ART. III.—INFLUENZA.

Fortunately the malady we agree to designate influenza is now disappearing from among us. As with the distant rumblings of a summer storm, we may still hear of lingering instances of the disease. But there is no doubt that “the epidemic constitution of the air,” or whatever may be the cause of the influenza, has either almost passed away, or has become inactive. Let us hope it will be long ere the unwelcome visitor returns. In this hope we are justified, for former epidemics occurred at long intervals—the four last in 1847, 1837, 1833, and 1803. The time has therefore arrived when we may, perhaps, venture to count the cost, and sum up the experience which we have gained.

There is no doubt that an immense amount of suffering and sickness has been caused by the influenza; although it has been cynically observed that persons in receipt of quarterly salaries were more liable to be attacked than others paid by the day! And it may be feared that in some constitutions the influenza has left the germs of future mischief, a result, however, which is not special to this malady. As evidenced by the Registrar General’s returns, the death-rate has considerably increased. We are not, however, sure that all the mortality which has been attributed to influenza should be so classified. Nevertheless, “the shadows hastening to the other world, under the grim convoy of Charon,” especially the shadows of elderly people, have much increased during this season of epidemic influenza. But as the great English lexicographer, near the close of his life said: “My diseases are an asthma and dropsy, and what is less curable, seventy-five.” We observed above that all the mortality which has been attributed to influenza should, perhaps, not be so classified. On the other hand, the influenza doubtless has great claims to be considered a protean malady. That is to say, it has evidenced itself in various phases, either per se, or by lighting up disease in organs predisposed thereto. Thus one phase of the malady has been simply malsaise. The individual without specific pain has been weak and languid. “The daily round, the common task,” was performed with difficulty, but the person, if endowed with ordinary energy, did not lie up. A second phase was that of the ordinary cold in the head, a condition so familiar to all in this cold-catching climate that it need not be described. But a more severe and dangerous condition was when the malady expended its force on the lungs or bronchial tubes, resulting in bronchitis or pneumonia. Then the patient implored the physician—too often, alas! in vain, especially if old—“Canst thou not cleanse the stuffed bosom of that perilous stuff which bears upon the heart?” Almost as
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painful a manifestation of the influenza was rheumatic affection of the limbs, which caused some physicians to conclude they had the “Dengue fever” of the East to contend with. Amongst Anglo-Indians, or in those who have resided long in tropical climates, the influenza often seemed to culminate in veritable ague, “now hot, now cold, now drenched in perspiration.” The liver also—stigmatized by Byron as “the lazaret of bile which very rarely executes its function”—did not escape congestion from influenza; while, as somebody called it, that “vile anatomical structure, the spleen” did not escape altogether unscathed. Another effect of the influenza, when in a mild form, of which we have heard, was a tendency to dreaming and nightmare in those hitherto not subject to such disturbances of repose. And the dreams, or *incubus*, were always of a disagreeable nature, recalling to mind the line, “In dreams they fearful precipices tread, or shipwrecked labour to some distant shore.”

Although we have learned so much more about the symptoms and effects of influenza, it is questionable if we are much better informed with regard to the causes and cure. Very far-fetched theories have been originated. It has been ascribed to the flooding, drying, and emanation from vast tracts of land flooded last year in Northern Asia. It has, of course, been ascribed to a microbe, for almost every ailment in these days has been so attributed. But although there is no doubt that microbes are found in association with various maladies, it is quite as likely that the maladies produce the microbes as the reverse. All that we can say is, that whatever causes influenza, it is air-borne, for we have the fact of its definite spread from east to west, irrespective of human intercommunication. Whether the cause is an entity or not we do not know. Hitherto the search has been as fruitless as looking for a four-leafed shamrock. Neither can this excite surprise when the minuteness of organic particles is recollected. Dr. T. E. Thorpe told us recently in his Graham Lecture that the smallest organic particle visible by the microscope contains nearly a million of organic molecules, and a molecule of organic matter has some fifty elementary atoms. And, again, in that learned work, “The Causation of Disease,” we are informed that atoms in the interior of an organic cell are as small in relation to the cell as the latter is to the sphere of the globe. But the world is full of mysteries. “Where does the flower hide her scent, and from what cup of hidden sweets does she suck it?” Chemistry may resolve the fabric of the world into elements, but where did these elementary bodies come from? People are often inclined to blame and decry the doctors because they have not discovered the mysteries of disease; but, as shown above, there are other mysteries to be discovered. The greatest mysteries are often the closest to us.
We may dimly understand why the stars twinkle by reflected light, but we do not yet understand the flight of a bird! There are, however, “truths of science waiting to be caught that float about the threshold of an age.” And there are plenty of workers, both in the medical world and in other circles. In former days epidemics were ignorantly attributed to the wrath of a Divine Providence. We now know that epidemics are more attributable to our own neglect than to anything else. When epidemics “rush as a storm o’er the astonished earth, and strew with sudden carcases the land,” those localities suffer most where sanitation is bad, and those individuals suffer most who neglect the laws and principles of hygiene. Fears have been expressed that the epidemic of influenza may be followed by one of cholera, for the sequence has been noticed. Whether we suffer from cholera or not, should it again visit Europe, will depend, under Providence, on the excellency or otherwise of our sanitary condition. And although this is much improved during the last quarter of a century, more yet remains to be accomplished.

Happily we need not say much with regard to the cure of influenza, seeing that there will probably soon be no cases requiring cure. One observation, however, we must make—and that is, that there is no such thing as the “diaetholicon,” or universal medicine. Cures for influenza have been advertised ad nauseam, comprising all kinds of things, from paregoric to antipyrin, and from simple orange-juice to “Kush Bitters,” whatever the latter may be. But, as a matter of fact, there is no specific for influenza. And equally, as a matter of fact, different patients require different remedies, in accordance with their peculiar constitutions and the phase the malady assumes. This, we imagine, has been fully recognised by the medical profession, or the mortality would probably have been still greater. In the Hospital for December 28th last we were told at the commencement of the epidemic that people as a rule are better fed, better clothed, better housed, and live under better sanitary conditions than they did even a few years back, and they are, therefore, better able to withstand the onslaughts of influenza, or any other epidemic disease. And it was added: “Avoiding chill is the great preventive means. Warmth, diaphoretics, expectorants, and quinine are the principal curative measures; and avoiding chill after an attack is the chief thing to attend to, in order to escape unpleasant ulterior consequences.”

William Moore.