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THE

HOMŒOPATHIC RECORDER.

BI-MONTHLY.

VOLUME IV.

COLLEGE OF PHYSICIANS
OF
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THE
HOMŒOPATHIC RECORDER.

VOL. IV.

PHILADELPHIA, JANUARY, 1889.

No. 1.

EDITORIAL NOTES.

THE RECORDER, with this issue, enters upon the fourth year of its existence. Opening, as it did, a new field in our literature, it has steadily advanced in favor, until it now reaches a far greater number of homœopathic physicians than any other journal in our school of practice. This should be an inducement to those physicians who desire that their articles shall reach the greatest number of readers, to lend us their aid by contributions. Articles upon materia medica, and those reporting clinical cases, are particularly desired, especially such as bring before our readers practical illustrations of the utility of our least established remedies. We have many valuable drugs that are little known in practice, many physicians using them and gaining fine results, do not enlighten their brethren through the mediumship of the medical press. It is to those particularly that we appeal. Our materia medica is voluminous, it is true, but it is also extremely valuable. Let us, therefore, bend our efforts toward its development rather than its enlargement.

We shall strive, on our part, to continue giving the profession excerpts of value from our home and foreign exchanges, especially in view of the above, and to do all in our power to furnish interesting as well as instructive reading; also to present in each number an elaboration of one of our new remedies in the form of the article upon *Epiphegus* found in this issue. In our Book Department, all works received will meet with impartial reviews, the valuable ones praised, and those otherwise, criticised, without regard to their authors or publishers. By this line of action we hope to help those intending purchase, toward the completion of their libraries.

THE *Druggist's Circular* is one of a class of chemical news sheets that deserves the full support of physicians, if for nothing more than the ex-
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posures they frequently contain of proprietary articles and medicines. It was through the efforts of the above-named paper that the so-called "Scotch Oats Essence," shown to contain a large quantity of morphine, has nearly reached the end of its miserable existence. The October issue contains full analyses of two more highly advertised articles, viz., "Recamier Balm," and "Vita Nuova." The former has been found by Professor R. G. Eccles, in the bottle he examined, to contain, in about four ounces of water, one dram of oxide of zinc, and two and one-quarter grains of corrosive sublimate! The danger of this article, both to the user and from the opportunity its presence in the household would give of killing inquisitive children, is only too evident. The second article, "Vita Nuova," is rumored to be responsible already for the cocaine habit in many; it was gratuitously "on draught" in New York as an invigorant for ladies when shopping. This preparation, "compounded of an excellent brand of wine," which "you will find tastes like a wine thirty years old," and is claimed to be "positively free from alcohol" (?), is proved by Professor Eccles to contain cocaine. Both these preparations are "analyzed and approved by eminent chemists." We must judge in such matters as these that the "eminent chemists" are given specimens to examine that are made for the purpose, and free from deleterious substances; this, in our charity; for one who would manufacture and sell such nostrums, would stoop to any fraud, while we cannot think that any chemist would defile himself with the dollars of such people, to the extent of blinding scientific justice.

How pompously our old-school brethren now proclaim that they use this or that drug, "according to the indications!" When asked how and when they learned how necessary the indications for each drug are, they say, with great unction; "By experience, sir!" Should we not be thankful that they have at last learned something in therapeutics by "experience?" In their present laudation of *Gelsemium*, they have hit upon a "new drug," which they are sure to finally throw aside "by experience," when it would serve them many a good turn if they would but study the proven indications, and there find experiences much more scientific and valuable than their own.

TREATMENT OF PHTHISIS PULMONALIS— DROSERA ROTUNDIFOLIA.

BY DR. RENÉ SARRAND.*

- 1st. Phthisis pulmonalis is a curable disease in all of its stages.
- 2d. Phthisis, on the whole, is more susceptible of cure when treated

* From the Spanish translation by Dr. Udeis, in *El Consultor Homeopatico*, October, 1883.

from the beginning, when the general condition of the patient is but little changed, and the lesions are recent, and, as yet, quite limited.

3d. Not alone is the treatment obliged to be precocious, but it should also be preventive, by any method that can remove the predisposition to pulmonary seizures, or accidents.

4th. The whole individual is predisposed to phthisis; existing signs appear that permit recognition of the coming attack.

5th. The rational homœopathic treatment of phthisis. We comprise in the treatment the study of all those symptoms of the remedy, the action of which seems to apply more directly to the diathesis, *i.e.*, the essence of the disease in each individual.

6th. Among those remedies, particularly adapted to certain diatheses, we have the already famous *Sulphur*. There are also other powerful medicines derived from the vegetable kingdom, such as *Drosera*, whose name is associated with that of *phthisis*.

Drosera rotundifolia has been the subject of much interesting study on the part of Dr. Curić. He communicated to the Academy of Sciences the results of his experiments upon three cats, to which daily doses of *Drosera* were given, and in which autopsies revealed tubercular conditions of the pleura. These investigations, in connection with the observation that sheep that have eaten the leaves of *Drosera* have developed night cough and symptoms of consumption, would give sufficient indication that *Drosera* would yield curative results in such cases.

Drosera rotundifolia is an essential remedy in phthisis; indications for it exist in all stages of the disease. Dr. Curić affirms that, in the initial period of phthisis, it is nearly always possible to gain a cure through *Drosera*: this remedy is not alone able to retard the evolution of tuberculosis, but, if given before the manifestation of the first signs, it is able to check its appearance (prophylaxis). *Drosera is a preventive, and at the same time curative agent in phthisis pulmonalis.*

For our part, we are accustomed to prescribe *Drosera* to children whose parents are tuberculous, and to all those who present an inherited or acquired debility.

Outside of these conditions, it is necessary never to forget that there may exist signs that indicate in a certain manner, the more or less threatening appearance of phthisis pulmonalis, and the necessity of summoning medical aid.

We have the necessary agent at our command. Therefore, it is well to urgently combat the symptoms of phthisis, nor is there a more useful, as yet known and recognized; if, after months or years of trouble, a patient is encountered with this disease, this permits the establishment of a treatment before pulmonary lesions result.

Behold a child, whose state awakens the fear of its parents! It is pale, debilitated, the appetite is defective, its antecedent heredity does not permit of suspicion; auscultation gives no indication at all of affec-

tion of the chest. Is this sufficient? Should it limit here our examination, and satisfy us without precise data, now that no sound demonstrates the actual state of the chest? This is the general practice. Frequently, but a short time after such an examination, there appears in the case a short, dry cough, followed by emaciation, and presently the whole accompaniment of phthisis pulmonalis; treatment intervenes, then tuberculosis becomes evident.

What does he now say to the parents whom he has pacified by his first examination? It happens to be a cold, a prolonged catarrh of the chest, bronchial disorder; a congestion has taken place in the apex of the lung, etc. Nothing more than the manifestation of a series of accidents that were foreseen. If, after the first day, an examination of the chest is made, and carried on to the larynx, he will have reached revelations, or certainly signs, that will impress a distinct line of conduct.

Many years ago, we proceeded, in all diseases, to examine the larynx, and these numerous examinations in different individuals resulted in the fact that further examination of these diseases proved, with absolute certainty, "*That, in those persons destined to suffer phthisis pulmonalis, there always exist pharyngo-laryngeal signs, very positive, very constant, that precede by much the pulmonary signs.*"

These signs are three: 1st. Pharyngeal anæmia; the pharynx is pale, discolored and blanched, instead of the normal coloration. 2d. Faulty approximation of the inferior vocal chords, with atony of the constrictors. 3d. Local congestion of the *mucosa aritenoidea* and *interaritenoidea*, changing to an inflammation, and a cherry-red coloration of this region.

These three signs may exist separately, or reunite. The existence of one alone indicates a great presumption in favor of a future pulmonary tuberculosis; always when the physician encounters all together, this prognostication is certain.

The pharyngeal anæmia, the faulty approximation of the inferior vocal cords, the congestion in the arytenoidal region, signs that we never have in common with laryngeal phthisis, are the precursory signs of pulmonary phthisis. The physician who reads, may know of the larynx in this disease, and will avoid many mistakes, and knowing, moreover, the imminence of the disease, he will be able to establish the prophylactic treatment, and repress phthisis in its earliest stages.

It is here that *Drosera rotundifolia*, given perseveringly, produces remarkable effects, and where this remedy merits the name of a *preventive of phthisis pulmonalis*.

Later, if we encounter, face to face, the evolution of tuberculosis, we still turn to *Drosera*, not because we have in it a new remedy for phthisis (we might almost propose it as a specific in this disease), but that *Drosera* occupies the place we desire to fill, a power over tubercular diatheses. In the meantime, some other remedy may be used in alternation to combat special conditions:

Aconite, to abate cardiac erethrisms.

Bryonia, to dissipate pulmonary and bronchial congestions ;

Silphium cyrinaicum, to aid the expectoration.

Mercurius dulcis, to contest the diarrhœa.

Chininum sulphuricum, to combat the evening fever.

Agaricus, the night sweats.

Some other time we will indicate the treatment of phthisis according to its symptoms ; on this occasion we are limited to establishing :

1st. That there are certain signs which permit us to recognize if a person is threatened with phthisis pulmonalis.

2d. That the knowledge of these signs is of the greatest importance ; that the treatment of phthisis may be at the time prophylactic, and determine the extinction of the disease before there is any local lesion in the constitution.

3d. That *Drosera rotundifolia*, as a remedy in phthisis, is always to be employed as a preventive, when the symptoms here described are encountered.

THE BRAZILS.*

OUTWARD BOUND.

ON one of the hottest of that succession of humid days occurring in the month of July, 1887, when everything seemed to steam as in a Russian vapor-bath, the steamer "Advance" cast off her cables from the dock at Brooklyn, and slowly swung, with the aid of a tug, out into the channel of the East river, bound for Rio Janeiro. The sweltering passengers, busied in closet-like state-rooms arranging their baggage in the most convenient way to meet the requirements of a twenty-eight days' floating-home, soon determined that a view of the bay was much more pleasant, and sought the deck with their lorgnettes and marine-glasses to lengthen the time during which they might feast their eyes upon the land and homes they were leaving.

The complement of passengers was small compared with the numbers that leave New York at this season for European travel, consisting in the main of five missionaries, a doctor, a merchant in the rubber industry at Pará, a San Paulo Padre returning to his church after a visit to the great United States, a German tradesman of St. Thomas, an English merchant of Barbadoes, two commercial "tourists," a gentleman bent upon a mission to procure a number of Patagonians for show in New York, and an old lady and her son going to Buenos Ayres to meet a son and brother long from home.

* A continuation of the Editor's articles, entitled "Homœopathy under the Southern Cross," which appeared in this journal last year.

Having passed the narrows the sea-breeze, combined with that caused by the rapid motion of the vessel, so diminished the heat of the stifling atmosphere as to bring comfort, and the delights of an ocean trip fairly begun. It was not until Sandy Hook was reached that the first sea-rolls became evident, and a slight discomfort began to pervade the interior economy of a number of the passengers; then an hour's time served to remind many that "the sweet seclusion the cabin grants" is more a fact than a poetic fancy. This feeling is greatly enhanced in the morning, when the vessel heaves to, yawing, and lolling about, while the compasses are being corrected preparatory to so long a cruise.

Although the day is beautiful, the sea air bracing, and everything new and interesting, our breakfast-table this morning shows that Neptune has claimed acquaintance with a number of our shipmates; even many who do breakfast with us are found in their steamer-chairs amidships, a half hour later, their upturned noses and retracted lips giving a glimpse of yellowish teeth as the sea more and more asserts its claim upon their sympathies. Sea-sickness has a true bilious effect upon the minds of those who are attacked, a constant symptom being a lack of desire to live, a perfect willingness to die, and an anger at their inability to do so; a peculiar dryness of the mucous membranes, a disgust for food, and a general internal upheaved condition. The good old-school ship's doctor advocates champagne, the weather-beaten sailor, salt pork, and the steward, beef-soup, to all of which the cabin-boy gives large discount as he opens upon your plate your unadvised order of boiled eggs, one of which is found antiquated and a near relative of the sulphuretted hydrogen you once knew in the chemical laboratory at college. As a homœopath, however, we had preceded this voyage by a four days' course of *Petroleum* and *Cocculus* in alternation, so that even the egg fails in its heinous design, and those untainted are eaten with good relish.

For the next four days whist, chess, music and popular fiction serve to dispel the tedium of the beat of the screw and regular striking of the bells on our contracted deck. Busily engaged at one of these occupations a stoppage of the vessel is suddenly apparent, a strange sensation to us, and we find ourselves hove to on the edge of one of those terrific West Indian tornadoes, the air is ominously still and fearfully heavy; all about us has a peculiar brownish orange hue; the incessant lightning strikes the sea around us, and a painful hush pervades between the flashes. Thus for an hour we lay, momentarily expecting to be struck by the wind and waters. They do not come, however, and the atmosphere clearing, the ship comes about and continues her way, soon bringing us into the track of the now spent hurricane, where the beautiful blue waters are lashed into a foam, and the waves pitch and toss in every conceivable form and direction.

There is plenty of elbow-room at dinner, and it is needed; the storm-

racks are under the cloth, and each of the few at table has a compartment partitioned off for his soup-plate and side dishes, while the hanging-rack above our heads swings interruptedly hither and to, and the view through the port-hole opposite is first a glimpse of the zenith, then one of the greenish sea-water beneath. To the uninitiated the feat of eating soup from a position alternating between above the table and underneath it, is trying in the extreme, and one from which the author of dinner-table "don'ts" would shrink entirely vanquished.

Midnight of the sixth day out finds us moored to the coaling-dock in the quiet harbor of St. Thomas, and still awake, witnessing the weird effect of about an hundred negroes and Amazonian negresses loading the bunkers, running forth and back by the light of two large flambeaux of bituminous coal, with large baskets borne upon their heads. Several of these women are far advanced in gestation; one whom we questioned, and whom we had watched carrying twenty-three baskets during the loading, amounting to over two tons, said she expected to be confined the next day, as she already felt the premonitory symptoms. These women were arrayed in very short skirts, with a sleeveless waists and very low necks, showing magnificent shoulders and chests, and strong, muscular thighs and legs. They do the work of a strong man, singing, laughing and jesting constantly while at their labors.

The Island of St. Thomas as seen from the ships' deck is a pretty, irregular, verdure-clad bit of volcanic land, having only the one port of any importance, that of Charlotte Amalia, with its beautiful land-locked bay, in which our vessel lays as calm and lifeless as if she had never moved. The quiet little city is a short distance off, with its Dutch-tiled roofs and whitened buildings, nestled in a notch between two mountain bases. The inhabitants are mostly squalid negroes, with a number of Danish families and English merchants. The produce of the port is principally bay-oil and bay-rum, though it is also one of the important receiving ports for the sugar, molasses, and rum of the Island of Santa Cruz, whose dim outline can be seen across the channel to the westward. A short distance from the city is a pretty little quarantine hospital, with delightful surroundings of mountain, forest, rocky and sandy beach, a place in which any one might delight to spend a month or so of convalescence. Here, about the forest grounds, the bay myrtle flourishes in luxuriance, while palms, palmettos, pineapples, bananas, oranges, and many flowering herbs serve to vary and beautify the landscape. One can hardly imagine a more peaceful, airy, and health-giving spot, where the days are always warm and mostly pleasant, and the nights cool and refreshing.

The next day is spent passing along through the Leeward group, giving now and again glimpses of the different islands, either at great distance or quite near, as our course lays. Martinique, as we pass, seems indeed, one of the emerald gems of the sea, with its verdant mountains and volcanic cones rising in constantly changing outline. The verdure

extends down to the very sea itself, and is here and there dotted with pleasant villas and strips of white sandy beach. This beautiful island, the birthplace of Empress Josephine and Madame de Maintenon, will always be a bright spot in our memory of this delightful voyage.

The island of St. Lucia, enshrouded in a rain-cloud, gives us no idea of its appearance. Night comes on, and we again experience the apparent paradox of pitching and tossing about all night, though really sleeping as peacefully as a tired child. Nothing is quite so hypnotic as a voyage at sea, with its pure air, invigorating sun, and constant mental surroundings. Morning comes, and we find ourselves quietly lying at anchor in the almost transparent bay of the principal port of Barbadoes. Here we see some of the wreckage caused by the hurricane we escaped three days ago; nine vessels are disabled, one being driven quite up on the shore.

The island of Barbadoes, which, according to the inhabitants thereof, is England, and England itself merely one of its provinces, is notably one of the hardest islands of the group to make a landing at, providing the passenger is from South America. The quarantine laws are so outrageously stringent that on one occasion a vessel, forty-six days out from Buenos Ayres during a cholera scare at that port, was not allowed even to anchor in the bay; and clean papers carried by American steamers from Southern ports are often disregarded, and their passengers forced to pass on to the next port, and ship back as best they can. This island is one of the flattest of the group, and doubtless one of the healthiest, an excellent winter resort for invalids, far exceeding Florida; the bathing beaches are not only excellent, but the water is probably the clearest and most beautiful in color and purity of any within the reach of our shores. The hotels are spoken of as excellent, and the rides about the island very fine. The only drawback I know of is the intolerable impudence of the negro inhabitants.

Leaving the harbor, after landing a passenger and the mails, we skirt its coast-line for some distance, enjoying the beautiful scenery, passing the large Marine Hotel, and then lay our course direct for the Salinas lightship at the mouth of the Amazon.

The next day we experience a peculiar condition—the trade winds being very light and blowing upon our port bow, instead of the starboard as usual in this latitude. Flying fish (a delicacy of which we failed to get the usual mess at Barbadoes) are about us in great schools. The sight of them, and opportunity afforded by the almost calm sea of studying their flight from swell to swell, interest us greatly, as there is much discussion as to whether they really fly, or only leave the water under the impetus of their caudal fin, to strike it again as soon as the force of the impulse is lost. After studying their flight for over six hours, with the aid of a powerful and very wide-angled marine glass, we conclude that the latter view of the case is the correct one, though we must admit that some of the flights were astonishingly extended, some estimated at from

300 to 500 feet, over the crests of from five to twelve swells that were about 45 feet apart; again, one was found upon the deck the next morning, to gain which it must have risen at least 20 feet from the surface of the water. Our reasons for concluding that their flight is only due to the forcible action of the caudal fin on leaving the water are: first, they always fly in a direct and unvaried line from the point of issuance to that of entrance; second, they never rise higher than the point first gained on leaving the water; third, if a swell higher than the plane of their flight is met it is never mounted by the fish, but often pierced, after which the fish strikes the water between it and the next; fourth, they almost invariably re-enter the water with a confused splash, not neatly as they undoubtedly would do if able to further sustain and guide themselves while in the air.

About 400 miles from Barbadoes we encounter a large tree, with roots and branches nearly intact; the captain gives two reasons for its appearance here in his report to the Hydrographic Department—first, our nearness to the current formed by the Orinoco river; and second, the influence of the hurricane previously mentioned. Usually these trees soon become waterlogged, and do not travel many hundred miles from the mouth of the river.

In latitude $10^{\circ} 45' N.$ and longitude $54^{\circ} 51' W.$ we are in the doldrums, that usually calm sea between the northwest and southeast trade winds; here we pass a Portuguese brig with sails idly flapping about the masts, and the always sleepy sailors napping on the deck; what an appearance of helplessness she presents compared with our steamer; we watch her through our glasses until she is hull down beyond the eastern horizon.

A slight shower, followed by a gentle breeze, somewhat varies the monotony of the swell at evening. The beautiful evenings on deck in this latitude are full of poetry and beauty, the stars are as bright as on a calm November night in the north, and appear to bear out that once advanced theory, that we exist in the centre of our earth and not upon the surface, and that the stars and planets are simply the light streaming in to us through perforations in the crust. At noon the next day we pass into the southeast trades, which, with a head sea and the Amazonian or Equatorial current against us, somewhat retards our speed. Our trip through the doldrums was often enlivened by the Padre, who affords much amusement everywhere, except at table, where his gastronomic feats are, indeed, surprising, and often disgusting; his devotion to snuff is so complete that he partakes even at table, and the trumpet-like notes shortly after, only partially smothered in his large bandanna, do not inspire the followers of Epicurus, neither does his habit of soaking large blocks of layer cake in his soup, particularly flavor our luncheon. He is, nevertheless, an excellent story-teller, and reminds one forcibly of the engraving so often seen, entitled "A Good Story," as he has much the appearance of a Jesuit monk. He is often found asking the cabin-boy

for a little fish-line, that he may "catcha nicea litta fisha," much to their amusement.

At 5° 31' N. and 47° 32' W. we cross the dark waters of the Orinoco river, and approach the equator which we shall cross early to-morrow evening. The voyage is becoming tiresome in its monotony, nothing whatever occurring of interest outside of the vessel itself; the circle of the horizon, and the blue dome of the sky remaining the same hour after hour and day after day.

Awakening early the next morning we find the sea beautifully turbulent, and a delightful breeze blowing in our faces. The glorious sunrise tints the eastern sky with crimson, in which shortly after a few dark clouds float like dross upon a pot of liquid gold; anon orange, green, and rose creep in like threads in a silken web; then suddenly the disc of the noble orb appears, and it is day. The abruptness of the rising and setting of the sun is always a theme of conversation on board. The captain and mate, sextants in hand, stand in statuesque posture upon the bridge, until, suddenly calling "time," they descend to their cabins, work out their reckonings, call to the helmsman "to hold her so," and we have little else to interest us all the long day except the beat of the dinner-gong and the eternal chumming of the constantly revolving screw.

At eight o'clock this evening, as expected, we cross the "line" during a spiteful little gale of wind, which sweeps the deck, carrying with it the salty crests of the waves, and driving us all indoors.

Night closes in nasty, and worrying to the captain, who sets the lead, going at regular intervals throughout the murky hours, for in nearing the lightship at Salinas we pass over a constantly shifting bottom, composed of sand bars never to be found alike on any two trips. The night is too wild to see land when we approach, so all retire, faithfully convinced that when we awake in the morning our vessel will be quietly laying at anchor off the city of Pará at the mouth of the Amazon.

(TO BE CONTINUED.)

EPIPHEGUS (Beech Drops).

Epiphègus Virginiana, Bart.; *E. Americanus*, Nutt.; *Orobanchè*
Virginiana, Linn.

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PLATE I.

THERE is no plant in our newer materia mèdica that is attracting more attention at present than this curious member of the small natural order *Orobanchaceæ*, the Broom-rapes.

This parasitic family of plants is represented by only 11 genera, con-



EPIPHEGUS VIRGINIANA, BART.

taining in all about 150 species, all except 12 of which belong to the Old World. The characteristics of the family lie in the absence of foliage and green color in all its species; and the presence of a two-lipped corolla, didynamous stamens, and a one-celled capsular fruit, having two or more many-seeded placentæ attached to its inner walls; this last character only, distinguishes its flowers from those of its nearest neighbor, the Scrophulariaceæ or fig-worts. The genus *Epiphægus*—so-called from its species growing upon the roots of the beech tree (*Fagus*; Greek *phēgos*)—consists of slender herbs, having a purplish or yellowish-brown color, greatly branching stems, with only a few scattered scales to represent leaves, and long wand-like branches, with their flowers arranged more or less irregularly along the sides to the tips; of these flowers the upper are tubular and generally sterile, while the lower have only a short corolla, seldom opening, but gradually torn off from its base by the developing fruit pod, which has been fertilized in the bud. The species under consideration, commonly known as *Beech-drops*, from its place of growth and the globular shape of its root, has a whitish and purplish corolla to the upper flowers, which is from one-half to one inch long, somewhat curved, and its free, open border shallowly cut into four unequal teeth.

This species has received many vulgar names in different localities, both from its mode of growth and its supposed medicinal qualities. Of these the following will be most frequently heard: *Broom-rape*, a name common to many species in this order, but not applicable to this, meaning a plant that preys upon the broom (*Cytissus scoparius*, Link), a woody shrub cultivated throughout Great Britain; *Cancer-root*, from its efficacy in open cancerous sores; *Clap-wort*, from a reputation the plant gained in the West as a specific in gonorrhœa and syphilis; *Earth-club*, from the peculiar shape of its root-stalk; and *Flux plant*, from its ability to check diarrhœa. The plant grows wherever the beech tree is found, from Canada to Florida, Mississippi, and Kentucky; flowering in the north from August to September.

Mr. Fergus, who has made a study of the growth of this species, says:* "The plant lives but a short time, perhaps not more than a month passing between germination and maturity. . . . It has no true roots, and cannot live where there are no assimilating plants; this would indicate its being a parasite, which, indeed, it is, but a curious one. Having no sucking rootlets, how does it live? This parasite takes a tight hold of the beech root with its grappers (the antler-like apparent rootlets in our drawing), bending them over the host's root, as if to hold the plant in position. We break the grappers, and find the bulbous portion of the root-stalk adhering to the root as if glued; a thin slice and a microscope shows that the beech root has ap-

* *Botanical Gazette*, 1882, p. 11; 1883, p. 154.

parently reversed the order of things, and kindly mothered the parasite by throwing up into its bulb an umbilical canal, terminated by a placenta-like enlargement, thus offering such a full supply of its juices that the bulb-cells (which hardly differ from those of the parent beech) always contain quantities of starch. If the beech root is small, that portion lying beyond the parasite withers away unnourished: if, however, the root is larger, and there is substance enough after the parasite is supplied, it will live, but will be retarded in its growth."

It would seem that, as soon as the seed comes in contact with the beech root, and all proper conditions of heat and moisture are present, and germination begins, the root kindly lends its aid by furnishing a food supply from its own generous storehouse to its insignificant, half-starved, and beggarly pauper neighbor. Being thus dependent upon another for its support, and not having the faculties necessary to guide it in its choice of a host root, this species naturally differs much in its individuals. The four plants in my herbarium show well the forms which may be usually met with. No. 1, collected at Binghamton, N. Y., is 6 inches tall, has 13 branches, and no tubular, sterile flowers. No. 2, collected at Ithaca, N. Y., is 9 inches tall, has 9 thrifty branches, and but four sterile flowers. No. 3, also collected there, is 17 inches tall, spare, and apparently badly fed, has 7 scrawny little branches at the summit of a long stem, and but few of each kind of flowers. No. 4 is a fine specimen, healthy and decided in all its parts; it is over 2 feet high, and has eight fully developed branches, all well flowered and fruited. This individual was collected by my friend Prof. W. R. Dudley, at Ithaca, and the summit of its stem and root-stalk furnished the material for our drawing, where these portions are reduced once in all measurements.

HISTORY.

The empirical history of this plant is not an extended one, and as Prof. S. A. Jones, in Boericke & Tafel's BULLETIN, has fully covered the ground as far as I can find references, we can do no better than use his compilation:

1804.—Prof. B. S. Barton, *Collections for an Essay towards a Materia Medica of the United States*. Part Second, p. 6, *et seq.*, says: "It has been celebrated as a remedy in dysentery, and that it is the chief ingredient of Dr. Martin's celebrated powder for cancer. The recent plant is 'considerably astringent,' and also has a 'peculiar and extremely nauseous bitterness.'" 1818.—Prof. W. P. C. Barton, *Vegetable Materia Medica of the United States, etc.*, Vol. II., p. 25, *et seq.* This author adds nothing to our knowledge, but gives "An account of the late Dr. Hugh Martin's cancer powder, etc. By Benjamin Rush, M.D." This is the somewhat celebrated paper read before the *Philosophical Society*, and is well worthy of the student's attention. 1820.—Wm. M. Hand, *The House Surgeon and Physician*, p. 239. "Substance, infusion, and decoc-

tion, all good applied to foul ulcers, cancerous affections, sore mouths. Internally, *in secondary stages of dysentery, diarrhœa.*" (Italics ours.) 1822.—Eberle. *A Treatise of the Materia Medica and Therapeutics.* The Fourth edition, Vol. I., p. 384, is now quoted. "In apthous ulcerations of the mouth I have known it to be highly beneficial. I have also used a strong decoction of this root as a wash in an obstinate cutaneous affection of the herpetic kind with complete success. Internally I have never employed it; I do not doubt, however, of its applicability to all the purposes for which vegetable astringents may be useful. In some parts of this country it is a common remedy for diarrhœa and dysentery." 1829.—Togno and Durand in Edwards and Vasseur's *Manual of Materia Medica*, p. 94. In domestic practice used for diarrhœa, dysentery, and *hæmorrhages* (italics ours). "We are, however, better acquainted with its external than its internal employment, and therefore it has been occasionally employed with some success in obstinate ulcers and in apthous and in chronic cutaneous affections." 1830.—Rafinesque, *Medical Flora*, etc., Vol. II., p. 248. "Astringent, antiseptic and anti-syphilitic, deemed in the West a specific for gonorrhœa and syphilis. Useful for obstinate ulcers, apthous and herpetic sores, diarrhœa and dysentery." 1830.—Elias Smith. *The Botanic Physician*, etc., p. 422. "The beech drops are a powerful astringent, and cancers have been effectually cured by the application of the fresh bruised root, frequently applied. It is very beneficial in the cure of St. Anthony's fire and canker in the throat. After proper evacuations, persons subject to the erysipelas may take a teacupful of this decoction* four times a day, at the same time applying to the inflamed part cloths wet with the decoction, not sweetened, and continued until well." 1881.—Prof. H. G. Piffard. *Materia Medica and Therapeutics of the Skin*, p. 51. This erudite author, who is exceedingly well versed in the literature of our indigenous remedies, recognizes its repute in "obstinate ulcers."

"Just here a brief digression concerning *curability of cancer* is appropriate. We who are guided by the law of similars are many of us too fond of "old clothes;" for what are prognoses deduced from the imbecility of "regular" practice other than the shabbiest and the seediest of "old clothes?" With a "regular" of the regulars the only unerring diagnosis of a "cancer" is that it has killed the patient. If a patient having a diagnosticated "cancer" dies the diagnosis is valid and "scientific;" if, however, the said patient recovers under treatment, then the "cancer" diagnosis is ignominiously discarded. Of such "science" the world is weary, and the homœopath should wash his hands of it. Consider the pathology of cancer: it is *terra incognita* wherein humoralist and solidist may fight their battles without end. It is, however, an

* Prepared by boiling down eight ounces of the herb to two quarts of water, and sweetening.

anomaly of *nutrition*—on *that* all are agreed. To us a vaso-motor disturbance in the affected territory is the simplest hypothesis, for, if cancer is only an “humoral” product, why should it *localize*; what occult “affinity” attracts the “humors” to one special part of the organism? Then, again, the “humor” is an hypothesis—who has ever seen the “humor”—whilst the vaso-motor phenomena by which nutrition is effected and affected are visibly demonstrable. As a nutrition change (though, indeed, one of the most profound) cancer comes within the sphere of curable conditions, and *undoubtedly has been ‘cured.’*”

“It is proper to mention,” writes Prof. B. S. Barton, “that the *oro-banche* has been supposed by many persons to have formed a part of the celebrated cancer powder of Dr. Hugh Martin, whose success in the management of many cases of this dreadful disease has been acknowledged by the regular physicians of Philadelphia, etc. . . . It may be said, and it is not impossible, that Martin added the vegetable matter merely to disguise the arsenic, reposing at the same time *all* his confidence in the arsenic alone. I think it more probable, however, that the superior efficacy of Martin’s powder, and of the powders in the hands of other empirical practitioners, has been in part owing to the addition of something to the arsenic. If there be *no* foundation for this suspicion how has it happened that in the management of cancers the empirical practitioners have often succeeded so much better with their medicines than the regular physicians have done?” *Both use arsenic.* (Our italics.)

The point is well taken, and surely any substance which can thus energize the action of arsenic is worthy of serious consideration; and, further, that Martin’s Cancer Powder was of singular efficacy is beyond question. Hugh Martin had been a student of the celebrated Dr. Benjamin Rush, and from personal observation Dr. Rush says: “It gave me great pleasure to witness the efficacy of the doctor’s applications. In several cancerous ulcers the cures he performed were complete. *Where the cancers were much connected with the lymphatic system, or accompanied with a scrofulous habit of body, his medicine always failed, and in some cases did evident mischief.* . . . Most of the cancerous sores cured by Dr. Martin were seated on the nose, or cheeks, or upon the surface or extremities of the body. It remains yet to discover a cure for cancers that taint the fluids, or infect the whole lymphatic system. This cure I apprehend must be sought for in diet, or in the *long use of some internal medicine.*” He then gives this golden line: “TO PRONOUNCE A DISEASE INCURABLE IS OFTEN TO RENDER IT SO.”

Lastly, we have from him this valuable practical observation: “It is not in cancerous sores only that Dr. Martin’s powder has been found to do service. In sores of all kinds, and from a variety of causes, *where they have been attended with fungous flesh, or callous edges,* I have used the doctor’s powder with advantage.”

On analyzing all the evidence of its empirical applications we find

vaso-motor paresis to be the *conditio sine qua non* of the action of *Epiphègus*, or *Orobanche*. In this connection note especially the observation of Tognò and Durand that, in domestic practice, it was used in *hæmorrhages*, and with that clue the pathological basis in all the conditions of its use is seen to be essentially one and the same. Attention is called to this fact because it affords the test by which one can determine the validity of any and every proving of *Epiphègus*. This test may be expressed in the following postulate :

The genuine "proving" of Epiphègus must evidence that the physiological action of this agent is primarily effected in and by the vascular mechanism.

We may add that, as Dr. Martin used his powder mostly in open cancerous sores, it is quite probable that he used *Epiphègus* as his vehicle for the arsenic, on account of its own powers exhibited in the cure of such open and ulcerous conditions.

Our eclectic brethren use a decoction of the plant as a general astringent, but especially in hæmorrhage of the bowels and uterus, in diarrhœa, in gonorrhœa, and in gleet. In erysipelas they claim that a decoction drunk freely, and at the same time used externally as a wash, has effected many cures. As a topical application in obstinate ulcers, aphthous ulcerations, leucorrhœa, etc., it is claimed also to be useful.

THE TINCTURE.

Our tincture is made from the fresh plant, gathered during the full flowering season, pounded to a pulp and weighed. Then two parts by weight of alcohol are taken, and after thoroughly mixing the pulp with one-sixth part of it, the rest of the alcohol is added, the whole poured into a well stoppered bottle, and allowed to stand for eight days in a dark, cool place, being shaken twice a day. The resulting tincture, after filtration, is opaque in quantities of an ounce or more, thin layers have a rich red-brown color by transmitted light. It has a woody, vinous odor, an acid reaction, and a slightly astringent taste, the astringency becoming more marked a short period after touching the tongue.

CHEMISTRY.

The intimate chemistry of this plant is as yet unknown. An analysis made for Tilden & Co. showed in 7000 parts of the plant : 286.96 albumen and gum ; 263.20 starch ; 898.72 bitter principle ; 338.40 extractive matter ; 474.08 tannin ; 175.04 soluble salts ; 144.96 insoluble salts ; 4414.64 lignin, etc. The large percentage of bitter principle and tannin, as well as the soluble salts, point to a drug that deserves a most thorough proving, in connection with which some inquiry into the beech itself would not be amiss.

ACTION.

The first attempt to get at the true action of *Epiphègus* was made by Dr. Ralph Morden, of Groveport, Ohio. A compilation of his work here follows :

PROVING OF EPIPIHĒGUS.

(1) Effects of a drachm of the tincture; (2) Effects of 1 drachm of the 1x; (3) Effects of half drachm of the tincture; (4) Effects of half drachm of the 1x; (5) The effects of the drug (dose not stated) on a friend who would not repeat the experiment on account of the headache caused; (6), Effect of overdose in a case of headache in Mrs. S—; (7) Effects of dosage in Mrs. D—.

Mind.—When writing could not make the desired letters.² Found himself using wrong words in writing.³ Sensation as though something was wrong in his head, especially in the forepart (morning after headache).² Fears death from the palpitation of the heart.⁶ Fears injury to her health from the drug.⁷

Head.—Pain in right temple.^{1,2} Slight pain in left temple, lasted until bed-time.^{1,2} Marked pain in right temple, with slight pain in left, which lasted for three hours, and left a dull heavy pain in the temporal regions, worse on the right side.¹ Pain in both temples as if from pressure of the finger-ends in the temporal fossæ, worse left side, and lasting from 3 P.M. until evening.² Piercing pains in right temple.² Headache in left temple during the night while in bed, especially on rising up.² Headache worse in right temple.² Pressing in right temple from without inward.⁵ Sensation of fulness in the forepart of the head.^{1,2} Severe pain in middle of forehead;^{3,4} came on suddenly and lasted only a few moments.⁴ Severe headache in forepart of head for several days.³ (Clinical) headache brought on by visiting and over-exertion.

External Head.—Scalp feels tight during the headache.³

(Notes by Prof. S. A. Jones.)

[NERVOUS HEADACHE.—*Vide Day. Headaches; their Nature, Causes and Treatment.* Chapter VII., Third edition. The victims of this species of headache are not equal to any unusual demand upon their energy; any slight departure from “the even tenor of their way” determines an attack. It is the headache of exhaustion—*neurasthenia*, as it is termed, hence the slight excitement of a visit, or a day’s shopping, or an unwonted over-exertion, exhausts their limited capital of energy and precipitates an attack.

Locality.—Anterior third of cerebrum. Notably the temples, and probably more markedly the right side.

Direction of Evolution.—From right to left, and probably upper right and lower left, thus following the physiological law of decussation. (This element affords valuable “internal evidence” as to the genuineness of a proving.)

Sensations.—Fulness (forepart of head); dull, heavy pain (ultimately becoming severe); *pressure from without inwards* (as if compressed with finger-tips); tight feeling of scalp.]

Eyes.—Could not read because the words seemed to be blurred.²
Smarting.²

(Note by Prof. S. A. Jones.)

[The proving is incomplete, as the pupils were not observed, but, *cæteris paribus*, pressure from without inwards denotes cerebral anæmia from vaso-motor spasm.]

Mouth.—*Saliva viscid.*^{1,5} Almost constant desire to expectorate.¹
Sticky, viscid taste in the mouth.^{1,2} Bitter taste in the mouth (secondary).²

(Note by Prof. S. A. Jones.)

[The adept will have seen before this that Epiphègus is unique, and that it is most distinctly distinguished from all other known remedies by the feature: *Almost constant desire to spit*; SALIVA VISCID.]

Heart.—Palpitation which makes her feel very weak.⁶

Stomach.—Nausea.³

Stool.—Passed with difficulty although the fæces were soft.³

Superior Extremities.—Pain in left shoulder.³

Inferior Extremities.—Pain in left knee.³

General.—Languid feeling.³

Aggravation.—Headache aggravated by working in the open air;² rising up in bed.²

(Note by Prof. S. A. Jones.)

[*Aggravation.*—On rising up from supine position. Walking in the open air. (If the pathology is correct which ascribes the symptoms in Epiphègus chiefly to cerebral anæmia (quantitative not qualitative), then the aggravating element is in *temperature*, not *motion*.)]

Amelioration.—After sleeping.² Morning.¹

(Note by Prof. S. A. Jones.)

(*Amelioration.*—A good sleep. (Simply a restoration of energy.)]

We see by this fragmentary proving that we have a drug of value, and one giving beside a few good characteristic symptoms. The following cases from practice show enough of the workings of the drug where the symptoms are indefinite, to prove to us that there is much more to be learned of its action by further provings, especially upon women.

CASES CURED BY EPIPHÈGUS.

1. Mrs. S——, æt. about 26. Nervous temperament. Slight figure; dark hair and eyes. For a long time has been subject to headache whenever she went from home a-visiting, or was subjected to any excitement, or from any extra physical exertion. The pain was through the temples, and all over the head; it was always accompanied by great nausea and vomiting, which did not relieve. Gave Epiphègus 3x, gtt. 5, in

water, twice a day between the attacks; and when she felt the paroxysm coming on I directed her to take the above dose every twenty or thirty minutes. She complained that the medicine gave her palpitation and made her feel very weak. Said she thought it would have killed her. I then reduced the dose. Result: Entire relief, and for a long time she would always carry her "headache medicine" with her when she went visiting, which she can now do with an immunity before unknown to her. This case occurred over a year ago, and only once has she had an attack, and then it was in a mild degree.—*Dr. Morden.*

2. Mrs. D——, æt. 35 or 40, consulted me last fall. Said she had been subject to "sick headache" from her girlhood whenever she went away from home, or underwent any unusual exertion. She had never found any relief until she had a night's rest. Prescribed as in Case 1. and did not hear from her for several months, when she said she was very much better, but had not continued with the medicine "for fear it would injure her health." Has since, under direction, continued the remedy, and is now entirely exempt from her headaches.—*Dr. Morden.*

3. Mr. N—— came in the night for medicine for his wife. Said she had come from town with a terrible headache. Could give no symptoms. Prescribed *Epiphègus 3x*, which entirely relieved after the third dose.—*Dr. Morden.*

4. Mr. K——, æt. 38, had been complaining of headache for some time. I had given *Nux vom.*, on account of gastric disturbances, with only temporary relief. *Epiphègus 3x* cured permanently after the second dose. "I have treated a number of other cases with marked benefit, and have not failed in any case where the headache was induced by going from home, or from exertion. Have tried it in cases of headache coming on at the menstrual period, but have failed to obtain any results."—*Dr. Morden.*

5. A lady had for years been a martyr to sick headaches. Almost without exception she would have an attack every time she went from home. Let her go to church—which she did regularly—go shopping, take a day's visit, entertain company at home, or in fact do anything which called for a little extra or unusual exertion on her part, and the headache was sure to follow. The pain was located in the forehead, there was a blurring of the vision, inability to sit up or go about, and great nausea attended by vomiting. A period of rest, like a night's sleep, always dissipated the trouble. I sent her *Epiphègus 3d* on disks, with the direction to take one disk for a dose when the first symptom of the headache was felt. Repeat the dose every twenty or thirty minutes until three doses were taken. Then stop and await results. For years this lady had seldom missed having an attack of headache once a week, and frequently several times a week. What was my surprise and delight to hear at the end of two months that every attack had been warded off by taking a few doses of the remedy. . . . My friend,

who has now used the remedy for over two years, reports that she has had but one attack of sick headache since using the remedy, and that was when she was out of it.—H. P. Holmes, M.D., in *Hom. World*, November, 1886.

6. B. M——, a lad of 10, awoke in the morning with a very severe frontal headache, so severe as to keep him groaning and moaning when not sharp enough to cause him to cry outright. He kept up a constant spitting of frothy saliva, and once remarked, "How my spit does stick in my mouth." He also complained of a taste in the mouth "like sour, greeny, mouldy bread." The pupils were dilated, his usually quite red cheeks blanched, and, as he expressed it, there was a "thick, sickly," full feeling in his throat. He also complained that yawning (which was quite a prominent objective symptom) made his head ache "twice as bad." I prepared and gave him a disk of *Epiphègus* 1x every twenty minutes for three doses. An aggravation followed the first dose, then a spell of quiet; greater aggravation followed the second dose, and I decided not to give the third. Relief of all symptoms soon followed, and no further complaint was heard. This was the first headache the lad ever had, except during a catarrhal cold, a type that always yielded either to *Bell.* or *Cul. carb.* The headache this time seemed to follow three day's excessive playing.—C. F. M.

VETERINARY DEPARTMENT.

INTRODUCTION.

THE publishers of this journal have decided that, as there is much valuable matter pertaining to the homœopathic treatment of dumb animals, in the foreign press especially, and as we have excellent success in the treatment of such cases, to open a department devoted to Veterinary Homœopathy. In this department attempt will be made to present actual cases, and to awaken, as much as possible, an interest in this practice among our practitioners. They realize how many suffering animals could be quickly and pleasantly relieved, and many valuable ones saved, did our physicians but feel, that though they may not be veterinarians, excellent prescriptions might be confidently made from the objective symptoms displayed, even though diagnostic ability may not have been gained by a thorough veterinary schooling. Contributions to this department will be thankfully received, with the hope that it can be made a valuable department.

CASES FROM PRACTICE.

Keratitis—Equine.—On the 7th of June I was called to a livery stable to see "Kitty," a valuable pacing mare, whose left eye was claimed

to be weeping. On examination, I found that lachrymation had been constant for about a week, during which the animal, most of the time, kept the lids closed, and was very shy on the approach of the hand to that side. Opening the lids, I found the lower portion of the cornea opalescent, and that there was an indentation about the size of a pin's head in its lower and inner portion. The sclerotic vessels were not inflamed nor injected. Photophobia was not great, except on first issuing from the stable, though light greatly increased the flow of substance from the eye. I was told that there was a little stringy exudation from the inner canthus every morning, and that the trouble had not seemed to affect the animal's "feed." I prescribed grain-doses of *Kali bich.* 6x, dry, upon the tongue, every three hours. No improvement was noticed until the third day, though the disease appeared checked. On the fourth day the other eye began to show symptoms (lachrymation) of the trouble, and the first seemed to grow worse. I then prescribed *Kali bich.*, 30 centesimal, gtt. 3, in a little water, every four hours. From this time improvement became marked, and on the eighth day of treatment all signs of the disease had disappeared.

C. F. M.

Moquillo (Pip)—Canine.—A dog from the River Plate (Brazil), property of Don Jaime Ginesta, captain of a merchant vessel, was brought to my place for examination. I observed that his nose was discharging freely, and that the alæ were glued with a sticky secretion; his muscles were stiffened, his movements stupid, and eyes dull, symptoms characteristic of the disease. Fixing upon a symptom which I had not noticed in any other animal suffering from this disease, nor in any treatise upon it, that inspiration was normal but expiration was short and quick, with a sound greatly resembling a cough, I questioned Señor Ginesta as to how many days he had noticed this; he answered, that for six or eight days he had noted that the animal was melancholy, and had a diminished appetite, and that he had used remedies that were advised during an epidemic of pip in the place from which the dog came, but as no benefit followed, he determined to call and get my opinion, it having been suggested to him that I would cure the animal if possible. I remarked that I foresaw a dismal end of the affair, as the disease was at a very advanced stage, and the symptom of expiration might be considered a fatal one; nevertheless, I would attempt homœopathic medication, as it had many recourses in cases of this kind. I chose *Spigelia*, 3d decimal, and ordered three doses to be given at intervals of an hour, and if relief followed to continue the same at intervals of two to four or six hours. This remedy not only relieved the principal symptom, but gradually removed all the others without the necessity of any other means, and in three days, much to the satisfaction of his keeper, the dog fully recovered.—Don Jose Blanch, in *El Consultor Homeopatico*, November, 1888.

Paraplegia—Canine.—Don Pedro Saguer, in the September, 1888, number of *El Consultor Homeopatico*, gives a case of a dog whose posterior half was totally paralyzed. The animal was unable to walk, wag its tail, or sit upon its hind-quarters; when an attempt was made to lift him he cried out as if from pain. *Arnica* 3 was given, to be followed by friction of the same over the affected parts. This was continued up to the ninth day, when a dose of *Rhus tox.* 3 was given and friction made with spirits of turpentine. On the tenth day the dog walked perfectly well, and has had no return of the disease.

Cerebral Concussion—Equine.—At the last manœuvring of the Grand Army Corps, the horse of a superior officer while leaping a ditch sustained a violent fall upon its head, soon followed by vertigo, which progressed until when on the streets the horse staggered upon and threatened to overturn carriages, and finally stood with all four legs wide spread, in which position he attempted to remain. These symptoms continued, until finally a loss of appetite set in, and I was consulted. I prescribed *Arnica* 1, hourly, 10 drops upon sugar. After ten days the sickness entirely disappeared.—H. Fischer, in *Zeitschrift für Homöopathische Thierheilkunde*, 11, 1888.

Intestinal Colic—Equine.—Don Pedro Saguer, in *El Consultor Homeopatico* for September, 1888, mentions a case of intestinal colic in a horse that was led to his office on the 7th of July. The animal suffered great pain in the bowels, caused by drinking cold water and standing thereafter while fatigued. Pulse weak, ears and legs cold, coat sweaty over the whole body, anxious and restless expression, and appeared to suffer greatly. *Aconite* 3 was administered; at the end of ten minutes the animal appeared more quiet, and manifested a cessation of pain; in thirty minutes the dose was repeated, and two clysters with soap and vinegar administered. At the expiration of fifteen minutes a dose of *Arsenicum* 6 was given, followed in a short time by a disappearance of the symptoms. The horse desired its food in the afternoon, and returned to its ordinary tasks.

Tympanitis—Bovine.—A cow belonging to Herr F., turned into a pasture of young dewy clover, was attacked with acute tympanitis. The attack was very rapid, and at the end of ten minutes the suffering had reached its height, so that the animal was scarcely able to keep upon its legs. Happily I was in the neighborhood, and therefore, forthwith upon the spot, prepared to puncture the abdomen, if it became necessary, with a knife (no trocar being at hand). In the meantime, I prescribed, every five minutes, 5 drops of *Colchicum* 6 in a spoonful of water. Only four doses in the space of twenty minutes were prescribed, when the animal was completely restored.—H. Feldmann, in *Zeit. für Hom. Ther.*, 11, 1888.

Diarrhœa—Psittine.—Frau von St. begged me one day to call and see her sick parrot. As I arrived at the lady's house I found Jocko in his cage, sitting upon his perch, his feathers ruffled and his eyes clouded; he appeared indeed an invalid. He had no appetite whatever, and the evacuations of the bowels were thin, watery, and slimy. The lady wept, as she expected to lose her pet, which had been in her possession for twenty years. I prescribed *Ars. alb.* 10, and ordered two globules to be put into the bird's bill every two hours. The next day, Jocko was better, his appetite had returned, and he called out to me, "Schön Dank Jocko." I gave him the four globules that remained for him from the day before, and allowed his food to be given him until he was satisfied. On the next day I dismissed him as cured, much to the joy of his mistress.—H. Fischer, in *Zeit. für Hom. Thier.*, 10, 1888.

Parasites—Gallinine.—The bird-mite (*Sarcophaga mutans*) grows to the greatest perfection on fowls; it however travels from these upon other animals, even to man. It is very small, being but one-third to one-half a micromillimeter long. It multiplies particularly fast in summer, and lives in the squamous portion of the epidermis, upon the comb, and under the horny plates of the feet. Animals affected with this mite become covered at the points of attack with a corneous membrane, forming thick crusts, inducing tumefaction, and malposition of the feathers. The mites live in groups under the epidermis, in the same manner that the itch-mite does in man. Upon longer duration of the affection, the suffering emaciates the fowls until finally they die of tuberculosis.

One should know, that when horses kept in the neighborhood of hen-roosts first begin to rub violently and chafe, that it is most likely this mite that is to blame for it, and not some other parasitic animal like the louse.

The success of the treatment in both the fowls and the horses depends upon killing the mite, and through its death only can such a disease be cured. To accomplish this, embrocate with Benzine. Such poultry-raisers as have washed the animals well with creolin soap have found that it killed the mites effectively.—H. Fischer, in *Zeit. für Hom. Thier.*, 10, 1888.

THERAPEUTICS.

Lobelia Inflata—a New Sphere of Action.—Dr. R. T. Cooper, in the *Homœopathic Review*, 1888, p. 717, says: "My acquaintance with *Lobelia* may be said to date back some twenty years. Prior to this period I had used it, but never with that success that its provings led me to anticipate. About this time I fell in with Mr. Ashworth, of Southampton, an herbalist, whose success I had known to be very great

in the treatment of many apparently hopeless cases of disease. I put the very plain and direct question to him, How is it that you obtain such good results from *Lobelia*, and that I am invariably unsuccessful with it?

His reply was perfectly satisfactory and noteworthy: "I use," said he, "a solution of the lobelia, made with common vinegar." I therefore determined to put this acetous preparation to the test of experience, and may safely say that from that time to the present there have been but few days in which I have not resorted to the *acetum lobelie inflatæ* as a remedy. Consequently, I claim to be in a position to speak with authority on the subject.

On further interrogating my friend, the herbalist, I was surprised to find him expressing himself in regard to *Lobelia* in a manner almost exactly similar to what we were in the habit at that time of doing regarding *Sulphur*; for example, he claimed for *Lobelia* that it changed the character of a disease, that the interposition of *Lobelia* during the treatment of a diseased state, rendered the patient more susceptible to the influence of other remedies, and that it might be given with advantage in all forms of disease.

Upon making trial of it I found there was some ground for his assertions, and that in some cases, *e.g.*, in tubercular meningitis, and in mesenteric disease of childhood, it really had an influence over and above what might be expected from the provings.

Soon after coming to London a case came under my care which caused me considerable anxiety. The notes taken at the commencement were as follows:

L. N., aged 23; ill three years; occupation at home; mother weak but not delicate; consumptive history from both parents; patient of a nervo-sanguine temperament; complexion bilious; reddish hair; admitted to a dispensary then held at Notting Hill, 27th July, 1874. Diarrhœa; last year was in bed continuously during the months of July, August, September with this affliction, and has been under constant treatment since the beginning of last year.

Three years ago, went to stay in Lincolnshire, and there got diarrhœa which could not be stopped; returned to London, and in spite of this change of abode the diarrhœa persisted.

At 14 to 15 years old used to have severe pains in the left and sometimes in the right side, and round the lower abdomen, with faint feeling till monthly period came on regularly, and from then up till 20 years old was in good health.

Symptoms run thus: Pain all round the abdomen, and up the back, very much worse after taking off her clothes, and a feeling of exhaustion or falling to pieces inside and out; cannot bear anything to touch her.

Every day four or five motions, even when taking medicine; if she leaves it off, continual motions all day long; it literally runs from her. Motions generally watery, sometimes light-colored, sometimes dark,

never bloody. Monthly period very irregular, sometimes five or six weeks between, generally lasts but two days. Aggravation of all the symptoms, especially of the diarrhœa, at these times; very much tenderness over all the abdomen, the tenderness is principally in the ovarian regions. Legs ache fearfully, pains all over the body, faints continually. Subject to neuralgia of the face, sometimes right, sometimes left, sometimes both sides, and the pains extend to the chest, and have troubled her since she took ill. The neuralgic pains come at all hours of the day and night, and come and go suddenly, but has been free of them for the last month. Tongue clean, appetite generally bad, but sometimes very good. Prescribed *Ac. sulphur.* 3x.

31st July. Is better, if anything. Shooting, aching in the right side of the face, and aching diffused tenderness with soreness in anal and vulvar regions, preventing her sitting down (an old symptom). It would be superfluous to go on giving weekly reports; the apparent benefit from sulphuric acid soon wore off; in a subsequent occasion *Hydrastis* seemed to act beneficially, and caused her to feel stronger; and *Graphites* 3x seemed to lessen the local pains; these effects, however, are hardly worth noticing, and the record of other drugs was simply that of return of all her most violent symptoms, after, it might be, temporary amelioration.

The discharge poured away from her night and day, and no prescription could be said to have proved distinctly remedial. As to astringents, I did not make trial of them, for these had always made her state unbearable when under allopathic treatment, and the patient's preference for my treatment arose from its enabling her to get on without them.

Perhaps I should add that good draught stout up to this time had relieved her to a greater extent than any more truly medicinal agent.

The symptoms were so complex and confusing that it seemed to me a case typically suitable for one well acquainted with repertory work; accordingly I requested my patient to place herself under a well known and skilful repertorian. For three months she remained under him, and returned to me not in the least improved.

Soon after this she was admitted into an hospital for women, where an irritating pile was discovered high up in the rectum, and removed.

This was to be the solution of all difficulties; and indeed after this she improved for a time. The amelioration proved, alas! to be quite temporary, for on getting up from bed she became worse than ever. The vagina as well as the rectum began to discharge copiously, the adjacent parts becoming excoriated. This went on night and day, and rendered her a complete invalid in every sense.

On reviewing my notes of her case, I was struck by the fact that the only remedy which had appeared to give her decided relief was *Lobelia*, and I determined therefore to give it in doses of eight drops of the acetum, well diluted, thrice daily. The effect was almost marvellous.

From the moment of taking it she began to improve, and in a few weeks was quite well. She is now and has been for some eleven years a healthy active woman, earning her bread as a hospital nurse.

A year or two after completing the treatment of this case, a lady, aged 52, was placed under my care, who appeared to suffer in a somewhat similar fashion. Here, however, the entire vesico-vaginal region was affected. This lady had been under the best homœopathic treatment during the nine months, in which she had been, she assures me, completely bedridden, and no one prescription gave her the least relief during this time, except a palliative effect from *Apis mellifica*.

The history of her case is particularly instructive. At 37 years old was exposed to a severe chill, which checked the catamenial flow; after this had threatened phthisis with bronchorrhœa, which after two years gradually went off, leaving her subject to severe constantly recurring seizures of vertigo. Nine months before coming to me, felt as if something were forming in the utero-vaginal region, causing much bearing-down. Was obliged to go to bed, and then there occurred a profuse pouring away of apparently serous fluid from the utero-vaginal and vesical mucous membranes, with paroxysms of agonizing burning and scalding, coming on chiefly in the evening. The vagina was swollen, extremely tender, and bathed in moisture, and urination was always very painful and followed by a paroxysm of general scalding. She was unable to sit up, and decubitus could be maintained only with the knees drawn up or on the left side. At night she would be awoke by finding her back resting in a pool of water, and the sense of general bearing down in the uterine region was almost intolerable. The bowels were unaffected, and the urine was free from all but a very slight trace of albumen. A hardness and dulness to percussion existed down the right side of abdomen.

In this case I cannot say that *Lobelia* was entirely instrumental in effecting a cure, but certainly it was the agent that broke down the severity of the paroxysms and that lessened and finally prevented the excessive discharge. It was here given in doses of a $\frac{1}{3}$ of a drop of the *acetum* every fourth hour. The sense of bearing down, for example, was most relieved by small doses ($\frac{1}{3}$ drop) of *soda chlorata*, the *hypochlorite of soda*. Still, I can aver that from the time of beginning with *Lobelia*, not a single day was passed in bed, and that from then till now she has been quite free from her old symptoms, except that a slight weakness is still felt every autumn in the lower abdomen. Her health generally has been better than for the fifteen years previous to her illness.

The writer goes on to state that the good effects of *acetum lobeliæ* are most evident where there are serous discharges, especially those associated, as is often the case, with serious affections of the uterus and its appendages. He also claims it to be an antipsoric, and an excellent remedy in the suppression of natural and also morbid discharges, especially

those of a catarrhal nature, and herein we believe great good can be gained from careful clinical experience with the drug; the dosing, however, should be very carefully proceeded with, as alarming symptoms of depression will often follow the giving of even apparently moderate doses.

Robinia in Gastric Cancer.—Among the many remedies overlooked in practice, is *Robinia*. It is the only remedy that, in my hands, has ever modified the intensely acid vomiting in cancer of the stomach. In four cases of this disease—diagnosis confirmed by autopsy—the robinia held this acidity thoroughly in check, and did much to ameliorate the sufferings of the hopelessly sick. In many cases of acid dyspepsia, it has been highly curative. Have used only the 3d dilution.—A. L. Fisher, M.D., in *Homœopathic Journal of Obstetrics*, November, 1888.

NOTE.—*Robinia* is a very near relative of *Trifolium prat.*, which has, in domestic practice, so often relieved symptoms caused by gastric cancer.
—C. F. M.

Sinapis alba.—Dr. A. L. Fisher says of this drug: For several years *Sinapis alba* has been in quite frequent use by me and some of my medical acquaintances, whose attention I have called to this truly useful and often indicated remedy. Allen gives the symptoms on which we have based our prescriptions. Symptoms 33 to 41, inclusive, 58, 87, 91, 98 and many more that are so closely similar that they really amount to repetitions.

Add to these, as clinical observations, verified repeatedly, ulcers throughout the mouth, especially upon the tongue, with violent, burning pain, and the whole buccal cavity so sensitive that even the blandest food or drink is unbearable.

The two following cases are fairly typical and illustrate its sphere of action as well as would a dozen:

Mrs. —, pregnant eight months. Has taken no exercise for weeks; instead, has sat in a cushioned rocker from morning to night for many weeks, though she is a strong, healthy woman.

After another physician had been in attendance without any material benefit to patient, I was called in to relieve her of the following symptoms: Burning in the stomach all the time, extending up the œsophagus to throat and mouth, the latter full of "canker sores," and mouth, throat, and stomach burn fearfully whenever she takes any food or drink. *Sinapis alba* 2x was given with almost magical effect, curing her rapidly and completely. She continued to rock till labor set in, which I terminated with forceps. Child was plump and well.

In a social letter to me Dr. C. F. Ellis, of Ligonier, Indiana, writes as follows: "Made a most beautiful and rapid cure with my preparation of *Sinapis albas*. She was a lady with a three-months-old child, who had

been suffering intensely with sore mouth accompanied by hot, burning, sour eructations. Had been under old-school treatment all the time (three months) without any relief. The burning started in her stomach and would come up throat and mouth, with sour eructations. The mouth was very sore all over, with little white points surrounded by red mucous membrane. Gave *Sinapis alba* 3x three times a day. The sour eructations stopped the first day. The mouth was entirely well on the third day.

The homœopathicity of the drug to these cases cannot be disputed by any person of average intelligence who will compare the symptoms given with those I have referred to in Allen's *Materia Medica*.—*Hom. Jour. of Obstetrics*, November, 1888.

Cases of Sycosis Healed by Antimon. Tart. 200.—C. B—, 11 years old, a cloakmaker's daughter, 4th January, 1888; had a pustulous eruption upon the right cheek, composed of clear pustules like chickenpox, almost the size of an English crown. This eruption had already continued seven or eight years, and the efforts of allopathic practice found useless. The child looked healthy and vigorous. I gave *Ant. tart.*, 200 in water with a little spirit of wine and half a drachm of tincture of Tangier's orange peel to render it more durable (!) strict injunctions were given to keep the remedy in a dark and cool place, and to take a teaspoonful nights and mornings. She took the liquid until the 8th of February—until every trace of the disease had disappeared. No outward remedies were applied. *Diet.*—Ham, sausage, and pork were forbidden. Plentiful enjoyment of fruit and vegetables, as well as the juice of half a citron or more in water daily, were allowed. The disease has not since returned.

E. G—, 14 years old, a blacksmith's little daughter, 26th December, 1887; had a muco-purulent eruption, from her birth, upon both nares. Since 14 days whole ranks of pustules appeared upon the nose and upper lip, so disfiguring it that she was compelled to cover her face with a thick veil to avoid observation. The same treatment as in the previous case.—Th. Wilson, M.D., in *Allg. Hom. Zeit.*, November, 1888.

Theridion.—During my residence in Cheltenham, England, I was called to attend two sisters, both suffering from measles. Up to the fifth day, the cases seemed to be of the ordinary character, but on the sixth, seventh and eighth days, the patients becoming steadily worse, I was asked to re-visit them, when I found the following state present: High fever, rapid pulse, great thirst, *with desire for wine or beer*; restlessness, complete sleeplessness caused by a feeling of intense *giddiness*, directly the patients attempted to *close their eyes*; frequent convulsive cough, during which their heads were spasmodically jerked forward, the knees at the same time being jerked up toward the abdomen.

Their whole state gave me great anxiety, as I have seldom seen patients, after measles, so ill. *Theridion* 200 (Leip) in water, one tea-spoonful every two hours, produced, within twenty-four hours, tranquillity, sleep, perspiration; on the second day of the remedy, the dose interval was lengthened. Both made a rapid recovery. The cough mentioned above is peculiar; it disappeared under the influence of *Theridion*. The patients were total abstainers, but craved the stimulants during the attack.—B. Simmons, M.D., in *Hom. Phys.*, Dec., 1888.

ITEMS OF GENERAL INTEREST.

Detection of Sugar in Urine.—The conclusions of Dr. Fowler, in regard to glycosuria are as follows: (1) Normal urine contains no sugar. (2) The reducing power of normal urine upon cupric oxide and picric acid, is due to uric acid, $\frac{1}{4}$, and kreatinin, $\frac{3}{4}$. Both these bodies are removed by adding to the unconcentrated urine one-twentieth its volume of a cold saturated solution of sodic acetate, and then one-fourth its volume of a cold saturated solution of mercuric chloride. (3) Any reduction of either cupric oxide or picric acid, after this manipulation, is due to the presence of sugar. (4) Sugar may persist in traces, unaccompanied by the diabetic element (chronic or temporary glycosuria, produced by a rapid absorption of an excess of starchy or saccharine food, slight nervous derangement, physical exercise, etc.). (5) Diabetes may be warded off by recognition of the first appearance of sugar as a persistent ingredient of the urine. (6) The detection of traces of sugar in the urine requires skill and care, and a low specific gravity should not be considered conclusive evidence of the absence of sugar.—*The Dietetic Gazette*, October, 1888.

Pasteur's Inoculations.—The "Annals of the Pasteur Institute," of September 25th, contains a remarkable case of death from hydrophobia, occurring in a patient of M. Pasteur, twenty-seven months after the bite, and twenty-six months after M. Pasteur's inoculations. These "Annals," it should be noted, contain the official record of the proceedings of M. Pasteur and his *collaborateurs*, and the following is a translation of what they had to say as to what was, up to the last week of September, their latest failure:

"PERSON TREATED DEAD OF HYDROPHOBIA.—Alphonse Sinardet, twenty-six years of age, a husbandman at Poillot, Department of Ain, was bitten, the 26th April, 1886, in the little finger of the right hand, having three wounds on the outer side. The dog which bit him, attacked some other dogs and also a child, after which it disappeared. The bites were cauterized with a red-hot iron, two days after. Sinardet was treated

(at the Pasteur Institute) from the 3d to the 12th of May, 1886 (seven days after the bite.) On the 24th of July, 1888 (twenty-seven months after the bite), following upon a chill, he felt in the bitten arm a pain, which began at the little finger, and extended to the shoulder and the right side. Next day there was difficulty of swallowing. On the 27th the patient was removed to the Hotel Dieu de Bourg, suffering from convulsive hydrophobia. On the 28th July, he died. Sinardet's case belongs to the statistics of the year 1886." Of course, until the date of his symptoms he had been counted as one of the cases cured.—*Hom. World*, November, 1888.

Pustula Maligna and Anthrax—Their Local Treatment with Ipecacuanha.—Dr. Edwin Muskett reports that he has successfully treated during the last fifteen years 50 cases of malignant pustule. In the five cases which he singles out, he invariably had excellent success, inducing a decided amelioration of the general condition within a few hours; the delirium ceases, fever diminishes; the pustule becomes smaller the next day, the eschar loosens, and the wound heals rapidly. The doctor contrasts these good results with the method of energetic cauterization, and declares cataplasms to be absolutely dangerous.

Just as quinine is a specific for intermittents, and mercury for *lues*, just so the writer declares ipecacuanha to be a specific for malignant pustule and anthrax. The fact that similar good effects do not obtain in furuncle, is accepted as evidence that anthrax and furuncle are not identical.

Muskett mixes the powdered ipecac with water and glycerine to a paste, using more glycerine than water, this paste is then spread direct upon the pustule and its surrounding œdematous tissues. Internally he prescribes at the same time 2 to 3 grains of ipecac, twice or thrice daily.—*Allg. Hom. Zeitung*, December 6, 1888.

A Case of Arsenical Paralysis, with Symptoms of Locomotor Ataxia.—The following case of *arsenical* paralysis, narrated by Dr. Peterson, of New York, in the *New York Medical Record*, August 4th, with unusual symptoms of locomotor ataxia, is of interest:

"E. A. D.—, female, 42 years of age, admitted February 15th, 1887. A week or ten days after a second marriage in November, 1886, she became acutely melancholic and made several attempts at suicide. Father and sister insane. A week after the onset of melancholia the patient took a tablespoonful of 'Rough on Rats,' which is a mixture of *arsenious acid* and starch paste. Vomited two or three hours afterwards, the vomiting continuing the first night and following day. In a day or two she had hæmorrhages from the bowels. Paresis of all four extremities was manifested in two or three days, and gradually grew worse.

For weeks afterwards she complained of 'crampy-pains' in feet, calves of legs, hands, and abdomen. On admission these pains were still severe, and she had no use of arms and legs. There was great muscular atrophy, marked *arsenical* tremor, no patellar reflex, no anæsthesia or analgesia, but a slight hyperæsthesia.

"Feb. 17th. Hands and feet feel numb and have a prickling sensation in them. Has had itching feeling over body and limbs, formication in feet, and the sensation of a cord drawn tightly round her waist. 'Throat felt as if gone at times' (anæsthesia). At present in bed. Legs are flexed and somewhat contracted, extension causing great pain in flexor muscles and tendons. No tenderness over spine at any point. *Muscæ volitantes* often. Drop wrists and ankles. Faradic reactions of nerves and muscles of limbs lost. A general treatment was begun with *iodide of potash*, massage, and electricity, which was continued throughout the case.

"Feb. 25th. Subject about once daily to a fainting spell, lasting some fifteen minutes, with dyspnœa. Cardiac sounds feebler than normal.

"March 6th. Feet slightly œdematous. Urine examined now and at other times for sugar and albumen, with negative result.

"March 19th. Begins to move fingers and feet somewhat better.

"March 25th. Able to feed herself and is trying to knit. Pains in extremities still great at times.

"April 19th. Gradual but very slow increase of motor power. Gaining in flesh. Feet much swollen.

"May 17th. Walks a short distance alone.

"July 16th. Sews, knits, writes letters, but fingers still straighter than normal, and tremor still very marked. Cannot flex fingers into palms with ease or force.

"August 30th. Walks without assistance any ordinary distance. Motor power still increasing gradually. Tabetic gait.

"September 26th. In bed several days: weak, feverish, great increase of muscular tremor, vertigo, accelerated pulse, nausea, anorexia. (A crisis?)*

"November 15th. Still suffering from effects of relapse. Up only afternoons. Cannot walk as well as formerly, but gaining.

"December 2d. Walks now as well as at any time since residence in the hospital, and seems quite strong.

"January 7th, 1888. Has tabetic gait and an entire absence of the tendon reflexus (the break in the reflex is on the sensory side). Use of arms also imperfect. Legs slightly œdematous.

"January 21st. Physical condition improved.

"February 16th. Œdema of lower extremities has disappeared.

* We would say, No! The symptoms now and up to last date of record show plainly the effects of *iodide of potash*.—C. F. M.

“March 11th. Able to walk a little more steadily.

“March 13th and 14th. Attacks of acute indigestion; diarrhœa, nausea, and colic.

“March 26th. Has apparently passed through one of the gastric crises of locomotor ataxia with an unusual amount of tremor, which is still present when she sits up.

“April 17th. Discharged. Patient lost her hair to a considerable extent, and was cachectic. There are some points of difference between this case and those of Seligmüller and Dana. The occurrence of two apparent gastric crises is particularly noteworthy. There is no reason, in my opinion, why arsenic should not attack the spinal cord as well as the peripheral nerves, and produce a condition very much like true locomotor ataxia.”

The Treatment of Obesity.—Dr. I. Burney Yeo, in the September number of the *Nineteenth Century*, in discussing the Schweningen (Oertel) treatment of obesity, concludes as follows :

The consumption of alcohol favors polysarcia; so, also, does an indolent, inactive, luxurious life. Alcoholic stimulants restrain waste on well-known principles, and an indolent life promotes accumulation of force-making materials far in excess of expenditure.

That, the “Banting” system, rests on an erroneous scientific foundation, which overlooks the fact that fat can be formed out of nitrogenous food, out of the lean of meat, for instance, as well as out of carbohydrates. “Not only does it often induce subjective feelings of discomfort and bodily feebleness, a great loathing of the constant and exclusively meat diet, as well as digestive disturbances, which necessitate its interruption, but it fails, in the more serious cases, to relieve the feebleness of the heart, the tendency to congestion of the lungs, and even dropsy, which complicate the graver forms of excessive corpulency.” Ebstein’s “cure” allows all kinds of fatty food,—the fat of meat, butter, cream, fatty sauces, and soups,—but prohibits the carbo-hydrates, such as sugar, potatoes, and all forms of starchy food, and of bread permits, at most, three and a half ounces a day. All kinds of meat in small quantity, as well as asparagus, spinach, and cabbage, are permitted. Dr. Yeo remarks that the success which has attended the Ebstein method must be referred mainly to the abstinence from the carbo-hydrates which it enforces, but it is hardly sufficiently supporting, and fails to relieve the heart-disturbances which attend extensive obesity.

The Schweningen (or rather the Oertel) method not only provides for the removal of excess of fat, but it also prevents its re-accumulation, and at the same time restores tone to the organs of circulation, which so often, in cases of excessive obesity, is lost. Oertel’s system agrees with those above given in reducing the carbo-hydrates in the diet of the obese. It allows more fat than the Banting formula, and nearly twice

as much albuminous food as Ebstein's, less than half as much fat as the latter, and about twice as much carbo-hydrates. "This amount of fat and carbo-hydrates is admissible in those cases where active exercise can be and is taken, as muscular exertion is attended with a considerable destruction of fat, and the relative excess of albuminous food in this formula leads to the displacement of the fat accumulated in the substance of the muscles, and to a new formation of muscular tissue in its place. At the same time, this diet protects the nitrogenous tissue from waste, a condition of health which is lost sight of in Ebstein's method; indeed, the central idea in this cure is to *strengthen the muscle of the heart*, and this is aimed at, not only by a carefully considered dietary, but by the prescription of regular active bodily exercise and suitable gymnastics.

This method is somewhat modified in the management of those grave cases where the accumulation of fat about the heart has led to great embarrassment, or perhaps degeneration, of that organ, and to subsequent visceral congestion, and even to dropsy. In such cases, the fat and carbo-hydrates of the food are still further reduced, and the amount of fluid consumed is severely restricted, and perspiration is promoted by vigorous bodily exercise, especially in climbing graduated ascents. The following, then, are the objects aimed at in this cure:

1. To improve the muscular tone of the heart.
2. To maintain the normal composition of the blood.
3. To regulate the quantity of fluid in the body.
4. To prevent the deposit of fat.

These objects are attained by the following means:

1. The muscle of the heart is strengthened by enforced exercise, such as *climbing heights*. This requires great care, and the exercises must be *graded*, the amount of work being increased as the patient can bear it.

2. To preserve the normal composition of the blood the food should be chiefly albuminous. It may consist of the lean of roast or boiled beef, veal, mutton, game, and eggs. Green vegetables (as cabbage or spinach) may be taken; fat and carbo-hydrates only in very limited quantities; from four to six ounces of bread per diem.

3. To regulate the quantity of fluid in the body the amount of fluid drunk daily must be limited. One cup (rather less than six ounces) of coffee, tea, or milk morning and evening, and about twelve ounces of wine, and from eight to sixteen ounces of water, shall comprise all the fluid consumed in twenty-four hours. Beer is entirely forbidden. The discharge of fluid from the body is promoted by active exercise, and occasionally by a course of baths, with packing.

4. To prevent the deposit of fat the principles of diet already set forth must be carried into practice as follows:

Morning.—One cup of tea or coffee, with a little milk, altogether about six ounces; bread about three ounces.

Noon.—Three to four ounces of soup, seven to eight ounces of roast or boiled beef, veal, game, salad, or a lighter vegetable, a little fish (cooked without fat) if desired, one ounce of bread or farinaceous pudding (never more than three ounces), three to six ounces of fruit, fresh-preferred, for dessert. It is desirable at this meal to avoid taking fluids, but in hot weather, or in the absence of fruits, six to eight ounces of light wine may be taken.

Afternoon.—The same amount of coffee or tea as in the morning, with, at most, six ounces of water, an ounce of bread as an exceptional indulgence.

Evening.—One or two soft boiled eggs, an ounce of bread, perhaps, a small slice of cheese. Salad and fruit, six to eight ounces of wine, with four to five ounces of water.

Such, briefly summarized, are the principles of this peculiarly German anti-fat regimen, for which, as Dr. Yeo rightly affirms, the credit almost entirely belongs to Professor Oertel, the main features of it having for years been set forth in his writings. These principles seem to commend themselves as sound, though their practical application will require continued modification to adapt them to the stage of the affection, to the constitution and habits of the patient.—*Boston Medical and Surgical Journal*, September 20th, 1888.

Yellow Fever.—Dr. Sternberg, who is investigating yellow fever in the South under governmental orders, found, while visiting the Hospital Garcina at Havana, that the contents of the stomach, intestines and bladder of the sufferers was highly acid. Deciding, therefore, that the peculiar micro-organism of the disease must require a fluid of such reaction for its development, he formulated the following as a bactericide in these cases :

R. Sodii bicarbonas,	. . . . .	grs. Cl.
Hydrargyri chlor. corr.,	. . . . .	gr. $\frac{3}{4}$.
Aqua,	. . . . .	Oij.
M.—Fiat sol.		

and advocated the dosage of $1\frac{3}{4}$ \mathfrak{S} , hourly, the solution to be given ice-cold. Dr. Francis Cabera, the hospital director, tried this treatment in twelve cases, all of which recovered, while, of eight cases conducted in the usual way, five died.

Vaginal Alimentation. (*Weekly Med. Review*).—1. The vagina may be used to supplement rectal feeding.

2. When the entire alimentary canal is disabled, the vagina may be used advantageously for feeding.

3. For the rectum or vagina the food must be thoroughly digested previously to being used.

4. The vagina may often be utilized for medication, saving the stomach for food.

5. The vagina is made more tolerant than the rectum, and can be utilized for an almost unlimited time without revolting.

BOOK REVIEWS.

A Rejoinder to Dr. Hughes. By Prosper Bender, M.D., Boston.
From the writer.

“In truth, dear Dr. Hughes, you have sought to give your readers an easy system of homœopathy, a dependence upon which will frequently lead to professional failure. Your system is, in a measure, the old-school generalization, exempting one from the laborious method of the differentiating of the elements of the case and of drug-action.”

Secondary Mixed Infection in Typhoid Fever. By Bayard Holmes, M.D. Reprint from *Western Medical Reporter*, September, 1888.

The text of this article is based upon the supposition that “pyogenic and other forms of infection take place through the primary lesion, and result in more than ordinarily serious consequences on account of the diminished resistance of all the tissues of the body.”

Headache and its Materia Medica. By B. F. Underwood, M.D.
A. L. Chatterton & Co., New York. Pp. 212.

In the opening chapter on headaches, the author divides the affection into seven classes, “according to the exciting causes from which they spring:” 1. anæmic; 2, hyperæmic; 3, nervous; 4, reflex; 5, rheumatic; 6, toxic; 7, catarrhal. These classes will, of course, intermix to a greater or lesser extent, still the classification is a good one, and had he arranged his text on the different remedies more or less in the same grouping, and given us an index, the work would have been a very useful one. As it is, he has—beginning with *bell.*, and ending with *na-crurum salicyl.*—thrown the remedies together with an idea, evidently, of arranging them according to their most frequent use, a very doubtful method, and in the end given the reader no index whatever to find them by. Leafing over 150 pages to find what one seeks, is laborious and wasteful exercise.

The repertorial pages are not sufficiently comprehensive, while the arrangement of the “sensations” is as unsatisfactory as that of the remedies themselves. To commence a list of symptoms with “feels as if,” or

"as if," furnishes no guide in our search. "As if a nail were thrust in," should begin with the word "nail." *Arnica* stands alone with the symptom, "sensation as if in a thick, smoky atmosphere," should begin with "smoky;" "sensation" already heads the page. Over nine pages are thus *arranged* without a key.

The matter in substance is really good, especially in the citation of cases under some of the remedies; but, as "a help to the busy practitioner," the book does not "fill a long-felt want."

The Homœopathic Physician's Visiting List and Pocket Repertory. By Robert Faulkner, M.D. 2d edition. Boericke & Tafel, New York and Philadelphia.

Besides the admirably arranged, perpetual, daily engagement and prescription record, for thirty-eight patients per page, this list contains among its ruled pages, the usual obstetric, death and vaccination records, address-sheets, and by an ingenious device, a packet of interchangeable memoranda pages for bedside records. The printed pages merit especial praise, first in eighty pages of clearly typed and well arranged "Repertory," so often valuable in giving hints at a time when they are most needed; a pulse table; Marshall Hall's method in asphyxia; a table of poisons and antidotes; an obstetric calendar; and reference calendar for 1887-1890, complete. This handy list which, notwithstanding its 250 pages, is only five-eighths of an inch thick.

Visiting List and Prescription Record, Perpetual. Otis Clapp & Sons, Boston.

Again we welcome this handy companion, with its 125 pages of visiting and prescription lists, arranged for thirty patients per page; its fourteen pages for fever record; its consultation list; and obstetric, death, vaccination and address sheets. The special feature of the printed pages is an abbreviated and numbered list of remedies, very useful in keeping a record of the drug given on each prescription or visit. Beside the usual calendar, obstetric, poison and pulse tables, some valuable hints are given on dentition and disinfectants, making in all a very complete pocket-book of its type.

Transactions of the Forty-first Session of the American Institute of Homœopathy. 1888. Edited by Pemberton Dudley, M.D. Pp. 820.

