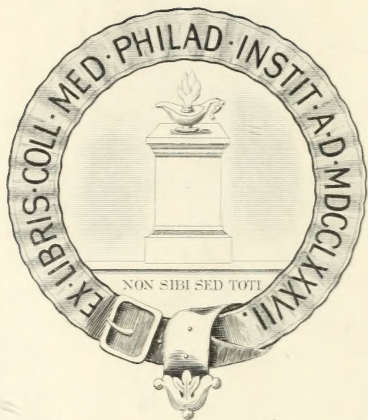




15913

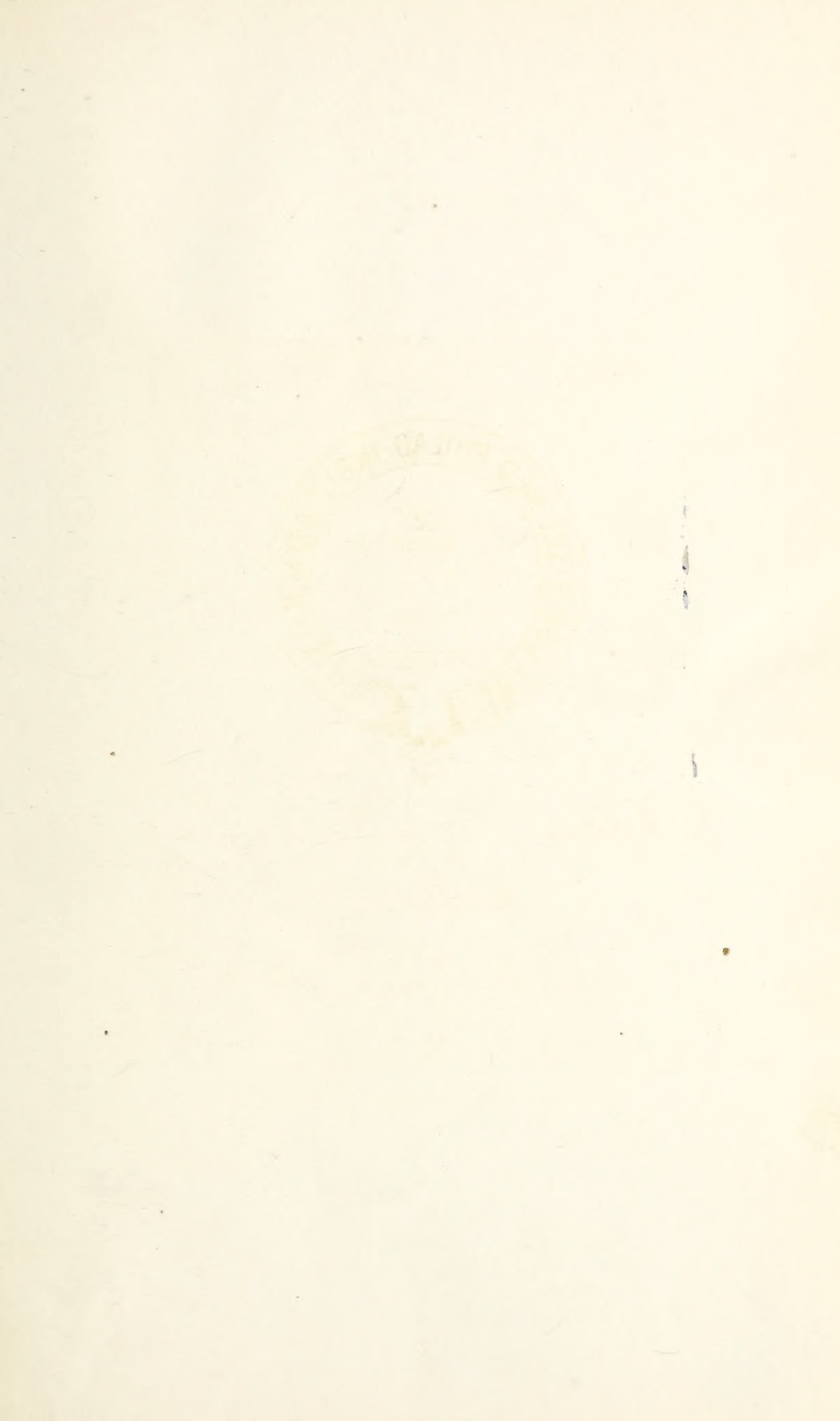


Class _____ No _____

Presented by

H. A. Hare, M.D.

counted





Digitized by the Internet Archive
in 2013

<http://archive.org/details/pathicreco10inte>

THE
Homœopathic Recorder.

MONTHLY.

VOLUME X.

1895.

PUBLISHED BY
BOERICKE & TAFEL
PHILADELPHIA.

APR 12 1901

INDEX TO VOL. X.

- A. J. T., in Memoriam, 386.
 Absinthe, 420.
 Absinthe in Epilepsy, 528.
 Actæa Racemosa to Prevent Still-born Babes, 172.
 Aconite, Fever, 456.
 Aesculus, Hæmorrhoids, 175.
 After a Night Out, 530.
 Am. Carb., Uncleanliness, 90.
 Ampelopsis Quinquefolia, Bright's Disease, 529.
 Anacardium, 369.
 Aneurism Cured, 230.
 Antimonium Tart. Hint, 322.
 Antitoxin, 237, 238, 278, 287, 421.
 Appendicitis, Surgery Not Needed, 179.
 Artificial Diseases, 563.
 As Told by the Bottle, 416.
 Asafoetida, 30.
 Asafoetida and the Secretion of Milk, 567.
- Balky Horse, How to Start Him, 279.
 Baryta Carb., Intermittent Fever, 345.
 "Bee Line" Repertory Under View of the Author, 13.
 "Bee Line" Again, 128.
 Beginning to See, 523.
 Benzoic Acid, Gouty Pains, 317.
 Benzoic Acid, Gout of Hand, 317.
 Benzoic Acid, Gouty Laryngitis, 318.
 Gouty Nodule, 319.
 Sebaceous Cysts, 320.
 Belladonna, Tumour, 172.
 Belladonna, Enuresis, 372.
 Bladder Wrack, 414
 Blatta Orientalis, Asthma, 279.
 Blindness, Sudden, Cured, 260.
 Blood Stools, 120.
 Borax, Infantile Colic, 573.
 Borax, Action on Skin, 575.
 Bright's Disease, Ampelopsis Quinquefolia, 529.
 Bryonia, Bronchial Catarrh, 271.
- Calcareo Carb., 78.
 Calcareo Fluor., Cataract, 576.
 Calcareo Fluor., Parturition, 174.
 Calcareo Renalis, Gravel, 347.
 Calendula vs. Antiseptics, 530.
 Camphora, 79.
- Cancer Cured, 172.
 Cannabis Sat., 79.
 Carbolic Acid, Erysipelas, 276.
 Cataract Zonaris, Cure, 409.
 Causticum, Effects of Retention of Urine, 275.
 Chest, Pain in Both Sides, 124.
 China and Gall Stones, 226.
 Cicuta Virosa, Infantile Convulsions, 500.
 Cimicifuga, Pleurodynia, 271.
 Cimicifuga, Locally Applied, 228.
 Cimicifuga, Sciatica, 373.
 Cineraria Maritima, 18, 92.
 Clinical Cases, 457.
 Cocaine Poisoning, Antidote, to 566.
 Cocculus, Progressive Paralysis, 367.
 Coffee in Obsteric Practice, 469.
 Cold Pack Not Needed in Homœopathy, 176.
 Colic, Mare, 129.
 Comma Bacilli Not the Cause of Cholera, 181.
 Conceits and Sallies of a Grumbling Invalid, 20.
 Contributions to Pharmacodynamics, 78.
 Cornus Alternifolia, 502.
 Coryza, Chronic, 483.
 Cuphea Viscosissima, 531.
 Cuprum, Psoriasis, 270.
 Cuprum, Epilepsy, 373.
- Death from a Bee-sting, 315.
 Diarrhœa, Cases Illustrating Certain Types, 374.
 Diphtheria Diagnostic Point, 87.
 Diphtheria Case, 229.
 Drugs, Influence on Hypnotics, 269.
 Dysmenorrhœa, 374.
 Dysmenorrhœa, Two Cases, 272.
- Echinacea, 277, 328.
 Echinacea, Vaccination, 527.
 Eczema, Empetiginous, 478.
 Eczema, A Possible Remedy, 501.
 Empire State Transactions, 367.
 Epidemic and Endemic Diseases, 350, 388, 497, 545.
 Erigeron Canadensis in Placenta Prævia, 560.

