CURE OF
INFLAMMATION OF THE LUNGS

BY
THE MANUAL TREATMENT

OF
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In compliance with the wishes of some of my friends, physicians as well as patients, to publish a description of the Manual Treatment as applied to Diseases of the Lungs, I have decided to print a treatise on my treatment of Inflammation of the Lungs which I prepared for publication two years ago, and which will be found on page 9. I take this opportunity for making these few preliminary remarks respecting the manual treatment generally.

The manual treatment is practised on a large scale in Sweden, and has during late years become introduced into Germany to a considerable extent and is excelling there considerable attention. It is, however, very little known in England. As it would lead me too far to enter here upon the details of the method, I think the best way to prove that it deserves attention is to set down the following short extract from a report in the medical paper *Hygeia* in Stockholm. The report is written by Dr. (med.) Wretlind, of Göteborg, who was in 1872 sent as a stipendiary by the Swedish Government on a round of visits to Denmark and Germany to the most prominent establishments of both manual treatment and electricity to see their progress in the treatment of lameness, and to give a report of his impressions thereon. It would occupy too much space to give his whole account of my establishment in Gotha. I only give his closing words. Besides that, I take the liberty of printing part of a letter of Dr. E. Glatter, Professor Emeritus at the Academy of Vienna, and Emeritus R. I. Director of the Statistical Bureau, who has been twice making a prolonged stay at Gotha in order to enter closely into the theory and practice of manual treatment.

I trust that the opinion of these two physicians of high standing will be some proof that the method of treatment I am now trying to make known in England is deserving of attention.

Henrik Kellgren.
Dr. (med.) Wretlind writes as follows:—

"From the above mentioned it is clearly to be seen with what courage Dr. Kellgren undertakes the treatment of even apparently desperate cases. For instance, I saw there, on my first visit, as well as on my second, a middle-aged man suffering from torticollis of many years' standing, caused by rheumatic lameness, which had vainly been treated in different ways—electricity, &c.

"On commencing the treatment the patient was quite unable to move his head in any direction. When I saw him first in October, having just begun the treatment, his head could be put right through passive movements; and he had but little excentric power of movement. Seeing him again in December, he could already hold his head for a few minutes through concentric movement.*

"One patient with muscular atrophy, and one with lameness through apoplexy, were then under treatment, and both very much bettered. Some of the cases treated at home were also remarkable, though they do not exactly belong to the class of diseases just now in question. One of them, a young woman, who had been under the treatment for about half a year, was excessively thin, and so hyperesthetic was her skin that she could only be touched with the utmost delicacy, and was only able with the greatest difficulty, and by being supported under both arms, to move a few steps; and yet she declared herself to be infinitely better than when she came under the treatment, so that she had every reason to hope to make still greater progress.†

* The patient under treatment was Geheime Justizrath I., Professor at the University of Jena. He had been unable to follow his calling during three years previous to his coming under my treatment. Four months after Dr. W's visit (in 1873) he was able to return to Jena, and has ever since delivered his lectures as Professor at that University.