This volume contains its usual quota of well-written articles contributed to its different bureaus. The report of the Bureau on Proving is especially interesting. The editor is to be congratulated upon the excellent typography of the volume, as well as upon his meritorious compilation of reports and articles.

PUBLISHERS' DEPARTMENT.

The New Work.—Dr. Timothy F. Allen's long looked for work the **Hand-book of Materia Medica**, is now going through the press as the Publisher announces. It will make about 1400 quarto pages, which is equivalent to about 3000 octavo pages. The selling price is not determined yet, but will be between \$15.00 and \$20.00. Messrs. Boericke & Tafel are, however, prepared to furnish subscribers already in, and those who may send in their names before the book is completed, a copy for \$15.00 net. Send name to 1011 Arch St., Philadelphia, Pa.

A New Remedy for Syphilis.—

BOGOTA, November 24th, 1888.

MESSRS. BOERICKE & TAFEL, NEW YORK.

DEAR GENTLEMEN:—Please to accept the leaves of a tree of the Bignoniacea family, called Jacaranda Gualandai, that I send you with this, because it is very much used by our natives to cure illness of a syphilitic character. I have used the mother tincture (5 drops *pro dosi*), and the 3d dilution of it in the treatment of blennorrhagia and chancroids with the greatest success. In my experience I have found that this medicine is a complementary and antidote to merc. v.

Mr. José M. Reyes, who proved the θ and the 3x dilution during more than one month three times a day, found the following results:

HEAD.—Vertigo on rising after stooping, with momentary loss of sight, and sensation of heaviness in the forehead. Weakness of memory and inability to study.

EYES.—Pains and inflammation of the eyes, with redness more marked in the left eye. Sensation of sand or forcing body in both eyes. Ophthalmia, which begins in the left eye, with lachrymation and night agglutination of the eyelids. Weakness of sight. Syphilitic-like ophthalmia.

STOOL.—Diarrhœa with dark mulberry-colored stools without pain or tenesmus, but with mucus.

URINARY AND SEXUAL ORGANS.—Increased secretion of the urine. Pain in the penis. *Blennorrhagia* with a discharge which stains the linen of a dirty yellow color. *Chancroids*.

THROAT.—Pain and burning of the larynx, when laughing or reading loud, and small vesicles in the pharynx.

BACK.—Weakness of the lumbar region.

These are not doubtful symptoms.

N.B.—This remedy acts on the head at first, afterwards on the intestines, and on the eyes last.

Please try it, and make it known to our colleagues. Should it prove to be there as good as here, I assure you it will be a valued remedy.

Truly yours,

DR. JULIO F. CONVERS.

Pyrogenium.—Along with a great deal of affirmative testimony as to the great value of *Pyrogenium* in typhoid and other fevers and blood poisoning, we have received the following letter from Dr. St. Clair Smith, of New York City, giving another view of the matter:

“Since reading the article on ‘Pyrogen, or Pyrexin, in Typhoid Fever,’ which appeared in the next to the last number of your journal, I have had an opportunity to test it in a case of *real* typhoid fever, and I must say that after giving it what I consider a fair trial—gave it continuously for five days—I am not as much inclined to be enthusiastic concerning it as I was before I tried it.

Of course I don’t feel that I ought to condemn it, but I am strong in the belief that it is of little or no value in real typhoid fever, and that on further trial it will be found that it will not shorten the duration of the disease one hour. I also believe that it will soon fall into disuse, unless it is proved like any other drug, and an accurate symptomatology obtained.

The case I gave it to was one of relapsed typhoid. The patient had passed safely through one of the worst attacks of typhoid I have ever seen, and when I felt that she was well out of the woods, her temperature and pulse began to rise, and at the end of a week she was in the toils of the monster, with all the features of the disease—eruption tympanitis, subsultus, etc.—well established.

It was about this time that I saw the article on Pyrogen, and I lost no time in getting from Messrs. B. & T., some of their tablets of the 6th. I dissolved half a dozen in a half a glass of water and gave the patient a teaspoonful every two hours, and patiently waited for the temperature to fall.

After waiting until it fell from 102° to 105.55°, and remained at this point for three days with only a fall of a fraction of a degree towards morning, I came to the conclusion that this was not the kind of typhoid that Pyrogen cured, and discontinued it.

When I first read the article, I confess to a considerable doubt concerning the nature of the cases mentioned by Dr. Burnett—and he himself, I notice, is cautious about committing himself in regard to diagnosis.

I hope he will pardon me if I say I don’t believe they were cases of typhoid fever, for not one of them has the ring of the true metal.

Yours truly,

ST. CLAIR SMITH, M.D.

NEW YORK, December 10, 1888.

We gladly publish Dr. Smith’s interesting letter as a contribution towards a true knowledge of this remarkable remedy. We have already given in this place the testimony of Doctors Burnett and Shuld-

ham, of England, Kuersteiner, of North Carolina, and Fulton, of Colorado, all strongly commendatory of *Pyrogenium* in typhoid.

What Dr. Fulton, of Monte Vista, Colorado, wrote arrived so late that we put it in our supplementary pages, last issue, and it may be well to reproduce it: "This medicine (*Pyrogenium*) is having a great success in my hands, every case having recovered in two weeks or less. I am using it in typhoid."

In the "Foreign Letter" of the *Medical Advance*, November, written by Dr. Alfred Drysdale, we find the following: "I hope my American conferees will lose no time in trying the new drug, *Pyrogen*, or *Pyrogenium*, upon that *opprobrium medicinae*, typhoid fever. *Pyrogen* is a ptomain, prepared by precipitating the watery solution of putrescent matter with alcohol. Injected under the skin of mice, it produces all the symptoms of typhoid fever, culminating lethally in four or five hours."

In addition to all the foregoing there is the testimony afforded by the repeated calls at the pharmacies for the remedy. When order after order is given by one physician, it is evident he is meeting with success in practice with the remedy.

It would be very desirable to have *Pyro.* proved, but who will volunteer to do it?

The remedy may be obtained now in any form not lower than the 4th decimal dilution.

GALL-STONE COLIC.

EDITOR HOMEOPATHIC RECORDER:

In the November number of the RECORDER I notice an article on "The Treatment of Gall-stone Colic," in which the writer says: "In the presence of gall-stone colic we have two chief indications: 1st, To dissolve the stone, or at least to so soften it that it can pass out of the 'gall-bladder,' and 2d, To relieve the often described pain." I will admit that "the pain has often been described," but I will venture the assertion that it has not been described often enough to enable the average practitioner to recognize it on his first or second visit. After we have once recognized and successfully treated it, cannot most of us look back and remember cases of it, that we or some one else amongst our colleagues have treated for cramp-colic, or neuralgia of the stomach. I well remember the first case of it that I came in contact with. The patient was a married lady, who had been treated by a very intelligent "Eclectic" for a number of years at each recurring attack for neuralgia of the stomach. During his absence from home I was called in and failed to recognize the true state of the case. Of course I had to be careful, as his shadow was over me, and as prompt relief was demanded (a cure was not expected where he had failed). I promptly used my hypodermic syringe, and made the best prescription I could from the

symptoms and history of the case, and came home. That evening, on opening my new journal, I found what was called a painless cure for gall-stone. On reading the paper, which very minutely described an attack of gall-stone colic, I was struck with the picture drawn of my case of neuralgia of the stomach. The remedy was olive oil in 14-ounce doses. Shades of Mahomet, thought I, what a dose! The directions were—give the oil at one draught, and let the patient sit up about twenty minutes. Then put her to bed lying on the right side, the hips elevated at least ten inches (this was intended to allow the oil which, by that time would have begun to pass out of the stomach, to run back through the duct into the gall-bladder), and keep the patient in this position for at least one hour. Well, not long after this I was called in haste to see the same patient, and resolved to try the oil, but only in eight-ounce doses. You can imagine the looks of consternation on the faces of all present when I poured out the oil with a quiet order to the lady to drink it down at once, which she did only after my firm announcement that she should take that or nothing from me, and the further statement that her family physician was mistaken in his diagnosis, and that if I did not prove mine correct by the presence of gall-stones in the stool I would charge nothing for the case. Finally she took the oil, but I am afraid I kept her there on her side more than what I promised (one hour). But the result justified me; her bowels moved copiously in two or three hours, and I had the satisfaction of counting fourteen gall-stones, one of them as large as a hazel-nut, in the vessel. She has never had an attack since, and that was eight years ago. Since then I have treated two cases (all I have had) with like results. Now how does the oil act—as a solvent? I think not. But as a lubricant. I think the oil lubricates the stones and the duct, and possibly relaxes it somewhat, by which means the stones pass out without pain, for when I gave the oil I gave nothing else, and the passage was painless.

DR. F. E. COFFEE.

AVALON, MO.

Malt Extracts.—In malt extract we have a medicinal substance of which it can justly be maintained that it ascended from the dubious existence of a proprietary preparation to the honorable position of an officinal medicine, sanctioned by the Pharmacopœia. And indeed a concentrated extract of barley-malt fully deserves to be denominated “liquid bread,” and was destined from the start to prove to be a welcome ally to the progressive physician in his battle with those ailments resulting from an irritation of the digestive organs, also in indigestion arising from a sedentary mode of life, in gastric affections, in ailments of infants and children, in short, whenever the administration of an easily digestible aliment seems to be called for.

The views entertained as to the criterion of a good malt extract un-

derwent considerable changes in the course of time. Formerly its outward appearance was deemed to be of most importance. A light color was thought to be essential—such as is easily obtained by careful evaporation sub vacuo, as well as a clear solution in water, resulting from repeated boiling of the liquor—properties which are easily obtainable by suitable appliances and apparatus.

The clarifying of the extracted liquor by repeated ebullition previous to its inspissation is, however, irrational, as it is tantamount to eliminating important constituents, notably albumen and diastase. Both of the latter it is the endeavor at the present day to retain as much as possible, and the value of the extract is now based on its composition. In a modern malt extract the highest possible degree of saccharification is sought to be obtained *i.e.*, a large percentage of maltose and consequent small proportion of dextrine, and in addition all the diastase it is possible to secure. This desideratum the manufacturer can only secure by an adroit and careful regulation of the temperature during the malting process.

But not all malt extracts meet these expectations, as is well illustrated by the results of Schweissingner's investigations (see his yearly report for 1888, p. 18), which show that the commercial malt extracts contain on an average only 52 per cent. of maltose (malt sugar) together with 17 per cent. of dextrine. (!) Five different malt extracts which he analyzed contained no diastase at all, some others only traces, and only one was capable of decomposing two parts of starch to one of extract. Dr. Henry Leffman, the well known expert chemist to the Board of Health of the State of Pennsylvania, investigated eleven different preparations and published the results in *Annals of Hygiene*, No. 2, vol. iii. He found six to contain alcohol, but to have no diastatic power; one sample contained salicylic acid, and also failed in diastatic power, while four non-alcoholic preparations showed good diastatic power.

We are justified in demanding an exceptionally favorable position for the "Excelsior" malt extract lately introduced to the public, for it contains 68 per cent. of maltose and only $2\frac{1}{6}$ per cent. of dextrine, while of diastase it contains .25 per cent., a remarkable result.

Based on the extensive researches and experiments of Dunstan and Dimmock, Hager demands that 100 parts of extract of malt of normal quality should decompose 10 parts of starch. Of the "Excelsior" extract one part decomposed five parts of starch at a temperature of 50–60°, maintained during five hours, or fifty times the amount demanded by Hager. We would add that Hager's standard has also been adopted in the German Pharmacopœia. It will thus be seen that the Excelsior Malt Extract is head and shoulders in point of quality over its compeers, and yet it is sold at a very moderate price—not higher, in fact, than other similar preparations on the market.

The qualities of a good malt extract as an easily assimilable and

highly nutritious article of diet have been extolled for twenty years or more, but one peculiar property we have not seen specially mentioned, and that is its remarkable efficacy AS AN APPETIZER. Every physician will have met with hundreds of cases of want of appetite and lack of proper assimilation of what little is eaten; here the Excelsior Malt Extract comes in with wonderful effect. One spoonful, given one hour before meals, will quicken the appetite most effectually. We have witnessed three cases in our immediate surroundings. Albert S——, a spare-built, swarthy-complexioned young man of nineteen years, was troubled with loss of appetite; had to compel himself to the little he did eat. A ten days' use of the extract made him desist from taking it longer; he not only ate hearty meals, but became ravenously hungry between meals. Nellie T——, a tall blonde, rapid growth, a very small eater, was immediately affected after the 3d or 4th dose; she eats a hearty meal since then, looks very well, and whenever her appetite fails a few days' use of the extract will bring it around all right again. A similar effect was produced upon her oldest brother, æt 20. He always was a very small eater and prone to catching colds. A few weeks' regular use of the extract seems to have permanently corrected his appetite; he is now considered a hearty eater, and is becoming more robust and healthier.

Triturations vs. ———?—Those familiar with homœopathic medical journals must have noticed lately in their advertising pages, and in some instances among their articles, the claims made for the "new multiplex-pestle" triturator, and the fact that its product is called a "trituration." Whatever else that product may be, it is not a trituration as we purpose proving from the patentee's own words.

The first claim made for these "triturations" has a scientific flavor, that is quite new: "They are lighter in specific gravity," is the claim made for them. For years the scientific world has been laboring under the delusion that the specific gravity of any substance is an inherent property of that substance's being, over which man has no control. For instance, the specific gravity of gold is 19, and we have never heard it asserted that beating it into gold-leaf changed that figure.

It is next claimed, among other things, that they are "impalpable to the touch," which condition is caused by the fact that "the pestles have a uniform pressure which is never so great as to bring them in contact with the surface of the mortar. *We thus avoid the wearing off of the mortar, the charring of the milk-sugar, and the chemical changes in the medicine which takes place in all hand trituration, as well as in the work of machines having pestle handles.*" The words we have taken the liberty to italicize admit what we have asserted, namely, that, whatever else the product of these machines may be, it is *not* a trituration, as Samuel Hahnemann used the word, nor is it a medicine that any of our text-

books give instructions for using, for the advertiser says: "We thus avoid . . . the *chemical changes* in the medicine *which takes place* in all hand trituration as well as in the work of machines having pestle handles." There is no escaping the conclusion: The medicines which Hahnemann used, and which homœopathic physicians have been using from his day until the present, and on the provings of which all our text-books are founded, are *chemically different* from those called by the same name, produced by the new multiplex-pestle process. Hence, it would seem to follow, that physicians cannot use them until they have each been proved and the effect on the human system of their different chemical properties noted. Another proof that this new product is not a trituration, is the asserted fact that it is "impalpable to the touch," and yet, we are told, that "the pestles have a uniform pressure which is never so great as to bring them in contact with the surface of the mortar. (This is another bit of "science:" A number of solid bodies have a "uniform pressure" against another body, and yet never come in "contact" with it!). Now it is a fact that sugar-of-milk *cannot be reduced to an impalpable powder by trituration*. The work may be continued for days or weeks, but the result will never be an impalpable powder. On the other hand we know very well that sugar-of-milk can be reduced to an impalpable powder, for in that form it is offered to the trade, and may be purchased by any one. There are several processes by which this is accomplished, and two of them simpler than that of the "multiplex-pestle" system, but in any of them, though the sugar-of-milk be reduced to an impalpable powder, the result sought and achieved by Hahnemann, is not gained. By trituration the particles of the drug and the sharp, cutting particles of the sugar-of-milk are alternately ground together, and then scraped (see Hahnemann's directions), and, whether done by hand or machine, the result is never an impalpable powder. There is one machine, into which, if nails or any other hard substance be thrown, they are in a short time reduced to an impalpable powder, and yet no one would ever claim the product of such a machine to be a trituration. The multiplex-pestle system is but a cumbersome way of achieving the same end; its pestles (why, pestles?) do not touch the mortar, the machine revolves at a high rate of speed, and the product is an impalpable powder, and, hence, *not a trituration*.

Three Items.—"Something may be learned from everybody," is a maxim, to which the experienced man is more apt to give assent than he who has more theory than practice. In a little chat we had recently with several who do not write M.D. after their names, we gleaned a lot of information which we cheerfully impart to those who do, for their amusement, or edification, as they chose. The conversation turned on sickness, and one related a case of "consumption cured by unfermented grape-juice." "Mrs. — was dying with consumption, and her doctor

put her on unfermented grape-juice, and it has built her up so, that she may live for another generation. And Mr. —, who knew her, and had a bad cough, and was very weak, is taking it too, and says it helps him so much!" It would be hard to shake our informant's faith in unfermented grape-juice as a cure for consumption. This led another to relate the case of an old man who had "cramps in his hands," brought on by hard work, and which gave him "so much pain," which he cured by rubbing well with arnica oil. This led to the relation of how "my grandmother, who is nearly seventy years old, and has been very deaf for over a year, and had queer buzzing sounds in her ears, tried Mullein Oil, and, after using it two times, she could hear as well as ever, and she wants to use it now every night, because she hopes it will cure the buzzing sounds also."

These three cases are all in a line with the character of the articles used. Unfermented grape-juice, when preserved without the aid of antiseptics, is, undoubtedly, one of the best things obtainable for invalids, and this almost without regard to the disease. Among external remedies, arnica oil stands in the front rank, and, since attention has been directed to it, its uses are widening every day. As for Mullein Oil, its status is pretty well known: there are many cases of deafness it will relieve or entirely cure, and there are few cases of enuresis that will withstand its inward use in drop doses.

Cheap Medicines.—The tendency to make everything cheap, though at the expense of quality, so prevalent in business circles in general has, as we all know, long ago also invaded the department of medicines. Many an unsatisfactory course of treatment may be attributed to using poorly prepared or spurious medicines and, considering the small doses dispensed in homœopathy, it seems almost incredible that so many still use such doubtful preparations. Here is a point, apropos of tinctures, worth knowing by physicians. Chlorophyll, the green-coloring matter in plants, is soluble in stronger alcohol, and is retained in solution for a length of time. In fresh-plant tinctures the alcohol is so much diluted by the juice of the plant, that it is not held in solution, but is precipitated. The exceptions to this rule are less than ten, and these are prepared with stronger alcohol, on account of the resinous or volatile constituents of the plant. They comprise *oleander*, *cannabis sat.*, *indica*, *thuja*, *rhus*, and *pulsatilla*, if made according to Class III. If these were made with weak alcohol, they also would yield a brownish tincture, but of inferior quality.

And yet there are certain salesmen who go about the country, and have a good deal to say about green-plant tinctures. "Look at my tinctures; they are green-plant tinctures; see their bright green color; that tells the story. Look at this aconite and belladonna, how nicely green; compare with —; why theirs are a reddish-brown, conclusive

evidence that they are made from dried plants." *Just the reverse of this is true*, as every practitioner can easily prove to his own satisfaction. Let him buy five cents worth of *aconite*, *belladonna* or *hyosciamus* leaves in the nearest drug store, and pour alcohol upon it and he will obtain a bright green tincture, while if he uses the fresh, juicy plant, he will obtain a reddish-brown preparation. Yet a great many physicians suffer themselves to be imposed upon. From this it may be seen how easily cheap "imported" tinctures may be produced and sold at a fat profit though low price.

Another great difference between dried-plant and green-plant tinctures, is that the former remain clear for almost any length of time, while fresh-plant tinctures, almost without exception, throw down a sediment for several years, which consists chiefly of starchy and gummy substances. Hence fresh-plant tinctures, no matter how clear when sent out, usually show a sediment after a few weeks. It has been observed and demonstrated time and again that the elimination of these sediments does not seem to alter the efficacy of the remedy.

Malt Extract Bonbons.—It looks odd that we should take an interest in "candy;" but this malt extract preparation has such undoubted intrinsic merit, as we know from personal experience, that its introduction into this country is desirable. Anyone troubled with mucus in the throat or chest, accompanied by cough or otherwise, who once uses these bonbons, will not be without them afterwards, if he can help it. The bonbons contain from 22 to 25 per cent. of Malt Extract, and have a pronounced taste of malt sugar. In malting grain a peculiar substance, "diastase," is formed, which is similar to pepsin in dissolving or digesting quality, if you please. Carefully prepared malt extract retains this diastase unimpaired or unaltered, and to its presence the remarkable properties of dissolving mucus and allaying the irritation occasioned by its presence seems to be due. Ministers and lawyers suffering from accumulation of phlegm in the throat, in consequence of protracted use of their vocal cords, find invariable relief from its use. It is of benefit in many cases of humid asthma, as well as in almost all coughs. These bonbons are pleasant to the taste, and never molest or sour the stomach.

Without having ever been advertised in print, their use in Germany has spread so quickly that they are to be found in every drug store; the writer, who was never without them during a three months' sojourn, obtained them at every druggist's on whom he called for them.

Homarus.—The provings of this remedy, by Dr. A. M. Cushing, Springfield, Mass., it will be remembered, appeared in the *RECORDER* for May, 1888, and were of such a nature as to indicate that *homarus* is destined to be what we may call one of our *active* medicines. There are

reports of but two cases, as far as we have heard, where this remedy was used, both furnished by Dr. Cushing :

“CASE I.—Mrs. ——. No appetite, distress in stomach, restless sleep, *very tired in morning*, throat sore. Gave *homarus* 4x. One week later, appetite first rate, stomach well, throat well, sleeps nicely, can work all the time.”

“CASE II.—Mr. ——, aged 50. Has frequent attacks of indigestion ; calls them bilious spells. For two years I had given him occasionally *nux vomica*, *dioscorea*, etc., with relief for awhile. Gave *homarus* 3x, and in three days returned, asking me to remember what I gave him the last time, as ‘it was just the medicine.’”

The first case was originally published in the RECORDER, and the second in *Medical Advance*.

For “Rheumatics.”—Arnica is one of our oldest remedies for rheumatism, that unwelcomed visitor and long stayer in old systems, but we believe no one has ever thought of it in this connection as an external application. The following case has come to our attention. A gentleman of over 70 was taken, early this fall, with severe rheumatic pains, at times so bad that he could scarcely walk. He put himself under the treatment of a homœopathic physician, and at first thought he was being greatly benefited, but after the lapse of five weeks or so he realized the fact that his rheumatism was no better, and his croaking friends predicted that he would have to wait until the coming of summer to be free from his trouble. About this time he heard from a friend, who had been troubled for some time with severe rheumatic pains in the shoulder, that he had rubbed his shoulder with arnica oil, with the gratifying result of being very soon freed from the pain. A bottle of arnica oil was procured, and each night before going to bed the patient in question would go into a warm room and gently but thoroughly rub the parts afflicted with a little of the oil, spread on the palm of his hand. He says the effect was very marked from the start, the rasping rustiness of the disease being much alleviated, and in three weeks’ time every vestige of the complaint had disappeared. The beneficial effects of arnica oil on men who indulge in violent exercise, such as racing, rowing, baseball playing, etc., is becoming very generally recognized in sporting circles, both professional and amateur. One gentleman, who had just returned from a run of several days on his wheel, told us that he had used this oil during his trip, and it was the first one he had ever made of any duration from which he returned entirely free from soreness and stiffness.

Verbascum vs. Mullein Oil.—Our esteemed Pacific Slope contemporary, *The California Homœopath*, under the heading, “Clinical Items,” has an item which may be misleading to a number of physicians, namely: “*Verbascum*. Incontinence of Urine; Cures nearly every

case.—*Cushing*.” So runs the item. Now Mullein Oil is one thing and *verbascum* is another, and the former is the remedy which Dr. Cushing recommends. The difference between the two is this: Mullein Oil is a dark-colored aromatic liquid obtained from mullein flowers, while *verbascum* is nothing more than the regular alcoholic tincture obtained from parts of the green plant. We deem it important to call attention to this matter because mullein oil has become so important a remedy in many cases of deafness, incontinence of urine, and painful urination.

“M. D.”—Pharmacists, book publishers, and all dealers in things medical, will thank us, we know, for suggesting to the gentlemen of the medical profession the desirability of having “M.D.” somewhere about their letters. A great many physicians write on plain note paper, and sign their names only, and thus the receiver of the letter is thrown in doubt whether—where prices are asked for—to quote physicians’ rates or not.

Oxytropis Lamberti (“Loco” Weed).—In the number of the *Pharmaceutical Record* of July 2d, Mr. Kennedy asserts that the Mexicans believe that this drug has an influence upon human beings. “It is said that when a señora no longer loves her liege lord señor, and fain would rid herself of him, she procures some ‘herba loco,’ prepares a decoction of it, and beguiles his innocence into imbibing it, after which he becomes permanently insane or dies in a short time.” A proving of this remedy by W. S. Gee, M.D., it will be remembered, appeared in the September RECORDER, 1887, vol. ii., No. 5.

Fraud.—In a number of cases recently where physicians have prescribed mullein oil the patients have gone to drug stores for it, and been supplied with an article that neither resembled nor was mullein oil. These druggists probably knew nothing about the article, but rather than miss a beggarly sale they preferred to deliberately swindle the purchaser by giving him unknown stuff. The only safety from pharmacists of this ilk is to keep away from them, or make them furnish unbroken packages of well known and responsible firms.

Homœopathy in Venereal Diseases. By *Stephen Yeldham, L.R.C.P., ed., M.R.C.S., Eng.* Pp. 188. Price, \$1.50. Sent free by mail on receipt of \$1.42 by Boericke & Tafel.

(FROM THE ALLGEMEINE HOMŒOPATHISCHE ZEITUNG, December 12th, 1888.)

We have before us the fourth edition of a work of 188 pp., which makes the best impression as regards arrangement and contents. This edition was edited by Dr. Henry Wheeler, who contributed an original chapter on spermatorrhœa, in addition to valuable annotations.

Whoever possesses Jahr's admirable work on venereal diseases might be tempted to ask whether we Germans evince a necessity to hear another author on the same theme. However, even a cursory glance at Dr. Yeldham's work discloses that essentially new information is here given. Especially is this the case with the not to be avoided local applications. I here would merely mention injections of hydrastis in gleet,—to these are added clinical observations interspersed here and there, which always form a welcome addition for the practitioner. Yeldham belongs to the dualists, *i.e.*, he holds that there are two specific venereal poisons. With us gonorrhœa and syphilis are separated from chancre, while he joins the latter to syphilis. We note that he differentiates four varieties of chancre; for he treats separately the soft, the hard, the phagadænic chancre, and the urethral ulcers. Separate chapters are also devoted to infantile syphilis and to syphilitic diseases of the eye. The syphilitic cachexia, the syphilitic brain and spinal abscesses, as well as bone and periosteal syphilis, their pathology and therapia are exhaustively and thoroughly treated of, and are far ahead of "Jahr." For what could the latter say of cocaine, iodoform, eucalyptus oil, etc., hence the parole of homœopathy on this, as on so many other fields, must ever be *semper prorsus nunquam retrorsum*, inasmuch as better success has undoubtedly followed the exhibition of more massive doses. For it is notable that this author recommends stronger doses of two of the most important remedies, mercury and iodide of potash, which doses are, however, still far enough removed from those traditionally employed by allopaths.

The gonorrhœa of the female sex might have been treated more exhaustively, especially because of its ætiological relation to the dreaded ophthalmia neonatorum.—*Dr. H. Goullon, of Weimar.*

The Recorder is getting to be the recognized medium of FOR SALE and WANTED advertisements among physicians. This is a necessary consequence of a big circulation (10,500 copies went out in November). When a man wants to buy or sell, the wider the facts are known the better chance he has of accomplishing his purpose. We have concluded to reduce the price hereafter for this service to \$3.00 each insertion. Turn to the first advertising page, after cover of this number, and it will be seen that these advertisements are set in a place to command attention. Specialists will find it well to let their address be known. Card \$5.00 a year, including a subscription to the journal. It would be well for hospitals, also, to keep their address before the homœopathic medical world.

Subscriptions to THE RECORDER—\$1.00 per year—may be sent to any of Boericke & Tafel's pharmacies, most convenient to the subscriber.

THE HOMŒOPATHIC RECORDER.

VOL. IV.

PHILADELPHIA, MARCH, 1889.

No. 2.

EDITORIAL NOTES.

IN a recent letter to the "*Medical Standard*," Prof. Austin Flint being called upon to defend Bellevue College against the imputation that it had endorsed diplomas issued by "irregular" colleges, he, as secretary, says: "In no instance has the college endorsed a diploma issued by or purporting to be issued by an irregular college, using the term irregular in the sense it is understood by the regular profession. In many instances the college has been applied to endorse the diplomas of Homœopathic, Eclectic, and other irregular colleges, and has invariably declined to endorse such documents." We wonder if Austin Flint, secretary, could explain what constitutes a "regular college, as understood by the regular profession;" but our wonder is greater when we learn that a physician, with a diploma granted by a Homœopathic college, has stooped to such condescension as to ask a "regular" college to endorse so valuable a document. When the laws of the State of New York under which all diplomas are, or should be, endorsed, proclaim that Bellevue, including Austin Flint, secretary, *et al.*, is holier than we, then we will understand why such a college can refuse to endorse any legal medical diploma.

ONE of the most pitiable sights in this declining century, is the deep-rooted hatred of the old-school practitioners, as a class, against the modern and scientific practice of medicine, expressed on every occasion, while they creep in and steal, without credit, the remedies and methods of prescription of such new practice. When we examine into the list of the remedies so pilfered we find such well-known drugs as *Aurum*, *Phosphorus*, *Graphites*, *Mercurius sol. Hahn.*, *Gelsemium*, *Aconite*, and many others, even including *Natrum muriaticum*. These are, it is true, not used by the

“common herd,” but by the allopathic leaders and professors. There is one professor, a justly famous specialist upon diseases of the skin, whose name should be ever honored by all true physicians, one who believes in giving credit to whom it belongs, who uses homœopathic remedies in homœopathic form and dose, and whom we once heard say to his class of would-be Galens. “Yes, gentlemen! laugh when I say *Graphites* 30th will help this case; I know it is a homœopathic remedy, but when you are older you will know more, and laugh less.”

About two years ago we read in an old-school journal an article by a certain Dr. Smith, in which he claimed to be the discoverer that phosphorus was a very valuable remedy in fatty degenerations, and suited to all the symptoms arising from such conditions. Shades of Hahuemann!

BRYONIA IN PERIDENTITIS.

TO THE EDITOR OF HOMŒOPATHIC RECORDER.

BRYONIA 200 (Lehrmanns) has just cured, in my hands, a severe case (caused by the too forcible insertion of a tooth-pick between the teeth) of inflammation of the peridentum of the first upper molar, right side. The tooth showed no signs of decay. There were constant and intense pain, high fever and a greatly disordered system. Cure effected in three days; drug, administered, for the first twenty-four hours, at three hours intervals, then at six hours intervals. This medicine alone carried the case through to complete cure.

RUFUS CHOATE, M.D.

ROCKVILLE, Md.

HYPERICUM PERFORATUM IN TETANUS.

BY DR. HEUSER.*

IN the southern part of the United States, tetanus is rightly a much feared affection, as it often appears in consequence of the most insignificant injuries, scratches, the penetration of a splinter of wood into the finger, etc. During my sojourn in New Orleans, I regularly observed that the difficulty of movement of the lower jaw was the first symptom of tetanus, appearing first and regularly on the ninth day after the injury. The latter had not infrequently long since healed, and the patient and his relatives would scarcely think any more of the injury, in spite of which, on the ninth day, the fearful and alarming symptoms

* Translated from the “Allg. Hom. Zeit., 1889, pp. 4 and 10, by Albert Pick and F. Pritchard, B. U. S. M.

of tetanus would appear, and on the tenth day the tetanus would nearly always be fully developed and the termination, after weeks of suffering, when treated allopathically, always, and homœopathically, frequently, would be—death, especially during the heated term.

In the year 1866, the four-year-old son of a friend of mine, a German pastor in New Orleans, was bitten slightly in the hand by a dog. A solution of Arnica and water was applied to the wound to prevent the development of traumatic tetanus. Arnica was also given internally. In spite of this treatment, on the evening of the ninth day after the injury, difficult mobility of the lower jaw became apparent, although the slight wound had healed. The father, in his anxiety, telegraphed to Lutze, of Köthen, and he answered, *Hypericum*. Although the despatch was sent on the evening of the ninth day, yet the answer did not come until the evening of the tenth day, during which time complete tetanus had developed in the child. The child received at once *Hypericum*, which I gave in the first decimal dilution, two drops every hour.

Already, on the next morning, the child having not slept the whole night through and having, from every half to one hour, very violent tetanic convulsions, it appeared somewhat quieter. During the day, tetanic convulsions appeared but three times, which were of shorter duration and less violent than those of the former night. The next night was passed sleeplessly, and shortly before midnight another very violent spasmodic attack, lasting over twenty minutes, appeared, being the last which he had. On the morning of the twelfth day the child was already able to open its teeth a few lines. The night from the twelfth to the thirteenth day passed favorably and the patient slept well. On the morning of the thirteenth day the child nearly recovered; it could again chew solid food and was completely well, there only remaining a difficult mobility of the lower jaw, which, however disappeared in the course of the fourteenth and fifteenth days.

Since then, I have always given *Hypericum* with sure results at the first signs of trismus as well as in completely developed tetanus.

In Germany the cases which have come under my care, were only those of more or less developed trismus, which were, however, quickly cured by *Hypericum*.

Hence the following case will be the more interesting, which I take the liberty of reporting here.

On October 6th, 1888, I received the following letter of one Mr. W., of G., near Kassel:

“Please send me a few powerful remedies against traumatic tetanus. The nineteen-year-old daughter of my neighbor has been suffering since fourteen days, hopelessly, from traumatic tetanus. The patient is entirely rigid from head to foot, only the arms being movable. Immediately after this rigidity she has such fearful convulsive attacks that

three men have to hold her. She cannot be made to go to bed, for if she does she says she will suffocate there. During the attacks her mind is entirely clear and she complains of the most fearful pains. On the first of September the index and middle finger of her right hand were accidentally caught in the machinery of a fodder cutting machine. The index-finger was only slightly injured at its tip, but the middle finger was so crushed that it had to be amputated. The wound was at first neglected by the allopathic attending physician as well as by the patient herself, and nothing but a dressing of carbolized oil was used. On the tenth of September, trismus appeared, and a few days later the spasms, which continued, became more violent. The physician in attendance administered Opium and Morphine, yet if the patient slept after its administration the attacks reappeared with greater violence. The stool was only to be passed by the aid of enemas, and the urine was always passed involuntarily during the spasms. Her appetite is present, yet she can only take fluids through a gap in the teeth, as the teeth were tightly closed together. Sometimes she becomes hot and has a violent fever, and then sweat appears, principally on the head. The wound itself has a rose-red color and apparently is healing."

I prescribed *Hypericum* 1x, to be alternated hourly with *Ledum pal.* 1x; the latter because the patient could not remain in bed.

On the fourteenth, I received a letter of Mr. W., in which he expresses his thanks for the remedies sent which yielded such remarkably excellent results. After the first dose the convulsions became less frequent and violent, and within three days, from the seventh to the tenth of October they nearly ceased; only once in a while there appeared twitchings of the arms and legs. On the morning of the tenth of October, after the patient had slept well throughout nearly the whole night, she was able to open her teeth far enough so that small pieces of biscuit could be introduced, which she was able to chew and swallow.

The physician was so delighted with the apparent success of his treatment—the patient had, of course, taken no more of the allopathic medicine—that he declared the patient as cured and merely prescribed her a tonic.

The delusion of the parents and the girl herself was so great that they followed this advice. Perhaps they believed that the success would have also appeared without the homœopathic medicines.

The result was, that on the evening of the twelfth of October, the teeth were again tightly pressed together and during the night the most violent spasmodic attacks appeared.

Mr. W. asked now again for advice and aid. Unfortunately, the remedies were not well kept, and No. 1 (*Hypericum*) had been poured out; No. 2 (*Ledum*) had not acted properly.

Mr. W. reported as follows:

"The patient lies now in bed, which she bears very well, and the

attacks less fearful, but violent twitchings take place continually throughout the whole body. No. 2 (*Ledum*) seems to have caused this remission, but I think decidedly that No. 1 (*Hypericum*) is the chief remedy.

I was not, however, to be misled, being taught by the many sorrowful experiences of earlier years, to use *Nux vom.*, but I sent *Hypericum* 1x with the direction that this one remedy be used at first hourly, on improvement appearing, less often, every two hours, then three times a day, and, finally, morning and evening.

On the sixth of December, the patient herself wrote me, saying that she had entirely recovered. After the wound of the amputated finger had completely healed and all symptoms of trismus and tetanus long since disappeared, under the persistent use of *Hypericum* morning and evening, a crop of vesicles made their appearance on the injured hand. The vesicles renewed themselves continually and were marked by burning sensations. These vesicles had already been healed over eight days, yet there persisted a slight burning of the skin at the places where the vesicles were. All the four fingers of the right hand were yet somewhat stiff, for she begged me to excuse her on account of her bad writing. It was the first letter she was able to write after her sickness, yet the writing was energetic although somewhat stiff.

Now, according to my opinion, a dose of *Nux vom.* high will be sufficient to also remove this stiffness.

This experience reminds me of the duty which I have long since owed to the shade of Lutze, viz.: to recommend the employment of *Hypericum* in tetanus to my colleagues, the more as it is not mentioned at all in Lutze's *Lehrbuch der Homœopathie* (Lutze's *Homœopathic Theory and Practice*.) Von Fallenberg-Ziegler says in his small *Homœopatischen Arzneimittellehre* under "*Hypericum*," that it, according to American reports, may be classed with *Arnica* as an equally good vulnerary.

Should the cure of tetanus in New Orleans, described above, possibly have been the cause of its coming into especial favor in America, then I should be the more glad to prove here the German origin of the recognition of this remedy as a vulnerary.

[NOTE BY THE TRANSLATORS.—Dr. Th. Bruckner, of Basel, in his small pamphlet, *Die Anwendung der Vorbeugungsmittel in der Homœopathie*, p. 6, recommends *Hypericum perforatum* in injuries in which tetanus is to be feared, especially after injuries of the hands and feet, where these parts have been badly crushed and torn, or if, for example, splinters of glass or needles have been run under the fingernails and then broken off, followed by an unusually violent pain running upwards along the course of the nerve, in which condition, if given in time, it may ward off the attack of tetanus.]



VIBURNUM OPULUS, L.

VIBURNUM OPULUS (High Cranberry).

Viburnum Opulus, Linn. ; *V. Oxycoccus*, Pursh.

(COPYRIGHT SECURED.)

PLATE II.

THE plant from which this drug is derived, belongs to a large family of shrubs, the *caprifoliaceæ*, from which we gain but four others, *Sambucus*, *Adoxa*, *Triosteum*, and *Symphoricarpus*.

Viburnum Opulus is a generally smooth spreading shrub, that usually attains a height of from 3–10 feet. The leaves are very characteristic being dilated and strongly three-lobed, pointed, toothed, and furnished with slender leaf stalks. The flowers are arranged in radiant cymes, and are of two sorts, those of the centre of the clusters being small and fertile, those of the circumference large, showy, and sterile. The fruit is a globular, bright red, acid, edible berry, having a flattened orbicular seed.

The European representative of this species is varied in its foliage, but does not differ sufficiently to form a true species; it is the original of the Snowball and Guelder Rose of our conservatories and gardens.

Viburnum grows in swampy places and along streams in the north from New Brunswick to Saskatchewan, British Columbia and Oregon, and southward along the eastern seaboard as far as Pennsylvania, and even as far south as Maryland, along the Alleghanies. It blossoms from June to July and matures its fruit about the end of September.

The vulgar names for this species in most localities are High Cranberry and Cranberry Tree, from the resemblance in form and taste of the berries to that fruit. In some places it is called Cramp Bark Tree, from the use of the bark in decoction for the relief of spasmodic cramps in hysteric females.

HISTORY.

This species is much more used in general practice than any other of the genus, probably from its being more energetic from the quantity of valerianic acid it contains. One of the first uses of the plant was as a diuretic; later it was found beneficial in relaxing cramps and spasms of various kinds. Its use in spasmodic asthma is one of more recent date. Its particular usefulness, however, seemed to be in hysteria, as well as in all forms of spasms and cramps where the exciting cause lies at the uterus. In the cramps of the lower extremities occurring during pregnancy or parturition it proved almost a specific; and was even claimed to thwart puerperal convulsions in those predisposed to such condition, if taken persistently for the last two months of gestation.

The later uses of the drug have proven it to be of decided benefit in most cases of hysterical convulsions from uterine irritation; in general

irritation of the nervous system when not due to special mental or traumatic shocks; in spasmodic dysuria of hysterical subjects, and in spasmodic dysmenorrhœa. In all its uses its sphere of action is particularly upon the female economy, being found useful in all forms of general nervous irritation, cramps, spasms, and like pains in the stomach, bowels, bladder, or other organs, when proven reflex from uterine irritation. Dysmenorrhœa when the ovaries are irritable, or with spasmodic or neuralgic characters. In pseudo-membranous dysmenorrhœa it plays an important part in the relief of the pains, hæmorrhage, and extreme nervous erethrism (Hale).

In spasmodic or membranous dysmenorrhœa, when before the menses appear there is much drawing in the muscles of the thighs and lower abdomen, sharp pains in the ovarian regions, and excruciating cramping pains in the lower abdomen and uterus (Simmons).

The *Southern Medical Record*, says of this drug, "This remedy is one of our very best when the following symptoms are present; Hysterical condition from uterine irritation, cramps in the extremities during pregnancy, dysmenorrhœa of a spasmodic character, and painful, scanty menses." (*Am. Jour. Phar.*)

THE TINCTURE.

The fresh bark of the root is taken, pounded to a pulp and weighed. Then two parts by weight of alcohol are taken, and after thoroughly mixing the pulp with one-sixth part of it, the rest of the alcohol is added. After having stirred the whole, it is poured into a well-stoppered bottle and allow it to stand eight days in a dark, cool place.

This resulting tincture after filtration has a light brownish-orange color by transmitted light, a strong odor of valerianic acid, a bitterish aromatic taste, and a strong acid reaction.

CHEMISTRY.

Valerianic acid,— $\text{HC}_5\text{H}_9\text{O}_2$. This body is one of the prominent constituents of *Viburnum*, and may be extracted by distilling the bark of the root with water, saturating the distillate with carbonate of soda, evaporating to dryness, and distilling the product with sulphuric acid and a little water. The acid will then be found in concentrated solution in the water distilled over. This is the trihydrate. Distilling this solution a milky fluid passes over followed by a clear liquid, the monohydrate. This monohydrate is a thin, colorless, oily liquid, smelling more disagreeable than valerian, and somewhat like putrid cheese. It has a burning and acid, soon followed by a sweet aromatic, apple-like taste. It is soluble in alcohol and in 30 parts of water.

The bark also contains a resin, volatile oil, tannin, and some earthy salts.

SYMPTOMS.

Mind.—Irritable mood, wishes to be alone. Inability to perform mental labor.

Head.—Vertigo on rising from sitting posture, feels as though she would fall forward. Dizzy feeling all the time. Dull, sluggish headache. Dull, supraorbital and frontal headache, with profuse flow of clear, watery urine. Severe left-sided headache. Severe pain in parietal region. Coughing makes head ache.

Eyes.—Sore feeling in the eye balls. Heaviness over the eyes and eye-balls.

Ears.—Sharp jerking pain in the ears, as if stabbed with a knife.

Chest.—Suffocative spells at night. Seems as if the muscles of the chest ceased to act, causing great dyspnœa.

Heart.—Palpitation of the heart. During menstrual pains a sensation as if the breath would leave the body, and the heart cease to beat.

Stomach.—Nausea and uneasiness. *Constant nausea*, relieved by eating, or by lying quiet. Deathly nausea and sickness at the stomach, principally at night.

Abdomen.—Crampy, colicky pain in the lower abdomen during menstruation. Cramps and colic pains come on suddenly and with terrible severity *just preceding menstrual flow*. Crampy pains in lower abdomen as if going to be "unwell." Darting pains in the abdomen which finally settle about the navel. Bearing down pains in the pelvis as during menstruation. Heavy aching over the pubis.

Sexual Organs. Ovaries.—Pain in the ovaries. *Uterus.*—Cramps and bearing-down pains before the menses appear. Excruciating colicky pains through the womb and lower abdomen, lasting 10–12 hours. Bearing-down sensation as if the menses would appear. Congested feeling as if the courses would come on. Severe bearing-down pains, accompanied by drawing pain in the anterior muscles of the thighs, and occasionally sharp shooting pain over the ovaries. *Menses.*—Too early, too profuse, and offensive in odor. Discharge jelly-like. Flow stains permanently. Menses scanty, thin, light colored, and continue but a few days. Menses retarded. Spasmodic and membranous dysmenorrhœa. During severe menstrual pain, seems as if her heart would cease to beat, and the breath leave her body. *Leucorrhœa.*—Discharge thin, whitish-yellow, or thick, white and copious. Discharge excoriating, producing redness, smarting, and itching of the genitals. Discharge thin, colorless, except when coming on during a passage of the bowels; then it is thick and white.

Urine.—Frequent urging to urinate, passing large quantities of clear, light colored urine. Spasmodic dysuria in hysterical subjects.

Stool.—Alternate constipation and diarrhœa. Constipation with great tenesmus.

Back.—Pain gradually extending to the hypogastric region, and down

the thighs. Aching as if the back would break. Heavy aching, sacral pain. Stiff sore feeling in the nape of the neck.

Superior Extremities.—Buzzing feeling in the hands, as if they would break.

Inferior Extremities.—Sensation of great weakness and heaviness in the lower extremities.

Sleep.—Restless and unrefreshing. Sleep disturbed by a slight noise.

CASE.—Mrs. R—, five months pregnant, while out driving received a severe strain from holding her frightened horse. Three days after severe bearing-down pains began in the abdomen and back, interspersed with colicky, crampy pains through the abdomen from the hip prominences downward toward the vagina. An hour afterward, when called, I found her suffering all the preparatory pains of a miscarriage. She was irritable, would hardly answer my questions, and twisted about when the pains came on, placing her fists under her hips, and raising them from the couch. She complained of nausea and dizziness when rising from her couch; twice within an hour she felt all the preparatory symptoms of vomiting, which, however, did not occur. Her face was flushed (probably from straining), her pupils dilated, and a warm perspiration stood out upon her forehead. There was some frontal headache, some crampy pain down the face of the thighs, with a heaviness of the lower limbs. After two attempts to rise (on account of dizziness) she finally accomplished the erect posture, and with the support of her husband's arm about her excused herself and left the room for a few moments. Upon her return the pains again came on. Her leaving the room completed the picture of *Viburnum*, as to its symptoms upon the bladder, and I prescribed the 3d in water, a teaspoonful every 20 minutes, and awaited results.

The pains gradually lost their edge and became more bearable. At the end of forty-five minutes they were slight and far apart, the dizziness and nausea ceased, and the patient returned, as much as consistent, to her usual happy talkative mood.

I left, with directions to take the medicine if the pains returned, or any of the unpleasant symptoms came on.

The next morning I found the patient passing slowly about the house, at her usual duties. I ordered rest for twenty-four hours, stopped all medication, and the patient attended an evening party the succeeding day.

C. F. M.

PROVINGS OF COCAINE.*

WE have in this drug an agent which profoundly affects both the sensory and motor nervous systems. Its primary stimulant effects are

* Percy Wilde, M.D., in the *Monthly Hom. Review*, January, 1889.

rapidly followed by the secondary depressive action, and, as is usual with such agents, the depressive action takes place more rapidly in the sensory nerves than in the motor. If we aim at maintaining its stimulant effects it is necessary to give it in very minute doses, the third decimal dilution answering well for the purpose except in sensitive subjects, when it is necessary to use a higher attenuation. For its effects on the motor nerves it will be found necessary to use the lower attenuation.

Its action upon the muscular fibre of the heart points to its probable value in fatty degeneration of this organ, not only as a remedy for the symptoms which its action resembles very markedly, but as a curative agent. It should also be found useful in some cases of angina.

Its symptoms also point to its value both in organic and functional diseases of the nervous system. In the migraine of anæmic girls—which are rather “nervous sick-headaches” than the true migraine we find in persons of a gouty history—it is a very useful agent, and it should also prove of value in many of the manifestations of hysteria, neurasthenia, and spinal neuralgia. Its actual destructive action upon the ganglionic cells of the spinal cord would give the impression that it may be useful in the early stage of locomotor ataxy and some forms of paralysis.

The action of the drug is somewhat unique and well deserves a place in our materia medica.

SYMPTOMATOLOGY.*

Authorities and Explanations: (1) Symptoms following local application. (2) Symptoms following internal use. (3) Recorded by various observers. (4) Nikolai Unkovsky. (5) Mayerhausen. (6) Dr. H. Hall. (7) Dr. F. Schilling. (8) Dr. G. Bock. (9) Von Ploss, effects of a dose of 22 grains. (10) Zanchevski, experiments upon dogs. (11) Würdinger. (12) Dr. Bresgen. (13) Dr. L. E. Bellarminoff, (14) J. L. Calligan. (15) Spear, effects of the injection of 10 grains in a drunken man. (16) Ramsden Wood, effects of 1 grain. (17) H. C. Wood, effects of a quarter-grain dose. (18) Effects of the injection of 1 drachm of a 20 per cent. solution in the urethra preparatory to urethrotomy; death followed in 20 minutes.—*Philadelphia Medical News*, 1888, p. 70.

Mind.—Restlessness³⁷; excitement³⁷; unconsciousness from which the patient cannot be aroused even by shouting⁷. Hallucination or mania presented in only a few cases. Cerebral anæmia with semi-consciousness⁷. Patient lay as one asleep, talking as if in delirium⁶; makes foolish remarks¹⁸.

Brain.—Much congested; membranes thickened for 2 square inches around longitudinal sinus, and adherent to brain (post-mortem)¹⁸.

* Rearranged with additions from Dr. Wilde's article.

Face.—Congested¹⁸. Twitching of facial muscles¹⁸.

Head.—Giddiness³; vertigo^{3 7}; faintness³; supraorbital headache³.

Eye.—Sensibility of conjunctiva lost^{2 7}; pupils normal⁸; dilation of the pupils and almost complete amaurosis^{2 3 18}. Papilla of optic nerve normal and full⁸; retinal veins normal, but the arteries rather thinner and paler than usual⁸. (Opacity of the true corneal substance, and vesication and desquamation of the epithelial layer);* eyes staring¹⁸.

Mouth.—Intense salivation^{1 3}; dryness^{2 4}; frothing at the mouth¹⁸.

Tongue.—Loss of power⁵.

Throat.—Spasm of abductor muscles^{1 6}. Weakness and thickness of the voice⁸.

Stomach.—Tendency to vomit but the effort useless, only the movements of retching are produced¹². Recurring vomiting lasting two or three days¹³. Cramps in the stomach¹⁰.

Liver.—Atrophy of the hepatic cells (*post mortem*)¹⁰; much congested (*post-mortem*)¹⁸.

Abdomen.—Severe abdominal pains⁹.

Respiration.—Convulsive¹⁶. Irregular, hurried, deep and full¹⁷. Dyspnoea³. Respiration unaffected³. Paroxysmal dyspnoea (cardiac?)⁴. Increased frequency of respiration for a quarter of an hour during acceleration of the heart's action¹⁰. Respiration 9 per minute and stertorous¹⁵. Respiration interfered with, followed by failure of the respiratory muscles¹⁸. Lungs much congested (*post-mortem*)¹⁸.

Heart and Pulse.—Excitement quickly followed by weak action³; often intermittent palpitation³. Albuminoid degeneration of cardiac ganglia (*post-mortem*)¹⁰. Heart's action not much interfered with, or only secondarily so¹⁸; action of the heart irregular and slow (near death)¹⁸. Heart normal; right side empty, left side filled with currant-jelly clots (*post-mortem*)¹⁸.

Bloodvessels.—Cellular proliferation and hyaline degeneration of the coats of the bloodvessels in the spinal cord (*post-mortem*)¹⁰.

* Some experiments made by Würdinger, *Klin. Monat. für Augenheilk.*, April, 1886, seem to prove that the superficial lesions are due to the dryness of the cornea which follows the use of cocaine—a dryness which is caused in part by the conjunctival anæmia, and probably in part by the increased evaporation from the surface, produced by the wide opening of the palpebral fissure and the absence of the natural blinking movements. Experimenting upon rabbits, Würdinger found that if the eyelids were kept closed between the instillations of the cocaine, no changes took place in the appearance of the cornea: but that if the eye remained open, and a five per cent. solution were dropped upon the cornea at intervals of four minutes, after twenty or twenty-five minutes the whole surface presented a fine roughness, and the epithelium desquamated in places. The commencement of these changes could be seen three or four minutes after the first application, and their increase could be prevented by keeping the cornea constantly wetted with distilled water. It seemed clear, therefore, that the epithelial changes were due to the dryness of the corneal surface.

Urine.—Suppressed for 24 hours⁹.

Back.—Agonizing pain along the spine, especially marked in the lumbar region⁴.

Extremities, lower.—Complete inability to move the limbs⁴; great weakness of the legs; the animal remained in a sitting posture¹⁰. Coldness³.

Muscles.—Twitching convulsive movements³. Tetanic spasms of muscles⁴. Fatty degeneration of muscle (*post-mortem*)¹⁰. The whole muscular system took part in the violent epileptiform convulsions which increased and lasted some minutes¹⁸.

Nerves.—Albuminoid degeneration in cases of chronic poisoning, especially marked in the *ganglionic cells of the spinal cord and cardiac ganglia*, less marked in the gray cells of the medulla oblongata (*post-mortem*)¹⁰. Violent epileptiform convulsions lasting some seconds¹⁵.

Skin.—A rash about the body especially affecting the neck and resembling scarlatina¹⁴. Numbness of the skin¹⁴. Blanching of the skin⁴.

General.—Cyanosis^{3 18}. Sweating^{13 3}.

Sleep.—Immediate⁹.

HOMŒOPATHIC THERAPEUTICS.

Tetanus.—*Hypericum.*—*Apropos* of the article in this issue upon "Hypericum in Tetanus:" At 9 A.M., on the 20th of February, I was called in haste to the office of a neighboring dentist. On arrival I found him applying ice to the head of a lady about 32 years of age, who laid back in his chair perfectly rigid. Noting that the pulse and respiration were normal, I asked the history of the case. He said that the lady had had some toothache the night before and was sleepless from the pain; that she came in and he extracted the molar without an anæsthetic, and that after once expectorating in the cuspidor at the arm of the chair, she had sunk back on the head-rest, her jaws became rigid, and with a shudder she became as she then was, perfectly rigid in every muscle; thus she remained for an hour, in spite of breathings of ether and chloroform, which had only slight and very temporary effect in relaxation. While we talked, her body slowly rose into opisthotonus, and the open eyes rolled back into the sockets until only a small portion of the iris could be seen; then with a tremor her body sank back into the chair, and pleurosthotonus slowly came on, remained a few moments, and with once more a shudder, her body relapsed into the old rigid, straight position.

I at once prepared *Hypericum* 1 cent., and poured a teaspoon of a solution of twenty drops in half a glass of water into her mouth, closing

the lips until it slowly trickled through the spaces of lost teeth into her throat. This dose was repeated at intervals of fifteen minutes for an hour and a half, during which time the archings of the body twice occurred, and once somewhat clonic spasms came on for a moment. There was almost constant rigidity of all muscles, absolute insensibility of the body, even including the eye, and total unconsciousness. She was then carried to a lounge, and in half an hour longer, just as we were preparing a dose of a grain of opium in a little brandy and milk for her, she gave a sigh, and moving her hands to her head, brought her eyes to direct line and appeared conscious. On calling her name loudly and asking in a loud voice how she felt, she answered slowly, "pretty good." We then reduced the *Hypericum* to the 2d centesimal, and gave another dose. She now gradually spoke more freely and could open her jaws a little, was free of spasmodic action except when a door opened, or her hands or face were touched, then a short clonic spasm would convulse her.

At 2.30 P.M. a sleigh was procured and we took her home; this threw her into a state of perfect rigidity again, which lasted with intermissions of spasms of short duration, coming on at intervals of about an hour (when the clock struck or other sharp sound occurred) until midnight, when she came out of all tonic spasms. All this time she received *Hypericum* 2.

On calling the next morning I found her still shaky, but up and dressed in a wrapper. She complained of feeling sore all along the spine, and in her muscles generally; her pupils, that had been dilated all through her trouble, were now normal or somewhat contracted; her gait was very unsteady; she was nauseated, dizzy, and felt a "strange faint" pervading the whole body.—*Hypericum* 30.

The following day she felt still quite "used up," but generally much better. She said that once before she had had such a "time" after the extraction of a tooth, during which she had been given opium, and it always brought on worse spasms than before it was given. That time she lay in the spasms two weeks and did not recover sufficiently to be dressed for three months. She said that she remembered nothing in this attack from the time the forceps were applied to the tooth until midnight. I gave *Hypericum* 30, a dose every 3 hours, and on the fourth day she appeared quite herself again, and has had no trouble since.

C. F. M.

A Tracheotomy Case.—A venerable colleague, in a letter to us expressing freely his disapprobation of Sir Morell Mackenzie's book, relates the following interesting case:

"A gentleman was taken with sore-throat and difficult breathing; and on a consultation of doctors being held, and a laryngoscopical examination being made, the glottis was found to be œdematous. They decided

if the breathing became worse to have recourse to tracheotomy, or opening the wind-pipe. A clever young operator was engaged, and he went to see the gentleman and informed him that the operation was very simple. He inquired what the doctors had said, and was informed 'œdema about the glottis,' and they said if it went on swelling he must be suffocated. The operation was fixed for the evening. The intended operator said, 'I will give you a dose of medicine that will keep you quiet until then.' He gave him a dose of *Apis Mel.* the poison of the bee, which acts specifically on such an affection. In the evening when the doctors came the patient said, 'I feel so much relieved by what the young doctor gave me that I won't have the operation to-night.' They went out of the room for a talk, rated the operator for his unprofessional conduct in presuming to prescribe, and more especially a vile homœopathic remedy. The patient got quite well."—*The Hom. World*, Dec. 1888.

Puerperal Peritonitis.—Count Gerardo Freschi relates the following case: On the 7th of March, 1888, a call advised me that Catalina Stephani, wife of one of my young farmers, had been delivered eight days previously of a child that died shortly afterward. She was now so ill and without the hope of relief, that spiritual consolation had been administered. Surprised at this unexpected notice, and my deteriorated health rendering impossible my going to the house, I entreated Señora M—— the good sister of charity of my colonists, to please me by procuring complete information as to how much trouble had come to this excellent family, and to ascertain the precise state of the patient, and find out the exact history of the patient's disease.

She reported that no grave symptoms had presented in the patient until the night of the 6th, when at twelve o'clock she had an attack of cold chills followed by great heat and thirst, distension of the abdomen, aggravated by movement and touch, sleeplessness and groaning, and fear of death; this state of things had been present day and night since the onset. The allopathic physician who attended her had advised the offices of the priest, and had left her morphine and sulphate of quinine without much hope that they would afford any permanent relief, prognosing a fatal termination and saying that he would return while on his morning rounds.

The symptoms now presenting were: high fever, unquenchable thirst for cold water, sopor interrupted by sighing and delirium, painful breathing, face flushed, abdomen tumid, tense, and extremely sensitive to any touch or movement; she was obliged to remain quietly upon her back; the lochia had been entirely absent since the first day of the fever, and the breasts were flaccid.

Five globules of *Aconite* 30, were ordered to be dissolved in eight spoonfuls of water, and a spoonful given every hour, requesting, meanwhile, if there was no mitigation of the fever and thirst to increase the

intervals until morning, charging that if in five hours no better condition prevailed to let me know. The time having passed without notice I rested tranquil and confident of success. The following morning the allopath returned, bringing with him another physician, and a neighbor; he greatly admired the alleviation of the fever, which had come down almost to normal temperature, and the general better appearance of the patient; he, however, was very guarded in his prognosis, and ordered the continuance of the same prescription that appeared so efficacious. (?) After the consulting physicians had gone, message was sent me that though the symptoms had abated, and the patient had passed a more quiet night with less fever, thirst, and abdominal suffering, but now had a billious diarrhœa, with frequent greenish, frothy, fœtid passages, and no return of the lochial discharge. This evidenced the further uselessness of Aconite and determined the prescription of *Pulsatilla*, of which the 200th was ordered at intervals of three to four hours. The fever still farther abated under this remedy, the diarrhœa also ceased the following day, together with most of the abdominal symptoms, and on the tenth the lochia returned normally, and a complete restoration followed. —*El Consultor Homeopatico*, Dec., 1888.

Glandular Induration.—*Thuya*.—L. N., 11 years old, began treatment in August, 1881; he complained of a cough which continued day and night; it, however, did not awaken him. Perspired profusely about the head nights; over the upper half of the lungs moist crepitant râles could be heard. The cervical glands of the left side of the neck and over the apex of the lung were indurated so as to be distinctly perceptible. He weighed 5 stone 4.

The scar of vaccination was found upon the left arm, and the glands of the right side were not indurated. This will always be noted, that the cervical lymphatic glands will be found, even in sound children, to be indurated after the application of virus, on the side upon which the vaccination was made, and remain so for some time, even when the virus is pure. This case showing faulty virus or a phthisical diathesis called for *Thuya*, of which he got the 30th, 2 drops upon sugar of milk, and made into 24 powders, of which one was ordered three times a day.

On the 27th of August the cough had disappeared, but the perspiration continued. No medicine.

On the 6th of September, the most rigorous examination failed to disclose the crepitant râles. Coughs none. The perspiration had nearly disappeared; the cervical glands were no longer perceptible. The child now weighed 5 stone 8, showing a gain of 4 pounds since taking the remedy.

He is now entirely cured of the above symptoms.—*Allg. Hom. Zeit.*, 26, 1888.

Ailanthus glandulosus.—Dr. McNeil, of San Francisco, has pub-

lished an instructive study of this remedy. Hitherto *Ailanthus* was mostly known and advocated in certain forms of scarlatina (gangrenous diphtheritis, coma, and retroceding exanthemata). Now we know through provings upon the healthy that it is often indicated in typhoid fever, organic affections of the heart, and diphtheria.

The form of scarlatina in which it is indicated is far different from that calling for Belladonna. In the latter form we find all the symptoms of active congestion; delirium; the skin, mucous membranes and eruption are highly red; this redness, however, disappears under the pressure of the finger, and returns quickly upon removal of that pressure; the rash is uniform, and the skin hot.

With *Ailanthus* the skin and mucous membranes are bluish through venous congestion, and the circulation returns but slowly after finger pressure. The eruption is livid; at times mixed with vesicles, at others scarcely evident, or disappears altogether for some time.

With Belladonna there is active delirium, the patient strikes, bites, etc.

With *Ailanthus* the patient sleeps, though he may awaken when spoken to. Stupor and insensibility; the glottis is livid and swollen; the tonsils are prominent and show deep ulcerations secreting fetid pus. The glands of the neck are swollen and painful, the tongue bluish on the tip and edges. Urine and fæces pass involuntarily. The state of the patient shows a deep adynamia.

Ailanthus is indicated in diphtheria when the throat is livid, and the passage of air becomes painful; the cervical glands become swollen and painful; and great prostration presents.

Ailanthus is demanded in typhoid states by lividity of the skin and tongue as described, and when cerebral symptoms are as above mentioned; lastly also by the great redness of the face, the vertigo, nausea and vomiting.

Ailanthus corresponds also to several known forms of organic diseases of the heart, which present a livid complexion; dull pain and a sense of contraction at the base of the heart and in the centre of the left lung; swelling of the left arm; formication in the arms and fingers on waking; and by weakness and irregularity of the pulse.

[NOTE.—In the *Transactions* of the Homœopathic Medical Society of Pennsylvania for 1884 we find, on page 281, an exceedingly careful tabulation of the action of remedies upon the occiput. Under this *Ailanthus* plays a part (the occipital pain being characteristic of diphtheritis), which we cite on account of its completeness.

“Electric shocks from the brain to the extremities. Darting through the temples and occiput with confusion of ideas. Occipital pain; stupefying contractive pain in the forehead; left side of the face swollen; face erysipelatous; patient dull, drowsy, and very ill. Throbbing of the occipital artery.

“Useful in the recedence of scarlatina and erysipelas; and in typhoid states with occipital pain; dull mind; and dusky, livid, or mahogany-colored face.”]—*Allg. Hom. Zeit.* 26, 1888.

Sleepiness.—*Phellandrium aquaticum.*—Dr. Ussher reports in the *Hom. World*, Jan., 1889, a case of a patient under his care who suffered from abnormal sleepiness for years, following the birth of her last child. She would go to sleep over her wash tub. *Rhus.* formerly relieved her, until the following symptoms were found in Allen: “Sleepy so that she would fall asleep, standing at work, lasting an hour.” “She could hardly keep her eyes open, on account of weariness and sleepiness.” His patient thereupon received *Phelland.*, θ which at once relieved. The second week, for experiment, she was given the 200th, 3 globules three times daily, and this kept her most comfortable.” On reducing the dosing to twice, and finally once daily, the sleepiness returned, and the former dosage—thrice daily—had to be resorted to.

Pyrogen.—The following letter upon the clinical action of this remedy records another case where it has been used with beneficial result. The true value, however, of the drug, will never be known, until a proving has been made; as without it the next case where it is exhibited upon general principles may result in a dismal failure. In the light of many cases of typhoid, and other diseases accompanied by septicæmia, that have been benefited by its use, the profession appeals for a more positive schema of its usefulness. Dr. Alfred Drysdale says, that when injected under the skin of mice it produces all the symptoms of typhoid fever, culminating lethally in four or five hours. As it is impossible for any one drug to give the symptoms of every case of typhoid a great desire evinces to know just what symptoms this indubitably valuable remedy gives:

“The article by Dr. St. Clair Smith, in last number of *THE RECORDER*, regarding his failure to obtain good results from “Pyrogen in Typhoid Fever,” induced me to put upon record the positive success I have had, in a purely typical case of the above disease, now rapidly convalescing.

“The case was one, which from the first gave me considerable apprehension as to ultimate recovery, because of an extremely nervous temperament, and a general make-up of constitution indicating the “poor subject for such a disease.” Not one characteristic symptom of true enteric fever was missing. The peculiar eruption, great delirium, tympanites, intestinal hæmorrhage, diarrhœa, subsultus, and bronchial catarrh were all well marked. Maximum rate of pulse 130, of temperature 105.3 F.

“As soon as I found it to be true Typhoid fever I sent through a local agent to Messrs. B. & T. for 500 tablets Pyrogen 6. Owing to delay in

mail I did not receive the remedy until the disease was firmly established. First day of Pyrogen—morning temperature, 101.5; evening, rate, 103. Second day 100 and 101.5, and these latter temperatures were maintained—excepting as further described—until close of third week, when the gradual subsidence toward normal heat and pulse began.

“On four different occasions during the time of administering the Pyrogen, I ceased giving it, with the uniform result of having within ten hours a rise of one or two degrees of temperature, accompanied with all the usual distressing and alarming symptoms usually attending decided increase of bodily heat. The thermometer marked at two of these suspensions of the Pyrogen 105.3. Upon each renewal of the remedy, and after about ten hours, the register would show for morning 100, and evening 101.5. Pulse rate was not so favorably influenced, but was distinctly under the controlling action of the medicine.

“This is the only case in which I have prescribed Pyrogen, but am so pleased with its perfect work in this one that I shall certainly appeal to it again with the utmost confidence. It is my opinion, based upon twenty-five years’ experience, that this case, through the action of Pyrogen was not only very much simplified and benefited, and comfort of patient greatly enhanced, but had not temperature been kept within reasonable bounds, we would have had intestinal perforation and all that that implies.

“The Pyrogen was given dissolved in water, each teaspoonful of which represented three tablets of the remedy. One teaspoonful every two hours was generally enough to control the temperature. On two or three occasions I gave one and a half teaspoonsful every hour for two or three doses.

“The duration of the disease was not shortened.

“Other remedial agents were Bryonia alb., Rhus tox., and ‘Oxygenated water.’”—J. V. Riggs, M.D.

Chimaphila umbellata.—*Chronic Stricture of the Urethra*.—S. U., 30 years of age, complained of a difficulty in passing urine, accompanied by severe pain, scalding and burning. At times the urine was voided in a large gush, at others in a thready stream, and toward the end drained off drop by drop. *Merc. corr.* and *Canth.* were followed in a short time by improvement but were always succeeded by a relapse. *Chimaphila* produced a complete cure. *Prostatitis*: This trouble appeared in a patient after sitting upon a cold, wet, stone. The symptoms were pain and chronic dysuria, increasing until ultimately complete retention of the urine resulted, and enlargement of the prostate took place. The patient then complained of pain, and a *sensation in the parts as if he had bruised one of the testicles*. This induced me to administer *Chimaphila*, which produced immediate relief, dissipating the

symptoms in the inverse order to which they had appeared. I have given this remedy in senile hypertrophy of the prostate with palliative effect, but many times it is not sufficient to cure.

Cancer of the Breast.—W. T., age 21 years. Tumor in the left breast, hard, movable, and not compressible; with sharp pains at the site. For four months the patient took *Arn.*, *Ars.*, *Cicuta*, and *Thuja*; during which time the skin in the neighborhood became contracted, the nipple retracted, and tumor augmented, both in size and sensibility. Eight months after the first manifestations, the tumor opened and disclosed a little persistent ulceration, irregular in shape, and having irregularly lacerated edges, the center suppurating with fetid pus. The axillary glands were very much swollen. I now prescribed *Chimaphila* in doses of 10 drops of the tincture every four hours, and a topical application of the same preparation. The pains diminished; it reduced the size of the tumor and the breast as well, and finally in six months the patient obtained a cure.

This remedy is also indicated in ptyrigion.—Dr. Coburn, in *El Consultor Homeopatico*, Dec., 1888.

ITEMS OF GENERAL INTEREST.

Resorcin in the Treatment of Keloid.—Audeer has recently published a note in which the application of resorcin was of great service in the treatment of keloid. The patient was a woman, whose right foot was curved over two-thirds of the dorsum, with an irregular star-shaped mass of scarry tissue raised in demi-relief. It was very tender, so that progression was impeded. At night, when in bed, or a hot summer's day, and at the changes of the weather, the pain of the keloid was almost unbearable, so that at times the patient could not do her housework. A 1 per cent. ointment of resorcin was applied, and the foot bandaged. The patient was soon relieved, and the continued application of the treatment brought about a permanent cure of the pain. Von Nussbaum has also experienced a good result from the use of resorcin in keloid.—*British Medical Journal*, Oct. 27, 1883.

The Sun Spurge; A Cure for Warts.—The *Euphorbia helioscopia*, a member of the euphorbia family as its first name implies, is a common plant on waste places and in kitchen gardens. It varies in height from two inches to two feet, and bears in July and August, comparatively large heads of greenish-yellow flowers having the characteristics of the British euphorbias. When any portion of the plant is injured, it exudes from the wound a thick milky juice, which hardens and turns black on exposure to the air. It has been variously termed

the wart weed, or wart wort, and, though occasionally used by the peasantry for the removal of warts, is not generally recognized as a useful remedy. I have, however, successfully and painlessly removed verrucae from the hands and face by the external application of its juice, the *modus operandi* being extremely simple, and is as follows: Having pared away with a sharp knife, or removed with a scissors, the upper strata of the growth, I nip a stem off the wart weed (preferably near the top of the plant, as that portion contains stronger juice and more of it than an other portion), and apply it to the part; as it dries more is applied, and so on at least three or four times daily. When a scum forms, consisting of inspissated juice and disintegrated epithelium, it must be removed before again using the remedy. If the growth is recent or small, paring is unnecessary, in fact, I merely use the knife when the patient desires a more rapid cure, as the process is otherwise rather slow (but sure). This treatment has the advantage of being painless, and further leaves no mark; which must be my excuse for drawing attention to the therapeutics of this insignificant but disfiguring affection.—G. E. GREENE, in *British Medical Journal*, Oct. 27, 1888.

[NOTE.—*Euphorbia helioscopia* grows in many of the eastern United States and in Canada, especially in the neighborhood of large bodies of water, both fresh and salt. It is notable that the juice of many other species of the genus *Euphorbia* is credited in various localities with a like power of curing warts. This when coupled with the observation that the juice of the common milkweed (*Asclepias cornuti*), that of the American Hemp (*Apocynum cannabinum*), and of the Mexican poppy *Argemone Mexicana*), is credited with the same property, would seem to class them all with the majority of the “Voodou” and “charm” cures for warts, so common in domestic practice.—C. F. M.]

A further note concerning this species appears in the *Hom. World*, Jan. 1889: H. C. writes that his father once used the sun spurge for a wart near the eye, when some of the juice got under the eyelid. It gave him such agonizing pain, that he was nearly out of his mind for a time.

[This irritative action of the juice upon the conjunctival membrane and optic nerve has been noted before in species of this genus, and of other genera in Euphorbiaceæ. The tropical American sand-box (*Hura erepitans*) is said to produce blindness in a few days after application of juice to the eye. The Indian *Exaecaria Ayallocha*, says Rumphius, has a very strong action upon the eye, and adds that sailors that were sent ashore in Amboyna to cut wood, sometimes became furiously mad from pain produced when the juice of the plant spattered in their eyes, and some cases of blindness resulted. The juice of the Brazilian *Euphorbia linearis*, is said to cure wounds of the cornea directly it is applied.—C. F. M.]

Croup.—*Turpentine.*—In a dangerous case of diphtheritic croup, which had extended to the larynx, after treatment with *urquendum acidi boraici* and applications of muriatic acid without result; Dr. E. Lewentaner, of Constantinople, previous to the operation of tracheotomy, gave turpentine as advised by Demolro. He administered to the patient two teaspoonfuls of essence of turpentine, followed by a little warm milk. A quarter of an hour after the patient breathed normally, and fell asleep without cough. On the following day a complete cure was established, all traces of false membrane had disappeared from the larynx, which presented a superficial injected appearance. The convalescence was very rapid. The turpentine determined an eruption upon the face, trunk and extremities, having an appearance greatly resembling measles, but less red. The spots disappeared in two days without desquamation.—*El Consultor Homeopatico*, Dec., 1888.

[NOTE.—We remember reading a year or two ago of some severe cases of diphtheria that recovered nicely under the treatment of Dr. Sellden, of Stockholm, who gave a tablespoonful of oil of turpentine in a cup of milk as a last resort. He also recommended teaspoonful doses of a solution of $\frac{1}{10}$ th grain of cyanide of mercury to the ounce of water, and, if we remember the figures, lost but three out of sixty-one cases of contagious diphtheria.—C. F. M.]

Raw Oysters.—The practice of cooking is not equally necessary in regard to all articles of food. There are important differences in this respect, and it is interesting to notice how correctly the experience of mankind has guided them in this matter. The articles of food which we still use in the uncooked state are comparatively few, and it is not difficult in each case to indicate the reason of the exemption. Fruits, which we consume largely in the raw state, owe their dietetic value chiefly to the sugar which they contain; but sugar is not altered by cooking. Milk is consumed by us both cooked and uncooked, indifferently, and experiment justifies this indifference; for we have found on trial that the digestion of milk by pancreatic extract was not appreciably hastened by previously boiling the milk. Our practice in regard to the oyster is quite exceptional, and furnishes a striking example of the general correctness of the popular judgment on dietetic questions. The oyster is almost the only animal substance which we eat habitually, and by preference, in the raw or uncooked state, and it is interesting to know that there is a sound physiological reason at the bottom of this preference. The fawn-colored mass which constitutes the dainty part of the oyster is its liver, and this is little else than a heap of glycogen. Associated with the glycogen, but withheld from actual contact with it during life, is its appropriative digestive ferment—the hepatic diastase. The mere crushing of the dainty between the teeth brings these two bodies together,

and the glycogen is at once digested, without other help, by its own diastase. The oyster in the uncooked state, or merely warmed, is, in fact, self-digestive. But the advantage of this provision is wholly lost by cooking, for the heat employed immediately destroys the associated ferment, and a cooked oyster has to be digested, like any other food, by the eater's own digestive powers.—*Med. Classics*, Feb., 1888.

In the Maternity Department of the Women's Hospital in Philadelphia the eyes of new-born babes are washed with an antiseptic solution at the earliest opportunity. Warmly covered, the baby is laid in a little bed by itself, and neither washed nor dressed until twenty-four hours have elapsed, when it is carried to the babies' bath-room (which is properly heated), and there its toilet is performed for the first time. The physician in charge states that since this plan has been adopted the babies thrive to a far greater degree and cry less.

Olive Oil in Gall-stone Colic.—This remedy, first made known through American homœopathists, also, among other things, recommended by this publication, is now noticed by another physician, who has deigned to agitate its use. Dr. Rosenberg reports a case in the *Berliner Medicinischen Gesellschaft* of the 18th April, 1888. He had found all attempts to mitigate the patient's sufferings fruitless, until he gave, during a violent attack of gall stone colic, at one dose, 100 grams of olive oil. On the next day he found in the stool three gall-stones about the size of lentils. The day after he gave 180 grams, after which about 200 stones were passed, among which was one about the size of a hazelnut. On a repetition of the same dose 243 stones were brought away. This patient took, in the course of time in five doses, 820 grammes of the oil, and passed in all over 600 gall-stones. The gall-bladder, which had before risen above the margin of the liver to the size of one's fist, could not now be felt. Dr. Rosenberg avoided, through the use of this simple remedy, a dangerous operation.—*Pop. Zeit. für Hom.*, 1888, 194.

The olive-oil treatment for gall-stones, mentioned in yours of January 15th, is good, I am sure. But here is a preventive, by means of the same remedy, in lesser doses. Give at night 1½ ounces olive oil in $\frac{2}{3}$ of a tumbler of warm milk. Stir before drinking, and it is not bad to take. The next morning give three Seidlitz powders a half hour apart. If gall-stones do not come away it will be because they are not there. But if there is danger of them, fatty balls, such as must needs obstruct the ducts, and may turn into stones, will appear by the score. You can easily believe, if you believe the above, that by taking preventive doses every month or so the terrible dolor may be averted. In the case where I tried the remedy the incipient stones (that floated) were at first of dark olive color, which gradually changed in a year to lightish yellow-green.—William S. Flagg.

Fern Extract.—In the *Prager Medizinischen Wochenschrift*, Dr. Bayer, of Reichenberg, cautions against large doses of *extractum filicis maris æthereum*, used for the expulsion of tape worms, without the supervision of the physician, upon the authority and directions of the druggist only. He claims that numerous symptoms of disease have been caused by the lay use of the druggists' preparations in gelatine capsules. The diseases caused show phenomena of irritation of the cerebrum, kidneys, stomach, and intestines; and in one case was followed by death.

Robinia, Poisoning by.—Thirty-two boys at the Brooklyn Orphan Asylum were poisoned by chewing the inner bark of this tree. Dr. Z. T. Emery reports on the cases that in the mildest vomiting of ropy mucus was observed, together with dilation of the pupils, dryness of the throat, and flushing of the face. In the severest cases the vomiting was of the same character, but more copious, and mixed with blood; other symptoms exhibited were retching, pain in epigastrium, debility, stupor, coldness of the extremities which were pulseless, heart's action feeble and intermittent, pupils dilated, and dusky pallor to the face. These symptoms were counteracted by bismuth subcarb., brandy, morphine hypodermically, sinapisms over the stomach, and heat applied to the extremities. Recovery in two days.—*N. Y. Med. Jour.*, January, 1887.

Eschscholtzia Californica.—One of our homœopathic journals of February, 1889, contains the following item: "An American plant, *Eschscholtzia Californica*, has been found to contain morphine, which has never been found before except in the papaveraceæ;" as a matter of fact, *Eschscholtzia* does belong to the papaveraceæ; thus the discovery of morphia among its principles is not so astonishing. *Eschscholtzia*, by the way, is a plant that deserves proving. The Indians of California claim that the leaves rubbed upon the head will cause severe headache, and bind them about the head to cure headache.

Iodoform and Iodol.—H. Sattler has made extensive investigations of the antiseptic properties of these two remedies on sterilized silk threads, which were impregnated with cultures of various pathogenetic micro-organisms, staphylococci. He found that Iodoform, in the form of a powder, distinctly prevents in many cases the development of micro-organisms, but that, in this property, it is very much inferior to the Corrosive sublimate solution, 1:1000, Carbolic acid solution, 5:100, and hot water. But, in this respect, it is superior to all other antiseptics excepting the above mentioned. Also, Iodol as a powder is much inferior to Iodoform, not regarding that it irritates the wound somewhat more than Iodoform. But, however, Iodoform- and Iodol-vaseline act differently from the powder: Of these two medicaments, Sattler gives Iodol-vaseline by far the preference, as it has a much more preventive

action upon the development of bacteria than Iodoform-vaseline. Therefore, he goes farther than de Ruyter, who explains the efficacy of Iodoform in that it decomposes the ptomaines, and thinks that he must also give it a certain anti-bacterial action. Hence, it is also only right to say, that theoretically, in spite of apparently contradictory experiments in the laboratory, Iodoform will not be driven out of surgical practice. As an antiseptic in surgical operations on the mouth, rectum, and genito-urinary tract, as well as in the treatment of purulent ulcers of the cornea, and especially in *ulcus corneæ serpens*, Iodoform has no equal.—Dr. H. Sattler, “*Fortschritte der Medicin.*” P. & P.