- Erythroxyton Coca, Nymphomania, 403.
 Erythroxyton Coca, Placenta Prævia, 463.
 Fluid Extracts, Solid Extracts and Dry Plant Tinctures, 385.
 Gaultheria, 45.
 Gila Monster; Is it Venomous? I.
 Glonoine, Neuralgia, 372.
 Gold Framed Spectacles, Headache, 577.
 Gonorrhœa Case, 325.
 Graphites, 310, 410.
 Graphites, Eczema, 373.
 He is a Cosmopolitan, 588.
 Headache, 122.
 Headache, Twelve Remedies with Comparisons, 49.
 Heloderma Horridus, I.
 Hepar Sulph., Polypus of Ear, 320.
 Hoang-nan, 89.
 Homœopathic Correction of Allopathic Errors, 477.
 Homœopathic Pharmacy, A Tribute to, 491.
 Homœopathy, A Glance at the Present State of, 193.
 Homœopathy, In Veterinary Practice, 198.
 Homœopathy, In Mexico, 466.
 How to Learn Drug Pathogenesis, 242.
 Hypericum Case, 280.
 Ichthyol and Consumption, 328.
 Ignatia, Hysteria in Man, 272.
 Ignatia, Fit, 345.
 Illustrative, Cases of Similia, 520.
 Indiana Institute of Homœopathy, 560.
 Inflammation of Knee Joint, Three Cases, 264.
 Inflammation, Left Frontal Sinus, Recurrent, 324.
 Indigestion, Baldness and Scissors, 587.
 Iodine and Spongia, 422.
 Ipecac, Biliary Fever, 254.
 It is law, 589.
 Kali Sulph., Asthma, 279.
 Kalmia, Chronic Headache, 326.
 Kreosotum Case, 24.
 Lachesis, Ophthalmia, 17.
 Lachesis, Sciatica, Jaundice, 274.
 Lachesis Case, 323.
 Labor Cases, Gelsemium, Natrum Mur., 277.
 Ledum Case, Feet, 171.
 Lemna Minor, 420.
 Lion or Lamb, 542.
 Lithamia and Psora, 569.
 Liver Diseases, 39.
 Lock-jaw in a mare, 19.
 Loco-weed, 364.
 Magnesia Phos., Flatulent Colic, Horse, 366.
 Magnesia Sulph., in Warts, 542.
 Malandrinum, 177.
 Malaria, 560.
 Mallein, 590.
 Mammary Tumour, Cured with Drugs, 269.
Medical News vs. Dewey's *Essentials of Therapeutics*, 286.
 Merc. Sol., Remittent Fever, 340.
 Morphine Habit, Sulphur, 278.
 Mullein Oil, Deafness, 267.
 Nægel's Investigations, 190.
 Natrum Mur. Case, 370.
 Neuralgia, 480.
 New York City Notes, 140, 334, 493, 539.
 New School vs. the Old, 189.
 Nocturnal Cramp in the Calves, 477.
 Nosodes, 543.
 Nux Moschata and Sick Headache and Stomach, 224.
 Nymphomania, Erythroxyton Coca, 403.
 NEW PUBLICATIONS.
 BECK. A Manual of the Modern Theory and Technique of Surgical Asepsis, 233.
 BLACKISTON. Visiting List, 579.
 BRADFORD. Life and Letters of Samuel Hahnemann, 134.
 BURFORD. The London Hospital Reports, 425.
 BURNETT. Diseases of the Liver, 424.
 BURNETT. Gout and Its Cure, 283.
 CARLETON. Genito-urinary and Venereal Diseases, 330.
 CARTIER. The Universal Homœopathic Annual of 1894.
 CERNA. Notes on Newer Remedies, 94.
 CHEYNE. The Treatment of Wounds, Ulcers and Abscesses, 231.
 CLARKE. Indigestion, 94.
 CLARKE. Diseases of the Heart and Arteries, 284.
 CLARKE. Non-Surgical Treatment of Diseases of the Glands, 93.
 DEWEY. *Essentials of Homœopathic Therapeutics*, 92.

- DUDGEON. Hahnemann's Therapeutic Hints, 232.
- FISHER. Handbook of the Diseases of Children, 484.
- FROTHINGHAM. Laboratory Guide for the Bacteriologists, 93.
- FULLER. Male Sexual Disorders, 531.
- FUNK. A Standard Dictionary, 183.
- GILCHRIST. The elements of Surgical Pathology with Therapeutic Hints, 486.
- GOODNO. The Practice of Medicine, 581.
- GRANDIN. Obstetric Surgery, 40.
- GRANDIN. Pregnancy, Labor and the Puerperal State, 579.
- GREEN. Pathology and Morbid Anatomy, 485.
- GRIFFITH. The Care of the Baby, 330.
- GUERNSEY. Urinalysis, 231.
- HARE. Physical and Natural Therapeutics, 487.
- HOOD. A Manual of Electro Therapeutics, 426.
- HYDE. A Manual of Syphilis and Venereal Diseases, 580.
- INVESTIGATION CLUB. A Pathogenetic Materia Medica, 135.
- JONES. Prescription Card, 41.
- KEITH. A Plea for a Simpler Life, 577.
- KING. Stories of a Country Doctor, 331.
- LLOYD. Syllabus of Eclectic Materia Medica and Therapeutics, 329.
- LONG. Syllabus of Gynæcology, 93.
- MACFARLANE. A Clinical Manual, 285.
- MALCOLM AND MOSS. A Regional and Comparative Materia Medica, 379.
- NORDAU. Degenations, 280.
- NORRIS. An American Text-book of Obstetrics, 578.
- NOTZING. Suggestive Therapeutics in Psychopathia Sexualis, 184.
- PURDY. Practical Urinalysis and Urinary Diagnosis, 579.
- SCHLEGEL. Innere Heilkunst, 426.
- SCUDDER. On the Use of Medicated Inhalations, 429.
- SCUDDER. The Eclectic Family Physician, 186.
- SENN. The Pathology and Surgical Treatment of Tumors, 533.
- SHOEMAKER. Materia Medica and Therapeutics, 581.
- THOMAS. Detachable Diet Lists, 232.
- THORNTON. Dose Book and Manual of Prescription Writing, 135.
- VILLERS. Internationales Homœopathisches Jahrbuch, 137.
- WATKINS. An Eclectic Compendium of the Practice of Medicine, 532.
- YINGLING. The Accoucher Emergency Manual, 182.
- Obituary, A. J. Tafel, 145.
- Obituary, A. R. Thomas, 587.
- Odontalgia Rheumatica, 483.
- Oenothera Fiennis, 419.
- Oysters and Typhoid, 141.
- Parotitis, 120.
- Passiflora in Toothache, 179.
- Passiflora in Epilepsy, 228.
- Passiflora in Ulcer, 321.
- Phosphorus, Mammary Gland inflammation, 343.
- Physiological Nutrition, 125.
- Photolacca Decandra Folia, 540.
- Pine Apple Juice in Diphtheria, 225.
- Placenta Prævia, 560.
- Plantago Major, 87.
- Plantago Major in Toothache, 179.
- Plumbum, Muscular Atrophy, 573.
- Podophyllin, Chronic Morning Diarrhoea, 321.
- Polypharmacy again, 537.
- Polypharmacy, Homœopathic Pharmacists and Physicians, 337.
- Primitive Physic, 491.
- Pulsatilla, Flatulent Dyspepsia, 374.
- Pulsatilla, Inflamed Prostate, 572.
- Pyrogenium, 564.
- Quinine and Fever, 143.
- Rattle Snake Bite, 468.
- Rhus Radicans and Rhus Tox, the Difference, 95.
- Rhus Radicans in Blepharophthalmia, 14.

