

Twitter Thread by The Preying Mantis

The Preying Mantis
@Kickass_monk



Indian cholera is highly unsubstantiated. Also India was in the grip of Brits. How convenient to blame your own motherland. Wah wah!

Indians keen on naming & shaming China need to look up medical history.

They will find that cholera pandemic of 1817 was known as Asiatic Cholera- with Indians being blamed for spreading disease. The "dirty natives" accusation from the Raj came from this. Stop being racist.

— Vidya (@VidyaKrishnan) [March 26, 2020](#)

For cholera to be contagious, the population density is important. Susruta mentions about a disease with similar symptoms but clearly there no cholera endemics recorded at his time. The 1st case of an epidemic cholera in India was reported in 1503 by Portugese in Goa.

Portugese Drs observed that Indian vaidyas had a cure for it and they particularly insisted on the personal hygiene. Many H were particular in taking morning bath and following personal hygiene but Pgese neglected that. It is hypothesized that the personal hygiene gave protection

Modern scientific research has confirmed emergence of more virulent strain of cholera from less pathogenic one under favourable conditions, therefore it can be presumed that the unhygienic and unhealthy habits of the Portuguese caused epidemic

Reference for above tweet- Ramamurthy, T. and Nair, G. Balakrish "Evolving identity of epidemic Vibrio cholera: Past and the Present", Science and Culture, 76 (2010) 153-159

Later when the Portuguese traders commenced trading in Bengal, city became overcrowded with Portuguese sailors and traders from Goa who might have carried cholera germs and polluted the sea and river waters of that region

There is records of a fatal diarrheal disease from Dutch explorers in Hooghly where the Portuguese moved the markets after the Saptagram port was abandoned due to the disease. BTW this was NOT a pandemic, this was before 19th century.

In his book Annals of Cholera Epidemics, John Macpherson had given wonderful and detailed account of the incidence of cholera in the West from the earliest period to the year 1817 (Macpherson 1872, pp. 99-176). In 1527, cholera erupted at Bologna. See next tweet

Pic shows The Virgin of Succor venerated in the Sanctuary in the Borgo San Pietro at Bologna, appears above the town and was asked by Sts. Peter, Paul, Roch and Sebastian to liberate the town from the cholera of 1527. NOTE the year- 1527!!!



A few years later, in 1538 violent diarrhea ravaged the whole of Europe with such ferocity that scarcely any state escaped unscathed. Therefore, it seems probable that such epidemics had been somewhat of choleric nature.

In 1564, an unknown author Riverius wrote, 'the disease called cholera was prevalent, killing many within four days but nearly all recovered who sought aid on the first onset of the disease

“Cholera in Europe in the Seventeenth Century.”¹⁰

“In 1610, yellow cholera and bilious fluxes were common in England. In 1617, 1623 and 1636, white fluxes possibly of a choleraic character, were again noticed in England, Germany and France.

“In 1643 Van Der Heyden, of Belgium, described the furious onset of *trousse-galant*, which so altered the appearance of the patients in a few hours that their best friends might not recognize them.

“In 1649 Riverius gives full account of sporadic cholera of considerable intensity, sometimes followed by secondary fever, expulsion of enormous quantities of fluid by vomiting and purging, and sudden death; unless the attack was produced by something which was eaten, when recovery was probable. But the more severe the convulsions and coldness of the extremities, the more fatal the attack. Riverius believed in the existence of contagious and pestilential epidemics of diarrhoea and cholera, as did Piso in 1638.

“In 1665 cholera of some kind was epidemic in Ghent, Belgium.

“We now come to the English epidemics described by Short, Sydenham, Willis and Morton. According to Short, owing to the great heat in 1669, came cholera morbus, which reigned till 1672.

“In 1676 the convulsions were more violent and continued than Sydenham had ever seen there before. He regarded the autumn cholera as very different from the ordinary cholera induced by indigestible food. Willis has not omitted the leading symptoms of white or watery evacuations. He says the disease invaded suddenly, and frequently without any manifest occasion, and did reduce those laboring with it by great vomiting and frequent and watery stools quickly to a very great debility, with a weak, small pulse, cold sweats, and short and quick breath. Very few had bloody stools, and not many bilious; but very many had vomits, and plentiful watery, almost clear stools. It raged in London; but did not extend three miles beyond the city, nor seem to be propagated by contagion. The main cause of the disease he thought to be an evil influence of the air (or water), which was increased by errors of living; but he could not connect the disease with overeating of fruit.

“The celebrated Morton speaks of great epidemic diarrhoeas, accompanied by awful twitching cramps, as prevailing annually from 1666 to 1672 in London to such an extent as to occasion a weekly mortality of from three to five hundred. The discharges consisted of a copious purging of colliquative white, but apparently virulent, serum. In the year immediately preceding the great fire in London, and when the sanitary condition of the city was horrible, this “plague in the guts” caused thousands of deaths.