Hyoscyamine and Atropine.—When sixty years ago, Mein, and, independently of him, Geiger and Hesse, isolated Atropine from the plant *Belladonna*, it was believed that in this alkaloid we possess the active principle preformed in the plant, and this view held good up till to-day. From a communication from the chemical laboratory of Wm. E. Schering, of Berlin, we now learn that this is not the case at all, but that there is no Atropine in *Belladonna*, but merely an isomeric Hyoscyamine. It is also asserted that Atropine is nothing more than a transformative product of the Hyoscyamine previously formed in the root of the *Belladonna* plant. According to the method of preparation one may obtain from the *Belladonna* root only Atropine, only Hyoscyamine, or a mixture of these two substances. The transformation of Atropine into Hyoscyamine may easily be done by heating it for some length of time at 100° C., or by treating it with alkalies. Thus, the Atropine used by us so many years is merely the product of an insufficient and false method of preparation.

Hence, we must be prepared to hear, in the near future, similar discoveries in regard to other alkaloids. The following cautions are especially to be followed in the preparation of alkaloids:

1. The avoidance of strong mineral acids.
2. The avoidance of high temperature.
3. Evaporation should take place at the lowest possible temperature *in vacuo*.
4. Strong bases should be avoided in separating the free alkaloids.—*Therapeut. Monats-Hefte*, VI., 1888. P. & P.

Forcibly stretching the sphincter ani with the thumbs or forefingers, and pulping the muscles between the fingers and thumbs, if done thoroughly, will almost always cure that distressing disease, irritable rectal ulcer or fissure. What more will it do? A condition frequently present in females is the following: An aching, disagreeable feeling about the rectum, with occasional sharp, darting pains; pain in the back, sometimes extending down the thighs; a feeling as though the womb was retroverted and pressing upon the rectum. The womb is enlarged somewhat and inflamed. A slight leucorrhœa is present. There is head-

ache; the scalp is sore. There are more or less dyspeptic symptoms present, nervousness, constipation, etc. This category of symptoms is almost invariably attributed to some disease of the womb or its attachments. Treatment of the womb, however, does not always cure or relieve the symptoms. I have in several instances anæsthetized the patient, and forcibly dilated the sphincter ani, and by this means cured the trouble. I have done this even in cases where I have been unable to find any abnormal rectal condition other than a contracted condition of the sphincter muscle.

Some months ago I was sent for to see a lady in a neighboring city, who had been an invalid for a number of years. She had been treated by some of the best physicians of the State, but without benefit. The local treatment received was uterine, and general treatment for nervousness. She could not sleep nor eat. She was very nervous and anæmic. She suffered no very acute pain anywhere all of the time, but claimed she had some pains constantly in the womb, ovaries and rectum. Sometimes, but at no apparent regular intervals, there would be severe exacerbations of pain, as she asserted, in womb, lasting several hours. This would leave her very much prostrated. On examination, I found but very little uterine displacement, but some falling and enlargement; no ulceration. It seemed to be very sensitive to the touch. On account of sensitiveness sexual intercourse was impossible. I introduced the finger into the rectum in order to find the position of the uterus. I found the sphincter ani muscle very much contracted and extremely sensitive. Chloroform was given in order to make a more careful examination. By means of the finger and speculum in the rectum, I could find no ulceration or abrasion of any kind; no piles, nor anything but a contracted condition of the sphincter ani, very much less under anæsthesia than it was before its administration. With the index fingers I stretched the muscles very completely, and pulped it between my fingers and thumbs. I was surprised to find within a few days that all her aches and pains were gone. The nervousness subsided and soon entirely disappeared. The patient could sleep all night, and the dyspeptic symptoms and constipation disappeared. In fact, every unfavorable symptom passed away.

She is now in good health and spirits and gives perfect satisfaction to her husband.

What was the matter? It is my opinion that at some time there had been an ulceration, or perhaps a mechanical injury of the rectum, and in healing some nerve-fibre was caught in the cicatrix, thus producing the pain. Or it may have been purely rectal neuralgia.—Geo. J. Monroe, M.D., in *Medical Standard*, February, 1889.

Dr. Jacobus, of Buffalo, resently removed the entire stomach from a seventy-year-old woman. The patient has survived the operation a month.

Sewer Gas.—The presence of sewer gas in a room may be detected as follows: Saturate unglazed paper with a solution of one troy ounce of pure acetate of lead in eight fluid ounces of rain-water; let it partially dry, then expose in the room suspected of containing sewer gas. The presence of this gas in any considerable quantity soon blackens the test-paper.—*Burgoyne's Mo. Jour. of Pharm.*

A New Cure for Singultus.—Dr. Dresch of Faix, France, describes a new and sure method of curing hiccough. The sufferer closes his ears with the tips of his fingers, making firm pressure. At the same time he is given water to drink in small swallows. The hiccough ceases instantly.—*Bulletin Général de Thérapeutique.*

Open the Windows.—The great anatomist, Langenbeck, says: "I am sure now of what I suspected long ago, viz.: That pulmonary diseases are nearly exclusively (if we except tuberculous tendencies inherited from parents, I say quite exclusively) produced by the breathing of foul air. The lungs of all persons, minors included, who had worked for some years in close workshops and dusty factories, showed the germs of the fatal disease; while even confirmed inebriates, who had passed their days in open air, had preserved their respiratory organs intact, whatever inroads their excesses had made on the rest of their system. If I should go into practice, and undertake the cure of a consumptive, I should begin by driving him out, and prevent him from entering a house for a year or two."

BOOK REVIEWS.

Semi-Centennial Celebration of the Introduction of Homœopathy West of the Allegheny Mountains. Published by the Homœopathic Medical Society, of the county of Allegheny, Pittsburgh, Pa.

This report is very neatly gotten up and reflects great credit upon its editor, J. C. Burgher, M.D., and the society from which it emanates. Its frontispiece is a lithograph of Gustavus Reichhelm, M.D., the western homœopathic pioneer, whose settlement the celebration commemorates. It contains, beside, fine steel engravings of Drs. H. H. Hoffmann, J. H. McClelland, J. P. Dake, A. R. Thomas, William Tod Helmuth and J. F. Cooper, and photo-lithographs of Drs. J. W. Dowling, D. S. Smith and J. C. Burgher. The text, neatly printed, consists of Dr. Dake's oration on the passage of Homœopathy west of the Alleghenies; Dr. A. R. Thomas's Address; and those of Drs. Smith, Dowling and Burgher.

Dr. Helmuth's pleasing satire in rhyme entitled "Dogmatic Doctors," written for the occasion, and Dr. T. P. Wilson's happy verses "Westward the Star Similia takes its Way." This neat volume is an ornament to our table and will prove an accession to any homœopathist's library.

Proceedings of the Twenty-Fourth Annual Session of the Ohio Homœopathic Medical Society. 1888.

The reports of the different bureaus in this volume are very interesting and instructive, containing, as they do, excellent and carefully prepared papers. We congratulate our Ohio brethren upon the appearance of their year's report.

Transactions of the Homœopathic Medical Society of Pennsylvania. 1888.

Two of the most important features of this annual report are the elaboration of *Arsenicum album*, by the Farrington Club, of Pittsburgh, and a proving of *Zincum picricum*, by Charles Mohr, M.D. In the 100 pages upon Arsenicum, each member of the club has taken a part of the system and worked it up thoroughly, and the whole is brought together in the usual order of such matter in our materia medicas. This is excellent work and well done; how much more profitable is such work than the discussion of potencies and conjectures concerning micrococci, etc., that so often occupy the time of our societies and labors of our physicians! There are a goodly number of excellent papers in this volume contributed by some of our most active and energetic physicians of the state, and the whole forms a valuable publication.

Fourth Annual Report Westborough Insane Hospital.

Beside the usual tables of statistics, this report contains an account of three cases of operation upon lacerated cervixes with the hope that good results would follow upon the mental condition. All the cases were apparently relieved during the surgical illness that followed, but relapsed again on recovery. An account of three autopsies performed, with wood-cuts of the morbid brains is very interesting and valuable.

Of about 628 patients treated during the past year, there were 78 recoveries (12 inebriates), or 66 recoveries from insanity out of about 600 patients, a goodly proportion of 11 per cent. The death-rate was 6.87 per cent.

Eighteenth Annual Report of the State Homœopathic Asylum for the Insane. Middletown, N. Y.

In this report, Dr. Talcott adds twelve more remedies to his list formerly published in the 16th and 17th annual reports, in which he first mentions their general action, then their special sphere in relation

to disturbed mental conditions. The result of treatment in this asylum during the year is a very encouraging one; of the 455 patients treated, 100 were discharged cured, a proportion of about 22 per cent. (21.97), while the death-rate was only 5.35 per cent.

Cutter's Guide to the Hot Springs of Arkansas. 1888.

We have received, through the kindness of the Doctors Dake, this interesting guide, which with its statistical tables and analyses of the waters, as well as its illustrated descriptions of the surroundings of this noted region is worthy of careful and studious reading.

VETERINARY DEPARTMENT.

Equine Colic.

BY H. FISCHER.

ONE of the most alarming diseases to the owner of horses is colic. It demands by its acute onset and numerous victims very energetic and prompt treatment. It often runs its course in an hour, though its duration may be several days, or indeed a whole week.

Colic may be recognized by a constant restlessness of the animal, an anxious look, a refusal of both food and water, a desire to lay down, and a restless pawing with the feet. When it lays down, it rolls itself about on its litter, groans and sighs. When the attendant notices that the animal smites its abdomen with the hind foot, he may be assured that the seat of the pain is there. Urination and defecation are interrupted, and often the back portion of the trunk is considerably tumid.

The causes of colic are various; it may originate from greedy eating, from chilling, from improper or spoiled fodder, or from an accumulation of gas in the intestines; or it may be due to a stoppage in the *arteria colica*, thus cutting off the influx of blood to the intestines, and engendering this dangerous affection.

The frequent recurrences of colic, in spite of regular feeding and watering, mostly have their cause in this obstruction of the *arteria colica*, and deserve especial consideration; colic will only cease when the circulation again takes place normally in the bloodvessels where its course has been broken. A chalky deposit which is secreted here from the blood, may take place in the entire artery, impeding circulation and predisposing to colic symptoms that defy all remedies until death supervenes through carbonic acid poisoning, that even a good circulation in the lungs cannot obviate.

He who has an opportunity in a horse that died of colic, should make a careful post-mortem dissection of the deceased animal, and convince

himself whether or not a stoppage has taken place in the *arteria colica*. He should follow along the sides of the colon, and pursue the exposed artery until he comes to the spot where the closure occurred. Here he will find either a roughened portion of the artery or a thrombus. It is now that he begins to take an interest in his animals, and should never omit such dissection. The more one sees the more one learns of anatomical relations; and the better one learns to recognize and diagnose diseases, the easier will his practice become.

In all horses in natural condition one will hear on placing his ear upon the abdominal walls, a cooing or slight gurgling sound caused by peristalsis as the food passes along the intestines; in a horse afflicted with colic this sound is lost and deep stillness prevades the abdomen. In every case one must assure himself, whether fever is present or not, by seeing whether the tongue is moist and cool, or is hot and dry; and satisfy himself concerning the passage of excrement and urine, the frequency and character of the same. After he has learned to know all the symptoms accurately and thus cover the points in the case, he may have recourse to the choice of a remedy and use carefully but energetically all the means at hand.

We hold it useless to attempt to demonstrate the various complicated forms of colic from the symptoms displayed; we shall therefore confine ourselves to the treatment of the symptoms as they appear in different animals, being assured that if our remedy proves to have an exact counterpart of those symptoms, no matter what species of colic exists, success will follow its administration.

Flatulent Colic.—As soon as one is convinced that colic is imminent, should make the animal a high, soft litter, remove all food from the crib and rack; and rub both sides of the abdomen thoroughly with wisps of straw and cloth. When an appearance of external warmth is noticed, cover the animal well with a warm blanket. Now give internally *Aconite* 1, upon a wafer, a little piece of bread, or in a spoonful of water, and alternate with *Arsenicum* 4. If the disease does not quickly abate give the remedies every quarter or half hour. Should stoppage or retention of urine present, then give *Hyoseyamus* 3, 10 drops on appearance of this trouble; if severe constipation sets in give *Plumb. acet.* 2; continue the *Acon.* and *Ars.* in alternation, as they will in most part prove successful, especially when there is swelling of tympanitis. In the latter case one should also think of *Colchicum*.

Improvement first shows itself in a mitigation of the restlessness, and a return of the peristalsis, with its sounds, in the abdomen. When this occurs one should be careful that the animal receives no food under any circumstances. Should improvement continue, then after an hour has passed a little food and water may be allowed, and the clothing removed little by little from its body.

Rheumatic or Cramp-colic.—The symptoms of this form of colic, as

intimated above are very similar to those of flatulent colic, especially so when the attack is on. In this form, however, the pain is intermittent, each attack coming on more severe than the previous ones. In this disease the treatment should be very careful, and particular pains must be taken to exclude both nourishment and drink, as long as a trace of the disease remains.

Internally one should give *Aconite* 4, 10 drops, alternated hourly with *Chamomilla* 2, in the same dose, this during the intermission; during the attack at much shorter intervals. Wet bandages made in the manner described below are also particularly recommended.

The usual method of bandaging is to take a sack, dip it into cold water, and after wringing out the surplus, tie it strongly about the middle of the abdomen with a large straw wisp, and apply a quantity of woollen cloth over all. These bandages should be re-applied about every 2 hours by lifting the woollens, withdrawing the sack, shifting a newly wet one in its place, and carefully re-adjusting the cloths over all. This should be continued as long as the attack, and all finally removed carefully little by little to accustom the animal to the change.

Colic from Stoppage.—The form of colic due to stoppage in the *arteria colica* should be treated in the same general manner, and will often be followed by as beneficial results. Internally *Silicea* 4th trit., should be given, followed by *Sulphur* 1st.

Should it be desirable during the treatment of this disease to give a clyster, one made of soap only should be used.

When an animal recovers from an attack of colic, great care should be observed in the feeding; mashes and gruels with small allowance of unchilled water should be continued until it is judged safe to return little by little to the usual feed, as the animal regains its normal condition.—*Zeit für Hom. Thier.*, 6, 1887.

Bronchitis—Equine.—On the 10th of June, 1888, I was called to see Tom, a livery horse, aged about 10 years. Two days previous he had been allowed by some one who drove him, to stand without a blanket, on a cool damp day, and in a draught, while overheated. On the first visit I found him breathing rapidly, and on auscultation heard whistling, or hissing sounds at the sides of the chest, and louder similar sounds in front, all denoting bronchial and bronchiolar inflammation, the pulse was hard and quicker than normal, beating 75 to the minute. The mucous membrane of the nostrils was dry and red, and the mouth dry. Prescription, *Aconite* 30, two disks every two hours, a box stall and heavy blanket. The next day the moist stage of the disease was fully established; the animal coughed in a sort of semi-suppressed manner; the pulse was decreased in tension and frequency; the mucous membrane of the mouth and nostrils showed some moisture, but expectoration was not established, though the bronchial râles were coarse and loud; respiration seemed impeded by the mucous accumulations. The

animal now showed signs of weakness, standing with his legs slightly apart; his appetite had decreased. Prescription, one dose of *Calc. carb.* 6x, followed by *Kali bichrom.* 3x, a dose of 2 grains every three hours, and a steaming of the air tubes by pouring hot water over chopped hay in a bag and strapping the same over his face, every 6 hours. Third day.—The animal was found much weaker and lying down in his stall, coughing frequently and discharging large lumps of yellow, stringy mucous; his breathing was quite rapid, and his nostrils distended, discharging yellowish mucus, and quite sensitive; his eyes were moist and with but little expression; the chest râles were moist but still loud; he had refused his morning feed; the bowels were somewhat constipated. Prescription, *Kali bich.* 30, in water, a tablespoonful every four hours for three doses. Fourth day.—Found Tom this morning with all symptoms somewhat relieved; he had taken a small allowance of mash and a better look to the eyes was apparent; he still kept the recumbent position. Prescription; five numbered powders four of *Sac. lac.* and one of *Kali bich.* 30, to be given at 9 P. M. Fifth day.—The animal's breathing is now quite normal, both inspiration and expiration; he took his morning mash nicely, and his eyes look as if knowingly interested at what passed around him; the râles are finer, and his nostrils are no longer dilate; *Sac. lac.* Sixth day.—Found the horse upon his feet, the passages of the bowels more natural; the cough greatly improved and general appearance better; gave *Sac. lac.* and ordered a more generous diet. Improvement now became general; on the eighth day he was walked about under a blanket, the weather being somewhat cool. On the tenth day he was driven short stages with care. On the fifteenth day he was put to his ordinary tasks of miscellaneous driving, his condition being normal.—C. F. M.

Dysuria—Equine.—On the 2d of August, 1888, Señor Miguel Plana asked me to visit a horse at his house. On arriving there I asked that the animal be walked to the square that I might observe his actions. He was able to but poorly support himself upon his fore-legs, and upon examination I found that he suffered an inflammation of all the soft parts within the pelvis, and determined the case to be one of "hard-water." I administered a dose of *Aconite*, and ordered a bath in the river morning and night, placing the animal in the water above the knees; ordered also a dose of *Arsenicum* at noon and another at night, and that a cataplasm of chimney soot and vinegar be administered while in the river, as there seemed to be faulty nutrition from his food. The third day a dose of *Arsenicum* at 6 A.M., noon and 8 P.M. was ordered and the baths and cataplasms continued. The fourth day a morning bath and a dose of *Nux vomica*; in the evening another dose of *Arsenicum*. On the fifth day all symptoms disappeared, and the horse returned on the sixth day to his ordinary labors.—Don Pedro Saguer, in *El Consultor Hom.*, 1888, 363.

PUBLISHERS' DEPARTMENT.

Schussler's Ferrum Phosphoricum.—Schussler first communicated his views and experiences with the now celebrated “tissue remedies” in 1872, and Dr. Constantine Hering translated this first edition of the brochure into English early in 1874, adding thereto a small repertory.

At that time there was only one preparation of Ferrum phosphoricum mentioned in the *German, Austrian, British, and U. S. Pharmacopœias*, namely, the Ferroso-ferric phosphate, under the name of Ferrum phosphoricum, or Phosphate of iron—and that was used, as a matter of course, by all pharmacutists, to supply the demand. Schussler merely speaks of it as Phosphorsaures eisen, or as Ferrum phosphoricum. Had there been more than one preparation known under this name at the time, he surely would have given the chemical formula or other description of it, but down to the last, the thirteenth edition of his little work, he did not feel called upon to do so, for the same preparation is still the only one of its kind mentioned in the *Pharmacopœia Germanica* of to-day. It is there called Ferrum phosphoricum, or Phosphorsaures eisen oxydul—other authorities more precisely style it Phosphorsaures eisen oxydul-oxyd, as it is, according to the *British Pharmacopœia*, a Ferrous phosphate partly oxidized. Squire states that it contains 45 per cent. of Ferrous phosphate.

The chemical formula, according to Dr. J. T. O'Connor, in the *American Homœopathic Pharmacopœia*, is: $\text{Fe}_3\text{2PO}_4, \text{FePO}_4, 12\text{H}_2\text{O}$. It is a bluish-gray powder without odor or taste. It is soluble in acids, but insoluble in water or alcohol. The powder becomes a greenish-gray when warmed, and at a higher temperature grayish-brown.

This preparation triturated has been furnished to the medical profession throughout the whole world for the last fifteen years, and with this preparation have been achieved the remarkable results which made out of Ferrum phosphoricum a polychrest, rivalling only Aconite in the frequency of application.

Dr. J. C. Morgan, of Philadelphia, made a proving of it in 1876, which was first published in the *Journal of Hom. Mat. Med.* of that year, and has also been incorporated into Allen's *Encyclopædia of Pure Mat. Med.*

In the revision of the *U. S. Pharmacopœia*, of 1882, a new preparation of Phosphate of iron has been introduced also under the name of Ferrum phosphoricum. This comes in yellowish-green scales, is odorless, of a slightly saline and acidulous taste, and readily soluble in water. Remington says of this: “This is a scaled salt, and very different from the insoluble slate-colored powder of Phosphate of iron

formerly officinal. It is not a definite chemical compound, but is sometimes termed Sodio-ferric citro-phosphate."

Oldberg and Wall (in their commentary on the latest edition of the *U. S. Pharmacopœia*) speak of this scale preparation as follows, p. 489: "This is a new preparation not heretofore described in any book. The fact that it has received the name of Phosphate of iron, without any adjective to distinguish it from the familiar *Phosphate of iron* of the *Pharmacopœia*, of 1870, is liable to cause more or less confusion. The old Phosphate of iron (the slate-colored) is the only Phosphate of iron at this writing known to the trade, the new preparation described above being known only to a comparatively limited number of pharmacists, and although the old preparation is now dropped from the *Pharmacopœia*, it will be many years before it will cease to be a common article of trade under the same name."

There is still another preparation known as *Ferrum phosphoricum*, and this is the Ferric phosphate generally called *Ferrum phosphoricum album*, or *Phosphas ferricus*. This is a white or faintly cream-colored powder, which is not officinal in any country to our knowledge. Dr. John L. Moffatt, of Brooklyn, read a report of some provings made of it under his directions before the Thirty-eighth Annual Meeting of the New York State Society. He maintains that this is the preparation that Schussler used, but fails to make good this claim, or to give any reasons for his statement.

As mentioned, already, the first translation of Schussler's work was made by Dr. Constantine Hering, and he always used the Ferroso-ferric phosphate as furnished by Boericke & Tafel. In 1885, Dr. J. T. O'Connor made a translation of the 12th edition of Schussler, and he, like his predecessor, simply gives "Ferrum phospho" same as Schussler did, without special description. In 1888, Drs. Boericke and Dewey made another translation, adding much clinical information, thus swelling the book to three times the size of its predecessors. They mention distinctly under *Ferr. phosphoricum*, the Ferroso-ferric phosphate as the proper preparation. In 1880, 84, and 86, different editions of a translation by Dr. M. D. Walker have been issued. In this work, for the first time, we find Ferric phosphate mentioned, and all through the book, wherever Schussler says "*Ferrum phosphoricum*" this translator puts in "*Ferric phosphate*." He puts that in without authority, for no *Pharmacopœia*, either allopathic or homœopathic, mentions this preparation. It is of course found in general works on chemistry, but has not been in use as a medicine. We therefore maintain that Ferric phosphate is not the *Ferrum phosphoricum* of Schussler, but that the slate-colored "*Ferroso-ferric phosphate*" is the proper preparation.

The several editions of the *British Homœopathic Pharmacopœia* of 1870, 76, and 82 mention the Ferroso-ferric phosphate, same as the *American Homœopathic Pharmacopœia*, in its three editions of 1882, 83,

and 85, the *U. S. Homœopathic Pharmacopœia* of 1878, also gives a correct description of the Ferroso-ferric phosphate. The *American Homœopathic Dispensatory* gives as synonym of Ferrum phosphoricum, correctly enough, Ferroso-ferric phosphate, but with characteristic bungling, appends to it directions for making a totally different preparation, *i. e.*, the soluble scale-salt, the Sodio-ferric citro-phosphate of the revised *U. S. Pharmacopœia*.

Other *Homœopathic Pharmacopœias*, like Drs. Schwabe's Polyglotta, Gonuer's, Deventer's and Buchuer's don't mention any Phosphate of iron at all. T.

Moschus.—We recently imported three sacs of Tonquin musk, weighing 41½ grammes (about 1½ ounces), which cost us \$37.35. This is the kind physicians, who make quality of more importance than price, use. The cheap article comes much less—here are exact figures: a 47-gramme lot cost \$8.55. It will take the sale of a good many ounces to make up the difference between the cost of the two. It also indicates why we do not “defy competition,” as the cheap shops are so fond of doing.

Epiphegus.—“Have tried *Epiphegus* for sick headache, and it works splendidly,” writes L. B. Woolson, M.D., Atwater, Minn.

Radical Cure of Fistula Ano.—The *N. E. Med. Jour.*, says: “Wash out the track with a 5-per-cent. solution of ‘hydrogen peroxide.’ Inject a 95-per cent. solution of carbolic acid, plus an equal quantity of a 10-per-cent. solution of muriate of cocaine. Draw about ten to fifteen minims in the syringe. Push the flexible needle to the depth of the fistuli, then inject slowly as you withdraw the needle. Inject oleum eucalyptus and glycerin, equal parts, and the operation is finished.”

The Prescriber, by J. H. Clarke, M.D. (2d edition, 207 pages, \$1.25), has had a remarkable success, the first edition being quickly taken, and the second one is fast going. It starts with “A” and runs through every ill known—“Abdomen, distended,” “Abortion,” “Abscess” to “Yawning,” “Yellow fever,” “Zona,” with treatment of each concisely given. May be carried in the pocket.

A Trio of Books.—*Fifty Reasons for Being a Homœopath*; Given by J. Compton Burnett, M.D., is the title of one of the most fascinating little books in the literature of homœopathy and one that no physician should forego the luxury of owning. (It isn't a very expensive luxury, as we furnish it by mail for 86 cents.) It is written in a style that carries the reader without effort and bristles with clinical cases of most decided value—of very great value, indeed—and thus not only is highly interesting and even amusing, at times, but decidedly instructive also. The way the book came to be written was this: Dr. Burnett was dining

at the table of a genial M.P. and in the company was another M.D. of the "regular" sort. A good-natured controversy sprang up over the almonds and raisins, and Dr. Burnett, among other things, said:

"Why, I could give fifty reasons for being a homœopath, that, if not singly, at least collectively, would convince a stone."

"Fifty reasons for being a homœopath!" was the response, "My dear doctor, pray let us have them; I have never heard one good reason yet." This banter—there is more of it—led to the publication of the book in question. Opening at random to "Reason the Twenty second," we read: "You tell me you are much mistaken in me, for you had always thought I was, 'for a homœopath, a very big doser!' and that the *Phosphorus* I once mixed in a tumbler for your aunt, actually 'smoked!' Perfectly true; I cannot discuss homœopathic (or, if you will), *my* posology with you, but I will give you my rule, viz.: *The dose depends upon the degree of similitude.* The greater the similitude, the higher the dilution and the less frequent the administration; the smaller the degree of similitude, the lower the dose. My own range of dose is from a few globules of the two hundredth dilution at eight-day intervals, down to ten drops of the mother-tincture (of weak drugs, of course) four times a day. The dose is often quite as important as the remedy, and your exclusively low, as well as your exclusively high, dilutionists are only one-eyed practitioners, though, of course, kings among the blind, *i.e.*, the allopaths." Then follows the clinical case, of which one or more go with each "Reason," in this instance, a "Case of Exostosis of Right Os cured by Hec'æ Lava," and he concludes it with "Brother Allopath, this is science in therapeutics," etc.

"Reason the Forty-ninth" begins: "In human life we have our favorites; we have them in our families, and in therapeutics I have a great fondness for certain remedies, one of which is Gold. You allopaths say Gold is no medicine at all, because it is an insoluble metal! That's what the best professors of *Materia Medica* taught me; it is fundamentally false, all the same! Oh, the silly, silly things they teach one in the schools! What a frightful heap of old fossil beliefs! For Gold is no mere function disturber, but a producer of organic change, and hence its brilliant effects in organic mischief. The vascular turgescence of *Belladonna* and *Aurum* are very different affairs." The clinical case in this instance is "Rheumatic Endocarditis in the Course of Rheumatic Fever," a really remarkable case. We think these two specimens, taken at random, will convince our readers that money is well spent in this bright little book.

Leucorrhœa, its Concomitant Symptoms and its Homœopathic Treatment. By A. M. Cushing, M.D. "This work," writes the author, in the preface to second edition, "at first written for my own use, was, by the advice of friends, given to the public. Encouraged by its speedy sale and the kind expressions received from the profession, as well as

the satisfactory results obtained by the administration of homœopathic remedies during a period of twenty-six years, I am induced to rewrite and enlarge it to twice its former size. Firmly believing that many cases of insanity or death, some by suicide, have been caused by the unwise and unscientific treatment of leucorrhœa, and satisfied that the internal administration of remedies, homœopathically indicated, is safer, surer and more speedy, gives me courage to issue it at a time when the tendency to a different method of treatment seems to have the ascendancy. Select the right remedy, and in some attenuation it will cure." Here is a specimen from the book; we select Dr. Burnett's "favorite," *Aurum metallicum*: "Thick, white leucorrhœa. Profuse leucorrhœa, which excoriates the perineum and inner side of the thighs, with vascular eruption on the parts and back. Labor-like pains in the abdomen, as if the menses would appear. Burning in the vagina. Heat, smarting and pricking in the vulva. Menses late. Painful retention of urine, with pressure in the bladder. Passes more urine than corresponds to the amount of liquid drunk. Constipation. Nightly diarrhœa, with burning in the rectum. Lumbar muscles so stiff she cannot raise the thighs. Bruised pain in the loins, worse during respiration. *Disgust of life*. Suicidal tendency. Despondent. *Melancholy*. *Great anguish*. *Peevish*. *Vehement*. *Angry*."

The work contains 162 pages and is exhaustive in its treatment of this very prevalent trouble. A good book to own. Price, 86 cents net, by mail.

Key-notes to the Materia Medica, as taught by Henry N. Guernsey, M.D. What Dr. Burnett says in his *Fifty Reasons*, anent high potencies,—and the father, Hahnemann, said it before him,—indicates the great importance of gaining an interior knowledge of the life-spirit of each drug, and of the increased power over disease the physician having this insight possesses, in being able to use high potencies when he sees the very spirit of the drug confronting him in the disease. In imparting this knowledge, Guernsey's *Key-notes* have few, if any, equals. Here is what is said about our friend, *Aurum*: "General characteristics: Strongest symptom is a *great desire to commit suicide*. This idea is uppermost in the mind all the time, and every opportunity will be sought for self-destruction. Sleeplessness. There may be an irregularity in the labor-pains, and when she rises up for anything, instead of lying down again quietly, she *thrashes* herself down *hard*. Hunger too strong. Affections of the prepuce; joints of the toes; desire for open air; erethism; sudden rush of blood to any part; pain in the joints as if bruised; sensation of contraction of the joints; very violent hysterics, accompanied with desperate actions, thrashing one's-self about. Dry *exanthema*." Among the particulars we read: "CHEST. Much difficulty of breathing, frequently taking a deep breath; stitches in; palpitation of the heart with anguish." "SKIN. Bony tumors on head,

arms and legs; swellings, ulcers, tetter, rhagodes, cancerous ulcers." Also, "GENERALITIES. Scrofulous sufferings; nightly bone pains; inflammation and ulceration of the bones, syphilitic or mercurial; sensitiveness to cold air." Price of book, \$1.87 net, by mail.

The Institute Session of 1889.

EDITOR, HOMŒOPATHIC RECORDER.

As a further announcement respecting the Institute session of 1889, I have to report as follows:

The Bureau of Surgery has received assurances of aid from a number of our distinguished surgeons, and will present a series of papers on "Surgery of the Brain," including cerebral localization; symptoms of cerebral tumor—its diagnosis and treatment; abscess; gunshot wounds; tumors of the dura mater, compound and depressed fractures, epilepsy from fractures, and indications for trephining.

The Bureau of Pædology has promise of active aid from several co-workers in that department, and is encouraged with prospects of a good report on preventive medicine in pædology.

The Bureau of Obstetrics is engaged on a report which will embrace nine papers relating to puerperal complications. All these papers are to be the work of well-known obstetricians.

Encouraging reports are being received from individual members of the Bureaus of Clinical Medicine, Sanitary Science, Ophthalmology and Gynæcology.

The Committee on Medical Education will present a careful report, embodying the views and suggestions of its various members. There will be no separate papers.

Notice is also given that as the chairman of the Committee on Pharmacy has resigned, involving also his withdrawal from the Committee on Organization of Provers' Clubs, the President has appointed as chairmen of these committees, Drs. T. F. Allen, of New York, on the former, and C. Wesselhœft, of Boston, on the latter. Those having business with these committees should note the change.

PEMBERTON DUDLEY.

General Secretary.

Westboro.—The *Springfield Republican* (Mass.), has a highly gratifying notice of the report of the Westboro asylum, "the only one (in Massachusetts) in which homœopathy is the basis and standard of medical treatment;" yet "it has reported a large and advancing rate of recovery from insanity among its patients, while other New England hospitals generally show a small and declining rate." And this is the more remarkable inasmuch as 400 of the 800 patients were not new cases but came from other asylums, "and it is a well-known fact that few recoveries occur among the chronic insane." From less than 750

patients, Westboro reports 133 recoveries in a given period ; while in the same time Danvers from 1500 reports 140 cures, Taunton 109 from 1150 cases, and Worcester 155 from 1400 patients.

High Potencies.—The man who opens up this subject in a homœopathic medical journal, is in a position somewhat akin to one who saunters through a powder magazine with a lighted cigar in his mouth. But the point we wish to refer to here is not that of the efficacy of high potencies, but the manner of their preparation. Those sold by the Boericke & Tafel's pharmacies are all made, according to Hahnemann's directions, *with alcohol* step by step from the first up to 30th, 200th, 500th and 1000th, each potency emphasized with twelve powerful strokes. The labor, and expense in alcohol, of running up these high potencies can hardly be realized by those who have not had the experience, but once accomplished the seller and buyer have the satisfaction of knowing that they have a high potency in every step of whose preparation, from first to last, the Hahnemannian rule has been strictly and literally complied with. Many of the high potencies to-day are made with water and no concussion used.

Calisthenics.—The Homœopathic Medical Society, of Philadelphia, at a recent meeting had quite a lively discussion on the subject "Hygiene of School Children." Dr. Korndoerfer said the school system of calisthenics as now practiced was very injurious to the children. The rapid motions to which they were subjected were liable to strain the joints, and recommended that slower movements be taught. Other members who were present thought the faults of the present system were due to a mistaken conception of school education and that the teachers should first be taught what was required before they were allowed to teach others.

Dr. C. Mohr said that he had often watched the pupils of the Girls' Normal School, and after a three months' course of the present system of calisthenics found the girls looked wan and tired, simply because of the violent exercise to which they had been subjected. Other physicians had been compelled to send excuses to teachers for scholars who were too ill to go to school on this account, and Dr. W. W. Van Baun, secretary of the society, declared that this state of affairs was brought about first, by the thin clothing worn by the children when being subjected to this training, and second because the exercise, while it only occurred once in two weeks, was continued for two consecutive hours and was too violent in its nature, so that the pupil was completely exhausted.

Water for the Baby.—The following suggestive little story was related to us by one who had raised a family herself. The weather was hot, the baby of one of her friends sick and she was asked to come, as

much, perhaps, from a desire for sympathy as anything else. She found the sick baby lying on its back, gasping, with half-closed eyes. It flashed on her by intuition that the little one was perishing of thirst. She asked for a glass of cold water, took the child up and held the glass to its lips. Two small hands clutchingly were stretched forth and the cold water eagerly gulped down. Afterwards the child went to sleep and awoke all right. This little incident was called to mind by reading in a journal the other day a paper by a physician, whose name, unfortunately, we cannot now recall, the wise remark that physicians and mothers should remember that though milk is the baby's food it will not quench thirst.

The amount of suffering from thirst by those unable to express their desires—babies and dumb animals—must be very great in this world. Pure water will hurt no one, and if offered will not be drunk unless wanted. It is safest to offer it frequently to those who cannot ask for it. We remember several dogs of our acquaintance whose master maintained that they had a right to all the water they wanted, and he kept a dish of it, fresh, for them at all times. The number of times those dogs took a drink was really astonishing.

Earache and Deafness.—In a letter from Dr. A. M. Cushing, Springfield, Mass., who may be called the father of Mullein Oil, occurs the following item concerning that remedy :

“Boy twelve years old, just wild with earache for three days. Applied Mullein Oil, and in a few minutes was sound asleep; had no more trouble. A few days later the other ear began to ache; cured at once.” Also “Mr. ———, aged about 50, very hard of hearing for years. After a few applications of Mullein Oil can hear a clock ‘tick’ in an adjoining room.”

Be it known that Mullein Oil is one thing and *verbascum* tincture another. Mullein Oil is a dark-colored liquid, with an odor something like rose-scented snuff, and is not an oil at all save in name. It is well to exercise a little care in purchasing remedies; a short time ago we were shown a specimen of “Mullein Oil,” purchased at a merely nominal price, which had not the remotest affinity to the real article.

Lanolin.—This comparatively new product of sheep's wool seems to be coming to the front. The *Medical Press*, under the heading of “A Cure for Wrinkles,” says: “A curious application has been made of the absorbable properties of lanolin in the treatment of wrinkles. Although not strictly speaking a pathological condition, it is one which is even a more serious, because less avoidable, evil than freckles. When well rubbed in, lanolin passes directly into the skin and acts as a nutrient to the subjacent tissues, with the effect of smoothing out the folds produced by the attenuation of these structures incidental to age.

Several elderly ladies who were induced to give this method of treatment a trial are said to have been delighted with the result."

Dr. Gottstein also, in an article to be found in the *Berl. Klin. Woch.*, November 28th, 1887, sums up the statement that lanolin is absolutely inimical to the growth of micro-organisms of whatever kind they may be. Glycerin fats can be penetrated by bacteria; lanolin, on the contrary, forms an impenetrable layer. As regards biology, Liebreich has shown that cholesterine fats, which are chemically the same as lanolin, are a normal constituent of the epidermis in man and the lower animals, thus constituting the most powerful protection against infection from without. Therapeutically speaking, lanolin has a great future before it. Its miscibility with water in any proportion, its ready absorbability by the skin, its freedom from any tendency to rancidity, constitute it the vehicle *par excellence* for cutaneous medicaments. Its preservative properties ought also to find practical application in other ways."

Hensel's Tonicum.—"Since one year I am living in Stuttgart, following literary pursuits. On the 20th of September, as the last page of this brochure was in press, I broke my established rule, and visited a leucæmic patient at the earnest entreaties of his wife; he had been given up by his family physician, and felt his end approaching. Found him, at 5 P.M., with *facies hippocratica*.

"Towards 6 o'clock, immediately after my consultation with the family physician, the patient commenced taking Hensel's tonicum in the form of lemonade. After using several quarts he obtained excellent sleep. On September 21st, full voice, excellent appetite, and generous consumption of food. On the 22d, re-appearance of color in cheeks, and patient raised himself in bed without assistance to micturate, secretion by the kidneys having been re-established. Since then, by continually using Hensel's tonicum, the patient is visibly progressing towards convalescence."—*Translated from Hensel's Brochure.*

A letter from Maine to our Grand Street, N. Y., house runs as follows: "Ordered five dollars' worth of Hensel's tonicum of you a few weeks ago, and are meeting with such success with it that now I want ten dollars' worth. Money enclosed."

Breath Regulator.—Dr. J. C. Burger's "Respiration Regulator" has been before the profession for a long time, and to judge by the steady, though moderate calls, it is quite a good thing, though at first glance every one is apt to say, or at least think, "humbug." It is simply a little glass tube with two holes in it, one at side and one in the end, and a mouth-piece at the other end. It is supposed to be used in the open air, drawing a full breath with both orifices open, and exhaling with finger on the middle one. Its use tends to strengthen the lungs and develop the chest, and habit of deep, full respiration. Cost is slight.

Complimentary.—One of Ohio's physicians writes: "Enclosed find one dollar for the HOMŒOPATHIC RECORDER for 1889. I find much to interest and instruct, as well as of general value, in its pages. It lifts one out of the old rut and broadens his view. It is a welcome visitor."

From New Hampshire comes the following: "I thank you for sending me specimen copy of the HOMŒOPATHIC RECORDER and the opportunity to become a subscriber. If the succeeding numbers equal the one I have I anticipate great satisfaction from its study. Am very glad to find, among other good things, the Veterinary Department."

"Please put name upon your subscription list for the HOMŒOPATHIC RECORDER, and while it continues at its present standard of excellence let it remain until ordered off." So runs a letter from Wisconsin.

Drs. Vogl and Allen, Junction City, Kansas, write: "The special inducement for sending you enclosed two dollars for the HOMŒOPATHIC RECORDER for 1889 is the new feature, the Veterinary Department. We like the rest, too. Will send you some contributions to your Veterinary Department soon." They will be welcomed.

"MESSRS. BOERICKE & TAFEL—GENTLEMEN: Please find enclosed one dollar for the HOMŒOPATHIC RECORDER for 1889. I have all the former volumes bound, and prize them much. If any of your readers have a cure for a dry, winter cough, that acts as a specific, tell them to forward it to me, and in return I will forward them many things that will more than repay. The person in view has been afflicted with pneumonia and salt rheum years ago, but a persistent hacking cough occurs every winter that cannot be controlled.

"Yours sincerely,

"G. E. NEWCOMBE, M.D."

OLD TOWN, Me., February 8th, 1889.

We would suggest the cure for dry, winter cough be given through the RECORDER, and also what Dr. Newcombe has of value, for thereby will the homœopathic world at large be benefited.

Obesity.—According to the *London Medical Press*, Dr. Lorenzen, of Erlangen, has been conducting a most faithful research in the matter of obesity by experimenting on himself. For a period of four years he drank 10 litres, equal to $17\frac{1}{2}$ pints of beer daily and followed it with a five years' course of 10 pints of beer and two pints of wine daily. "In this way he succeeded in increasing his weight by 78 pounds, and the usual unpleasantnesses of obesity made their appearance. On shutting off the liquids his weight fell 14 pounds in 7 days. If, however, more water was taken, but without alcohol, the weight increased again. . . . Similar experiments carried out on colleagues who were heavy men had similar results." Dr. Lorenzen certainly has given alcohol a very thorough proving.

Water.—A great many physicians are strongly commending the free use of water as a therapeutic agent—not particularly mineral waters, natural or artificial, but simply pure water. “The ordinary tumblerful of cold water every morning,” says the *Canada Lancet* “is an excellent hygienic measure,” acting locally as a tonic and aiding in the removal of waste matter. But a glass of *pure* water is not so easy to get in these days of befouled streams unless, indeed, a good filter is used such as the Gate City. It is a true spring and the water it furnishes, as we know from experience, is pure and may be made as cold as desired.

Too Many.—In a paper read before the Oregon Homœopathic State Society, by L. Henderson, M.D., of Salem, Oregon, on the subject of “Our Pharmacutists,” the writer says, among other things, that “*First.* There are more [pharmacies] than are necessary. *Second.* Out of the fact that there are too many, arises a competition of a character fraught with danger to the patrons of such pharmacies. We are indebted to their own bulletins and price-lists for the information that remedies are produced cheaply, with little regard to quality.”

It is not often that an advertiser growls because his advertisement brings too many responses, but something of the kind happened to one of the gentlemen running a FOR SALE in the RECORDER's pages, as the following extract from a letter from him demonstrates: “Some time since I requested you to withhold my advertisement from the HOMŒOPATHIC RECORDER for the present. And to day's mail is bringing me in more answers to it, so I presume you have failed to comply.” The trouble was that the notice to withhold came after the fat was in the fire and when fat is thrown in the RECORDER's advertising fire it makes a big blaze.

The following is an extract from an interesting letter addressed to us by one of homœopathy's pioneers, Dr. C. Bruchhausen, Norwich, N. Y. “I wish you to send me some of your ‘pure unfermented grape juice’ an article long sought and just discovered when needed, at my age, 82, as something stimulating but not inebriating. I was the first homœopathic practitioner who entered this (Chenango) county, in August, 1842, and had to pass through many trials and hardships in this then secluded region.” There have been some wonderful changes in the status of Homœopathy since 1842.

Acid Camphoric.—The topical applications reported on before the Berlin Medical Society, which showed styptic action on the mucous membranes within two minutes, were in some instances as weak as $\frac{1}{2}$ per cent.

The special cases for which particular strengths of solutions for topical application were recommended by the report, are as follows:

1. In *Acute Angina*: $\frac{1}{2}$ –1 per cent., every three hours.
2. In *Acute and Sub-acute Pharyngo-Laryngitis* and *Tracheitis*: $\frac{1}{4}$ per cent., rising to 1 per cent.,—by spray.
3. In *Acute Coryza*: 2 per cent., by cotton-wool tampon.
4. In *Acute Bronchitis*: 1–2 per cent., by laryngeal douche.
5. In *Laryngeal Ulcers*: 2–6 per cent., by spray.

Furthermore, Prof. Furbringer, in addition to his previous statements, reports cures of *Cystitis* combined with ammoniacal fermentation, by cystic injections of 2 per cent. solutions.

Dr. M. Niesels confirms Prof. F.'s (previously noticed) views of Camphoric acid, as of a mild, non irritant antiseptic.—Merck's *Bulletin*.

Acid, Chromic—as a *Local Anti-Diaphoretic*.—The *Deutsche Medizinische Zeitung* (page 914 of 1888) reproduces an official decree by the Royal Prussian War Department, recommending the use of chromic acid "as the best and most harmless *Preventive of Foot-Sweat* in marching troops."

The application consists in merely once "painting" the sole, and the inner surfaces of the toes, with a 10 per cent. solution of the acid, by means of a cotton-wool wad. (The dipping of the wad into the solution should be effected by a pair of cork tongs.)

The effect is instantaneous. In medium grades of the sweating disposition, a few applications, at intervals of 6–8 weeks, suffice completely; in worse cases a repetition every two or three weeks may be needed at first.

When the cuticle is already broken by abrasion, etc., it is advisable to begin the treatment by using a 5 per cent. solution only, repeated daily for some days in succession, until the dermis has regained sufficient compactness to bear stronger applications.—Merck's *Bulletin*.

Cerium Oxalate, Cerous.—After being approved since a number of years as a useful sedative in *Hemicrania*, *Vomiting of Pregnancy*, *Hysteria*, in the *Cough of Phthisis*, and as a soothing astringent in *Gastro-Intestinal Catarrhs*, Cerium oxalate has again recently been very favorably reviewed by Dr. Gardner, of New York, in most of the directions named. He believes it to exercise—besides its topical action on the mucous membranes of the stomach and intestines, above indicated—also a peculiarly sedative action on the vagus and sympathetic nerves, whereby he explains its calming effect on the phthisical symptoms. In the various ailments above and hereinafter indicated and discussed by him, he observed *no ill effects* from its use, *even when as large doses as 1½ grammes (23 grains) were repeated several times a day*; while the average single dose recommended by the older authors varied from 0.05 to 0.15 gramme ($\frac{3}{4}$ of a grain to $2\frac{1}{4}$ grains).

The principally striking feature of Dr. Gardner's report, however—(aside from his confirmation of the efficacy of Cerium oxalate as a mild internal astringent and a nervine, and the establishment of its harmlessness in much larger doses than those formerly employed)—consists in his pronouncing it the best specific against sea-sickness that has so far become known, when given in doses as large as 0.6–0.9–1.2 gramme (9–15–19 grains) every three hours in a tablespoonful of water.—Merck's *Bulletin*.

Homœopathy in Venereal Diseases. By Stephen Yeldham, consulting surgeon to the London Homœopathic Hospital, Fellow, and late President of the British Homœopathic Society. The fourth edition of this work has been brought out under the editorial supervision of Henry Wheeler, a work which the author entrusted to him, and which has been well done. The *British Journal of Homœopathy* said of the earlier editions of this book: "The present work is unmistakably the production of a practical man. It is short and pithy, and contains a vast deal of sound, practical instruction. The diseases are briefly described; the directions for treatment are succinct and summary. It is a book which might with profit be consulted by all young and many old practitioners of homœopathy." 192 pages. Sent by mail on receipt of \$1.42.

Mullein Oil.—"This is a new drug only lately brought to the notice of the profession by Boericke & Tafel. Enough provings have not yet been made to develop its whole symptomatology, but evidently its chief sphere of action is in urinary troubles, especially *enuresis*, to which it is truly homœopathic. The history of the drug is largely clinical so far, but enough is known to prove it a most valuable remedy for that trying affection of young children, especially girls, so difficult to cure, namely, *nocturnal enuresis*. Special indications cannot be given, but the clinical history of the drug seems to show that it meets the worst and most obstinate cases of this trouble, where other remedies have completely failed. Professor Moffat reports several cases where he had tried the common remedies, *Bell.*, *Hyos.*, *Sepia*, *Caut.*, *Puls.* and *Sulph.*, without success, but in which Mullein Oil wrought a prompt cure or else benefited the condition markedly."—*The Chironian*, February, 1889.

The dose often administered with good success is four or five drops in a glass of water; give a spoonful at a time. Can be had, however, in dilutions if desired.

Tarantula Cubensis.—*The Chironian* gives the following clinical case, in which this remedy was used with remarkably good and quick results. "A patient came to Dr. H——, suffering from a large car-

buncle on the posterior surface of her thigh. 'It was as large,' says the doctor, 'as a small-sized saucer, very hard, dark-purplish and angry in appearance, and so painful that the patient could hardly walk and was wholly unable to sit down.' The doctor ordered *Tarantula 3d*, every half hour until the pain was ameliorated, when it was taken at longer intervals as she grew better. The next day the patient returned, reporting that in two hours after the first dose the pain was greatly relieved, the carbuncle had softened and diminished in size, and soon began to discharge so profusely as to soak through thick cotton dressing. On removing the dressing her statement was verified in every particular. She made a rapid and complete recovery, and ever since has had the utmost respect for, and confidence in, Dr. H.'s 'Carbuncle Cure.'

To the above we would add that there are two *Tarantula* preparations in the pharmacy, *i.e.*, *Tarantula cubensis* and *Tarantula Hispana*. These two, and their differences, are fully described and illustrated in the RECORDER for March and July, 1887.

The danger-signal is ever fluttering higher and higher in this great age of everything. The *Sanitary News* has discovered that there is danger in the postage-stamp. A man suffering from disease writes to you and encloses stamp for answer,—which, by the way, many a man in health forgets to do,—and licks it slightly to make it adhere (sometimes to such effect that the stamp is useless), and you, in turn, lick it,—and there you are! And as for money: "If one could see through what hands money has passed, they would hesitate before using such a third hand," is the slightly ungrammatical state of the case. "Silver is as bad as paper money," etc. Nevertheless, and notwithstanding these dangers, we are inclined to believe that men, and even dainty women, will continue to risk the danger, and be rather glad to do it. For our part, we wish to say that the fear of spreading contagion need not deter any of our subscribers from sending us that dollar due; we'll chance it.

The Malt Extract Bonbons are catching on here as they have done in Germany. One evidence of their merit is the fact they can be eaten, day after day, and, apparently, no one gets tired of them. They do not turn against people, and we believe if the boy, or girl, who, on going into a candy-factory, is allowed full liberty to eat, and gets sick the first day, and wants no more, were given the same privilege among the Malt Extract Bonbons, he would keep right on, from Monday morning to Saturday night, and come up smiling on Monday morning. The malt extract in these bonbons tends to create a good, healthy appetite, and thus "it grows with what it feeds upon." The fact that these can be eaten so steadily without cloying the taste is pretty good proof that they are welcome to the system. For the throat and voice they are remark-

ably good, and also for children, satisfying their natural craving for sweets in a healthy manner.

One who peruses Dr. Burnett's *Fifty Reasons* is impressed with the advantage of a physician possessing a set of reliable high potencies.

Malted Milk.—There is one thing in connection with this excellent article that is not so well known as it should be, namely: A tablespoonful or two, put in a tumbler, wetted to a paste and diluted with water, yields an excellent glass of milk. Very handy to have a bottle of it in the office or house for lunch and refreshment. It is getting to be a great favorite for infants.

Milk and Consumption.—“A committee of the Canadian Parliament has just published a report of its investigations, which is likely to attract wide attention. The committee was appointed to inquire into the existence of tuberculosis in domestic animals, with special reference to the question whether the disease can be communicated from such animals to human beings. The opinion of leading physicians throughout the Dominion were procured, and these have convinced the committee that the disease is communicated to man by means of the meat of the tuberculous cattle and the milk of tuberculous cows. This view of the subject is not confined to our Canadian brethren by any means. We read in one of our recent California exchanges that in his address to the Butchers' Protective Association, C. A. Mercer, the Government agent of the Bureau of Animal Industry, said: 'It will be two years before this country can be thoroughly cleansed of diseased cattle, for from San Francisco Bay to Southern California, one-half of the State's stock is rotten. Out of every 100 consumptives, 12 acquire the disease from drinking the milk or eating the meat of consumptive cows.' The recent Consumption Congress in Paris also adopted resolutions as follows: 'The seizure and destruction of all tuberculous animals, whatever may be their appearance of health, should be a constant practice. Every effort should be made, by means of circulars, lectures, etc., to warn the laity of the danger of acquiring tuberculosis by the use of the flesh and milk of diseased animals.'

“It is generally admitted by leading physicians that many diseases are directly caused by the introduction into the human system of the microbe or bacteria characteristic of those diseases, though it does not follow that the introduction of the specific microbe will necessarily cause the disease it is related to. A person exposed to the action of these disease producers may be so healthy as to escape their effects. On the other hand, he may inherit such a special susceptibility to a disease that when its peculiar microbes are introduced into his system, they find the conditions perfect for their rapid multiplication and harmful activity. Dr. Austin Flint goes so far as to assert that 'it is probable that a person

with an inherited tendency to consumption, would never develop the disease if he could be absolutely protected against infection with the tubercle bacillus; but once infected, the bacteria multiply and produce the characteristic signs and symptoms.' The bacilli often possess wonderful vitality. It is well established that intense cold does not kill them. For this reason there is danger in using ice that has been taken from streams into which sewage is discharged. But they cannot survive exposure to great heat. Therefore, boiling of contaminated water makes it harmless."

"There is abundant evidence that cows are often tuberculous while seeming to be healthy, and within the past two or three years veterinarians have been impressed by the prevalence of this disease in herds of beef cattle as well as on dairy farms. There is trustworthy evidence that consumption may be and is communicated from such animals to man by means of beef and milk. The only secure method of preventing infection from these sources is by exposing the beef and the milk to intense heat—by thorough cooking and by boiling, and by careful and intelligent inspection of beef cattle and dairy cows. The sooner the Government takes the matter of beef inspection in hand the better it will be for the whole community. The proposition has been extensively advocated by the *American Analyst*, and we are gratified to find our contemporaries of the press, and the public sense generally, adopting our views with eager earnestness. We may not go so far as the chief of the veterinary school of the University of Pennsylvania. Dr. Huidekoper, who recently declared his belief that nearly one half of the deaths from consumption in this country were the direct result of eating tuberculous beef. But we consider it fully established that, as the *New York Times* says: 'Many deaths due to this disease are primarily caused by the introduction of the tubercle bacillus into the human system from the beef of tuberculous cattle and the milk of infectious cows.' If ever there was a subject that demanded the prompt attention of Congress it is this one of the establishment of a corps of national beef inspectors, to be placed on duty at every great cattle centre and slaughtering depot in the United States."—*Analyst*.

Loeفلund's Sterilized Cream Milk meets every requirement of a thoroughly good milk. The cattle in the Alpine district, whence it comes, are kept under the strictest medical supervision by Government officials. The country, however, is exceptionally healthy—pure air, pure snow-fed waters, good climate, and sweet grasses all combine to produce rich, wholesome milk. In addition to this the milk is condensed to about one-fourth its original volume, and then thoroughly sterilized. No anti-septics or sugar are used in this process, and the product is as pure and wholesome a milk as can be obtained, far better for infants, indeed, than the average milk when even fresh from the cow.

THE
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EDITORIAL.

THE potency, time, and frequency of the dose in homœopathic practice is undoubtedly much more puzzling to the average practitioner than the choice of the remedy; his cases, if carefully considered at all points, will generally indicate to him, if a student of materia medica, the proper remedy to be selected, but not so the dose. When we fully appreciate that case A requires the θ in the morning, hourly; while case B must have the 30th thrice per diem, and case C without doubt requires the M. potency once a fortnight; then, and then only, will we be able to apply homœopathy as it should be practiced.

There are certainly but few general rules for dosage, fully as few in fact as there are specifics among remedies, and in the light of this feature of practice, the great difficulties of homœopathy loom up before us like seeming inaccessible mountains, and we feel that to be first-class prescribers we should be allotted the days of Methuselah in order that we may be of some use to suffering humanity ere we return again to unthinking clay. It is mostly this difficulty that drives our less patient and plodding physicians into the mire of a mongrel form of palliative medication.

In order to be good posologists we should fully understand: first, the nature of our drugs, and then the nature of our patients, particularly as regards temperament. Deep study, therefore, and careful observation are evidently the needs of good prescribers. This is particularly necessary in the proper treatment of chronic diseases, where the individual treated requires as through a study as do his symptoms; as it is here that etiology, physiology, and pathology will avail us little.

To speak collectively, in acute diseases one may be successful with

most any strength of remedy from the θ to the 6x in the bilious and phlegmatic, or the 30th cent. or higher in the nervous and sanguine individual; yet in persons of mixed temperaments, especially the nervo-bilious and the bilio-sanguine, great care will need be taken in the selection and repetition of the dose, as no rule can be found applicable to any two sequential cases. In the same manner in chronic cases the 15th-30th may be found curative in the first class, the highest potencies in the second, while any may work wonders in the third or mixed individual.

As to the time of the dose there is no general rule, the prescriber must be governed by the aggravations and ameliorations of the remedy chosen as well as its strength.

In regard to frequency; here we must consider: first, the strength of the drug to be given; second, the condition of the case at the time; and third, the temperament (individuality) of the patient. In general the more acute and function disturbing the case and lower the potency, the more frequent may be the dosage, as the action of the remedy may be considered shorter than that of the higher potencies, and the disease will more rapidly correlate its work.

In chronic diseases we will often get more prompt alleviation from the lower potencies, but the remedy here will soon wear itself out and the case will, through its speedy and insufficient action, become often abominably "mixed." Here the higher potency will be found to work much more slowly, but with a curative action so handsome and complete that the physician will often share in the astonishment felt by his patient at his relief.

The class of the disease is also fruitful in guiding us to the strength and frequency of the dose. As a rule organic diseases will require high and infrequent remedial agents; while functional disorders will call for low and more constant medication.

We have many excellent works in our school upon pharmacology, symptomatology and therapeutics, that is to say upon the theory and law of practice, but a work upon posology, or the practical essence of prescribing, has never been, nor, we fear, never can be written; as this is a point of judgment, clear-sightedness, and perfection only to be gained by individual aptitude in each physician himself.

In reporting clinical cases greater care should be taken by correspondents to mention their ideas of the individuality of the patient treated, otherwise the mention of the drug alone should be made, as the noting of the potency and frequency of the dose have little or rather no significance otherwise, and are oftener misleading than instructive.

We feel confident that the homœopathy of the future will be far superior to that of the present, though the same therapeutic value of the remedies as such will pertain, and the same law, *similia similibus*

curentur, will prevail. What will work then the beneficial change? We answer, nothing more surely than the more zealous study of the patient, and the proper adaptation of the potence of the drug to the individuality of the sick. When this improvement comes, then will the insensate quarrels of the High and the Low of the present become sorrowful lessons to the *scientific physician* of the new era.

A CASE OF DIABETES MELLITUS*.

BY DR. AEGIDI.

THE patient, whose disease I here describe, is a landowner, 43 years of age, married, and the father of two healthy children. His disease began in April, 1861 (after taking cold in consequence of getting his body thoroughly wet), with a rheumatic fever; after which, two months later, the first signs of the present chronic disease appeared, which since then has gradually become worse. He was seven months under the care of four allopathic physicians, treated with various remedial mixtures, and by a homœopathic physician with *Sulph.*, *Calc.*, *Ac. phos.*, *Merc. oxid. rubr.*, *Phos.*, *Ars.*, *Silic.*, *Magnes. mur.*, etc., in low potencies in repeated doses, without the least result.

In February, 1862, the patient came under my treatment, when the following condition was noted: The patient was of medium size, normally built, hair of blonde color, and gray eyed. He was terribly emaciated, his face was fallen in, breast flat, ribs distinctly prominent, muscles of the extremities relaxed and withered, nearly skin and bones.

The tongue and gums were very red, the latter relaxed and receding from the teeth. The epigastrium was distended and very sensitive, the liver hypertrophied, the bowels obstructed and the stools of a gray color.

The skin was withered and covered on the chest with an erythema. Dull pain in the region of the right kidney on pressure. The urinary secretion was excessively increased, the amount of urine passed in the last days amounted to about 16–18 pounds daily. The urine was pale, almost like water, and yet somewhat whey-like, viscid, foaming after passing, of an acid reaction, specific gravity 1.103, † amount of sugar about 5½ per cent. The appetite and thirst were enormous; sleep was disturbed by frequent urination, spirits depressed, very despondent and anxious, mind dull and thoughts confused. The patient felt very exhausted and without strength;

* Translated from the "*Allgem. Hom. Zeit.*, Bed. 67, No. 20," by Messrs. F. Pritchard and Albert Pick.

† This high specific gravity seems rather peculiar.—Translators.

walking and all bodily movements difficult. Pains in the ankle-joints and heaviness of the feet. In the morning after sleeping, tired feeling and debility. All the symptoms are made worse by rest. Thirst most violent the whole forenoon with feeling of internal chilliness, confusion of the head, pressive pain in the forehead, especially after meals, roaring in the ears, sometimes vertigo with following nausea and difficulty in swallowing.

As regards the history of the case, it may be mentioned that the patient up to his twenty-sixth year enjoyed good health and was strong; he denies ever having the itch, but confesses having contracted in his nineteenth year a gonorrhœa, which in spite of remedies and injections lasted nearly a year. Upon careful examination the following was obtained :

Long after disappearance of the gonorrhœa for quite a while he noticed a troublesome itching on the hairy parts of the genitals, which was especially increased by the warmth of the bed. After violently scratching the itching part to obtain relief he noticed at this place a humid eruption, which after a few days became covered with a blackish scurf, leading him to fear that he had pediculi (pubis). Later, after this troublesome eruption had disappeared of itself, he noticed a multitude of small indurations of a yellowish white color, in the form of small, round bodies of the size of a grain of barley on his scrotum. These gave him no trouble, but disappeared gradually, leaving no trace. Not long, however, there appeared on the inner side of the lips and on the edges of the tongue sore spots of the size of the head of a nail to that of a cent, which were covered with a hard membrane resembling mother of pearl and which caused mastication of food difficult. He used *Borax with rose-honey* for the trouble, which gave him momentary relief, but however did not prevent the recurrence of this painful local trouble. Finally it entirely disappeared and his health for two years was in every respect satisfactory.

After a violent cold, taken after dancing through a winter night, he contracted such a terrible rheumatism that for six weeks he was confined to his bed. The disease yielded to the remedies employed, but left him with a painless weakness of the leg; even to-day does he feel a sort of paralysis in it. He also has a swelling of the bone in the joint of the right clavicle, which from time to time gives him pain, and even now troubles him some. Up to the beginning of his present disease he could not complain of other affections.

After learning all these circumstances, there could be no doubt but that the patient was suffering in a high degree from constitutional gonorrhœa, which was connected with the diabetes.

For these reasons and because the patient was of the hydrogenoid

constitution, I did not hesitate to prescribe him, according to the totality of the symptoms, *Natr. sulph.* and *Thuja*.

My friend, Dr. Wolf, having repeatedly warned me to always give *Thuja* in one dose and never to repeat it, made me fearful, and I gave, therefore, this patient two pellets of *Thuja* 30, and had him take eight days after the 3d centesimal of *Natr. sulph.*, five drops four times daily in a cup of hot water.* I will not describe the course of the disease with its change of condition, and I will only say that the result of this treatment was astonishingly favorable. After the patient had uninterruptedly taken *Natr. sulph.* for four months as indicated above, he completely recovered from his apparently hopeless and dangerous disease. More than a year has passed and one would now not recognize the man then given up to die; he feels strong, healthy and able to work, is cheerful, his muscles are strong, he has increased in circumference, his face expresses well-being, and even his lame leg troubles him less.

The reader of this case will surely not suppose that I recommend *Thuja*, and especially *Glauber's salt* as a specific in *Diabetes Mellitus*. Not at all! *Every case has its own peculiar characteristic symptoms, and indicates a special remedy.*

POTHOS (Skunk Cabbage).

Symplocarpus fetida, Salisb.; *Pothos fetida*, Michx.

(COPYRIGHT SECURED.)

THIS perennial, odorous member of the natural order *Araceæ* is one of our most common meadow and bog plants. From its very realistic, skunk-like odor when cut or bruised, and its resemblance in shape of leaf and mode of growth to the cabbage, it has been commonly well known as the skunk cabbage.

Belonging to the same family as the Calla lily and Indian turnip, the shape of its flower becomes at once familiar to anyone who observes it. Among the first plants to flower in spring is this species, and by closely observing the surface of any boggy meadow in the latter part of March or early April one will find irrupting the earth like a mushroom the points of many beautiful spathes gaping open to extend invitations to the earliest slugs and carrion beetles of the season. These are the flowers of *Pothos* appearing some time before the leaves, and when divested of the mud that clings to them, and polished with a damp cloth, as the apple-woman serves her

* I have observed that *Glauber's salt* taken in hot water acts excellently, as also the degree of temperature in the Karlsbad warm baths essentially modifies its action.

pippins, they shine out in beautiful mottled purple, orange, and deep red, and, being very fleshy, will keep up appearances many days if cut deep and placed in hyacinth jars.

The root is large, thick, and cylindrical, giving off its lower end numerous long, cylindrical branches; the leaves which appear on the fertilization of the ovary are large, smooth, entire, and deeply plaited into rounded folds. On opening the pointed spathe or floral envelope, a club-like mass will be noted arising from its base. This is the spadix bearing the naked flowers, which are perfect, consisting of a four-angled style and four awl-shaped stamens. The fruit, when mature, is a globular, ill-smelling, glutinous mass, consisting of the enlarged, fleshy spadix and changed perianths, and enclosing several large bullet-like seeds.

The roots are easily gathered, one alone being sufficient to make a year's stock of tincture for the most lavish practitioner.

THE TINCTURE.

Take the fresh root stalks and rootlets, gathered in spring on the first appearance of the flowers, and chop and pound them to a pulp, and weigh. Then taking two parts, by weight, of alcohol, mix the pulp with one-sixth part of it, add the balance, and, after stirring the whole well, pour it into a well-stoppered bottle and let it stand for eight days in a dark, cool place. After straining and filtering, the resulting tincture should be of a light brown color and have a slightly acrid taste and a neutral reaction.

CHEMISTRY.

The active principle of this plant is doubtless volatile, as the dried root presents none of the acidity of the fresh, and is odorless as well. Dr. J. M. Turner* determined in the root a volatile fatty body, a volatile oil, a fixed oil, and a specific resin.

POTHOS FCETIDA.

*A Thank-offering to the memory of one who was an honest man
and an earnest physician.*

S. A. JONES, M.D.

ON the 16th of December, 1887, there came into my hands a case that the family physician (a homœopath) had pronounced epilepsy and declared incurable. Upon being consulted, his diagnosis had been confirmed and his prognosis corroborated by the late Prof. E. S. Dunster, of the University of Michigan.

* *Am. Jour. Phar.*, vol. ii., p. 1.

Up to date, that identical patient has had neither a "fit" nor any approximation thereto, and that fact is an occasion of this paper. One who already discerns the first gray shadows of that night which comes to all, does not now write at the urging, or the *itching*, of the Ego. He disclaims any merit, having evinced only a monkey-like imitativeness. He had from the Infinite, the gift of a good memory, and an old book, picked up one happy day at a street stall, flashed into recollection some twelve years later, and enabled him then to imitate the much earlier doing of its worthy author—

"Only the actions of the just
Smell sweet and blossom in the dust."

This dead worthy,—he that was James Thacher, M.D.,—more than any other, made known the virtues of *Pothos fetida*, and gratitude for what his book had taught me to do, made me feel that to write up this forgotten remedy were the fittest return that I could make for his well doing.

A second incentive, ample enough, is found in the fact that the first homœopathic paper on *Pothos fet.* has never had a faithful translation into our language, and has not been critically reproduced in any other. A study of the *Homœopathic Bibliography*, as given in this paper, will teach an impressive lesson not only to the *real* student of *Materia Medica*, but also to those who assume the responsibilities of editorship.

A third inducement, and perhaps a pardonable, is the singular fact that much search in our literature has not enabled me to find any instance of the clinical application of *Pothos fet.* by a homœopathic practitioner. If any reader knows of any such, he will greatly gratify the writer by making it known.

An Empirical Bibliography.*

1785. REV. DR. M. CUTLER.—*Memoirs of the American Academy of Arts and Sciences*. Boston.
1787. D. J. D. SCHŒPF, M.D.—*Materia Medica Americana potissimum Regni Vegetabilis*. Erlangen. (Not in my possession. Quoted from Barton.)
1813. JAMES THACHER, M.D.—*The American New Dispensatory*. Boston. (This is the second edition wherein *Pothos* is mentioned for the first time. Our citations are from the fourth edition. Boston, 1821.)

* As my researches are confined to my own library, I do not profess to be exhaustive. I have not given all the references at my command, but have aimed to include such writers as have made positive contributions to our knowledge of this drug. Of my list, only Rafinesque is a mere (but a useful) compiler.

1817. JAMES THACHER, M.D.—*American Modern Practice*, etc. Boston.
- 1818 JACOB BIGELOW, M.D.—*American Medical Botany*, etc. Vol. 2. Boston.
1820. WM. M. HAND.—*The House-Surgeon and Physician*. Second edition. New Haven.
1822. JACOB BIGELOW, M.D.—*A Sequel to the Pharmacopœia of the U. S.* Boston.
1822. JOHN EBERLE, M.D.—*Materia Medica and Therapeutics*. Philadelphia. (The citations are from the fourth edition. Philadelphia, 1836.)
1825. ANSEL W. IVES, M.D.—*Paris's Pharmacologia*. Third American edition. New York.
1830. ELISHA SMITH.—*The Botanic Physician*, etc. New York. (The title page proclaims him "president of the New York Association of Botanic Physicians.")
1838. C. S. RAFINESQUE.—*Medical Flora*, etc. Philadelphia.

It was admitted into the *catalogus secundarius* of the second edition of *The Pharmacopœia of the United States of America*, and dropped into the dust-heap when the men who knew how to use it had passed away.

II.

Empirical Applications.

IN dealing with authors who have gone to their reward, it has always seemed to me a duty to give their own words as far as possible. It brings them face to face with the reader, and is as if one brushed the moss from their gravestones, or perhaps, like Old Mortality, carved afresh a half-obliterated name.

It is not the briefest way, but it has the merit of showing from whence the bricks came of which the edifice is built. I shall, then, cite the authorities in chronological order, and copiously enough to include essentials.

Cutler.—The roots dried and powdered are an excellent medicine in asthmatic cases, and often give relief when other means are ineffectual. It may be given with safety to children as well as to adults; to the former, in doses of four, five or six grains, and to the latter in doses of twenty grains and upwards. It is given in the fit, and repeated as the case may require. This knowledge is said to have been obtained from the Indians, who, it is likewise said, repeat the dose, after the paroxysm (*sic*) is gone off, several mornings, then miss as many, and repeat it again; thus continuing the medicine until the patient is perfectly recovered. It appears to be antispasmodic, and bids fair to be useful in many other disorders.—*Op. cit.*, 1, 409.

Schoepf.—I am obliged to cite at second hand, as I have never been able to find a copy of his *opus*. One may judge of its rarity, when a foreign advertisement by a German bookseller some years since failed to obtain it for me.

Prof. W. P. C. Barton, *op. cit.*, gives the gist of the Hessian surgeon's contribution in a style and manner as prim and orderly as that of Surgeon Schoepf himself on a dress parade.

“Pharm. *Dracontii Radix*.

Qual. *Acris, alliacea, nauseosa*.

Vis. *Incidens, califaciens, expectorans*.

Usus: *fol. contrita ad vulnera recentia et ulcera. Tussis consumptiva. Scorbutus et alii morbi radix Ari officin. utilis.*”

“*Incidens*’’: Young reader, you must go back more than a century to understand the “pathology” that is wrapped up in that word like a mummy in its cerements. Don't laugh at *that* “pathology,” for some graceless graduate will laugh at yours in 1989. Note, however, in passing, that Schoepf says nothing, save *tussis*, that suggests the *vis antispasmodica* of Cutler.

Thacher.—The roots and seeds, when fresh, impart to the mouth a sensation of pungency and acrimony similar to arum.

It may be ranked high as an antispasmodick, experience having evinced that it is not inferior to the most esteemed remedies of that class. In cases of asthmatick affections, it alleviates the most distressing symptoms, and shortens the duration of the paroxysms. . . . Rev. Dr. Cutler experienced in his own particular case very considerable relief from this medicine, after others had disappointed his expectations. . . . The seeds of this plant are said by some to afford more relief in asthmatick cases than the root.

In obstinate hysterick affections this medicine has surpassed in efficacy all those antispasmodicks which have generally been employed, and in several instances it has displayed its powers like a charm. In one of the most violent hysterick cases I ever met with, says a correspondent, where the usual antispasmodicks, and even musk had failed, two teaspoonfuls of the powdered root procured immediate relief; and on repeating the trials with the same patient, it afforded more lasting benefit than any other medicine. In those spasmodick affections of the abdominal muscles during parturition, or after delivery, this root has proved an effectual remedy. In chronick rheumatism, and erratic pains of a spasmodick nature, it often performs a cure, or affords essential relief.

It has in some cases of epilepsy suspended the fits, and greatly alleviated the symptoms.

In hooping cough, and other pulmonick affections, it proves beneficial in the form of syrup.

During every stage of nervous and hysterick complaints, and in cramps and spasms, this medicine is strongly recommended as a valuable substitute for the various antispasmodick remedies commonly employed. It is free from the heating and constipating qualities of opium. [Yet Schoepf endowed it with the *vis califaciens*.]

Having in a few instances tested its virtues in subsultus tendinum, attending typhus fever, its pleasing effects will encourage the future employment of it in similar cases.

Two instances have been related in which this medicine has been supposed to be remarkably efficacious in the cure of dropsy.

The roots should be taken up in the autumn or spring, before the leaves appear, and carefully dried for use. Its strength is impaired by long keeping, especially in a powered state.—*Mat. Med.*, 4th ed., p. 249.

A young woman, about eighteen years of age, was harassed by severe convulsive and hysterick paroxysms, almost incessantly, insomuch that her friends estimated the number at seven hundred in the course of a few weeks; her abdomen was remarkably tumefied and tense, and there was a singular bloatedness of the whole surface of her body, and the slightest touch would occasion intolerable pain. At length her extremities became rigid and immovable (*sic*), and her jaw was so completely locked that she was unable to articulate, and liquids could only be introduced through the vacuity of a lost tooth. She had been treated with a variety of antispasmodick and other medicines, by an experienced physician, without relief. Having prepared a strong infusion of the dried root of skunk cabbage, I directed half a tea-cupful to be given every few hours, without any other medicine; the favorable effects of which were soon observable, and by persisting in the use of it about ten days, the muscular contractions were removed, the jaw was relaxed, and her faculty of speech and swallowing, with the use of all her limbs, were come completely effected.

Another young woman had been exercised with the most distressing paroxysms of hysteria for several days, without obtaining relief by the medicines prescribed; when the skunk cabbage infusion was so successfully directed that her fits were immediately arrested, and in a few days a cure was completely effected.

The brother of this patient was seized with violent convulsions of the whole body, in consequence of a cut on his foot; the skunk cabbage was administered, and he was speedily restored to perfect health.

A woman was affected with violent spasmodick pains, twenty-four hours after parturition; six doses of skunk cabbage entirely removed her complaints.—*American Modern Practice*, p. 530.

Barton.—The smell from the spathe and flowers is pungent and very subtle. Experience leads me to believe they possess a great share of acridity; *having been seized with a very violent inflammation of my eyes* (for the first time in my life), which deprived me of the use of them for a month, by making the original drawings of these plates. The pungency of the plant was probably concentrated by the closeness of the room, in which many specimens were at the time shut up.—*Veg. Mat. Med.*, 1, 128. [The italics are not in the original text.]

The seeds are said to afford more relief in asthmatic cases than the root; and this I believe very probable, for they are remarkably active, pungent, and, as has before been mentioned, exhale the odor of assafetida.—*Op. cit.*, p. 131.

The bruised leaves are frequently applied to ulcers and recent

wounds, and, it is said, with good effect. They are also used as an external application in cutaneous affections; and I have heard of the expressed juice being successfully applied to different species of herpes. The leaves are also used in the country to dress blisters, with the view of promoting their discharge. . . . For this purpose I can recommend them where it is desirable to promote a large and speedy discharge, and no stimulating ointment is at hand.

Colden recommends the skunk cabbage in scurvy.—*Op. cit.*, p. 132.

Bigelow.—The odor of the *Ictodes* resides in a principle which is extremely volatile. I have not been able to separate it by distillation from any part of the plant, the decoction and the distilled water being in my experiments but slightly impregnated with its sensible character. Alcohol, digested on the plant, retains its odor for a time, but this is soon dissipated by exposure to the air.

An acrid principle resides in the root, even when perfectly dry, producing an effect like that of the *Arum* and the *Ranunculi*. When chewed in the mouth, the root is slow in manifesting its peculiar taste; but after some moments, a pricking sensation is felt, which soon amounts to a disagreeable smarting, and continues for some time. This acrimony is readily dissipated by heat. The decoction retains none of it. The distilled water is impregnated with it, if the process be carefully conducted, but loses it on standing a short time.—*Amer. Med. Bot.*, 2, 45.

To insure a tolerably uniform activity of this medicine, the root should be kept in dried slices, and not reduced to powder until it is wanted for use.—*Op. cit.*, p. 49.

A number of cases have fallen under my own observation of the catarrhal affections of old people, in which a syrup prepared from the root in substance has alleviated and removed the complaint.—*Op. cit.*, p. 48.

In delicate stomachs I have found it frequently to occasion vomiting even in a small quantity. In several cases of gastrodynia, where it was given with a view to its antispasmodic effect, it was ejected from the stomach more speedily than common cathartic medicines. I have known it in a dose of thirty grains to bring on not only vomiting, but headache [*sic*], vertigo and temporary blindness.—*Op. cit.*, pp. 48-49.

Hand.—The root is a pungent antispasmodic in colics and griping of the bowels.

Leaves bruised relieve painful swellings, whitlows, etc.—*House Surg. and Phys.*, p. 250.

Éberle.—In chronic cough attended with a cold, phlegmatic habit of body, I have employed the powdered root of this plant with the most decided benefit. In an old man who had been for many years afflicted with a very troublesome cough and difficulty of breathing, I found nothing to give so much relief as this substance.

In cases of chronic catarrhal and asthmatic affections, and very generally with evident advantage.—*Mat. Med. and Ther.*, 2, 154.

Iees.—The root loses its pungent taste, and appears to be nearly inert in a few weeks after it is gathered. I prepared, however, an alcoholic extract some years ago, by digesting the fresh roots and evaporating the tincture in the sun, which possessed and retained

all the acrimony of the recent root. The fresh leaves are actively rubefacient.—*Pharmacologia*, p. 147.

Smith.—Skunk cabbage is not only a good antispasmodic in all cases where such are indicated, but it is also a powerful emmenagogue, anthelmintic, and a valuable remedy in dropsy, in spasms, rheumatism, palpitations, etc. It is frequently used in childbed to promote the birth. . . . For expelling worms, the pulverized root should be administered in molasses for a sufficient length of time, following it up with a purge.—*Op. cit.*, p. 511.

Rafinesque.—Powerful antispasmodic, expectorant, incisive, vermifuge, menagogue, sudorific, etc. Used with success in spasmodic asthmas and coughs, hysterics, pertussis, epilepsy, dropsy, scurvy, chronic rheumatism, erradic and spasmodic pains, parturition, amenorrhœa, worms, etc.—*Op. cit.*, 2, 230.

III.