† The lady is a Miss R. from Nürnberg. I will give a short extract from her sister's letter, describing her illness. "The patient, thirty years old, has been bedridden for three years, and ill for ten years. Her mother died of cancer. She has tried all manner of cures, as medicine, baths, electricity, &c., but without success. The disease began with inflammation of the throat, then deafness, palpitations of the heart, nervous pains, asthma, headache. Now her throat is perpetually inflamed, and affected with spasms; the deafness has so much increased, that she can only hear with the help of a hearing trumpet, but even this causes so much pain that she can only bear it for a few minutes. The digestion is quite disturbed, and goes from one extreme into the other, accompanied by spasms and vomiting. Some years ago an abscess formed itself inside the nose which, after opening, did not heal, but by-and-by almost consumed the partition wall of the nose and caused frequent bleedings. But the illness has developed itself most in the heart and head. Since last year she has had attacks of heart spasms at least every week, which frequently lasted for forty-eight hours. The ribs over the heart are driven outward with the sensation of a sprain in the back. The perpetual headache has so much weakened the sight that the mere looking at a picture occasions severe pain in the eyes, back of the head, and back. Worse than all the pain is the sensation of a pressure on the brain; the body then is covered with ice-cold perspiration, and stiffness; the extremities lose all sensation; the face is drawn, and she becomes unconscious. Every spasm of this sort is like a death agony, and leaves the poor patient apparently dead. Do you believe, dear Sir, that you will be able to help the poor sufferer? If her condition would only be somewhat relieved, how thankful we should be. This case was, of its kind, the severest I ever knew, and had to be treated with the utmost care. After half a year's treatment I only succeeded so far as to enable her to stand on her feet. After that the progress was more rapid, and in two years' time she was in good health, and continues to get stronger. She is now able to go out even in severe weather without injury to her health. For the truth of this account of her illness I beg to refer to Dr. (med.) Grauvolg, now Oberstabsarzt, in Munich, formerly in Nürnberg, who was her medical adviser during many years. Even without giving her full name he will be sure to recognise this case by the description. He, as well as other physicians, had considered her disease to be incurable."
his arrival in Gotha there was complete enchylosis in all the joints of his lower extremities for many years through rheumatism, and his muscles were so atrophic that the skin was hanging in large folds from his legs. (K. said that he wholly despaired of curing the patient when he saw him, and would not have accepted him if he had not come a considerable distance in order to place himself under his treatment.) Now, however, all the joints were free; the musculature of course was still bad, but yet the patient could, in sitting, make most of the movements of the limbs in an active way, and could support himself on one leg. K. hoped so far to restore the patient (who was from the poorer class) as to enable him to walk with crutches.*

"Another patient, reminding me of the one just described, and whom I heard much spoken about, may be mentioned, as it were, as an evidence of a courage which can only be accounted for by the success.† This was a person who already for a long time had had her head fixed in an abnormal position through laxation in the vortex of the throat. The patient came to K., who moved the vortex, and thus again put the head in the right position.

"What means does K. employ for his excellent and extraordinary cures? Nothing more, as he says himself, than Swedish manual treatment. But, as it is easy to comprehend, he uses these means with judiciousness, courage, tenacity, and talent. As far as I could understand he had nothing specially his own in his method, except in the treatment of nervous diseases. In such cases he applied a kind of pressure on the nerves, which were more methodical, short, and energetic, than I have seen applied at home. And K. laid much importance on exactly touching the strings of the nerves, which causes in normal condition a kind of vibrating or desisting sensation along the nerve ends, or a somewhat peculiar pain in the place touched. But, to attain this, the nerves must be exposed to a friction right across, or a rubbing on the length of them, rather more than a pressure as is generally the practice here. For the rest K.'s treatment is strictly methodical in his way of minutely individualising his treatment according to the illness and strength of the patient, so that nothing more or less is asked of the patient than he is really able to do. This is of vast importance in the manual treatment, especially in treating nervous diseases. But, in order to do it effectively, a great power of observation and a continued close observance of the patient is necessary.

"I have spoken of K.'s treatment of chronic diseases, I must also say a few words about acute ones. I took the greatest interest in inflammation of the lungs, as, conformable to his experience wherein, K. maintains that he is able to arrest the illness, in case it is soon enough put under his treatment, so that the patient is able to leave his bed in two or three days, and soon after to go out. The principle of the treatment is to quiet the activity of the heart, to facilitate the respiration, and to force the lungs entirely to fulfill their functions, whereby the circulation in the lungs is likewise kept in order. All movements applied in such cases are of course of a passive nature. It would be out of place to enter hereupon in greater detail before I myself have had the occasion to prove the method, which, till now, I have had little opportunity of doing. Meanwhile, in such a case, the patient requires to be treated in the first days three or four times a day, each time about half an hour.

"But it is not only inflammation of the lungs that K. treats, but other acute diseases as well. Relative to these acute
diseases he has recorded some particularly interesting cases, as—eight typhus, six inflammations of the lungs, seven gastric fevers, two rheumatic fevers, three colics, and two scarlatina fevers. In all these cases he has only lost one patient in nervous fever, who died of weakness; all the others recovered. In most of those cases the physicians had first been called, and many a time K. has been only called in after the physicians (sometimes after consultations of two or three of them) had declared death to be inevitable.