- Rhus Radicans* in Chest Pains, 15.
Rhus Venenata Ophthalmia, 344.
Rhus Tox in Blepharophthalmia, 15.
Rhus Tox Case, 150.
Rhus Tox Adenitis, 270.
Rhus Tox Herpes Labialis, 270.
Rhus Tox Herpes Zoster, 271.
Rhus Tox Chest Pain, 344.
- Sabal Serrulata* in Sexual Excess, 525.
 Salts of Potash Never to be Ex-
 hibited in Fever, 227.
Sambucus Case, 177.
Sanguinaria and *Rhus* Poisoning, 226.
Saururus, 539.
Schuessler Remedies, Notes on, 289.
Scrofulous Disorders, 480.
Scutellaria, 383.
Sempervivum Tectorum, 473.
 Sex of Eggs, 171.
 "Shucks" Again, 528.
Silica in Whitlow, 16.
Sisyrinchium, 408.
Skookum Chuck, Eczema, 267.
Solanum Carolinense, 170.
 Solar Heat Treatment, 180.
 Sound Doctrine, 530.
Spigelia Cases, 147, 225.
 Splenic Region, Pain in, 123.
Stannum Iod., Twelve Cases Treated
 With, 80.
Staphisagria and Lice, 32.
 Steam in Therapeutics, 368.
 Story of the Provers, 70, 114, 157,
 205, 248, 293, 355, 392, 449,
 507, 549.
Sulphur, Lichen, 271.
- Sulphur*, Eczema, 271.
Sulphur Case, 458.
- Tablets That Are Bad, 178.
Terebinth in Diabetes, 177.
 The Physician's Library, 131.
 The Quack, 259.
 Tissue Remedies, Cures by, 526.
Tolle Causam, 34.
Trichinosis, 179.
Trional in Sleeplessness, 418.
Triticum Repens, 541.
Tuberculinum, Ringworm, 278.
 Tumor on Neck Cured by Calcarea,
 502.
Tuberculosis, Germ Theory Wrong,
 273.
 Typhoid, Some Indications for, 423.
- Ulcer, Echinacea, Passiflora, 277.
 Ulcer on Leg, 321.
 Uncleanliness Cured by Am. Carb.,
 90.
 Unsweetened Condensed Milk, 130.
- Vaccination, 177.
 Vaccination and Smallpox, 565.
Vaccinium, Phthisis, 278.
Vanilla and *Vanillium*, 421.
Veratrum Vir., Locally, 173.
 Veterinary, 19, 129, 198, 258, 365,
 366, 468.
- Worth Reading, 203.
- Zincum*, 53.
Zincum in Scarlatina, Typhoid,
 Dropsy and Nervous Diseases,
 97.
Zincum, Poison Case, Effects on
 Animals, Headache, 151.

THE HOMŒOPATHIC RECORDER.

VOL. X. PHILADELPHIA AND LANCASTER, JAN., 1895. No. 1.

IS THE GILA MONSTER VENOMOUS?

By Thomas Lindsley Bradford, M. D.

There seems to be so great a diversity of opinion as to whether this ugly black and red lizard of the gloomy Gila desert and river is really a venomous or a harmless member of the family of the Lacertidæ, that in the following article all the data obtainable, pro and con, is presented:

The heloderma is classed as follows: Order: Saurii. Lacertilia. Lizards. Sub order: 5. Fissilinguia. Family: Lacertidæ. Heloderma horridum of Mexico; the crust lizard; the Mexican Caltetepon. Called heloderma from its skin being studded with nail or tubercle-like heads. The Gila monster is a native of Arizona, New Mexico and Texas. It is smaller than the Mexican variety, and is called, by Cope, Heloderma Suspectum. It is the only lizard whose character is not above reproach, hence the name. Zoology says: An esquamate-tongued lizard with clavicles not dilated proximally, a postorbital arch, no postfrontosquamosal arch, the pre and post frontals in contact, separating the frontal from the orbit, and furrowed teeth receiving the different ducts of highly developed salivary glands.

N. W. Lockington, in the *American Naturalist* for December, 1879, says, that several specimens were presented during the year 1879 to the California Academy of Sciences; that it was decided to be not poisonous; that there is no such thing in nature as a poisonous lizard; he then describes its lazy habits.

Mr. George A. Treadwell reported to the London Zoological Society, in 1888, a case of death from the bite. This was published in *Nature* and copied in the *American Naturalist* for August, 1888.

In the *Naturalist* for July, 1891, there is an article quoted from the *Bulletin of the Essex Institute*; Samuel W. Garman, of

Museum of Comparative Zoology of Harvard University, studied a living specimen and found it very good natured; doubts its poisonous qualities; thinks it may affect small animals, but not large ones; saw his specimen bite a cat less than one-third grown on the hand and wrist; for half an hour the kitten was distressed after which it lay down to sleep and awoke well.

The *Naturalist* for October, 1882, contains an article quoted from *Land and Water*. It also mentions the experiments of Dr. Irwin as having taken place about fifteen years before, and that he (Dr. Irwin) concluded it to be harmless.

In the *Naturalist* for October, 1882, is the following description of the experience of Dr. R. W. Shufeldt, U. S. A., at the Smithsonian Institute:

A lizard was sent to the Smithsonian, by A. T. Burr, U. S. A. It was the *Suspectum*, of Cope. Dr. Shufeldt says of it: It was in health; at first I examined it with care, but as I was returning it to its cage my left hand in which I was holding it slipped, and the irritated heloderma darted forward, and seizing my right thumb in its mouth inflicted a severe lacerated wound, sinking the teeth in his upper maxilla to the very bone. I, by suction of my mouth, drew not a little blood from the wound; the bleeding soon ceased entirely to be followed in a few moments by very severe shooting pains up the arm and down the same side. The severity of these pains was so unexpected that added to the nervous shock, and a rapid swelling of the parts, it caused me to become so faint as to fall. The action of the skin was greatly increased; perspiration flowed profusely. A small amount of whisky was taken. That night the pain allowed no rest; the hand was kept in ice and laudanum; the swelling did not pass the wrist. Next morning it was less, and in a few days the wound was healed. After the bite the animal was dull and sluggish, simulating the torpidity of a serpent after it has inflicted a deadly wound, but soon became natural in action.