THE HOMŒOPATHIC BIBLIOGRAPHY.*

1837. *Correspondenzblatt der Hom. Aerzte*, January 18th, 2d part, No. 1, p. 6. Allentown, Pa. HERING, HUMPHREYS, AND LINGEN.
1843. *Symptonus Kodex*, vol. 2, p. 392. JAHR. [Taken from the *Correspondenzblatt*, and not correctly.] *Handbuch der Hom. Arzneimittellehre*, vol. 3, p. 613. NOACK AND TRINKS. [Taken from the *Correspondenzblatt*, and incompletely.]
1847. *Manual of Hom. Mat. Med.*—*Jahr*. Translated by CURIE, 2d ed., vol. 1, p. 462. London. [This is the first appearance of the Allentown "abstract of symptoms" in English. Curie credits his data to some "United States' Journal," probably meaning the *Correspondenzblatt*. His translation is erroneous, and yet, up to date, it is the fullest source of information for him who reads English only.]
1848. *New Manual or Symptomen Codex*.—*Jahr*. Translated by HEMPEL, vol. 2, p. 573. [This is a singularly incomplete translation from the German *Kodex*, with no reference to any source. A literal copy of this translation is all there is of *Pothos fæt.* in the *Encyclopædia*. It omits the only symptom in the *Correspondenzblatt* abstract that made my application of this remedy not purely empirical.]
1851. *Jahr's New Manual*. Edited by HULL, 3d ed., vol. 1, p. 797.
1851. *Charakteristik der Hom. Arzneien*. POSSART, part 2, p. 506.
1860. "*Hull's Jahr*." *A New Manual of Hom. Practice*. Edited by SNELLING, 4th ed., vol. 1, p. 977.
1866. *Text-Book of Mat. Med.* LIPPE, p. 545.
1878. *Encyclopædia of Pure Materia Medica*. ALLEN, vol. 9, p. 155.
1884. *American Medicinal Plants*. MILLSPAUGH, vol. 1, p. 169.

* The definite article is used because it is believed to be complete, thanks to the scholarship and courtesy of Dr. Henry M. Smith, of New York. To him, also, am I indebted for the original text of *Pothos fæt.* from the *Correspondenzblatt*.

POTHOS FÆTIDA SYMPTOMATOLOGY.

Translated from the *Correspondenzblatt* by T. C. Fanning, M.D., Tarrytown, N. Y.*

Because the odor is quite like Mephitis it is considered a so-called antispasmodic.

Abstract of symptoms from Hering, Humphreys, and Lingen.

So absent-minded and thoughtless that he enters the sick rooms without knocking; pays no attention to those speaking to him. Irritable, inclined to contradict; violent.

Headache of brief duration, in single spots, now here, now there, with confusion. Pressure in both temples, harder on one side than on the other alternately, with violent pulsation of the temporal arteries.

Drawing in the forehead in two lines from the frontal eminences to the glabella, where there is a strong outward drawing as if by a magnet.

Red swelling, like a saddle, across the bridge of the nose, painful to the touch, especially on the left side near the forehead, while the cartilaginous portion is cold and bloodless; with red spots on the cheek, on the left little pimples; swelling of the cervical and sub-maxillary glands.

Unpleasant numb sensation in the tongue; cannot project it against the teeth; papillæ elevated; tongue redder, with sore pain at point and edge.

Burning sensation from the fauces down through the chest. With the desire to smoke, tobacco tastes badly.

Pain in the scrobiculus cordis as if something broke loose, on stepping hard.

Inflation and tension in the abdomen; bellyache here and there in single spots; on walking, feeling as if the bowels shook, without pain.

Stool earlier (in the morning), frequent, softer.

Urging to urinate; very dark urine.

Painful, voluptuous tickling in the whole of the glans penis.

Violent sneezing, causing pain in the roof of the mouth, the fauces and œsophagus all the way to the stomach, followed by long-continued pains at the cardiac orifice.

Pain in chest and *mediastinum posticum*, less in the *anticum*, with pain under the shoulders, which seems to be in connection with burning in the œsophagus. Pressing pain on the sternum.

Sudden feeling of anxiety, with difficult [or oppressed] respiration and sweat, followed by stool and the subsidence of these and other pains.

* Literalness rather than elegance has been sought in the translating.

Inclination to take deep inspirations with hollow feeling in the chest, later with contraction in the fauces and chest.

The difficulty of breathing is better in the open air.

Pain in the crest of the right tibia.

Rheumatic troubles increased.

Sleepy early in the evening.

All troubles disappear in the open air.

In attempting to analyze this "abstract of symptoms," to see if the internal evidence tends to show that the recorded effects are genuine results of the drug, it is well to remember that these provings—for we infer that three observers participated therein—were made in the light of the empirical history of *Pothos. fœt.* The said history was on record before the date of these provings, and it cannot have escaped Hering's eye; he was too wide a reader for that. He was, beyond doubt, aware of the pathogenetic effects observed by Bigelow—*headache, vertigo, temporary blindness, vomiting, even from small quantities.* Having, then, this clue to its physiological action, these symptoms should reappear in his proving if his imagination furnished his symptoms. As only a mild headache is noted in the *Correspondenzblatt*, it is evident that these provers did not work from a pattern. It is also evident that the *usus in morbis* did not suggest the Allentown symptomatology, for the anti-asthmatic virtue of *Pothos fœt.* is one feature on which the greatest stress had been laid, and yet the only *pathogenetic* suggestion of its applicability in asthma is: "*Sudden feeling of anxiety with difficult [or oppressed] respiration and sweat, followed by stool and the subsidence of these and other pains.*" Who ever heard of an asthma relieved by stool? Who could have *invented* such an odd modality? As it stands it is an *unicum* and by every rule of criticism this single symptom-group gives the stamp of verity to the Allentown "abstract of symptoms." But there is other and singularly convincing evidence of the genuineness of this abstract. As the reader is aware, Thacher had emphasized the efficiency of *Pothos fœt.* as an antispasmodic in hysteria, although the "key-note" that indicates it in hysteria had wholly escaped his discernment.

Now this very "key-note" appears in the Allentown pathogenesis but so unobtrusively as to show most conclusively that the prover who furnished it did not recognize its singular import and value. Such testimony is absolutely unimpugnable by honest and intelligent criticism.

It is also apparent that some of the less pronounced of its empirical virtues are reflected in the proving. For instance, Thacher found it efficacious in "erratick pains of a spasmodick nature." Is not this "erratic" feature reproduced in such conditions as:

"Headache, of brief duration, in single spots, now here, now there?"

"Pressure in both temples alternately, harder on one side than on the other?"

"Bellyache, here and there, in single spots?"

Brevity of duration and recurrence "in single spots, now here, now there," are phenomena at once *spasmodic* and *erratic*. It must be admitted that the trend of its pathogenetic action and the lines of its therapeutical application are parallel, and therefore that the latter are confirmatory of the former.

With such an anti-hysterical reputation as the empirical use had given to *Pothos fet.*, it might fairly be anticipated that its pathogenesis would be distinguished by a paucity of objective *data*, for only a tyro in pharmacodynamics, or a "Regular," would expect to find a full-lined picture of hysteria in any "proving." And so we have in the "abstract" a flux of subjective symptoms, "erratic" enough for hysterical elements, and still further characterized by an apparent evanescence, as if its phenomena of sensory disturbance were as fleeting and unsubstantial as those of an hysterical storm.

The *will-o'-the-wisp-like* character of its subjective symptoms, and its physometric property (hinted at in the pathogenesis and emphasized in Thacher's case), are the features that will chiefly impress one in studying this distinctively American remedy.

That the "abstract of symptoms" evinces a cautious trial of this drug, and that more heroic experiments will add to our knowledge of its pathogenetic properties, are plain deductions from the absence in the "abstract" of such pronounced effects as Bigelow observed and also from the evidence of the *usus in morbis*. The remedy needs an efficient proving, especially in the female organism.

AN APPLICATION OF POTHOS FÆT.

Miss B—, æt. 20; a tall, spare brunette, and a good specimen of Fothergill's *Arab type*, brainy and vivacious. General health has been good, but she was never robust; could not go to school regularly. Between her thirteenth and fifteenth years grew rapidly in stature, and then she was easily wearied on walking; knees tired and limbs ached. Had good digestion through the growing period, but subsequently became subject to "bloat of wind" in abdomen. These meteoristic attacks came when lying down. A "weight rises from the abdomen up to the heart." She must at once spring up. This condition is relieved by eructating, by liquor, and by drinking hot water. The night attacks of meteorism are by far the worst. *She is now subject to them.*

[Her grandmother had such "spells of bloating;" would spring

out of bed at night, lose consciousness, and "bloat up suddenly." If she had such an attack when dressed, they had often been obliged to cut open her clothes.]

Patient has found that apples, tomatoes, cabbage and onions disagree with her; no other food. She is constipated—"wants to and can't."

Her hair is unusually dry; scalp full of dandruf; skin, generally, soft and flexible.

She has frequent epistaxis; has had four and five attacks a day. Blood bright red, "runs a perfect stream," does not clot at the nostrils. Has previously a "heavy feeling" in the head, which the bleeding relieves.

In appearance she is "the picture of health;" good complexion, fairly ruddy cheeks, sparkling eyes—in a word, she is an incarnated protest against "single blessedness."

In the latter part of July, 1886, had her first "fit." She had arisen with a headache, which kept on increasing in severity. Just after a light meal had the attack; said "Oh, dear! Oh, dear!" and fell insensible. Stiffened at first, then had clonic spasms. Neither bit the tongue nor frothed at the mouth. No micturition or defecation. On coming to, did not remember that she had fallen, but recollected being borne up stairs. Had a "dreadful nosebleed" after the attack. Left her very weak; could hardly lift her feet from the floor. Before the "fit" the headache had become unbearably severe.

Had her second "fit" on August 7th, 1887. Headache came on and kept growing worse; was in temples, beating and throbbing, and in eyes, "light hurt"—also on vertex, "pressing-down" pain. At 4 P.M. suddenly fell down insensible. No cry. Tongue bitten. Slight frothing at the mouth. First "stiff all over," then clonic spasms. After the "fit" knew that something had happened to her. Was prostrated for nearly a month, but not so much as after first attack.

December 10th, 1887, third "fit." On the night of the 9th her mother had been very ill, and she herself was very uneasy and alarmed. Had the attack before breakfast. Blurred vision, headache, fall; no biting of tongue, nor frothing. First rigid, then clonic spasms; after attack, nose bled profusely, head ached all day, face flushed and dark. Prostrated as usual.

In none of the attacks was there any involuntary micturition or defecation, nor was it ever necessary to use any force to hold her on the bed.

One other fact I gathered from her brother, namely: during her "fits" her abdomen bloated so rapidly and to such a degree that

the family had learned to remove her clothing as soon as possible after she fell.

Of course, Thacher's case, wherein the "abdomen was remarkably tumefied and tense," came into memory at once. The old volume was taken down, and that case re-read. Then followed the *Encyclopædia*, and then the English *Symptomen Codex*. No pathogenetic light or corroboration there. Then Curie's "Jahr." Ah! "*Inflation and tension in the abdomen.*" Only a straw, but a pathogenetic, and I grasped it thankfully. I found also, "*aching in the temples with violent arterial pulsation.*"

It was an open winter; my son dug some skunk cabbage roots in a swamp; a tincture was made; ten-drop doses, four times daily, were taken until six ounces had been consumed. No "fit" up to date; no epistaxis; only once a slight headache.

I never made a diagnosis in this case; have not reached one yet, nor am I grieving over that omission. I did rashly declare that it was *not* epilepsy, because Sauvages *tympanites intestinalis* is a feature of hysteria, but not of epilepsy. But not a word of this was said to the patient. It was not a "mind cure," for I have no "mind" to spare; nor was it "Christian science," for I am not up to that. I had an *amnesia* in which grand-mother and grand-daughter participated. Nature had put the "key-note" in italics, not only in the patient but also in the drug. Thacher stumbled upon it empirically; Hering found it pathogenetically, and that led to its application under the guidance of the only approximation to a law in therapeutics that has yet been discovered by any of woman born: *similia similibus curantur!*

ANN ARBOR, February 15th, 1889.

THE BRAZILS.

ALONG THE COAST.

At seven o'clock the next morning we were anchored half a mile off the city of Para, in the river Amazon, and opposite the large new warehouses of corrugated iron which line the water-front. These are principally for the storage of the immense quantities of rubber shipped from this port, and which makes Para the large commercial city—of 60,000 inhabitants—that it is.

The buildings of perforated brick are many of them covered with colored tiles, which glisten in the sun like china houses, a pleasing sight, and contrasting with the palm-thatched cottages represented in our old geography. Our vessel was immediately surrounded by the usual number of boatmen clamoring for fares. Hiring one of

these sturdy rowers at what seemed the enormous price of 2\$000 (two thousand reis), a fellow traveller and ourself grasped our umbrellas, a constant necessity we were told, and descended the ladder. The purser had reduced these startling figures for us to U. S. currency, and we found two thousand reis to mean only about ninety-six cents.

On reaching the city, we notice the streets well paved with oblong blocks of stone from Rio Janeiro, like those of New York, and sidewalks of stone from Lisbon. Everything seems clean, with no bad odors, as in so many southern Spanish cities. The turkey buzzards are very good scavengers.

The roofs are tiled, like those of Orizaba, with half cylindrical tiles, laid end off and edge in, heavy but impervious to the sudden drenching rains of the country, combining slants and angles in a picturesque manner. The sun is broiling, but it is a dry heat, and the least shade affords relief. Under our umbrellas it is not more than 80° Fahrenheit, and this is tempered by the usual breeze gently blowing from the sea.

We take a Bond (street car) and ride through the principal parts of the city, now and then through a projected but unbuilt street that is simply a path through the tropical jungle. At one point the road passes through a long double row of royal palms, which are beautiful, but remind us of feather dusters mounted upon long straight poles; graceful, yet decidedly monotonous.

At eleven o'clock we enjoy a well-cooked breakfast at the Hotel de Comercio of beefsteak, fried potatoes, and water-cresses, eggs and white rice, coffee, bread, and cheese. This meal costs us one thousand five hundred reis each, and we involuntarily wonder if we have money enough left to reach the steamer. The refrescos are lemonade, soda-water in bottles, ale, ginger, etc., all tepid. There is no ice to be had in Para, the main factory being in the hands of a fish-packing firm, who will not sell a pound for fear a rival packer might get it.

The tobacco here is of excellent quality, black and rich. It is sold in horn-shaped sticks of from three to ten pounds each, and costing from 3-8000 reis per pound, according to quality.

One of the most interesting features of the day was our trip to Mr. Edward Rand's immense orchid place. We find him a very hospitable enthusiast, formerly a Boston lawyer, who came here sixteen years ago to indulge his passion for this family of plants. He has in his five acres of yard about 4000 species. He said that in January last he had 2000 in bloom at once. Many that we saw had flowers resembling forms of animals, and one, in form of a butterfly, was a curiously beautiful flower. In his garden are growing oranges, figs, bananas, pineapples, guayras, mameys, aguacates, and

many other fruits. We left him with regret, our hands filled with beautiful blossoms.

We returned to the dock too late for a boatman, and were taken to our steamer by the courtesy of the captain of a Red Cross steamer, in their launch.

On our return to Para, in October, we were so fortunate as to witness the grand Festa do Nazareth, of which we will write later.

The sidewalks in Para are very narrow, and in front of all public buildings, post office, custom house, etc., stands a little box of a guard house on wheels. In front of it stands the guard, a diminutive Brazilian soldier, armed with a musket which, as the foot passenger approaches, he thrusts across the walk, thus compelling the pedestrian to go around in the road. The whole outfit is so suggestive of a toy house and soldier that I could not resist pushing the outstretched bayonet aside and passing on. The guard simply stood and looked in astonishment at the "bravery (?) of the Americano."

The physicians are native Brazilians, so far as I learned, one only practicing homœopathy, Sr. D. F. Da Silva, whose pharmacy and office are together, as with most Brazilian homœopaths. The peculiarities of the practice of homœopathy in this country will form the basis of our next paper.

Leaving Para at night, we skirt the coast two nights and days, reaching Maranhao early in the morning. Poets have sung and travellers have written of the beauties of sunrise at sea, but with me it has usually been associated with "take care, sir;" "please step aside, sir;" "you'll get a-wet, sir," and such admonitions, as the sailors swash the hose about in scrubbing down the decks. But this morning being port day, the swabbing is dispensed with, and I am allowed to sit in peace while the great orb rises.

A low and narrow bank of dull gray clouds lie in the west, just off the sea line, above which is a beautiful orange haze, while all about is clear blue. Anon, a skirting of clear bright rays ascend higher and higher, then a small section of the sun's disk appears; later it meets the lower edge of the cloud and enters behind it, then from the exposed surface a brilliant light spreads over the sea, touching the vessel with golden spots. Then the sun disappears behind the cloud-bank and throws down upon the sea from behind it a beautiful silvery patch of light, that is the prettiest part of the whole panorama. Suddenly the whole sea and sky is alight with the blazing glory of a hot equatorial sun, and all things with life seek shade for the whole day. Mornings here are delightfully cool and refreshing.

Maranhao is a low, quaint, irregularly built city, of which I have pleasant recollections—a visit with Dr. Hall, the only homœopath.

here. This in the day time; but at night the most terrible swarms of minute, active, poisonous mosquitoes descended upon us, making rest impossible, and exasperating to the last degree.

We found Dr. Hall (a Brazilian-born Englishman who received his education in England) a most entertaining gentleman, whose hospitality we enjoyed with the greatest pleasure on our return trip from Rio. Dr. Hall is the only physician we met who dispenses his own remedies, of which he takes the greatest care, and the results in his practice show plainly that this is the proper method. We had the pleasure of visiting some of his patients with him, and it was refreshing to note the sympathetic care he constantly exhibited for their welfare, and the neatness of his method of prescribing.

Three days and a night of good sailing and weather bring us to the natural harbor of Pernambuco, where we spend a delightful day in excursions and botanizing about the neighborhood of this great sugar mart. Here we saw more lepers than in any southern city visited. The old and the new portions of the city are divided by a river, and the bridge is lined with them, asking alms of the passers by. These poor creatures are a pitiable sight, but their's is the inheritance of generations of bodily and moral uncleanness and a hot climate. Many are in such a horribly crippled state that they have to be borne upon improvised conveyances to and from their allotted begging place. Their pitiful cries and tales of woe bring many a *ventayne* from the passers by.

Bahia dos todos los Santos (Bay of all Saints) is our next port, reached on Sunday morning, August 21st. It is beautifully located, being perched upon a high bluff overlooking the bay. The only access easy of attainment is by a clumsy English "lift" that runs one, amid clanking of chains and groaning of machinery, straight up 200 feet to the main street of the city. Bahia was one of the earliest strongholds of Catholicism on the coast, and there are more shrines to saints, more fireworks sent up in their honor (always in daylight), more processions with all the pomp of the church, than in any place we have visited.

Our stay here is short, but permits taking the steam train out into the luxuriant country, where a change of cars at La Catalina affords an enjoyable hour's botanizing.

Here we eat bread fruit, mangoes, and especially the far-famed Bahia orange, with its strawberry flavor, delicious beyond any fruit, but so perishable as to not bear transporting even to Rio, three days' distant. At 3 P.M. we are again on shipboard, for the last stage of our journey.

On the morning of the 29th day from New York we are awakened

early by the preparations of the seamen for the last port. Hastening our toilet and going on deck we are greeted with one of the grandest mountain views we ever witnessed. We are approaching the entrance of the beautiful bay of Rio de Janeiro, surrounded by abrupt mountains that rise from 1000 to 3200 feet almost directly out of the sea. Its beauty is beyond our power to describe, we can only enjoy it, and remember it ever after.

We are not allowed to pass the fortelaza at the entrance until our papers and passengers are examined by the health officer, after which we steam slowly past Botofogo and swing around to the company's buoy north of the city. As we pass the U. S. steamer "Lancaster," we are saluted with the strains of "Home, Sweet Home" from the marine band. This is not only in greeting to us, but in anticipation of the letters we bring from home, sweet home, to the officers and crew.

On the U. S. ship "Alliance," lying near, a sad ceremony is being performed. A tug with four boats in its wake, all with drooping flags, leave the vessel, bearing to his last resting place, in a foreign cemetery, the remains of one of their officers, who died the day previous of smallpox.

An epidemic of smallpox is reported in the city, of which we will detail in our next paper, while writing of Rio Janeiro, its physicians and hospitals.

As we leave the "Advance," for four weeks our home, we do so with regret, and a feeling of homesickness creeps over us. No more delightful voyage for the invalid, the wearied business man, or the seeker after quiet pleasure can be found than this two months' trip to Rio Janeiro and return. The sea is friendly, the air excellent, ports frequent enough to vary the monotony of too continuous sailing, there is nothing to do but refresh and recreate wasted energies.

It is mainly to place before the profession the restful excellence of this trip that I have taken so much space in these two articles. The trip to Rio and return, giving two days at St. Thomas, Barbados, Para, Maranhao, Pernambuco, and Bahia and seven days at Rio de Janeiro, occupies about two months, during which a patient may have the quietest of surroundings, the best of attendance, and the most exhilarating of sea breezes, while wearing the lightest clothing. The wearied business man will find perfect rest, and the clergyman or man of letters plenty of time for rest and study, and all with the least sea-sickness and bad weather to be found upon any sea trip of its length and duration.

HOMŒOPATHIC THERAPEUTICS.

Acute Gastrodynia.—The following case points to several morals in homœopathic practice and will bear reprinting:

Mrs. S., visited October 8th, 1888. Has been suffering for several days from vomiting and pain in the stomach. The vomiting and pain come on almost immediately after food. There is no pain when the stomach is empty. *R. Liq. Arsenicalis* (F) 6 drops to a quarter of pint of water. A dessert-spoonful to be taken every two hours. To take no solid food. To take a quart of milk every twenty-four hours, diluted with a third part of lime water.

9th. Complete relief to pain and vomiting. Omit Fowler's solution, and take *Tr. Ars.* 3x every two hours.

10th. Feeling very weak on the milk diet, she took some boiled sole for supper last night; return of pain to-day, also tenderness at epigastrium. Repeat *Ars.*

11th. Slept all night. Little or no pain when in bed, but pain returned this morning at intervals, and always after food. Is taking solid food (fish, etc.). Continue *Ars.* and *Bismuth. Tris. Nitrate* 1x gr. iij in alternation every four hours.

12th. Slight improvement. Thinks the *Arsenicum* does not suit her. Omit *Arsenicum*; continue *Bismuth.*

14th. Was continuing to improve, but took kippered haddock for breakfast, which has brought back all the old symptoms. Repeat *Bismuth.* and *Tr. Apomorphia* 3x in alternation every four hours.

15th. Pain and sickness continued.

16th. Symptoms continue. *R. Trituration Arsenicum* (12x) gr. xij. in ch. xij. Take a powder dry three times a day, and discontinue all other medicines.

17th. Improvement, but is careless as to diet, and refuses to take pepsine. Continue powders.

18th. Very much better; no sickness and scarcely any pain. Continue *Ars.* 12x.

22d. Quite free from pain and sickness. Continue *Ars.* 12x.

26th. Improvement maintained. Continue *Ars.* 12x.

Nov. 5th. Has taken no other medicine. Quite well.

January 2d, 1889. There has been no relapse.—Dr. H. Smith in *Hom. World*, 1889, p. 68.

Spigelia—*Inflammation of the Pericardium During Rheumatic Fever.*—H. C., 36 years old, workman, Sundbyvester, Amazen. Treatment commenced January 8th, 1877.—Two years ago the patient had rheumatic fever for the first time. Eight weeks ago it returned, and both times some of the bigger joints (knee, ankles and elbows) were attacked. Having this last time kept his bed for about three weeks,

he got, as the fever increased, inflammation in the pericardium, accompanied by severe stitching pains around the heart, palpitation of the heart and asthma when lying on the back. Dry cough. The patient looks uneasy, and the face is pinched and the upper lip blue. The beating of the heart is weak, the heart-dulness is increasing in length, and rubbing sounds are heard. The tongue is foul, but little moist and whitish-loaded. Pulse strong, 120. The skin is covered with heavy perspiration. The two joints of the right thumb are somewhat swollen, with stinging pains darting through the right lower arm. No appetite or sleep. Functions in order. The urine of a brick color, and turbid. Has been treated allopathically from the beginning of the fever, but without any result. *Spigelia anthel.* 6, one drop every three hours; light food, milk.

January 12th. All heart symptoms decreased. Feels much easier. Same prescription three times a day.

January 19th. The pains and the stitching around the heart, palpitation and asthma considerably decreased. Appetite very poor. Sleep very good. Effusion into the pericardium much abated. The patient is sweating a great deal. The pains in the right thumb ceased. Same prescription morning and evening.

January 28th. Is quite well to-day. Appetite but poor. Sleeps well. No medicine.

February 9th. The patient quite right and comfortable. Treatment finished.

Facial Neuralgia—Neuralgia Trigemini.—C. S., 56 years old, fish-monger and fish-smoker, Copenhagen. The patient who commenced to be treated by me the 22d of June, 1881, has always had good health. The present sickness, treated allopathically, has lasted about half a year, but without result. He complains of stinging and darting pains in the left half of the face, commencing under the left eye, going downward in the cheekbone where they are severest, and towards the left side of the nose, and further, radiant-like and not so painful, down in the teeth in upper jaw. Heat applied produces decrease of the pains that come both by day and at night, without exact intervals of peace. No other symptoms of sickness. He is a man in his best years, robust built, and lively temper. *Spigelia* 6, three drops three times a day.

June 29th. Pains decreased considerably. Same prescription.

July 6th. All right for the last days.—Oscar Hansen, M.D., in *Hom. World*, 1889, p. 56.

Hydrastis—*A Case.*—Frau. X., 46 years old, twice married; has menstruated regularly since the age of 14; has had one miscarriage at three months. In 1864 she noticed a slight swelling in the lower part of the abdomen; since its appearance menstruation has been

irregular, followed by metrorrhagia, accompanied by pains in the abdomen, kidneys and groins. When Dr. V. Schmidt examined her he found her pale and weakened by the hæmorrhage, and detected a large tumor immediately under the navel. No signs of pregnancy. The circumference of the abdomen at 10 cent. below the navel was found to be 1 met., 2 cent.; and the navel itself measured 19 cent. from the pubic bone and 44 cent. from the zypoid process of the sternum. The tumor itself was the size of an adult head, hard, and taking in the linea alba. Another smaller tumor lay to the right and underneath the first. Vaginal examination showed that the uterus shared any movement communicated to the neoplasm.

Notwithstanding the feebleness proceeding from the hæmorrhage the patient would not submit to an operation, and on learning this Dr. Schmidt ordered stimulants, tamponed the vagina with perchloride and gave daily a half-teaspoonful of tincture of Hydrastis. The hæmorrhage continued, and after fourteen days the tumor was found diminished (*affaisée*). Under continuance of the remedy the periods became more regular. Four months after the swelling had considerably diminished and the patient doing as well as possible.—*Gouillon. Allg. Hom. Zeit.*, cxviii., No. 6.

Strophanthus hispidus—*Its Action Upon the Heart*.—Drs. Weidman and Rosenbusch give the following action of *Strophanthus*:

1. It increases the systolic force, prolonging the latter; augments the tension of the arterial vasa, and decreases the heart's action.

2. It strengthens the cardiac muscle and regulates the heart's work.

3. It has some diuretic action as well in heart and kidney affections.

4. It does not disturb digestion as other heart poisons (for example, *Digitalis*) do.

5. No symptoms of cumulative action arise from its use.

6. There is less compensational disturbance from its use than is found in *Digitalis*.

7. The best form for use is the alcoholic tincture, which contains all of the bitter glucosides of the drug.

8. In stenosis of the aortic valve its action is negative; as it does not materially prolong the systole it gives little relief in this disease.—*Dr. Pröll, Allg. Hom. Zeit.*, cxviii., No. 8.

Diabetes—*Ammonium carb.*—S. J., 48 years old, came to Dr. Kegel (Gand) on the 10th of May. He had been sick for six months. Complained of intense thirst; loss of appetite, especially for bread; sweetish taste on the lips, with bitterness of the mouth

early in the morning; his head is bad; the countenance has a worn look; he had grown slenderer daily until now he sighs continually.

He was asked to bring some of his urine, but he returned on the 12th of June without it and gave then, besides those named, the following symptoms: Tongue coated white; epigastric pain especially on pressure; also on right side of the chest near the sternum when inhaling; sleeplessness; his emaciation has become so pronounced that his comrades gave him up for lost. He was given *Nux vom.* 30, two globules.

After this prescription his wife brought in some of the urine and related that his disease was caused by excessive anger and that he had been impotent for a long time. The presence of sugar in the urine was evinced by the Potasso Cupric test and also by Caustic potash with and without Bismuth.

In the following two days the *Nux* had not availed. The symptoms remained the same, especially the morning bitter taste; the sighing; the emaciation; the chest-pains on inspiration, etc. This led to the choice of *Ammonium carb.*, of which eight powders, each holding two globules of the 30th, were given, with orders to dissolve each in turn in four spoonfuls of water, a spoonful to be taken every three hours. In addition to this the proper diet for diabetics was ordered, with special injunctions to abstain from farinaceous food.

After the fourth day of this prescription the patient reports slightly better, the sweet taste on the lips has disappeared and in place of the bitterness a salty, fatty taste has come on. He complains, moreover, of dizziness and great weakness of the limbs—true symptoms of *Amm. carb.* Since this he has written Dr. K. that he is growing better and better, the thirst and emaciation were less; after fourteen days the tests fail to detect sugar in the urine and the patient has returned to his place with the cuirassiers.

Fourteen days afterward lumbago came on, which yielded promptly to *Rhus* 30. The patient continued now to mend and *Amm. carb.* was again prescribed, its working having in no way been interfered with by the *Rhus*.—*Goullon. Allg. Hom. Zeit.*, cxviii., No. 4.

Vespa is an invaluable remedy for affections of the left ovary where there is sensibility with frequent desire to urinate and pain in the region of the sacrum, extending into the back.—*El Consultor Hom.*, 1889, p. 64.

Gossypium herbaceum.—A tincture made from the fresh inner bark of the root of the cotton plant, and subsequent potentizing gives us a remedy containing a principle similar in its action to that of *Secale cornutum*. *Gossypium* will often be indicated and prove successful in the morning vomiting of the pregnant (3d pot.); in uter-

ine hæmorrhage and painful menstruation (2d pot.); and in female sterility from too scanty menstruation (4th pot.).—*Pop. Zeit. für Hom.*, 1889, p. 12.

Anæmia.—Frau. M., a blonde, aged 30 years, nursing her fourth child, became afflicted with such a severe nursing-headache that she was compelled to wean the child, after which the menses had twice returned and with unprecedented violence. The headache was especially in the frontal and lemniscous regions, also at times unilateral. She kept a horizontal position in bed, prostrated and considerably emaciated from lack of proper nourishment. The pain was aggravated by changing position though ever so slightly, and never left her even at night; then indigestion set in, though the appetite was good. The cause of the headache lay undoubtedly in the loss of fluids by the nursing and menstrual hæmorrhage.

Ferrum sulph. 2x, in grain doses, mornings, and *Gels.* 6x, noons and nights, with a stimulating diet (egg and red wine), soon had the beneficial effect of relieving her pain and bringing the roses into her cheeks.—*Pop. Zeit. für Hom.*

Silico-Sulpho Calcite of Alumina.—Some eight years ago, being in search of a handy source of *Silicon*, the white quartz pebbles of the conglomerate *débris* abounding in the sandy soil of the Bristol Channel, on which my residence is built, caught my eye, and were at once reduced to the sixth decimal trituration; then, again, on crossing a railway the blue-white ballast (a refuse vitreous mass piled up mountains high around all our great iron works) used on most lines for keeping the sleepers *in situ*, preferably to gravel, etc., because impervious to water and frost, suggested a probably valuable polychrest to my practical mind; for chemical reading had years ago told me that this slag or cinder consisted of *Silicon*, *Calcium*, *Sulphur*, *Alumina*, *Magnesium*, *Manganum*, *Ferrum*, *Phosphorus*, *Titanium*, possibly *Cyanogen*, etc. The subject for whom I needed *Silicon* had housemaid's knee, caused undoubtedly by kneeling on the hard floor. My precious bit of ballast, handed to me by the gauger of the platelayers, with a compassionate smile in his eyes, was potentized up to 6x decimal trituration, and tested on the knee-patient with favorable results as to the knee, and with the most valuable discovery that it was gifted with marvellous power on the anus, rectum, etc.; for it effected by the second dose what no hitherto tried homœopathic drug had done with her, *i.e.*, took away a dreadful anal itching, piles, constipation, as if by magic.

Well, seeing that I myself had never yet found any of those medicines credited in our literature as being gifted with *curative* power in these said troubles, I put the matter to the crucial test in

my own person (a thing not often done by M.D.'s, by the by), the result of which authorized me to inform several M.D.'s of the vast utility of the drug in the above sphere. Dr. Gutteridge writes, saying that he finds *Silico-Sulpho-Calcite of Alumina* of great service in scrofulous subjects, and suggests a study of its action generally. This is again repeated by the Sydney Dispenser in *Hom. World*, 1888, p. 92.

Communicated.

LOBELIA ACETATE AND TRILLIUM.—My attention was called forcibly to an article in the last RECORDER on Lobelia acetate. It struck me very favorably at once, as I had used the acetate in many ways with good results. I have tried it in two cases; one was a case of uterine cancer where the "Regulars" had amputated the cervix: When I was called to the case, Dec. 29th, they had left her to die. She was covered with sores from morphæ injections, the cancer had grown again filling one-third of the vagina, and there was constant hæmorrhage. I kept it partially controlled by the use of *Thlaspi bursa-pastoris* and next tried *Trillium* with excellent success, till it all sloughed off and came away; then the hæmorrhage was fearful; I tried the *Lob. acet.* and it stopped at once, she is yet alive and gaining. I used regular homœopathic remedies for the cancer internally. The other case was a lady that had been under allopathic treatment for catarrh of the womb and prolapsus; they gave her powerful physic which brought on a horrible chronic diarrhœa; this was the first of last June and it has continued ever since till two weeks ago. I completely stopped it with the *Lob. acet.* and her bowels are normal. She commenced to cough and waste away three months ago and I considered her beyond all hope. She is now gaining with judicious treatment. I would like to call the attention of our school to *Trillium* or Beth root; the only thing I ever knew it used for was hæmorrhages, and I cured one case, passive, of five months' standing, after a miscarriage; lately I have used it for persistent coughs that nothing seemed to control. When a boy I used to dig the root and string it up to dry, believing it would be a remedy for something, though I did not know even its name. My mother was subject to cramps in the stomach, which were brought on by a bad cough, which nothing seemed to reach. I grated some of the root into molasses and gave her. This cured the cough in a few days and the cramps as well. I have cured many cases of cough since then by the same means.

I feel convinced that *Trillium* must have a decided action upon mucous membranes generally, especially in catarrhal forms of trouble; the remedy needs a much more complete proving to show its full sphere of action.

G. E. NEWCOMB, M.D.

OLDTOWN, MAINE.

ITEMS OF GENERAL INTEREST.

Hypnotism—*An Interesting Case.*—Prof. Mendel recently gave his attention to a man, aged 25 years, who was afflicted with hysteria, and who, in consequence, pretended great weakness of the lower limbs, and limped when walking. He would pass into a state of hypnotism, closing his eyes and falling, apparently, into a sound sleep, in which, however, his eyes would open upon command. When in this state his gait was light and uniform, like that of a sound man, and among other things he could mount upon a chair without trouble. One of the most wonderful things about this patient was, that though he stuttered violently, and could hardly utter two words in succession, when in the hypnotized state, he would repeat fluently a strophe of the poem "*Des Sängers Fluch.*" When it was suggested to him that an organ was playing near by, he gave, with great precision, the chorus of "*Lobe den Herrn.*" The following experiment performed upon him was very striking. Five postal cards were held before him with the backs (blank sides) toward his eyes, and he was told that a letter, A, the initial of his name, was upon one of them. This marked card was then cut, and another card pushed through it, and held with the backs toward him; he then, greatly to the astonishment of all present, immediately picked out the marked card. An explanation of this supernatural vision could not be given by Prof. Mendel. It must be considered that the eyes of the hypnotized are so sharp that they are able to detect marks that even the normal eye cannot see.—*Allg. Hom. Zeit.*, cxviii., No. 5.

Antifebrin—*Poisoning by.*—Dr. Jue. Meyer (Berlin) shared in the following case: K—, a bookbinder, aged 38 years, moderately vigorous, subject to frequent attacks of bronchial catarrh, was given by a Berlin druggist (2.0) of *Antifebrin* for a unilateral headache, and another portion of 2.0 to be taken twenty-four hours afterward. Whilst K— endured the first dose, he became (in one-quarter hour) after the second, attacked with cold sweat, a feeling of great lassitude, vertigo, dulness of the head and anxiety; the heart palpitated severely, the pulse became small and frequent, he remained upright with difficulty, and was compelled to sit down. Cyanosis soon followed. (The lips and hands dark blue, the countenance more ashy.)

After being given a cup of black coffee, castor oil and mustard pastes, the blueness gradually passed away, and the unpleasant sensations slowly dissipated; he, however, worked with difficulty on account of his eyes failing him, and remained feeble for several days.—*Inter. klin. Rund.*, ii., No. 22.

Antipyrin—*Poisoning by*.—An author in a communication to the *Acad. de Médecine* relates a case of articular rheumatism treated with daily doses of 2.5 grm. of Antipyrin. This treatment brought out in various places upon the patient's body an erythema, followed by insomnolence, chilliness of the extremities, catarrhal conjunctivitis, hoarseness, increased pulse, etc. The cessation of the drug and a drop-dose of tincture of Belladonna dispersed all these symptoms. Similar phenomena were observed by another author after a dose of 25–50 centigram. Great caution is necessary in giving this drug to aged and sensitive individuals. Dr. Jennings recommends Belladonna or injections of Atropine as an antidote for this drug.—*Allg. Hom. Zeit.*, cxviii., No. 5.

After Many Years.—The executors of a wealthy Knoxville bachelor, who recently died, were confronted, when examining the home of the deceased, by a pile of carefully arranged empty bottles in the attic. After 500 bottles were counted the pile was so little diminished that the rest of the bottles were removed without a count. It is supposed that over 1000 bottles were in the pile, and more than this, they were all bottles of somebody's bitters. That man, by dying, made himself a living example of the utter uselessness of patent "medicine." It took a thousand bottles to kill him!

Phthisis—*Aniline*.—According to Dr. Kremjousky, of Karjon, frequent inhalations of Aniline, administered until there are manifestations in the patient of poisoning, resulted in a complete cure of phthisis.—*El Consultor Hom.*, 1889, 64.

Abnormal Menstruation.—Cases which give reference to early menstruation are not rare. We record, however, the case of an infant of two years, that menstruated regularly every month, five days each menses. This child at twelve months had already all its teeth, and at four years weighed 59 pounds. Now, at six years, she weighs 79 pounds, is robust, her head and upper extremities are formed as in all children of her age; the same may be said of the lower limbs; but the whole lumbar region, buttocks and thighs, present the usual development found at puberty. The breasts are well developed, and the pubes, as well as the axillas, are covered with hair. The child has a low voice.

Since January, 1889, says Dr. Diamant, in reference to this case, the child is not regular, and each menstrual period is accompanied by epilepsy, the spasms augmenting in number month by month.—*El Consultor Hom.*, 3, 17.

Indigestion.—Dr. Goullon in the *Pop. Zeit. für Hom.* mentions a case of gastric trouble for which he confidently prescribed *Calc.*

carb. The patient afterward wrote him that the powders did her no good, but that she had procured perfect relief from *Flowers of Sulphur* in generous doses. He comments upon this veterinary dosage in the human subject, and remarks how often we can gain knowledge by lending ear to different methods of lay prescribing. He relates another case where Hensel's Tonicum (which he uses and recommends) afforded excellent relief where chlorosis dependant upon uterine troubles was the cause of the gastric irritation. This last patient—also one for whom he had prescribed—wrote him that she had induced a friend to try the Tonicum, and that it afforded such prompt relief that she also began a course of treatment with it. One of the most difficult classes of chronic ailments in our practice is that in which the stomach is secondarily affected through irritation from the pelvic organs, and it is here that we principally find the need of some adjuvant to our homœopathic methods, and of those, some ferruginous tonic carefully employed often tides us over until our remedies can accomplish their beneficial effects.

Nocturnal Enuresis.—It is often difficult, among other things, to find an alternative remedy against nightly wetting the bed in children. Now there comes forward another "never-failing remedy,"—mix 2 drops of *Liquor Ferri Muriatice* in a wineglassful of water and give a tablespoonful every three hours during the day.—*Pop. Zeit für Hom.*, 1889, 12.

Blennorrhœa Urethralis.—A French physician has hit upon the use of *Aqua silicata* (a familiar homœopathic remedy) in chronic painful blennorrhœa of the urethra, in cases that have for a long time resisted attentive treatment. Dose, 5 drops twice daily.—*Pop. Zeit. für Hom.*

Camphor Poisoning.—A very instructive case of poisoning by *camphor* is narrated by Dr. Brothers, of New York. A man of 26 swallowed at noon about 150 grains of *camphor* in the form of *camphorated oil*, in mistake for *castor oil*, along with some whiskey. In the course of an hour he felt uncomfortable; he began to have an intense headache, aching in the limbs, chills, nausea and general weakness. The headache steadily increased in severity, and almost drove him crazy. There was a strong odor of *camphor* perceptible in the breath, and at 4 o'clock he passed a small quantity of urine which smelt of *camphor*. Shortly after 5 he took a walk for about an hour. On returning he sat down to supper, and while partaking of a hearty meal, he suddenly grew deathly pale and passed off into a fit. The convulsion was general, but without frothing at the mouth or biting of the tongue, and was soon followed by uncon-

sciousness. About 7 o'clock, when first seen by Dr. Brothers, he was found sitting in a chair in a half-dazed condition. He answered questions intelligently, but did not like to be bothered. The pulse was full, strong, and 80 per minute. The face was somewhat flushed. He complained of no pain in the mouth, throat or stomach; there was no erotic desires; the pupils seemed to be normal. A dose of 20 grains of *Calomel* and 30 grains of *Bromide of Potassium* was ordered every 4 hours. After the first dose of medicine he vomited his undigested supper, strongly impregnated with *camphor*. He spent a very restless night, but next morning was well enough to leave the house. The urine now began to be passed freely, and convalescence was established. The proper treatment of *camphor* poisoning consists in removing as much of the poison as possible by emetics, whilst the convulsions must be controlled by *Bromide of potassium* or *Opium*, and other symptoms treated as they arise.—*The (N. Y.) Medical Record*.

Eserine, Poisoning by.—A nine-year old child, choreic, was treated by Prof. Fenoeh (of Berlin) for this affection with Eserin. sulph. $\frac{1}{2}$ mg. into the right upper arm. One-quarter of an hour the child cried out loudly, vomited profusely and complained of violent headache. Soon the face and upper part of the body became covered with a profuse perspiration; the salivary secretion was increased one-half hour later; the number of the heart-beats sank to 64; the radial artery was contracted; the pulse became small and thready. After repeated vomiting, signs of cardiac weakness increased in spite of remedies given to counteract its action, while the sweat and saliva decreased in amount, and in one and a half hour had entirely disappeared. A moderate contraction of the pupil took place, reaction was slow, pupils did not enlarge upon shading the eyes, contracted somewhat upon exposure to strong light, returning, however, to their normal size. The child laid apathic upon the bed, pale and collapsed. The proper antidotes gave relief, and the next morning it was entirely well.—*Berl. Med. Wchuschr.*, 17, 1888. Cases of poisoning by Eserine are very rare; in the whole medical literature we have found but two—*Runiszewcz R. Wiadomości lek li wów*, 1886, i., 161–163, and in the *London Lancet*, 1887, i., 621, an article by A. Dunlap. P. and P.

Isomeric Forms of Cinchonin.—M. P. Langlois has studied the physiological action of four newly isolated isomeres of Cinchonin which produce as well as *Cinchonidin* clonic convulsions. Their poisonousness may be ranked as follows: (1) *Cinchonidin*, (2) *Cinchonin*, (3) *Cinchonibin*, (4) *Cinchonolin*, and (5) *Cinchonigin*. *Cinchonigin* is nine times as powerful as *Cinchonidin*; 0.005 *Cin-*

chonigin injected intravenously causes an epileptic attack. Cold-blooded animals bear relatively large doses well. *Chinin* contains a certain amount of *Cinchonigin*, according to its method of preparation.—*Deutsche. Med. Zeitung*, 1889, No. 4. P. and P.

VETERINARY DEPARTMENT.

CURES OF ANIMALS WITH HIGH POTENCIES.*

BY DR. C. VON BOENNINGHAUSEN.

In the sciences based upon experience, experience alone can remove doubt and prove that which is true and right. Where experience speaks with resoluteness and everywhere facts are placed by it in the same manner before the eyes to be viewed clearly, there the human judgment must bow itself in humility, and it would only make itself ridiculous by overestimation if it would obstinately deny or assert the contrary.

But such experience must be, if it will be of value, based upon pure observation, uninfluenced by artificial systems and without seeking after hidden causes. But the dependent, but really only apparent, lack of science, which, however, may exist together with a rational *empiricism*, induced—250 years B.C.—the then leading lights of the empiric school (Herophilus, Serapion, Philinus) to accept *epilogismus*, as has been sought since Bacon's times to broaden pure experience through *induction*.

Homœopathy confines itself with all strictness to pure experience and excludes all which may lie on this or that side of its limits.

Its *therapy* is therefore based chiefly upon the actual results of the self-proving of remedies as well as its *dosology* upon the actual action of these upon the sick. Thus it equally rejects in regard to *dosology*, *epilogismus* as well as *induction*, and everything which has been taken up in its doctrine under the heads of *small doses*, *dilutions*, *dynamizations* and *potentizations*, is nothing more or less than the bare result of pure experience and carefully made experiments.

Although all true homœopaths by far agree in most of the essential points of their principles, yet there is a great difference of opinion in regard to the potentization and smallness of the dose as well as in its repetition.

* Translated from the *Allg. Hom. Zeit. Bd.*, 67, No. 26, by F. Pritchard and Albert Pick.

Hence, here there is particularly necessary a great deal more pure experience to bring about a union of the far diverging views and opinions, in order that also in this a desirable agreement may be produced—in the technical employment of the remedy.

In order that these experiments and experiences may be perfectly pure and beyond a doubt, to express nothing more and nothing less than the truth, to exclude every kind of sceptically forced interpretation and to nowhere offer anything in order that the results might not be ascribed to other possible foreign influences, experiments on animals appear to be especially the most reliable and to the purpose. Thus, here entirely disappear all the presumptuous influences of imagination and diet, and in the former respect they surpass the cures of *small children*, which ought to be ranked, however, next to *the cures of animals*, for much of the influence of the mother or the nurse is fabulous.

As I, twenty years ago (1843), first begun my experiments with the 200th potency, I confined them for these and various other reasons in the beginning exclusively to animals, but encouraged by the most astonishing results, I also tried them upon human beings.

The results were and remained such that I now never go down to the 30th potency and only extremely seldom do I go up to Jenich's HIGHEST POTENCIES, and that only where necessity requires it.

The material noted down in my carefully kept journal, through this long series of years, contains much that is remarkably convincing; but I will leave it to my successors to later make use of it for science if they consider it appropriate.

To-day, I only intend to communicate but little from my separately kept, but much more briefly conducted, *Veterinary Journal*, without any special choice, which will serve as a confirmation of my above assertions.

First, I must state that it may be better understood by the following:

1. The cases communicated are all taken from the *first half of the year 1863*, as the date indicates.

2. Only those are quoted of which I have later heard, and this without exception, so that those which were not improved were not at all excluded.

3. In all cases the disease is described by but a few words, and word for word has been copied, so that nothing has been added from memory.

Hence the facts are simple, but quite sufficient for the purpose.

4. In all animals, large or small, the dose employed consisted of TWO PELLETS ARMED WITH THE 200TH POTENCY OF *the remedy*.

5. To all equally this dose was given in pure cold spring- or river-

water* to horses, it was given in a half bottleful to the others according to their size, dissolved by continuously shaking for one minute and then given at one dose.

6. It was most strictly forbidden to employ anything externally in any case.

7. Also the diet and the method of living remained in all cases entirely unchanged, but of course the use of any other medicinal substance was unconditionally forbidden.

CURES OF ANIMALS.

1. January 9th. Lanmann's cow—after calving eight days ago, *retained placenta*: 1. SABIN., 2. SEC. CORN., every 24 hours, cured.

2. January 12th. Sieveneck's three-year-old mare—*RESTLESSNESS FROM SEXUAL EXCITEMENT*: PLATINA cured.

3. January 15th. Mennemann's horse—(received on December 11th of the year before for *GLANDERS WITH SORE THROAT*, which had already persisted eight months and was worse in the evening, BELL.); now very much improved, having still some *COUGH* in the evening: HEP. SULPH. CALC. cured.

4. January 22d. Kemper's horse—*broken-winded* for 9 months, worse on becoming cold: ARS. cured.

5. January 25th. Reer's FOALS—*croup*, from which the mother had also suffered: 1. ACON., 2. BELL., 3. HEP. S. C., every 12 hours. On January 31st much better, but glanders with excoriating nasal discharge remains: ARS. cured.

6. January 28th. Pastor's of Altenberge, bullock—*distension of the abdomen*, an *entire loss of appetite*, for which CHAM. had already been used: 1. NUX VOM., 2. ARS., every 48 hours, slight improvement. January 30th, *loud cracking of the joints* and continual rubbing from *itching of the body*: SULPH. cured.

7. January 31st. Brüning's mare—*lame* for fourteen days from —: LACHES. cured.

8. February 10th. Gilker's CALF—*entirely paralyzed for several days and can no longer stand, worse in the evening*: 1. NUX VOM., 2. BRY., every 48 hours, cured.

9. February 14th. Schröder cow—after calving, *delayed placenta*: 1., 3. SABIN., 2. SEC. CORN., every 12 hours, cured.

10. February 16th. Kinnebrock's eight young pigs—*diarrhœa, discharge white*: MERC. in 2 doses, one for each 4 pigs, cured.

11. February 23d. Twenhöver's pig—*falling out of the bristles, entire loss of appetite*: ARS. cured.

12. March 7th. Werlemann's cow—*bore a dead calf and the placenta was retained*: 1., 3. SEC. CORN., 2. SABIN., every 8 hours, cured.

13. March 9th. Sudhof's, little pig—*has suffered for a few days from diarrhœa, white discharge*: MERC. cured.

I consider all further observations and explanations to the above truly-communicated facts to be unnecessary, but, if I should select more, I would take quite a number of interesting cases from the earlier years of my practice. These now given will (in the meanwhile) serve as a contribution to knowledge of the efficacy of high potencies.

* Recently a medical counsellor, together with his pharmaceutical assistant, in the revision of homœopathic medicines made the official statement that for such solutions NO DISTILLED WATER is employed, and it was for this purpose not kept in stock. Without regard for the fact that in no legal pharmacopœia this is ordered, the following cures show that such fine points are just as superfluous and ridiculous as the statement expressed at the same time, that *the size of the PELLETS* was not in all cases entirely the same.

Communicated.

FLATULENT COLIC—*Equine*.—In flatulent colic it sometimes happens that the accumulation of gas becomes so great that an obstruction forms in different parts of the small intestines (incarcerated flatus), if this is not soon removed a rupture and death will follow, caused by the animal throwing himself down during the violent pains that follow this obstruction, which is especially liable to happen at the ileo-cæcal valve. Now, the quickest way to relieve this obstruction is to force or pump air into the colon, through the rectum, by the large syringe that is used to give the animal a clyster, until the air is forced up against the obstruction; when enough air has been pumped in the gas will come out through the rectum in great quantity, relieving the animal immediately. Three of the best remedies for this trouble (incarcerated flatus) are *Carbo. veg.*, *Lycopodium* and *Nux vomica*; *Aconite* very seldom doing any good unless an inflammatory action should set up, showing itself by the usual feverish symptoms. One of the most frequent causes of colic is the bolting of the food, this is often caused by an inability of the animal to masticate his food properly by reason of the irregularity of the molars, sharp edges often being found lacerating the cheeks and gums. To remedy this trouble the animals teeth must be filed down by a veterinary dentist. Every horse's teeth should be filed at least once each year. About five years ago a gentleman, patient of mine, told me of a valuable horse that he bought very cheap, knowing that he had frequent attacks of flatulent colic, as many as five attacks in a week, this going on for several months. I suggested having his teeth filed and attended to from time to time, which was done, since that time the animal has never had an attack of colic.

D. W. SHOEMAKER, M.D.

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 BOOK REVIEWS.

Psychology Applied to the Solution of Occult Psychic Phenomena. By C. G. Raue, M.D. 8vo. Pp. 541. Philadelphia. Porter & Coates.

Dr. Raue has divided his very interesting work into six divisions. The first in treating of the "Intellectual Sphere of the Mind" elucidates the senses, their capability of receiving impressions through external stimuli, and the conveyance of the impressions so gained to the soul for retention as vestiges to be brought up at a later date by the faculty of the soul to memorize. In part second he treats of the "Sphere of Conation," *i.e.*, the coupling of both the will and the desire to act—a governable activity of the primitive forces of the mind. In this he treats of the will, desires, aversions, repul-

sions, and volitions. In the third part he treats of the "Emotional Sphere or Sphere of the Feelings" of pleasure and pain, the agreeable, beautiful and sublime, the gradation of good and evil, and claims this to be "the same in all human beings, because that gradation is conditioned by the inborn nature of the primitive forces of the soul." Part four is devoted to "Physiological Psychology" and treats of nerve influences, the physiology of the brain, senses, etc., concluding with the psychological applications of the same. Part five, composed of "Complimentary Inquiries," explains the method of the study of psychology. Here he treats of reason, inner perceptions, instinct, and temperaments, and of the soul and body. He describes the soul as "the real we, ourselves, that self-conscious being, made capable, by its own incarnation of living, thriving and acting in this material world;" in verity we judge, that mechanical vital force existent in the body, impressionable by external stimuli, which remains active in health, but ceases when the material body is worn out by disease or senile decay. Part six is devoted to the explanation of "Occult Phenomena," mind and muscle reading; thought transference, mesmerism and kindred phenomena; hypnotism, animal magnetism, hallucinations, delusions, somnambulism, prophesies, second sight, psychic action at a distance, haunted houses, phantasms of the dead and spiritualistic phenomena.

Dr. Raue's is a book for instructive reading useful indeed to the physician, rendering him able, if carefully studied, to answer confidently many of the perplexing questions so often asked by his patients, questions that when answered thoroughly increase the respect and trust which he so dearly loves displayed toward him by those with whom he is so often brought in contact.

A proper idea of this great work cannot be conveyed in a necessarily short review, we recommend every physician to procure the book, and form his opinions of it by carefully studying its well-written pages, the result will be instruction and recreation, greater knowledge and an increased power of observation and analysis.

American Resorts with Notes upon their Climate. By Bushrod W. James, A.M., M.D. 8vo. Pp. 285. Philadelphia. F. A. Davis.

In this useful work Dr. James has given us a comprehensive guide to American health resorts, and the diseases to which they are individually adapted; a description of many health tours and summer resorts; an excellent chapter on therapeutics of climatic treatment; and extends his work to include all America, from Alaska to Cape Horn.

The book is a valuable adjunct to a physician's library, one of those works of reference so often needed at a moment's notice, and one so fully indexed that it needs but a moment's time to find just what one is seeking, and satisfactory when found. *

PUBLISHERS' DEPARTMENT.

Dr. Hugh Pitcairn, of Harrisburg, Pa., favors us with a copy of the *Tribune*, of Altoona, from which the subjoined article is taken. While it concerns a local matter, yet we think it has a national interest. There seems to be a concerted action on part of the allopaths to get the whip-hand by means of the passage of plausible laws which, while ostensibly aimed at quacks, are in reality intended to kill off all schools but the allopathic. That this scheme will not work where homœopaths take the trouble to make a fight, is plainly evident from the action of the House of Representatives of Pennsylvania.

WHEN DOCTORS DISAGREE, WHAT THEN?

The House of Representatives has not done a more commendable act during the present session than it did when it amended the Medical Examiners' Bill. That there should be some law passed that will prevent the medical colleges from turning out a lot of incompetents annually, there can be little doubt, but this bill was prepared entirely by allopathic physicians without any consultation with physicians representing any other school of medicine, and was championed by the fourteen allopathic physicians who are members of the House. The bill, as originally presented, left open a wide avenue for fraud, and for the oppression of minority schools by the school securing a majority of the Board of Examiners. It was charged by the representatives of the homœopathic and eclectic schools that it was introduced, not from any desire to protect the public from quacks, but in answer to a resolution adopted by the American Medical Association at its meeting in New Orleans, approving of the appointment of medical examining boards in every State in the Union, and in answer to this resolution similar bills have been introduced in the legislatures of a dozen States. This American Medical Association says in its code of ethics: "It is not in accord with the interests of the public, or the honor of the profession, that any physician or medical teacher should examine or sign diplomas or certificates of proficiency for, or otherwise be specially concerned with, the graduation of persons who, they have good reason to believe, intend to support and practice any exclusive and irregular system of medicine." ("Exclusive and irregular" refers to anything not allopathic.) They quote also from an article by Dr. Packard, a prominent allopathic surgeon of Philadelphia, in which he declared in favor of the board, provided it is to be composed wholly of allopathic physicians clothed with power to revoke any license conferred, on proof that the license supported or practiced "any exclusive and irregular system of medicine." They also refer to the remarks of Dr. Flick, of Philadelphia, one of the framers of the bill, who said publicly in a discussion of the act that it would "crush out homœopathy." No fair-minded man can doubt that the opponents of the measure had good grounds for fearing they

would be unfairly treated if the allopathic school gained control of the board. To prevent this, they submitted an amendment, as follows: "There shall at no time be a majority from any one school of medicine or system of medical practice." Notwithstanding the fairness of this amendment, the allopathic physicians of the House set about to accomplish its defeat, and brought to their aid such prominent physicians as Drs. Agnew, Pepper, White, Wood, Mills, and numerous smaller lights, who visited Harrisburg and undertook, by personal work, to secure the passage of the bill without amendment. But notwithstanding this, the House adopted the amendment by the unusual vote of 132 yeas to 39 nays, fourteen of the votes against the amendment being from allopathic physicians. The framers of the bill then, it seems, intended to leave no doubt of the animus back of the original measure, as Dr. Reid, of Indiana, at once moved its indefinite postponement. The House refused to agree, and Dr. Walk, the special champion of the measure, made a second attempt to secure its indefinite postponement, because, as he stated, the bill, as amended, had become "impracticable." The House, seeing the animus of the motion, passed the bill to third reading.

It is the duty of the legislature to throw every safeguard around the minority. The mere fact that the allopathic physicians outnumber those of other schools, is no reason for giving them control of the licensing franchise for all schools. The law is to affect no physician now in practice, but only those applying after January, 1890.

A board of medical examiners controlled by allopathic physicians would practically destroy all colleges other than their own in the State, as students would hesitate to matriculate in such colleges and spend their time and money in securing a medical education, knowing that before they could commence practice they would be compelled to undergo an examination before a board controlled by physicians opposed to and strongly prejudiced against their system of practice. It would be a palpable wrong to enact any law that could be so injurious.

When the bill comes up for third reading the allopathic physicians may endeavor to have it restored to its original shape or to defeat it. The members of the House should not permit them to accomplish either purpose, but should pass the bill as amended, and thus guarantee to the people of the commonwealth protection against quacks and quackery, and at the same time guarantee the rights of all schools of medicine, whether their adherents be few or many. All the commonwealth has a right to demand, is that its physicians be properly educated, and not that they practice allopathy, homœopathy, eclecticism or any peculiar system of therapeutics.

AMERICAN INSTITUTE OF HOMŒOPATHY. AN- NOUCEMENT OF THE SESSION OF 1889.

EDITOR HOMŒOPATHIC RECORDER:

The American Institute of Homœopathy will convene in its forty-second annual session, at Hotel Lafayette, Lake Minnetonka, Minn. (near St. Paul and Minneapolis), on Monday evening, June

24th, the session continuing until the following Friday night. The place of meeting is one of the largest summer hotels in the country, capable of accommodating upwards of six hundred guests without inconvenience or crowding, and furnishing adequate provision for the general and sectional meetings and the various committees of the Institute. The entire hotel and its force of *attaches* will be practically at the disposal of the Institute during the week. The situation and arrangement of the hotel are such as to afford a lake-view from each and all its rooms. The apartments are spacious and airy, with high ceilings, and all the appointments are such as pertain to a first-class hotel. Terms, three dollars per day.

"Minnetonka," with its deeply indented shores, its irregular bays and jutting head-lands, and its numerous islands, is described as one of the most beautiful inland lakes in America. Several excursion steamers ply on its waters, and its fine scenery and excellent hotel accommodations attract thousands of summer sojourners to its shores.

Medical organizations are invited and requested to send delegates to the meeting as follows: Associations composed of more than fifty members from different States, two delegates with an additional delegate for every twenty members; State societies, two delegates and an additional delegate for every twenty members; county and local societies, hospitals, asylums for the insane, dispensaries and medical journals, one delegate each; colleges, two delegates each to form the Inter-collegiate Committee. It is not necessary that delegates be members of the Institute.

Physicians desiring to become members are required to present to the Board of Censors, a certificate signed by three members of the Institute, setting forth that the applicant has pursued a regular course of medical studies and sustains a good moral character and professional standing. The applications should be accompanied with the initiation fee of \$2, and the first year's annual dues, \$5. Blank applications for membership may be obtained from the Secretary, or from the Chairman of the Board of Censors, R. B. Rush, M.D., of Salem, O.

Homœopathic State and local societies, hospitals, dispensaries, colleges and medical journals are requested to *fill out and return promptly* the statistical blanks which will be forwarded to them by the Bureau of Organization, Registration and Statistics, in order that the Bureau's report may not be delayed. Physicians having knowledge of the life, services, etc., of any member of the Institute who has died since June 1st, 1888, will confer a favor by communicating the facts to Dr. Henry D. Paine, the necrologist, No. 19 West 24th street, New York city.

Papers designed by their authors for publication in the journals after presentation to the Institute, should be prepared in *duplicate* and one copy placed *in the hands of the General Secretary before the close of the session*, as required by the By-Laws.

The Committee on Railroad Fares will announce, in due time, the arrangements that have been entered into for a reduction of rates to physicians and their friends who may be in attendance at the session.

The "Annual Circular," giving full details, together with the programme as prepared by the committee, will be issued in May. Any physician failing to receive a copy before June 1st, can obtain one on application to the undersigned.

PEMBERTON DUDLEY, M.D., *General Secretary.*

S. W. COR. 15TH AND MASTER STS., PHILADELPHIA.

The Institute Meeting Letter from the President.

MIDDLETOWN, N. Y., April 20, 1889.

To the Members of the American Institute of Homœopathy:

Your President sends you greeting, and wishes you all to remember that the annual session of the Institute will be held at Lake Minnetonka, in the State of Minnesota, beginning on the 24th and continuing until the 28th day of June, 1889. We urge upon every member the duty of attending these annual gatherings of our national organization, and we promise both pleasure and profit to all the members who assemble on June next upon the banks of that beautiful and historic lake—the pride alike of ancient Indian and modern American.

What we need is an earnest, enthusiastic, and rousing gathering of the friends of homœopathy in order that the dignity of our cause may be enhanced; in order that the virtues of homœopathy may be better known and, therefore, better appreciated; and in order that the blessings which arise from the methods we have adopted may be as widely disseminated as possible among the people.

We ask all the members in the West to rally at Lake Minnetonka, because they may thus demonstrate the value of holding meetings in that locality. We ask all the members in the East to visit the West and to show their appreciation of their western brethren, and of the hospitality and cordial welcome which they will receive in the State of Minnesota. We ask the brethren from the South to go up during the hot month of June from the torrid breath of the Southern slopes to the cool and refreshing breezes of the great Northern wheat State. We ask the members who dwell upon the Pacific slope to come East and enjoy once more the friendships of former days.

We especially urge the chairmen of the various bureaus to work with vigor and energy during the next two months, for the purpose of insuring a large number of valuable papers to be read at the meeting. And we also urge upon the various chairmen the propriety and the duty of securing these papers as soon as possible, in order that a careful and full synopsis of each essay may be incorporated in the report which each chairman is expected to make. We expect all who are interested in our cause to do their utmost to make the next meeting of the American Institute an assured and triumphant success, "Naught more we ask, nor less will have."

SELDEN H. TALCOTT,

President.

Passiflora Incarnata.—The *California Medical Journal* says this medicament is excellent to relieve the nervousness and insomnia in convalescence from fevers. "We have been employing it in some cases of spinal meningitis after the acute symptoms had subsided, when the patients were unable to sleep either day or night; could not endure the bed, and were unable to maintain the sitting posture, with highly satisfactory results. It is administered in small

doses. Add 10 drops of the mother tincture (homœopathic) to half a tumbler of water, teaspoonful every two hours."

Some Uses of the Lemon.—"I was just thinking," said Dr. John E. Gilman yesterday, "how foolish people are. About an hour ago I had occasion to visit a neighboring drug store. At the soda-water counter there were a score of men, women and children, most of them drinking decoctions containing phosphoric acid. If the public were aware of the dangers that accompany the use of phosphoric acid it would not be in such common use. When people use phosphoric acid to excess, as they are now doing at soda fountains, it tends to exhaust the entire system, producing weakness and debility, which are characterized by apathy and torpidity of the mind and body. Continued use of this acid will be productive of diarrhœa and inability to resist disease. Every draught of air will superinduce cold. Finally it will affect the bones and the—well, the jig is up." "What are the special symptoms, Doctor?" "Complete indifference to everything. A person has to whip himself up to effect a purpose." "What drink is this acid found in in the largest quantities?" "Acid phosphate, malto, and all nerve foods." "What would you advise the public to quench its thirst with during the heated term?" "Lemons, by all means. They are very healthy and good not only for allaying the thirst, but will cure a multitude of disorders. The juice of the lemon contains citric acid. Acids, as a rule, decrease the acid secretion of the body and increase the alkaline. Citric acid; which is the acid of lemons and oranges, for instance, will diminish the secretion of gastric juice, but increase very materially the secretion of saliva. The very thought of a lemon is sufficient to make the mouth water. Thirst in fever is not always due to a lack of water in the blood. It may be due in part to a lack of the secretion of the saliva. When the mouth is parched and dry the acid will increase the saliva. When acid is given for the relief of dyspepsia it should be taken before eating. Lemon juice drank before meals will be found very advantageous as a preventive to heartburn."—*Chicago Times*.

An Opening.—There is said to be an excellent opening for a homœopathic physician at Berlin, Ontario, Canada, where there are a good many believers in homœopathy, but no physician of that practice. Anyone wishing further particulars may obtain them by addressing Rev. F. E. Waelchly, of that place.

Dr. D. D. Stewart, of Jefferson College Hospital, Philadelphia, thinks that "many cases of disease of seemingly obscure or supposed idiopathic origin" with which he met in his hospital prac-

tice may be traced to lead poisoning by chrome yellow used by bakers and confectioners to give their pastry a rich color. Among the cases so caused he mentions "anæmia, renal fibrosis, peripheral neuritis, spastic paralysis, neurasthenia, obstinate headache, and at least one case of long-standing delusional mania."

Three Remedies—"Melilotus.—Sweet clover, is a grand remedy in epilepsy, spasms, and like convulsive affections. It must be given in small doses, say 1 to 2 gtt., three times a day, for children, and 5 or 6 gtt. for adults, to prevent recurrence of fits, and in small doses every fifteen minutes during the attack, say in 1-drop doses. It is valuable in congestive headache and epistaxis. I have used it in one very obstinate case of epilepsy, where the patient was uncontrollable. . . . I have used it in several cases of convulsions of children, and it controlled them promptly.

Mistletoe—*Viscum album*.—Dose $\frac{1}{2}$ to 1 $\bar{3}$ of the tincture for adults; for children, 5 to 6 gtt. This hitherto neglected drug stands high as a pain-alleviating remedy, especially when the pain is of a rheumatic or tearing, shooting character. It is valuable in neuralgic rheumatism, as sciatica. It is a valuable remedy in catarrhal deafness, and also in whooping cough. It has also been praised in epilepsy, but it needs further trial to confirm the opinion in regard to its curative power over epilepsy. It was used some years ago as a parturient, but has not been used in that way sufficiently to establish its reputation.

Mountain laurel—*Kalmia latifolia*.—Dose 5 to 20 gtt. of the tincture. *Kalmia*, in 1-drop doses, has proven valuable in albuminuria, curing 25 per cent. It mitigates the pain of rheumatism very quickly, and acts positively in neuralgia. It wards off rheumatism of the heart. In headache, coming on in the morning and going off at night, this remedy acts like a charm. In influenza, with watery eyes, sore throat and much aching in the bones, the *Kalmia* gives quick relief. In all aches and pains, think of the *Kalmia*."—Prof. I. J. M. Goss, in *Georgia Eclectic Medical Journal*.

"**There** is one condition which is fatal to longevity," writes the wiseacre of the *N. Y. Tribune*, "and that is the possession of genius. There is no known instance of a long-lived man or woman of genius." If the *Tribune* owned a funny man we'd say that one of his jokes had strayed into a wrong department. By the way, what is genius?

A Philadelphia publisher put out a book made up of the condensed lectures of one of the professors of the University of Pennsylvania. The court enjoined him from publishing the book, and made him pay all costs.

A rich man in Odessa, being sick, was not satisfied with having five old school doctors in attendance, but at an expense of \$7500 sent for a sixth by special train from Vienna. He died.

Cuphea Viscosissima.—As the season when cholera infantum prevails is rapidly approaching, we have deemed it well to reprint a paper on *Cuphea viscosissima*, by A. A. Roth, M.D., of Frederick, Maryland, that appeared in the RECORDER, vol. iii., p. 243:

“Two years ago, whilst battling manfully for the life of a child ill to death from cholera infantum, I was persuaded by a lady friend to use red pennyroyal tea, and to my delight I had the pleasure of seeing a marvellous change in less than twenty-four hours. The vomiting ceased promptly and the bowels gradually became normal. Impressed by this fact, and also the fact that it was used very extensively in home treatment by country people, I procured the fresh plant, and prepared a tincture as directed in the *American Homœopathic Pharmacopœia* under article “Hedeoma.” This made a beautiful dark-green tincture, having an aromatic odor and slightly astringent taste. Of this I gave from five to ten drops, according to age, every hour until relieved, and then as often as needed, and found it act promptly and effectively. Feeling loath to add another remedy to our already overburdened materia medica, I deferred any mention of the fact; but now, after a fair trial for two seasons, I feel justified in believing that the *Cuphea viscosissima* will prove a treasure in the treatment of cholera infantum. Out of a large number of cases treated I had but three square failures, and they were complicated with marasmus to an alarming extent before I began the *Cuphea*; one died and two finally recovered. *Cuphea* does not act with equal promptness in all forms of cholera infantum. Two classes of cases stand out prominently; and first, those arising from acidity of milk or food; vomiting of undigested food or curdled milk, with frequent green, watery, acid stools, varying in number from five to thirty per day; child fretful and feverish; can retain nothing on the stomach; food seems to pass right through the child. I have frequently had the mother say after twenty-four hours’ use of *Cuphea*: “Doctor, the baby is all right,” and a very pleasant greeting it is as we all know. A second class is composed of cases in which the stools are decidedly dysenteric, small, frequent, bloody, with tenesmus and great pain; high fever, restlessness, and sleeplessness. In these two classes *Cuphea* acts promptly and generally permanently. It contains a large percentage of tannic acid, and seems to possess decidedly tonic properties, as children rally rapidly under its use. It utterly failed me in ordinary forms of diarrhœa, especially in diarrhœas from colds, etc.; but in the classes mentioned I have frequently had it produce obstinate constipation after several days’ use.”

Sizygium Jambolanum.—In No. 11 of *New Commercial Plants and Drugs* considerable space is given to this remedy for *diabetes mellitus*. There can be no doubt that *Sizygium* has the power to prevent the transformation of starch into saccharine matter. Dr. T. A. E. Balfour, of the Royal College of Physicians of Edinburgh, assisted by Dr. G. Sims Woodhead, made a series of experiments which seem to conclusively demonstrate this.

From the *Lancet*: "*Diabetes insipidus*—no diminution of urine with *Jambul*. *Diabetes mellitus*—cases presenting themselves with sloughing ulcers of diabetic origin, or accidental wounds in diabetes refusing to heal under any application or treatment, gave these results: Water diminished, sugar decreased, ulcers filling in, and wounds granulating and healing with surprising rapidity. One case in point may be mentioned. A diabetic of eighteen months' standing, who had been lately under strict diabetic regimen and treatment, applied to me for relief of rapidly increasing sloughy ulcers of leg and thigh. These ulcers caused great pain. The patient stated that he filled a full-sized zinc pail with urine every night, and, although he did not measure his urine during the day, he believed it was even greater in quantity. In one week with *Jambul* the urine diminished to one-half the quantity, and some of the deepest ulcers had filled up and skinned over. Few cases have impressed me so much with the value of *Jambul* in diabetic ulceration as this."

Jambul seed, according to a correspondent of the *Monthly Magazine of Pharmacy*, contains a very unstable glucoside, *i.e.*, *Jambulin*, which appears to have the power of stopping the diastatic conversion of starch into sugar. The drug has numerous supporters and detractors, though all admit that it has the effect of greatly diminishing the quantity of urine passed. Those who oppose it admit that it affords great relief and ease, but does not effect a permanent cure. But that it does cure in many cases seems to be unquestionable. The dose most favored is two or two and a half grains of the powdered seeds two or three times a day, or its equivalent in the tincture.

Winter Cough.—DR. G. E. NEWCOMBE—*Dear Sir*: Try *Rumex crispus* for your winter hacking cough. Aggravated from cool air in raw, cold weather, or by the inspiration of cold air. If there is any taint left of the salt rheum it and *Lappa major* will remove it from your system.

Yours sincerely,

J. K. EBERLE, M.D.

PANA, ILL.

Dr. E. A. Neatby in a paper read March, 1889, before the British Homœopathic Society, has something to say about winter coughs: "Mr. S., æt. about 56, a stout heavy man, has had bad winter coughs for several years. This year the cough had lasted four weeks, keep-

ing him a prisoner in the house. During the day there is wheezing with occasional fits of coughing, but towards evening aggravation begins (at about six o'clock), and it is impossible for patient to lay down in bed. Even if propped up a sensation of something in throat pit (larynx or trachea apparently) causes fear of suffocation and paroxysms of violent cough, only ending when some thick grayish, very sticky mucus is expectorated. It is not stringy and difficult of removal when once detached from its site, on the contrary, it *often flies unexpectedly from the mouth* after long coughing. This indication I regard as a so-called keynote for *Kali carb.*" This remedy is called for, Dr. Neatby says, when there is "1st, a very violent cough; 2d, a peculiarly semi-solid mucus, very adherent to its original site, but detached in a defined mass, having no tendency to adhere to the passages it traverses (as with *Kali bich.*), and therefore very liable to be summarily and unexpectedly ejected from the mouth by the violent cough. The patient described above began *Kali carb.* 30 about seven o'clock P.M., his evening aggravation having already commenced. He took it every hour, and had a better night. He continued it next day every two hours, and had a good night; subsequent progress was good."

Another case given by Dr. Neatby is the following: "January 11, 1887.—J. S., æt. 78. Cold and cough six weeks. Cough most in morning on rising, excited by tickling of throat and soreness. Expectoration flies out of mouth; aching of abdomen; tongue dry, must drink at nights. Taking sip of water relieves cough. *Kali carb.* 30, 3 drops every four hours. January 19th, cough and expectoration very much less. Subsequent interrupted progress."

In this connection it may be of interest to note a case that came to our attention recently. One of the members of a family caught a bad cold, which at the end of two weeks had developed into a most distressing cough. At night would often cough for half an hour at a stretch. One night a severe toothache drove the patient to take a dose of *Staphisagria* (3 x) from the family medicine box, and the result was that the cough ceased and reappeared no more. Another member of the same family had a similar experience with a cold which developed a deep cough. One dose of *Staphisagria* at bedtime brought most marked relief. A reference to the text-books shows this remedy has much to do with the coughs and sore chests of common colds.

Jacaranda Gualandai.—Our readers will remember a letter concerning this remedy, so much used in South America for gonorrhœa and syphilitic troubles, which we published in the RECORDER for January of this year, from Dr. Convers of Bogota. Another paper concerning *Jacaranda* appears in the *Medical Advance*, April, by Mr. Jose

M. Reyes, of Bogosa, who made the proving. Among other things he says: "The *Jacaranda* is the best I know of to cure gonorrhœa and chancroid." The proving given is practically the same as that we have already published.

The Presidential Address of Wm. Tod Helmuth, M.D., L.L.D., before the Homœopathic Medical Society of the State of New York, February 12, 1889, has been published in pamphlet form, and under the title "Sectarianism in Medicine," by order of the society. It is an excellent brochure and will be furnished at the rate of \$5 per hundred copies, one copy 10 cents. Orders may be sent to our establishments.

"**External Remedies**," by Henry Thomas, M.D. (London), is a little 94 page (5 x 3½) work now in its seventh edition. It treats of *Arnica*, *Calendula*, *Cantharis*, *Causticum*, *Hamamelis*, *Ledum*, *Rhus tox*, *Ruta grav.*, and *Camphor*, and is worth the 40 cents it costs.

Tarantula Cubensia.—"Miss N. McG—, a school girl, æt. eleven, had a brown colored mole about the size of a grain of wheat on the back of the neck. It commenced burning so that she could not go to school; there was no inflammation to be seen; when touching it she would complain of needles sticking in it. *Tarantula cub.*, 30th, two powders, one night and morning, Sac. lac., for a week, cured the trouble completely."—Thos. Young, M.D., Columbus, Ohio, in *Medical Advance*.

Apocynum Cannabinum.—J. E. Winans, M.D. (New Jersey State Homœopathic Medical Society), calls attention to the fact that *Apocynum cannabinum* is a remedy which should be borne more frequently in mind in cases of persistently slow pulse (50 to 60) in acute affections of men much addicted to smoking. In summing up his investigations the doctor says: "We think enough has been given to make this remedy a prominent one in cases of so-called 'tobacco heart,' as the result of excessive smoking."

Riddles.—How can pestles have a "uniform pressure," "which is never so great as to bring them in contact with the surface of the mortar?"

How can pestles which never come in contact with the mortar produce triturates that are ground so fine as to be "impalpable to the touch?"

If certain "chemical changes" take place in all hand-made and pestle-handle-machine-made triturations, and if all the triturations made or used by Hahnemann and all of his followers down to date, were so made, and embodied those *chemical changes*, how is the "conscientious" pharmacist or the careful physician, to sell or prescribe medicines under the old names which are admittedly "chemically" different and have never been proved?

Perhaps the breezes of Minnetonka may whisper a solution of these pharmaceutical riddles for the pharmacopœias are dumb and helpless before them.

Bushrod James A.M., M.D., of Philadelphia, has brought out a handsomely printed work of 285 pages ($9\frac{1}{2} \times 6\frac{1}{2}$) under the title *American Resorts with Notes Upon their Climate*, "Intended for invalids and those who desire to preserve their health in a suitable climate." The book contains an index and a large map of the United States printed on paper and separate from the book. Price \$2. May be had at our pharmacies.

A New Edition.—We have brought out a new edition of Dr. John Ellis' well-known work, *Avoidable Causes of Disease, Insanity and Deformity*, together with *Marriage and Its Violations*, by the same author. The first contains 348 pages and the latter 48, bound together, making a volume of 396 pages, substantially bound in cloth. Price \$1.50 per copy, with the usual 20 per cent. off to physicians.

A Revised and Enlarged Edition of Clark's New System of Electrical Medication, by A. W. Tipton, M.D., Topeka, Kansas, will be found advertised in our pages this month. The book contains 264 pages $9\frac{1}{2} \times 6$ inches. It may be ordered through our pharmacies. Cloth, \$3 net.

The Journal of Homœopathics, "Devoted to the Philosophy of Homœopathy," and edited by Harlyn Hitchcock, M.D., No. 19 Broadway, New York, is the last homœopathic journal to enter the field. It enters upon its career for the purpose of encouraging and developing the study of Hahnemann's *Organon* and the philosophy of homœopathy." A new translation of the *Organon* by B. Fincke, M.D., of Brooklyn, is to be the leading feature, and opens the first number.

The Recorder—Massachusetts: "Continue to send the RECORDER, I prize it very much."

Michigan: "The Veterinary Department is a feature I fully appreciate, but then the RECORDER is all good."

Illinois: "The more I see of the RECORDER the better I like it."

Connecticut: "I like the journal very much."

Massachusetts: "It is very interesting."

Our readers may have noticed an advertisement of "F. A. Overall, M.D.," of Jackson, Tenn., in the RECORDER and other medical journals, offering for sale his *System of Surgery* at \$10. The entire "system" could be reprinted in half a dozen pages of the RECORDER, and sold at a good profit for 10 cents. When we saw a copy we declined to advertise it further.

