serum in the cellular tissue of the leg, greatly distorting its size and shape, have been treated successfully, with stimulating liniments, equal and continued pressure by rollers, and saline aperients. But as soon as the pressure is removed, and the patient begins to walk, the disease has a tendency to return, and the integuments thicken and become hard, as in elephantiasis.

Some cases of enlarged spleen have come under observation, but too few at present to remark upon.



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From the many opportunities that have presented, in examining the effects of opium-smoking upon the Chinese, some allusion to it may be expected. It is the unbiassed conviction of observers, that its habitual use is injurious to the health and happiness of those addicted to the practice. Its baneful influence is insidious, but certain; and its moderate indulgence, if means permit, lays the foundation for its continued and increasing use.

The three cases of poisoning, mentioned in the list, were produced by swallowing large doses of the extract of opium, under the influence of excited feelings: two were dead before remedies could be employed; the other, a young female, recovered, having vomited the opium before it could be absorbed into the system.

Further remarks upon the nature and character of the diseases of this and the neighbouring provinces will be reserved for a future report, when more ample opportunity has been afforded to form an important and extended analysis of them.

REGISTER OF DISEASES TREATED IN M. M. S. HOSPITAL AT MACAO, CHINA, FROM AUGUST, 1840, TO JULY, 1841.

*Diseases of the Eye.*

| | | | |
|---|---|---|---|
| Catarrhal ophthalmia | 35 | Epiphora | 6 |
| Chronic ophthalmia | 21 | Hypopium | 3 |
| Conjunctivitis, acute and chronic | 38 | Glaucoma | 1 |
| Cataract | 22 | Iritis | 6 |
| Entropium | 16 | Nyctalopia | 4 |
| Ectropium | 4 | Synechia posterior | 1 |
| Granular lids | 43 | Closure of the pupil | 2 |
| Opacity of cornea | 35 | Loss of vision | 11 |
| Ulcers of cornea | 8 | Diseased eye-lids | 11 |
| Staphyloma | 5 | Conical cornea | 1 |
| Pterygium | 28 | Ptosis | 1 |
| Leucoma | 10 | Tumor of upper lid | 1 |
| Trichiasis | 15 | Enlarged caruncula | 1 |
| Amaurosis | 12 | Abscesses of lachrymal sac | 1 |

*Diseases of the Skin.*

| | | | |
|---|---|---|---|
| Scabies | 97 | Herpes | 7 |
| Psoriasis | 47 | Bullæ | 1 |
| Lepra | 7 | Ichthyosis | 1 |
| Impetigo | 9 | Erysipelas | 1 |
| Porrigo | 9 | | |

*Diseases of the Chest.*

| | | | |
|---|---|---|---|
| Acute bronchitis | 2 | Catarrh | 33 |
| Chronic bronchitis | 17 | Asthma | 2 |
| Hæmoptysis | 8 | Chronic laryngitis | 1 |

*Diseases of the Abdomen.*

| | | | |
|---|---|---|---|
| Dyspepsia | 30 | Inguinal hernia, congenital | 1 |
| Ascites | 4 | Umbilical hernia, congenital | 1 |
| Diarrhœa | 16 | Hæmorrhoids | 7 |
| Enlarged spleen | 5 | Constipation | 5 |
| Inguinal hernia | 4 | Gastrodynia | 2 |

*Diseases of the Urinary Organs.*

| | | | |
|---|---|---|---|
| Retention of urine from enlarged prostate or stricture | 10 | Ulcers of prepuce and glans penis | 6 |
| Hydrocele | 8 | Bubo | 8 |
| Diseased testis | 5 | Dysuria | 3 |
| Phymosis (congenital) | 2 | Gonorrhœa | 9 |

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*Diseases of the Uterine System.*

| | | | |
|---|---|---|---|
| Amenorrhœa | 3 | Prolapsus uteri | 1 |
| Suppressio mensium | 2 | Inflammation of pudenda | 4 |

*General Diseases.*

| | | | |
|---|---|---|---|
| Ulcers | 220 | Thickening of cellular tissue of the leg | 11 |
| Abscesses | 70 | Cachexia | 9 |
| Carbuncles | 19 | Diseased cervical glands | 17 |
| Rheumatism | 96 | Varicose veins | 11 |
| Lumbago | 6 | Enlarged thyroid gland | 6 |
| Intermittent and continued fever | 13 | Inflammation of tendo-Achillis | 7 |
| Onychia | 14 | Encysted tumors of the face | 2 |
| Whitloe | 7 | Ganglia on tendons | 4 |
| Inflammation of joints | 18 | Poisoning by taking a large dose of the extract of opium | 3 |
| Morbus coxarius | 5 | Deformity of the bones of the foot, from light and irregular bandaging | 1 |
| Dislocations | 4 | Anomalous, or unnecessary to name | 64 |
| Fractures | 3 | Vaccinations not recorded. | |
| Necrosis and caries | 9 | | |
| Exfoliation of the outer table of the skull | 1 | | |
| Exfoliation of the lower jaw | 4 | | |
| Anasarca | 17 | | |

*General Summary.*

| | | | |
|---|---|---|---|
| Ophthalmic diseases | 342 | Contusions | 35 |
| Cutaneous diseases | 191 | General and local diseases, not classified | 725 |
| Pectoral diseases | 75 | | |
| Urinary diseases | 51 | | |
| Uterine diseases | 10 | Total | 1457 |
| Wounds | 41 | | |

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