In a note to this article, Mr. E. D. Cope, one of the editors of the *Naturalist*, says: Its venomous nature seems to be complicated by opposing testimony; the fissured teeth have long been known. Dr. J. G. Fischer, of Hamburg, has recently described the ducts of the salivary glands. I gave it the name *Suspectum* because of my doubt of its nature.

The Scientific American for December 20, 1879, contains a short article, as follows: The Gila monster is thought to be poisonous, but such is not the case; it will bite fiercely when irritated,

but the wound is neither painful nor dangerous; the Mexicans assert that its breath is fatal because it blows or breathes forcibly when disturbed. In the "Zoology of the Survey of the One Hundredth Meridian" it is stated that specimens were procured in 1873, 1874 and 1881, but they were lost, with one exception, in transit to Washington. It grows to be as much as three feet and a half long; its food is small reptiles, mice, crickets and other insects; it travels no faster than a tortoise, and when disturbed it stands as erect as possible and blows at its antagonist, sending forth a stream resembling fog and thought to cause instant death. Mr. T. W. Parker saw his first specimen near the Salt River, ten miles from Phoenix; he knew a mouse to be paralyzed by the bite of one; and thinks that a man in Arizona was also paralyzed by its bite. A very good picture of the reptile accompanies this article.

The Scientific American for October 7, 1882, contains a long article on and a fine picture of the heloderma. It mentions the lizard sent to London Zoological Garden, by Sir John Lubbock, in July, 1882. At first the keepers handled it carelessly, but not for long. Dr. Andrew Wilson, the distinguished naturalist, writing in *Knowledge*, says that no man knowing lizard nature would hesitate in rejecting the poisonous idea. This was at first freely handled and was very sluggish, no doubt from the effect of the voyage. Dr. Gunther, of the British Museum, found poison fangs in its mouth. It was made to bite a frog and guinea pig; the frog died in one minute the guinea pig in three. In *London Field* Mr. W. B. Tegetmeier says that this lizard was first described in the *Isis*, in 1829, by the German naturalist Wiegmann, who named it and noted its ophidian teeth. In *Comptes Rendu*, for 1875, M. F. Sumichrast gave a detailed account of the animal and sent specimens in alcohol to Paris, where they were dissected and described. The result was published in the *Mission Scientifique au Mexique*, edited by MM. Aug. Dumeril and Bocourt. Sumichrast describes the natural history of the animal and mentions its nauseating odor. He got a young one to bite a pullet under the wing; in a few moments the parts became violet in color, convulsions ensued, from which it partly recovered, but it died in twelve hours. The same heloderma was made to bite a large cat in the foot, the limb became swollen and the cat continued mewling for several hours as if in extreme pain, but did not die.

C. E. J., of Salt Lake City, had lived in that region for seven-

teen years; had handled a number of the monsters; he says: I can say that I never yet knew anybody or anything to have perished from their bite. We have had them tied by the hind leg in the door yard, where the children have freely played with them, picking them up by the neck and watching them bite off the end of a stick. We gave them raw milk and eggs. Once one bit a dog in the lower jaw and it had to be choked off; the jaw was swollen for several days and then got well.

The Indians think they produce good or bad weather; they talk to the storm-spirit and send wind, water or fire upon us. Their length is from fourteen inches to three feet. Sir John Lubbock's specimen was nineteen inches long. It is of a creamy, buff color, with dark brown markings, forepart of head and muzzle entirely dark, upper eyelid indicated by light stripe, body covered by circular warts.

On February 7, 1883, a paper was read before the College of Physicians, of Philadelphia, entitled "A Partial Study of the Poison of the *Heloderma Suspectum*—the Gila Monster." It gave the results of researches into the venomousness of this lizard, conducted by Drs. S. Weir Mitchell and Edward T. Reichert. It mentioned the anterior deciduous grooved teeth communicating by ducts with large glands within the angle of the lower jaw, an arrangement suggesting a power of poisoning. It is summarized as follows: There is a great diversity of opinion regarding the poisonous nature of the Gila monster. In many houses it is a pet, but the most of the settlers and the Indians fear it. In two letters from Arizona; one calls it harmless, the other, very dangerous. In France and in London it has bitten and killed small animals. Its bad name in Mexico is mentioned by Bocourt and Dumeril. Sumichrast says: This curious lizard is slow and embarrassed in its movements, hides in the daylight and, especially, in dry weather, emerging at night and in wet seasons. He has a nauseating odor and, when irritated, slobbers a sticky white saliva. The natives hold him in the utmost terror and consider him more fatal than any serpent. When made to bite a fowl it died in twelve hours, with bloody fluid exuding from its mouth, the wound being of a purple tint. A cat was made ill, but recovered.

Dr. Irwin, years ago, decided it was harmless. Mr. Horan, of the National Museum, has been bitten several times without injury.

The Gila monster is said to live on bird eggs; it is sluggish,

but capable of sudden agile attacks; its teeth are very small and easily removed; without them it is harmless; this may account for the instances when he has bitten and done no harm.

The lizard was provoked to bite on a saucer edge which it was indisposed to do. When once it had hold it was hard to pull the saucer away. After a moment a thin fluid-like saliva dripped in small quantities from the lower jaw. It was slightly tinted with blood, due to violence of the bite, and it had a faint and not unpleasantly aromatic odor. The secretion was alkaline in contrast to serpent venom, which is acid.

Experiment 1. Diluted four minims of the saliva, in one-half cubic centimetre of water, injected it in breast of a pigeon. In three minutes the bird walked unsteadily; the respiration became rapid and short, and at the fifth minute feeble. At sixth minute it fell in convulsions with dilated pupils, and was dead before the end of the seventh minute.

Experiment 2. Etherized rabbit used. One-sixth of a grain of dry heloderma venom was injected into the external jugular vein; it died in nineteen minutes.

Experiment 3. Rabbit with pneumogastric nerves cut; same dose and manner as before; death in one minute and thirty-five seconds. Results same as when the pneumogastrics were entire so that the effect on the heart is direct and not by inhibition through the pneumogastrics.*

Experiment 4. Placed small portion of dried venom on exposed heart of a pithed frog; heart-beats gradually grew less, and ceased within an hour and a half.

Experiments 5, 6. Both with frog hearts. In experiment 6, the hearts of two pithed frogs were exposed; placed on one the venom. This poisoned heart beat more freely than the other; in an hour and a quarter the poisoned heart beat very feebly, did not fill with blood; the normal heart filled with blood and beat firmly.

From these experiments the deductions were made: The poison of heloderma causes no local injury. It arrests the heart in diastole, the organ afterwards contracts slowly—possibly in rapid rigor mortis.

The cardiac muscle loses its irritability to stimuli at the time it ceases to beat. The other muscles and nerves respond to irritants.

*In the original article are tables of pulse and arterial pressure.

The spinal cord has its power annihilated abruptly, and refuses to respond to the most powerful electrical currents.

This virulent heart poison contrasts strongly with serpent venom, since they give rise to local hemorrhages, causing death chiefly through failure of respiration and not by the heart unless given in overwhelming doses. They lower muscle and nerve reactions, especially those of the respiratory apparatus, but do not cause extreme and abrupt loss of spinal power. They also produce secondary pathological appearances absent in heloderma poisoning.