A New Work, by that well known writer Dr. C. G. Rauc, is just out, *Psychology as a Natural Science Applied to the Solution of Occult*

Psychic Phenomena. It is the outgrowth of a small work published in Germany, in 1847, by Dr. Raue, which went through five editions, and was translated into several other languages. The present work contains 541 pages, and sells for \$3.50. May be had at our pharmacies.

We were fortunate enough to procure a lot of that peculiar slag, *Silico-sulpho-calcite of alumina*, mentioned in this issue of the RECORDER, and can furnish it in triturations from 3x up. We shall catalogue this new remedy *Alum. sulph. sil. calc.*

Only too True.—"What is the matter, doctor?" asked a reporter of a well-known chemist. "I am mad; mad at chemistry and the drug business. Look here! Oil of vitriol is no oil, neither are oils of turpentine and kerosene. Copperas is an iron compound and contains no copper. Salts of lemon is the extremely poisonous oxalic acid. Carboic acid is not an acid but an alcohol. Cobalt contains none of that metal, but arsenic. Soda-water has no trace of soda, and sugar of lead has no sugar; cream of tartar has nothing of cream, nor milk of lime any milk. Oxygen means the acid-maker, but hydrogen is the essential element of all acids, and may contain no oxygen. German silver has no silver and black lead no lead. Mosaic gold is only a sulphide of tin. These are only some of the mistakes of nomenclature in our business."—*Medical Herald.*

The Washington Pharmacy.—The Washington, D. C., homœopathic pharmacy, which for a number of years past has been part of the extensive business of Messrs. Boericke & Tafel, has been sold to Messrs. Roberts & Co., and in the future will be conducted under that firm's name. Two members of the new firm are Dr. Roberts, a recent graduate of the Hahnemannian College, Philadelphia, who for several years previous to his graduation was manager of the Washington pharmacy, and Miss Dorman, who has been connected with the establishment almost from its start. Both Dr. Roberts and Miss Dorman are skilled in homœopathic pharmacy, and we feel assured will serve the public well in the responsible positions they have now assumed.

The following advertisement came to hand too late for insertion in our regular advertising pages, and as the physician having the battery is desirous of disposing of it, we give him the benefit of this position, and also take this occasion of reminding our readers that if any of them have occasion to "want," or have anything "for sale," the RECORDER is the journal to give them a wide publicity. \$3.00 each insertion for a "want" or "for sale" ad.

FOR SALE.—An almost new John A. Barrett's 32 cell chloride of silver battery for \$35 (original price \$45). It is in perfect order; for further particulars address Boericke & Tafel, Philadelphia, Pa.

THE
HOMŒOPATHIC RECORDER.

VOL. IV.

PHILADELPHIA, JULY, 1889.

No. 4.

EDITORIAL.

Two of our foreign exchanges reach us this issue in deep mourning. The *Leipziger Popular Zeitschrift für Homœopathie* chronicles the death of Dr. Heinigke, late head physician to the Homœopathic Hospital of Leipzig; and *El Consultor Homeopatico* that of Dr. Don Salvio Almato y Ribera, one of its editors.

Dr. Carl Heinigke was born in the village of Gossnitz in 1832, and received his degree from the University of Leipzig in 1856. He was a learned and characteristic physician; patient, kind, and sympathetic with his friends; but calmly sarcastic toward those who would not allow him to class themselves as such. His death on the 19th of March was a sad blow to his colleagues, who will ever remember him as an earnest physician and an honor to homœopathy.

Dr. Don Salvio Almato was born in Olesa de Montserrat, on the 15th of March, 1827, and received his licentiate in medicine in July, 1851. After much study of homœopathy, and many happy trials of its law in the cholera epidemic of 1865, he decided to dedicate himself entirely to the new school. It was soon after this that he began to enrich the Spanish homœopathic literature by translating such works as: Espanet's *Practice of Homœopathy Simplified*; Ruddock's *Diseases of Children*; Hayward's *Colds and their Consequences*; Hart's *Diseases of the Eyes*; and two editions of Hughes's *Manual of Therapeutics* and *Pharmacodynamics*. He also wrote a pamphlet on "Cholera, Its Prevention and Treatment."

Dr. Almato is mourned as one who was "the salvation of many lives, and the alleviator of innumerable sufferings" during the various epidemics in Spain, especially that of *Typhus icterodes* in 1870.

LATRODECTUS MACTANS.

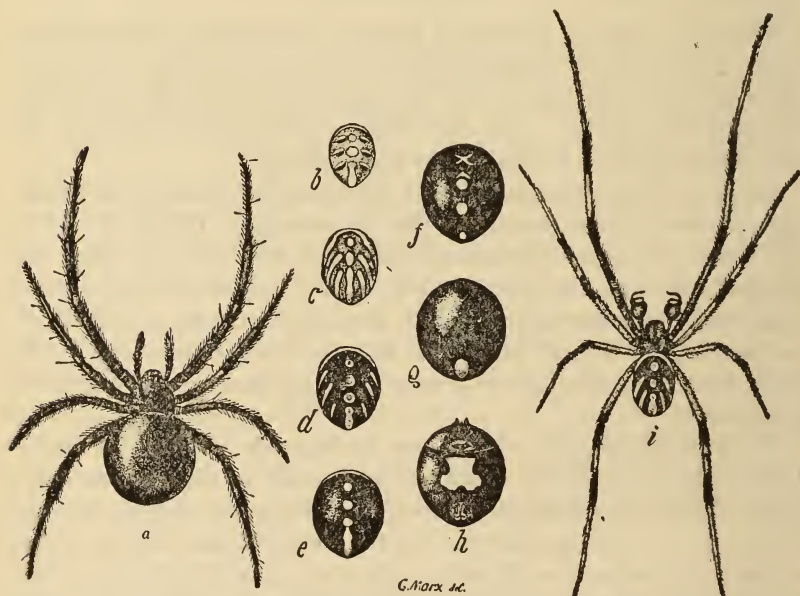
A Suggested Remedy in Angina Pectoris.

BY SAMUEL A. JONES, M.D.

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"The great result of the grim doctor's labor, so far as known to the public, was a certain preparation or extract of cobwebs, which, out of a great abundance of material, he was able to produce in any desirable quantity, and by the administration of which he professed to cure diseases of the inflammatory class, and to work very wonderful effects upon the human system."—*Dr. Grimshawe's Secret.*

I do not know that the doctor who is the direct occasion of this paper was *grim*, nor do I imagine he ever dreamed of such an application of his paper as I purpose to make. I never met him; though he wore the gray and I the blue during a struggle wherein fate might



easily have thrown us together. It was not until the autumn of '76 that I became aware of his existence, and then by a contribution of his to a medical magazine—the special copy of which was found amongst the multifarious waifs of a bookstall. I could not “decline the article,” although I was then entering upon a field of labor that would leave little time for such quiet research as the old doctor's paper so powerfully suggested, so I bought the odd number, and

fourteen years later I am making such use of it as my sense of its significance enforces.

It is due Mr. A. J. Tafel to state that but for his most efficient services this paper of mine would never have been written. To his endeavors, stretching through some years, I owe the identification of the remedy, without which I should not have put pen to paper; and having secured this, from unimpeachable authority, too, he never rested from his labors until he had put in my possession dilutions of the poison itself. If, then, this *magis venenum* shall prove itself *magis remedium*, most assuredly the *pars magna* of its introduction is his.

From the days of Dioscorides and Pliny to the present a venomous quality has been ascribed to "the fluid emitted from the orifice in the fangs of the Arancidæ." That this quality was even lethal has been both believed and questioned. *Insect Life*, vol. i., No. 7, pp. 204-211, Washington, 1889, contains "A Contribution to the Literature of Fatal Spider Bites," in which the credulity of mere medical observers and the emphatic incredulity of professed "entomologists and arachnologists" are dwelt upon, and concerning which its author cautiously concludes as follows:

"It will possibly appear to the reader that after collecting this testimony we are as far from the solution of the question—'Do spider bites ever produce fatal results?'—as we were before; but it seems to us, after analyzing the evidence, that it must at least be admitted that certain spiders of the genus *Latrodectus* have the power to inflict poisonous bites which may (probably exceptionally and depending upon exceptional conditions) bring about the death of a human being. Admitting in its fullest force the argument that in reported cases the spider has seldom if ever been seen by a reliable observer to inflict the wound, we consider that the fact that species of the *Latrodectus*, occurring in such widely distant localities as South Europe, the Southern United States, and New Zealand, are uniformly set aside by the natives as poisonous species, when there is nothing especially dangerous in their appearance, is the strongest argument for believing that these statements have some verification in fact. It is no wonder that a popular fear should follow the ferocious-looking spiders of the family *Theraphosoidæ*; but considering the comparatively small size and modest coloring of the species of *Latrodectus* so wide-spread a prejudice, occurring in so many distinct localities, must be well founded." P. 211.

Is it indeed an *argument* that "in reported cases the spider has seldom if ever been seen by a reliable observer to inflict the wound?" How an Orfila, a Christison, and a Caspar would smile when asked if the evidence of a poisonous quality depended upon the administration of the poison being "seen by a reliable observer." Toxi-

cology detects a poison by the physiological test as well as the chemical. Strychnia in quantity too small for the coarse chemical test is revealed by the tetanized muscles of a frog whether that "arch martyr to science" be in "South Europe, the Southern United States, or New Zealand," and that infinitesimal fractions of Strychnia will display its characteristics whether or not its administration is "seen" by a Christison, or a college janitor. Of course, a Christison would recognize Strychnia from and in the phenomena, while a college janitor (and here and there an over-scientific entomologist) might not.

It is neither the aim nor the purpose of this paper to establish the lethal property of spider poison; though I must acknowledge that, until I read the paper in *Insect Life*, I had no thought that its possession of such a property would be called in question. I shall content myself with calling attention to the pathogenetic quality of the poison of *Latrodectus mactans*, leaving my reader to discern the resemblance of its *tout ensemble* to an attack of angina pectoris, and therefore to infer its homœopathic applicability in that dread disorder. I shall not enter upon the pathology—various and much-confused—of that cardiac seizure, because, as I get older, I find the "like" more and more of a "pillar of cloud by day and pillar of fire by night," whilst in my short life I have found "pathology" as changeable as a dying dolphin—and every one knows that a dead fish "stinks and shines, and shines and stinks."

Cases of Spider Bite.

BY G. WILLIAM SEMPLE, M.D., HAMPTON, VA.*

"Spider bites are of rare occurrence in this vicinity, but are generally productive of grave symptoms. [Isn't it bad taste for doctors to use the words grave symptoms?] I will report all that have occurred to me in a practice of forty years:

CASE 1. September 4th, 1853.—I was called to see Mr. D., at Old Point, who had been bitten by a small, black spider on the prepuce, whilst on the privy seat, at 12.30 o'clock. The bite at first caused only itching of the prepuce, with a little redness of the part, but in less than half an hour *nausea*, followed by *severe abdominal pains*, ensued. A messenger was dispatched in haste for me to Hampton, three miles off. Before I reached the patient, at 2.30 o'clock, *violent præcor-*

* *Virginia Medical Monthly*, vol. ii., No. 9, pp. 633-38, 1875. "He was commissioned surgeon in the Confederate army, July 1st, 1861; served until August 1st in the field on the peninsula; then placed in charge of hospital in Williamsburg; afterwards ordered to Richmond and placed in charge of an hospital, and remained until close of war." Failing to find any further trace of him I am led to believe that he has been mustered out of service by the Grand Commander.

dial pains extending to the axilla, and down the [left] arm and forearm to the fingers, with numbness of the extremity, had succeeded, attended by *apnœa*.

In consequence of the violence of the symptoms, Dr. Stineca, surgeon of the post, had been sent for, who had given two doses of laudanum of \mathfrak{z} j each, and two of rectified whiskey of \mathfrak{z} ij each, and being in ill health and unable to remain, had ordered his steward to apply four dry cups over the præcordia. This had just been done when I arrived. I saw the *blood, thin and florid*, fill the cups like water oozing through muslin. When the cups were removed, the *blood*, emptied into a basin, *did not coagulate*; and blood continued to ooze slightly from the surfaces to which the cups had been applied until the next morning, though a solution of tannin was applied.

I found the patient *suffering extremely from the most violent præcordial pains and from apnœa*, and also *violent pain in the left arm, which was almost paralyzed*. His pulse was 130 and *very feeble*, his *skin cold as marble*, and his *countenance expressive of the deep anxiety* he felt and expressed in words. The laudanum and whiskey seemed to have produced no effect—the nausea and abdominal pains having subsided before they were administered. There was no pain, inflammation, or swelling, where the bite was received. Even the itching of the part had subsided. I gave the patient every half hour for several hours \mathfrak{z} j of aromatic spirits of ammonia, and as much whiskey and water as he could be induced to take, and afterwards gave them every hour; also pediluvia of hot mustard and water, frequently repeated, until the next night.

September 5th, 8 A.M.—The symptoms continued unabated; indeed, the patient grew worse until 2.30 o'clock, twenty-six hours after he was bitten, for his pulse had then become *so frequent that it could not be counted, and so feeble that it could scarcely be felt*. He then vomited *black vomit* copiously—a quart or more. Soon afterwards reaction set in, his pulse gradually gained force, and became less frequent, the pain subsided and the respiration improved. At 8 P.M., the pulse had gained considerable force, and the patient slept until some minutes after 12; his pulse was pretty full at 1.10; his surface warm and perspirable, and he felt almost free of pain. After a short interval he again fell asleep, and slept quietly until morning, when he awoke—his respiration healthy, pulse 80, regular and with sufficient force, and entirely relieved of pain. He soon afterwards had *two pretty copious evacuations from the bowels*, similar to the black vomit he had vomited. After this he said he felt quite well, and took a light breakfast and dinner, and returned that evening to his residence in Portsmouth, and in a few days went to work at his trade.

In thirty-six hours from the time he was bitten, he took three and a half quart bottles of the best rectified whiskey—about three quarts without showing the least symptom of intoxication.”

I have cited this case at full length in order to present the *evolution of the symptoms*, on which alone depends the resemblance of the action of the poison to the chief symptoms of an attack of angina pectoris—a closer resemblance than half a lifetime of somewhat wide reading has enabled me to find in the effect of any other noxious agent. In fact, after much searching, I find this case to be unique. In other cases of spider bite I can find evidence that assures me of its genuineness, but, to my knowledge, its *order of symptom-evolution* is as solitary as it is singular and significant. This feature of *uniqueness* will cause many to regard it with suspicion. I think they will do wrong; for some experience in proving-work has taught me that one positive result from a drug outweighs any number of negative.

In the case of *Latrodectus mactans* we shall find, from other poisonings, that, as a rule, it displays an affinity for the præcordial region as the *locus* of its chief attack; and having assurance of that fact we shall not find it difficult to accept a clue from even a solitary instance.

Of the remaining cases in Dr. Semple's paper I shall cite only the symptoms, and be it observed that in all the cases as here given the italics are my own.

CASE 2. A man “was bitten in the groin, and complained of only a slight prickling and itching at the spot where he was bitten, but was complaining [when Dr. S. saw him] of *severe abdominal pain*, with *nausea*, and a *sinking sensation at the epigastrium*; and his *pulse*, in a few minutes after the bite, had already become *quick and steady*; and the *skin very cold*.” The man soon recovered under ammonia and whiskey—two quarts of the latter produced no symptoms of intoxication.

CASE 3. A lad of eighteen years of age. “There was no pain, but only itching and redness at the part bitten at first; but *violent pain soon commenced there* [on the back of the left hand] *and extended in a short time up the forearm and arm to the shoulder and thence to the præcordial region*.”

CASE 4. “A tawny woman [daughter of a quadroon mulatto woman] about 22 years old, the mother of two children.” “Found her *apparently moribund*; her *skin as cold as marble*; *violent pain extending from the bite on the right wrist up the forearm and arm to the shoulder, and thence up the neck to the back of the head on the right side*; more *violent pain in the præcordia, extending thence to the shoulder and axilla on the left, and down the arm and forearm to the ends of the fingers, and this extremity partially paralyzed*; added to this, *apnœa was extreme*;

the respiration only occasional—gasping; the pulse could not be felt in the left radial, and I was not sure that I felt it in the right.”

In about fifteen minutes after the intra-venous injection of 13 minims of undiluted aqua ammoniæ the doctor “was astonished at the calm and painless expression of her *countenance*, so lately *expressive of anxiety and pain*.”

CASE 5. A healthy young girl of 13. She felt a stinging sensation on the [right] wrist, accompanied by itching and redness at the spot [bitten]. For several minutes there was but little pain, but in half an hour a *painful sensation* began to be felt at the spot, which quickly *extended up the arm to the shoulder*, and, in the course of an hour, *along the neck to the back of the head*. . . . *Pain in the præcordial region, with apnœa* coming on, I was sent for. When I arrived she was screaming fearfully with *pain*, and frequently exclaiming she would *lose her breath and die*. The pulse had become *thready* and the *surface cold*.

From these *data* the poison of *Latrodectus mactans* is suggested for trial in *angina pectoris* in that its physiological action presents the closest *similimum* yet found.

II.

It may be well to offer a critical examination of the foregoing cases. If they are genuine effects of the poison of *Latrodectus mactans*, they must afford a *recurrence of corresponding symptoms*. They may differ in *degree*, because the quality of the venom may vary; first, from the season in which the bite occurred (and judging from cases 1, 4 and 5, the poison of *Latrodectus mactans* is most virulent in the month of September), and, secondly, from the more thorough elaboration of the venom. It is known that the poison of *Crotalus horridus* differs in intensity according to the frequency with which the snake has bitten in a given period of time; of four successive “strikes” in four different organisms, and at brief intervals, the intensity of the action will vary, so that while the first wound is lethal the last is not—on which fact depends the vaunted reputation of many an antidote to the bite of the rattlesnake. That this may be also true of the spider poison is the only explanation I can offer for the fact that many naturalists have allowed themselves to be bitten by spiders of reputed poisonous species, and with impunity.

While Dr. Semple’s reports do not precisely state it, I think we may safely infer a *sense of impending dissolution* in Cases 1, 4 and 5. The girl exclaimed she “would lose her breath and die;” the man in Case 1 “expressed in words” “the deep anxiety he felt;” the woman in Case 4 was found “apparently moribund” with “gasping respiration,” and therefore incapable of speech, but who can doubt that she had a *sense of impending dissolution*?

RECURRENCE OF CORRESPONDING SYMPTOMS.

(Arabic numerals refer to the Cases.)

I.	Nausea.....	1	2	.....	.....	.....
II.	Abdominal pain.....	1	2	.....	.....	.....
III.	Countenance anxious.....	1	.....	.....	4	.....
IV.	Pain up arm to shoulder, thence to back of neck.....	.....	.....	.....	4	5
V.	Præcordial pain extending to left axilla, and down arm to finger ends.....	1	.....	.....	4	.....
VI.	Left arm almost paralyzed...	1	.....	.....	4	.....
VII.	Pain up arm to shoulder, thence to præcordia.....	.....	.....	3	4	5
VIII.	Apnoea.....	1	.....	.....	4	5
IX.	Præcordial pain.....	1	.....	3	4	5
X.	Pulse feeble, thready.....	1	2	.....	4	5
XI.	Skin cold.....	1	2	.....	4	5
XII.	Sense of impending dissolu- tion.....	1	.....	.....	4	5

ISOLATED SYMPTOMS.

*Numbness of the affected arm, 1.**Black vomit, 1.**Alvine evacuations similar to the black vomit, 1.**Sinking sensation at epigastrium, 2.**Respiration only occasional—gasping, 4.*

It must be admitted that many of our accepted provings cannot as well bear a similar test.

III.

There is another feature that the believer in the law of similars should find no insuperable difficulty in accepting as a criterion of the validity of a proving, namely : *the similarity of the drug symptoms to certain disease symptoms.* I am not ready to believe that drug symptoms are only the result of a "fortuitous concourse of atoms;" nor can I for one moment imagine that they are the product of blind and aimless chance. I plainly discern in them the result of law, and I am wholly unable to conceive of existing law without the absolutely necessary *pre-existing* law-maker. The consequent must have its antecedent. Therefore, in a drug symptom I see a purpose, and by the light of the law of similars I find the purpose of a drug symptom in an analagous disease symptom—they answer to each other as face unto face in the refiner's silver—and behind and beyond them both is another purpose, of wisdom inscrutable, of love unfathomable. In a word, my reader, the problem of the visible universe forces

upon me the alternative that weighed upon Marcus Aurelius—"either gods, or atoms." With atoms only I cannot account for law; with God and in God both atoms and law find a meaning and a purpose.

If I were submitting these convictions, or, if you will, this "working hypothesis," to a Sir Thomas Browne, or a William Harvey, or a Thomas Sydenham I should feel no momentary hesitation; as it is, I can only hope that the spirit that filled these worthies is not extinct in days when the "spiritual colic" that disordered an imaginary *Robert Elsmere* is thought to disturb the eternal Verities. I much doubt if they who mistake an eclipse for an annihilation will get any good from this poor pen of mine.

The resemblance between the symptoms of angina pectoris and the effects of the poison of *Latrodectus mactans* are so striking as to justify the presentation of a comparison; and it is hoped that physicians of wide reading will pardon what may seem to them a piece of supererogation for the sake of many a humbler practitioner whose opportunities have not been so happy. At the same time, the widest reader must admit that he has not found any one authority who has given a complete picture of angina pectoris. Nor is it essential that such an all-including "composite" shall now be presented; on the contrary, we shall offer only salient points substantiated by observers of the highest order.

It will be well to start from an authority whose scholarship has never been excelled—*Copland*. Of all our medical writers he may be called the *Great Definer*—his readers will know what that means.

"*Acute constricting pain at the lower part of the sternum, inclining to the left side, and extending to the arm, accompanied with great anxiety, difficulty of breathing, tendency to syncope, and feeling of approaching dissolution.*"

Copland presents a group of constants, and, for a terse definition, has well covered the principal phenomena. As variants he has omitted the pulse and the surface temperature. He errs on the side of dogmatism in defining the character of the pain as "constricting;" "aching, burning, or indescribable," and "generally attended with a sense of constriction" is more in accordance with the actual condition. Of Copland's seven constants, Case 4 presents an analogue for each in symptoms IX., V., III., VIII., XII., and the "tendency to syncope," which is not included in our table because Dr. Semple did not put the fact in express words. If to this group we add the *thready pulse* and *cold skin*, we shall have "covered" nine of the most prominent symptoms of angina pectoris; a pathological "composite" with a most striking pathogenetic *similimum*.

But all the elements of Copland's group are not of equal importance; two of them, at least, are pathognomonic. "The two constituent elements of the paroxysm," says Latham, are "the sense of

dissolution and the pain." "Pain with one awful accompaniment may be everything." "This mixture of the sharpest pain with a feeling of instant death." According to Fothergill "the two prominent subjective phenomena are pain in the chest and a sense of impending death." Eulenburg and Guttman include another element: "We regard the substernal pain, the feeling of anxiety, and the disturbance of the heart's action, as the essential symptoms of angina pectoris." Romberg notes the companionship of these two elements: "The patient attacked with angina pectoris is suddenly seized with a pain under the sternum in the neighborhood of the heart, accompanied by a sense of anxiety so intense as to induce a belief in the approach of death."

We have laid the emphasis of these various citations on the "essential symptoms" in order to assert, with equal emphasis, that their analogues occur in not only one case of *Latrodectus mactans* poisoning. The præcordial pain is noted in Cases 1, 3, 4 and 5, and the sense of impending dissolution in Cases 1, 4 and 5. And that disturbance of the heart's action which Eulenburg and Guttman consider an essential element is found in Cases 1, 2, 4 and 5; so that the *tout ensemble* presented by Case 4 is corroborated.

Another important element, though it is one subject to variations, is the direction of the extension of the pain. It most generally extends to the left axilla, and down the arm to the fingers; as variations it sometimes affects the right axilla and the back of the head. In Cases 1 and 4 the spider poison followed the direction of the disease, and in Cases 4 and 5 it also affected the back of the head. In Case 1 it produced the numbness of the arm and hand that is sometimes observed in the disease.

Copland includes "difficulty of breathing" amongst the elements of angina pectoris. Trousseau does not regard this difficulty as real. "Although patients think they are going to be suffocated during a paroxysm, the chest is normally resonant on percussion, and if it be auscultated as they draw in breath again, vesicular breathing is heard everywhere." Watson says, "the patient is not necessarily out of breath. It is not dyspnœa that oppresses him; for he can, and generally does, breath freely and easily." Stokes is decided: "Respiration is *secondarily* affected; there may be slight dyspnœa or orthopnœa, with lividity of the face, yet by an effort of the will (if the patient dares to encounter the pang this commonly produces) the chest may be pretty freely expanded, and the breathing relieved for a brief space; dyspnœa is not a primary symptom of angina." Eulenburg and Guttman say, "Our own experience leads us to adopt Parry's conclusion, that the changes in the respiration are principally, perhaps even solely, due to the pain." Bristowe speaks of the sufferer as "fearing to breathe." We can readily see

that the "apnœa" observed by Dr. Semple in Cases 1 and 5 had a psychical origin, but in Case 4 he says "apnœa was extreme; the respiration only occasional—gasping." This shows to what an extreme extent the action of the spider poison had gone—even to implicating the diaphragm; and it is noteworthy that Anstie records a case of angina pectoris (*Neuralgia and its Counterfeits*, p. 67, London, 1871), in which "there was so marked a catching of the breath as to make it almost certain there was a diaphragmatic spasm."

Of the changes in respiration accompanying angina pectoris we have, then, both the general, and the rarest, form, produced pathogenetically by the poison of *Latrodectus mactans*.

IV.

In its physiological action the poison of *Latrodectus mactans* resembles angina pectoris vasomotoria—a purely functional derangement. The similitude of the physiological action to pure angina pectoris corroborates the accepted pathology of the latter condition, because the phenomena of *Latrodectus* poisoning were deduced from previously healthy organisms, and in pure angina pectoris there is no pre-existent organic change occasioning the attack. According to the accepted pathology, we have in angina pectoris vasomotoria, sudden spasm of the arterioles; from this an increase of the arterial tension; to overcome this a more forcible and rapid action of the heart; as the arteriole spasm persists and doubtless deepens in intensity, distension of the left ventricle follows, and from over-distension the agonizing breast-pang, and even death from stoppage of the heart's diastole. But we must include another element—spasm of the coronary vessels. "When there is a sudden rise in the blood-pressure in the arteries, due to vasomotor spasm of the peripheral systemic arterioles, and the heart-walls are strong and well nourished, palpitation is evoked; when the coronary branches are involved in the vasomotor spasm then angina is produced, and the heart-walls, acutely distended with blood, can scarcely contract in the face of the opposition presented to their contraction by the high arterial tension. When this sudden systemic arteriole spasm extends to the coronary vessels in a heart whose walls are diseased, a fatal attack of angina with the heart full of blood may be induced. The danger increases with the extent of the structural degeneration of the heart-walls. Sudden rises of blood-pressure in the arteries will tax hearts in their textural integrity, and lead to painful distension; such sudden demands on decayed hearts lead to agonizing angina pectoris, and the sense of impending dissolution is frequently followed by sudden death."

Spasm of the arterioles and coronary vessels, rise of blood-pressure in the arteries, embarrassed action of the heart, and painful disten-

sion are just so many consecutive links in the phenomena produced by the poison of *Latrodectus mactans*, as Cases 1 and 4 amply testify.

The spider poisons are akin to the serpent poisons in their property of producing a disorganization of the blood. In Case 1, thin and florid non-coagulable blood continued to ooze from the cut surface despite the application of tannin. It may be a question whether this condition of the blood is directly toxicological, or a pathological result of stasis in the peripheral vessels. I incline to regard it as due to the latter condition, and I believe this explanation also holds good in the case of serpent poison.

The hæmorrhage recorded in Case 1 was of gastric origin ; splenic congestion existed, and the vasa brevia—branches of the splenic artery—gave way under the pressure. I once met a similar hæmorrhage in a case of intermittent fever in a child, and I record the fact as a possible hint for the applicability of *Latrodectus mactans* in a similar condition.

In all the years that the stray copy of the old magazine was in my possession I felt it a duty to write up this remedy. I have done it lamely, but as well as I was able. Reader, where my duty ends yours begins. May you discharge it more worthily than I.

CONCERNING THE USE OF COMPOUND METALLIC REMEDIES IN HOMŒOPATHY.

BY DR. A. LORBACHER.*

THE well accomplished cure of a case of cerebro-spinal meningitis in the Homœopathic Hospital at Leipzig, by the use of *Zincum cyanatum*, brings the question to our mind, if the use of such compound remedies (as is of late frequently done on the part of homœopathic physicians) is in accordance with the principles of homœopathy, which tell us that to cure diseases only such remedies should be used as had been proven on healthy persons, and if we could adopt such substances as *Arsen. jodat.*, *Stibium arsenic.*, *Ammon. brom.*, *Calc. brom.*, *Ferrum hydrobrom.*, *Natrum subsulph.*, etc., as our remedies ?

The strict followers of Hahnemann will decidedly deny this question.

They will argue that the remedies in this composition had not been tried on healthy persons, and that it had not been proven that they unite in themselves the effects of both proven substances, of which they consist, in the same manner in which the trials

* From *Allg. Hom. Zeit.*, bd. 118, No. 19.

revealed them. They will be placed in the same category with the so-called double remedies, once so severely rejected. Besides this, it will be argued, that there is no need of them, and moreover, that the proven remedies in our possession are sufficient for the cure of all curable diseases, if given in the proper doses and in accordance with the circumstances. To do this, a most thorough knowledge of remedies is necessary.

Acknowledging that adhering to the principles established by Hahnemann is a vital condition of homœopathy, it is nevertheless not necessary that we should ruthlessly reject a new idea which originated within those principles, though it might vary from the letter thereof, if it only promises to contribute toward the advancement of Hahnemann's doctrine. We have considered it our duty to examine in the most impartial manner every new idea of this kind as to its value and its claims on homœopathy.

We have acknowledged the empiricism of Rademacher, the enlargement and revision of the same from the pen of Weihe by means of his doctrine of epidemic remedies and the points of pain, the biochemistry of Schüssler, as being related to homœopathy, and well calculated for the furtherance of the same.

We have gladly welcomed and pursued with interest all works of Prof. Jäger, our indefatigable, brave co-worker, as far as they contribute to a better foundation and understanding of Hahnemann's doctrine. We have as far as possible brought to the knowledge of our readers all publications of the entire medical literature, which confirmed the truth of *similia similibus*. In short, we have made an effort to keep aloft from that orthodoxy which hinders all progress, and which ultimately leads to a standstill and to annihilation.

This standpoint we shall also take towards the use of compound metallic remedies of a more recent day. Hahnemann himself has sanctioned them by taking Hepar s. c., the different preparations of Mercury, Ammon. mur. and others, among his homœopathic medicines, even if he demanded a previous proving on healthy persons. The fulfilment of this condition was in those days not very difficult by reason of their limited number. But since the progressing chemistry of later days is capable of producing such medical substances in larger numbers it is almost impossible to keep pace with it, and we would consider it an unjust adherence to principles for principle's sake, if we should deprive us of the advantages which are connected with the use of the same.

We admit that we, by doing this, do not conform to Hahnemann's positive demand of experiment; but we dispute the violation of homœopathic principles thereby.

The question at issue is only a different use of the material gained by experiments on healthy persons, not the recommendation of

remedies which have been invented by this one or that one at the sick-bed as therapeutic. We should decidedly protest against the adoption of such into homœopathy, since by doing so we would leave the firm ground already gained, and the doctrine of Hahnemann would soon entirely disappear.

Those who consider mechanically looking for symptoms the only true and all-sufficient way will not agree with us.

But we dare to assert openly that this would not answer in all cases; each of us who considers this question seriously will have to confess that he has experienced this. Hahnemann admitted this in his treatise of chronic diseases. Medical science cannot be based simply upon arithmetic. We cannot dispense with mental activity as to combination and speculation, if it shall not be lowered to a common trade, as particularly v. Grauvogl has laid it down with energy in his work. But it must under all circumstances be maintained that this speculative mental activity can only be based upon facts, which have been gained by experiment. In connection with our argument, therefore, the use of compound metallic remedies is only justified if done on the principle of *similia similibus* and the existing medical proving. The use of Merc. cyanatus against diphtheria by Drs. Beck and v. Villers, Sen., in Petersburg, has broken the road in this respect. An examination of Merc. cyanatus as a single medical body did not exist, but one of Merc. and of Acid hydrocyanic. These two provings offered almost the complete picture of severe diphtheria, so that the thought suggested itself to unite them in one medicinal body and to try their curative power against said disease.

The experiment was rewarded with a splendid result, which since has repeated itself in thousands of cases, and has forced our opponents—though against their will—to recognize it. That this process is homœopathic has, as far as we know, never been contradicted. Why should not two medicinal bodies, united in one, do in other cases what the union of these two remedies in one body has accomplished? There is no reasonable cause against it, and the experience at the sick-bed has given numerous proofs of the correctness of this treatment. We do not hesitate, therefore, to recognize an addition to our medicines in these compound metallic remedies.

But we would like to guard against the dangerous error, that by the use of these, our old well-tried remedies would gradually become superfluous, and that the tiresome study of the same be unnecessary. One would thereby commit the folly to neglect an old valuable acquisition for a new one, however much the latter might promise. My *cacterum censeo* therefore stands good.

TREATMENT OF SIMPLE ULCER OF THE STOMACH.*

BY DR. P. JOUSSET.

ULCER of the stomach is a disease characterized anatomically by a round and perforating ulcer of the stomachic walls. This disease progresses in paroxysms; it is marked by dyspepsia accompanied by a peculiar pain seated in the xyphoid region, beginning immediately after eating by vomiting and hæmatemesis; it may end in perforation of the stomach or death from hæmorrhage. It is essentially curable. The modern works connect this disease with arterio-sclerosis.

The principle remedies against this disease are: Argent. nitr., Kreosot., Kali bichr., Arsen. Phosphor., Plumb., and Nitrate of Uranium; Hamamelis and Ipecacuanha are indicated during the great hæmorrhages.

1. *Argent. nitricum*.—This remedy corresponds to the lesion and ulceration of the stomach; it is indicated by the excessive pain, especially prominent at night. This pain is followed by vomiting and hæmatemesis. Dose, 3x — 6x.

2. *Kreosotum*.—Kreosotum is a remedy commonly used in cancer of the stomach, it is indicated always by the symptom, vomiting. It is very useful for the cure of this symptom whether there be vomiting (simple) or profuse vomiting of alimentary substances. Dose, 6x is the dilution most often employed. Richard Hughes prefers the 2x.

3. *Kali bichromicum*.—This is a most homœopathic remedy. It is indicated by excessive pain in the stomach, at night, and also after the slightest eating, as happens in the simple ulcer of the stomach; it has the vomiting of alimentary substances and hæmatemesis. This is a remedy which produces ulcerations. Its clinical application has justified its indication. Dose, 3x — 6x.

4. *Arsenicum*.—This remedy is also very homœopathic to simple ulcer of the stomach; pain excessive, pressive, burning in the cavity of the stomach, vomiting of everything taken; vomit is mixed with blood; hæmatemesis. Its great efficacy has been demonstrated in the clinic. Dose, 3x — 6x.

5. *Phosphorus*.—Phosphorus produces ulceration of the stomach and hæmorrhage; it is indicated by a gnawing and cramp-like pain in the hollow of the stomach, vomiting of food and hæmatemesis. *Hiccough* especially indicates phosphorus, but clinical experience

* Translated from *L'Art Medicale* by A. Pick and F. Pritchard.

has less established the place of this remedy than arsenic and Kali bichr. Dose, 3x — 6x and 12x.

6. *Plumbum* is indicated (according to some authors), but its pathogenesis no more justifies its use than its clinical application. Great constipation, glairy substances vomited, with hiccup, might lead one to think of the remedy. Dose, 6x — 30x.

7. *Nitrate of Uranium*.—This remedy is indicated, according to Richard Hughes, who regards it a very important remedy. Dr. Drysdale has published a case of ulcer of the stomach cured by this remedy. The experimenters have noticed ulceration of the stomach in rabbits experimented upon. It produces vomiting and hæmatemesis. Dose, 3x — 6x.

Hamamelis and Ipecacuanha may be alternated in the 1x (trit.). A dose every twenty minutes.

Diet should be exclusively milk during the sickness, and the diet for a dyspeptic during the process of cure.

In résumé treatment may be commenced by Kali bichr. if it be a typical case; arsenic may follow immediately after; it has as special indications, burning pains, and the symptoms, anxiety and thirst. Kali bichr. corresponds more to the acute, and arsenic to the chronic forms. Kreosotum is indicated by the predominance of vomiting. As for Uranium nitrate it is a remedy yet to be studied.

HOMŒOPATHIC THERAPEUTICS.

Pulsatilla in Labor.—M. L., married woman, aged 32, in labor with third child. Previous pregnancies normal. Seen at 6 P.M., os just commencing to dilate, pains every 10 minutes. Fœtal head felt high above the pelvic brim and freely movable.

At 10 P.M. labor had made no progress, and pain had almost entirely ceased. Os no more dilated, but membranes hanging through a short distance, containing a loop of funis. Breach felt high up. Given *Puls.* 1 every 20 minutes.

11 P.M.—No change. Continue *Puls.*

12 P.M.—Five minutes ago had a great desire to pass water, and at the same time a great commotion as of the child moving, felt in the abdomen.

Examination showed head again in the normal position.

From this time the labor rapidly proceeded to a perfectly normal delivery and good recovery.—T. G. Stonham, M.D., *London Review*.

Contra-Indication for Antipyrin During Menstruation.—Huchard says that in many cases in which he has given *Antipyrin* (1 grm.) he observed stoppage of menstruation and the appearance

of toxic phenomena (violent chill, cyanosis of the countenance and extremities, and swooning). These symptoms being in one case very threatening, and in others present but less pronounced, convinced him that Antipyrin should not be given during the first two or three days of menstruation.—*Allg. Med. Cent. Zeit.*

Side-action of Antipyrin.—A remarkable affection of manifest nervous nature was observed in a case by Brandenburg: Five minutes after the injection of 1.0 Antipyrin the patient experienced toothache, affecting all the teeth of the lower jaw; headache, especially under the ears, and earache, but no *tinnitus aurium*; lachrymation and violent irritation of the nasal mucous membranes. The phenomena disappeared in inverse succession; the toothache continued about four hours. To convince himself that these pains were the genuine effect of Antipyrin, the patient was given 0.5 gm. more of the drug. After ten minutes the symptoms quickly came on, the toothache continuing this time twelve hours. The arthralgia from articular rheumatism on account of which the Antipyrin was given also vanished.—*Corr. Bl. f. Schweiz. Aerzte*, 1888.

Enuresis in Females; Ambra.—Little Miss G——, age eight, was unable to retain her urine whenever she paused after running or skipping rope, hurrying home from school or when at all physically excited. No other symptoms were noted, except periodical attacks of “worms,” which, however, were never noted by her mother to have any effect upon the above difficulty. The enuresis had existed for three years, in fact since the child began attending school and romping with her companions. Having seen the clinical symptom during my studies: “inability to retain the urine after physical exertion,” credited to *Ambra*, I decided to try it, and as the little one was of a highly nervous temperament, gave her mother four powders of the 30 cent. potency, with directions to give one after every “mishap.” One dose only was given, and now, a year afterward, no need has arisen for the repetition of the remedy.

CASE 2. Miss B——, aged six, suffered from frequent attacks of nocturnal enuresis since having whooping-cough at the age of three years. No indications for a choice of remedy presented in this case, except that the mother particularly remembered that the urine had a very *sour smell* during the attack of whooping cough. *Ambra* was prescribed with the same directions for its use as in the previous case. Two doses made a complete cure.

CALCAREA CARBONICA IN GALL-STONE COLIC.

A CONTRIBUTION TO ITS POSOLOGY.

THREE years ago, says Dr. Leake, I was called to Frau B., sixty-one years of age. She was of a lymphatic constitution and quite stout, weight two hundred pounds. She has suffered for twenty years from gall-stone colic, and the remedies of the old school have never given her any permanent relief. For some time she has not taken any as she only got anæsthetics, and would rather die than take any more, if there were no other help. But as she became worse, she turned to homœopathy for relief.

The attacks came on without any warning and very suddenly, as a cutting pain would set in under the right shoulder-blade, running from there to the right hypochondrium and epigastrium. Her pains were sometimes so violent and unbearable that she would throw herself upon the ground, emitting terrible cries and tearing her hair. The attacks lasted usually fifteen minutes and generally terminated by the vomiting of fluid bilious masses, containing something compact. At the end of such an attack when I was present, the patient had vomited up a mass of these small concretions, having the circumference of a pea and of very different forms.

I remembered how Prof. Allen, of New York, had recommended *Calc. carb.* in gall-stone colic, and dissolved ten grammes of the 12x in a glass of water, of which I gave a dose every five minutes. After the third dose the patient was much improved. Thinking that she had received an opiate, she said she had never taken anything which had helped her so quickly. She took the remedy three times daily, the attacks became less and less frequent and intense, finally disappearing entirely. No recurrence up to date. — *Allg. Homöop. Zeit.*, March 21, 1889.

Observation by the Abstractor. — (Dr. G.) Ten grammes of *Calc. carbonica* — are in this case worthy of remark and not less interesting than the result itself. For although the 12x was used, the quantity used so exceeds the usual amount most strikingly. Meanwhile the antagonists of such doses must first show that their two, or how many globules, or their drops would have been able to do the same under similar conditions or circumstances. — P. AND P.

ITEMS OF GENERAL INTEREST.

Eschscholtzia Californica. — Dr. Terzakeriant made a physiological and therapeutic study of this drug in the Hospital Cochin laboratory under the direction of Dujardin-Beaumetz.

Besides morphine he found a considerable quantity of a base, probably a glucoside; experiments upon animals showed it to act more powerfully than morphine. Given subcutaneously, per os and intravenously (6 g. per kilog. of animal into stomach, 2.50 g. per kilog. subcutaneously), it caused general weakness; torpor, acceleration of respiratory movements, complete paralysis of the limbs, a paralysis always preceding an anæsthesia and in all cases persisted a very long time after return of sensibility, slowing of the circulation, and temperature elevated 1.5° (in two rabbits) after introduction of remedy, then returning to the normal. This is due to different preparations, as in two other rabbits temperature fell 0.7° (and the first were experimented upon by the alcoholic extract [containing resin] and the last two the extract with no resin contained therein).

I. *Respiration*.—Some minutes after introduction of substance, respiratory movement accelerated and then became slower up to death.

II. *Temperature*.—Small dose has no appreciable action; larger doses cause the temperature to rise or fall about 1° as one uses the extract with or without the resin.

III. *Nervous System*.—Small doses only act upon central sphere itself. The animals lose their voluntary spontaneity, remain immovable and indifferent in the places where they may be, things which should arouse their attention having no action upon them. The motor nerves are first affected and the sensory only a long time after.

IV. *Therapeutic Effect*.—Used successfully in five cases of cephalalgia, the remedial effect persisting a long time after ceasing its use. A soporic remedy which is harmless and especially unoffensive, not having the inconvenience of morphine, and easy of administration.—*Bull. Génér. de Thér.*, January 15, 1889. P. AND P.

Action of Bromide of Potassium upon Nerve-Centres.—Dr. Umberti Russi gave 4 g. of Bromide of Potassium daily, for 14 days, to a dog per os. After this the animal died with symptoms of paralysis of the extremities, sensibility greatly reduced and decreased appetite. Brain and spinal cord examined microscopically. Microscopically the brain and spinal cord showed quite an injection of the vessels. Microscopic sections of the brain showed the vessels of the white and gray substance, especially upon the borders of both, to be dilated and filled with blood; the vessels of the pia mater the same; ecchymoses into nerve-tissues, indistinctness and almost complete disappearance of the axis-cylinder, especially at the transition from the white into the gray substance. In one place the wall of a vessel was torn. Anterior and posterior coruna of spinal cord much injected as well as its processes and as if in the brain there were here and there hæmorrhages. The central canal was full of a fine granular mass, not colorable. In

the white substance here and there, fibres which (axis-cylinders) had changed into granular masses, easily friable, other axis-cylinders had changed in form as if pressed together; again, others were much distended.—*So Sperimentale Tasc.*, 7 July, 1888. P. AND P.

Arrow Poison.—In his very interesting communication to the Royal Geographical Society, Mr. Stanley described the terrible effects of wounds from the poisoned arrows used by the natives of the centre of Africa, and also the mode of preparing it from the ants and spiders which abound in that region. He says that, “when fresh, the poison is most deadly. Lieutenant Stairs and five men were wounded. Lieutenant Stairs’s wound was from an arrow, the poison of which was dry; it must have been put on some days before. After three weeks or so he recovered strength, though the wound was not closed for months. One man received a slight puncture near the wrist; he died from tetanus five days after. Another received a puncture near the shoulder in the muscles of the arm; he died six hours later than the first case—of tetanus also. One was wounded in the gullet—a slight puncture; he died on the seventh day. I believe one wounded in the side died at night the same day. Tetanus ended the sufferings of all. We were much exercised as to what this poison might be that was so deadly. On returning from the Nyanza to relieve the rear column, under Major Barttelot, we halted at Avisibba, and, rummaging among the huts, found several packets of dried red ants, or pismires. It was then we knew that the dried bodies of these, ground into powder, cooked in palm oil, and smeared over the wooden points of the arrows was the deadly irritant by which we lost so many fine men with such terrible suffering. Now we wonder that we have been so long in the dark, for we could create any number of poisons from such insects as we have seen. The large black ant, for instance, whose bite causes a great blister, would be still more venomous prepared in the same way. The small gray caterpillars would make another irritant which, mixed with the blood, would torture a man to death. The bloated spiders, an inch in length, which are covered with prickles most painful to the touch, would form another terrible compound, the effects of which makes one shudder to think on. These poisons are prepared in the woods. In the depths of the forest the savage makes his fire and prepares the fatal venom which lays low even the huge elephant. It is forbidden to cook it near a village. In the forest he smears his arrows, and having covered the points with fresh leaves lest he himself might be a victim, he is ready for war.”

There is good material for useful provings here. We have already provings of the *Mygale lasiodora*, or large black spider of Cuba, useful in some cases of chorea; the *Lycosa tarentula*, indicated in case of

spinal irritation; the *Tarentula cubensis*, or hairy spider, which causes "a perfect picture of carbuncle, even to sloughing;" the *Aranca diadema*; and the *Theridion curassavicum*, which is also indicated in some cases of intense spinal irritation.—*Monthly Homœopathic Review*, May 1, 1889.

Arsenic.—This homely truth, by the way, is illustrated by a singular case vouched for by the Chief Constable of Denbighshire in a letter to the *Times*. A children's party, with a Christmas-tree, says this gentleman, resulted in most of the little ones, and many of the older ones, being seized with symptoms of mineral poisoning. Some of these had taken nothing to eat or drink, and attention was directed to the green and red candles of the Christmas-tree. These, upon being analyzed, were found to be colored with arsenic and vermilion respectively, and the heated atmosphere thus charged with arsenical and mercurial fumes had clearly produced the unpleasant symptoms. When, we may well ask, shall we know the worst in respect of the baneful effects of things around us? We have long been warned against green wall-papers, red stockings, tinned meats, and a host of other things in common use. Even the cat is no longer "harmless," even if "necessary," for it is accused of propagating diseases. And now we have to be on our guard against the colored candles of our Christmas-trees.—*Christian World*.

The Nettle as an Epispassic.—In the *Meditzinskoïe Obozrenië*, No. 16, 1888. p. 330, Dr. Vladislav A. Frankowski, of Kharkov, whose medical experience embraces about one hundred thousand cases, speaks enthusiastically of "urtication," that is to say, slapping or pricking with a bundle of fresh nettle-twigs, for one or several minutes, once or several times a day, as an excellent epispassic application. It has considerable advantages over ordinary derivative remedies, inasmuch as it is quite innocuous (not irritating the kidney, and leaving no permanent marks on the skin, etc.), cleanly, simple in application, rapid in its effect, and cheap. Dr. Frankowski recommends it especially in (a) anæsthesia, paralysis, and neuralgia, especially sciatica of peripheral origin, as well as in incipient tabes, where he applies the nettles directly to the parts affected; (b) in dyspnœa depending upon cardiac or vascular disease, where "general urtication" (that is, pricking along the vertebral column and over the whole abdomen and chest) is said to "relieve the agonizing symptoms far more rapidly and more completely than any other epispassic does;" (c) in respiratory diseases, spinal and thoracic urtication soon allays cough, promotes expectoration, relieves oppression, and produces a striking, though only temporary, improvement in the subjective condition; (d) in amenorrhœa, urtication of the

lumbar, sacral, and internal femoral regions excites the menstrual flow, even when employed alone, without any adjuvant; (*e*) in impotence, pricking the loins, sacral region, and genital parts is also of great service; (*f*) in rheumatic, muscular, and articular pains, urtication, combined with cold bathing, is often far more useful than anything else; (*g*) in syncope, asphyxia, concussion of the brain, coma, etc., energetic general urtication is an invaluable resuscitating measure, which has been successfully resorted to by the peasantry all over Russia from time immemorial.—*British Medical Journal*, April 6th.

A Simple Test for Blood.—This is made by the addition of tincture of guaiac and ozonized ether to a weak solution of blood, when a bright blue color is produced. If a drop of blood be mixed with one-half ounce of distilled water, upon the addition of one or two drops of tincture of guaiac a cloudy precipitate of the resin appears, and the solution has a faint tint. If to this solution one drop of an ethereal solution of hydrogen peroxide is added, a blue tint appears, which, upon a few minutes' exposure, gradually deepens. This test is very valuable for minute quantities of blood, and Dr. Day, of Geelong, succeeded in obtaining sixty impressions from a stain upon cloth where the microscope failed to show any blood.

The Physiological Effects of Injections of Solutions of Salt.—MM. Dastre and Loye, in a note in the *Archives de Physiologie*, state that a considerable quantity of a physiological solution of salt may be injected successively into the veins of an animal without causing any apparent trouble, immediate or consecutive. This quantity has been raised by the experimenters beyond two-thirds of the weight of the animal. The expression "toxic dose," the authors remark, has no meaning so far as the salt solution is concerned. There is no such thing as a toxic dose, but there is a toxic rapidity. This rapidity is superior to 3°; that is to say, the quantity of the solution introduced does not exceed three cubic centimetres per minute and per kilogramme of the animal. In order for the injection to be innocuous, certain conditions are necessary—as moderate rapidity of the injection and the amount introduced, and a healthy state of the organs, especially of the kidney. When these conditions are not fulfilled, the animal succumbs sooner or later. There is then observed a constant exudation which is produced in the serous cavities; also sanguineous suffusions and exudations by the mucous membranes.

When the course of the urinary elimination is observed, one notices, as a general rule, a perfect parallelism between this excretion on the one hand, and the injection on the other. After a cer-

tain time the quantity injected is balanced by the quantity which is eliminated. This normal regimen reveals the existence of a mechanism which regulates the quantity of water of the organism. This mechanism begins to act when the quantity of salt water injected is equal to the quantity of the blood of the animal before the experiment. The surplus is immediately rejected. This quantity, equal to the weight of the blood of the animal, seems to separate in two portions; one portion (about 25 per cent. of the weight of the blood) remains in the circulatory apparatus during the whole time of the experiment, and is only eliminated definitely later on; a second portion (about 75 per cent.) is retained momentarily in the serous membranes and the tissues, to escape equally later on.

These facts show a physiological connection between the circulatory and serous systems connected with the preservation of the balance of the watery portion of the blood and of the tissues. Analyses have shown that, when the animal returns to the normal condition, the injection of physiological salt water produced nothing but a "lavage," properly speaking, or a washing of the blood and of the tissues.—*Lancet*.

The Anatomical Elements of Milk, and the Organization of the Globules.—Dr. Béchamp states that, contrary to former opinion, which he holds to be erroneous, it may be shown that milk is not an emulsion, that its globules are not simply fatty matter, but anatomical elements formed in the gland at the same time as the complex fluid in which they float, like the blood globules and leucocytes in liquor sanguinis; that, in short, as stated by Dumas, they are vesicles or cells, furnished with envelopes. Béchamp further shows that milk contains, besides caseine, other coagulable substances, and that it curdles and ferments spontaneously without the aid of extraneous organic ferments. These globules may be isolated from cream or curds by mixture with diluted alcohol, and subsequent washing in a dilute alcoholic solution of sesquicarbonate of ammonia. The globules may be found intact in the field of a microscope.—*L'Union Médicale*.

The Diet of the Japanese.—Some interest attaches to the investigations of Dr. O. Kellner and Y. Mori on the diet of the Japanese. It is often stated that the Japanese are exclusively vegetarian in their diet, and that they consume nothing but rice. This is apparently supported by the fact that in 1882 only 36,288 oxen and but few other animals were slaughtered in the whole kingdom. But closer inquiry has shown that, if little meat is eaten, the consumption of fresh and salt water fish is very large, and that, besides rice, various kinds of grain and other articles always form a part of

the daily dietary, so that the proportions of proteids, fats, and carbohydrates differ from that of Europeans only in so far that the diet is relatively richer in carbohydrates; the balance of the economy is, as might have been anticipated, well preserved.—*The British Medical Journal*.

Nitro-glycerine in Bright's Disease.—Professor Munasseine has been trying the effects of nitro-glycerine in nephritic cases, and, from a number of observations, concludes that nitro-glycerine diminishes the amount of albumen passed in the twenty-four hours; the amount of urine passed is increased in the twenty-four hours, and this increase is maintained for some time after the cessation of the drug.—*L'Union Médicale*.

The Physiological Action of Iron.—Dr. Skvortzoff has published the results of experiments on dogs, carried out by him in Professor Tümas's Pharmacological Laboratory in Warsaw, with the view of determining the action of iron on nitrogenous metabolism in a healthy organism. The following are his conclusions: 1. Iron has no marked influence on the nitrogenous metamorphosis in a healthy system. 2. On the internal administration of iron in daily doses over 0.02 or 0.03 gramme, the assimilation of the nitrogenous ingredients of food decreases, though but slightly (from 98.4 per cent. before the experiment to 97.0 per cent. during it). 3. After venesection the assimilation somewhat increases, both on the administration of iron and without it. 4. On the administration of iron with food after venesection, the restoration of hæmoglobin proceeds more rapidly than without iron. 5. The same holds true in regard to the body's weight.—*The British Medical Journal*.

Antifebrin Poisoning.—With a 38-year-old bookbinder occurred after twice taking 2.0 (at a time) in the space of one day—cool sweats (after the second dose), fatigue, dizziness, stupor, sense of fear, palpitation of the heart, light pulse, intense cyanosis; the symptoms gradually passed off (weak for several days).—*Allg. Hom. Zeit.*, 1889, 157.

A Case of Conein Poisoning.—During a pharmacological lecture Schulz had passed around a preparation-vial, containing Conein, closed with a cork, which was placed in a larger glass. In spite of precaution in smelling of it, one of the hearers, inhaling the vapor of Conein, symptoms set in which characterized themselves by great weakness, feeling of lassitude, severe headache, flightiness, incapability to fix an idea, heavy general sweat.—*Allg. Hom. Zeit.*, 1889, 157.

Sulfonal Exanthem.—A 40-year-old patient, with chronic metritis, was given, on account of nervous sleeplessness, 2 grammes of Sulfonal as an experiment, but no sleep resulted; instead of this the next morning appeared a copious scarlet exanthem on the outside of both mammæ, with moderate itching. The red color of the skin was distinctly and sharply separated from the normal cutis. In course of the day the exanthema progressed, and in the evening the inner side of both upper arms was attacked by it symmetrically; also towards the centre the process had extended; a month afterward the whole inner part of the mammæ down to the upper part of the stomach was affected, where the exanthema of one side united with that of the other. On the third day the rash, which now caused intense itching, receded slowly under discoloring, mildly resembling lividity.

The unanimous praise of Sulfonal is now followed by many disagreeable side-symptoms. Up to this time there was not a case of exanthema known after giving Sulfonal. This is therefore the first case of Sulfonal exanthema, which Dr. M. Englemann publishes in No. 42 of the *Medical Weekly* of Munich.

NOTE.—Remark of Dr. Pröll. With a patient who suffered from intermittent Hæmoptysis of uric acid dyscrasia, Sulfonal (1 gramme), used against chronic sleeplessness, produced sleep, but diminished on the following days the appetite and the strength so that the patient preferred not to have sleep.—*Allg. Hom. Zeit.*, 1889, 157.

A Special Case of Acute Morphium Poisoning.—With a lady, 54 years old, who nine years ago had suffered during several weeks from frequent hysterio-epileptic attacks, appeared after acute meningitis-psychose, lasting six weeks, which resembled *paranoia hallucinatoria acuta*. She had received on account of neuralgia in fifteen minutes, 0.05 Morphium in the right *nervus cruralis*, after which she remained unconscious for forty-eight hours. When on the third day she became conscious, she was not able to speak; later alexia and agraphia appeared. On the sixth day a decubitus showed itself, commencing on the coccyx, which required for its final healing four months. During the hallucinations and visions her memory was confused and she was not able to recognize the family. After six weeks (without special therapy) her mind was restored. The neuralgic pains gave way to treatment with the galvanic battery.—*Allg. Hom. Zeit.*, 1889, 156.

Cancer and Arsenicum Album.—The English physician, Dr. Hutchinson, communicated a number of cases to the Pathological Society in London, which indicate that *carcinoma cutis* will be produced by long-continued use of arsenic. According to this the skin first becomes scurfy; afterwards numerous little pimples develop

themselves, especially on the palms of the hands and the soles of the feet, which grow into ulcers of a cancerous character. In this way the curative power of Arsenicum album against certain forms of cancer; which has for a long time been advocated in homœopathy, would find new support; by the same means would also be contradicted the frequent assertion from our opponents that by giving medicine to healthy people a specific disease could not be produced.—*Pop. Zeit für Hom.*, 1889, 87.

Phosphorus Poisoning.—Lauschmann reports four cases where icterus was; in one case, where there was no icterus, the poison had soon been removed by vomiting and cleansing of the stomach with the stomach-probe. Icterus did not appear before the third day; in general not until toward the end of the first week. Of the five cases, three prove fatal; two recovered. In cases which came to dissection there was found adipose degeneration of the liver, of the kidneys, of the heart and of the membrane of the stomach.

In one case there were also hæmorrhages in the tissue of the hypoderma and in the serous membrane and the lung (peribronchial infarction).—*Allg. Hom. Zeit.*, 1889, 156.

Color Blindness, *i.e.*, incapability to distinguish certain colors, can be remedied, according to the proposition of the oculist, Dr. Fränkel, by the use of certain spectacles.

Dr. F. had for this purpose eye-glasses made for color-blind men which consist of two plain glasses, between which he placed glycerin-jelly, colored with anilin purple. One of the patients has used his glasses for 2½ years with the best success in his business, which latter demands the ability of safely distinguishing colors.—*Pop. Zeit. für. Hom.*, 1889, 88.

Significance of Perspiration in Acute Infectious Diseases.—Taking the view of the old school, which attributed great importance to perspiration and also to diaphoretics in curing infectious diseases, and supported by experiments which have been made at the medical Clinic at Genoa and have shown the existence of toxic substances in the blood of pneumonics, the author concluded that such poisonous substance must also exist in the secretions of the feverish organism. According to this conclusion he made experiments to ascertain if the sweat of sick persons would have toxic qualities after establishing the fact that the sweat of healthy persons did not have such properties. The results published in the *German Medical Weekly* seem to confirm the theory. The author used for these experiments the sweat of persons sick with smallpox, malaria, typhus and rheumatism in the joints, and at the same time he experi-

mented with the sweat of persons without fever. All rabbits which had been inoculated with a sufficient quantity of the sweat of the above-named patients died after twelve, twenty-four and forty-eight hours; the animals inoculated with the sweat of healthy persons, remained healthy. All the animals which had been inoculated with diseased sweat died without rise in their temperature, and in dissecting them there were no signs found of infectious disease.

The above communication is a new proof that our ancestors were careful observers, and that the medical science of to-day, which is so proud of its discoveries, has no cause to look down upon them, as it is in fashion now-a-day, with a certain degree of contempt. Prof. Fäger will also welcome this as a proof for his views.—*Allg. Hom. Zeit.*, 1889, 87.

An Involuntary Proving of Semen Tiglii.—Prof. Hugo Schulz tells us in the *Therapeutic Monthly* (February, 1889), that one of his hearers while passing Croton seed around, swallowed a very small piece of it (about 0.06 gramme of seed, of which—since it contains 50 per cent. fat oil—only a minimal fraction could have been absorbed). The gentleman in question, well and strongly built, describes himself the serious effects of this minimum dose as follows: “At 8.15 o'clock in the forenoon I took one of the Croton seeds, which were passed around, bit off about one-fourth of it and chewed it. The taste at first was not disagreeable, but after a few seconds it was like that of a rancid walnut, whereupon I spit the masticated mass out. After about five or ten minutes, in which time I had made frequent efforts to swallow, in order to get rid of the taste, I perceived a strong burning, scratching sensation on the back part of the tongue and in the whole pharynx, together with a feeling of heat.

In the following fifteen or twenty minutes I noticed these symptoms going uniformly, progressing down the œsophagus in the stomach. On entering the latter, vehement, pulling pains of the stomach appeared, which increased almost to intolerance. I must remark, that on the morning in question I had not eaten anything. In the same time I noticed a feeling of nausea; cold sweat came upon my forehead, but I did not vomit. In connection with the pain in my stomach there came increased intestinal peristaltis. I could feel and hear distinct colic symptoms in the abdomen. Soon came—toward 9 o'clock—vehement colic and strong tenesmus.

From the lecture I hastened directly home, but I was obliged to stop at a hotel near by, since I could not resist the tenesmus any longer. Defecation followed very rapidly; it was entirely watery. In order to alleviate the burning feeling in my throat, I took a glass of beer and a piece of bread and butter, but I could not

consume this, since violent tenesmus came on again. On my further way home, I had to stop again. On the whole, the effect lasted until noon, so that I had up to that time nine or ten evacuations. Further trouble I did not experience."—*Allg. Hom. Zeit.*, 1889, 151.

Morphium as the Cause of Acne Rosacea.—That the morphia habit can become an ætiological momentum for acne rosacea, is illustrated in three cases which Dr. Chevalier Q. Jackson takes from a number of observations.

In the first case the symptoms of existing acne rosacea were milder by gradually diminishing the dose of morphium, and they disappeared wholly four months after totally abstaining from it. The second case was a milder one. The patient took morphium in small doses from two to three times daily. In a very short time, after the morphium doses had been diminished, acne rosacea grew less, and in three months had nearly disappeared. The subject of the third case is an actress, who had taken morphium for a number of years, but who had frequently stopped it. Lately she had used the remedy more frequently at the approach of dysmenorrhœic difficulties. This brought on acne rosacea, which perceptibly grew worse, especially when morphium was taken in larger quantities. Chloral, which had been substituted once, was not followed by exacerbation of acne rosacea. Treated in a private hospital for opium victims, the lady returned after three months, having only slight traces of acne rosacea left. It is worth mentioning, that in all cases severe itching was perceptible. In conclusion it will be observed, that by reversing the conclusion, one can in certain cases suspect the morphia habit in case of acne rosacea associated with itching, which often may lead to the discovery of the secret vice and the curing of the patient.—Monthly for *Prath. Dermatol.*, No. 23, 1888.

A New Method of Quantitative Estimation of Albumen in the Urine.—The possibility of estimating the amount of albumen in fluid by the difference in specific gravity before and after the coagulation of the albumen has been experimentally investigated by Huppert and Zahor, and the last-named has attempted to apply the method to the urine. He recommends that the proportion of acetic acid required to coagulate the whole of the albumen on boiling should be ascertained by a preliminary experiment. A specimen of the urine after filtration is then treated with the necessary amount of acetic acid and divided into two parts; one part is put into a bottle which must be stoppered with an india-rubber cork, and kept in a water bath at a temperature of 100° C. for ten minutes

or a quarter of an hour. The urine is then cooled and filtered, care being taken to prevent loss by evaporation during this process. The filtrate and the portion of acidified urine originally reserved are then brought to the same temperature in a water bath, and the specific gravity of both very carefully taken. The difference between the two figures thus obtained multiplied by 400, the average coefficient ascertained by experiment, gives the amount of albumen in grammes, in 100 cubic centimeters. The average error is stated to be + or - 0.0175 gramme, but may amount to 0.05.—*The British Medical Journal*.

A New Remedy in Glycosuria.—Dr. J. Quanjer reports briefly upon the action of *Syzygium jambolana*, a remedy that diminishes the quantity of sugar in the urine. In East India the plant is called Djuat or Duét. A short article has also appeared in a book in the German language; the Netherland state physician at Batavia, Dr. van de Burg, mentions the plant in the following manner: The bark possesses astringent properties; its decoction has the best action in diarrhoea. In British India, Dr. Banatvala first used the rind of the fruit against diabetes. He asserts that after 48 hours' use it decreased the quantity of urine as well as of sugar, and after longer use the sugar wholly disappears, even when starch is associated with it. Dr. Quanjer made analogous favorable observations in a patient of his. It is hoped that we will soon have knowledge of the plant through provings.—*Allg. Med. Cent. Zeit.*

Southerlandia Frutescens.—The account of this plant by Prof. McOwen in the *Cape Times* claims it to be inefficient in cancer, a use to which it has been put for a month in England. The plant that has been held in high repute as a cancer remedy by the natives and old colonists of the Cape of Good Hope is *Melianthus major*, called on account of its extremely unpleasant odor *Kruidje-voermijniet*. It belongs to the family *Sapindaceæ* and probably owes its efficacy to the antiseptic properties residing in its ethereal oil. This species deserves notice on account of its efficacy in parasitic skin diseases, especially *eczema capitis*, purulent sores, osseous necroses; also in cynanches and abscess of the larynx. The remedy is useful in a decoction of the leaves used as a gargle, colutorium, or fomentation; or the bruised leaves placed direct upon the afflicted part. Another species, *Melianthus comosa*, is likewise similarly employed.—*Archiv. d. Pharm.*

Diabetes—Creasote.—Valentine's cases of diabetes took in the beginning four drops of Creasote daily, and gradually increased the dose until ten drops were taken. Under the influence of this treat-

ment the sugar disappeared quickly from the urine, and did not return. Creasote worked in like beneficent manner in two other cases in doses of six drops.—*Gaz. Med. Torino.*

Death from Rabies.—At the last meeting of the Société Médicale des Hôpitaux, Dr. Gérin Roze reported a case of death from rabies in a young girl who was subjected to the Pasteurian treatment eighteen hours after the bite. The treatment was regularly followed, but did not prevent the patient from succumbing to an attack of most characteristic rabies, as described in detail in the report in question. The author of the note asks to what may be attributed this failure of the Pasteurian treatment, which was gone through in a case apparently highly favorable for such treatment.—Two more deaths are registered by the Semaine Médicale of persons from rabies, who had undergone the anti-rabic inoculations: 1. B. Druaux, of Aubervilliers, aged fifteen years, bitten Jan. 7th, 1889, by a rabid dog, and treated at the Pasteur Institute from Jan. 9th to 28th; died from rabies on Feb. 11th. 2. J. L. Dufur, of Veyras, aged seventy-two years, bitten on Dec. 23d, 1888, and treated at the Pasteur Institute from Dec. 25th, 1888, to Jan. 12th, 1889; died from rabies on Feb. 13th.—*Lancet*, March 16th, Paris Letter.

Nosebleed.—Dr. Geneuil has found that injection of fresh expressed lemon juice proves very efficacious in checking severe nasal hæmorrhages.—*Pop. Zeit. für Hom.*

Arnica Oil in Erysipelas.—Dr. Morrison draws attention to the external use of this remedy in such cases, where *E. bullosum* is present. He relates a case where the erysipelas showed itself upon the face, scalp, arms, hands, and face, and was healed in a comparatively short space of time by this remedy.—*Pop. Zeit. für Hom.*

Oxyuris vermicularis.—Recently injections of pure liver-oil, or of an emulsion of the same with eggs, into the rectum is advocated in cases where these worms are present. Dr. Gubb asserts that this remedy never leaves in the sting.

VETERINARY DEPARTMENT.

Rheumatic-Evil.—*Equine.*—This disorder is a feverish one, rapid in its course, and quite similar to cold-evil or black strangury. It is a disease greatly feared by all owners of horses, on account of

its violent onset and the rapidity of its course. The disease is characterized by a sudden paralysis of the loins and posterior extremities. Its appearance is periodical, and only noted, as a rule, under certain states of the weather, when roots are given as a main article of food, when dry, cutting, east or cold west winds prevail, and from great changes of temperature, when the horse has been some few days in the stable. Young horses and those of middle age are most frequently attacked by the disease. Horses well kept upon unspoiled grains are not affected by this disease, while the cold-evil will appear even in animals so fed. It most frequently comes on during work in the field or upon the road, and the symptoms most frequently perceived are sweat even to foam on the flanks, especially behind the ears and between the hinder extremities, which suddenly appears; the hinder extremities become stiff and immovable, so that they cannot carry the posterior part of the body further, and the animal falls upon its knees; the respiration, accompanied by stiffness, is increased. After the animal has been led into the stable it generally collapses, and it is impossible to make it arise. Sweat covers the whole body and the animal becomes very anxious and expresses pain in every movement. The pulse increases in volume and frequency, the action of the heart is perceptible, the mucous membranes are slightly reddened, but upon the whole appear pale, and the secretions are more increased than diminished. The urinary secretion appears increased, and either dark red or black, as in cold-evil, and mixed with blood. It is passed, however, without strangury, even while lying.

If proper treatment be commenced and the condition improve, then the sweat decreases, the anxiety disappears, the increased respiration decreases, the vascular system becomes quieter, the urine lighter in color and thinner, the horse gets upon its feet, though sometimes with difficulty, and can stand a short time.

The cause of the disease lies in the food; and foals, which, after leaving off sucking, instead of obtaining healthy food, get these roots, have a disposition to this disease, although they may have a plump appearance and sleek hair.

As regards the treatment of this difficult disease, any disposition must be corrected by good air in the stable, good clean bedding, nutritious food and wholesome drink. Fresh air and good food are the best prophylactics against the disease.

In regard to the essential part of the disease, the condition of wind and weather point to its rheumatic character, and from a scientific standpoint it may be designated as a *rheumatico-inflammatory affection of the lumbar and sacral portions of the spinal cord.*

Hence the treatment must be directed accordingly. Let warm compresses of hay seed be made, place them uninterruptedly upon

the lumbo sacral region, as well as upon the flanks, cover these with warm coverings and give internally Acon. 1x., alternating it with Nux vom. 3x., 10 gtts. of each every half hour. If there be a highly irritated condition give Bell. instead of Nux. This treatment is generally sufficient and only in exceptional cases is Rhus. indicated.—*Zeitschr. für Hom. Thierh.*, 1888.

Constipation.—*Galline.*—Last month a gentleman living in the vicinity of Berlin told me that some of his chickens in the coop appeared sick; he had also lost several of them. One day, happening to be there, I had him show me the chickens, and found that they were sad looking, sitting in one place and trying to bite themselves with their beaks in their hinder and upper parts. I learned that the passages were not normal, but there was a kind of constipation.

I diagnosed constipation at once, and confirmed it by the examination. I had the rump glands rubbed with oil and advised that they should be pressed out when they had softened somewhat, and washed with Arnica water. Internally I gave Merc. sol. 6, four to five globules four times a day. Later Hepar sulph. opened the glands in about eight days, and the chickens were all well again. P. AND P.

Crown Joint Lameness.—*Equine.*—The following case shows how rapidly our homœopathic remedies act when rightly applied at the proper time. Herr D. C., asked me some time ago to examine and treat one of his horses which was lame. I immediately went to the stable, examined and diagnosed a strain of the crown joint, which had probably originated from a misstep. (In any disease which one intends to cure by homœopathic remedies, an important principle is to choose a remedy that acts specifically upon the portion of the body affected. In this case the inferior joint of the foot being affected, Ruta was the remedy, as it has an action specially upon this portion of the body.)

A circular linen bandage was moistened with a solution of one teaspoonful of the tincture of Ruta to one litre of water and wrapped about the affected foot, and over that a woollen bandage was well drawn, and orders were given to change the compress every two hours. Ruta 1x was also ordered internally, ten drops every two hours.

The next day there was nothing to be seen of the trouble, and two days thereafter the animal was put to its usual work.—*Zeit. für Hom. Thierh.*

Tumor—*Equine.*—Herr B——, in C——, near Berlin, called me to examine and take under treatment a horse suffering from a quite large fungous growth. I found on the tuberosity of the elbow a

tumor the size of two fists, having a hard feel and hanging there like a purse. As the swelling seemed intense, I prescribed Merc. sol. and later administered Conium 4x, ten drops daily. The tumor disappeared in the course of a few weeks, and this from the internal use of these remedies only.—H. Fischer, *Zeitschr. für Hom. Thierh.*, 1888.

Colic—Equine.—Herr P—— came about a half year ago for my assistance. He has a large number of animals always on hand, especially horses. He told me that for the last twenty-five to thirty years he had lost 10 per cent. of his horses from colic, and when the disease appeared it was invariably fatal. He had tried everything, had had veterinary surgeons of every kind to try and remove the disease, but no one could give any help, no one could determine the cause. No remedy had any effect, and all the animals attacked would perish. An acquaintance of his advised him to try homœopathy and gave him my address. He asked for remedies and the directions for their use.

It is a difficult thing to convince any one who is accustomed to operate right and left that the small doses of homœopathy have a better action than the drugging of other practices. I here regarded it as a duty to homœopathy to teach and convince, and hence sent him the necessary remedies, recommending him to carefully follow my directions. After about six weeks I received the news that, in general, the attacks had passed over without any difficulty upon applying the remedies. One day, shortly after this, I received a dispatch: "Come immediately yourself, have colic." I left at once and found an animal gravely and hopelessly sick upon a litter. High fever, cessation of the peristaltic sound, in place of which the metallic sound, already described by me, was present, mucous membranes deeply reddened, much clammy sweat, inability to raise itself, etc., all this led me to diagnose occlusion of the intestines. The animal died and the next morning I confirmed the diagnosis.

In the course of my conversation with the gentleman, whose principal idea in calling me to his place was that the cause of all his losses might thereby be determined, I learned that in the course of a year thirty horses had perished from this disease. He was quite apprehensive on account of these losses, and as nothing seemed to check the progress of the disease he felt quite certain that whenever a case was announced to him death would follow. I examined all the horses and found that all had tympanitic and distended bellies. The feeding was good and regular, but the horses received much clover-hay, which was first sprinkled with some salty water. I knew the clover-hay feeding must be the cause of the distended abdomens and resulting colic here, still another method of

feeding was out of the question in this stable, and could only be accomplished by a gradual introduction of other fodder; it was therefore my duty to prevent the formation of gas by means of a proper prophylactic remedy that would improve digestion.

In hydrochloric acid we have such a remedy, and my experience prompted me to direct that to every six pails of water given the animals each evening, one tablespoonful of acid muriaticum should be added, and advised, in case an attack should come on, to use the proper homœopathic remedies in due time. On the 18th day of October I received the following: "Dear doctor, business has prevented my reporting to you. Since you were here the horses have received the necessary amount of muriatic acid, and, apparently, with a good result. During the first fourteen days there were several cases of colic, relieved, however, by the homœopathic remedies which seemed indicated, in one to one and a half hours. From that time I have been spared fortunately. Hence I may suppose that the muriatic acid has been efficacious, and I live in the hope that through your prescriptions I have obtained remedies which will in the future preserve me from great losses."—H. Fischer, *Zeitschr. für Hom. Thierh.*, 1888.

Keratitis—Canine.—Dogs are often affected with an inflammation of the eyes, accompanied by dread of light, swelling of the eyelids, quite an amount of pain, temperature elevated and lachrymation. Upon the eyes being opened they become suffused with tears, and on the transparent cornea reddish blue spots are visible, often wholly covering it; at the same time small places with round borders and of the size of a pin's head to that of a lentil. As there is an itching the animals generally rub the eye affected and thus aggravate the trouble. In such cases I have the eyes washed with Euphrasia (40 gtt. tincture Euphrasiæ to 150 grammes of lukewarm water) three times daily. Internally I give Sulph. 1x, as much as will stay upon the point of a knife, with Euph. sol. 3x, 10 gtt., every two hours, and have, even in the worst cases, cured the disease.—H. Fischer, *Zeitschr. für Hom. Thierh.*

Poll-Evil—Equine.—By Otto von Lang, V. M. D., Salem, N. J. This inflammatory process, set up in the muscles and skin in the region of the atlas, runs on to the suppurative stage, the adjacent structures gradually becoming affected, the *ligamentum nuchæ* being frequently involved. As there is little vitality in the diseased structures, pus may burrow down between the muscles until it reaches and causes disease of the bones. This treacherous disease has been and will be one of the most intractable kinds. Under the methods of treatment of the old school I never cured a case in less than three

months, the treatment being the use of blisters, seatons, strong antiseptic injections, etc.

On the 5th of January last I was called to see a mule owned by Mr. H—. On examination I found a swelling extending from the occiput to the middle of the atlas. The swelling was about 2½ inches in height and 6 inches in width. Diagnosing it poll-evil I ordered the swelling bathed frequently with Arnica 1 part, water 10 parts, and prescribed Arn. 30x, ten pellets on the tongue, night and morning. January 10th the swelling was found reduced, the animal looking much better and the appetite returned. Continued the treatment. January 15th, I found the animal at his regular duties, entirely cured. (*Communicated.*)

Pharyngeal Paresis—Equine.—By Otto von Lang, V.M.D., Salem, N. J. A colt, for the last eight months under treatment by three veterinarians for the following symptoms, was finally sent to the Veterinary Department of the University of Philadelphia, and returned from there worse than before. Upon examination I found a cough, attended with a fetid discharge from the nostrils, very difficult swallowing of both food and drink, which, in part, returned through the nostrils, and other minor signs of a partial paralysis of the pharynx. I ordered one dose of Kali bich. 6x, morning and evening, and on the following day Lachesis 30x, to be given twice a day for a week. At the end of that period I found the animal doing astonishingly well, and ordered Lachesis, 200x, ten pellets dry upon the tongue, once in two days. This treatment was followed in six days by a perfect cure. (*Communicated.*)

BOOK REVIEWS.

Handbook of Materia Medica and Therapeutics. By Timothy Field Allen, A.M., M.D., LL.D., Professor of Materia Medica and Therapeutics in the New York Homœopathic Medical College and Hospital, etc., etc., etc, Philadelphia: F. E. Boericke. Quarto. Pp. 1163.

It is with feelings of both pride and pleasure that we find ourselves called upon to notice this elegant publication; pride in the indefatigable author, the painstaking publisher, and the honorable practice to which both belong, and pleasure in the mere leafing over of a book so honestly bound and clearly printed.

Dr. Allen gives us with his inimitably characteristic and careful grouping the mainly necessary symptoms of 388 drugs, including many of the newer ones, like *Antipyrin*, *Calotropis*, *Astragalus menz.*,

Convallaria, Homarus, Epiphegus, Onosmodium, Oxytropis, Strophanthus, the Viburnums, etc. In addition to the symptomatology, he gives under each drug its origin and method of preparation; its general action and relationship; its conditions of aggravation and amelioration, and many valuable clinical observations in which analogous remedies are freely given in parentheses.

Any physician who will take this work by the back, in his left hand, throw it open, and read twenty lines at random, will find sufficient recommendation for its purchase. Its extreme flexibility of binding, fine mobile linen paper, virginity of type, and clear indexial spacing will rank it instantly as an excellent piece of workmanship; while the conciseness of text, clinical references, and excellent arrangement will prove it in a few moments' examination to be in verity what it claims to be—a handbook of materia medica.

Both the author and publisher should receive the thanks of the profession through the large and rapid sale which the work so richly merits.

Lectures on Diseases of the Heart with a Materia Medica of the New Heart Remedies. By Edwin M. Hale, M.D. Third edition. Philadelphia, 1889, F. E. Boericke. Pp. 478.

In addition to the 206 pages of lectures, so well known to the profession through the publication of the second edition of this work six years ago, there have been added in this as many pages more of excellent matter. The materia medica of over twenty of our newer remedies, such as *Cactus, Strophanthus, Adonis, Convallaria* and others, was needed, and now it is given us in a very thorough manner in over 100 pages of the work; and to this is added about 70 pages of excellently compiled and well indexed repertory by Dr. Edward R. Snader. This repertory covers over two hundred remedies. The work concludes with nine essays on heart affections, among which are to be found the author's paper on "The Influence of the Mind over the Heart;" Prof. J. W. Dowling's "Is the American Heart Wearing Out;" and Dr. Snader's "Effects of Tobacco on the Heart." This work comes before the profession at a time when it is greatly needed, and serves to enrich our too scant literature of homœopathic practice.