During 1636 the mortality bill in London included ‘rising of the stomach or vomiting’ as new headings of diseases. In 1643, Belgian physician, van der Heyden provided us with a very lively description of cholera morbus

rice-water evacuations.¹

A very lively description of the *trousse-galant*, or *flux de ventre*, French expressions sometimes used for *cholera morbus*, written by the Belgian physician Van der Heyden in 1643 ran as follows:¹

The furious onset of *trousse-galant* in a short time takes away from the body so much of its substance and of its force, and occasions in it so much mischief and change, that in seven hours their domestics would not recognise in such a sufferer a master or a relative, unless they knew it could be none else, for they encounter the true Hippocratic expression, which indicates the extreme of debility and the image of death. Once when I was called to see a patient, only five hours after his attack, I found him in a condition giving the most unfavourable prognosis, to wit, without pulse or speech, passing in his evacuations only a fluid resembling clear milk. Along with this, his eyes were so sunk that one could scarcely see them, and his legs and arms so drawn back by convulsions, that one saw no movement in them, and so cold from the moisture of a cold and clammy perspiration adhering to them, that the patient seemed more dead than alive.

In 1649, Rivirerus of Montpellier, France, also gave a full account of cholera, mainly sporadic, but of very considerable intensity.¹

MacPherson¹ cited more reports on the presence of cholera in: Brazil (1658), Ghent (1665), Montpellier (1649), and England in the second half of the 17th century. Thomas Sydenham, a famous name that has been mentioned earlier, drew attention to the regularity of the occurrence of cholera in London in late summer and early autumn by comparing it to the coming of the swallows in spring and of the cuckoo in early summer.¹¹

Faber in his classic monograph,¹² while describing the work of Sydenham in London mentioned that in 1667 2000 people in London (out of the city’s population of 500,000) died of cholera. MacNamara,⁸ however, refutes Sydenham’s claim that these cases were due to cholera because Dr. Willis, a contemporary physician of Sydenham, thought the cases were of an aggravated form of dysentery and because the outbreak did not extend beyond a

Another great physician of that time, Morton spoke of epidemic diarrhea and dysenteries accompanied with awful twitching cramps, as prevailing annually from 1666 to

1672 with a weekly mortality rate of three to five hundred.

Dr. Morton's account is particularly valuable

as it gives us the connection between cholera and fevers in those days. In 1689, cholera and dysentery were prevalent in Nuremberg. In 1691, London

was hit by intermittent fever accompanied with convulsion or cholera

Reference for above tweet Macpherson 1872, pp. 61-65

In 1750-51, epidemic cholera was witnessed by

Malouin in Paris in the month of July and was successfully treated by opium.

when attacked died. Light bleedings, the application of leeches to the hæmorrhoidal veins, clysters, and emollient drinks, were the most appropriate remedies to be used in the disease."

The "Memoires de l'Academie des Sciences de Paris" are full of observations on epidemics of in Paris. The learned Dr. Malouin writes:

"Cholera morbus suddenly appeared in Paris in the month of July, 1750, and soon became epidemic. It had at first the aspect of hepatic colic, owing to the pain the patients experienced in the neighborhood of the liver; but the patients were not jaundiced, however, and their excrement was not white. Many patients succumbed the third day, especially if the colic was accompanied by indigestion. In general, the face was drawn and the patient hollowed-eyed, especially when vomiting was present. The pulse was rapid, but compressible; the belly was distended; constipation was obstinate, with pains in the hypochondrium and lumbar region. Bleeding seemed to aid some of the sick by diminishing the convulsive tension of the abdomen; afterwards emollient drinks were employed, and tepid water, with chicken broth, followed by light purgatives; and the cure was terminated by the use of Vichy water."

Dr. Lentin has left on record the history of an epidemic of so-called European cholera that occurred at Dunaburg in 1765:

"For several years we saw prevail a sporadic form of epidemic cholera that attacked a large number of persons. There was a right lateral pain, with cough, in this affection, with sanguinolent expectoration, accompanied by febrile heat; but this morbid affection

In 1765, there was a choleric form of intermittent at Montpellier (Pic1) From the beginning of the nineteenth century we find the presence of cholera or cholera-like disease in London and in other parts of Great Britain (pic2).

in an alarming form, though with no fatal consequences.†

A notice by Dr. Willan§ may conveniently wind up the century.

“In 1800 the cholera was a frequent disease in London in September, but particularly so after the rains on the 19th and the 20th of August. To a profuse discharge of green bile from the stomach and intestines, cold sweats, fainting, and hiccough, were superadded most painful cramps of the muscles of the lower extremities. The trunk of the body was similarly affected, being jerked from side to side by sudden and violent convulsions.”

I shall be very brief in what I say of the commencement of the nineteenth century.