"It is difficult to describe K.'s method of treatment in these cases in a few words, the more so as K. declares himself not to have any decided symmetrical plan for the treatment of such serious cases, but that it is wholly shaped in the moment, as it has to be adapted to the disease and individuality of the patient. In one case the aim is to quiet the activity of the heart and lungs, to withdraw the blood from the head, to promote sleep, &c.; in the other, to enliven and stimulate, facilitate respiration, to awaken to consciousness, &c. To attain this latter aim he applies a peculiar pressure on the nerves along the spine, which I have myself proved, and the effect of which is very striking.

"It may seem that I have spoken with predilection and especial interest of what I have seen in Gotha. It will also surely seem to many who read these lines that I was too ready to believe and communicate what was in part only told me. To this I can only reply, that I should have spoken as briefly of Gotha and what I there experienced as of many other places, if I were not personally convinced that what I had heard there came from a perfectly trustworthy source. And, even if something of it were perhaps illusion or mistake, there is no doubt that there remains quite enough to merit the greatest attention. And, although I know that much of what is said may seem to go against what is generally accepted as the truth, yet I do not feel called upon to let that hinder me expressing my opinion. Perhaps some of my readers may think that I ought myself first to have proved these matters by way of experience before making them openly known. To this I will only reply that an account of a voyage is, on the whole, only meant to relate what one sees and experiences. But I will add that the things I learnt in Gotha are not quite unproved by myself.

"After coming home I have had occasion to treat several patients with chronic diseases; one with the typical form of tabes dorsalis (ataxia musculaire locomotrice), and another one with lameness in the lower extremities, caused by spinal complaint (syphilitic), besides some acute cases, after the method of K., and that with visibly good effect. I will shortly describe one of these acute cases.

"It was a middle-aged man with emphysema of long standing, besides bronchitis. He had had a fall downstairs in a strange place, and received a heavy blow on the head, in consequence of which he lay for three days in a comatose state, which caused a stoppage of his usual abundant expectoration (which generally, in the morning, went as far as vomition). His physician feared edema of the lungs, and prescribed an emulsion of camphor. This physician was obliged to go away, and left him to my treatment. At my arrival the patient was evidently lying in the last agony. The heavy rattling in his throat was heard at a long distance; he was unconscious; his face bluish red; the sounds of respiration everywhere had, but the pulse although quickened was full and good. I now applied manual treatment, which after half an hour had the effect that the rattling in the throat ceased, expectoration took place; he awakened to consciousness, fell into a quiet sleep, and the following day was so far recovered that I could allow him to drive to his home in one of the suburbs."

Göteborg, February 1873.
Extract from Dr. (med.) Glatter's Letter.

"It is my firm conviction that your views on the mechanically irritated nerves on the vasomotoric activity are called upon to excite a revolution in the theories of physiology, pathology, and therapeutics. It will no doubt require time before your ideas get fully appreciated, for there is much prepossession—which has all the significance of prejudice—to struggle against. But I trust you will still prevail more on the practical English people, and also in the medical circles, than on the speculative Germans, with whom the theory is often more than the practice, the book more than living nature. But God's blessing will not fail a man who feels so warmly for mankind as you, and the help of God is sure to give the issue, whatever the medical men may say against it. I have imparted several of your proceedings in the treatment of chronic diseases to physicians of high standing in this country, and I sincerely rejoice to find that due appreciation was paid also in those circles to the rationality of your method. It will and must conquer.

"With, &c., yours, &c.,
"Dr. GLATTER."

Vienna, Vienna,
26th August, 1874.

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of

INFLAMMATION OF THE LUNGS.

In reference to the article "The Value of Arterial Pressure," signed by Dr. Edward de Morgan, and published in your columns of the 20th of September, I take the liberty of sending you the following Treatise on the treatment of Inflammation of the Lungs, as the main principle set forth by Dr. de Morgan, namely to prevent a too great accumulation of the blood in the lungs, is the same that I maintain, although we differ widely in the application of it.

The success of my treatment has been so extraordinary, that I am glad to seize the opportunity of making known my experiences thereon, and I hope especially to be understood by the readers of your paper, as they have been already prepared through the treatise of Dr. de Morgan.

I call my method "The Manual Treatment," and will speak today of what merely concerns the treatment of inflammation of the lungs; but I hope to show one day with what success the manual treatment may be applied to other diseases as well.