The *Cincinnati Inquirer* gives in its issue of May 19th the full text of Dr. Wm. B. Clarke's paper on "The Verification of Death," as read before the Indiana State Homœopathic Medical Society, at its annual meeting in Indianapolis this year. The paper gives the following reason for publishing the essay in full: "The essay is written in a style easily understood by the general public, for which it possesses deep interest."

PUBLISHERS' DEPARTMENT.

ANNOUNCEMENT.

Messrs. Boericke & Tafel have added another completely equipped pharmacy to their various establishments, having opened one, on the 20th of June, at **416 Nicollet Ave., Minneapolis, Minn.** The new comer, as is the case with the others, will be supplied from the home establishment, 1011 Arch St., Philadelphia, Pa., and the manager will be able to devote his entire time to the wants of patrons. The Minneapolis pharmacy will be a great convenience to physicians of all schools in the country naturally tributary to that city, in the saving of time and cost of transportation; we say "of all schools" because, owing to the undoubted superiority of homœopathic fresh plant tinctures and the various forms of "tablets" produced by this house, the demand for them is very large, and growing, from physicians outside of the homœopathic school. A *Price Current and Catalogue* of 140 pages will be mailed to physicians on request.

We are indebted to Dr. Marx, of the Department of Agriculture, Washington, D.C., for the illustrations of the *Latrodectus* spiders accompanying Dr. Jones' interesting paper in this number of the RECORDER.

Zinc Poisoning.—Galvanized iron water-pipes and pumps are largely used throughout the United States, and are recommended by architects, builders, and engineers, yet there can be but little doubt that this general use is the cause of many mysterious cases of illness and death. Dr. J. Heber Smith's experience, as given in the following, reprinted from the last *Transactions*, is worthy of careful study by all physicians:

"In 1870 the town of Melrose, Massachusetts, had recently adopted for its connecting service-pipe, from the water-mains to the houses, an iron pipe lined with a thin and unstable smearing of zinc, galvanized upon the interior, and in most instances, where tested, found to have resisted the high pressure of the head of water only about six months before being worn off (along with particles of iron), to be found in large and dangerous amounts in the ordinary drinking water of this community.

"For several months that year, Dr. Smith had been noticing a marked congruity of certain peculiar nervous symptoms in a few of his patients, mostly young children and delicate women, as well as, in several instances, in strong men. One family in particular offered in several of its members almost a complete picture of this,

to him, novel endemic. It was the household of a prominent and wealthy citizen thus signally afflicted, and for special reasons which will appear. This gentleman was living high above the town, and had, therefore, constructed a reservoir of great capacity, lined with galvanized iron; this he had connected with a force-pump in his house by seventy feet of one and one-half inch pipe of the same material.

“In November, 1870, his two daughters were seized with a persistent angina faucium, with ulceration of the pharynx and tonsils. The ulcers were round, sharply defined, with red everted edges; they gradually coalesced. They were filled with light yellow pus, adherent to the base. While convalescing, as was hoped, from her puzzling throat difficulty, the younger daughter, aged five and one-half years, began to present indications of unusual and alarming derangement of the nervous centres. On waking in the morning, for about ten days, there was entire inability to move the head and extremities, with general hyperæsthesia. After about an hour of rubbing and attention, this paralytic state would improve sufficiently to permit walking, but with a staggering, uncertain gait, and a tendency to fall to the left. The eyes had an outward cast; the pupils alternately dilated and contracted, but usually dilated; falling of the upper lids and œdema of the lower; objects appeared elongated, and at times double; expression vacant and apathetic, or irritable; constriction and spasm of the œsophagus during deglutition; accumulation of mucus in the larynx and posterior nares, with obstruction of both nostrils, and with nasal speech. Then, suddenly, for twenty-four hours, every appearance of violent spasmodic croup, with difficult swallowing, and it was feared that the child would choke, so alarming were the indications of threatening local paralysis. Gelsemium quickly relieved these symptoms, and was given in the first decimal dilution on the evening of the second day, preventing any recurrence thereafter of croup. There continued, however, a train of obstinate conditions wholly resisting treatment for many days, such as eructations; loss of appetite; vomiting of bile or mucus; offensive diarrhœa, alternating with constipation; diminished secretion of urine, and, at one period, suppression for a considerable period. The pulse, wiry and irregular, averaged one hundred and twelve a minute; feverish flushes of heat, with heightening of color from the cervical region upwards and forwards, attended with excitement and crying out to be “fanned,” and some thirst; this was a constant feature of the child’s evening condition for several weeks. Her sleep was agitated and unrefreshing, with occasional night-sweats. In addition to the flushes at evening she presented the appearance of utter inability to support the head. Great emaciation; cachectic look; complexion, bluish-white.

“On the 15th of December, from the careful comparison and correspondence of the symptoms with our records of zinc-pathogenesis, the doctor concluded to treat the case as one of metallic poisoning, and the metal zinc was believed to be the one in fault. After a careful examination of the water service, and an expert examination, made several days previously by two of the most reputable chemical experts in Boston, Drs. Charles T. Jackson and James R. Nichols, both of these gentlemen reported on the 23d of December that ‘the amount of zinc oxide found in the water from some unknown source, submitted to them was large, and varying in different samples from six to twenty grains to the gallon, and rendering the water, from whatever source, unfit for drinking and dangerous to health.’

“This opinion of the chemical experts received the purchased sneers of allopathic savants and medical journals friendly to the galvanized pipe industry, and one prominent Boston paper refused to admit any allusion to these incidents and items of intelligence, because ‘the Company advertised in its columns.’

“On the day when the diagnosis became a fixed fact in the doctor’s mind as zinc-poisoning, the only son, a very delicate, strumous child of thirteen, was indisposed from what had been supposed a simple cold. On examination, he presented an emaciated, feeble appearance, the face wrinkled and of the same bluish-white as his younger sister. His pulse was found to average but forty a minute, and was quite intermittent. There was a dry spasmodic cough and slight epigastric tenderness on gentle pressure, but no other signs of local inflammation. The following day he was no better, though found lying upon the sofa dressed. Complained of fleeting pains in the hypogastrium on rising from a recumbent position; continual nausea; entire loss of appetite, the sight or smell of food exciting extreme disgust. Vomited mucus several times the following night. On the fourth morning, vomiting of bile and indications of extreme nausea, but none of the usual concomitants of gastritis, and he did not complain upon pressure over the epigastrium or abdomen. Pallor around the mouth, and contraction of the upper lip. Only milk was retained, of which an ounce was given at intervals. There was entire absence of pain or complaint to the end. He vomited again that evening, and again the following morning, but passed a quiet night in sleep. The following evening vomited a brown fluid once like coffee-grounds; pulse, 60; face a little flushed; no delirium or stupor. The next morning he waked just before light with a call to stool, and after passing about a gill of disorganized blood sank into a swoon, and died before help could arrive.

“An autopsy, conducted by several members of this body, at which two physicians of the old school were present by courtesy, re-

sulted in the unanimous verdict that death had resulted from heart failure from zinc-poisoning. The stomach showed indications of inflammation prior to death, being extensively injected, and evidencing traces of sanguineous exhalation.

“The following month the little sister, though partially paralyzed in her legs, was fast regaining strength and health, and the following July she was entirely restored. She is now living and in good health. The entire family suffered in varying degrees, according to previous health and vigor. The symptoms of these, and of some dozen or more in other parts of the town, may be summarized for brevity's sake before closing, from notes taken for a period of about six months, until the obnoxious pipes were removed from the town by order of the authorities, soon after which there was a gradual subsidence of the symptoms attributed to zinc, and, as might be expected, no such endemic has since reappeared in that community. The homœopathic method of minutely studying drug action, backed as it had been in this instance by expert analysis, battled with selfish interests, allopathic ridicule and popular ignorance, and the inertia of corporate authority, and drove the galvanized pipes from that neighborhood forever. There was that amount of fight in one youthful representative of homœopathy in an obscure village, when sure of his ground, against them all. The following presents a summary of the observed symptoms :

“Constant, dull, frontal headache; headache extending from the occiput to the eyes; frequent attacks of vertigo, preceded by sharp pressure at the root of the nose, and a sense of drawing together of the eyes as if by a cord, followed immediately by offensive nausea, faintness, and trembling of the hands, as after a wine debauch; sensation of general trembling without trembling, as from poisoning by sulphuric acid; intense pain in the brain, almost maddening, followed by excessive vomiting, attacks coming on suddenly; vomiting of clear mucus, or, more rarely, of bile; vomiting attended with trembling, as after alcoholic poisoning; ptosis; itching and stitching in the inner canthi, with sudden cloudiness of sight; heavy pressure on the eyes; constriction and spasm of the throat; acute darting pains through all the joints, especially the ankles, knees, and elbows, with numbness of the adjacent parts, and an exhausted, paralyzed sensation in the muscles of the upper arms and thighs, worse on the right side; trembling of the feet and difficulty of raising them, and frequent stumbling; excessive nervous moving about of the feet in bed for hours at night, even when asleep; nightly itching of the soles of the feet, the calves and thighs, perfectly intolerable; general formication, as if covered with lice for weeks, as if under the skin, relieved only by rubbing with the balls of the fingers; deathly sinking at the stomach for hours after eating any-

thing acid ; frequent fainting, several times daily, followed by prostration and numbness of different parts of the body ; severe stabbing pains in the abdomen, without diarrhœa or constipation, continuing several hours, and returning periodically every seven days, or once in three weeks.

“ If wine were tried even in minute quantities, as a gentle tonic, it induced nausea, headache, and pressure at the occiput, with a vertiginous feeling out of proportion to the amount drank, confirming the well-known aggravation of symptoms from wine, recorded in the pathogenesis of zinc.

“ The principal remedies used, in the order of their importance in all these cases, were *Gelsemium*, *Cimicifuga*, *Agaricus*, *Conium*, *Helleborus*, and *Causticum*.

“ The skin symptoms of these cases interested him greatly, and had been incidental in leading him to the extensive use he had made, in the past fifteen years, of *Zincum metallicum*, 3x trit. in eczema. He believed it worth any twenty other remedies in this intractable affection, and it is its homœopathicity to eczema that has brought the *unguentum zinci oxidi* of the old school into such wide and enduring favor. You will often meet these cases of eczema following mental shocks or profound nervous exhaustion, in the young and aged alike, with whom there has been a withdrawing of the vital energies from the muscles to the nerve-centres, simulating a case of chronic *grande mal*, or the non-appearance of an acute exanthem.

“ He employs *Zinc* in the beginning of a dangerous invasion of scarlet fever, or other acute exanthem, when there is entire inability, through some unaccountable central nervous weakness, to throw the disease to the surface ; the skin is bluish-white and cool at the extremities, though the axillary temperature may be alarmingly exalted, the pulse vanishing and irregular, or slow and dichrotic ; indeed, all the symptoms recognizable are indicative of abnormal and basilar congestion.

“ Here *Zinc* is truly homœopathic, and may restore the circulation to the periphery, in connection with such rational adjuvants as the warm baths, hot-pack, the vapor-bath, and all other means of inducing free perspiration, in which the true *Zinc* patient is, if unaided, as though already dead.

“ One point mentioned by Dr. Allen this evening interested him, namely, the action of *Zinc* as a dangerous paralyzer of the nerves of the throat. ‘ The expectoration must be swallowed again ’ was a marked condition in his cases of poisoning. This feature was partially relieved by *Causticum*. *Sambucus* is credited with this symptom, as well, likewise, as of inducing and curing the most dangerous laryngismus. These symptoms, likewise, belong to *Iodine* and its salt, as well as to *Spongia*, which is *Iodine*.

"It is to be regretted that no histological examination followed the necropsy in this instance, but it is to be inferred from the general history of these cases that never again, perhaps, will a more thorough and exhaustive proving of Zinc be made under circumstances permitting prolonged expert examination, and these results, so far as their mere statement, may be almost considered final.

"But it is to the physiological interpretation of these reflexes that the student of the future must bend his attention if he would ever hope to apply this remedy with increased precision to the sick."

Cuphea Viscosissima.—In No. 6, vol. iii., of the RECORDER, the remarkable efficacy of this remedy has been described in cholera infantum, Dr. Roth giving a number of his clinical cases in support of his testimony.

In October, 1888, in our wanderings along the South Mountains near Wernersville, Pa., in company with our botanist, he bent down and plucking a plant handed it with the remark, "I did not think *Cuphea* grew around here." Knowing that a farmer's baby in the immediate neighborhood had been afflicted all summer with cholera infantum, and although under the treatment of a scholarly and skilful allopath had just been kept alive, and though it was about the middle of October it seemed to be as puny as ever, this plant was handed to its mother with the direction to steep a small twig in a cupful of hot water and give baby a teaspoonful every few hours. The effect was almost instantaneous, and when the babe was seen ten days after, it was content and on the high road to a full recovery.

T.

New Burnett Books.—Two new books from Dr. J. Compton Burnett's pen and a new edition of a third one will be good news to the many admirers of this vigorous writer. The newest is *On Neuralgia: Its Causes and its Remedies*, dedicated "to the manufacturers of morphenomaniacs, in the small hope that its study may lessen the number of hypodermic syringes in active service." Published in London, 1889. Cloth, and 130 pages. The doctor begins in this manner: "If there is anything in this earth-life of ours that is hard to bear, surely it is *neuralgia*. And if there is anything in this world that can cure—I do not mean relieve, lull, dull, deaden, or kill, but *cure*, really cure *neuralgia*, that thing is homœopathy." The net price of the book to physicians, including postage, 85 cents.

The next work is *Tumors of the Breast and their Treatment and Cure by Medicines*. London. 1888. 213 pages. Dr. Burnett believes in treating tumors "by medicines" and has put forth this little work as a protest against "our knife men, our surgical carpenters."

"I declare that *the knife is no cure for tumors*, and that tumors can be cured by medicines." The work is largely composed of details of cases that have been so cured and the treatment employed in these cases. Net price of book by mail, \$1.20.

A new edition, the third, of Dr. Burnett's *Diseases of the Veins and their Treatment by Medicine*, is out. This book is the same size as the two foregoing. It has been carefully revised and some new matter added. Number of pages 171. Net price by mail, \$1.20. The first edition was published in London, 1881.

Dr. Timothy F. Allen's great work, *A Handbook of Materia Medica and Homœopathic Therapeutics*, is completed and ready for delivery. In this day of many-sized books the best description as to size is that which gives exact figures. The pages of the new *Materia Medica* are *quarto* and measure $11\frac{1}{4}$ inches by $8\frac{1}{4}$, and number 1165. The binding is *full sheep* and well done, and the latter also applies to the printing altogether. The number of remedies treated is 388. The price is \$12 *net* to physicians with *expresage* extra. Orders sent to Boericke & Tafel will be promptly filled. May also be had in fine half-morocco at \$12.50.

Arsenic as a Prophylactic in Hydrophobia.—The following appeared in the *Correspondenz Blatt* in 1873, and, we think, is worthy of reprint:

"Dr. Ernest Guison, in an inaugural dissertation presented to the faculty of Berne, states, though he has arrived at no positive conclusion, he believes that as in cholera the germ of the contagion of rabies is formed by one of the lower fungi. The period of incubation extends, upon an average, over five or six weeks. The poison is then absorbed, spreads itself through the body by means of the circulation, and then multiplies indefinitely, producing ultimately irritation of the nervous centres, and especially of the medulla oblongata. Dr. Guison then enters into the prophylactic treatment of the disease by means of Arsenic, and gives the following clinical observations: 'A man was bitten on the 24th of June by a mad dog in the hand; a girl was bitten at the same time, and shortly after died from hydrophobia. Two days after the accident, the man applied to Dr. Guison's father, who cauterized the wound deeply with potash, and kept it open with cantharides. Minute doses of Belladonna were given morning and evening up to the 18th of July, when the patient had rigors and pains in the body. From this time up to the 26th of July, the symptoms of hydrophobia became gradually more and more expressed, in spite of repeated venesections, and the use of calomel and opium. At this time, however, small doses of arseniate of soda were prescribed every four

hours (0.003 of a gramme) ; on the 29th marked amelioration of the symptoms was observed, which continued until the 20th, all danger had passed, and complete recovery took place.'

" Dr. Guison gives another case, in which a rabid dog, between the 7th and 9th of June, bit thirteen persons in the various towns of the Canton of Freiburg. All were recommended to be treated with one-twentieth of a grain (equal to five grains of the one-hundredth, or one-half a grain of the one-tenth trituration) of arsenic, morning and evening, as a prophylactic measure.

" Eight submitted to this prophylactic treatment, and none were affected. Four declined, or were not allowed to take the arsenic. Of these four, two remained unaffected and two died. One began the arsenic treatment, but speedily left off. She was attacked, but at a much later period, and died. Dr. Guison recommends not only the internal employment of the arsenic, but that the wound should be dressed with it."

Hensel's Tonicum.—I can give *Hensel's Tonicum*, a most cordial recommendation for patients in whom iron is indicated, yet cannot take other preparations from the nauseous taste, or inability of stomach to retain them. I have given *Hensel's Tonicum* a thorough trial in a variety of cases. One case in particular last winter of an aged lady of ninety-two years, suffering from anæmia, general debility, etc. One foot was (so to speak) already in the grave, and if the truth must be told, an undertaker had been engaged to take care of the other one; I gave homœopathic remedies faithfully, and allopathic tonics, etc., until I thought she would die anyway. Then I put her upon *Hensel's Tonicum* and improvement set in. She crawled back from the cemetery, is now up and around the house paralyzing three meals a day. I consider it very useful to me in my practice.

Yours truly,

H. E. CARTER, M.D.

FALLS VILLAGE, CONN., June 4, 1889.

ASHLAND, O., May 19, 1889.

MESSRS BOERICKE & TAFEL.

SIRS: Inclosed find \$3.00 for which please send by express two 12 ounce bottles of *Hensel's Tonicum* as soon as possible. Have tried the sample with gratifying results.

Yours,

J. P. STOBBER, M.D.

Farrington's Clinical Materia Medica.—Very few homœopathic medical works have had so large a sale as this one, or taken at once so high a place in our literature. This could not have been the case on the mere strength of a man's reputation; that may give

a book an ephemeral notoriety, but without intrinsic merits it soon lapses into the upper shelves and thence to forgetfulness. That Farrington's work has intrinsic merits is proved, to book dealers, at least, by the steady call for it; to the lover of literature, who, starting at the introduction, is led on with all the fascination that pertains to a book that has something new in it, which something is clothed in the words that constitute that undefinable thing we call "good style," and to the practical man, inasmuch as its study gives him a grasp of his profession and his tools, which he did not have before. Yet, for all this, there is hardly a noteworthy book published that is more difficult to quote from, not from lack of substance, but when one starts a quotation he can find no place to leave off without doing violence to his sense of literary propriety. For instance, we open at the chapter, or more properly, perhaps, "lecture" under the title of "Animal Kingdom." "Many of the animal poisons are distinguished by the violence and intensity of their action, and by the decided alterations which they produce in both structure and function. The blood is often changed in its composition and quality, the nervous system suffers, and even the lower tissues are affected. The whole tendency of these remedies is to produce diseases, *which are never of a sthenic, and always of a destructive form.* . . . You will find, too, that these animal poisons are apt to affect the mind, especially the emotions. They arouse the lowest qualities in one's nature, and produce a condition which is truly shocking." After a general picture of the animal poisons comes the specific character of each. Glancing through this part of the work our attention was arrested by a statement which, while known no doubt to the most of our readers, may be new to some. Speaking of cod-liver oil—*Oleum jecoris aselli*—"Many physicians claim that it acts physiologically. This is a mistake. It is a medicine . . . I will give you here an outline of its symptoms. You may use it when there are chills running down the back, hoarseness and soreness through the chest. How many times you will see these symptoms at the beginning of tuberculosis! There may be sharp stitching pains here and there through the chest. Fever is particularly marked towards evening with burning in the palms of the hands. The cough is dry, with an expectoration of a somewhat slimy mucus such as we notice in the initial stages of tuberculosis. These are the symptoms which have been noticed in the provings conducted by a conscientious observer, Dr. Neidhard (of Philadelphia)." Right on the same page we strike another nugget of information. "*Bufo rana (cinereus)*, a variety of toad indigenous to South America. The surface of its body secretes an oily substance which has the reputation of being poisonous. The native women, when tired of the importunities of their husbands, mix this oily secretion into their husbands' drink

for the purpose of producing impotency. Provings have been made of *Bufo* and it has been found to produce a very disgusting——” But there we are at the bottom of the page, and, as we have been led far beyond the space intended, we will not turn it over. 752 pages. Half-morocco. *Net*, by mail, \$5.98.

Excelsior!—Year after year, as science plants her waving banner on dizzier heights, her panting followers often pause and look below on the green and enticing plains of ignorance, left forever; and long to slide down the rocky way they have ascended, as they used to slide down the cellar door, in the days when patches on the trouser’s seat were no disgrace, and be at rest. But it must not be. **Excelsior!** Drs. Clevinger, of Chicago, and Eccles, of Brooklyn, have chipped the steps (*Brooklyn Medical Journal*), and wave us on.

Back in those happy days when the world was still young, when the morning stars sang together and man was monkey, or monkey was man, and gracefully skipped over the ground with his stern, like an old fashioned Dutch galiot, higher than his head, as may be noticed in his left-behind-brethren in the race of life, who assemble in the cage at the zoological gardens; and when the embryonic man of science gaily scampered from tree to tree, or luxuriously swung in the balmy breeze suspended by his tail; back in those days certain diseases were unknown. Time passed. Monkey wove his hairy coat into broadcloth, cut off his tail (we modestly claim this discovery), and used it for a walking stick, and assumed an upright posture. But, alas! He was not built to walk that way, and the gentlemen we have named point out the “fact” that this change of posture brought to monkey’s descendants varicose veins, ulcers, piles, prolapsus ani, bow legs, goitre, etc. The “element of posture does not enter equally as a cause into all the foregoing cases,” say the learned gentlemen, and we, upon careful consideration, are inclined to agree with them. Piles and prolapsus ani seem to be common to man in both postures, and as for bow legs, we’ll bet on monkey every time. No remedy for this annoying train of consequences is proposed; facts are merely pointed out and we are left to make the best of them.

“**A puissant antipyretic,**” says Dr. G. Smith, “while quenching abnormal heat, may also extinguish the vital spark.”

Hale’s Diseases of the Heart.—The third edition of this work is now out and is nearly double the size of the last one, containing 478 pages, 8vo. Price, \$3.25. It is divided into six parts. Part I., Functional Disorders of the Heart; II., Inflammatory Affections of

the Heart; III., Organic Diseases of the Heart; IV., Materia Medica of Heart Remedies; V., Repertory of Heart Symptoms; VI., Miscellaneous Papers on Subjects Relating to Disorders of the Heart; the whole concluding with an index. The Repertory is by E. R. Snader, M. D., Lecturer on Physical Diagnosis, Hahnemann College, Philadelphia.

Homarus.—"Mrs. —, aged 45, has been under the care of a leading old-school doctor of New York. Has had the whole left breast removed; has two hard tumors in left axilla, one below the scar on left breast, one in right axilla, each the size of a small hen's egg; one on breast discharging pus and blood. *Severe* distress in stomach all the time; cannot take food; liver hard and extending three and one-half inches below umbilicus. Skin brown, coffee color all over. I gave *Bromide of arsenic*, *Chelidonium* and *Protoiodide of mercury* with slight relief. As she complained of pain in the stomach similar to what I experienced while proving *Homarus*, I gave her *Homarus* 4x once in two hours. It gave relief at once, and for six weeks she ate three good meals each day, and some of the time four. Her bowels were bloated and that disappeared, and her skin returned to its normal color, and the hardened liver seemed softer. She seemed quite happy during this time. As hot weather comes on she begins to grow weaker, and of course must die; but when I see what it has done in this old case, may we not hope for something in recent cases?"—From private letter of A. M. Cushing, M. D., in *American Homœopath.*

Dr. Cushing's proving of *Homarus* will be found in the May, 1888, number of RECORDER. The foregoing seems to coincide with the claims made in Dr. Burnett's new book, mentioned elsewhere.

Our readers may notice a change in the title-page of the RECORDER, the dignified Latin "bi-monthly" has given place to the Anglo-Saxon "every other month." About the meaning of the latter, we trust, there can be no two opinions,—it does not mean "monthly," neither does it mean "semi-monthly," but "every other month."

Only too True.—"What is the matter, doctor?" asked a reporter of a well-known chemist. "I am mad; mad at chemistry and the drug business. Look here! Oil of vitriol is no oil, neither are oils of turpentine and kerosene. Copperas is an iron compound and contains no copper. Salts of lemon is the extremely poisonous oxalic acid. Carbolic acid is not an acid, but an alcohol. Cobalt contains none of that metal, but arsenic. Soda-water has no trace of soda, and sugar of lead has no sugar; cream of tartar has nothing of cream, nor milk of lime any milk. Oxygen means the acid-

maker, but hydrogen is the essential element of all acids, and may contain no oxygen. German-silver has no silver, and black lead no lead. Mosaic gold is only a sulphide of tin. These are only some of the mistakes of nomenclature in our business."—*Medical Herald*.

Chionanthus Virginicus, according to *The Druggists' Circular*, is steadily growing in favor as a remedy for jaundice. The usual dose is two to four drops of the tincture.

Robert P. Porter, the newly appointed Superintendent of Census, has issued a circular "To the Medical Profession," the gist of which is that the Census Office has issued "Physician's Registers" for the purpose of obtaining vital statistics from June 1, 1889, to June 1, 1890, and any physician who has failed to receive one will be supplied by addressing Census Office, Washington, D. C. An official envelope accompanies each Register, so that no postage is required when it is returned to the Census Office.

Dr. I. J. M. Goss, of Georgia, recommends *Passiflora* for "convulsions of children" from dentition or over-feeding."

At the last meeting of the American Institute of Homœopathy (June 27, 1889), Mr. A. J. Tafel was elected an Honorary Associate Member of that body.

Spontaneous Combustion.—This age is often reproached for its skepticism, but sometimes a suspicion haunts us that the reproach is unjust, and should be directed against others than the skeptics. An M.D., in the *Therapeutic Gazette*, gives the world a detailed account of a case of spontaneous combustion in a human being, on the ashes of which he sat as coroner. It happened at Seneca, Ill., in 1885. The subject was a woman, who weighed 160 pounds before spontaneously combusting, and afterwards but 12 pounds. She combusted at night in a frame house, burned a hole in the pine floor "2 feet 6 inches x 3 feet," yet did not set the house on fire, though the heat was sufficient to reduce her 160 pounds of bones and flesh to 12 pounds. Certain features about the report have a strong smack of Dickens's graphic account of the spontaneous combustion of Krook, the rag and bottle dealer in Chancery Lane, as given in his novel, *Bleak House*. Of the two reports it seems to us that the one in the novel is the best.

Dr. W. M. L. Fiske, of Brooklyn, N. Y., has a neat little folding card containing "Rules of Diet During Homœopathic Treatment." This, left with patients, or rather their nurses, must be very useful.

THE
HOMŒOPATHIC RECORDER.

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THE ELIXIR.

THE latest craze, the vaunted elixir of life promulgated by Brown-Séquard, bids fair to become of such proportions that the law may, before long, be called upon to check the hazardous use of the injecting syringe in this attempt to build up broken-down constitutions and tissues; for at this writing reports come from Pennsylvania and Ohio of a death in each State from injection according to this theory.

What use there may be in this method, we are as yet unable to state, not having tried the elixir ourselves, nor having seen in any of the medical journals of America, England, Germany, or France, reports of success. In fact, the medical publications, with one exception, have, as yet, held a position of silent neutrality concerning it.

However, now that the *Lancet* has opened the subject, and as fatal effects have resulted from the use of so-called preparations of this elixir at the hands of a number of physicians, it is full time that some positive attention be paid to the matter by the medical press, whose duty it is to throw light upon the prevention as well as the cure of disease.

In the *Lancet*, Dr. Brown-Séquard says that his reported rejuvenating fluid is a verity, and that it has made him as vigorous in mind and body as he was twenty-six years ago. As he is now seventy-two years old, and has been for a few years steadily growing weak, we must find something to support the claim of rejuvenation in his case at least.

First let us see of what his elixir consists. He claims to use a mixture of:

1. Blood of the testicular veins (dog and Guinea-pigs).
2. Semen (of same?).
3. Juice extracted from the testicle of a freshly killed dog or Guinea-pig.

Of this mixture, one part to three or four of water, all filtered through bibulous paper, and one cubic centimetre of the filtrate. at each injection, was thrown into a vein of his arm or leg. In all, ten injections were made, extending from May 15th to June 4th. For four weeks after the last dose he claims a rejuvenated condition, but on the 5th of July his condition relapsed to its former status. A colleague reports the same result.

As people flocked from all parts of the world to the Pasteur Institute during the craze of inoculation against rabies, now, probably, an exodus of *roulés* will file to the same point in the hope of rejuvenation at the hands of Brown-Séguard. But what is offered for old maids and ladies grey; from whence shall spring their fountain of jouvence? Suppose, like the hero of Balzac's *Peau de Chagrin*, each application shall be followed by a positive draught upon their real vitality and soon exhaust it? Then shall the old ladies raise their eyebrows, and, with looks of supreme contempt, cease to envy their more unfortunate beaux.

Dire will be the results should our French *confrère* carry out his proposal to also rejuvenate old ladies by injections of infusions of the ovaries of young animals.

The present indiscriminate use of an elixir made from lamb's, etc., as reported daily in the press of this country, should be positively condemned, especially as some are reported to be used hours after the death of the animal. There are many important reasons why the law if necessary, should be called upon to suppress this practice, the most important of which is the opportunity of actual death from the inoculation of people, subjecting themselves to these experiments, with tuberculosis or some other equally fatal disease.

Let us hope that the craze will be exceeding short-lived, and that a few more deaths of people of that class, of whom "all are not dead yet," will sufficiently frighten the rest into satisfaction with the days allotted to man upon this beautiful earth, and the strength given them in those days.

THE BRAZILS.

RIO DE JANEIRO.

ON our arrival in this great city of Brazil, we found a severe epidemic of small-pox devastating the poorer districts. The mortality was high, and remained so during our entire residence there

of a month. The internal quarantine measures were very lax. Often naked children with the sores hardly healing would be brought by parents into public conveyances. Twice during our trips about the city we were compelled to change our seat in the street-car on account of small-pox patients occupying the next. With all this the morning news sheets were wont to cry almost daily, "We cannot see why the spread of small-pox continues in the city, when the most scientific measures to prevent it are in daily function."

It seemed strange to us during our visits among the physicians of Rio, that epidemics of small-pox and yellow fever were regarded with so little feeling of fear, when, if pneumonia were mentioned they would express the greatest dread of the disease, and frequently wonder how we of the north were able to continue existence when such a mortal disease might at any time prevail. Their dread of pneumonia is, if anything, many degrees greater than ours of yellow fever, even with leprosy and small-pox combined.

The diseases causing greatest dread in Brazil are rheumatism and beri-beri, that peculiar dropsical affection, the onset of which is regarded with full as great fear as the bite of the jararaca, their most poisonous serpent. Elephantiasis, especially of the legs and scrotum, leprosy and goitre are disorders of frequent occurrence there, and of a character particularly noticed as horrible by a northern visitor.

In beri-beri the physicians expect better results from change of climate, especially by sea voyages, than from any form of medication; and the laity, especially in the poorer classes, acting, probably, upon the doctrine of signatures, have great faith in the curative effect of large draughts of urine as a remedial measure. Rheumatism the physicians find very intractable, and were always anxious to receive ideas upon new northern remedies for this disease.

The homœopathic fraternity, at the home of the late Dr. Muré, is well represented, and by a class of men who are at once hard students and careful practitioners. One national trait, however, in their method of prescribing we feel bound in our duty to homœopathy to condemn, *i.e.*, the sending of their prescriptions to the pharmacist to be filled. The pharmacies are homœopathic, it is true, but in delicate prescribing it must always be a fault to allow any one but the prescriber himself to put up or handle the remedy to be given. The lack of positive interest of a pharmacist in the welfare of a patient as a general fact, might, in many cases, influence a lack of care in the preparation of a physician's prescription; a desire to substitute might often creep in, if not of remedy, many times perhaps of potency. With so exact a science as homœopathic prescribing, more than one hand in dispensing should be regarded with suspicion.

Of late years, homœopathy has been recognized with favor by the Imperial Government, so much so that since February, 1880, a department in the great hospital, the *Santa Casa de Misericordia*, has been granted the homœopathic physicians, in which the monthly attendance has gradually risen from 33 the first month to 231 in 1887. The total number of patients from February, 1880, to June, 1887, was 7086, to whom 37,163 consultations were given. The deaths reached only the low figures of 77, a percentage of 1.086, and most of these were from phthisis, pneumonia, and hepatic degeneration. Indeed, an excellent showing for our southern colleagues.

The homœopathic department of the hospital was under the care of Dr. Guilherme Taylor March up to October, 1884, and from that date Dr. Baptista Meirelles Filho, aided by the physicians of Rio, ably supported the cause at this institution.

The report of the other three hospitals of Rio having homœopathic wards is equally pleasing. In the *Hospital da Veneravel Ordem Terceira da Penitencia* the percentage of cures in the homœopathic ward was 94.18, in the allopathic, 92.91; deaths 5.56 against 6.86. In the *Hospital da Sociedade Portuguesa da Beneficencia*, with a total of 11,520 patients in the homœopathic ward, and 18,459 in the allopathic, the percentage of cures was 95.26 under homœopathy, against 94.04, and the death rate 4.57 against 5.60; while in the *Hospital da Ordem Terceira de Carmo*, the homœopathic percentage of cures was 94.86 against 88.55 under allopathic treatment; and the rate of mortality only 4.59 against 10.63!

In their thirst for knowledge, the Brazilian homœopaths are great book buyers, and all unite in praising American authors, whose works they are all able to read, though none venture to speak the English language. We found Cowperthwaite, Hering, Allen, Hale, Farrington and many others were standard works of reference in the libraries of each physician.

In the allopathic ranks there is a disregard for ethics almost laughable in the results. Aided by their pharmacists and patients, some of the most highly colored advertising dodges will be noted in almost any of the morning newspapers of the city. We select a few from the papers we happen to have retained as parcel wrappings; they will serve as amusing hints, should our northern physicians desire to emulate their collaborateurs in the south:

“I cannot refrain from thus coming into print, as my heart is bursting with gratitude. My only child, a maiden of seventeen springs, was for four months unable to perform the usual function of her sex. We called upon that most eminent and distinguished practitioner, Doctor Luiz de Camoens de Viega, and to his most delicate and skilful treatment and devoted attention is due her re-establishment in sound health.

LIVRAMENTO DE BORGES.”

“THANKS.

“My beloved mother having fallen gravely ill of a strangulated hernia, I had the pleasure, on the evening of the same day, of seeing her after most laborious reduction, saved from peril, thanks to those distinguished physicians, the Most Excellent Doctors Drummond Navarro, Fabio A. Baiama and Peter de Alcantara Teixeira, to whom we owe this act of medical charity, and shall be eternally grateful.

LADY AMELIA ANGUSTA C. DE BRITO.”

Thus, you see, the patient and family combine to publicly laud the physician who desires the “medical charity” of free advertising. The ending of the next form, a stereotyped one by the way, is supposed to exonerate the physician from any collusion with the thankful patient:

“I was cured in four days by Doctor Paulo Oliveira Cirne. I hope in this public mention I shall not offend the Doctor’s well-known modesty.

MARIA DE CONCICAO.”

Then again, at times, the physician throws off all bonds of ethical restraint, and goes in for himself:

Doctor Mendes de Souza, graduate in medicine, announces a new discovery by which he causes immediate and painless childbirth. All ladies should consult him. Office hours, etc.

It is true that sometimes notices creep in for which the physician cannot be held responsible, and in this form does not err in the question of ethics. The following is one of this type:

Without the assistance of any physician died, yesterday, Antonio José de Arango. The death was verified by Doctor Ataliba Lima, hygienic delegate.

Even this poor fellow, who had the good luck to die peacefully and alone, affords a chance for the physician who “*verified*” his death to announce himself to the public.

The pharmacist also, in advertising himself, aids the physician likewise, as will be seen by the following:

Medical statistics from the Imperial Pharmacy Diniz:

During the month of March past there have been dispensed 2857 prescriptions from 168 Most Excellent Physicians, being of Doctors

Eduardo da Fonseca,	. . . . .	576
Joao Drummond,	. . . . .	510
J. A. da Almeida,	. . . . .	275

A whole column of the paper ending with forty-five physicians sending in two, and twenty or more one prescription.

Here the wielder of the pestle gets some of the glory, and the physician the rest. It is well known that “most excellent physicians”

of the younger type, having more money than patients, often employ a porter to present useless prescriptions for dispensing, that their names may make a goodly showing in these monthly lists, forcibly reminding one of that eminent Pickwickian physician, Bob Sawyer.

All such methods appear to us puerile in the lowest degree, but in Brazil they pass as usual, and, therefore, little noted procedures. In point of fact many things in that great country are puerilely done, from the works of the government down.

The Brazilian Institute of Homœopathy and its organ, the *Annaes de Medicina Homeopathica*, we are sorry to say, are now of the past, though both were excellent educators in their time.

The status of homœopathy in Rio, as the type of the practice in Brazil, is certainly good at the present day. Its supporters are of the best class of the people, and ardent in their work, and its practitioners are good Hahnemannians, close prescribers and careful diagnostitians.

ADONIS (Pheasant's Eye).

Adonis Vernalis, Linn.

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PLATE III.

AMONG our newer remedies there is none claiming our attention more thoroughly than this member of the *Ranunculaceæ*. Belonging as it does to the same botanic family with Aconite, Pulsatilla and Helleborus, it is readily understood to have properties at once active and useful. Adonis, with its bright yellow attractive flowers, is found in damp districts in Siberia, Crimea, Southern Europe and Labrador, where it grows to a height of a foot or more, and presents the following characters: Stem branching; leaves sessile and many cleft, those from the root reduced to mere scales; flowers large and terminating the stem, petals 10 to 12 oblong, spreading, and somewhat toothed at the apex; and numerous and one-seeded achenia.

The early history of the medicinal use of the plant is very meagre, its drastic properties giving it some little prominence, evanescent because of better-known plants having the same property. Clusius says the roots were used as a substitute for Hellebore, and even considered to be the plant mentioned by Hippocrates under that name,* and Pallas states that the leaves are used in Siberia to

*The root of Adonis is often found to-day to be one of the adulterants of commercial Hellebore.

procure abortion. The peasantry of Russia found the plant to be a useful remedy in dropsy and heart disease, and it is from this use that it was first brought up for examination by the profession by N. Botken, whose experiments with the drug were described and made public by Dr. Butnon in a graduating thesis.

The present clinical use of the plant is in heart and kidney troubles, especially those presenting dropsical symptoms.

CHEMISTRY.

Chemically, Adonis bears great similitude to Digitalis, especially in its glucoside, though it also shows its proper place in the *ranunculaceæ* by the presence of Aconitinic acid. Dr. Cervello's analysis* yielded only small quantities of Adonidin in two kilos of the plant. This he did not consider due to any defect in his method of analysis, but to the fact that the glucoside, which is very energetic, is contained in the plant in relatively small proportion.

Adonidin is non-nitrogenous, colorless, odorless, amorphous, and extremely bitter. It is soluble in Alcohol, but only slightly so in Ether and in water. It is precipitated by Tannic acid, the precipitate redissolving in much water. It is insoluble in cold dilute Hydrochloric acid, but on being heated in this acid it breaks down into sugar and a substance insoluble in Ether. Dr. Cervello did not determine whether the decomposition product has any action upon the organism, analogous to Digitaliretin, as obtained under similar conditions from Digitalin by Schmiedeberg.

TINCTURE.

The homœopathic tincture is prepared by chopping and pounding the whole fresh plant to a pulp and weighing. Then two parts by weight of Alcohol are taken, the pulp thoroughly mixed with one-sixth part of it, and the rest of the Alcohol added. After stirring the whole well it is poured into a well-stoppered bottle, and allowed to stand for eight days in a dark, cool place.

The tincture separated by decanting, straining and filtering should have a deep orange-brown color by transmitted light; a pungent, vinous odor, an exceedingly bitter taste, and a highly acid reaction.

ACTION.

The physiological action of Adonis is very similar to that of Digitalis, a fact pronounced upon by all experimenters with the drug. The experiments of Dr. Botken on both warm- and cold-blooded animals with different preparations (aqueous and alcoholic) showed

* *Arch. f. exper. Path. u. Pharmak*, xv.

that its action is to stimulate both the inhibitory apparatus and motor ganglia of the heart, to increase the contractility of the cardiac muscles, and to cause the contraction of small arteries in different parts of the organism without affecting the vaso-motor centre. In experiments made on frogs, in both the isolated heart and the heart *in situ*, it ceases to beat in diastole.

With respect to *Adonidin*, Dr. Cervello sums up the results of his experiments by stating that it may be described as identical with that of *Digitalin*, with the exception that it is more powerful, and has no cumulative effect. Dr. H. A. Hare says,* in concluding the account of his experiments: "Adonidin in all doses increases arterial pressure by stimulating the vaso-motor centres, and by increasing the cardiac force. In moderate doses it increases the pulse-rate and force from the first, but when large toxic doses are given, it primarily slows the heart by stimulating the pneumogastric, and then increasing the pulse-rate by depressing the inhibitory nerves, and stimulating the accelerator apparatus. The slowing of the pulse-rate is also in all probability due in part to increased arterial pressure, as under these circumstances the blood-paths are greatly diminished in calibre. On the nervous system the drug has but little action, unless the quantity administered be enormous. Under these conditions it paralyzes the sensory side of the cord, but has no effect on the motor tract, or on the efferent or afferent nerve trunks." Dr. Hale, in commenting upon the experiments of Dr. Botken, says:† "If the inhibitory nerves be cut before the Adonidin is placed in the pericardial sac, the usual increase in rate under such circumstances takes place, and the addition of a small quantity of the drug now immediately increases the rate still further, without the appearance of any primary stage of slowing of rate. This proves that the primary slowing occurring when the vagi are intact must be due to exaltation of their function, and not to peripheral stimulation, and also proves that the drug must directly stimulate the heart-muscle; for the rapid rate under these circumstances is not one of weakness, but of power. It should not be forgotten that this drug in large quantities finally stops the heart in diastole, whether the vagi are intact or divided. In small quantities it does not produce the primary slowing of the pulse, nor does it bring on the peculiarly weak and imperfect movements which have already been described as occurring before death. In other words, it requires large doses to affect the pneumogastric, and to depress the heart-muscle.

"Another point to be decided: Is the rapid stage following the primary slow stage in the viscus *in situ* due to paralysis of the

* *Therapeutic Gaz.*, April 15, 1886.

† *Lectures on Diseases of the Heart.*

vagi; to direct stimulation of the heart which overcomes inhibition, or to both? While I am unable to state whether over-stimulation takes place, it is a fact that the pneumogastric nerves are certainly in this second stage depressed by the drug, for galvanization of these nerve-trunks during this stage failed to produce as marked a slowing of rate as should have occurred, provided the inhibitory pathway was open. From this we may conclude that, although the stimulation of inhibition in the first stage is centric, the paresis of inhibition in the second degree is peripheral.

"The same changes are present when the drug is injected into the posterior lymph sac of the frog. The animal soon becomes passive and immovable, and dies shortly, so quietly that its death is not noted until the animal is handled. That the high arterial pressure produced by this drug is due in part to centric stimulation of the vaso-motor system is proved by the fact that the mesenteric bloodvessels are seen to dilate after section of the spinal cord."

Adonidine acts with almost the same symptoms upon the dog as the frog. Dr. Botken injected one-fourth grain of the drug into the jugular vein of a dog after curarizing him. No sooner was the slowing of the heart's beat most marked than the vagi were divided, and instantly the pulse was increased from 102 to 192 per minute, proving that the slowing was due to stimulation of inhibition, and that this stimulation was centric.

A twelfth of a grain given slowly to a large dog did not produce death, nor a primary slowing of rate, but seemed to increase the rate, force and pressure. A small dog poisoned by a large dose of Adonidin gave symptoms of nausea and intestinal spasm, accompanied by the expulsion of fæces. The animal had no convulsions or spasms, but lay on its side, with pupils widely dilated and, when death occurred, respiration continued some moments after the heart ceased to beat. This experimenter sums up the results of his observations on doses of one-third grain as follows: (1.) Increases arterial tension. (2.) Regulates the heart-beat. (3.) Diminishes the frequency of the pulse. (4.) Increases the force of the cardiac contractions. (5.) Acts with rapidity, its effects being only present during its administration. (6.) Increases diuresis. (7.) Is well-tolerated. (8.) That the indications (*sic*) for its use are the same as for Digitalis. •

Huchard* injected 1 to 2 centigrammes hypodermically into rabbits, and found respiration reduced, the cardiac force raised, no paralytic symptoms, fall of temperature, and death in from fifteen to twenty hours.

* *Gaz. Hebdomadaire*, Jan., 1886.

PROVINGS.

(1.) Orville W. Lane, effects of 10 grains of crude *Adonis vernalis*. (2.) George W. Pleasanton, effects of same dose. (For daily record of these provings, see *Trans. Am. Inst. Hom.*, 1888, 142.

Mind.—Feels apprehensive, as if something would happen.¹

Head.—Feels light, with some aching.¹ Headache extending from occiput around temples to eye-sockets, and across frontal region, lasting until midnight.¹ Vertigo in the morning on rising, obliging him to lie down; believes he would have fainted had he remained on his feet.¹ Head heavy and dull in occiput.¹ Scalp feels tight all over.¹ Dull, heavy headache.¹

Eyes.—Yellow, surrounded by dark circles.¹ Smarting and photophobic.¹

Mouth.—Tastes nasty, slimy and bitter.¹

Tongue.—Coated dirty yellow.¹ Anterior half feels sore, as if scalded.¹

Heart and Pulse.—Heart's action somewhat reduced in frequency.¹

Stomach.—Qualmishness, with belching of gas.¹ Gnawing hunger in morning.¹ Faint sickness at stomach in morning.¹ Anxiety proceeding from the stomach.¹ Sense of a load at epigastrium, with a sickening sensation from pressure.¹ Appetite decreased, though eating as usual.¹ Fulness below epigastrium keeps him awake after retiring.¹ Gnawing hunger, with heavy weight at stomach.¹ Feeling of repulsion after food enters the stomach.¹ Stomach felt heavy all day.¹

Abdomen.—Increased peristalsis.¹ Bloating of abdomen, with frequent passage of small quantities of hot flatus.¹ Flatus somewhat offensive.¹ Cutting pain just above umbilicus, not relieved by bending forward.¹ Slight pain, relieved by supporting abdomen with hands.¹ Faint, heavy, gone feeling in epigastrium, > by going out of doors.¹ Intestines feel as if they might break by bending, which causes pain across transverse colon, as if due to fixed gas.¹ Feels as if pushed outward when lying on side.¹

Stool.—Sphincter ani feels a little lax, as if a purgative had been taken.¹ Hard, dark-brown stool, passed only by considerable muscular effort (primary).¹ Large, difficult, hard, brown stool.¹ Normal (fifth day).¹ Pressing desire for stool, without pain, after eating; obliged to hurry home to pass a thin, free, fecal stool, filled with brownish lumps (ninth and tenth days).¹

Urine.—Oily pellicle on U.¹

Sleep and Dreams.—Sleeplessness from rambling thoughts.¹ Dreams almost as soon as eyes are closed to sleep.¹ Restless sleep, with horrible dreams.²

Chill, Fever and Sweat.—Slight glow of heat over whole body.¹ Hyper-sensitive to cold.¹

Generalities.—Weariness, with disinclination to arise in the morning.¹ Tired, languid feeling of general malaise in evening; < sitting or standing, > on moving about.¹ Languor.¹

Nerves.—Noises disturb greatly.¹ Nervous restlessness.²

Back and Neck.—Aching in nape of neck, with stiffness.¹ Stiffness whole length of spine, with a sore aching from tenth dorsal to last lumbar vertebra, extending outward to crest of ileum.¹ Dull, lame aching deep in muscles of thigh.¹ Awoke in morning with tired aching along entire spine, shoulders and hips.¹ Sticking pain in lower angle of right scapula.¹

CLINICAL.

Huchard (*loc. cit.*) says: In man the infusion of Adonis may be given in 4 to 8 *grammes* (1 to 2 drachms) doses four times daily, or, still better, in pill form, 4 to 5 daily of $\frac{1}{10}$ grain each. He reports several cases where Adonidin has been successful. One case of interstitial nephritis, with galloping heart sounds, anasarca, and beginning asystole, in which *Sparteine* had been given in vain, Adonidin induced a profuse diuresis, and an unquestionable improvement in the patient's condition. For some time, however, the drug had to be discontinued on account of the diarrhoea and vomiting it produced. When the quantity of urine fell off again, the remedy was again exhibited, and again relieved the most urgent symptoms. The diuresis rose 2 to 4 quarts daily, the arterial pressure grew stronger, the pulse more regular and full, and the œdema and cardiac frequency receded. In a woman having a mitral affection, but no heart-murmur, the drug produced a very audible systolic murmur. In typhoid fever, where great reduction of arterial pressure exists, Huchard thinks the drug might be used advantageously to raise the pressure.

Dr. Hale remarks that: "Under the influence of Adonis in cases of *dropsy*, the cardiac contractions increase in force, the pulse becomes less frequent, more regular, and full, the urinary secretion increases from 200 to 2000 or 3000 cubic centimetres, and albumen and casts disappear from the urine.

"In cases where the dropsy was due to a disturbance in the compensation and activity of the heart, this remedy acted very satisfactorily. The heart-beat increases in force, and the size of the heart rapidly diminishes; the heart-sounds and murmurs, especially the pre-systolic and systolic in stenosis, are more marked and distinct. The heart-rhythm is more regular and somewhat slower, and, in most cases, the pulse-wave fuller and slower. The urine increases from 300 to 3000 cubic centimetres, a tenfold increase of the watery element. All deposits disappear, the specific gravity diminishes, and the urine has a very pale color. There is an absolute increase

of the chlorides and urates, the body-weight diminishes, and the œdema decreases rapidly. The dimensions of the liver increase, cyanosis and dyspnœa disappear, and respiration becomes full and regular.

“Adonis is indicated in cases of (1) *endocarditis*, with *valvulitis*, when the heart-muscles are endeavoring to overcome the valvular obstruction, and need the aid of specific (heart) remedies to increase the tonicity of those tissues; or (2) when there is impending or actual dilation of the heart from a giving way of the muscular fibres. This condition is marked by diminished force of the heart’s action, with lowered blood pressure everywhere, especially in the kidneys, decreasing their functional activity.

“It has been found potent in *secondary* heart disease, following Bright’s disease, when we find a diminished action of the heart, pulse irregular or intermitting, passive venous stasis, dropsy, etc. A typical case from our hospital records* is as follows: A common laborer, with chronic valvular disease, with dilation. After the use of Adonis the heart diminished in size, the congestion of the lungs, well marked, almost disappeared, the œdema of the legs and the ascites disappeared entirely, palpitation of the heart and dyspnœa diminished so much that the patient was discharged from the hospital and returned to work.

“The dose of Adonis, when given in infusion (1 drachm of the herb to 12 ounces of water)), is a tablespoonful every two hours in severe cases; in chronic cases every four hours. Of the fluid extract the dose is 1 to 2 minims, or increasing from 5 to 10 drops. It is said to be more liable (than *Digitalis*) to cause gastro-intestinal irritation, nausea, vomiting, and diarrhœa in large doses.”

Dr. Scudder says:† “The influence of Adonis is somewhat like *Digitalis*, but lacks the unpleasant features of that remedy. Its tonic influence upon the heart is most marked. In one case the heart-beat ranged from 50 to 60 per minute when it should have been 70 to 90; very feeble and frequently irregular; at times dizziness, partial loss of consciousness, and, twice within a week, syncope. A single day’s use showed marked improvement, and within a week the pulse had come up to 70 per minute and regular. In this case the trouble was evidently due to over-exertion—heart strain. I have only used the remedy in a few cases, but I have used it singly, and have watched its action carefully. From what I have seen I have hopes that it will surpass *Digitalis* as a ‘cardiac tonic.’ I use it in small doses. 10 drops of the tincture are

* All of Dr. Hale’s clinical results “were obtained in hospital practice, where the cases were closely and carefully watched.”

† *Eclectic Medical Journal* November 1887.

added to 4 ounces of water, and a teaspoonful is given every three or four hours."

Dr. Sydney F. Wilcox reports the following cases in person:

CASE I.—A gentleman of about fifty-five years, in last stages of Bright's disease. Was delirious, with scanty, light-colored urine, of light specific gravity. Under Adonis, in doses of 5 drops of the tincture three times per diem, the urine greatly increased in quantity, while the specific gravity increased to 1012, and the brain symptoms disappeared entirely.

CASE II.—A woman of about sixty years; chronic Bright's disease. Had had several uræmic convulsions, but under Adonis did not have another until just before death. In this case the Adonis was given for over two years with the result of keeping the quantity of the urine up to about the normal amount, but it gradually became high-colored, and lost in specific gravity, which came down to about 1000.

Dr. T. F. Allen, in a manuscript note, says: "Adonis is most valuable in cardiac dropsies. The tincture, given in 2-drop doses every two to four hours results, in about two to three days, in a free action of the kidneys, and the heart becomes stronger, etc. The effect of the drug is slow in coming on, but persistent when gained."

Further provings, showing the action upon the heart itself and the urinary organs in conjunction, are greatly to be desired.

SOME PROVEN CURES WITH GOLDEN ROD.

Solidago virgaurea, Linn.

BY M. GUCKEN, EUPEN.

THE Golden rod is in homœopathy, according to my opinion, not as much made use of as it deserves. Foh. Gottfr. Rademacher, who has many admirers among us, says, in his *Justification of Experience in Medicine*, about *Virgaurea*: "This herb is a very old and good kidney medicine. It is a specific for kidneys, and brings the patients back to the normal condition." I have used the Golden rod for a long time, and have to make favorable reports. The results of extensive homœopathic proving of this remedy on healthy persons cannot be found in our literature, but a Würtemberg physician, Dr. Buck, has given us a list of cures with the Golden rod in the popular homœopathic paper edited by Dr. Bolle, which wholly confirms the statements of Rademacher, besides the cases reported by Dr. Buck.

According to this list, *Virgaurea* is especially adapted for scrofulous subjects; at the same time other constitutions do not exclude the use of this remedy. In the first place, *the condition and the action of the kidneys and the quality of their secretions* are to be considered in the selection of this remedy. The symptoms on the part of the kidneys and the urinary organs, which point to *Virgaurea*, are as follows:

Pains in the kidneys; region of kidneys painful upon pressure; feeling of enlargement and tension in the kidneys, also pains in the kidneys which extend forward to the abdomen and to the bladder. Dysuria, difficult and scanty urination; urine dark, red-brown, with thick sediment; stone and gravel, albumen, blood or slime in the urine; urine dark, with sediments of phosphates; slightly sour, neutral or alkaline; urine with numerous epithelial cells or small mucus particles. Epithelial cells with gravel of triple phosphates, or phosphate of lime. Bright's disease.

Side symptoms which point to this remedy:

Skin.—Scrofulous rash; little blotches on hands and feet, itching very much; very obstinate, itching exanthemas; exanthema of the lower extremities without swelling of the inguinal glands, but with disturbance in urinating (catarrh of the kidneys).

Sleep.—Insomnia.

Fever.—Rheumatic fever; very frequent pulse; high fever.

Head.—Headache.

Eyes.—Scrofulous, herpetic inflammation.

Ears.—Sudden deafness, with ringing in the ears and albuminous urine.

Nose.—Dry; the inner surface of the nose covered with blood-crust; scalding and very scanty brown urine.

Mouth.—Flat ulcers in the mouth and throat.

Gastric: Stomach, Abdomen and Stool.—Continuous bitter taste, disturbing the rest, especially nights; heavily covered tongue, which does not become clean in spite of the use of anti-gastric remedies, and only cleanses itself at the return of abundant urinating; chronic catarrh of the bowels; diarrhœa, with scanty, dark urine; dysentery; costiveness; sensation of pain in the abdomen on both sides of the navel, upon deep pressure; physconia of the abdomen by gases; severe pricking in both hypochondria to the region of the kidneys, reaching to the lower extremities, with continued bitter taste in the mouth, especially at night, with very scanty brown and sour urine.

Female Parts.—Hæmorrhage, chronic leucorrhœa, in connection with copious, watery urine and sediments of mucus particles and uriferous tubules; epithelium.

Respiratory Organs.—Heavy expectoration in coughing; croup,

with little blotches on the hands and diminished urine; chronic catarrh of the lungs; continuous dyspnœa; periodical asthma, with nightly dysuria.

Trunk and Lower Limbs.—Rheumatism of the intercostal muscles; chronic pains in the loins; limping, dragging gait; rheumatic pains in the legs; pains in the thighs; the legs can be moved horizontally, but when moved perpendicularly they feel lame.

In connection with these symptoms the description of a few cases of sickness, in which *Virgaurea* proved itself, might be of some interest.

During the spring of 1886 scarlet-diphtheria appeared in this place. On March 28th I was called to attend the 8-year-old son Matthias, of Wernerus, a weaver, in the hamlet of Niepert, that showed symptoms of the above disease. Cynanche was at a high degree, and the throat was filled with diphtheric coating, so much so that I had reason to fear the worst, on account of the accompanying fever and of the choked-up condition and weakly (scrofulous) habit of the patient. But the well-known remedy of Viller, given alternately with *Belladonna*, proved itself also in this case, and the symptoms in the throat assumed, after a few days, a less dangerous character. Not so with the fever, which gradually assumed the form of typhoid, and ran very high, while the scarlet-rash grew quite pale. On the morning of April 5th, his temperature was 42.5° , the patient unconscious, the pulse weak and intermittent, the feet swollen. Upon inquiry the parents told me that the boy urinated very little. His urine, of which I had taken a quantity the day previous for examination, contained a considerable amount of albuminous sediments. I prescribed *Kali arsenicosum* in the fourth centesimal potence, which had been recommended in similar cases by Dr. Hock in the international homœopathic press; but, although the temperature decreased after using this remedy, the dropsical swelling of the feet increased more and more, and after a few days the entire body of the patient was swollen very much. The discharge of urine grew continually less. Under these circumstances I examined the patient again thoroughly, and found great sensitiveness of the kidneys against pressure, in spite of his otherwise apathetic condition. These symptoms reminded me of *Virgaurea*. This remedy was immediately applied, and I had no reason to regret it. Within one day the urinal discharge became profuse, the general condition improving at the same time; the peeling off took place without further trouble, and after the patient had taken *Virgaurea* for two weeks, and, on account of anæmia, for one week three times a day, a dose of *Ferrum peroxydatum* in the 2d trituration, he had so far

recovered that I did not consider it necessary to give further medicine.

In 1885 a 45-year-old Belgian mine official (his work was office-work) consulted me on account of sleeplessness and pain in the back. The patient had no other complaints, only he carelessly added it sometimes took him a long time to urinate, because of want of the necessary pressure. He considered this weakness as the result of gonorrhœa, from which he had suffered years ago. The sleeplessness, for which he had tried all remedies possible, would make itself known from the time he went to bed until 3 o'clock in the morning, at which time he could get sleep, but not a refreshing one, and on arising he would feel very tired, especially in the upper part of the thighs, and then would commence the pain in the back, which extended to the loins, and lasted until he went to bed in the evening, without being prompted by external influences (warmth, cold, rest, motion). Also sleeplessness nights, pain in the back daytimes. At first I considered *Nux vom.* proper, and I prescribed the same for the patient in the 3d decimal potency, 4 drops twice a day. At the same time I requested the patient to bring a sample of his urine at his next visit. After some time he came back with the sample, and declared that the prescribed remedy had not shown the least effect.

The urine was dark and slimy, reddish, slightly acid, and had at the bottom of the bottle brick-dust settlements. Heat did not show albumen, but by heating it the dark urine became clearer, and contained also salts of uric acid. I examined the kidneys of the patient, found them sensitive against pressure, and the diagnosis pointed to chronic catarrh of the kidneys. Sleeplessness, pain in the back and the tired feeling in the upper parts of the thigh were additional symptoms of this malady, and I determined to use *Virgaurea*. The patient took this for three months three times a day, after which he wrote me that he was entirely well. About a year afterwards he had a relapse, but not in the form of former symptoms, but in the form of ischias, against which disease Golden rod proved itself beneficial.

In conclusion, may be mentioned a double case of the curative power of *Virgaurea*, which also contributes to the heredity of diseases. Some time ago, the wife of a farmer, 53 years old, asked me for a prescription for a trouble which she had had for twenty-six years, since her first confinement. The patient, a stout and fresh-looking person, made the following statement: After the confinement, which was very laborious, and which was followed by prolapsus uteri, the latter still existing, her legs began to swell, and an itching rash broke out by degrees. Menstruation had always come at the proper time, but suddenly stopped six months ago.

Since that time the itching had become almost intolerable, the legs

more swollen and always cold, but she did not feel a continuous heat in her head. The appetite was very poor; she had always a bitter taste in the mouth, and the tongue was thickly coated. At the same time she had rising from the stomach, as if she should suffocate, and at the least exertion she lost her breath. She urinated very little, and this mostly at night. My question, if there were pains in the back, was answered in the negative, but the kidneys of this patient were also sensitive against pressure. The appearance of the lower limbs of the patient frightened me. From knee to heel they formed a bluish-red mass in the shape of a stovepipe, which were covered with little blotches and crusts. This kind of an eruption, together with the other symptoms, led me to the use of *Virgaurea*, the prolonged use of which, although it did not effect a cure, produced a mitigation of the whole body, so that the lady induced her eldest son to come to me for help. This man had also trouble in his lower limbs not unlike his mother. He had a year ago passed through a severe throat difficulty, after which his lower limbs began to swell and to itch; they were also tainted bluish-red and covered with vesicles; he also complained of scanty urine, and his kidneys were sensitive against pressure. What better could I, under the circumstances, prescribe than *Virgaurea*?

The result was good. After a few months the patient had no more difficulty.

In the cases above mentioned, I prescribed the 3d decimal dilution of the tincture of the whole plant of Golden rod. The water of Golden rod, recommended by Rademacher and others, I have never tried.

HOMŒOPATHIC THERAPEUTICS.

Cancer of the Tongue—*Kali Cyanatum*—By *Dr. E. T. Adams*, of Toronto, Ontario.—T. S., fifty-eight years old, an incorrigible whisky-drinker, had been under the treatment of many allopathic physicians, and finally was treated by a very celebrated surgeon, and every one's diagnosis was: cancerous swelling; prognosis, the most unfavorable. A swelling on the right side of the tongue so deep that the first joint of the thumb could be laid in it.

He was not able to take solid nourishment, and fluids only with great pain. He was so weak that he could hardly move out of bed. Under Cyanate (which dilution?) he recovered so rapidly that the celebrated surgeon, not knowing that a homœopathic physician treated him, had hopes of curing him.

In about eight days he gained so much strength that he could undertake a long walk before 6 o'clock in the morning. Finally, I

saw him eat dry bread and cooked beef with comparative ease and leisure. This good surgeon relieved him of his unbelief, and, appealing to his ignorance, got his consent to have the tongue operated upon. This was done; he only lived seventeen days, and died after a hard struggle; this in relation to the scientific treatment.

Kali cyan. deserved all confidence as to the gain in the case, and I am morally convinced that it would have effected a cure.

Dr. J. D. Tyrell adds: A lady of my acquaintance was so sensitive that each dose of this remedy made her condition worse, or brought on laryngeal catarrh again. This fact cannot be denied, and it is therefore our duty to try this remedy and to verify the pathogenesis. Kali hydrocyanicum, or, in short, Kali cyanatum, must not be confounded with common Cyanide, since it distinguishes itself from the latter in chemical as well as in physical and therapeutic relation. The chemical formula is KCN, as every one knows, while that of the Cyanate is KCNO.

(To this the editor of the *Medical Advance* adds, that this remedy is worthy of a careful examination, not to cause cancers of the tongue, but to acquire the subjective and objective symptoms, in accordance with which we can use the remedy successfully in treating our patients.)—Dr. Th. Kafka, *Allg. Hom. Zeit.*, 26, 1889.

Contribution to the Pathogenetic Effects of Chininum Arsenicosum.—In the eleventh number of the *Omœopatico in Italiano*, organ for the Institute Omœopatico Italiano, Dr. Bonino, of Turin, president of the society, has contributed very materially to the knowledge of the pathogenetic effects of Chininum arsenicosum. He, of great knowledge of remedies, has proven himself also a good, self-sacrificing prover of remedies.

In the introduction he says: Among the medicines which the homœopathic physician often prescribe rather according to induction than according to precise knowledge of the pathogenetic effects, we may count the above remedy.

Dr. Bonino, endowed with a nervous-bilious temperament, subject to all kinds of neuralgic pains, brunette, 41 years old, took, on March 2d, at 10 A.M., gr. 0.02 of the first decimal trituration of Chininum arsenicosum. Outside of a few indefinite pains in the abdomen and in the bones, which might possibly be attributed to the dry winds prevailing at the time, he was not aware of any disease, and ate dinner with his customary appetite. At 5 o'clock of the same day he took the same dose as above. One hour afterwards, dryness in the roof of the mouth, gnawing and nausea as before vomiting (similar to the condition at the commencement of intoxication brought on by smoking tobacco). After a half hour this nausea disappeared, and the night passed off quietly.

March 13th, 7 A.M. Another dose; after one hour frequent gnawing in rapid succession; momentary dizziness; inside griping around the naval, as before a purgative; appetite not essentially changed. At 4 o'clock, a second dose; soon after a deep, dull pain in the left upper thigh, which he had already felt on the day previous. After one hour, dull pain in the left temporal region at the articulation of the lower jaw, and in the hip of the same side; a tightening sensation in the mediastinum, in front, at the left of the breast-bone; flying, stinging irritation, especially on the scalp; shooting pain deep along the whole of the right lower extremity, especially while resting. At 5 P.M., repeated gnawing; general chill and cold; dull headache; pain, as if from a flatus wedged in the left flexure of the colon; pulse 55 in a minute, otherwise 61; general expansion and contraction; penetrating pain in the *regis temporo-frontalis superior sinistra*; pain in the right astragalotarsal joint, as if both heads were drawn in opposite directions; it ceases while walking. After the feverish cough in the first stadium, *i.e.*, the chill, there was no reaction of perceptible warmth, and everything gradually disappeared in the evening.

Matters of business forced Dr. Bonino to stop the proving for a time, but he took it up again on the 24th of the same month, with a dose of *Chininum arsenicosum in natura* of gr. 0.05. Almost immediately (10 A.M.) followed trembling of the facial muscles, especially of the *orbicularis palpebrarum*. After an hour, stretching, repeated yawning, nausea, complete relaxation of the muscles, especially of the lower limbs, as if from tobacco poisoning. While walking, dizziness, collapse, the same as after an acute and severe sickness; urine watery; pulse 53; dislike of mental occupation in spite of sufficient clear-headedness. Toward noon nearly all the symptoms disappeared. He eats from a feeling of hunger, but with little taste for the vitals.

In the afternoon of March 25th, a new dose, 0.05. All the evening no symptoms of consequence, except an annoying feeling of fatigue in the right shoulder, as if the humerus had been torn out of the articular cavity.

March 27th, at 11 A.M., 0.05. Sudden attacks of vertigo, as if he would be thrown on the ground, which increased on looking up. Deep pains in the wrists, as if the periosteum were affected; motion does not increase this, but rather diminishes it. Sitting down, the head seems to be covered with an iron cap; after three-quarters of an hour extreme fatigue, with a desire to lie down. Urine watery. Numbness of the legs after hardly having laid down; the pain of having the arm torn out (on the right side) returns.

March 29th, at 11 A.M., gr. 0.05. Almost sudden, indescribable, general nausea, with attacks of flying heat and waning away of

strength, principally in the lower limbs; feeling of debility, as after long fasting; colic pains around the navel. At 7 P.M. (after supper), pain in the epigastrium, as if from a foul stomach, without nausea; the action of the abdomen is inclined toward costiveness. The day following, stiffness of all bones, even while in motion. Mental faculties dull, with ringing in the right ear. The night between March 30th and 31st was disturbed by a severe pain in the stomach, which repeated itself several mornings, as if the stomach was pushed against the spinal column; eating would relieve it for a few moments.

On April 12th, at 3 P.M., Dr. Bonino's took 10 centigrammes of the medicine *in natura* at once. Almost immediately tightening pain in the region of the stomach, and after one-half of an hour copious bleeding from the nose. All the evening, on different parts of the body, burning, fluttering beats, as in the use of electricity; the night was full of visions, and heavy sleep until morning. Stiffness of the bones the next day, besides pains deep in the joints, which were not changed by moving about.

April 14th, at 11 A.M. He took 1 gramme of the 3d decimal at once. Pain in the left wrist, with stiffness of the arm on the same side. Feeling of emptiness in the cardiac region, as if from long fasting. Congestion towards the head, especially on the left side, with ringing in the ears, like the sound of bells. The hot and tickling fluttering upon the surface of the skin came back, and pains deep in the legs, which are severer when resting. The night was quiet; toward morning frequent bad-smelling flatus, without stomach-ache; general debility, with excessive hunger. Not disposed to studying or walking.

April 17th, at 7 A.M., 0.05 *in natura*, and at 10 a new dose. Very soon the caducity of the whole muscular system made itself manifest. Ache around the navel and in the ileum; contracting gastralgia, corresponding with cardia, as if pushed up from pressure; tasteless eructations give relief only for a moment. Pain in the right knee as if it had been hurt by falling, lasting all the evening and yet the next day, hindering from sleeping; pressure upon the tuberosity tibiæ, which has swollen somewhat, increases the pain. Pains of spraining in the deep cavities of the cruralis and biceps, first on the right and then on the left side. Gastralgia is relieved by eating supper, but the depression and the lassitude of the bones continues until the next day; sad and afflicted feelings. Taste metallic-bitter, without changing the taste of victuals. Burning pain, as in the periosteum of the left elbow; cramp-like pulling in the gemellus sinister. Gastralgia alleviated in the evening, returns more severe in the morning, as from indigestion caused by eating sour fruits or poorly baked rye bread; at the same time neither

nausea nor bad taste. On April 19th, the pain in the stomach continued, as if the stomach had contracted itself around an uneven stone. The pain of fatigue in the right wrist also returned.

Dr. Bonino now attempts to arrange the symptoms which he had observed, and gives the following conclusions:

1. The symptoms of disease make themselves more perceptible while at rest, in the morning and when the stomach is empty; motion seems to alleviate the symptoms of vertigo; eating soothes gastralgia.

2. The effect of *Chininum arsenicosum* manifests itself directly upon the stomach, plexus solaris, the articular ligaments, the periosteum, the deep muscular layers, brain, colon, heart and, lastly, upon the skin.

3. It will therefore find homœopathic use in difficulties from smoking tobacco; in indigestion from unripe fruits; in gastralgia caused by eating coarse victuals or poorly baked bread—being worse in the morning, with the need of rising from the stomach, which relieves momentarily; in chronic rheumatism of the joints, without swelling; in tertiary syphilis, if located in the periosteum; in colic pains from strangulated flatulence; in periodical fevers, with predominant chills, little thirst and continuous, almost convulsive, yawning; in the effects of severe, depressing influences upon the mind, and in recovering from long-lasting sickness. The symptoms of the heart are not clear enough to draw conclusions therefrom for therapeutic purposes; the same is the case with the skin. In conclusion, it may be said that the relaxation of the limbs, as the result of slow circulation of the blood, will find a remedy in *Chininum arsenicosum*.

These are the results of the provings made by our worthy colleague, Dr. Bonino, on his own person, with such self-sacrificing perseverance and conscious truthfulness, and we are, therefore, under great obligations to him for those results, and also for the proper compilation of the indications of so valuable a remedy, especially if we consider how few men gave themselves up in such a self-sacrificing way in the last decades in Germany.—*Allg. Hom. Zeit.*, July, 1889.

Calcarea Carbonica in Gall-stone Colic.—The last issue of the RECORDER contained a short translated article upon *Calcarea carbonica* in gall-stone colic. Here is also a confirmation, obtained from a friend, of its usefulness in this condition: A man, forty years old, suffered from periodic attacks of gall-stone colic for quite awhile. Iridin ($\frac{1}{2}$ -grain doses), *Dioscorea* (3x), and Chloroform relieved temporarily. On being called to see him during an attack, *Calcarea carbonica* 4x was administered by the physician, attention

being called to it by green vomiting and diarrhœa, chalky stools before attacks and green after. The remedy gave him slight relief during the immediate attack, the next was less violent, and they finally grew lighter and lighter, ceasing entirely at the end of a month, and not bothering him since. The prescription was in 1886. (Communicated.)

P. AND P.

Aurum—A Case from Practice.—Frau W. K., the wife of a farmer, forty-two years old; large, blonde, more corpulent than lean; has had eight children, the last two years ago, and menstruates regularly yet. She came to me June 18, 1888, and said she had suffered for two years from vomiting, making its appearance every day four to five times. For several years she has suffered from a pain in the region of the spleen, as well as in that of the stomach, which has been so bad that she could do but little about the house, the much more so as the vomiting was awakened and increased by every exertion. Examination revealed, in scrobiculo cordis, a dulness and tension, passing over into the liver region. The uterus was strongly retroverted; the fundus uteri enlarged and resting heavily upon the examining finger. Two indications, the dulness in the scrobiculo cordis, which may have been due to a swelling of the left lobe of the liver, and the womb trouble, called for Aurum, and I prescribed it as Aur. natr. muriat. 3x trituration, three times daily. On the 3d of July the patient reported the pain in the stomach and the vomiting were better, yet the old pain in the splenic region troubled her very much. Aurum was continued and alternated with Ceanoth. Americ. 3, 2 grammes in 150 grammes of water, one teaspoonful three times daily. August 1st, the dulness and tension in the scrobiculo cordis had disappeared, the vomiting had not returned, the pain in the splenic region gone, the fundus uteri less swollen. She did her own house-work now, suffered no longer from vomiting, and was satisfied with her condition. She was supplied with enough Ceanoth. americ. 3, for about fourteen days, and told to report if she had any return of the trouble. I have since heard of her, through other patients, that she is well—certainly a happy result in such a condition as hers was.—Dr. Amberg, in *Allg. Hom. Zeitung*, June 6, 1889.

P. AND P.

ITEMS OF GENERAL INTEREST.

A New Antidote Against Morphium.—Prof. Bokai believes to have found a new antidote against Morphium in Picrotoxin. The two substances act in opposition to each other upon the centre of respiration, the action of which is influenced by Morphium in a

paralyzing, by small doses of Picrotoxin in a stimulating manner. The diminution of the pressure of the blood plays also a rôle in cases of Morphium poisoning, while Picrotoxin has the faculty to stimulate the vaso-constrictor centre of the medulla oblongata. Finally, both substances affect the hemispheres of the brain in opposite directions. Bokai believes that Picrotoxin will be of use as a substitute for the preparations of Nux vomica, and, further, as a preventative of Chloroform asphyxia.—*Vienna Weekly*, 1889.

Calomel Intoxication, With a Fatal Result After Subcutaneous Injection.—Prof. Runeberg found, in dissecting a thirty-four-year-old feeble lady patient, who died, after three Calomel injections, of dysenteric symptoms of the bowels and strong stomatitis, that the mucous membrane of the large intestine, and especially on the top of the wrinkles, was covered to a great extent with hæmorrhagic spots, and with penetrating diphtheritic infiltrations.

In some places the diphtheritic infiltrations were cast off, leaving deep ulcers. In cutting into the cluns there were found two cavities, one of which contained two tablespoonfuls of thick, grayish, purulent fluid, in which ample quantities of Calomel were discernible. Runeberg, giving a number of other cases with a fatal result, advises caution in the use of subcutaneous injections of insoluble preparations of Calomel, and condemns them decidedly for feeble, anæmic individuals.—*Gen. Med. Central Gazette*.

Immunity of Workers in Lime-kilns Against Phthisis Pulmonalis—By *Dr. Louis Halter*.—Near Lengerich, phthisis pulmonalis is spread very largely among those people who do not work at the kilns, while the lime-workers seem exempt.

Two important agencies have their influence: (1.) A dry ground for work, and a dry, very hot air of 41° to 70° C. (2.) Fine lime-dust in quite large quantities.

Although lime-dust is considered by masons and carpenters hurtful, this injurious effect probably comes from sandy and other substances which are mixed with lime in tearing down buildings.

The workers in lime are endowed with good tracheæ and lungs. Burnt lime is transformed by absorption of water into oxyhydrate of lime, but also immediately by the evaporating oxygen into oxygenous lime. On account of the great heat in the oven the workmen relieve each other after from five to twenty minutes (according to the temperature of the oven). Even when working out-doors the men receive lime-dust enough. This stuff covers, in windy weather, even after one-half hour or one hour, their clothes in visible quantities, and penetrates even their watches.

Perhaps the small quantities of oxygenous lime which remain in the lungs have the effect of chalk upon existing tuberculous secreted substances. There is also the general opinion that the calcifications in the tissues emanate from the blood.

The successes of Lipp Springs and Inselbad are partly attributed to the water containing much lime; it also dissolves mucin. As to the second agent, it is known that the minimum of phthisis is found on a dry ground, and the frequency of the disease stands in direct proportion to the humidity of the soil.

Further, also, the hot air seems to have its bearing upon the immunity. Therewith was most always found a relative moisture of under 0 per cent. (with the patent hygrometer of Klinkerfues). This dryness takes place also in the proximity of the ovens. The sections of country of India, which are known for their dryness, are the least infected by phthisis.

The same conditions can be proven in regard to countries and health resorts which are visited against phthisis. The Riviera has, like Cairo and Meran, 60 to 70 per cent. of moisture, and even Davos has, at noon, 56 per cent.; and at 37.0° C. (temperature of the air exhaled), showed an average relative humidity of 11 per cent.; Denver, Col., an average of 47 per cent.

Beside the becoming thinner of the air in consequence of the elevation, there is also the diminution of moisture in the air connected therewith of the utmost importance, since the process of decomposition does not progress as well in a dry air, either warm or cold, as in a damp one.

As well above as below the region of the clouds, we meet in Switzerland a very small number of deaths caused by phthisis, since only in this region of the clouds (1100 to 1500) the air is very damp, and from this cause the frequency of phthisis.

Weber says: The drying of the air-tubes, through air containing little moisture, carries on the already formed disease process. The thick catarrhal matter becomes dried, and changes into cheesy and calcareous matter, and the inclination to absorption and to pyæmic processes, and the closely-related miliary tubercule becomes diminished. Also the bacillus tuberculosis perishes much easier in dry air than in moist. Kept in a moist atmosphere, the bacillus tuberculosis retained life as long as ten months, but under conditions of dryness they lost their vitality after two months, including the spores.—*Berlin Med. Weekly*, No. 36, 1888.

Powerful Effects of Cocaine.—A dentist injected under the gums of a nineteen-year-old, robust, somewhat chlorotic girl, who had, as she pretended, on account of severe toothache, not taken any nourishment for two days previous, and had not slept in two nights,

a $\frac{1}{4}$ syringe of a 15 per cent. solution of Cocaine, also 0.1125 Cocaine in two doses in short intervals, and then extracted the tooth without pain. It is stated that the girl, according to advice, rinsed out her mouth, which she did mechanically ; after that she turned pale and fell down, suffering from vehement convulsions, interrupted by short pauses. Immediately Amyl nitrate and cold poultices around the head were resorted to, but without material success.

When I saw the patient she was unconcious, without noticing any irritation, groaning, with a slightly cyanotic face, upon the lounge. The whole body, trunk and extremities were thrown about by severe clonic cramps, which lasted five hours, with gradually longer and more frequent pauses. The muscles of the face were not affected by the cramps. Pupils moderately large, and without reaction. There was no exophthalmus, the skin felt warm and dry. the temperature, though taken at this stadium under the arm, registered 38.2°. The pulse, which in the first stage could not be counted, had, later on, a frequency of 176 beats per minute. The respiration was 44. After the cramps ceased, the patient lay quietly for two hours, and the unconciousness continued. When she regained consciousness she stated that she had recieved the second Cocaine injection fully conscious, but ignorant of what happened thereafter. She could not stand up, broke down when erected ; could only sit humped up ; was unable to lift her arms and to press the hand when offered ; had intense photophobia, diminished sensibility of the skin, anæsthesia of the mucous membrane of the nose and the oral cavity, entire loss of smell and taste, dryness and burning in the throat, thirst, and severe choking. Pulse, 132 ; respiration, 28.