Dr. Mitchell concludes this interesting article thus: The briefest examination of the lizard's anatomy makes it clear why it has been with reason suspected to be poisonous, and why it poisons with so much difficulty. Unless the teeth are entire, the poison abundant, and the teeth buried in the bitten flesh so as to force it down into contact with the ducts where they open at the crown of the teeth, it is hard to see how even a drop of poison could be forced into the wounds. Yet it is certain that small animals may die from the bite, and this may be due to the extraordinary activity of the poison, and to the lizard's habit of holding tenaciously to what it bites, so as to allow time for a certain amount of absorption. A small lizard might not be fatal to man; a large one (it is said they attain the length of three feet) might be more dangerous. Drs. Sternberg and Prof. Gautier have shown that human saliva may kill a rabbit in twenty-four hours, a pigeon sooner. Gautier thinks this is due to the normal ptomaines or animal alkaloids, the products of putrefactive processes. But there is no resemblance between symptoms of the ptomaines and venoms.

Dr. Henry Crecy Yarrow, Honorary Curator to the Department of Reptiles in the United States National Museum, in an article on reptiles in Buck's "Reference Hand-Book," says: With regard to the poisonous lizard, *Heloderma suspectum* (Gila monster) there is a mass of conflicting evidence as to its toxic power. The Mexicans have long looked upon it as dangerous, but other perfectly harmless lizards share in this evil reputation; a number of persons have been bitten without ill result.

In New Mexico it is kept as a household pet. Opposed to this view of its non-dangerous nature are the facts that persons have undoubtedly perished from its bite, the writer having in his possession the affidavits of two respectable individuals who witnessed a death, and the experiments of Mitchell and Reichert,

which conclusively show that the saliva-like fluid from the mouth of the *Heloderma*, when injected beneath the skin of an animal, produces fatal results with great rapidity. Dr. Yarrow then gives the experiments of Drs. Mitchell and Reichert.

In Vol. VIII of the "Reference Hand-Book" Dr. Yarrow gives the result of some experiments made by himself at the National Museum. He says:

Drs. Mitchell and Reichert provoked the reptile to bite on a saucer edge, but our own method consisted in forcing the lizard to bite upon a piece of artist's gum, which being elastic and yielding did no injury to the teeth and afforded a fair hold. So soon as the saliva appeared to be flowing it was carefully swabbed up with pledgets of absorbent cotton, which were washed out with glycerine, and in this way we had no difficulty in securing all of the fluid needed. It was preserved in glycerine in the same manner as our serpent venom was preserved.

First Experiment. November 8, 1887, 12:17 P. M. Held left hind leg of rabbit to heloderma, which grasped it with his teeth and held on for three-fourths of a minute, biting fiercely.

1:30 P. M. Rabbit a little lame, but enjoying eating as much as before.

3 P. M. No result so far.

November 9th. Rabbit appears to be perfectly well, excepting a slight lameness of left hind leg due to the lacerated wound made by the lizard's teeth.

12:30 P. M. Held leg of another rabbit near mouth of a different heloderma from the one used in the former experiment and irritated the reptile until he took hold. The rabbit's leg was seized several times and bitten to the bone, the reptile being unwilling to let go. There was a copious flow of saliva, which ran over the teeth wounds and was rubbed in by the experimenters, care having been taken to remove the hair from the rabbit's leg. This was done in every case, as it was feared that the thick fur might prevent the saliva from reaching the wounds.

3 P. M. No result.

November 10th. No result.

November 11th. No result except slight lameness.

November 17th, 12:45 P. M. Injected three minims of solution of heloderma saliva in leg of hen; respiration somewhat increased; no other symptoms.

2:30 P. M. Fowl in same condition; respiration slightly increased and breathes with beak partly open.

November 20th. Hen recovered.

In this case the increased respiration was due to compression of the hen's throat to keep it quiet during the experiment.

November 22d, 12:19 P. M. Injected ten minims of solution of heloderma saliva and ten minims of water into left breast of another hen. She was thin, but perfectly healthy, and had been used for two rattlesnake venom experiments with ligature and recovered.

12:25 P. M. Increase of respiration; wants to lie down; defecates; feathers ruffled.

12:30 P. M. Panting heavily; peculiar outward and inward movement of anus; eyes closed and very drowsy.

November 28th. Chicken entirely recovered and has been well for several days.

November 28th, 12:35 P. M. Injected twenty-five minims of solution of heloderma saliva into left leg of another hen.

12:40 P. M. Hen lying down; respiration quickened and breathes with mouth open.

2:30 P. M. Chicken is still lying down and breathing fast.

November 29th, 11 A. M. In a same state as yesterday, will not eat.

November 30th, 11 A. M. Improving; eats a little.

December 2d. Entirely recovered.

December 5th, 12:15 P. M. Injected twenty-five minims of solution of heloderma saliva into breast of chicken, same quantity into right leg, same quantity into left leg, making in all seventy-five minims. In a short time the fowl had copious, watery discharge per anum, with a curious oscillatory movement of that opening.

12:25 P. M. Chicken lying down; feathers much ruffled.

December 6th. Chicken found dead. This fowl had been used for previous experiments and was very thin and weak, and it is by no means certain whether the copious diarrhœa, probably produced by the glycerine, did not cause its death.

December 5th. Forced largest heloderma to bite a chicken on the leg (from which feathers had been removed) several times. Copious flow of saliva and many lacerated wounds.

December 6th. Chicken seems perfectly well; no swelling or local manifestation whatever.

December 7th. Chicken well.

Fearing that the glycerine solution of saliva (two drachms of saliva to six drachms of glycerine) was too weak, or had lost its strength through keeping, on December 8th, 12:15 P. M.,

forced open the jaws of the largest and most savage heloderma and collected upon a piece of absorbent cotton from ten to fifteen drops of fresh saliva. Placed the cotton in fresh incision in breast of chicken and allowed it to remain.

December 10th. Chicken appears well, The wound healed by first intention.

January 20th, 1888. Wound in breast has been healed for some time; the cotton remains where it was placed, can be felt encysted under the skin and has produced no injury.

April 4th. Chicken well; the cotton still in situ.

Dr. Yarrow deduces from all this: That a large amount of heloderma saliva can be inserted into the tissues without producing any harm, and it is still a mystery how Drs. Mitchell and Reichert and himself obtained entirely different results. Both of the Gila monsters used were good sized, active specimens, full of vigor, secreting a considerable amount of saliva, and the short captivity they had suffered could not have so modified their saliva as to render it innocuous.