I observe that Mr. White, of Bath, published a book on cholera in 1808. Mr. Curtis, in his book published in 1808, says that he has observed many

* On Yellow Fever.

† On ditto.

‡ Currie Medical Reports, vol. ii., p. 548.

§ Miscellaneous Works p. 375.

Mr. Hennen at Cephalonia in the years 1816 and 1817 recorded prevalence of a most fatal cholera. Though it did not spread widely but it destroyed three out of four attacked by it. But was definitely more severe than in India

summer cholera, and other diseases of the nature of flux, were unusually fatal in most of the early years of the century, for instance, in 1802 and 1803, and again in 1811, 1814, and 1815.

Dr. Armstrong* described cases resembling cholera, which occurred at Shields and in the neighbouring districts in 1817, under the head of congestive typhus; and Mr. Hennen† recorded the prevalence of a most fatal cholera at Cephalonia, in the years 1816 and 1817. It does not seem to have spread widely, but it destroyed three out of the four attacked by it, and was therefore proportionately more fatal than ordinary Indian severe epidemics.‡

Looking back now at those three centuries, we find

* Armstrong on Typhus Fever, 1819.

† Medical Topography of the Mediterranean, 1830.

‡ Many of the medical officers insist, in their letters in the Bombay Report on Cholera, on the close resemblance between what they saw and what was described by Armstrong. For myself the fièvre perniciense, or algide, has always appeared to me to resemble cholera much more closely than any other phase of fever does.

Prior to 1817 cholera is hardly accountable

in the medical history of Bengal. But subsequent annual incidence led many observers to believe that the disease had struck its root in Bengal de novo.

Finally we need to take into account the extremely poor sanitation conditions of London, the largest city in the world in 1800s. A city overwhelmed by waste products of ever-growing population. Overcrowded into stinking slums, poorest citizens were literally living in their own filth

These conditions may have led to the development of a more virulent strain of V. cholerae as exemplified by this letter written by none other than famous physicist- Michael Faraday to The Times on the filthy condition of River Thames

No. IX.

Observations on the Filth of the Thames, contained in a Letter addressed to the Editor of "The Times" Newspaper, by Professor Faraday.

SIR,

I TRAVERSED this day by steam-boat the space between London and Hungerford Bridges between half-past one and two o'clock; it was low water, and I think the tide must have been near the turn. The appearance and the smell of the water forced themselves at once on my attention. The whole of the river was an opaque pale brown fluid. In order to test the degree of opacity, I tore up some white cards into pieces, moistened them so as to make them sink easily below the surface, and then dropped some of these pieces into the water at every pier the boat came to; before they had sunk an inch below the surface they were indistinguishable, though the sun shone brightly at the time; and when the pieces fell edgeways the lower part was hidden from sight before the upper part was under water. This happened at St. Paul's Wharf, Blackfriars Bridge, Temple Wharf, Southwark Bridge, and Hungerford; and I have no doubt would have occurred further up and down the river. Near the bridges the feculence rolled up in clouds so dense that they were visible at the surface, even in water of this kind.

The smell was very bad, and common to the whole of the water; it was the same as that which now comes up from the gully-holes in the streets; the whole river was for the time a real sewer. Having just returned, from out of the country air, I was, perhaps, more affected by it than others; but I do not think I could have gone on to Lambeth or Chelsea, and I was glad to enter the streets for an atmosphere which, except near the sink-holes, I found much sweeter than that on the river.

I have thought it a duty to record these facts, that they may be brought to the attention of those who exercise power or have responsibility in relation to the condition of our river; there is nothing figurative in the words I have employed, or any approach to exaggeration; they are the simple truth. If there be sufficient authority to remove a putrescent pond from the neighbourhood of a few simple dwellings, surely the river which flows for so many miles through London ought not to be allowed to become a fermenting sewer. The condition in which I saw the Thames may perhaps be considered as exceptional, but it ought to be an impossible state, instead of which I fear it is rapidly becoming the general condition. If we neglect this subject, we cannot expect to do so with impunity; nor ought we to be surprised if, ere many years are over, a hot season give us sad proof of the folly of our carelessness.

I am, Sir,

Your obedient servant,

M. FARADAY.

Royal Institution, July 7.

Wellcome Images

In my opinion, India/Bengal was not responsible for the five pandemics of the 19th century. It was McNamara who coined the term 'Asiatic cholera' as he believed that cholera originated from India with hardly any proof. Another case of the Brits denigrating colonial subjects

And ppl like u@VidyaKrishnan hardly read any sources but latch on to any opportunity 2 bash india just so that u prove urloyalty to your Chinese and European Masters. PLEASE NOTE THERE IS HARDLY ANY DISEASE WITH AN INDIAN

ORIGIN. EAT IT AND PLEASE LIVE WITH IT. Happy Navarathri■

Sorry for the extra long thread, felt it was important to present it