Then appeared cardialgia, first less striking, but the following days rising to an excessive height. Next came retention of urine during twenty-four hours, whereupon followed normal secretion of urine after the first scanty, concentrated urine had been discharged. Sleeplessness during thirty hours ; total want of appetite during four days. While the other symptoms, after two or three days, disappeared (after forty hours she could walk, with trembling knees), cardialgia remained six days. Permanent consequences have not shown themselves.

Amyl nitrate and cold applications upon the head were without avail in this case ; also the giving of large doses of Opium seems to have been without material effect. Be it said that the girl claims to have formerly always been well, a fracture of a bone and slight chlorosis excepted, and that she stoutly denies ever to have suffered from cramps. I did not succeed in gaining any information from the parents. The heart and other organs were healthy ; conditions of menstruation normal.—*Allg. Hom. Zeit.*, 1, 1889.

Spiræa Ulmaria Against the Bite of Mad Dogs.—In the month of January, 1887, those who had experimented with *Spiræa ulmaria* against the bite of mad dogs, were asked in the newspapers of Riga to give their experience.

I am in position to do so. On February 24th three dogs were bitten on my premises; one of them, a terrier, in the mouth, which is the most dangerous bite.

At the same time two dogs were bitten in my neighborhood, in two different houses, one in each. Both of the latter became mad, while mine remained healthy. I had given mine, for three weeks in succession, the root of *Spiræa ulmaria*, dried, pulverized, mixed with bread and milk, in doses of two teaspoonfuls every morning, if possible, on an empty stomach.

The two dogs of my neighbors were not treated in the same way, since the people believed that the mad dog had not been mad when he attacked their dogs, and his bite, therefore, was not considered dangerous. But, when one of them bit a hog, the root was given to the latter, also with good results.

Six years ago one of my dogs was bitten; I gave him at the time some of the root every morning for three days in succession, with good effect. This last time I gave the dogs more of the root for safety's sake.

On my last year's trip to the central part of the country, I was told of cures produced by the use of this root with people who had already shown symptoms of the disease. It is said that they took the root in large quantities; at the same time they bathed the wound with alcohol, containing the root of *Spiræa ulmaria*. Lettisch calls this plant *Wigrecschi*, and it is well known to the people under that name.—F. E. Stoll, Pastor at Dunamunde—*Riga Gazette*, May 26, June 7, 1887.

Those that know more about this, please give their experience. As far as I know, the idea is, that a dog bitten by a mad dog must of necessity become mad himself, but that a dog which has already signs of madness can recover, has as yet not happened. Neither is it known that bitten people, on whom were signs of madness, had been cured. Hahnemann says in *Arzneimittellehre*, vol iv., p. 45: Homœopathy will and must be able to often cure madness by means of *Hyoscyamus*; but cases are established beyond doubt, that people already mad have been cured by means of *Hyoscyamus*, *Belladonna*, *Stramonium*, *Cantharides*, given in homœopathic doses.

RIGA, May, 1888.

DR. LEMBKE.

Should anybody intend to use the root of *Spiræa ulmaria*, they would inquire after it in drug stores in vain. It cannot be found there, although the plant is found frequently. Against this the

veterinary surgeon of Riga, Mr. Lindenkampf, makes the following declaration in the *Riga Gazette* of May 18, 1888: "The madness of dogs is one of the most painful, and incurable diseases; besides it has the disagreeable and exciting feature, that it appears in different dogs at different spaces of time after infection. The period of incubation lasts from three to one hundred days. Whoever is not able to send his dog to an hospital for observation, can watch him himself carefully, and consult an expert at the first symptoms of anything unnatural."

One should think that, if a mad dog bite others, it makes a great difference whether he only makes an impression in the skin of the other dog with his teeth, or whether he makes a light scratch or a bloody bite. It is also to be supposed that, when several dogs are bitten sufficient to draw blood in quick succession, the teeth of the mad dog towards the last will be dry and without saliva, since the skin of those that had been bitten will partly wipe off the foam. Therefore, it is possible that, among the bitten dogs, those that are bitten last, though severely hurt, may not have been infected with the saliva, and for this reason remain healthy; still, under these circumstances every conclusion is made difficult.

Cocaine Poisoning.—Mr. T., a man twenty-seven years of age, an actor by profession, was a sufferer from periodic attacks of neuralgia of the third nerve. The pain was confined to the right side, and excruciating when an attack would come on. The neuralgia had existed for five years, and was supposed to originate in a tooth. This drawn, however, gave no relief. One evening, while suffering for some days from the attack, a doctor injected an unknown quantity of Cocaine (said to be $\frac{1}{2}$ grain?) with temporary relief. On attempting to eat his supper the pain came on with renewed fury. Before going on the stage in the evening an unknown (large) amount was injected into the back of his neck. He tried to go on, staggered out, and fell unconscious in the middle of the stage. The bystanders seized him and gave him brandy and coffee internally, which, together with vigorous rubbing, brought him to. He was cold (and when he fell he said an overwhelming cold, icy feeling came over him); his undershirt soaked in an icy perspiration; pale, weak, and unnerved. *His heart was extremely slow and intermittent, his pulse losing one beat in four.* His limbs were apparently paralyzed. In a short time he had recovered, and was feeling quite strong. The neuralgia had, in the meanwhile, disappeared and never returned.

A woman about to be operated upon for hæmorrhoids received an injection of 10 gtt. of a 40 per cent. solution of Cocaine into the hæmorrhoidal mass. There or four minutes after, she jumped up, ran about, and crawled under the bed; became perfectly unman-

ageable; seemed frightened and afraid, and cried out; she broke into a profuse perspiration; was pale; the heart irregular. In twenty minutes the effects had passed away. (Communicated.)

P. AND P.

Atropine Poisoning.—A little girl, fourteen years old, suffering with asthma, was given three doses of Atropine 2x (2 grains). Eight hours afterwards she broke out into a scarlet rash (smooth); there was extreme dryness of the throat, dysphagia, and *great photophobia*, with dilated pupils, which symptom was especially prominent; inability to sit up. Gelsemium antidoted the condition, and the next day recovery followed. *Atropine*, given to a man for asthma of the same kind (dry and spasmodic), produced dryness of the throat (three hours after), and in eight hours a scarlet rash broke out over the body. The pupil was dilated; there was photophobia, with a full feeling in the head, with pressive and throbbing headache. He was unable to work for a day or so. No antidote given, and effects wore off in two or three days. He could sit up; the child could not. In his case head symptoms were pronounced; in the child's the eye symptoms. In both the asthma was relieved. (Communicated.)

P. AND P.

Salicylic Acid Poisoning.—A man, suffering from chronic otorrhœa, with perforation of the drum, had crude Salicylic acid insufflated into his ear until it was full. He soon began to feel heavy-headed, with whizzing in the ears, dizziness, and a feeling as if his head would come off. He was restless, unable to lie down, and sleepless; hearing was gone. Improved in the course of a few hours; hearing better; and in two to three days he had recovered. Glonoine was given as an antidote. (Communicated.)

P. AND P.

Podophyllum—Poisoning by.—A young man, twenty-three years of age, chewed the end of a *Podophyllum peltatum* root off while examining some herbs. The next morning he felt well until he ate his breakfast, when he felt nauseated, *but did not vomit at all during the entire proving*. He *gulped* up wind (tasteless), and tongue covered with fur, like a yellow frost upon a board. Heavy feeling in the stomach, as if full; ached and seemed full of gas. He would rub it and try to force the wind out; if he could only pass wind he would, he thought, get relief. Headache through the forehead, dull steady ache, a long pull; eyelids heavy and desire to sleep; roaring and crackling in the ears; headache made worse by eating; no appetite; thirsty, and not relieved by drinking; water tasted brackish, and a bad taste in the mouth; a dry, slimy, brackish taste; weak and prostrated; looked pale, customary color gone; blue rings

around the eyes; knees ached, and thighs from knees to body ached, a dull, heavy, and indefinite pain; arms and back pained, also the lumbar region; urine red and dark; bowels moved three times the first day; they felt bloated; belly ached; bloated and dull ache; a steady ache, relieved for a short time by passing flatus or stool, and would come on in five to ten minutes. From 2.30 to 3.30 P.M., relief for an hour; came on again, but after dark relieved; pain aggravated by eating, which pain soon passed away. First day, three discharges—two in morning and one in afternoon. Next morning aroused at 4.30 by an *urgent desire* for stool, which hurried him out of bed, having barely time to avoid defiling himself. Thin and watery stool, whitish, no pain; another at 7.30 A.M. Pain commenced after breakfast, griping, doubling him up for a minute, he lying upon the sofa and drawing the knees up to his chin. Spasmodic attacks of pain after every passage, and three to four between passages, these occurring an hour and a half apart. At noon the stools became dark brown and watery; one at 2 P.M., one at 4 P.M., and one at 6 P.M. Quinia, 2 grains, antidoted the condition. The next day three stools passed, partly liquid. Though weak, he soon recovered.

A young lady, while triturating *Podophyllum peltatum* from the crude substance to the 1x, one hour after began to feel sick at her stomach; had pains in her bowels and diarrhœa. The pains were in the region of the navel, commencing and then increasing until a movement would take place, when relief would be obtained, followed by a weak and gone feeling in the bowels, lasting until another paroxysm of pain would come on. The diarrhœa was gushing, profuse, and watery, and accompanied with headache and anorexia. This train of symptoms was observed twice in succession while triturating the drug, she inhaling the dust arising therefrom. Recovery in fifteen to twenty hours. (Communicated.) P. AND P.

Chromic Acid Poisoning—Involuntary Homœopathy.—A strong and healthy man, forty-eight years of age, went to a dentist who applied *Chromic acid* to his gums. Three applications were well borne, but after the fourth one, where probably some of the Chromic acid got into his mouth and was swallowed, he was taken *violently sick*. An hour after the application *very violent pain* in the back of the neck, followed soon by *giddiness*, made its appearance, and the patient, to avoid falling, was obliged to support himself. Nausea, and soon vomiting of a quite green substance. His *face* was colorless, the extremities cool, the pulse thread-like but regular, and the pupil slightly contracted.

The *therapy*, consisting of the administration of *milk, albumen and champagne*, led soon to improvement, and the next day the patient felt entirely well.

[*Observation by Dr. Proll.*--How would a homœopathic physician answer if one of his patients, under treatment for a chronic disease, should ask as to a dentist putting anything into the tooth to be filled (or upon the gum)? Tisé, in *Journ. de Med. de Paris, Allg. Hom. Zeitung*, June, 1889.]

Dr. J. William White applied $\frac{1}{2}$ ounce of a solution of Chromic acid (100 grains to the ounce) to a mass of papillary growths in a venereal patient. After the application she passed a restless night, and called frequently for water. Thirst continued all the morning without fever, and nausea supervened. At 3 A.M. she was pale, with cold extremities, pain in the left hypochondriac region, and fear of approaching death. The axillary temperature was 99° F. She died at 6.30 P.M., twenty-seven hours after the application of the acid. The intelligence was unimpaired.

The necropsy showed numerous fine ecchymoses in the stomach. The liver showed nutmeg change. The kidneys were the seat of passive congestion; their capsules were easily stripped off; section of the vagina showed the mucous membrane dark-red in color, covered with a yellowish discharge, with no evidence of contact with the acid.

A chemical examination of the viscera yielded the following results: The kidneys and liver contained Chromium, probably Chromate of sodium, which is poisonous in doses of 1 to 3 grains. The rectus muscle was free from Chromium. The Chromic acid in this case had probably combined with the sodium carbonate of the blood, and formed Sodium chromate.—*Journ. of Cutan. and Genito-Urinary Diseases*, August, 1889.]

P. AND P.

A Contribution to the Differential Diagnosis of Cholera and Arsenic-Poisoning.—The writer investigated the influence of Arsenic (Tinct. Arsenic. Fowleri 1:90 and Acid. arsenic. 2, 0:1000), upon the growth of various kinds of bacteria, and found the growth of the bacteria calli commune, the bacillus of typhoid fever and the cholera vibrio to be completely brought to a stop, while the streptococcus pyog. aureus and the bacillus of anthrax continued to grow.

The experiments upon animals (made upon Guinea-pigs, cats and dogs) yielded the following results:

1. The pathologico-anatomical changes in poisoning with Arsenic are essentially a more or less violent gastro-enteritis. It is produced the same whether Arsenic be given per os or subcutaneously.

2. The pathologico-anatomical phenomena to be observed in animals poisoned by Arsenic are quite different from those seen in the algid stage of cholera Asiatica. The intestinal contents are, in both conditions, quite different; in no experiments were pure rice-water stools observed. In some cases in which the contents of the intes-

tines were sown upon gelatine there was no development of bacteria, but the rapid liquation of the gelatine which took place was undoubtedly caused by a ferment. Sometimes the contents of the stomach and bowels were colored with blood.

The condition of the intestines resembled more the typhoid stage of cholera than that which one sees in the first stage of cholera. It also differs from this, inasmuch as the most phenomena of inflammation are seen in the duodenum and in the upper part of the small intestine, while in cholera the ileum is most violently inflamed.

3. The profuse diarrhœa, which is the rule in cholera, and where the stool is exceptional and peculiar, justify the supposition that with this peculiar change in the intestinal contents, and in consequence of this also, changes in the kind and number of the bacteria do take place.

In poisoning by Arsenic the bacteria differ but little from those of the normal intestine; never are they so characteristic as in cholera. After very large doses of Arsenic the bacterial contents of the intestines are distinctly lowered. Colonies of vibriones are just as rare after Arsenic poisoning in animals as in men.—R. Koch, in *Allg. Med. Central. Zeitung*, 38, 1889. P. AND P.

VETERINARY DEPARTMENT.

Lameness in Horses.—Careful examination of the hoof in incipient lameness in horses is quite important, for among one hundred cases of lameness the cause of ninety-eight is surely to be found in the hoof. That this part is often sinned against, and many a horse-owner suffer damage through it, is well known, and the following case will illustrate my meaning:

A well-to-do gentleman in my neighborhood, possessing several riding and carriage horses, observed that one of them was strikingly lame, and finally it became so bad that it could not stand upon the foot, and apparently suffered severe pain. As I was not at home, another veterinary medical man, a friend of the gentleman, was called in. He, after a short examination, said the horse was suffering from a fracture of the crown-bones; a cure was impossible, and he told the owner to give the animal to be killed, and as he was to pass by a place where horses were slaughtered he would see to the matter, and free the animal from its pain. As the animal was very valuable, and the wife of the gentleman wanted my opinion also, I was again sent for, and saw the horse an hour after the departure of my colleague. Examination showed the tibial artery pulsating as if it would burst, and upon examining

with the forceps the toe seemed very sensitive. The temperature of the hoof was elevated. *I took my knife from my pocket and made a cut into the sensitive part, and the dark gray pus spurted in a bow-form out of the wound.* I then had the foot placed into a bath of luke-warm water, to which I added some Arnica (tincture), and gave internally Hepar sulphur, calc. 3x. every two hours, a piece the size of a bean, dry upon the tongue; and as the man came to kill the animal, he was sent back. In two days the animal could be shod, and in four days was driven out hitched to the buggy. Had the orders of the veterinary first consulted been immediately carried out, the owner of the animal would have suffered great damage through the superficial and frivolous examination.—H. Fischer, in *Zeitschr. für Hom. Theirheilkde*, 7, 1889.

P. AND P.

Retention of Urine (simulating Colic).—A gentleman, an acquaintance of mine, asked me recently to see his horse, which was suffering from colic. He had tried all remedies for colic, and, although the pains would be momentarily relieved, they would return again. The animal was in the stall, and had been seen to pass no urine. On visiting him I saw him in the stall, jumping restlessly about. Its look was bleak, and the entire body was covered with sweat. Aconit., Arsenic, Bell. and Plumb. acet. had been given; I gave at once Hyoscyamus 3x., ten drops every fifteen minutes, and in my presence, after the third dose, the horse passed a large amount of deep red urine. A quarter of an hour after it showed an appetite, shook itself, and was well. Retention of urine may cause an agony resembling colic. To persons alarmed it is sometimes mistaken for this. The pain is caused by over-distension, and drives the horse almost to madness. There is a wide, straddling gait, with total suppression of all discharges of urine, or only small portions are ejected.

Treatment: Camphor every four to five minutes for four times. If this fails, give Cantharis every thirty minutes for several times. If no benefit, Nux v. every half hour, and then less frequently.—*Zeitschr. für Hom. Theirheilkde*, 1889.

P. AND P.

Lameness is quite an annoying thing for a horse-owner, for it keeps a horse for more or less time in the stable, and causes much trouble, but, if treated homœopathically at once, is soon relieved. I was recently called to the stable of a prominent gentleman to examine his riding horse, which had suddenly become lame. Examining I found a lameness of the fetlock-joint, caused probably by a sudden slipping out of the joint. I had no difficulty in choosing the remedy, for from the physiological provings of Ruta it seems to concentrate a specific action upon the lower joints. I hence had

one part of *Ruta* mixed with ten parts of water, and a linen bandage wetted with the mixture laid around the joint, covered by a woollen one, and this to be renewed every two hours. Internally the beautiful animal received *Ruta* 3x. every two hours, ten drops. The animal's head was tied up high, so it could not lie down. The next day the animal was much better, and in eight days the horse was ridden by its owner.—H. F., in *Zeitschr. für Hom. Theirheilkde*, 1889 (2).

P. AND P.

Hæmoglobinuria.—This disease, feared by the country people as well as by the veterinarians, is one where allopathy stands almost helpless, while homœopathy, on the contrary, makes some brilliant cures; and, in five cases treated by this means the past winter, it has shown itself to be efficacious.

I shall give a short résumé of the symptoms characterizing this disease, making it easy to diagnose.

Horses, after long standing in warm stable, with good food and care of the skin, become weakened, and when they are put to work, especially in cold, raw weather, the one or the other animal falls sick suddenly; the horses become stiff, especially in the hindparts; they sway from one side to another, fall to the ground and cannot arise; they break out into a sweat, the extremities, ears and feet become cold, the horse groans, making now and then endeavors to get on its feet again, but they can only raise themselves upon the forefeet, the hindparts seeming to be paralyzed, and are dragged upon the ground. The animal stretches out its feet, and when the veterinarian arrives he finds it with extended feet, and in a violent fever. Often a swelling of the sacral region and the thighs and, less rarely, of the shoulders, makes its appearance. This swelling is hard and feels like a band, giving the horse a peculiar appearance. The peasant says "the horse has become fat." The pulse is small, frequent; the temperature elevated; the appetite decreased, yet this again appears when the fever gives way. The urine is not passed at all, or only with great straining, is black, like coffee, red as blood, or, in slight cases, like brown beer, smells very strongly, and is scalding; upon standing in a glass it becomes turbid, adheres to the glass, and contains urinary casts. The catheter must often be employed to evacuate the bladder, if the urine is not passed of itself.

One of the cases treated by me was a very grave one. The horse lay three days; raised itself the fourth, and upon the fifth day it stood upon its legs. The others were not so severely attacked; all were much swollen, were extremely stiff, and the urine was very turbid and black like coffee.

The treatment was the same in all cases. *Aconite* every hour

three times daily, Cantharis 3x, ten gtt., and, on the second or the third day, when the fever ceases, Arsenic 3x. External treatment consisted of damp and warm compresses upon the loins, good covering, luke-warm water and easily digestible food. All the animals recovered in twenty-four hours to five days.—S. Larsen (Denmark), in *Zeitschr. Journ. Hom. Thierheilkde*, 5, 1889. P. AND P.

Sprain, with Effusion.—Herr Count v. B. asked me to come and see a very lame horse of his, and examine it with regard to treatment. As I could not go at once to the stable of the gentleman, I learned the following of the stable-boy: The noble animal had returned lame from a ride, and a tumor had formed upon the left knee (behind), which increased in size and became very painful. The horse could scarcely stand upon that foot. A veterinarian living in the neighborhood, who was called in at once, declared the horse to suffer from an *effusion of "joint-oil,"* and it must be rubbed, and treated energetically at once, to which purpose a recipe was written. The Count had me called first and the rubbing *to be done according to my orders.* I ordered Arnica to be used in fomentations (one tablespoonful to a litre of water), and Arnica 3x, internally, ten gtt. every two hours, with the advice to tie the horse's head up high and not let it lie down, and I would visit it next day. The next day I went to the stable of the gentleman, and found the horse improved already. The foot could be stood upon, and was not so much favored as before.

The treatment was continued, and in about eight days the Count could ride the animal again. The veterinarian mentioned, said the horse *got well of itself.* If he could suppose this, how could he and why did he prescribe his sharp ointment and try to induce a cure thus?—H. Fischer, in *Zeitschr. Journ. Hom. Thierheilkde*, 1, 1889.

P. AND P.

Suppression of Urine—Equine.—A short time ago I was called to attend a horse which for about six hours had suffered from severe colic, and all remedies given by the proprietor (who is an admirer of homœopathy, and who uses its remedies in all cases successfully), had only given temporary relief, whereupon the colic always returned, and had at this time reached the highest degree. The horse appeared much frightened, perspired all over, the nostrils were wide open and the breathing was rapid. On examining the horse, the noise in the bowels had not wholly ceased, but the mucous membrane of the nose and of the mouth was red and quite hot. The gelding had the penis hung a little ways out of the tube and attempted to urinate, but soon gave this up.

I gave immediately a dose of *Hyoscyamus niger*, 3 decimal dilu-

tion, 10 drops to a half teaspoonful of water; after a half hour I repeated the dose. After the second dose the animal attempted to urinate, and discharged with a great effort, and, as one might say, with a groan which indicated good feeling, a great quantity of brownish red urine. After this discharge the patient reached for fodder, and appeared completely well. I have mentioned similar cases frequently, but consider it my duty to direct the reader's attention to Hyoscyamus, since Cantharides often does not show itself effective at all, and thereby much valuable time is lost.—*Zeit. für Hom. Thierheilk.*, 1889, 24.

BOOK REVIEWS.

Klinische Arsneimittellehre. Eine Reihe von Vorlesungen gehalten am Hahnemann Medical College in Philadelphia von dem verstorbenen E. A. Farrington, M.D. 1 Lieferung. Leipzig: Verlag von Dr. Willmar Schwabe, 1889.

This is the first instalment of 160 octavo pages of a translation by Dr. Hermann Fischer of the late Dr. Farrington's *Clinical Materia Medica*, published from the manuscript of Clarence Bartlett, M.D., and revised by Dr. S. Lilienthal. It contains, also, the "Memorial of Dr. Aug. Korndörfer," as published in the *Hahnemannian Monthly* of January, 1886. The work is neatly and clearly printed, and, when finished, will form the most fitting of monuments to perpetuate in Germany the memory of our beloved brother.

The Sixteen Principal Homœopathic Medicines. London: E. Gould & Son. 12mo., pp. 263.

This useful little manual of thirty (sixteen principal and fourteen supplementary) homœopathic remedies is admirably arranged for domestic and traveller's use, the ably compiled "Medical Index" pages being foot-noted throughout with a correspondingly alphabetical and concise manual of therapeutics. It would be difficult to conceive a more handy method of arrangement for the uses to which this book is designed.

Le Bord de la Mer; le Traitement Maritime et ses rapports avec l'homeopathie. Par le Dr. Martiny. Brussels and Paris. Pp. 132.

This brochure, by the editor of the *Revue Homœopathique Belge*, adds a work of importance to our scanty literature upon health and health-resorts. The work is divided into fourteen chapters, in which

the author treats of the sea, its influence upon disease ; its water as a remedial measure in the lights of homœopathic law ; and the indications and contra-indications for the sea bath and air. The language of the work is such that it will be found as useful for the layman as the physician.

We are in receipt of the Eleventh Annual Announcement of the College of the New York Ophthalmic Hospital for the session of 1889-90. The course at this college for the degree of *Oculi et Auris Chirurgus* begins on the 1st of October, 1889, to attend which the candidate must have received the degree of M.D. at least one year prior.

“A St. Louis man furnishes a hint for baldheaded people. A few years ago, finding that he was becoming bald, he discontinued wearing his hat while in his office. Then he began a systematic dry scrub of his head daily, with a coarse brush. It gave the scalp a healthy glow, benefited the pores and stimulated the glands. To-day he has a nice crop of new hair, which continues steadily to increase.”—Floating item.

Dr. A. Haig says that one cause of periodic headache is the presence of uric acid. In these cases there is a week or more of good health, during which uric acid is storing up in the spleen and liver. Then comes dyspepsia, gastro-intestinal catarrh and hepatic congestion. These quickly result in general diminution of absorption and nutritive changes, with lessened formation of uric acid and urea and a fall in acidity. “And, lastly, as a result of this falling acidity, there comes a rush of the stored uric acid into the blood and the headache begins.” The good effects of *Salicylic acid* in this variety of headache is due to the fact, says the *Medical Record*, that it and the salicylates generally “facilitate the excretion of uric acid, and thus prevent the retention of excessive amounts within the body.”

As simple urine tests seem to be in demand, here is, perhaps, the simplest known : Shake the urine until it forms a foam ; if healthy, this foam soon subsides, but if the urine contains sugar or albumen, it will remain much longer.

Dr. George H. Stroup, of Pennsylvania, says he never has failed to relieve any case of hernia, even after failure of taxis and other plans, by the following: Place a piece of absorbent cotton over the tumor and saturate with ether. He says no operation for hernia will ever be needed when this plan is followed for sufficient time.

PUBLISHERS' DEPARTMENT.

Silico-Sulpho-Calcite of Alumina.—"We confess that we were struck with astonishment when we saw this frightful name. But when we were further informed that it was the name of a new homœopathic remedy recently introduced, we speedily calmed down. Regarding its composition we know nothing, and we do not believe that its originator knows any more about it than we do. He may know what crude or refined chemicals he mixed or brought together with intent to make a new compound, but we defy him to prove it to be a chemical individual. Legitimate materia medica is full enough of mysteries and dark corners even now. It is certainly more than folly to add to it compounds of which no one can give any intelligent account. From a note on the article we were furnished with, we learn that it has been given (!) with favorable results in 'house-maid's knee,' and that it also 'took away a dreadful anal itching, piles, constipation, as if by magic.' Further comment is unnecessary."—*American Druggist*.

The editor of the *American Druggist* seems to feel quite badly over this matter. We can assure him, however, that this remedy is not a "new compound" compounded by the wicked homœopaths, but quite a legitimate substance for medical purposes. He will find a description of it on page 122 of the HOMEOPATHIC RECORDER for May, 1889, and we can assure him that it is really an excellent remedy for house-maid's knee and for "dreadful anal itching, piles and constipation," as therein described. The lofty, we may even go so far as to say highfalutin, way in which certain journals speak of things homœopathic is a part of the comedy of life.

Dr. R. G. Eccles recently indulged in five columns of loftiness against homœopathy in the *Druggists' Circular* (June). He said, among many other things: "The lowest races have invariably been guided in their treatment of disease by the principle of similar curing similar. So far, indeed, has it been carried, that their code of ethics are constructed on the same basis. The man who puts out another's eye must be cured of such a tendency by having his own eye put out." "There never has been any organized body of physicians calling themselves allopaths." This bit of news will cause a broad grin to spread over the medical physiognomy. Wandering along in a pitying way, showing what an ignorant set of people homœopaths are, the scientific Dr. Eccles at last runs afoul of isopathic Dr. Swan, and then he makes the infinitesimal fur fly. "To see them administer the ten-millionth part of a moon-beam!" "To have them discriminate between the east wind and that from the

north, believing one more efficacious than the other, after drowning in an ocean of water or burying in a planet of sugar." "Suppose the homœopathic consultant should insist on giving the patient a dose of *Lachryma filia*," etc. Thus doth the good Knight Eccles tilt at the towering isopathy and idiosyncrasies of our amiable friend Dr. Swan, under the notion that he is riding down that offspring of superstition, homœopathy. It is as good as a circus, and, liking amusement, we hope Dr. Eccles will sally out again in the near future, and, passing by Dr. Swan's potentized moon-beams, have a try at homœopathy. Let him explain, if he can, the following figures from Australia, giving the results for the year just closed at the three Melbourne hospitals :

Melbourne Hospital, cases,	4273	Deaths,	762	Death-rate,	17.8
Alfred " " "	1399	" "	212	" "	15.1
Homœopathic " " "	606	" "	55	" "	9.0

The charge that homœopathic figures like these are derived from trifling cases won't answer in this instance, for, fortunately, we have the nature of the diseases before us. Of the 4273 cases treated at Melbourne Hospital, 431 were typhoid; at the Alfred Hospital of the 1399 cases, 212 were typhoid; while of the 606 cases treated at the Homœopathic Hospital, 305 were typhoid, or over 50 per cent. Thus, so far from having only mild cases, homœopathy was compelled to battle with overwhelming odds.

To talk of a "drop of Aconite" in the Mississippi river, and by that think to prove homœopathy to be a mere delusion is, if the Doctor will pardon so unscientific a term, a chestnut, and has been for over fifty years. But, taking his own view of the case, which is that homœopathy is a mere superstition, the logical terminus of that is a very ghastly one, for, if but 9 per cent. of the patients die when left to nature and "superstition," as were those in the homœopathic hospital at Melbourne, how is science to account for the increased percentage of those who die under "medicines?"

There is another point in this connection on which it would be interesting to hear from Dr. Eccles, namely: If the scientific physician "disclaims all connection with any exclusive system," the inference being that he investigates all, why does not he investigate homœopathy, instead of never missing an opportunity of reviling and assailing it? Surely that course is not *scientific*! Why go gadding after Brown-Séquard's dead animal matter elixir of life, and refuse even the courtesy of a hearing to homœopathy, which is firmly believed in by millions of the most intelligent of the land? To us, such a course looks more like bigotry than science.

We ask these questions because Dr. Eccles himself shows conclusively that he has but little, if any, real knowledge of the subject

on which he writes so loftily. We believe in scientific physicians most heartily, but we don't believe that a man who positively condemns so very prominent a fact as homœopathy without carefully studying it first, is a scientific physician. Such a man is an allopath.

Mullein Oil.—The use of Mullein oil in all manner of urinary troubles is rapidly increasing. In this line—a line, by the way, in strict conformity to that indicated by Dr. Cushing's proving—its success seems to be most marked. The following extract from a letter from W. B. Gray, M.D., of Richmond, Va., is of interest. It is in reply to an inquiry addressed to him concerning his experience with Mullein oil. He cites four cases as follows:

1. "*Mullein oil* relieved micturition in a case of chronic cystitis, with urine of alkaline reaction, full of pus, and of a specific gravity of 1.010."

2. "In a case of lithæmia it relieved micturition. Gravity of urine was 1.030, and is still so and acid."

3. "It was successful in relieving same symptoms in a case of stone in the bladder. Specific gravity of urine was 1.012, acid. It does not seem to influence the reaction or gravity of the urine."

4. "It has acted well in a case of deafness, and the patient is still improving."

In the *Chicago Medical Times*, July, 1889, we find the following: "Fifteen drops of Mullein oil, in a four-ounce mixture, a teaspoonful four times daily, will permanently cure many severe cases of nocturnal enuresis."

If, as seems to be the case, it will make micturition easy and normal, it will, beyond all question, "supply a long-felt want," especially with the aged. Mullein oil must not be confounded with *Verbascum* tincture. The two are totally distinct. *Verbascum* is an alcoholic tincture of the roots and leaves of Mullein, while Mullein Oil is a dark, aromatic distillation from *the flowers only*.

It is claimed, but almost exclusively by small pharmacists who have no machinery in their establishments, that hand-made triturations are much superior to machine-made triturations. We do not remember having seen or heard of any reasons why they are superior, but for all that the claim is very confidently made for them, ever and anon, that they are. Perhaps the reason why no reasons are ever advanced in support of the claim is that there are no reasons to advance. Which is apt to do the most faithful work, a machine driven by a tireless power, or a hired man, or, most likely, a boy, working for low wages, and with no very exalted idea of the pharmaceutical responsibility? The first decimal trituration of the average drug requires many hours of unremitting work by a

machine to produce a thoroughly triturated drug. Does any one suppose that a man or a boy could, or would, do the same amount of work in the same time? If so, let him try wielding a pestle for fifteen minutes, and realize what it means. As to the *quality* of the work, the comparison is altogether on the side of the machine. In the best of them there are four pestles, each one followed by a scraper; these pestles are broad faced, and after they have gone over the sugar of milk the scraper following throws it up and directly in the way of the next pestle, and this continuously; and the most cursory examination will show that all the sugar of milk in the mortar is being triturated and scraped together continually, and none of it escapes the pestles even for one revolution. Compare this work with that done by hand, and the exceedingly great superiority of properly made machine triturations is seen at once.

It is asserted by the advertisers of what is known as the "Multiplex Pestle Triturator" that all triturates, except their own, both hand-made and machine-made, are charred by the friction of the pestle on the mortar and, consequently, are chemically different from their's. If—this point, we believe, has been touched on in the RECORDER before—the triturates produced by the Multiplex system are different from all others, it follows that, inasmuch as all text-books, so far as they pertain to this subject, are based on experiences with "charred" triturates, which are "chemically" different from the product of the new system, that the triturates of the new system should not be used until they have been thoroughly proved, and that a pharmacist has no right to label them for the same as the old, which are different medicines. This is a point not to be lightly passed over. For instance, if the *Mercurius vivus* of the new system is *chemically different* from that of the old, what right has any pharmacist to label and sell it for the same remedy as the old? On the other hand, if there is no chemical difference; if the sugar of milk by the other trituration methods is *not charred*, what must be the professional ethics of those who say it is, when *they know* it is not? This query has heretofore met with a most profound silence.

Now what of the new process itself, which is strenuously seeking to supersede the time-honored process of Hahnemann? In the first place (from published descriptions and advertisements this is learned), it contains thirty pestles, minus the handles, but which instead have metal springs, or bands, by which they are rigidly held in place while the mortar revolves around them at the very high rate of speed of "eighty revolutions a minute." The presence of metal in the mortar is enough to make by far the larger number of homœopathic chemists refuse to adopt the

new system on any terms, for it is one of the primary principles of homœopathic pharmacy that no metal should come in contact with the drug in trituration, else a greater or less degree of contamination occurs. Another feature of the new method is that the pestles in no case touch the mortar. This, we readily see, is essential, for, running at the rapid speed it does, should they happen to touch, the friction would generate an extremely high degree of heat, as any one may perceive from the fact, already mentioned, that the mortar revolves at a speed of "eighty revolutions a minute." As the pestles do not touch the mortar, it would reasonably be concluded that the comminution must necessarily be but slight, and the triturate a very coarse one. Yet this apparently inevitable result from the premises is totally wrong, for we are told that the triturates produced are so fine as to be "impalpable to the touch." To ask the world to believe that pestles which do not touch the mortar can *rub*, or triturate, sugar of milk to impalpability, is asking a good deal of it—making a big draught on its credulity or good-natured indifference. Granting the state of impalpability, the conclusion is forced that it existed in the sugar of milk before going in the mortar. One of the uses of the sharp crystals of sugar of milk is that in the process of rubbing under the pestle they aid in the comminution of the drug, which use, of course, is absent if the sugar of milk is in an impalpable state before being put in the mortar; that it can be made so by pestles which never touch the mortar is, as already intimated, incredible.

The assertion constantly made that one hundred grains of sugar of milk triturated for one thousand hours (*i.e.*, during the working days of about four months) came out as white as it went in one of these new machines can readily be believed, if, as is probably the case, the cover of the machine was as tight as it should be. What was there to darken it? The pestle did not touch the mortar, and hence the sugar of milk was the same as though in a revolving bottle, and might have gone on thus indefinitely. Such, in brief, is the system that is put forward to supplant that introduced and carefully explained by Hahnemann. It is for the medical profession to choose between them.

Schuylkill Water.—For some reason not clearly apparent, some of Philadelphia's newspapers have been making a most furious attack this summer on the water-supply of that city; the persistency and malignity of this attack has been so great as to be noted all over the United States, and many people, it is said, are actually afraid to visit the city. For this they cannot be blamed, as the wording of these articles are of such a nature as to almost sicken

those who read them; think of drinking "filthy sewage," the overflow of "cesspools," the drainage from "dead human bodies," etc. The mere wording of these attacks prove them to be false, for if they even approximated to the truth the city of Philadelphia would be uninhabitable instead of, as the board of health reports prove, one of the healthiest of the large cities of the world; indeed, among cities whose population exceed a million, there is but one whose annual death-rate is lower, and that is London. The truth is, that for years the quality of the Schuylkill water furnished to Philadelphia has been steadily improving; the city bought the property for miles above Fairmount dam, on both sides of the river, for the purpose of preserving the water from contamination, and within the past few years has built a sewer along the banks of the river for miles, into which is drained all matter of a deleterious nature. We can assure our readers that anyone may visit Philadelphia without the least danger of being "poisoned," or of getting the typhoid fever. The water furnished Philadelphia is neither better nor worse than the average furnished to large cities. These attacks—this is not the first one—always precede an effort to obtain control of the city's water-supply. Similar attacks were made a few years ago against the city's gas works, and accompanied by a most determined effort to force the city to sell that valuable property. Whether this is anything but a coincidence we do not know.

Rhus Poisoning.—In a paper read before the Homœopathic Medical Society, of Los Angeles, at the meeting held July 9, 1889, Dr. E. T. M. Hurlburt, of that city, gave his experience with *Cypripedium pubescens* in the treatment of *Rhus* poisoning. In gathering specimens of *Cypripedium* he noticed that it produced poison effects similar to those of the *Rhus* and, per consequence, the law of *similia* pointed out a use for it. From 1877 to date, Dr. Hurlburt has been using *Cypripedium* in all cases of *Rhus* poisoning and, from the fact of living for five years during that time in a part of the country infested with *Rhus*, he has had an unusually large number of cases under his care, but has met with uniform success in their treatment. He gives one drop doses of the 1x dilution every hour until relieved, except in unusually severe cases, when the dose is increased to five drops. *Cypripedium*, he says, may also be used as a prophylactic, but not externally.

The Candle.—A Candle once, impelled by secret Pride, spoke of the Sun, in an easy and familiar way, as his Brother. So the Candle was put in a Back Yard, one Night, in order that he might illuminate the World during the Sun's Absence. He began to sputter and flare at a great rate, while lanky Shadows played Hide-and-

Seek, highly elated at the Show, and heavy-weight Bugs and crazy Moths came trooping from all Directions, and made a great Ado over the new luminary and investigated it. At each Investigation the dark Shadows jumped so high and seemed so silently gleeful that the Candle grew quite Irritable, and when at last a little Wind puffed at it, it was quite Put Out, and determined to leave an unappreciative World in Darkness. When the Sun arose on the Scene, it beheld an infinitesimal grease spot, which it kindly melted into Mother Earth's ample Bosom, and Life went on as usual.

The quotations of some of our esteemed contemporaries from these pages reminds us a little of the old definition of glory: "Having your name misspelt in the gazette." Whether they are like the great Sergeant Snubbins in his inability to remember his contemporaries' names, or whether the fault lies in slovenly editing, we have no means of knowing. To take something from the pages of the HOMŒOPATHIC RECORDER, and credit it to "Record" or "Reporter," or some other mythical journal, is hardly fair to the readers, or to us.

Dr. T. H. Carmichael, of Germantown, Pa., in an article in the *New York Medical Times* (July), treating of dilutions, says: "There are indications that the dilutions will soon cease to occupy their present prominent position in the pharmacy of homœopathy. In some parts of the country they are being steadily supplanted by the tablet triturates. The latter contain a definite quantity of the drug in trituration, and thus furnish the means of more exact prescribing. The very demand for them is an evidence of the appreciation with which new school men hail an attempt toward exact dosage." It might not be amiss to say here that *all* homœopathic remedies may be had in tablet triturates. Mother tinctures are triturated in sugar of milk until the menstruum is completely volatilized. The 2x, 3x and 6x of the tablets made from these triturations correspond exactly with the 2x, 3x and 6x dilutions. Homœopathic physicians should bear in mind that tablets of this nature made by reliable homœopathic pharmacies differ from those made by allopathic drug houses just as the fluid extract differs from the mother tincture. There is also another possible difference worth noting: The homœopathic pharmacist, if he does his duty, must use the most scrupulous care to prevent the mingling of one drug with another in preparing his remedies, even in the minutest particles. The allopath, who, we know, laughs at the minute dose, would not have the same incentive in preparing his drugs.

Typhoid.—Dr. John J. Shaw, of Plymouth, Mass., in a paper read before the Massachusetts Homœopathic Medical Society,

among other things, says of typhoid: "The patient should be encouraged to drink as freely as he will. The surface of the body should also be bathed with water at a comfortable temperature every two or three hours. These things are not to be used because they lower the temperature, but because they rapidly remove waste material which, in all cases of fever, is being rapidly produced. The danger in these cases is not in the high temperature, but in the waste matter being developed faster than it can be eliminated. The lungs, the skin and the kidneys are the principle depurative organs. It is the retention of waste products which threatens the integrity of the organism; therefore we see the inconsistency of using such drugs as *Antipyrin* and *Antifibrin*, for they suspend largely the action of the kidneys, and thus throw back upon the system some of the most poisonous excretions in the whole list. The high temperature of fevers is nature's plan for ridding the system of the poisonous foreign products which endanger its life by their rapid oxidation. Therefore the lungs, skin and kidneys should be supplied with an unlimited amount of the menstrua through whose agency this oxidized waste material is to be removed." The doctor also says: "Many years ago an epidemic of typhoid broke out in a European army in winter, and, as the hospitals were full, it became necessary to treat many cases in tents, exposed to the rigors of the weather. Greatly to the surprise of the doctors, the exposed patients almost all recovered, while among the others the mortality was great.

In the "*Allgemeine Homœopathische Zeitung*," of July 25th, we find the following: "A citizen of Leipzig richly blessed with this world's goods, presented to the city hospital two landed estates which he purchased for the purpose, to be used as a convalescent home. By the munificence of the donor from 70 to 80 convalescents can with existing facilities be provided with a place of refuge such as is usually only available to the well-to-do. We, as physicians well aware by experience of the sad condition of the convalescing poor in large cities, will bless the man who in such a benevolent and suitable manner makes use of his riches. In the course of years, hundreds will be saved from a lingering death and be preserved to life, their families and their usefulness by the most admirable gift." In the following number of that same journal it is mentioned that the donor is Dr. Willmar Schwabe, of Leipzig.

Mrs. Amanda W. James, widow of Dr. David James, died at her cottage on Wesley Lake, Ocean Grove, on Saturday evening, the 10th inst., in the 80th year of her age. Her failing strength during the last two weeks warned her family of the approaching end, and

in her last hours she was attended by all of her children and grandchildren. Two sons of Mrs. James are prominent homœopathic physicians in Philadelphia, Dr. Bushrod W. James and Dr. John E. James.

Ever since the first appearance of Farrington's *Clinical Materia Medica*, the German homœopathic journals have been largely quoting from it, and now a complete translation of the work into that language has appeared. The Germans know a good thing when they see it.

Eclectic Items.—Prof. Goss, editor of the *Georgia Eclectic Medical Journal*, gives the following clinical hints, which may be of some interest to the homœopathic profession :

“*Erysipelas* may be cured by giving 20 drops of *Jaborandi* every two hours until it produces profuse diaphoresis.”

“*Hysteria* may be readily relieved by giving *Gelsemium* in doses of 20 to 25 drops every three hours until its physiological effects occur.”

“*Winter Cough*, with hyper-secretion, may be relieved and finally cured by the tincture of *Æsculus glabra*. It also relieves some cases of asthma where the dyspnoea is constant. Put from 20 to 40 drops in a glass of water, and give a teaspoonful every two hours.”

“*Cholera Infantum* may be cured by checking the vomiting with *Euphorbia*, then giving the tincture of the seed of *Lappa major* (burdock), or the tincture of the seed and root is better. Doses, 3 drops for children.”

“*Passiflora Incarnata* is the most valuable addition to our list of nervines and soporifics. I have used it to produce sleep in children and adults, where there was great restlessness, and it has often succeeded well, leaving no bad after-effects whatever. It acts promptly in neuralgia and convulsions, and in tetanus it has no superior. I give from 30 to 60 drops of the fluid extract, or saturated tincture, three times a day for spasms, and in epilepsy. In full doses it cures tetanus in a horse. If it cannot be given by the mouth in lockjaw, it may be injected up the bowels, half pint at a time for a horse, and half ounce for a man. It has come to stay.”

Dr. Wilmot Moore, of Terre Haute, Ind., who was last year the homœopathic representative on the board of health, and also president of that body, has been re-appointed again this year.

Dr. A. M. Cushing (*Physician's and Surgeon's Investigator*) foreshadows great possibilities from *Mephitis* in the case of weak sight. A gentleman of his acquaintance once received a dose of that rem-

edy, direct from the skunk, into his eye. It was as though fire had entered his eyes, and for a time he was totally blind; but when his sight returned, it was so keen that he could count the panes of glass in the window of a house claimed to be two miles away.

For Cremation.—Dr. G. W. Barnes, one of California's homœopathic physicians, in a paper read before the San Diego Society of Natural History, makes the following point, among others, in favor of cremation: "It is more than a probability that pestilential diseases are by earth burial transmitted from one generation to another, and thus perpetuated indefinitely. If the seeds of plants can be preserved for centuries, and then, under favoring conditions, be made to germinate and reproduce their kind, so the germs of contagious disease, after having been entombed for ages, may be warmed into life under suitable environment, and spread contagion among the living."

Paralysis.—The Homœopathic Society of Saxony have been discussing paralysis. Dr. Henze cured facial paralysis on the right side with *Causticum* and *Belladonna* in alternation, and also of the left fore-arm with same treatment. *Causticum* was also used successfully in a case of ptosis of both upper eyelids of long standing. Lead palsy of seventeen years' standing was cured with *Plumbum* in high potency. In the *Journal of Ophthalmology* is related a cure of facial paresis, and paralysis of the third nerve with drooping of eyelid quickly cured with *Paris quadrifolio 6x*.

Here is a remedy for cramp, suggested by Dr. R. W. St. Clair, of London: Let the patient provide himself with a good, strong cord, and keep it always with him. When the spasm comes on, let him wind this cord around the affected part, take an end in each hand, and give them a good sharp pull. It will hurt a little—it is useless if it does not—but the cramp will vanish at once.

For a period of five years, ending December 31, 1888, according to Health Officer Stanton, there were 579,684 deaths in our eight largest American cities, and of these 13,094, or 2.18 per cent. were from cancer.

Ancient History.—A little leaflet originating from a small, local pharmacy in the west, and apparently scattered broadcast, is so misleading as to require some attention. We quote from it:

To show the relative superiority of ——'s triturating, we will add that the best extra triturated 1x Lycopodium of a prominent Philadelphia pharmacy was found, by Dr. W. H. Winslow, to have only 10 per cent. of the spores broken (see *Hahneman-*

nian Monthly, July, 1882), while ——'s ordinary 1x trituration of *Lycopodium* was found by Prof. J. Edwards Smith, M.D., and Prof. A. Y. Moore, M.D., to have all the spores broken and PERFECTLY comminuted. (See *N. Y. Med. Times*, September, 1882.)

As there are, doubtless, thousands of the RECORDER's readers who have not access to the *Hahnemannian Monthly* of the date referred to, we will state that Dr. Winslow's paper referred to in the foregoing was read before the Hahnemann Club, of Philadelphia, in June, 1882. Dr. Winslow, it seems, had microscopically examined the *Lycopodium* triturations of leading homœopathic pharmacies of Europe and the United States and summed up the results as follows :

These facts render it incontrovertible, that trituration does not have the effect upon *Lycopodium* that we have so long believed. It is liberal to concede from the microscopic examinations, that the amount of *Lycopodium* made active by any method of trituration, does not exceed 10 per cent. of the mass.

(The italics are ours.)

Prof. J. Edward Smith, M.D., and Prof. A. Y. Moore, M.D., differ from Dr. Winslow's conclusion ; they found a *Lycopodium* trituration which they certify had "all the spores broken and PERFECTLY comminuted." Dr. Winslow placed the utmost bourne of broken spores at 10 per cent., while the two professors placed it at 100 per cent.—not excepting even one little spore. We do not know that any comments are needed on this remarkable difference, other than that a trituration of *Lycopodium* mother tincture may be had from any trustworthy homœopathic house in which most certainly there will be no unbroken spores. Again we quote :

In the course of examination instituted by THE AMERICAN INSTITUTE OF HOMŒOPATHY, ——'s milk sugar was repeatedly found not only good and fit for homœopathic use, but better than milk sugar from any other pharmacy, while that from nearly all other pharmacies was of a character declared, by resolution adopted, to be unfit for homœopathic use. (See *Trans. Am. Inst. Hom.* for 1883.)

The impression an unbiased and uninformed reader would get from the foregoing quotation would probably be that in a manner the Institute was an advertising appendage of this local establishment. Turning to the *Transactions* of 1883 we find this claim to be based on a report by Prof. J. Edwards Smith, M.D., of examinations of sugar of milk samples, in which the milk sugar of the pharmacy in question happened to show a slightly lower percentage of "residue" than the others ; this might be accounted for by the varying degree of heat applied by which means the best and the worst could have been made to change places in this respect.

The Institute "Resolved, That manufacturers of *Lactine* be re-

quested to state on each package offered for sale the amount of ash in milligrams produced from the incineration of 10 grams (*ten*) of sugar of milk." This request was faithfully complied with for a time, but experience demonstrated that it was not only impracticable but entirely useless. The leaflet goes on:

As to quality they [*i.e.*, the Philadelphia pharmacy] admit (see leading editorial *Hahnemannian Monthly*, April, 1883) their use of wedgewood mortars, and triturating a pound in the course of an hour.

This is a very ingenious allusion, but not an honest one, as the following *verbatim* quotation from the editorial in question shows: "In a recent conversation with Mr. Tafel—the present senior member of the firm—he informed us that, years ago, they had entirely discarded wedgewood-ware from their triturating room and restricted themselves exclusively to large-sized unglazed porcelain mortars. He also stated that they soon discovered that one pound at a time could not be properly triturated at all, etc." So what the editorial really says is, that years prior to 1883 the firm in question had abandoned the use of wedgewood mortars and that their experience had demonstrated that triturations could not be properly made at the rate of one pound at a time. After this we are quite prepared for anything—this for instance:

Care should be taken in the selection of alcohol, as oxidized alcohol, utterly unfit for homœopathic use, is furnished to parties having homœopathic pharmacies in Philadelphia and elsewhere. Their use of such alcohol makes all their tinctures and dilutions entirely unreliable and altogether unworthy of confidence. Oxidized alcohol contains compounds of valerianic, propylic and other acids in varying proportions, and these cannot be removed by redistillation. It is sweet in smell, and may therefore be imposed upon the unwary.

In other words all other homœopathic pharmacies in the United States are continually and deliberately swindling the medical profession, and the medical profession are so stupid that they cannot detect the swindle. Such reckless assertions are even poor advertisements, and a house that can put its name to such matter can hardly be called a credit to homœopathic pharmacy.

The "Philadelphia pharmacy," which is so unjustly libelled in the leaflet under consideration, uses no other than the best refined and re-crystallized milk sugar, sharp, pure and clean, that the world's markets will yield. The alcohol used is the finest product of one of the most reliable houses in the United States, and such assertions concerning its character can only be the result of ignorance, or of a malice so blind as to deserve pity more than anything else.

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POTENCY.

COULD we but satisfactorily explain, by the means of a readily understood, incontrovertible, scientific theorem, the entity of drug power in our potencies, the whole practice of homœopathy would, within a comparatively short time, be embraced by all practitioners of medicine, and the hope of decades—the amalgamation of all schools of medicine—would be attained, for all would be homœopaths *in fact*, and the result a scientific practice of medicine, working with the foundation of a fixed explicable law, would no longer bring upon the fraternity the present odium of disbelief by the laity in the unstable and contradictory knowledge of physicians.

Our law is, at the present day, entirely satisfactory to the majority of learned men and unbigoted physicians; our tinctures and lower potencies of the more active drugs are used with satisfaction by most of the schools; our purity and simplicity of preparation, neatness in pharmacy and handy method of prescribing are becoming greatly appreciated; and lastly, our splendid cures of nervous and highly chronic diseases are causing admiration; but mention a higher potency to any believer than that in which he can *see* the drug, and all respect, honor, truth and science in our practice vanishes before it in his mind like the theatrical ghost of Hamlet. Why? Simply because the prescriber himself cannot explain why the potency cures, nor that he has really used a palpable means to secure the end he claims.

Some years ago we published in one of our younger magazines an article upon "Potency Physically Considered," which seemed for some reason to call forth no response from the fraternity. Judging the cause to be the probable limited number of readers to a maga-

zine in its first year; and that the subject is one that should be studied and prove itself worthy of comment, being so necessary to our practice and neglected by our authors, we again take up the gauntlet in behalf of potencies and the defence of our practice.

No true follower of the immortal teachings of *Hahnemann* doubts for a moment the efficacy of our potencies, yet, when asked upon what he bases his belief in dynamized drugs, he is unable to give a satisfactory answer, because he cannot realize and becomes, therefore, incompetent to explain the force that is inherent in these, to him, phenomenal preparations. Who is there among you who read this that have yourselves "run up" a drug to the 15th potency, but gradually lost faith as the dynamization progressed beyond the second centesimal? Who, when adding a large amount of the inert to a small portion of the active, has not lost heart and carried his trituration no further? Let us hope that a thoughtful reasoning upon the following physical law will reinstate, or cause retention of the old faith in the potentizer and triturator, and give him a tangible argumentative anchor when called upon to defend his use of potencies.

Every elementary atom, compound molecule, mass or portion of a mass, organ, or cell, has a specific energy, distinctive, definite and absolute; a force perhaps allied to, but never duplicated in, different substances, and this force is the only true and radical distinction between substances.

All molecules are miscible, and, when in a state of mixture, act upon each other; on each kind of energy inevitably affecting another to a greater or less extent, and, as a result, that energy which has the greatest power will change the others, until ultimately they partake of its identity, or will form a new and distinct substance, the energy of which will have no similitude to any of its originators.

Here is a theorem and corollary which explains, in a very satisfactory manner to us, at least, the activity of the remedy in a highly dynamized drug. The atoms in a mass (say one grain) of mercury have a certain potential energy, which, in the whole mass, like the power of a man in a crowd of his fellow-beings, cannot be exerted, on account of lack of freedom, but separated, their energy becomes actual, and as such represents the true character of the element. This, then, is the one great use of the lower potencies—to separate the atoms of an elemental, or molecules of a compound body. Now, to carry the process further, and increase what we call the curative power of mercury, by reducing the drug or irritant power, we prove that *the molecules of water, alcohol, or milk sugar are less energetic than those of any drug that retains its power when immersed in these vehicles.* Now, turning to our corollary as above stated, and taking a drop of the last potency containing the drug atoms, placing it in not too many drops of any of these vehicles, and what takes place?

The energy of the drug being greater than that of the vehicle, it communicates its force to it, and the energy of the drug being all its specific identity, the vehicle having gained it, becomes in reality the drug itself, in a greatly diminished proportion, but a highly active state. Were too much of the vehicle used it would preponderate in energy and the drug itself would be lost. This much as a positive argument against the drop-of-medicine-above-Niagara-Falls bigot.

Following carefully an elaboration of this theorem and corollary, how many of the processes of the great material world might be explained! The mystery of emanating odors; the sensation of taste; the phenomena of heat, light and electricity; infection by specific miasms; disease; and, in fact, life and death as well.

In that process of animal and vegetable life called health, each cell of the organism has a molecular energy peculiar to the function it performs, and vitality is simply the sum of these different energies. As long as these energies can hold their identity against all interfering forces, so long are organisms in health; but when any of these functional energies are changed by more powerful ones, the organism immediately shows symptoms of the disturbing force, and therefore is diseased. The greater the disturbing force, the more acute the symptoms, even to death, which is really a total lack of correlation of the molecular forces of life—nothing more.

Here is the explanation of the law governing homœopathic medication. A prover takes a drug in an energetic irritant dose; it changes his forces thus and so, which change he records as the disturbing effect upon his organism, and when he finds another organism similarly affected, what is simpler or more scientific than his method of combating the signs of disease? He selects that force in a free and attenuated form which corresponds to the signs of energy lost, ingests it into the organism to supply the correlated deficiency, and proper vital energy is restored.

Again, infection by disease-energies becomes explicable. All persons are not susceptible to individual poisons; all do not contract diseases when directly exposed. Why? Simply because their vital energies are more powerful than those of the poison or disease, and cannot be affected by them.

Follow carefully these purely physical and soundly scientific points, and what a field of knowledge opens to us! Our law is explained and our potencies become entities that none but the most obtuse can doubt. We have proven them curative, but we could not give the why; can we not say a potency is a force *developed*, not *produced*; a fact explained as well as proven; a truth compatible with all the natural laws governing the universe.

To Prospective Provers.—To those who desire to make provings for the benefit of our science, and with that idea strongly in

mind seek out new or strange foreign remedies and products, allow us to suggest that, in the less complete portion of our *Materia Medica*, there are some very interesting and valuable plants on which the profession need more light, and which will prove to be fully as useful, in all probability, as any newer remedies. Among these are: *Lycopus Virginicus*, the Bugle Weed; *Ambrosia artemisifolia*, the common Rag Weed; *Robinia pseud-acacia*, the common Yellow Locust; *Melilotus officinalis*, the Sweet Clover; *Sarracenia purpurea*, the Pitcher plant; *Trillium erectum*, the Purple Trillium; *Nymphæa odorata*, the White Water Lily (on women); *Salix nigra*, the Black Willow, and *Populus tremuloides*, the Aspen. To those who are not botanists:

We will take pleasure in identifying any plant sent us, and to otherwise help any who may desire assistance in the matter of botanical references, etc.

SILICO-SULPHO-CALCITE OF ALUMINA.

PROVINGS.

DR. GEO. HERRING reports the following proving of this substance in the *Hom. World* of August:

At the suggestion of the the *Hom. World* I procured the 3x trituration. To begin with myself: May 14th, took 3 grains to-day in divided doses; 15th, no well-defined symptoms; 28th, took 1 grain to-day; 29th, last night experienced a sort of creeping irritation of the skin, or underneath the skin, in the umbilical region, which kept me awake for some time, and as I could attribute this to no other cause, presume it was caused by the medicine. And, if so, *Slag* should be serviceable in some cases of *subcutaneous urticaria*.

After this experience I did not feel disposed to pursue the proving further; but I had prudently secured a substitute, which I always prefer, rather than to make prolonged experiments upon myself.

Second Prover.—This gentleman was apparently in good health, although he had two or three times previously been a patient with gouty pains in the foot, always speedily cured by *Bry.* 1x. He readily consented to take *Slag*, when the nature of pathogenetic proving had been explained to him.

May 10th. Took 3 grains to-day in divided doses. 11th. "Any symptoms this morning?" I inquired of him. "No; no symptoms," he said, "but I feel a good deal better than I usually do. Every night, before last night, I have had to unbutton the top buttons of my trousers from swelling out, but last night I didn't. I

haven't felt so well for a long time; I should like to go on with that medicine." 11th and 12th. Continue, 3 grains per day. 13th. No pathogenetic symptoms, but continued improvement of the flatulent distention. He is well pleased with the result of the proving. Besides being cured of the abdominal distention, he says, "I have lost the oppressive feeling I used to have over the heart." Medicine suspended. 17th. The improved condition still continues. 25th. Improvement still continues. He thinks this the best medicine he ever had.

From this case we may conclude that *Slag* is worth remembering when we have patients with similar symptoms. It would seem to be an analogue of *Lycopod*.

Third Prover.—Strictly speaking, this gentleman should not be called a *prover*, he having been a patient for some time, suffering from chronic constipation. However, there was one symptom appeared—soreness of the anus. Like the former prover he also had, sometimes, flatulent distention, and like him was cured of it.

May 13. *Slag* gr. xii.: to be dissolved in half a pint of water. One tablespoonful twice a day. 20th. He thinks the medicine is doing good, but has soreness of the anus. Continue, but reduce the dose to 6 grains to the half-pint of water. 27th. Improving; continue. June 3d. Bowels have acted more comfortably, and there is no flatulence. Continue fourteen days longer. 17th. Still improving; he certainly looks better. Change to *Lycopod*.

Upon the whole this medicine has been as useful as any, and we shall return to it on a future day.

Fourth Prover.—This lady had been under my treatment for a variety of symptoms arising from a delicate constitution, her mother having died of phthisis. Having begun to entertain high expectations of the remedial virtues of *Slag*, I decided to give this patient the benefit of it. Gave 1 grain twice a day. A week afterwards she returned much worse, having had these symptoms: diarrhœa, the bowels acting three or four times a day; great debility; quick pulse; lumbago-like pain in the back; inflation of stomach, etc., so that she had to unloose her dress. For these symptoms I gave Phos. and Phos. acid, afterwards Carb. veg., all of which were very beneficial. If I were ever to prescribe *Slag* again for this patient, it would be, of course, in a higher attenuation, and might then do good. I noticed in this case that the remedy had produced two symptoms, which in two other patients it had cured—*flatulent distention and lumbago*.

[The author suggests the name *Ferri-cinis*, Cinder of iron, for this drug as more euphonious and easily spoken. We judge that the name would be likely to prove misleading, as the compound contains little or no iron.—c. F. M.]

Prover.—F. C. B.,* thirty-three years of age; of rather dark complexion; of nervo-bilious temperament. He suffers from chronically enlarged tonsils, and failing to benefit by other remedies he experimented on himself with the *Slag*. This had no more effect on the tonsils than other medicines. He has no pain in the tonsils except when he tries to reach high notes in singing, when he experiences a sensation as though something tight were tied round the neck; with much mucus in the throat, sometimes easily detached, sometimes impossible to detach. He wakes with a clammy, dryish mouth. He has a very great tendency to take cold in the head.

Saturday, May 4, 1889. Took *Slag*, 6x trit., 5 grains. In the evening felt unusually drowsy.

Sunday, May 5th. Took 5 grains morning, noon, and night. Felt unusually drowsy in the evening.

Monday, May 6th. Took 5 grains morning, noon, and night. Awoke with dull frontal headache; want of energy; pains in the limbs; throbbing in the left tonsil, with aching pain; pains in both knee-caps, sometimes dull, sometimes aching; aching pain between shoulders and in left elbow, with dull, heavy sensation, alternating with aching in region of spleen.

Tuesday, May 7th. Took one dose in the morning only. Awoke with pain in the forehead, of a dull, stupefying character; pain between shoulders; cold in head, which *Natr. mur.* 6c failed to make any impression upon, but which *Acon.* and *Cham.* 1c, alternately, soon removed. Pain in head in the evening of this day extended to the right temple, with sensation of stiffness at the back of head and neck. (The headache was a constant effect of the *Slag*.)

Wednesday, May 8th. Took no medicine. Awoke with thickly-coated tongue (grayish), with terra-cotta-colored streak down the middle; shifting pains in the right elbow, changing to left elbow, then back to right again; aching, dull pain across small of back; dull, frontal headache, with stiffness of back of head and neck; little appetite; very frequent urination (seven or eight times a day); pain in region of spleen, and stitches in region of heart, with slight palpitation.

Thursday, May 9th. Took no medicine. Awoke with slimy tongue, slight frontal headache, and stiffness at back of head and neck; pain in lower part of back; less frequent urination. More energy than have had since commencing to take it (I had felt fit only to lie down every evening since commencing it until this one).

Friday, May 10th. No medicine. Slimy tongue on awaking, with usual dulness of forehead and stiffness at back of head. This *now*

* *Hom. World*, October 1, 1889.

goes off slightly on moving about; feel much more energy; occasional shooting, aching pain through the knees, felt most on going upstairs; appetite improved; urine rather darker than usual.

Saturday, May 11th. No medicine. Usual headache, and back pain, worse on stooping.

Sunday, May 12th. No medicine. Usual headache.

Monday, May 13. Took *Stag* 12c dil., 5 drops three times a day in water. Dulness of head increased by it; then all symptoms passed off.

NEW AMERICAN REMEDIES IN DYSPEPSIA.*

Iris Versicolor.—This remedy acts throughout the entire alimentary canal, but more especially upon the superior portion, the salivary glands and the pancreas. It may be employed in preference to *Nux* and *Puls.* in diseases of the stomach when the following symptoms concur: Violent pain in the region of the stomach that comes on at intervals; vomiting of food an hour after eating; bilious vomiting; acid contents of the stomach with or without pain; inflammation of the œsophagus and duodenum. Any of these symptoms authorize the employment of *Iris*, with the probability of good effects.

Lithium carb.—May be found useful in obstinate acidity of the stomach.

Lobelia inflata.—Frequently useful in the lower potencies in spasmodic cardialgia, in bilious gastralgia, and in the terrible pains caused by the passage of biliary calculi. In all potencies it is homœopathic to that form of vomiting, accompanied by great prostration, cold sweat and weak pulse.

It is also useful in cases of vomiting produced by violent emotions, in the same manner as *Gelsemium* in cases of involuntary dejections from the same cause.

Dr. Jeans has employed this remedy with excellent results against many symptoms of dyspepsia, and considers the principal indication for its use to be *sensation of debility and oppression at the epigastrium, with oppression of the chest.* In many cases where the oppression of the chest is insignificant, still the use of *Lobelia* is often beneficial, as the following clinical case shows: A subject 45 years of age, large, robust, suffering from a copious hæmorrhoidal flux and its consequences, debility and pressure at the epigastrium, with some acidity of the stomach. He had administered to him *Nux* and other remedies without result, until finally a slight oppression

* *El Consultor Homeopatico*, August, 1889.

of the chest was apparent and Lobelia was given, and the following day the patient began to recover his vigor; the oppression of the chest disappeared, the gastric symptoms, the hæmorrhoidal flux; the patient was also freed of a debility of the rectum, and the anal muscle, that had incommoded him many years, was strengthened.

Among Botanists this drug has enjoyed the reputation of an excellent anti-dyspeptic; used in doses of 3 to 4 drops before eating, it has the reputation of acting as an aperient and auxiliary to good digestion; however, its abuse debilitates the stomach and its function.

In dyspepsia produced by the abuse of green tea, tobacco and poor liquors, whereof patients present usually symptoms of debility of the stomach, it is very efficacious.

Dr. Jeans's characteristics for the employment of Lobelia are: Dyspnœa constant, aggravated by the least exercise or exposure to cold; chronic paroxysmal asthma; weakness and pressure on the epigastrium, rising thence to the heart, with or without heartburn; sensation of a foreign body or quantity of mucus, with oppression in the larynx; frontal headache, passing from one temple to the other; pain in the shoulder; pain in the left side; urine deep in color; oppression over the epigastrium, with simultaneous oppression of the heart.

Myrica cerifera.—This remedy is of the highest importance in gastro-intestinal disorders. Principally the symptoms are: Unnatural hunger, followed by indigestion and icterus that tinges the skin yellow; fulness in the region of the liver and of the abdomen; retention (*encasa*) of the urine, which is yellow and frothy, deepening in color daily, discoloring the linen; great debility and somnolence, even to stupor.

Oleum Cajeputi has cured many cases of nervous vomiting, dysphagia, and spasmodic constriction of the œsophagus.

Oenothera biennis.—The probable action of this remedy is presented in the following cases: A man 26 years of age, active, had had dyspepsia for five years, and great pain in the region of the bladder, with frequent desire to urinate. He had been treated by various systems without beneficial results, until his case had become famous, and attributed to the presence of vesical calculus. *Oenothera* and *China* before eating produced immediate and certain relief.

A dyspeptic subject, age unknown, suffered especially from vomiting of food after eating; wakeful during the night, aggravated by repeated evacuations of urine. *Oenothera* before meals cut short the vomiting, relieved the irritability of the bladder, and permitted rest during the night.

Podophyllum.—The action of this remedy upon the digestive tract is very extensive and energetic, but its symptoms are more promi-

ment upon the liver and intestines. It is especially useful when the disease is characterized by symptoms in those organs. It is very valuable to combat those dyspepsias occasioned by the abuse of mercurials.

Pulsatilla Nuttalliana.—Stinging and bruised sensation at the entrance of the stomach; cutting pain in the stomach, with distention of the abdomen, and dull headache; sour eructations; melancholia; nausea without vomiting; pain in the epigastrium; acute cutting pain in the stomach, extending to the spine; indigestion, dyspepsia, and vomiting of the pregnant.

Populus tremuloides.—Dr. Coe, in his "Conc. Org. Remedies," recommends *Populus* in the following cases: Indigestion, flatulence, lumbricoids. "As a remedy for indigestion, with flatulence and acidity, I know of no simple agent more to be relied upon." As a tonic it is tolerated by the stomach in hysteric cases when all others are repugnant, and for the same reason it is an excellent remedy for dyspeptic symptoms in the pregnant.

CALENDULA AND ECZEMA.*

I WAS called upon to attend, in October, 1888, a gentleman of about thirty-two, a high official in the Cooch-Bihar State, suffering from chronic eczema affecting the left leg. The past history of the case, as described by the patient, is given below in his own words: "A wonderful cure," says the patient, "has been effected by *Calendula* in a very bad case of eczema. A patch of vesicles, believed to have originated by contact of saltish well-water in the up-country in November, 1887, about two and a half inches above the left ankle-joint anteriorly. Various kinds of medicines were applied, but to no purpose. The ulcer, however, disappeared by itself without any medicine. But no sooner had the ulcer healed up, than another abscess-like swelling appeared about three inches above the ulcer just healed. It was opened, and poultices and ointments were applied. But the ulcer dragged its slow length, in spite of the applications, until the surrounding parts were inoculated, and about thirty pimple-like eruptions broke out on all sides. A quack, who was reputed to have cured many such cases, was consulted, and his medicines were applied for a couple of weeks. He cured the surrounding eruptions, but not the original one, which had attained a chronic state of a year or so. Finding the quack's medicine did not have any effect on this ulcer, I consulted Dr. Rád'hákánta Ghosh, who, at first sight, pre-

* R. K. Ghosh in *Hom. World*, October, 1889.

scribed the above-mentioned medicine. The cure was effected in about twenty-one days."

Now, when I saw the patient, I noticed the ulcer was larger in size than a one rupee silver coin, covered by a yellowish crust, formed by drying up of the discharges from it. When the crust was taken off, I noticed much slough all over, proud flesh in the centre, with depression between the proud flesh and the raised edges and fissure-like cracks all over the ulcer, with much painful swelling of the leg and foot and redness of the surrounding parts, looking like diffused erysipelatous inflammation. I prescribed *Calendula* lotion (*Calendula* θ mxx., *Aqua* $\bar{3}j$), to be applied to the sore by saturating a piece of linen rag folded into four folds, with instructions to keep the sore constantly moist with the lotion, keeping the saturated linen rag in position by means of a bandage. To my surprise, and that of the patient, the slough was almost cleared off in about four days, the proud flesh and the fissures reduced to the same level with the surrounding skin or tissues. The ulcer assuming a healthy appearance, I ordered the continuance of the *Calendula* lotion, but in a milder form (*Calendula* θ m.v., *Aqua* $\bar{3}j$). On the eleventh day from the commencement of my treatment, the ulcer almost healed up, but commenced itching and burning very much, to the great annoyance of the patient. On examination, I was led to the belief that the formation of healthy granulations in the part of the ulcer which yet remained to be healed up was being much hindered by the irritation produced by the lotion, which I believed made the surface of the ulcer rather raw, and on account of which the patient felt a sort of tensive and burning uneasiness. To remove the irritation I thought some *oily application* was necessary. I accordingly prescribed *Calendula* oil (*Calendula* θ m.v., Olive oil $\bar{3}j$), a little to be applied to the sore by means of a piece of lint, to be kept in position by means of a bandage as before. The ulcer healed up in about three weeks.

I have been apprehending a recurrence of the disease, as my experience has taught me to believe that it often recurs. It is now about ten months since the case was cured, and I am glad there has been no recurrence of the disease, nor has any inconvenience been felt by the patient, who told me that he did not apprehend a recurrence of the disease. It is worthy of notice that when I took up the case I was of opinion, as were also those gentlemen who treated the case previous to my undertaking the treatment, that my attempt at curing the case would not be successful. I was led to the opinion from my personal experience, gained from a very large number of cases of the same disease which I have been called upon to treat from time to time in the course of my last seventeen years' practice as a homœopath, and especially from my own case, when

I had a patch about two inches above the right knee-joint, which had spread on all sides, occupying a circumscribed space, the diameter of which, if I remember aright, was about three inches, and which lingered over two years, and made the movement of the knee-joint very painful in spite of all kinds of treatment, namely, allopathic, homœopathic, aurvedic, and quack medicines, and which, at last, yielded to *Rhus* lotion and *Rhus* oil externally (*Rhus tox.* θ m.v., *Aqua* ξ j and *Rhus tox.* θ m.v., Olive oil ξ j) respectively, and *Arsenic* 3x trit. in half-a-grain doses, a dose every day at bedtime at night. I was cured in two weeks or so by these agents.

Slough, proud flesh, and raised edges were the indications for my prescribing *Calendula* in the case above referred to. I must also add that these three indications, more especially the first two, have always been my guide in the selection of *Calendula* in cases of ulcers with decided success. I never tried *Calendula* in cases of eczema before the case mentioned above came under my treatment.

I must add that I believe constant moist application over the sore is the *secret of cure* of eczema. I have often found constant application of even *unmedicated water* to the sore giving much relief, or even curing many cases of chronic eczema.

HOMŒOPATHIC THERAPEUTICS.

Army Diarrhœa—*Bryonia*.—Mr. O. W., age 45, suffered from diarrhœa, antedated by army fever, followed in six months by sun- or heat-stroke. The peculiarity of the diarrhœa when received as a patient for treatment was: Sudden, foamy diarrhœa, following a few days of regularity of the bowels, recurring in this manner week after week since he left the army. Diarrhœa always comes on when working in the sun. Pain all through the head; dropping of blood from posterior nares; bad taste in the mouth mornings; tongue slightly coated and cracked; bloating of the stomach after meals; appetite good for all meals except breakfast; sharp, stitching pains in the region of the stomach and liver; frequent desire to urinate, with smarting and burning during the passage of the urine; difficult inspiration, cannot fill the lungs readily; oppression of the chest; lameness and soreness of the neck, and drowsiness. This suite of symptoms prevailed during looseness of the bowels. During the intervals of the bowel trouble he was able to work at his trade (car repairer) with comfort and pleasure. I gave him *Bryonia* 30, 12 powders, one to be taken morning and night every other day. This prescription markedly relieved all his symptoms, and, after a

month of placebo, I gave him a dose of *Bryonia* 500 (Tafel), and had the pleasure of seeing him entirely cured in two months.

Taking such a case as this one, lasting over twenty years in spite of constant allopathic treatment, the following remark of Hartshorne, in his "Essentials of Practice," shows bigotry of the most unlearned type. In detailing the "great leaders and reformers of medical practice," he says: "I leave out of this list and the Hahnemannian homœopathism, as, however serious have been their detrimental effect upon the welfare of the public at large, they have scarcely influenced the progress or present status of medical science (1871) either for good or evil."

C. F. M.

Aspidospermine*—*Dyspnœa*.—This alkaloid is from the South American tree—*Quebracho*. The maximum dose, according to Merck, is $\frac{1}{10}$ th grain. I use the 30th trituration, which I find most efficient in doses of 2 to 5 grains.

CASE I.—A boy of 10. The attacks of spasmodic dyspnœa were a sequel of hay fever. The aggravation was at night, when lying down, or sleep was impossible. I tried Ipecac and Arsenic, but with no effect. *Aralia*, also. (I never had any curative or palliative effects from *Aralia*.)

Prescribed Aspidospermine, 30th trituration, 2 grains every two hours, all day. The night was comfortable, could lie down and sleep. Continued the remedy for four days, when he was so much better that the medicine was suspended.

CASE II.—Cardiac dyspnœa in a man of 60. Valvular disease, hypertrophy with dilatation. Distressing difficulty of breathing from the slightest exertion; had to sit upright day and night. Face livid from venous stasis. *Strophanthus* regulated and strengthened the heart's action, but only slightly benefited the dyspnœa. Five grains of Aspidospermine, 30th trituration every two hours effected a marvellous change. He could walk about the house and out to his carriage with but little discomfort. He has now continued it three weeks. Observes no unpleasant symptoms. Can lie on his back and right side and is very grateful for the relief. It seems to act well as an aid to *Digitalis*, or *Strophanthus*, in cardiac dyspnœa.—EDWIN M. HALE, M.D. (Communicated.)

Hydatids of the Liver—*Phytolacca* and *Conium*.—Dr. R. S. Gutteridge reports the following cure of a case of this disease, in the *Hom. World* for August:

* *Aspidospermine* or *Quebrachine* is derived from the Chilian "white *Quebracho*" (*Aspidosperma Quebracho*). At Santiago de Chile the bark is used as a substitute for *Cinchona* as a febrifuge. The alkaloid forms salts with Citric, Hydrochloric and Sulphuric acids.

On the 22d of April, 1875, a young man from the country, aged 30, a grocer, presented himself to me as a patient, remarking, "You see before you a dying man." He was asked to explain himself. He said he was suffering from hydatids of the liver. That he had been at St. Thomas's Hospital, had been tapped twice, and that in the fluid drawn off the hydatids had been found. That on becoming again dropsical for the third time he had presented himself at the same hospital, but they declined to operate, and informed him that the tumor might burst at any time, in which case death would instantly ensue. This was the more, he thought, to be regretted as he wanted to get married, which, under present circumstances, was impossible, as the father of the lady positively refused to allow his daughter to ally herself with a man whose life was so precarious. The patient had consulted several physicians, but the verdict was everywhere the same, so that his brothers, with whom he was in partnership, remarked on his coming away on the morning in question, that he was simply going to waste more time and money on an errand as fruitless as all the others had been.

The patient was of middle height, fairly built, presenting exactly, in the face, the yellowish pallor previously described. The abdomen was considerably distended and fluctuation unmistakably present. There was no tenderness of the liver, but a foul taste in the mouth and, occasionally, his water was white. I prescribed for him *Conium* 2x, 3 drops twice a day, and *Phytolacca* 2x in trituration, 3 grains dry on the tongue, night and morning. These medicines were never changed. I have ascertained that he had his prescription made up forty-three times. I also ordered smart friction of the abdomen night and morning. On July 5th the patient was seen again, when he reported himself as a great deal better in health, better in every way; he is considerably smaller around the abdomen. He was to continue the medicines. By November 2d of the same year he had regained his usual health. Until fluctuation was discovered the authorities at St. Thomas's had resolved to use galvano-puncture.

This young man was seen again in March of the next year, when he reports that he had been quite well for some months, but was now suffering from nervous sensations and indigestion, for which I prescribed. He has remained quite well up to the present time, and has all along managed a large business.

Sunstroke—*Glonoïn*.—N. E. Deane, surgeon, reports the following cases in the *Hom. Review* for September: In July, 1883, the master tailor of a line regiment stationed in Ireland complained to me of a headache which often almost incapacitated him from work, especially when stooping in the workshop in the course of his duty. About seven years before, he had had sunstroke in India, and ever

since had suffered continuously with a heavy, pressive pain at the occiput, at times accompanied by throbbing. He was a temperate man. Having undergone the various orthodox methods of treatment both abroad and at home, I decided at once to give him *Glonoïn*, being then somewhat inexperienced in the action of the drug. I put about 10 drops of the 1x into a tumblerful of water, and told him to take a dessertspoonful three times a day. I saw him a week later. He had only taken two doses of the medicine, because as soon as he had taken it "he thought he was going mad!" In about six hours this medicinal aggravation passed off, and with it the original headache; and he expressed himself as "not knowing how to feel without his headache." On inquiry from India, two years later, he had had no return of his trouble.

CASE II.—The next case is a parallel one, but well illustrates the difference in the action of the medicine when given in a tropical climate and during a continuance of the disturbing influence—the sun—and when given in a cool climate:

In August, 1886, in Bombay, a sergeant of a line regiment complained to me of a pain at the occiput, spreading over the vertex and round the temples. He had sunstroke in 1878, was insensible for eight days, and was invalided home for change of climate. Since then he has been subject to these headaches when walking much, or when out in the sun, even when protected.