Dr. Shufeldt published an exhaustive article in the *New York Medical Journal* for May 23, 1891. He gives the natural history of the animal, says that collectors are fast rendering it scarce and that it soon will be extinct. This article is illustrated by pictures from photographs taken from living subjects by the author. In 1857 John Edward Gray, of the British Museum, said: I know of no other instance of a batrachian having this structure of its teeth, nor any instance, except the Mexican lizard, in which all the teeth are uniformly furnished with a basal cavity and foramen, and this lizard is said to be noxious; but the fact has not been distinctly proved. He then mentions the other articles, where accounts of it may be found. Dr. Irwin, Dr. Gunther, Dr. Sclater, the secretary of the Zoological Society of London, thought it poisonous, as did Mr. Boulenger, of the British Museum. He says: Heloderma is probably not the only poisonous lizard. *Lanthanotus borneensis* a pretty close ally of this lizard, described four years ago by Dr. Steindachner, exhibits, according to that author, a similar dentition. There is nothing on record to show the *Lanthanotus* to be poisonous. Dr. Shufeldt then alludes to his own case. Sir Joseph Fayrer also produced, in 1882, evidence before the Zoological Society of London to demonstrate its poisonous nature. The experiments of Drs. Mitchell, Reichert and Yarrow, are then noticed. He concludes: Very evidently the last word on this subject has not

been said, and opinions are very much divided, a host of supporters appearing upon either side. To future experimenters he advises that in examining a person bitten by a heloderma ascertain, if possible, the exact condition of the patient at the time of the infliction of the wound, as regards both sobriety and his general condition. Make sure that the reptile that inflicted the bite was a genuine heloderma. Be careful not to destroy the victim with the remedies you administer to offset the effects of the bite. A quart of raw whisky practically given at one dose, may prove more fatal than the bites of ten heloderms. If the patient dies after the bite of one of these reptiles, be sure to ascertain whether it was from the effects of the bite or from the effects of the remedies administered. The locality of the bite and other matters, of course, should also be carefully noted. Bear in mind, too, the fact, when experimenting with small mammals and other animals, that heloderms, in nature, often catch and kill such for food, and that it is just possible that they do not inject, in such cases, the supposed-to-be poisonous saliva. In other words, there may be a perfectly *innocuous buccal secretion* in addition to the secretion of the submaxillary gland, and it is from this latter alone that the poisonous saliva is supposed to exude. It will be noticed that frogs nearly always die in the hands of experimenters from the bite of the heloderma. Now a frog is a small animal generally, and easily compressed, and the sharp teeth of the reptile may divide one of its main arterial trunks or even the aorta itself, thus killing the creature almost instantly. This should be carefully looked into; shock may have something to do with it. The condition of the lizard should also be observed as well as the time of the year. Heloderms may have a certain amount of control over the supposed poison gland, and their temper at the time of obtaining saliva for experiment may have something to do with it. Dr. Mitchell obtained the poison by making it bite the edge of a saucer and it bit violently. Dr. Yarrow made it bite a piece of soft artist's gum. In the first case the angry reptile, attacking so unyielding an object as a saucer, may have been excited to bring its poison into play, while in the case of the soft artist's gum it may have deemed the wound of its teeth sufficient, and only the buccal saliva drooled away for Dr. Yarrow's experiments.

In 1890 Dr. Charles D. Belden, of Phœnix, Arizona, wrote several letters to Messrs. Boericke & Tafel concerning the heloderma suspectum. These letters were published in THE RE-

CORDER. He mentioned the experiments of Dr. John Lubbock, and those of Drs. Mitchell and Reichert; quoted from published cases of poisoning of which he was personally aware: stated that this poison was supposed to produce paralysis, and sent a small quantity of the poison to be prepared according to the Homœopathic formula.*

In March, 1893, there appeared in these pages a proving of the heloderma, made with the sixth and thirtieth potencies, by Dr. Robert Boocock, of Flatbush, L. I. From these provings he deduced the fact that it would be a valuable remedy in paralysis agitans, and said that its scope was very much the same as Dr. Mitchell's experiments had indicated. In a later number of THE RECORDER Dr. W. B. Clarke, writing in the *Indianapolis News*, mentions Dr. Yarrow's experiments with the Gila monster. Several articles have since appeared. In the October number, 1894, there is an arrangement according to the schema of Hahnemann of the heloderma proving of Dr. Boocock, prepared by Dr. Lilienthal, of San Francisco.

Now is this charming lizard, of the great Gila river and desert, villified? All these years has he borne a bad name causelessly? Or is he endowed with his venom teeth for some purpose?

Fontana, in his *Viper Venom* book, says, that not all vipers are poisonous, although he admits that he found but very few innocuous. May not the Gila monster be harmless under certain conditions?

It would seem that in the heloderma we may have a valuable remedy for certain forms of paralysis. In an incurable case of hemiplegia the thirtieth of heloderma was given, in water, a teaspoonful every three hours. The patient took but a few spoonfuls, as she said it made her feel badly and stopped taking it. She complained of a sensation of the most intense coldness in the paralyzed side. She died within a couple of days.

The sensation of coldness, attributed to no known cause, may prove the keynote to this remedy, which may become, after further provings and experience, a second lachesis.

BIBLIOGRAPHY.

Mitchell, S. Weir, and Reichert, Edward T. A Partial Study of the Poison of the Heloderma Suspectum (Cope), The Gila Monster. Read before College of Physicians of Philadelphia, February 7, 1883. Trans. Coll. Phys. of Phila. 1881-83. 3 s. vi, p. 255. N. Y. Med. Jour., Vol. xxxvii, p. 520. Med. News. (Phila.), Vol. xlii, p. 209. Science, Vol. i, p. 372. Also, Reprint. Phila.: Dorman. 1883.

*This attenuated poison can be procured of Boericke & Tafel.

Yarrow, Henry Crecy. Article on Reptiles. Reference Hand-Book Med. Sciences. New York: Wood & Co. 1888. Vol. vi, p. 171.

Results of Experiments in National Medical Museum, November and December, 1887. Ref. Hdbk. Med. Sciences, Vol. viii, p. 449.

Contributions to the Study of *Heloderma suspectum*. Proc. Lond. Zoological Society, April 1, 1890.

Gray, John E. On the Genus *Necturus* or *Menobranthus*, with an Account of its Teeth and Skull. Proc. of Zool. Soc., 1857, p. 62.

Irwin, Dr., Experiments of. *Am. Naturalist*, Vol. xvi, p. 842 (October, 1882.)

Yarrow, H. C. Bite of Gila Monster. *Forest and Stream*. New York. June 14, 1888. Pp. 412, 413.

Mitchell S. Weir. The Poison of Serpents. *Century Magazine*, Vol. xxxviii (August, 1889), No. 4.

Lackington, N. W. *Heloderma Suspectum*. *Am. Naturalist*, Vol. xiii, p. 781 (December, 1879).

Treadwell, George A. Death From Bite Of. *Am. Naturalist*, Vol. xxii, p. 749 (August, 1888).

Garman, Samuel W. The Gila Monster, *Am. Naturalist*, Vol. xxv, p. 668 (July, 1891). *Bulletin Essex Institute*, Vol. xxii, Nos. 4, 5, 6. Also, reprint.

Note on the Poisonous Nature. *Am. Naturalist*, Vol. xvii, p. 800 (July, 1883).

Shufeldt, R. W. Summary of Observations on the Salivary Glands. *N. Y. Med. Jour.* (May 23, 1891.)

Shufeldt, R. W. The Bite of the Gila Monster. *Am. Naturalist*, Vol. xvi, p. 907 (November, 1882).

Article: The Gila Monster. *Sc. American*, Vol. xli, p. 399 (December 20, 1879).

Is the Gila Monster Venomous? *Sc. American*, Vol. xlvii, p. 129 (August 26, 1882).

A Venomous Lizard. *Sc. Amer.*, Vol. xlvii, p. 135.

The *Heloderma Horridum*. *Sc. Amer.*, Vol. xlvii, p. 231 (October 7, 1882).

Mitchel and Reichert Experiments, *Sc. Amer.*, Vol. xlviii, p. 212 (April 7, 1883).

Shufeldt, R. W. Letter on Anatomy of Poison Apparatus. *Nature*. London, April 2, 1891. Pp. 514, 515 (No. 1118, Vol. xliii).

Cope, E. D. Naming Of. *Proc. Acad. Nat. Sci.*, Phila., 1867, p. 5.

Sumichrast, F. Note On. *Bulletin de la Soc. Zoologique de France*, 1880.