What Dr. de Morgan says does not admit of the slightest doubt, viz: that by a pressure on the femoral and axilar vessels of the one side, the quantity of blood which is supplying the heart is retarded, and that consequently the lungs will be prevented from being filled too abundantly with blood. This
will greatly abate the violence of the fever and the oppression of the patient. But, on the other hand, it is to be questioned whether stopping thus the circulation of the blood may not otherwise injure the constitution.

The manual treatment, such as I am going to describe hereafter, prevents absolutely the lungs from being overfilled with blood; and where this is already the case it relieves the lungs in a very short time; and it does all this without the slightest injury to the patient's general health. I am now going to make a statement of the principle on which my treatment is founded.

The cause of nearly all cases of inflammation of the lungs is a *rheumatic affection* in the intercostal muscles—especially the lower ones—and the diaphragm, with their respective nerves. On examining the patient, one finds his chest very much fallen in, especially in the lower parts, where in consequence of the flexibility of the lower ribs, and their prolonged cartilages, a greater contraction has taken place. If one touches the patient with the fingers near the spine, between the ribs, one is sure to hit one or several spots where the mere touch causes him great pain, and seems to penetrate the whole chest. These are precisely the parts where the nerves are affected, and the penetrating pain is only a vivid sensation in the ends of the nerves which are spread throughout the chest and the diaphragm; but the pain is not in the lungs themselves. It is only the strength and the violence of the rheumatic affection which cause the different degrees of the illness, and the inflammation of the lungs (pneumonia) differs from pleuritis only in this way, that the latter does not so much affect the diaphragm.

In recollecting what has been said, it is easy to see why this rheumatic affection causes disorder in the lungs, and why it appears first in the lower parts of them. The blood coming from the vena cava inferior passes first the right atrium and ventriculum cordis, and then the arteria pulmonalis, and fills after that the capillary vessels of the lungs. The rheumatic contraction of the intercostal muscles, and especially the diaphragm, obliges the patient to breathe with only the upper part of his chest, because the diaphragm, made inactive, can no longer help to perform the movement of respiration. Consequently the diaphragm is not able to drive out the blood, which accumulates already from the beginning of the illness in the lower parts of the lungs. The more the rheumatic contraction is spreading the more also the chest will contract, and the heart being pressed between the thorax and the blood-swollen lungs has no longer sufficient room for expanding. Its contractions become shorter and more violent; the pulse quickens, often from 140 to 160 times in the minute. The heart makes most violent efforts to keep up the regular circulation, but gradually it loses all strength, whereby the quantity of blood is more and more reduced in the extremities, whilst the parts nearer the heart, the head, and the trunk, are more than abundantly filled with blood.

This, of course, causes violent fever, together with a great deal of perspiration, especially if the patient has a strong constitution. As said before, the lungs are filled more and more with blood, first in the lower parts, and so *hepatization* will first be produced there. The more the lungs are filled the more they press upon the cellulæ aereales, the consequence of which is an increase of the anguish of the patient and of his difficulty in getting breath.

In comparing the symptoms of pneumonia and of pleuritis with those of rheumatic fever (when the latter has taken hold of the chest), the affinity of these diseases is most striking.

The very rare kind of inflammation of the lungs which causes no pain in the side, and which does not prevent the patient from drawing breath deep from the bottom of the lungs, is caused in my opinion by paralysis of the diaphragm, contrary to the above described, where the cause was a rheumatic contraction. As in this case, too, a stop is put to the functions of the diaphragm, inflammation will naturally be the inevitable result.
Let us now pass over to the treatment. The first aim is to lessen the rheumatic contraction.