Belladonna failing to relieve him, on August 10th I gave him one drop of *Glonoïn* 1x, he then being prostrated with the pain at the occiput, face flushed, and throbbing arteries. In half an hour he began to perspire about the head and then all over the body, with very slight increase of the occipital pain. In little more than another hour he had a remarkable feeling of cheerfulness, merely experiencing a slight heaviness in the head, and was able to eat, which he had not felt inclined to do for three days. The next day the pain returned slightly, and I gave him two doses of *Glonoïn* 1x at intervals, with still less aggravation and no consequent perspiration. For the next day or two he had no headache in the day, but at night, when lying down, it came on. I gave him a dose of *Glonoïn* night and morning from August 13th to 23d, when he was perfectly free of all headache, and had comfortable nights. He had no rise of temperature during the height of the paroxysms. On September 9th I was sent for to see him, and found the symptoms had returned with great severity. He had been on the rifle range in the sun, and shooting in the glare from 6.30 A.M. until 2 P.M., with half an hour's intermission for breakfast, and on getting home he was again prostrated with the pain. *Glonoïn* relieved him again, but on October 11th he was still suffering from some headache, when I lost sight of him.

With reference to these cases of bursting, occipital headaches, following exposure to the sun, I may say I find *Glonoin* almost specific, and the drug will not affect pain situated elsewhere in the head in the same way unless accompanied by the occipital pain. In the tropics I find the dose must be larger, and a patient will not gain immunity from a fresh access of pain, under the medicine, when exposed to a tropical sun, especially on an empty stomach, though such immunity seems to be conferred in this country.

Neuralgia—*Diadema*.—J. Compton Burnett, M.D., reports, in the *Hom. World* for September, the following case:

For a number of weeks I had been treating a maiden lady of twenty odd years of age for bad neuralgia, but it would not yield to my pet remedies for neuralgia. I confess to having pets in great numbers. I have been reproached with using the same cases several times, but I would submit that the value of clinical evidence lies not in the cases themselves, or in their being heretofore unpublished, but in the lessons they teach. And where a given case teaches several distinct points, using such a case once for each point under study is perfectly fair and legitimate. Thus, for instance, if *Sulphur* rapidly cures a case of neuralgia of the heart, and at the same time brings back to the surface a long pent-up cutaneous affection, such a case may very properly do duty:

First, in treating of neuralgia—Did it not cure a neuralgia?

Secondly, in treating of heart disease with pain, the pain being a synalgia—Was the heart not cured by it?

Thirdly, in treating of the ill effects of suppressed skin affections—Was the suppression not cured by it?

In fact, I would go so far as to maintain that thus utilizing one's clinical data each time separately from one standpoint only is the true way; and the reader is not only not wronged, but, on the contrary, is likely (if not blinded by conceit) to have his view of the nature of disease widened, and his power to cure augmented.

Well, this case has never been inflicted upon a long-suffering world, though it would teach no less if it had.

She wrote: "I am still as bad as ever with neuralgia. Every evening punctually at 7 o'clock I begin with it in my face and head; mostly it leaves my teeth in an hour or two, and only continues in my head. When I once get to sleep I have a very good night until about 4 or 5 in the morning, when I wake always with toothache and neuralgia. . . . My best time is from 3 to 7."

Diadema 3x, 6 grains dry on the tongue every four hours, cured this *clock-like regular* neuralgia right off, and it did not return. Patient was very pronouncedly of hydrogenoid constitution.

Glonoïn with Strophanthus.—The new cardiac remedy, *Strophanthus*, does not contract the cardiac arteries, nor does the better known *Digitalis*. But Dr. Thompson finds that alternating Glonoïn with Strophanthus augments greatly the value of the latter in weak hearts with contractile arteries. He publishes his various interesting cases that illustrate the combined action of Glonoïn and Strophanthus and of Strophanthus and *Digitalis*, with very satisfactory results. The usual dose given is 3 to 5 drops of *Digitalis* or Strophanthus combined with 1 or 2 drops of the first centesimal potency of Glonoïn.

Since the publication of Dr. Thompson's article, I have had an opportunity of attesting his practice in a case of dilatation of the heart with great anasarca, senile. The arteries were very tense and rigid, owing to atheroma; great dyspnœa, with a quick, intermittent pulse. The previous medical attendant administered *Digitalis* alone in doses of 10 to 15 drops three times a day, aggravating all the symptoms. I prescribed 3 drops of *Digitalis* every four hours, alternating with Glonoïn 1 drop at the interval stated. In less than twelve hours beneficial effects were observable from this method. The dyspnœa was relieved; his previously cold extremities now became warmer; the urine augmented, and the pulse and heart's action became quite regular; the dropsy disappeared in a week.

For many years I have been in the habit of using Aurum in these cases; procuring a similar effect upon the arterial system as found under Glonoïn, but not so promptly. *Aurum muriat. et sodic.*, in doses of $\frac{1}{16}$ th or $\frac{1}{32}$ th of a grain, is the best preparation.—(———)
La Reforma Medica.

Hay Fever—*Ambrosia Artemisifolia.*—Of late years much attention has been called to the species of the genus *Ambrosia* (the Rag Weeds) as being, through the agency of their pollen, the cause of hay fever. Many people afflicted with this troublesome complaint lay the charge directly at its doors, while others claim that, in all probability, it is the direct cause, as their sufferings always commence during the anthesis of the plant. The general impression, however, both among the laity and the medical fraternity, has been that the effect was a purely mechanical one, the nasal mucous membranes being directly irritated by the pollen dust in substance. If this were true, would not every one suffer from hay fever? Impressed with the above report, I had the pleasure of curing two attacks while writing my work upon "American Medicinal Plants," in which the above species figures. Since the publication of the work, all the cases I have had of the disease (four) have yielded beautifully to the 3d centesimal potency of the drug.

The four cases, Mr. B——, Mrs. I——, Mr. C—— and Miss P——,

presented the following generic symptoms: Inflammation of the mucous membranes of the nose, adventing yearly in the autumn. At first dryness, then watery discharges, finally involving the frontal sinuses and the conjunctival membrane. In Mr. B. and Miss P. the irritation extended to the trachea and bronchial tubes, in Mr. B. amounting to severe asthmatic attacks. In all cases the coryza was very severe, and in previous years lasted, in spite of all treatment, from four to eight weeks. Mr. B. has found relief from *Ambrosia* 3, three times a day, in from four to six days, for three successive years, with no return of the trouble in the same year; Mrs. I. has been relieved in from two to four days for two years; Mr. C. gets immediate relief in twenty-four hours (three seasons); Miss P., in this her first experience with *Ambrosia*, found entire relief from six doses.

C. F. M.

Lumbago—Oxalic Acid.—In reading in one of the foreign journals, some time ago, an article upon the treatment of lumbago, I was astonished not to find *Oxalic acid* among the remedies to be considered in that disease, as striking cases calling for this remedy seem more or less common, at least in this region. The following clinical case presents the peculiarities of the drug:

Mrs. S—, age about 55, suffered for several days from an excruciating attack of lumbago. Her physician (homœopathic) had about exhausted his knowledge of applicable remedies in her behalf. On the fifth day I was called by telegraph (being then in New York City), and on arrival found her presenting the following symptoms, and taking *Rhus tox.*: Terrible pain in the lumbar region, extending down the thighs and over the region of both kidneys; extremely anxious to change position frequently, but the slightest movement, assisted or unassisted, caused her to shriek out in agony; frequent desire to pass large amounts of urine, but the pain on moving was so great that she would shrink from the attempt; legs numb and very weak and cold; pulse rapid; short, distressed breathing in general, though at times there were intervals of easier respiration; appetite normal, though swallowing was difficult and painful. I prescribed *Oxalic acid* 30th in half-hour doses, and had the pleasure of hearing that two hours afterward she could be placed upon the vessel with very little pain. She sat up twelve hours after, and in twenty-four hours was entirely relieved.

C. F. M.

Anemone Pulsatilla in Diseases of Women.—Among the new remedies lately incorporated into the materia medica, *Anemone pulsatilla* is one of the most important, as regards its efficaciousness, as well as the many uses to which it may be put. For the

last five years a series of works have appeared on the method of action of this plant, in all of which its certain action is made prominent. Dormant has used it in *orchitis blennorrhagica*, by means of which he has cured 75 per cent. of the cases coming under observation. Bazy has seen the pains of this trouble disappear in one to three days from its use.

The remedy acts in the very same way in those diseases in which the condition in question is a painful female affection. In *dysmenorrhœa*, as well as in *chronic metritis* and in *inflammations of the uterine aduexa*, the writer has used the remedy in regular doses, especially in those cases in which the condition was characterized by a prominence of pain in the affection. Its action is somewhat analogous to that of Aconitine in painful neuralgic affections. The remedy seems to have a pronounced action upon the nervous system.

Contrary to other authors, who ascribe the greatest efficaciousness to the tincture prepared from the dried leaves, the writer has found that this preparation by far does not act as intensely as an alcoholic extract from plants freshly gathered in the month of June, in which equal parts of the plants and of a 90 per cent. alcohol were used. Less efficacious than this extract is the glucoside of the plant, *Anemonine*.

As to the dosage and use of the remedy, the writer gives, in *dysmenorrhœa*, four days before the beginning of the expected menstruation, 4 tablespoonfuls of wine having about 10 drops of the alcoholic extract to the teaspoonful.

As soon as menstruation begins, the remedy is discontinued for three or four days, and then finally given in the same dose for three or four days again.

By this procedure the *dysmenorrhœa* was often observed to be cured in the second month. If chlorosis be present, then Chlorate of manganese is given in doses of 0.05 grain per teaspoonful. In cases of ovarialgia, in consequence of chronic uterine imperfections or inflammations in that neighborhood, the remedy is given in the same doses until the pains have disappeared. Complications in the course of treatment with the remedy have never been observed.

As to the dosage of *Anemonine*, it was given in daily doses of 0.05 to 0.1, and never higher than 0.2. Its action is much less certain than that of the alcoholic extract, as in long-keeping it is liable to undergo changes.—*Jour. de Médecine de Paris*, 14, 1889; *Allg. Hom. Ztg.*, 8, 1889.

P. AND P.

Nuphar Lutea—*Chronic Diarrhœa*.—An exceptionally interesting and intractable case of the above complaint resisted the ordinary remedies usually administered, as well as the promiscuous experimental measures of the superannuated school.

History.—Johnnie H., aged sixteen, weight ninety-eight pounds, spare build and bilious temperament. He has the appearance of a boy that has undergone some wasting disease. His growth is stunted, his flesh flabby, skin shrivelled and yellowish. Says his present trouble originated when he was only two years of age, the attending physician at that time pronouncing it "summer complaint," and that the diarrhœa, which at certain periods of exacerbation assumed the nature of dysentery, has continued uninterruptedly up to the present time, the only amelioration noticeable occurring in the fall.

The evacuations were characteristic of *Podophyllin*; watery, painless and quite copious, yellowish in color and very offensive. They numbered from three to ten a day. No prostration immediately after, but a constant feeling of physical exhaustion. The kind, quality and quantity of food he subsisted on governed the frequency of the stools, consequently cautious dieting conserved his strength. His appetite was capricious and changeable, and his emaciated face bespoke an impoverished body. A three weeks' trial of *Pod.* 3x and 6x proved its inefficacy. The following remedies were then had recourse to: *Colc. c.* 3, *Hep. s.* 3, *Phos. ac.* 6 and *Sulph.* 6. They were followed by no better results, but on re-canvassing the case carefully, *Nuphar lutea* was decided on as the *similimum*. He took one dose of the 3x every four hours, and his improvement was immediate and permanent. He is now well and hearty, the evacuations having assumed their natural consistency.—*Southern Journal of Homœopathy.*

Natrum Muriaticum—*Seaside Headaches.*—A young lady complaining of severe headaches, coming on only at the seaside, beginning in the morning and lasting until night, was treated with *Natr. mur.* 10m. In two days the pain had quite vanished, although previously so severe as to often confine her to bed. To be perfectly sure, I put the question to her: "What was it that cured your headaches?" "Why," replied she, "I suppose it must have been your powders; at least, I took nothing else for them." Note: that the headaches did not re-appear during a further sojourn of weeks by the sea; which being interpreted is, that the potency continued the whole time to antidote the tendency of the crude drug.—Dr. Burford, in *Hom. World*, 456, 1889.

ITEMS OF GENERAL INTEREST.

On the Action of Chromium.—Pander publishes a work upon the action of Chromium. Chromium comes under consideration in two forms: (1.) As an oxide; (2.) as Chromic acid. The Lactate of chromium and Natrium was proven as the most proper one to

determine its pharmacological action. In all cases where the Chromoxide salts were proven, prominent general poisoning symptoms were wanting, but there was an increasing cachexia, combined with symptoms of a *chronic nephritis*.

The *post-mortem* results were the same after subcutaneous injection as when introduced into the stomach; the most important changes were found in:

- I. Digestive Tract.
- II. Kidneys.
- III. Blood.

I. *Digestive Tract*.—Injection of the vessels; epithelial necrosis, even to the formation of croupous and diphtheritic membranes, ecchymoses and, eventually, ulceration of the solitary follicles and Peyer's patches.

II. *Kidneys*.—In all acute cases parenchymatous nephritis could be proved present, passing over into the interstitial form when the poisoning is chronic. The principal part (72 per cent.) of the Chromium injected was found to have passed over into the urine, *hence, the kidneys are the chief places of elimination*.

III. *Blood*.—Blood has the raspberry-color, leading one to think of leucæmic blood. The heart showed, in some cases, endocarditis and hæmorrhages and ecchymoses from the vessels. It had no action upon the blood-pressure and action of the heart in the form of a Chromium salt, although 12.5 grains were injected into a small dog's vein. The various organs contained Chromium after washing out the vessels, more or less, the liver the most, then the digestive tract, and finally the kidneys.

Chromic acid is, in frogs, 8 times more poisonous than Chromic oxide salts; in warm-blooded animals it was 100 times more poisonous. The symptoms were the same as in Chromic oxide poisoning, only more intense.

The Chromates were also without influence upon the vascular system. Upon *post-mortem* examination endocarditis and numerous hæmorrhages into the endo- and pericardium and ecchymoses. In nephritis, as a consequence of poisoning by Chromates, necrosis plays an important part. He places the action of Chromium upon the digestive tract and kidneys as greater than that of Arsenic, Antimony, Cobalt and Platina, and it is not far removed from that of Mercury.

P. AND P.

Sedum Acre—*Its Action*.—The active principle of *Sedum acre* is an alkaloid, of which easy decomposibility has prevented chemical analysis.

Jungst has investigated the action of the hydrochlorate and sulphate of the alkaloid, the freshly expressed juice and the alcoholic

extract. The extract and the plant have no specific pharmacological properties. Cats are more sensitive to the alkaloid than dogs. The symptoms of an acute poisoning are: After a preceding stage of choking and vomiting, increasing anæsthesia and stupefaction appear; the voluntary movements of the (skeletal) muscles decrease progressively; the respiration becomes forced and superficial, the respirations decrease more and more in number; spasmodic movements of the extremities, with dyspnœa appear. Death takes place from cessation of respiration, the heart beating after the cessation. In cats, there were distinct mydriasis and photophobia, together with violent distortion of the bulb, outwards and upwards. The activity of the salivary glands, as well as that of the digestive tract, is excited. Applied locally, the freshly-expressed juice of the plant causes distinct and increasing burning, with a growing redness of the skin; the alcoholic extract is inactive in this direction. Upon man, there resulted violent headache, together with gastric disturbance (nausea, anorexia, etc.).—*Archiv. f. Exper. Path. n. Pharmak.*, 24, 1888.

Deadly After-action of Chloroform.—Dr. Strassmann has made experiments, which are mere reprovings of Ungar's provings published in 1887. Ungar narcotized dogs several times, and examined the dead ones in the first hours (up to twenty-seven hours) after the cessation of the narcosis, and found great fatty degeneration of the heart and liver; secondly, the kidneys and the striped musculature, and finally the stomach and other mucous membranes. Strassmann resumes as follows:

1. After a lengthy chloroforming in the dog, a fatty metamorphosis of the internal organs, especially of the liver; secondly of the heart, and rarely that of other organs.

2. The increase of the excretion of nitrogen in hungering animals under the influence of chloroform shows an increased destruction of nitrogenous substance, hence the condition in question is one of fatty degeneration, and not of fatty infiltration.

3. Sometimes lengthy chloroforming of the dogs—at the highest, thirty hours—may lead to the death of the animal after cessation of the narcosis and apparent recovery.

4. In these lethal cases, as the heart affection was found more intense, it may be assumed that it is the cause of the fatal termination.

5. In non-fatal cases the degeneration of the organs is repaired in the course of a few weeks (seen in a young dog from the same litter).

6. Weakening influences, hunger, loss of blood, etc., favor the appearance of the changes; in strong and young animals they less frequently appear.

7. The previous combination of morphine with the chloroform used in narcosis diminishes the amount necessary, and hence the changes consequent. With ether, these changes are not to be observed in any prominence, yet with pure ether a complete narcosis is scarcely obtainable.

8. Other varieties of animals, cats and rabbits, show deviations in this direction from those of the dog, which observations warn one to be cautious in using chloroform upon men. P. AND P.

Influence of Natrum Sulphuricum upon the Blood and Urine.—Lawadzki examined the blood and urine of persons after giving a solution (20 per cent.) of Natrum sulphuricum, and came to the following conclusions:

1. The number of the red corpuscles increased in 1 c.mm. of blood 25 to 65 per cent. 2. The amount of hæmatoglobulin increased 2.5 to 5 per cent. 3. The specific gravity of the blood increased from 1.05778 to 1.07808, hence greater than in cholera. 4. The analysis of the blood showed that this increase of blood-corpuscles of the hæmatoglobulin and the specific gravity is dependent upon a loss of water from the blood; the loss amounted to 1.30–3.45 per cent. 5. The amount of inorganic combinations in the blood (salts) fell 10 to 50 per cent.; on the contrary the amount of albuminoids increased and kept pace with the loss of water. 6. The arterial blood-pressure fell quite distinctly upon administering Natrum sulphuricum, not from its immediate cardiac action, but from a concentration of the blood. 7. The amount of urine, as well as that of urea and the chlorides, become less. Hence he concludes the action of Natrum sulphuricum to depend upon a transudation of water from the blood into the intestines. The intestinal glandular secretion is increased, as the chemical analysis of the intestinal contents has shown.—*Gaz. Lekarska*, 8, 51–52, 1888.

Fluorhydrate of Sodium.—Dr. O. Hewelke investigated the action of Sodium fluorhydrate. A 2 to 2.5 per cent. solution injected subcutaneously given per os or intravenously. Only small doses of 0.02 to 0.03 were given subcutaneously. There was violent pain. In some dogs a slight trembling was observed. The next day the skin reddened at the place of injection; there formed an infiltration whose centre was covered after three or four days with a round, necrotic scab, which separated and left an ulcerous surface.

Introduced into the stomach by a sound—0.04–0.05 to 1 kilo weight—these were: Salivation, vomiting, restlessness, trembling, with consequent depression. After two to three hours the animal recovered. Doses of 0.1 to 1 kg. weight were lethal. Pulse and respiration were first accelerated, then slowed and finally ceased. All the

dogs placed themselves into a characteristic depressed and immovable position; the reflexes were lowered. After one to one and a half hours, paralysis of the hinder extremities, and death finally made its appearance.

Upon *post-mortem* examination the pyloric extremity of the stomach, as well as the duodenum, were strongly eroded and hyperæmic. The ileum and colon were unchanged. Heart strongly contracted. The intravenous injections presented the same picture.—*Gaz. Lekarska*, 9, 12, 1889. P. AND P.

Filix Mas—*Poisoning by*.—Dr. M. Freyer, of Hetline, reviews the rare cases of poisoning by Filix mas, and finally finds it to cause violent stomach symptoms, and especially symptoms of the central nervous system: Great feeling of weakness, vertigo, confusion, stupor, coma, trembling, cramp-like feelings in the hands and feet, amaurosis and immobility of the pupil. Pathologico-anatomically there were no signs, except a general venous congestion. (*Therapeut. Monatschafte*, 3, 3, 1889.) (A case of his, a child of two years and nine months, received 8.0 grains extract Filicis maris in five hours, and died somnolent, with spasmodic symptoms, within twenty-four hours.) Dr. Boyer attended a woman who took 17.0 grains extract Filicis maris æther and the same quantity of extract puniceæ granate in gelatine capsules. A part of the Tænia solium passed away, but violent vomiting and diarrhœa appeared directly after the first 3 capsules and the woman became worse and worse. Towards evening she fell into a soporific condition, in which she lay thirty hours; awakening, her left eye was blind, and the right eye had lost some of its acuteness of vision. Confinement in the dark led to perception of light, after forty-eight hours, by the left eye and recovery took place.—*Prager Med. Wochenschr.*, 13, 41, 1888.

Phosphorus—*Chronic Interstitial Hepatitis*.—Dr. Krönig has experimented upon young dogs, giving them small and increasing doses of Phosphorus for quite awhile, and then killing them at various times. His results were as follows: The poison circulating in the blood first influences harmfully the cellular elements. The nutritive disturbances from the poison in the vessel-walls are seen from the hyaline swelling of the membranes and of the epithelial covering. At the same time, or somewhat later, the stellate cells and the real liver parenchyma are attacked, and more or less distinct necrosis of the protoplasm and nuclei takes place. After more or less time, finally there develop reactive processes at the periphery, consisting of a cellular hyperplasia of the interstitial tissue. The secondary nature of this proliferative process is seen from injected specimens, and, secondly, in specimens in which already distinct *cellular necrosis*, but never proliferative processes, are observed.

The proliferation itself is, as Ackermann observes, not inflammatory. That a similar mode of originating is to be assumed in other forms of scirrhus, Krönig will not agree to, for alcoholic scirrhus begins at the periphery of the acini, and is based upon an inflammatory condition.

Nitro-benzole—*Poisoning by.*—Dr. A. Niden reports a case of poisoning by Nitro-benzole in which ocular symptoms appear: A workman, working but a few months in Roburite (Nitro-benzole), in a factory, fell sick, together with several others, with the well-known symptoms often seen in those working in explosives, but his symptoms were so violent as to force him to give up his work.

He had the appearance of one suffering from a most grave heart and lung disease. The face and mucous membranes of the lips were deeply cyanotic; the conjunctival veins of the ball of the eye were livid, ecstasic, very much convoluted, and curved; radial pulse, thread-like, and 148 per minute. A peculiar bitter-almond-like odor was perceptible upon approaching the patient. The mucous membrane had a deeply-dark discoloration. The heart and lungs showed, however, no organic changes.

Examination of the eyes showed good but slow papillary reaction. The retina and papilla showed much venous hyperæmia, and a weak filling of the arterial tubes. The boundaries of the papilla were sharp; on the lower venous branches there was an exudate. The acuity of vision was $\frac{1}{20}$ ths; the peripheral vision was decreased; the limits for white were limited; the field of vision for colors was also narrowed, so that the borders for green and red were more prominent than those of blue.

Strong heart-tonics caused the case to progress and end well, yet the vision did not return so soon. Not until the fourth week after the patient again began to feel well, did the vision improve and the field enlarge.

In the factory where this case was noticed, 78 per cent. of the workmen were attacked. Frequent symptoms were: Cerebral symptoms, as disturbances in co-ordination; a staggering gait; a confused speech; convulsions and trismus—these are indicative of the grave forms. The ocular symptoms were but little prominent, yet dilation of the pupil and mystogrenes may also be mentioned. The symptoms resemble those of Aniline poisoning, and it is supposed and assumed that the Nitro-benzole is changed into Aniline in the body.—*Central. Bl. f. d. ge. Therapie*, March, 1889.

Fluoride of Sodium—*Its Action.*—It acts upon the central nervous system; as a paralyzant upon the brain, spinal cord, and finally upon the peripheral nerves, as a consequence of paralysis of the

nerve-centres for the vessels, according to Tappeiner. Excitation of the striped musculature; trembling; subsultus tendinum and spasmodic muscle jerks; finally, paralysis, with rigidity of the muscle substance; dyspnœa (paralysis of the vaso-motor centre, according to Tappeiner). The heart pulsated in warm-blooded animals even after death. There is, characteristically, a profuse secretion of saliva and tears (uninfluenced by Atropine), albuminuria. The long-continued administration of the remedy in small doses gave no results.—Tappeiner and Schultz, *Central. Bl. f. d. ge. Therapie*, April, 1889.

Digitoxine and Phlegmonous Inflammation.—In 1875, Koppe observed that Digitoxine, given subcutaneously in dogs, even in the smallest doses (0.1 milligramme), would sometimes produce *phlegmonous inflammation with consequent suppuration*. Kaufmann has sought to solve the question whether the remedy caused it or whether it came from bacteria introduced, and found that *every time after the subcutaneous injection of Digitoxine, phlegmonous inflammation took place*, in most cases followed by suppuration, while they were both kept aseptic and free from bacteria.—*Fortschritte der Medicin*, Bd. 7, 1889.

Cystisine, Cornutine and Sclerotic Acid—*Their Action on the Circulation.*—Streng has made investigations in Riegel's Klinik with Cystisine (first described by von Kraepelin). He injected it subcutaneously and applied the sphygmograph directly to the radial artery, thus obtaining the pulse curve. Cystisinum nitricum in small doses, from 0.003 to 0.004, subcutaneously injected, was completely inactive. Even a dose of 0.006 had not the slightest influence upon the form of the pulse-curve.

Experiments with Cornutine were interesting. No doubt, it has a vessel-contracting and pulse-slowng property in small doses, even in such small doses as 0.0025 to 0.005 (aqueous solution). Given by the mouth, the remedy has the same action, only that somewhat larger doses are necessary.

As regards the action of Sclerotic acid, he could never perceive the slightest increase in tension of the arteries, although for five consecutive days 1.0 gramme was given per os in an aqueous solution. Once the remedy was given subcutaneously, but, in spite of all precautions, violent local pains with great fever appeared, with no action upon the vessel-tension.—*Centralblatt für Gynækol.*, 49, 1888.

P. AND P.

Changes in the Spinal Cord of Man After Acute Arsenical Poisoning.—Prof. Paphow examined the spinal cord of a man who died two days after poisoning by Arsenic, and found changes denoting an *acute myelitis*. The large and small vessels, especially

the veins, were dilated and filled with blood-corpuscles. Near a few vessels, more often in the cervical and dorsal regions of the cord, near the central canal, further in the posterior horns and in the side offshoots, there were numerous suffusions of blood of various sizes. In the vicinity of the cervical enlargement, besides these effusions, there were, near the central veins, masses of plastic exudates, with which the tissues surrounding the central canal were infiltrated. Cells were often visible, especially in the posterior horn, which protoplasm was turgid without a visible nucleus of a roundish form, and robbed entirely of nearly or all their processes.—*Virchow's Archiv.*, Bd., 63, 2, 1888.

Chronic Tea-Poisoning.—S. Smirnow describes the symptom-complex of chronic tea-poisoning in professional tea-tasters. A strong infusion of tea is made and tasted, but not swallowed, in order to test the tea. These tests are made 150 to 200 times daily, resulting in a gradual poisoning. There is a sharpening of the taste and smell, gradually giving way to a dulness of the same. The digestive canal is irregular in its functions, the appetite and nutrition of the body decreased; the liver enlarges at first, then becomes painful, and passes gradually into a condition of atrophic scirrhus; the nervous activity is weakened, the mind depressed, the sight weak, and sometimes there is diplopia; the skin has a dry feel, becomes yellowish and of a parchment color; there are periodic pains in the region of the stomach. After two to three weeks they must give up their business for awhile.

Smirnow has found this to have a hindering action upon the course of constitutional syphilis, it diminishing also the receptibility for Mercury.—*Med. Obsrenie*, 28, 21.

On the Action of Cantharidine upon the Renal Epithelium.

—Cornil and Toupet have investigated the histological changes in the kidney after poisoning by Cantharidine. In very acute poisonings of rabbits or Guinea pigs (fatal within a few hours), the glomeruli were strongly contracted, Bowman's capsules were half filled with a nucleated exudate, in which the epithelial covering of the glomerulus convolutions may be recognized, they having separated in shreds. The epithelium of Bowman's capsule was nearly intact. That of contorted uriniferous tubes appeared, on the contrary, granulated, opaque, full of small empty spaces. Indirect divisions of the nuclei and Karyo-Kenetic figures were only to be found after several days' (five) poisoning, where the drug was often repeated in small doses.

Four days later, the changes in the glomeruli were nearly all repaired. The neck of the uriniferous tube at the constricted por-

tion, where the tubulus contortus is attached to Bowman's capsule, was no longer distinct. Karyo-Kenetic figures were still to be found in the chronic cases of cantharidial poisoning eight days after, and especially were they prominent in the tubuli contorti, but not in every place had the epithelium undergone such changes. Some parts of the kidney appear to have been attacked by the poison, while others, on the contrary, were apparently spared.—*Arch. de Physiologie*, 19, 5 pp., 71. P. AND P.

The Cumulative Property of Bromide of Potassium.—M. M. Doyon has published, in the *Lyon Medical*, a note relative to the cumulative property of Bromide of potassium. His inquiries in this regard were made upon a young epileptic child, age not stated, to whom the drug had been extensively administered for a year. The child succumbed during an attack of scarlet fever. Nothing special was found at the autopsy, but the brain and liver were submitted to chemical analysis. The result showed that the former contained 2 grammes of the drug, and the latter 0.72 centigrammes. Thus, as might be expected, the central nervous system was more largely charged with the drug than any other part.

Sodium Ethylate for the Removal of Superfluous Hair.—In the August number (1889) of *The Practitioner* are given two photographs, one showing a baby with forehead half covered with hair, and the other showing the same child 5 or 6 years old, and with only the slightest trace of hypertrichosis. The case was treated with Sodium ethylate, and Dr. Jamison, the author, relates another case illustrative of the use of that agent in hairy moles on the face:

Miss P., æt. 25, had a hairy mole, about the size of a six-penny piece, on right cheek, near angle of jaw. Long, coarse hair grew from it, and the skin was rough and dark brown. The hair was cut off as closely as possible with a very fine pair of scissors, and the mole was then painted over with Sodium ethylate, a fine glass rod being used. When the mole had a varnished look, the Ethylate was gently rubbed in with the glass rod to make it penetrate more deeply into the hair follicles. Every care was taken not to let any run on the sound skin of the face. The mole had quite a black look when the little operation was over. A hard crust formed over it, which was nearly three weeks in becoming detached. When it came off the hair was seen to be destroyed, and the surface of the mole had a smooth somewhat cicatricial appearance, of a much lighter color than before. This has become much smaller in size and less noticeable, though there is still a slight mark less than a threepenny-piece in size, and hardly perceptible. The patient says that her doctor notices the mark more than any one else.

Dr. Jamison adds that "in those vascular areas seen on the sides of the nose in children, formed by vessels radiating from a common centre, a very small drop of the Ethylate, applied with a fine glass point to the very middle of the vascular area, destroys or obliterates the vessel below (*i.e.*, beneath), and then those radiating from it disappear, and no mark at all is left.

No remark as to the pain of the applications is made, except the statement that "by the time the child had slept off the effects of the *Chloroform* the pain of the application had ceased."

Æsculus Glabra—*An Involuntary Proving*—*fragmentary*.—A gentleman, 35 years of age, was riding along and stopped at a buckeye tree, cut open a green buckeye and smelled of it. There was a sudden irritation of the throat, a sensation of a feather tickling the throat, which caused him to cough, hack, and raise mucus—finally streaked with blood. The effect gradually wore off in an hour or so. The gentleman was very temperate, used no tobacco, tea, coffee, etc., and this fragment is of interest as it is a straw pointing towards a confirmation of the *winter cough* among the Items of Interest in the RECORDER of September, 1889, p. 237.—*Dr. F. Pritchard*. (Communicated.)

Coffee-Poisoning.—A woman, 25 years of age, unaccustomed to drink coffee, drank at one time ten cups of strong coffee, which was followed two hours after by *vomiting, vertigo, sensation of anxiety, coolness of extremities and trembling of the fingers*. The pulse was increased, but not quantitatively changed. Warm drinks and Ether were given internally, she was rubbed off with hot water, and, finally, morphine was injected subcutaneously; sleep appeared, and the next morning she was well.—*Dr. Glogauer* (Berlin), in *Allg. Hom. Zeit.*, 8, 1889.

Basedow's Disease Cured by Pregnancy.—A servant girl, 27 years old, suffering for the last seventeen years from *chorea*, observed since February, 1884, palpitation of the heart, præcordial pains, which extended to the left shoulder and an increase of the circumference of the neck, accompanied by a slight paresis of the legs. A transient improvement followed the use of Arsenic, cold douches, etc. In October, 1887, her condition was deplorable: she was bed-ridden, had complete paralysis of the lower extremities, a high degree of exophthalmic goitre, palpitation of the heart, præcordial anxiety, anorexia, emaciation, nystagmus, etc. As the writer saw her again in February, 1888, a marked improvement was noticed. The symptoms of Basedow's disease had nearly disappeared, as well as the paralysis of the legs. The patient dated the improvement

since the beginning of a pregnancy, which then had reached the fifth month, and hence the improvement must be connected with the pregnancy.

Pregnancy could not have had a psychic influence, as the girl became pregnant irregularly, she not being married, and for this suffered many reproaches from her mother.—Dr. Souza-Leite (Paris), in *Centr. Bl. für Gynæcol.*, No. 1, 1889.

Histerionica Baylahuen—*Therapeutic Properties*.—M. le Dr. Baillé has made a study of this plant, sent to Dujardin-Beaumetz by M. Cervello, a physician of Valparaiso.

Histerionica is a member of the compositæ, in which the most striking peculiarity consists of a resinous exudation, yellow and odorous, obtained from all parts of the plant. It is employed in infusion, tincture and alcoholic extract.

M. Baillé has studied its action upon the lungs, digestive tract, kidneys and the bladder.

I. *Action upon the Lungs*.—He mentions the salutary effects of the remedy in chronic inflammation of the lung. Two patients of Dujardin-Beaumetz, suffering from chronic bronchitis, received Histerionica θ 20 gtt. at a dose. After six days of this treatment the expectoration, which was abundant, diminished quite notably; the sputa, thick and yellowish the first few days, thinned and became less frequent, and the suffocation, so frequent at the beginning, disappeared entirely. It seems to act like Tar terebinthina or Copaiba, but with the difference that it is much better borne by the patients than these balsams, and does not cause cramps of the stomach nor renal congestion.

II. *Action upon the Digestive Tract*.—From several observations, collected from different clinicians, it may be considered as an excellent anti-diarrhetic, it seeming to modify the condition of the mucous membrane of the intestine, acting at the same time as an antiseptic. In unmanageable diarrhœa, where Opium or Bismuth produces no amelioration, it shows very good effects. But it is especially in the diarrhœas of phthisical patients where the writer has noted the best results, for he says the remedy has here not failed him once.

III. *Action upon the Genito-Urinary Tract*.—Given mostly in patients suffering from cystitis. The urine is not increased, but the bad odor of the urine is much diminished, micturition becomes less frequent and less painful.

IV. *Ulcers*.—Histerionica upon pledgets of cotton, applied as a dressing to ulcers, quite promptly and beneficially modifies them. The alcohol evaporating leaves a resinous deposit, which covers the entire ulcer with a slight film, preventing contact with the air

and making cicatrization more easy. It is especially as an anti-diarrhœtic that the plant should attract the attention of physicians, and the excellent results obtained in the diarrhœa of tuberculous patients should lead to its employment.—*L'Art Medicale*, May, 1889.

Vernoia Nigritiana.—Häckel and Schlagdenhuffen (*Arch. d. Phys.*, xx., 1888) describe an East African root which is used by the natives as a febrifuge and an anti-dysenteric, and compare its action to that of *Digitalis*. The bushy root has a nauseous taste, somewhat resembling that of *Ipecacuanha*, and in a fresh condition has a bitter taste as well. A glucoside has been found in the root and termed *Vernonin*.

Action upon the Circulation.—Decrease of heart-beat (in frogs) after injection of a watery solution of 0.02 gm. after a few minutes. After again rising somewhat, the heart-beat falls off from 36 to 32 a minute. After 3 cgrs. the phenomena became stronger, and the number of beats diminished about one-third. The heart had to make an effort to empty itself, and after the contraction the blood flows very slowly into the auricles. After 0.04 gm. to 0.09 gm., these phenomena become more violent, the heart remains finally in systole, and death follows in eight hours.

A dove, into which 0.05 gm. *Vernonin* was injected into the heart region, was apparently not affected, nor even on doubling the dose; but after injection of 0.150 gm. the animal became indifferent, lost its appetite, and was found dead the next morning with its head upon its breast. Its heart had stopped in systole. Another dove, after injection of 0.250 gm. died in twelve hours with the same phenomena. Hence *Vernonin* acts similarly to *Digitaline*, *Strophanthus*, and *Convallaria*, but in comparison with *Digitaline* it is eighty times weaker (in frogs).

Vernonin paralyzes the motor nerves but not the muscles in frogs; a similar action in mammalia. A rabbit, weighing 1.1 kilos., into which was injected 20 gms. *Vernonin* in the right femoral region, and 1 to 2 mgs. under the skin, the ventricles ceased to act, though the auricles continued to contract ten to fifteen minutes after.

Nux Vomica—Poisoning.—J. Venkata Swamy, L.M.S., of the Aska Dispensary, records a case of poisoning by *Nux vomica* in the crude form. An adult male was brought to the dispensary at 7.30 A.M. on the 17th February, 1889, with giddiness; numbness in the trunk, and more markedly in the lower extremities; dryness of throat; slight injection of the conjunctivæ; heaviness of head; occasional backward jerking of the head, sometimes developing into a flying fit of opisthotonos whilst he was taking, or on the point of taking, medicines; consciousness perfect; respirations 16 per minute and unaltered in quality; pulse slightly frequent; weakness of

voice; confusion, as in alcoholic inebriation; and facial features generally indicative of fear and despair. It appeared that the patient had suffered from gonorrhœa, and was advised by a friend to take the root of *Nux vomica*, well ground, with equal parts of sugar and black pepper, and made into a mixture with water. The exact quantity of the root taken could not be made out. He had swallowed the medicine at 7 A.M., and first observed the symptoms half an hour after. The spasms of the back were brought on by attempts to swallow medicines, more powerful efforts in other directions being found to produce no effect of the kind. The muscles of the lower jaw and the pupils were unaffected. The patient suffered severely from painful muscular cramps in his legs, which were afterwards as tender as a suppurating abscess, though the cramps continued for not more than two hours. An interesting feature of the case is the fact that swallowing of medicines, or even the mere idea of medicine, excited spasms of the muscles of the back. The patient often withdrew, as if shocked, from the medicine, asserting that the sight of a glass of medicine simply recalled to his memory the poisonous dose he had taken. The mental excitement caused by the sudden flashes of memory of the toxic medicine probably served to produce spasms through the already irritated and unstable nervous centres of the spinal cord.—*The Practitioner*, July.

Sugar—New Urinary Test for.—A new reagent for detecting sugar in urine has been found in Safranine, which is said to possess the advantage of not being decolorized by Uric acid, Creatinine, Chloral, Chloroform, Peroxide of hydrogen, or the salts of Hydroxylamine, all of which reduce Fehling's solution. Albumen, however, does decolorize it. The process recommended is to boil 1 c.c. of the urine with 5 c.c. of a solution of Safranine of the strength of 1 in 1000, and 2 c.c. of a solution of Caustic potash. If decolorization is effected, the urine is diabetic, normal urine containing too little sugar to decolorize completely so much of the re-agent. Chloral and Chloroform do attenuate the red color of the Safranine, but never completely destroy it.—*Prov. Med. Jour.*, July, 1889.

Snake-Bite Treated by Strychnine.—Dr. A. Müller, in a letter to Ferd. v. Müller (Baron), mentions *Strychnine as a remedy against snake bites, which has been used with success.* He used Strychnine, as it acts specifically upon the central portions of the nervous system, which regulate and preside over muscle action and movement.—*Virchow's Archiv.*, cxiii. 2, p. 393, 1888.

Aconitine in Neuralgia.—Dr. Alfred Cohn has made hypodermic injections of Aconitine nitrate ($\frac{1}{15}$ to $\frac{1}{10}$ mg.) in neuralgia, sciatica and facial neuralgia with good results. The experiments were made in Prof. Mandel's clinic.—*Neural. Centralblatt*, 23, 1888.

VETERINARY DEPARTMENT.

Emphysema—Equine.—August 20, 1889, I was called to C— by Herr B. K. to see a sick horse. August 18th, during the night, the horse ran with full speed against the iron strap of a half-open door, the strap being about 10 cm. long. The iron cut the breast strap through, and the horse, apparently uninjured, went home, a distance of 10 km. The next day, the horse swelled up over the whole body, breathing with difficulty and noise, and did not lay itself down.

On examining, on the 20th, the skin was found to be distended with air, like a slaughtered animal blown up with a bellows by a butcher. In the pubic region there were two large air-bladders the size of a goose egg; on the breast and on the neck a swelling the size of an egg and fluctuant, otherwise no injury or tumor upon the whole body. The breathing was labored, noisy and snorting; in the nostrils there was dried blood; pulse and heart-beat were imperceptible with the great distention; temperature, 38° C.; appetite, urine and fæces normal; gait stiff and staggering. The tumor, punctured with a fine trocar, yielded a bloody pus, by which was determined that no bleeding vessel was present, and an opening could be distinctly felt with the knife. This done, about $\frac{1}{2}$ litre of a bloody fluid flowed out and the air streamed through the severed skin with a loud hissing, but not, however, from the opening deep in the wound visible to the eye, which, examined by a sound, showed a depth of 30 cm. and a width of 8 to 10 cm.

As even a small injury of the skin was not to be seen, the air could only pour out from an injury of the lungs, ribs or of the intercostal muscles. The dried blood in the nostrils and the noisy breathing pointed to an injury of the lungs. I then made incisions over the entire body about 20 to 30 cm. apart and about 1 cm. long, through which the air was removed, as much as possible, by pressing and rubbing. The wound in the chest was syringed out three times daily with a decoction of Arnica and Malva, and every three hours 10 drops of Arnica 1x were given the horse internally. On the 27th, the tumefaction had nearly disappeared, the wound healed to the depth of 10 cm., but the breathing remained labored and noisy. Arn. 1x and Kali carb. 3x were now given in alternation every three hours. September 6th, the wound was nearly healed to a scar, and the breathing, as well as the general condition of the patient, was normal, and on September 10th it made a journey of 50 km. without difficulty, and up to to-day is perfectly well.—C. Jenisch, in *Zeitschr. für Hom. Theirheilkunde*, 1888.

Prolapsus Vaginæ—Bovine.—One evening I was called to the cow of K., in B——. She had calved eight days ago, and four days after a slight pressure towards the genitals, resembling the pains of labor, appeared with a *flowing of purulent mucus from the parts*. This pressure became worse while the animal was lying down, so that prolapsus vaginæ took place, but which could be easily reduced again.

Shortly before I came, the animal had lain down, and I found the vagina prolapsed and covered with the above-mentioned slime, so that to only look at it was disgusting.

Treatment.—The prolapsus was at once reduced, the animal placed upon a high bedding, and Hepar sulph. calc. 5x given three times daily. Eight days after the animal was cured.

Another kind of prolapsus vaginæ was seen in the cow of farmer F. in M——. It had suffered since the seventh month of pregnancy from the above-mentioned trouble. After calving the prolapsus disappeared at first, but came back again four weeks later and took place, especially while lying, without any especial pressure. China 3x., a dose twice daily, cured within four days.—H. Feldmann in *Ztschr. für Hom. Thierheilkunde*, 11, 1889.

Colic—Bovine.—The cow of Sch. of L——, well during the evening, was found the next morning with the following symptoms, which would lead one to think of colic: The animal scraped the fore and pawed with the hind feet, laid anxiously down, rolled around on the ground, groaned and stretched its head out, and then looked anxiously towards its belly, etc. These symptoms came in violent attacks, followed by intervals of ease. The fæces were passed in sufficient quantity the night before, and the belly was not distended.

Colocynth 3x, two doses within ten minutes, removed the pains at once. An hour later the animal was bright and showed a good appetite, which, of course, was but scantily satisfied.—H. Feldmann, in *Ztschr. für Hom. Thierheilkunde*, 11, 1889.

Catarrh—Psittine.—Frau von C—— besought me to visit her, as her little favorite, Joeko, a magnificent parrot, was sick. On my coming to the house, I found the parrot sitting very disconsolately upon the perch of his beautiful cage, showing no signs of recognition to the call of his mistress, nor would he take his favorite food; he didn't speak, but kept up a snoring noise.

On examining the bird, there developed the symptoms of a very obstinate catarrh, in which, as often is seen in such cases, the nostrils were much stopped up apparently, so that breathing for the animal was difficult. Other veterinary physicians had prescribed vapor-

baths, the cage with the bird being placed upon a cane-bottomed chair, and the cage covered with a cloth. Then a vessel with steaming Chamomilla tea was placed under the chair, and the bird was to breathe the vapor. The procedure failed, however, for the bird had such attacks of suffocation that it scarcely escaped with its life. I gave the poor patient Dulc. 6x and Hepar sulph. calc. 6x in alteration of each, four pellets twice daily, and had the nose-openings touched with a feather dipped into almond oil, so that the tenacious mucus might loosen. After three days I had the pleasure of seeing the lady come to meet me at my visit with great joy. She reported to me that Jocko was the same old rogue as ever, and as I neared him in his cage he thanked me with a loud "Guten morgen!" and that there be no mistake as to his thankfulness, he cried out: "Danke schön!" The bird was, to the joy of his mistress, completely cured.—H. Fischer, in *Ztschr. für Hom. Thierheilkunde*, 12, 1889.

Hæmaturia—Equine.—Cures by homœopathic remedies are very often criticised and mocked at, even denied, by our colleagues of the old school; but yet, when they observe their action, they cannot deny it. It is again quite often that allopathic remedies have been heroically used before the homœopathic treatment is demanded, without any improvement. I will give my readers an example:

A landlord, having heard of the successes of homœopathy, asked me for advice as to a horse of his, which for the last three years had passed bloody urine, seemed at the same time much exhausted and, what was worse, to keep on losing strength. His veterinary adviser had used many remedies for the condition, in vain, however, and knew of nothing to help it. Again the animal had been growing no better, but on the contrary worse, and getting weaker and weaker. The cause he could not determine, and sought me to help him, if I could. I sent him *Cantharis* 3x, and had the horse take 10 drops three times daily upon wafers. After eight days I heard from him that the appetite of the animal had returned, and, after about ten days, that the horse was completely well; the urine was normal, as in other horses, and the strength of the animal increased daily.

On another occasion, I took the opportunity of visiting the gentleman, and heard from another person, as well as the gentleman himself, that the animal was very lively, and that it had become an entirely different horse after its recovery, only the landlord feared the disease, which had disappeared in such a wonderful manner, would return again. Also his veterinary medical friend, who accidentally came up then, was astonished at the action of the remedy, and congratulated him upon the animal's recovery.

The disease did not return, but the animal, on the contrary, is very lively and well, and enjoys full strength.—H. Fischer, in *Ztschr. für Hom. Thierheilkunde*, 12, 1889.

P. AND P.

Cures of Animals with High Potencies.—In the May REORDER, page 130, a number of cases of animals cured with a single dose of various remedies in the 200th potency were given. These cases of Dr. Bänninghausen are very interesting, and as they show the action of remedies in a large field of diseases, we have decided to finish his list, crowded out of that edition :

14. Nettmann's horse, had July 11, 1862, one dose of *Thuja* for worms and since then has been well. March 10th of this year, 1863, the disease reappeared: SULPH. cured.

15. March 11th. Lülff's horse—for two months has been *asthmatic with cough*, and is of a very fiery temperament, NUX VOM. March 24th, cough very much improved, but the *asthma*, though less, still remains, Ars. April 5th, the cough has reappeared, worse during rest and after eating. PULS. April 28th, cough now worse in the morning, NUX VOM. May 23d, much improved, but the cough still persists, with much mucus from the nose, Puls. June 2d, cough is less, but the nasal mucus, which now excoriates, is increased: ARS. cured.

16. March 14th. Samson's seven-year-old horse—*asthmatic*, Ars. April 3d, much better, and only upon beginning to go is it noticed: THUJA cured.

17. March 24th. Lülff's mare—for a couple of years in the spring *itching with loss of hair*, Sulph. April 28th, was better, but begins again, *Thuja*. May 23d, this time *not improved* by *Thuja* and bothered much by flies, Sulph. June 2d, this time also no result, and it bleeds upon scratching: Merc. finally cured.

18. March 26th. Stroband's cow—after calving violent (milk-?) fever with stoppage of flow of milk and trembling, 1. *Acon.*, 2. *Chamom.*, every six hours. March 27th, milk has returned, but now the whole body is paralyzed, so that it can neither stand nor eat: Puls., the next day, completely cured.

19. April 11th. Heissing's horse—*Soriasis: Hell.* cured.

20. April 25th. Borgert's gelding—*staggers*, only while in the stable, with *trembling: Puls.* cured.

21. May 27th. Kieseckamp's horse—*inflammation* of the left eye: 1. *Arn.*, 2. *Bell.*, every two days, cured.

22. Gr. Schürmann's horse—again *asthmatic*, after being cured last year, July 26th, with *Nux vom.* and August 19th, *Bry.*, now May 16th, which July 25th it was necessary to repeat. Since then well.

23. Waltermann's mare, October 10, 1862, cured by *Sulph.* of an old eruption in a mane and tail, which May 17th reappeared: *Sulph.* cured.

24. May 19th. Cildég's cow—*retention of urine* after difficult calving, *Arn.* May 21st, now diarrhoea and a tumor of the abdomen: *Sulph.* cured.

25. May 21st. Frhr. v. Twickel's mare—*paralysis* after being wet through while sweating (and already treated a few weeks according to Günther's directions and with Günther's remedies), *Rhus.* May 26th, without success, on beginning to go aggravation of the paralysis, *Ars.* June 21st, much better, but still some paralysis on beginning and after motion: *Ars.* cured.

26. May 21st. Hölling's cow—calved fourteen days ago, and since then has been lame and does not eat: *Puls.* cured.

27. May 29th. Wolmer's mare—itching in the mane and tail: *Sep.* cured.

28. May 29th to June 3d. Several animals, horses, cows and pigs—bitten by a mad dog: 1. *Bell.*, 2. *Hyosc.*, every 5 days, remained healthy.

29. June 5th. Bolten's one-year-old bullock—*hæmaturia*: 1. *Ipec.*, 2. *Nux vom.*, every 24 hours, cured.

30. June 9th. Stegenmüller's cow—*constipated, distended* and entirely paralyzed (given up by the veterinary surgeons): 1. *Nux vom.*, 2. *Puls.*, every 12 hours. June 10th, improved, but *great prolapsus of the rectum*: 1. *Ignat.*, 2. *Nux vom.*, every 12 hours, cured.

31. June 10th. Milte's mare—*asthma* and *cough* (from a remedy given by the veterinary surgeon), *Ars.* June 27th, apparent improvement, but worse again, *Thuja*. July 9th, almost entirely recovered, but still cough: *Ars.* cured.

32. June 16th. Schening's four young pigs—gangrene, 1. *Ran. secl.*, 2. *Spong.*, 3. *Ars.*, every 4 days. July 9th, very much improved: *Ran. secl.*, 2. *Sulph.*, cured.

33. June 17th. Hermann's bullock—first hæmaturia and now obstinate constipation, *Nux vom.* June 18th, now black and green stool, but appetite returned: 1. *Ipec.*, 2. *Nux vom.*, every 12 hours, cured.

34. June 20th. Boschert's three cows and one calf—bitten by a mad cat: to each animal, 1., 3. *Bell.*, 2. *Hyosc.*, nothing followed and they remained healthy.

35. June 27th. Hermann's cow—hæmaturia since this morning: 1. *Ipec.*, 2. *Nux vom.*, every 12 hours, cured.

36. July 1st. General von Hobe's riding-horse—for ten weeks his right foot splayed and treated by several veterinary surgeons without success, *Ars.* July 26th, much better, and is only noticed to be lame when trotting on paved and hard roads, *Ars.* August 11th, as good as cured, as a precaution, *Thuja*.

37. Leppermann's cow—malignant disease of the mouth and feet: 1. *Ars.*, 2. *Thuja*, every 3 days, completely cured. (Last year several similar cases occurred, which were cured in the same manner.)

Round Ulcer of Stomach in Cattle.—The ulcers, pepticum and rotundum, has but rarely been observed in animals up to date. Hence it is interesting to know that, as it seems, it is not rare in calves, as Ostertog had an opportunity of observing six calves slaughtered at the Berlin central abattoir, in calves from six weeks to one year old. The description leaves no doubt that the condition in question is that of a typical ulcer of the stomach; two cases had progressed to perforation. No cause can be assigned.—*Dutsche Zeitschr. für Theirmed.*, 14, 45.

BOOK REVIEWS.

Therapeutics of Nervous Diseases; Including also their Diagnosis and Pathology. By Charles Porter Hart, M.D. Philadelphia: F. E. Boericke. Pp. 268.

This new work, like all those bearing the *Aude* of the Hahnemann Publishing House, is a welcome addition to the library of the studious physician. Dr. Hart's work is divided into seven parts as follows: (1) Diseases of the Brain and its Membranes. (2) Diseases of the Spinal Marrow and its Membranes. (3) Cerebro-spinal Diseases. (4) Diseases of the Peripheral Nervous System. (5) Diseases of the Sympathetic Nervous System. (6) Symptomatic Diseases. (7) Mental Diseases. Under each part the diseases there classed are taken up separately as follows, *i.e.*, Cerebral Anæmia, Synonyms, Definition, Diagnosis, Pathology, Clinical Experience, Therapeutic Indications, and Auxiliary Treatment. The author particularly presents the results of careful study and painstaking research in the last three rubrics of each disease. His notes on clinical experience and his therapeutic indications are especially good.

Taken as a whole, the work is a most useful addition to our library of homœopathic practice. It is thorough without prolixity, condensed without loss of value, and presents a handy and ready reference-book to the busy physician.

PUBLISHERS' DEPARTMENT.

Each copy of this issue of the RECORDER contains a subscription blank, a convenience and a reminder to the greater number of our subscribers that Vol. IV. is closed, and subscriptions to Vol. V. are now in order.

These blanks are put in by the binder, and as some of our friends have already paid their dues for Vol. V., and a few are not due yet, it may be well to state that the hint is not for them. We trust the response will be generous, both from those who have been on the regular list of subscribers in the past, and also from others whose names have not yet adorned that galaxy. To that end, a very large extra number has been printed and mailed as samples.

We expect to make the coming volume richly worth the small subscription asked.

Latrodectus Mactans.—The July number of the RECORDER for this year was favored with a paper from the pen of that well-known writer, Dr. S. A. Jones, of Ann Arbor, Michigan, on “*Latrodectus Mactans*—A Suggested Remedy in Angina Pectoris.” He had no clinical cases to report, or provings, nothing but a number of reports of bites by this venomous spider, collected from various sources; yet these, in the light of the great Hahnemannian law, pointed to a most useful discovery—we may say, to a great discovery.

“It is neither the aim nor the purpose of this paper,” wrote Dr. Jones, “to establish the lethal property of spider poison; though I must acknowledge that, until I read the paper in *Insect Life*, I had no thought that its possession of such a property would be called in question. I shall content myself with calling attention to the pathogenetic quality of the poison of *Latrodectus mactans*, leaving my reader to discern the resemblance of its *tout ensemble* to an attack of angina pectoris, and therefore to infer its homœopathic applicability in that dread disorder. I shall not enter upon the pathology—various and much-confused—of that cardiac seizure, because, as I get older, I find the ‘like’ more and more of a ‘pillar of cloud by day and a pillar of fire by night,’ whilst in my short life I have found ‘pathology’ as changeable as a dying dolphin—and everyone knows that a dead fish ‘stinks and shines, and shines and stinks.’”

Among the marked symptoms of the poison of *Latrodectus mactans*, we find: “Pain up arm to shoulder, thence to back of neck;” “præcordial pain extending to left axilla, and down arm to finger-ends;” “left arm almost paralyzed;” “pains up arm to shoulder,

thence to præcordia;" "apnœa;" "præcordial pain;" "pulse feeble and thready;" "skin cold;" "sense of impending dissolution," not to mention others. From the data the writer is led to believe "the poison of *Latrodectus mactans* is suggested for a trial in angina pectoris, in that its physiological action presents the closest *similimum* yet found." Again, elsewhere: "Of the changes in respiration accompanying angina pectoris, we have, then, both the general and the rarest form, produced pathogenetically by the poison of *Latrodectus mactans*." This paper reached the subscribers of the RECORDER in the latter part of July.

Early in September we received a business letter from Dr. R. H. McFarland, of Orlando, Florida, which concludes as follows: "*Latrodectus mactans* cured my only daughter, æt. 36, married, of *angina pectoris*. The RECORDER gives us some good things occasionally."

"If *Latrodectus* will cure angina pectoris," said a physician to whom we mentioned the matter, "it is worth its weight in gold." Well, *similia* plainly indicates that it *ought* to cure it, and in the only case where it was administered, it *did* cure it. *Latrodectus* is to be had in tablets 3x.

Guaiacol.—"The sovereign of all known remedies in pulmonary tuberculosis," is the way Dr. Nobili describes, or rather eulogizes, it in *Gazetta degli Ospitali*. *Guaiacol* is a homogeneous substance, in reality the true therapeutic agent in *Creosote*, and Dr. Nobili claims, after much experience, that it augments the power of organic resistance against tuberculous infection, and of destroying the tubercular bacilli, and can be used with marked success in the treatment of consumption. All patients treated with *Guaiacol*, he says, experienced an increase of appetite; the cough, especially at night, was decreased, and, in some cases, the fever and night-sweats were reduced. Generally a distinct improvement in the rattling sounds were noted, and the "subjective feeling of the patients was markedly elevated."

Apium Virus.—A friend sends us the copies of *Gleanings in Bee Culture*, Medina, O., from which we clip the following rather interesting correspondence:

Bee-Stings a Cure for Rheumatism.—Last summer I began bee-keeping, and up till then I had been troubled with rheumatic pains; but during the time I was stung by bees I never felt any pain from rheumatism. The poison from the stings seemed to cure the complaint. Do you think there is anything in it? F. BROWN.

UTTOXETER, ENGLAND, March 20, 1889.

More Experience with Bee-Stings and Rheumatism.—At my table

when eating honey, without any other conversation leading to it, a German friend, with much animation, told the following: "After the Franco-Prussian war I suffered from rheumatism (as the effects of my soldier life) for three years, never able to work, and seldom able to walk. One fine day in spring I coaxed them to carry me into the garden, and, sitting near the bees, I smelled honey, and asked for bread and honey. The bees gathered around me, and being left alone a short time, I tried to chase them off, and they stung me awful bad on the face and arms, fifteen or twenty stings before I got away. The swelling was terrible, but before it was gone I could walk; and when it was gone I was *well*, and never had rheumatism afterward, and immediately went to work." The name of this man is Henry Karstadt. I believe his statement. J. A. LOWE.

HUTCHINSON, KAN., June 28, 1889.

Bee-Stings a Positive Cure for Rheumatism.—I have been troubled for years with rheumatism; and when punctured a few times by the bees, I found I was entirely cured. The fluid extract of bee-sting is an old eclectic cure for rheumatism. M. N. McNEIL.

KIRKWOOD, O., June 24, 1889.

In the May 15th issue of *Gleanings*, F. Brown gives his experience with rheumatism and bee-stings, and here is mine:

About fifteen years ago I sprained one of my knees. I was lame for a few days, and it got better; but the lameness, accompanied with an ache, came again; and as time passed on it continued to come worse and worse, until it got so bad I could neither straighten my leg nor bend it up; and if by accident I did move it from just such a shape it was like biting on the nerve of a decayed tooth. The pain not only stayed at my knee, but extended above and below, and acted as if it had come to stay. I tried a magnetic battery some. I used liniment externally, and "sure cure" internally, with but little relief and no cure. Three years ago we bought five colonies of bees, and with them came the stings, and next the relief. I have not suffered as much from my knee in the whole three years as I have in some three minutes previous to the stings. I have used no other remedy within this time. I am a farmer, and my work has been very much the same.

Now, I am not going to say that bee-stings have cured my rheumatism; but if I had employed a doctor, with the understanding of no pay unless successful, I am very sure he would call for his pay. W. M. STACY.

EDGAR, CLAY CO., NEB., May 30, 1889.

Rhus Toxicodendron and Rheumatism.—A well-known and very able "regular" physician, needless to name here, has made

what he considers to be a most important discovery, and has spread it before the medical world in two long papers. That his discovery is an exceedingly valuable one and fraught with relief to sufferers no one can gainsay—especially no homœopathic physician. The Doctor says he gave free samples of the “new medicine” (*i.e.*, *Rhus toxicodendron*) to the members of the medical profession in various parts of the country, “with instructions for use, and at the same time requested that within a reasonable period they would advise him of the results of the treatment which might come under their observation.” As usual, many of the doctors made no sign, which leads the writer to say, and us to italicize it, that, “there seems to be considerable diffidence in giving an opinion concerning a remedy which is altogether new and is given in such small doses as *Rhus toxicodendron*.” That the remedy is altogether new to the Doctor, and to those of his colleagues who, like him, have said so, there is not the slightest reason to doubt, but because a remedy is altogether new to them, it by no means follows that it is altogether a new remedy, and a little wider reading would have prevented the publishing of papers—excellent in themselves—which contain statements not altogether free from the ludicrous; for while, as we intimated before, *Rhus toxicodendron* may be new to the writer, it is nevertheless well-known, and freely used, by not less than twelve thousand physicians in the United States alone. Furthermore, he will find this remedy fully dwelt upon in every book of general homœopathic practice, from Hahnemann’s *Materia Medica Pura* down to the latest issued—*Allen’s Hand-Book of Materia Medica*; he writes as though the discovery of *Rhus toxicodendron* as a remedy for “sciatic rheumatism, muscular rheumatism so-called, and varicose veins,” etc., were something new. Turning to Hughes’s *Pharmacodynamics* we read: “*Rhus* has thus come to occupy a high place in homœopathic therapeutics amongst the remedies for rheumatism.” Again: “Its undoubted value in rheumatic sciatica depends, I take it, upon its influence on the fibrous sheath of the nerve,” etc. The book from which the foregoing is quoted was published in 1867. In the *Lesser Writings* of Hahnemann will be found mention of 183 cases of epidemic fever treated by him with *Rhus toxicodendron*, in the year 1813, without a single death. He also used it largely for rheumatism.

These two papers are singularly confirmatory of the accuracy of homœopathic text-books. In the reports of cases by his correspondents, it will be noticed that they say the remedy has no effect in neuralgia; Hughes said of *Rhus* twenty-two years ago: “It is powerless in pure neuralgia here or elsewhere.” It is useless to quote more to prove that *Rhus toxicodendron* is not “a remedy which is altogether new,” as the Doctor claims. As he and his confreres are confessedly in the experimental stage with this remedy, we would

hint that 5 drops of a tincture, made as the one they use is made, is entirely too strong for a dose, and much better results could be obtained by using the regularly prepared homœopathic dilutions, or tablets, of this remedy—say the 3x. They can purchase these at any reliable homœopathic pharmacy, and in any strength desired, and prepared in a better manner than they can do it, to save nothing of the risk they run in handling this poisonous plant. We would also call their attention to the fact that there are several varieties of *Rhus*. In the *Physician's Price Current* of Messrs. Boericke & Tafel (which, by the way, is a very complete work, and is mailed free to physicians) we find in the list of medicines, *Rhus aromatica*, *Rhus Californica*, *Rhus glabra*, *Rhus radicans*, *Rhus toxicodendron* and *Rhus venenata*.

There is more in HOMŒOPATHY, gentlemen, than is dreamed of in your philosophy.

Pharmacodynamics.—Dr. Hughes's *Manual of Pharmacodynamics* has been pronounced by a gentleman, who has had many years experience in supplying physicians with books, to be the favorite, by all odds, of physicians of other schools (and of a great many homœopaths, too) who wish to get an insight into homœopathic treatment. The present edition, the fifth (1886), has grown to 962 pages, consisting of 60 chapters, together with an "Appendix," "Index of Medicines," and "Clinical Index." Two chapters are given to "Sources of the Homœopathic Materia Medica," two to "The General Principles of Drug-Action," one to "Homœopathy—What it is," one to "Homœopathic Posology," and the remainder to the leading remedies homœopathically administered. Doubtless what makes the work so popular with physicians who have not been graduated from a homœopathic college is the absence of those long lists of symptoms, which to the life student are so vital, but to one who has not the time, so confusing. Take by way of illustration *Arnica montana*; Hahnemann's *Reine arzneymittellehre*, in the chapter on this remedy, gives 638 symptoms. Hughes's chapter on *Arnica* takes seven pages, and the following extract will give a fair idea of the way the remedy is treated.

"I have said that *Arnica* is to an injury what *Aconite* is to a chill; that is, it will almost infallibly obviate the ill-effects, if given before organic mischief has been set up. It becomes thus the great remedy to be administered in all cases of concussion, sprain or other suffering from violence. It removes, as Hahnemann says: 'the pernicious consequences which often attend falls, contusions, blows, thrusts, straining, twisting or tearing the solid parts of our organism. But, unlike *Aconite*, it will follow up the cause to many of the changes it effects, even when of long standing and profound character. Such are those instanced by Dr. Bayes in his interesting

article on the drug, viz.: the chronic muscular stiffness—called rheumatism—of old laborers, and the cardiac hypertrophy of boating men. Mr. Nankivell has illustrated the same thing by some of the thoracic affections of the Cornish miners.”

Again, on another page: “In external injuries, Arnica may be used locally, as well as inwardly; and will give speedy relief to pain, while promoting the restoration of the bruised part to its normal condition. Any one who has tried it when his finger has been jammed in a door will bear witness to the statement.”

Also: “A sensitiveness of the body to pressure, so that everything on which the patient lies seems too hard, is another recognized symptomatic indication for *Arnica*. This feature is often met with in low fevers, and the medicine was not without repute in such disorders among the older homœopathists.”

The foregoing will give a fair idea of the manner in which the work treats of the various leading remedies.

One can readily see that the chapter on Arnica alone would richly repay any physician unacquainted with the supreme necessity for this remedy, internally administered, in the countless accidents that are daily occurring in this busy world. (It might not be amiss here to add that the common *Arnica* of the drug shops, and a first class homœopathic *Arnica tincture* are two very different things). The book in question contains 932 pages, and bound in half Morocco, cost \$7.00 less 10 per cent. to the medical profession, postage 26 cents. Bound in cloth, \$1.00 less.

For Catarrh and Hay Fever.—In a very interesting paper in the *U. S. Medical Investigator*, Dr. W. D. Gentry, the well-known author of the *Concordance Repertory*, gives a brief account of Skookum Chuck Lake and of the effect of the salts of its water when proved. “The water is of a deep amber and almost red in the sunlight. The following is an analysis of the salts, obtained by evaporation of the water; the proportion being in grains per U. S. gallon of 231 cubic inches:

Sodic chloride,	16.370
Potassic chloride,	9.241
Sodic carbonate,	63.543
Magnesian carbonate, . . . . .	.233
Ferrous carbonate, . . . . .	.526
Calcic carbonate, . . . . .	.186
Alumic oxide, . . . . .	.175
Sodic silicate,	10.638
Organic matter, . . . . .	.551
	101.463
Lithic carbonate,	} Each a trace.
Potassic sulphate,	
Sodic bi-borate,	

"The lake has no outlet, but is fed by two enormous springs. It contains no living things with the exception of axoloti, a kind of salamander, such as are found in the lakes of the Mexican Cordilleras.

"The medical and curative properties of this remarkable lake was known to the Indians of the northwest as far back as they have any legends or tribal history, and it was held in such reverence by them that the country around this lake was called 'Sahala Lyee Illihe,' or 'Sacred Grounds,' and no matter how hostile the tribes were to each other, no Indians journeying to or from the "Skookum Limechen Chuck,' or 'strong medicine water,' were ever molested.

"When the Indians were considering the transfer of their lands to the government, many years ago, it is recorded as a matter of history, that old Quetahlguin, father of the present Chief Moses, and 'Old Joseph,' father of Chief Joseph, lately a prisoner of war, with the broken remnants of his band, after weeks of deliberation and consideration, with the 'Sahala Lyee,' or Great Spirit, through their medicine-men, or prophets, firmly said: 'We have talked with the Great Spirit and we have slept with his words in our ears. The Great Spirit is our father and the earth is our mother. We have a good home and it was made for us by the Great Spirit; it is a part of us; it is our mother. In Wallowa Lake are an abundance of fish created especially for our tribe. None other of his red children have such fish. In the 'Skookum Chuck' we have a remedy for all our ailments. We only have to bathe in and drink its water and we are made well. If we sign the treaty we will forever offend the Great Spirit; we will sign away our mother and she will cry. Her tears will dry up these lakes and we will be hungry and sick. We will go to the Skookum Chuck only to find that its waters have disappeared.'

"The story is told of a Frenchman passing the lake many years ago, before the properties of the water became known to the whites, with a drove of sheep afflicted with a skin disease called 'the scab.' As soon as the sheep saw the water they ran to it, but would not drink. They stood in the water for some time, and in a few days they were well of the 'scab.' The Frenchman was suffering with rheumatism. He concluded to try the water of the lake for his disease. He was speedily cured. The whites were soon attracted to this lake by the stories of marvellous cures reported by the Indians, and by seeing Indians return in health and vigor from the lake, who had been taken there on litters, appearing at the point of death. It is estimated that over 20,000 people have visited this lake since 'Joseph's Band' were driven from that section of the country, and it is fast becoming as popular as any other of our great health resorts.

"My attention was called to Skookum Chuck some time since,

and I procured some of the salts and triturated a quantity, making the first, second, third and sixth potencies. I partially proved the first potency by taking two grains every two hours. The first effect produced was a profuse coryza with constant sneezing, as in hay-fever. This continued until the medicine was antidoted by tobacco. My appetite was greatly increased. Some rheumatic pains in limbs, and heaviness about the sacrum. The catarrhal effects were so severe I could not continue the remedy. I have used the third and sixth potency in my practice and have cured a number of cases of catarrh, and am confident that the remedy will be curative in hay-fever."

The remedy which, for want of a better name, we may designate *Aqua Skookum Chuck* may be had in 3x triturations.

Perfumery.—A contributor to *Popular Science* claims that living in a perfumed air will, in his opinion, "prevent lung diseases, and arrest the development of consumption." The perfume may be from flowers or the artificial scents. It is but fair to add that the writer is connected with the manufacture of perfumery.

A Sulfonal Symptom.—Dr. William Boericke has the following pertinent hint anent *Sulfonal*: "Although the manufacturers of this new and interesting drug, parade as a fact and advantage that it has no "after-effects or injurious results from even large doses," several observers have noticed quite decided symptoms arise from its use. A very uniform condition produced is, *a sense of great exhaustion*, which may follow a quiet night and rather exhilarating awakening. I have had occasion to give it to a patient suffering from nervous prostration and inability to sleep, when the persistence of the latter condition made me have recourse to this palliative measure. Sulfonal in a 15-grain dose was administered at 9 P.M. Five minutes after taking it the patient experienced a sensation similar to having a spider-web drawn over the body, beginning at the feet and slowly going to the head, accompanied by drowsiness. Sleep would follow in the course of an hour and continue about five hours, followed by an hour's waking and again several hours' sleep. The peculiarity of the awakening in the morning was the exhilarated state—patient was hopeful, felt perfectly well and happy, enjoyed breakfast. The eyes were blood-shot and restless. The condition was invariably one of ecstasy, compared to her usual state, and this was soon followed by a sensation of *profound weakness*—a gone, faint feeling and despondency. This alternation of states, the rosy-hued awaking and consciousness of health and well-being, and subsequent depression and weakness, such as she had never experienced before, was very marked and only attributable to Sulfonal, as this series of symptoms passed away on stopping the drug and returned on taking it again."

A Warning Note.—The *Chemist and Druggist*, of August 14th, contains the following: "An awkward series of accidents has occurred with the humanized virus employed at the Academy of Medicine for vaccinating purposes. From the report of Dr. Hervieux, of the learned body, it appears that five children inoculated on May 11th have developed syphilis. An inquiry made by him, in connection with Dr. Weill, has shown that the babies from which the lymph was taken are apparently perfectly healthy, but one shows slight indices of probable hereditary syphilis. The instruments used for inoculations are above all suspicion. These unfortunate accidents show that animal virus, notwithstanding all its inconveniences, should be preferred, and the Academy must have thought as much when it built its two-stall cow-stable for vaccinating purposes." Unpleasant experience may be avoided by getting the proper kind of vaccine points from responsible houses.

Insomnia.—Testimony of the value of *Passiflora incarnata* in cases of insomnia accompanied by great nervousness comes from many quarters. It produces a quiet soothing sleep and yet is not a narcotic, as the patient may easily be awakened from it and his mind is perfectly clear, yet he falls at once again into a sweet sleep. Ten, twenty or thirty drops of θ constitute a dose. One writer says that in extreme cases he gives forty drops, every two hours, until rest and sleep come. With some people five drops are sufficient.

Hiccough.—A writer in the *Chicago Medical Times* says he cured "a case of intractable hiccough in an old man when every possible remedy had failed and death seemed inevitable" with a few drops of *Eupatorium perfoliatum*. "A few doses produced relief, and there was no return of the disease after the first day."

Drinking Water.—A physician in writing about drinking water says: "If in any house there should occur a single case of typhoid fever or diphtheria, test the drinking water or have it done at once. A few cents will buy an ounce of saturated solution of permanganate of potash at a chemist's. If, when a drop of the solution is added to a tumbler of water, its color changes to brown, it is unfit to drink. If it is clear or slightly rose colored after an hour it is, broadly speaking, safe."

Mullein Oil.—A few drops of *Mullein Oil*, put into an aching ear, says Dr. Waterhouse in the *American Medical Journal*, often acts like magic, relieving the pain at once; many cases of deafness have been entirely cured by its used as a local agent. Given at the rate of ten to twenty drops to four ounces of water, it becomes a valuable remedy in the treatment of nocturnal enuresis of children; the above

proportioned four-ounce mixture, given in doses of a teaspoonful four times a day, will often cure the most obstinate cases within a few weeks.

Apoplexy.—“I desire to again call the attention of the homœopathic profession to the use of *Kali bromatum* 2x, 3x and 6x, in cases of apoplexy, and of similar symptoms of uræmic origin. *Opium*, *Belladonna*, etc., so often fail, that I am sure the above remedy will be welcomed, and my own success with it makes me feel it a duty to repeat my former notice of it. The somnolence and stertor of *Opium*, and even convulsions, and sometimes aphasia; also albuminuria; these symptoms indicate the drug.”—J. C. Morgan, M.D., in *Cal. Homœopath.*

Gleaned Suggestions.—Dr. Gale, of Quebec, cured “washer-woman’s headache” with *Phosphorus*, and so did Dr. John H. Clarke (*Hom. World*). Symptoms: “Whenever she washes clothes or walks fast she has rush of blood to the head, red face and eyes, heat in the head, sensitiveness of the scalp to the touch, sudden shooting pains in the head, especially in the vertex.” Where the headache follows washing day, *Phos.* is equally efficacious.

Dr. Clarke finds that *Staphisagria* will cure toothache when the pain is worse “when the tooth is touched, especially by hot things; also worse when out of doors or drawing cold air into the mouth, and worse at night.”

“But Dr. Gallavardin does not confine his attentions to the morally diseased and their treatment by medicines; he turns homœopathy to the service of beauty, and takes away unsightly developments of fat. Double chins disappear, as also do rolls of fat on the shoulders and chest, before the potent globules. *Sulphur* and *Calcarea* are his mainstays here; red puffy cheeks call for *Sulphur*. *Sulphur* is also related to the front part of the thorax and the fatty deposits there; *Calcarea* to the posterior part of the thorax in the same way.”—*Hom. World*.

Dr. Robert T. Cooper (*Hom. Review*) say that *Sulphur* (*Tinct. fort. pilules*) will cure ague and obstinate forms of intermittent fever; that an officer in Punjab “cured case after case of the worst forms of ague with it.” Another gentleman in Turkey “treated nine cases of ague with these pills, and in every one of these cases succeeded in arresting the fever within twenty-four hours.” In one case *Sulphur* prevailed where Quinine had been administered in vain. The prescribers in these instances were led to give the remedy through the influence of Dr. Cooper.

Diphtheria.—The rather startling assertion is made, that wherever a case of diphtheria is found, investigation will develop the

fact that kerosene oil lamps are used habitually about the house. The truth of this may be easily ascertained by physicians.

Hints.—We take the following hints from a paper read before the Illinois Association by Dr. A. G. Downer:

Cicuta virosa, in the 2x dilution, in doses of from one to five drops to the dose, from fifteen minutes to one-half hour apart, will always cure convulsions of children from whatever cause.

Agaricus muscarius is a specific remedy for that annoying condition of twitching of the eyelids.

Allium cepa, in mother-tincture and low dilution, is nearly always specific in that troublesome condition—the bane of surgeons—neuralgia of the stumps.

For a fetid “oozing of the feet,” *Silica*; ditto, in the arm-pits, *Petroleum*.

For nasal catarrh in children, *Aurum met.*

An Old Writer.—“My heart forebodes me, that I, too, by venturing to suggest the use of Swedenborg’s medical works, shall come to be regarded as tainted with a touch of madness. In bringing down such a judgment upon my head, I shall at any rate have the consolation of finding myself in good company—Swedenborg, Newton, Hahnemann, besides many others.”—Dr. C. Bojanus, of Samaria, Russia, in *Hom. World.*

One of these works, *The Soul*, was given an extended review by Dr. O’Conner, in the RECORDER (May, 1888). Another one that has received considerable attention of late, is *The Brain*, in two volumes, and more to follow; another, the *Economy of the Animal Kingdom*.

Dr. J. A. Terry Writes: “I am indebted to the RECORDER for valuable medical hints that have proved true at the bedside, and which have been the means of accomplishing successful bits of healing for me.”

Dr. Terry has returned from a ten-years’ absence in foreign countries, and settled at 133 W. 45th Street, New York. He devotes attention to diseases of the throat, larynx and chest.

Hensel’s Tonicum.—A colored woman of slender build, aged about forty, who had to work hard for her living over the wash-tub, was sick for over a year; her strength slowly declined and she became more emaciated every day. She doctored herself with ready-made drug-store medicines, and was doctored by allopathic and finally by a homœopathic physician, but none of them were able to help her. A lady for whom she washed, and who had a high idea of the merits of *Hensel’s tonicum*, and an innate love for doctoring, gave her half a bottle of it and told her how to use it. She

did so with most happy results, gaining in flesh and strength from the start. Her doctor, whom she consulted before using it, said, afterwards, it seemed to be just what her system needed, as her trouble was of a malarial nature; that her blood, which before seemed to be watery, had recovered its proper consistency. In short, the woman who had been ailing for nearly two years and steadily growing worse, had, by the aid of this iron tonic, recovered health, strength and spirits. May it not be that there are states of the system following disease when medicine does no good? When food does not nourish, and what is needed is an element, the absence of which prevents recovery? This is especially true of sufferers from malaria. Of them it is said, the poison still lingers! If it does, then medicine is needed. But medicine in such cases seems powerless, and is it not at least open to discussion that the patient suffers, not from the malaria, but from the lack of something without which recovery is impossible, or, at best, extremely slow? This tonic (Hensel's) is a combination of ferric and ferrous oxide in the same proportions found in the human blood of a healthy body, and is not, properly speaking, a medicine. We might almost call it a metallic food. The systems of those who need it are not suffering from disease, but from the loss through disease of precisely that element which this happy combination of the two oxides of iron supplies, and which when supplied completes the work of the physician, who has expelled the disease, by supplying the needed element the lack of which has prevented the return of health. This, like many other things in this ever changing world, is but a theory, but one that bears a strong resemblance to being founded on truth; and, furthermore, one that is not in conflict with the great law of homœopathy. Sailors shut up in the ice bound north for a winter almost always contract scurvy; that which fresh vegetables and fruits supplies to their systems is lacking; medicine does no good; but a few fresh vegetables soon cures them by supplying their systems with a lacking element. So, we believe, *Hensel's tonicum* acts.

Announcement.—Messrs. Boericke & Tafel announce the following changes in price.

Sugar of milk, best article, 50 cents per pound.

Triturations from 2x to 6x, 35 cents for a 2-ounce bottle; 4-ounce bottles 50 cents; 8-ounce bottle 75 cents; 16-ounce bottle \$1.25.

A New Catalogue.—Messrs. Boericke & Tafel hope to have their new *Physician's Price Current and Catalogue* ready for mailing about December 1st, or shortly after. Any physician desiring a copy should send in his name, and immediately after publication it will be mailed to him. It has certain new features that will make it a great convenience to *all* physicians.