Gunther, A. C. Article on Lizards, *Encyclp. Britannica*, 9th ed. Vol. xiv.

Sclater, Philip Sutley. Remarks on the *Heloderma*. *Proc. Zool. Soc.*, London, 1882, p. 632.

Belden, Charles D. Letters Concerning the Gila Monster. *Hom. Recorder*, Vol. v, pp. 163, 258.

Boocock, Robert. Proving of *Heloderma Suspectum*, *Hom. Recorder*, Vol. viii, pp. 97, 145.

Bite, a Gila Monster's. From Phila. Times. Hom. Recorder, Vol. viii, p. 318.

Lilienthal, Dr. Proving of Heloderma according to the Schema of Hahnemann. Hom. Recorder, Vol. ix, p. 495.

Johnson, Chas. E. Note On. Hom. Recorder, Vol. ix, p. 141.

Proving, Slight Of. Hom. Recorder, Vol. ix, p. 506.

Boocock, Robert. Letter concerning the Heloderma, Hom. Recorder, Vol. ix, p. 550.

Heloderma horridum in Heart Failure and Paralysis of the Lungs. Hom. Recorder, Vol. ix, p. 628.

Fayrer, Sir Joseph. Evidence of the Poisonous Nature of Heloderma, Proc. Zool. Soc. London, 1882, p. 632.

Clarke, W. B. The Gila Monster, the only Poisonous Four Legged Creature in the World. Indianapolis Evening News, July 16, 1890. Also, Medical Current, Chicago, September, 1890.

“THE BEE LINE REPERTORY,” UNDER VIEW OF THE AUTHOR.

Editor of HOMŒOPATHIC RECORDER.

In the friendly review of the “Bee Line Repertory,” as copied from the *Southern Journal of Homœopathy* in the last issue of the RECORDER, I see the suggestion that *Apis* should be found indicated under “Hives,” and *Cann. Ind.* under “Sense of duality.”

I am aware that *Apis* is a prominent remedy for hives or nettle-rash, but as it is usually indicated for that condition during a chill it will be found under that caption. See Repertory, “Chill.”

In regard to the “Sense of duality,” indicative of *Cann. Ind.*, I think that the meaning of this dual sense in respect of *Cannabis* is the being lifted, as it were, out of one's usual self, and implies that rapt condition expressed by trance; hence *Cannabis Ind.* will be found under “Trance;” and also by that state of mind implied by the symptom, “Saying one thing and meaning another.” See “Absence of Mind,” under caption “Mind.”

In regard to the suggestion in the preface of the Repertory, that special attention should be paid to the matter of “conditions of aggravation and amelioration,” I presume the suggestion stands good, although the words, “condition, etc.,” do not appear in the Repertory; nevertheless the word “Worse” will be found, referring to “Pain,” and under “Pain” will be found the conditions alluded to. The word “Better” should have

been introduced also into the Repertory, referring to pain. All the conditions of *better* and *worse*, not given under "Pain," will be found under the several headings as sight, etc., better and worse, under "Eye;" hearing, etc., better and worse, under "Ear;" cough, etc., better and worse, under "Chest."

Of course the book is meant only to be "the world" of therapeutics in a "nut shell," and therefore must of necessity omit much that is valuable. If it were overloaded it would defeat the end for which it was intended; namely, to suggest those remedies only which may be *first* thought of. In regard to the low potencies suggested in some cases I would like to explain that they are not meant to announce that I am a special advocate of the *low* dilution in general, for in reality I am not, my usual line of treatment mostly running along the grade of the "*thirties*," but in cases when the low potency is known to act well I have indicated the fact by giving the potency in connection with the remedy. When the potency is not given the medium and higher potency is meant to be understood.

STACY JONES, M. D.

Fargo, North Dakota.

FIVE CLINICAL CASES.

Rhus radicans in Blepharophthalmia.

CASE I. A patient, Mozabbar Khan Choudhury, aged about thirty years; seen on the fifth or sixth day of the illness, on the 20th of June, 1894, at about 1 A. M., with the following symptoms and history:

Exposure; irregularity of time of taking food; had to walk twenty-four miles; applied native drugs which gave slight relief.

Left eye especially affected, upper lid more inflamed; gum in the corners of the eye; agglutination of lids in the morning; slight itching; slight lachrymation, and slight photophobia.

Right eye, only slight redness of the palpebral conjunctiva; nothing else noticeable.

Heaviness of head; tongue clean; bowels open daily as usual; thread worms; eructations.

Treatment: *Rhus r.*, half a drop a dose; to be taken a dose twice daily; four doses given.

Diet: *Atâ* (coarse flour) hand-made bread and milk by night, and rice, vegetable curry and milk in daytime.

21-6-94, 7 A. M. Seen afternoon yesterday; swelling of left upper eyelid much reduced; redness less; after evening, yesterday, some slight increase of itching; seen this morning, much improved; redness and swelling much less; bowels open. Continue medicine.

22-6-94, 10 A. M. Almost recovered.

Treatment: *Rhus r.*, as above. Given four doses.

No more medicine given, and the patient recovered satisfactorily. Eight doses (four drops) of the medicine (*Rhus r.*), two doses per day, in four days restored the patient to perfect health. No adjuvant treatment resorted.

Rhus radicans in Chest Pain.

CASE 2. An adult woman, wife of Azeem Karigar, seen on December 26, 1893, suffering under the pain since previous night.

Left side affected; cannot lie on left side, lying on right side; felt in inspiration; cannot cough for pain; slight dry cough; pulse slightly rapid and feverish; bowels open to-day; stool normal.

Treatment: *Rhus r.* 1x; to be taken half a drop a dose; four times in twenty-four hours; four doses given.

Diet: Sugar candy.

27-12-93, 11 A. M. Almost recovered; only slight pain in laughing, coughing or in moving; doing petty house-work; no stool.

Diet: Sago and sugar candy.

28-12-93. After evening. Seen at about 11 A. M. Almost recovered, only slight pain felt during deep inspiration, but not in movement, laughing, coughing, etc.; doing her house works and seems cheerful; one normal stool to-day. Medicine stopped, and no more medicine required. Come back to her usual diet, and bathing without a relapse.

Rhus tox. in Blepharophthalmia.

CASE 3. A female child, named Padma, aged about four years, seen on the 9th of January, 1894, at about 11 A. M., with the following description of the case: Suffering under a long-standing malarious intermittent fever, but since day before yesterday, has got an attack of fever, of which there has been no remission or perfect remission up to this morning; has got the eye disease since morning yesterday; thirst last night, thirst this morning; fever continuing; left eye affected; both the lids (upper and lower left lids) swollen so much that with difficulty the

patient can open the eye; palpebral conjunctiva of the left lower lid injected, less so the right lower lid, though it is not swollen; upper left palpebral conjunctiva not red; lachrymation from left eye; pain there in the lids; found the left lids agglutinated; constipation; no stool these three days; tympanitis and distention of abdomen; her mother had been suffering under ophthalmia sprevious to this; lives in a very poor hut, accessible to nocturnal cold and wet weather of this winter.

Treatment: *Rhus tox.* 6; one-fourth of a drop a dose; to be taken a dose twice daily; four doses given.

Diet: Sago.

10-1-94, 9 A. M. Swelling of the lids almost disappeared; can open the eye easily; no lachrymation of the eye; no agglutination of the lids this morning; two stools yesterday, one afternoon and the other about evening; tympanitis and distention of abdomen diminished; no fever; tongue clean; rather cheerful.