This is done by repeatedly applying with the fingers a vibrating pressure on the intercostal nerves, following them from their beginning up to their end, and more especially on the spot which the patient points out to be the most painful one. These vibrating pressures ought to be made gently in beginning, and by and by more vigorously, but always very abruptly, as this momentarily increases the difficulty of breathing, only to make it more easy afterwards. At the same time one must try and urge the patient, in spite of his pain, to draw in his back, so that his chest comes out. These proceedings ought not to be checked, neither by the patient's expression of pain, nor by his coughing, and, in the beginning, increased breathlessness. The great irritability of the nerves and the contraction in the intercostal muscles will soon begin to give way. This is already a great relief to the patient. He is continually to be urged to draw his breath from the very bottom of his lungs, the physician always watching that his stomach expands whilst inspiriting and sinks whilst expiring. Under no condition is the patient to be allowed to breathe with only the upper part of his chest. But, as long as the quantity of blood in the lungs is too large, the patient of course cannot breathe in this way, and one has to remove the obstacle. This is done in the following way:—The patient is to be put into a position which will make his chest project. This is attained by sitting or standing at the patient’s right hand side, and by supporting him between the shoulders with the left hand; the patient then has to draw up slightly his legs, and let them fall a little sideways. Then the other hand is laid across the stomach and works the muscles of the stomach and the bowels thoroughly for a few minutes, and it ends by giving a rather vigorous but short and careful pressure on the stomach, so as to obtain a momentary pressure on the vena cava inferior. The left hand has to reinforce the pressure in the back. This pressure on

the vena cava inferior cuts off for a moment the supply of blood to the right ventricle of the heart, which now receives a considerably less quantity of blood, and yet is not hindered in letting out the same quantity as before, as the aorta is protected against the pressure by the firm consistency of its walls. In this way the dry cupping mentioned and wished for by Dr. de Morgan is obtained.

Having thus made it easier for the patient to breathe in the way above mentioned, one may now proceed more energetically, never forgetting to give the patient time for deeply drawing breath, and exhorting him to do so, and repeating the above described pressure on the nerves if pain and difficulty of breathing increase again. The patient is once more to be put in the position above described, and the working of the stomach and bowels again energetically applied, with the addition that this second pressure is more directed to the upper parts against the diaphragm, which is to be repeated several times in order to bring the diaphragm into greater movement and make it free. Through the pressure against the diaphragm—which is to be done very gently at first, and more vigorously by degrees—the blood is forced out of the lungs quite mechanically, and driven towards the left ventricle of the heart, which is now able to take in a larger quantity of blood, as the chest is greatly relieved from the contraction of the muscles. To lessen the fever and pulsation of the heart one has to give a gentle shaking to the sides, which is done best by repeated short pressing in and loosing of the lower ribs. The effect of this shaking will not appear strange, it being well known from physiological experiments that the beating of the heart of a frog may be stopped by shaking its sides.

If there be too great a flow of blood to the head, the patient has to bend back the head, and to offer some resistance while it is being bent gently forward. A few vibrating pressures of both sides of the back of the head on the plexus cervicalis, as well
as on the ganglion coeliacum, will exercise a most beneficial effect on the nervous system and diminish the heat of the body.

With the further improvement of health some passive and eccentric contracting movements with arms and legs may be administered to regulate the circulation of the blood. If in coughing there be any difficulty in bringing up the mucus, a gentle shaking of the pita of the throat and stomach will bring relief.

Those of my readers who have some knowledge of the theory of the muscular motions will easily understand the effect of these movements. This treatment brings relief even in the first half-hour, and in repeating it three or four times a day I have succeeded in removing the illness in a very short time, varying from two to five days, when the patients were again able to go out (even in cases where the fever had lasted already four or five days), and that without the illness leaving any disturbance whatever.

I have spoken here only of such patients as were in good health before the attack, and not of those who were suffering from chronic disease of the lungs, or whose health was otherwise impaired. But even in such cases the treatment has always proved successful: but of course it requires then a longer time.

I am convinced that I shall meet with doubts and various objections; however, this has not prevented me from publishing the result of my experience, the more particularly as I am no longer the only one who has adopted the manual treatment in cases of fever with great success.

As I intend to stay in London eight or ten days from the 22nd of this month, I am ready to prove practically the truth of my statement, if I am allowed to treat some patients in one of the hospitals. Although I have practised this method during seven years, I myself have not till now published anything relating to it, as I wished first to gain the most perfect con-

vic tion of the rationality of my proceedings, and, through the numerous successes I obtained, to remove all doubts in my own estimation.

I should not have thought of offering my treatise to your estimable paper if chance had not just brought me to London, and I am thus enabled to stand up for every word I have said.

Gotha, Germany.
12th December, 1872.

H. KELLGREN.