Continue medicine and diet.

11-1-94, 9:30 A. M. The eye better than yesterday; no agglutination; no lachrymation; tongue clean; nasal catarrh (running); no fever; drank water last night twice; two normal stools afternoon yesterday and one this morning.

Treatment: Placebo.

Diet: Rice.

Remark: Recovery with no relapse. One drop was sufficient to cure her, and there was no need of any external application; no need of instillation of drops in the diseased eye, but a drop in the mouth. It is no wonder to a Homœopath, but a puzzle to one who profess crude drops in material doses.

Silica in Whitlow.

CASE 4. A Mahommedan male adult, named Sâber Gâzi, aged about thirty years, seen on the 18th of the last April, at about 7 P. M. Suffering under the illness since about twenty days with the following history and symptoms: A date thorn pricked on the palmer aspect of right index finger, producing a punctured wound which caused the inflammation; pus has been issuing out by three different openings: one on the palmer aspect of the last phalange; the second on the tip, a little to the inner side, towards the middle finger; and third on the internal side, rather on the dorsal border; throbbing pain interrupting sleep; about the whole of the palmer aspect of the last phalange has been suppurating underneath the skin; had chill last night and night before the last; then had heat both the nights, but no sweat; no

thirst during any stage of the feverishness; bowels open daily once normally; taste good now, but during fever it becomes bitter.

Treatment: *Sil.* 12; half a drop dose; to be taken a dose twice daily. Four doses given.

Diet: Rice and vegetable curry.

20-4-94, 5 P. M. Opened. Had fever yesterday; passed stool yesterday, but no stool to-day.

Treatment: *Sil.* 12, as above. Four doses given. Cold water dressing.

Diet, as above.

21-4-94, Afternoon. Good sleep last night; swelling of finger lessened.

Continue medicine.

22-4-94, 7:15 A. M. Improving.

Continuing medicine as above. Four doses given.

Diet, as above.

24-4-94, Morning. Improving.

Treatment as above. Four doses given.

28-4-94, 7 A. M. Improving; no slough on ulcer, which healing up; swelling almost gone; seen yesterday the finger without water dressing, some clarified butter, *Ghee*, applying on it.

30-4-94, Morning. Almost healed up; is continuing with water dressing.

Treatment as above. Four doses given.

Diet as usual.

Remark: Patient recovered with very slight disfigurement of the finger at its tip, which is gradually disappearing, as expressed by the patient the other day (this writing the 4th of November, 1894).

Lachesis in Ophthalmia.

A Mahommedan, named Taraf Karigar, aged about fifty; all teeth fallen out; color black; seen on the 26th of December, 1893, at 2:30 P. M.; suffering under the illness since after evening day before yesterday with the following description: Left eye affected; redness of the sclerotic; left upper and lower lids swollen and painful; lachrymation (watering of left eye) with a running from the left nostril; photophobia; burning pain in; sensation of sand and dust in the eye; sensation of heat in the eye; agglutination of the eye at night, but no such thing at day-time; had fever last evening at about 5 P. M., with the symptoms as follows: Drank water once, then, chill compelling him to lie

down under covering, he slept, and perspired when uncovered. Salivated about thirty years back.

Treatment: *Lach.* 6; one-fourth of a drop a dose, to be taken a dose twice daily. Eight doses given.

Diet: Rice, vegetable curry with no fish or flesh.

28-12-93, 3:30 P. M. Almost recovered; very slight redness of left ocular conjunctiva; very slight swelling of lids and very slight pain remaining therein; no sensation of sand and dust; no burning sensation; no photophobia; lachrymation very slight remaining; agglutination of lids last night found to-day, morning; the pain he feels, he says, in the upper part in the eyeball; one normal stool yesterday and one normal stool to day; yesterday fever at about 2 P. M., but of less severity than that of previous paroxysm; slight chill, slight heat, no sweat; thirst during chill which caused vomiting of all taken one or two hours before (took hand made bread); this fever continued till 7 P. M.

Medicine and diet continued.

29-12-93, 10 A. M. Better than yesterday; slight feverishness after last visit; bowels open daily, once regularly; no agglutination last night; no pain; no swelling.

Medicine stopped; only five doses used; ordered tepid water bathing.

Diet, as above.

31-12-93, 8 A. M. All right.

Remark: One and one-fourth of a drop was required to restore him to perfect health. *Lach.* is a serpent poison, and, see, ye doctors of the other school, serpent poisons play wonders in the hands of Homœopaths!

A. H. K. CHOUDHURY.

Satkhir P. O., Calcutta, India.

CINERARIA MARITIMA.

[The RECORDER is indebted to Dr. W. E. Wright for the following interesting note on a remedy of which but little is known and many inquiries are made.]

We take pleasure in making the exceedingly interesting clinical report of *Cineraria mar.* by one of our most reputable physicians, Dr. A. B. Keene, of Syracuse, N. Y. The doctor says he has passed the point where most physicians are skeptical about new remedies and wonder whether they will do more harm

than good. He has at the present time three cases, ages respectively sixty, seventy and eighty years, who are receiving this new remedy. One of the patients is a man, the others aged women. They all report they can see better and are improving. The oldest patient had to discontinue her reading, but after two months' treatment with *Cineraria* she can again read her newspaper to her great joy. In one of the cases the cataract has been three years forming and is hard in character. The dose used is two drops three times a day in each eye. The cataract of one patient is ripe and ready for operation, but she has refused to be operated on and is undoubtedly improving under *Cineraria mar.*

LOCKJAW IN A MARE.

I let a neighbor have my team of six-year-old mares to work for a few days. I cautioned him not to feed more than a pint of corn morning and noon, and a quart at night, as my team was not getting grain and had been idle too long to stand much feed when first put to work.

He put them on a gang plow with one of his teams which was worked down. The ground was very dry and my team fresh and soft, and the work told on them. My neighbor, in mistaken kindness, fed at least a quart of corn three times a day to each horse, and I think gave generous measure at that (his quarts are usually rather larger than legal measure). The third day the team sweat freely, and late in the day a sudden cold shower came up (some hail) and checked the sweat.

Overwork, overfeeding, sudden chill, resulted in lockjaw with one mare, which was of a nervous disposition. When I was sent for I laughed at the idea of lockjaw, but found that the mare's teeth were set so hard together that it was impossible to separate them and I had to take the bit out of her mouth above the teeth. The muscles of the jaw were as hard and impressionless as iron; no apparent stiffness except, slightly, in neck.

Gave fifteen to thirty drops *Camphor*, there being no special indications for anything else at that moment, and this is recommended to begin with by most veterinary works of our school. In less than five minutes there was violent heart action, every beat of the heart was *visible* at a distance of at least one rod and could be distinctly heard at a greater distance. There was also at same time a violent *forward* motion of the muscles of the

diaphragm and neck at each beat of the heart, so great as to sway the body forward until the heels raised from the ground about two inches.

Stiffness came, so that it was with difficulty I got her into the stable.

Gave *Aconite* 2x, one drop every ten minutes, for three doses.

Then it seemed to me that *Bell.* would be better, and I gave half drop doses of *Bell.* 1x and *Acon.* 2x, in alternation, for three hours, and also blanketed the mare.

At the end of the three hours I pronounced her out of danger, as the pulse had dropped from eighty-five to ninety down to about forty to forty-five; respiration normal; jaws could be forced open fully, and the mare could, with some difficulty, pick a little. I turned her out to grass and went to bed.

The mare lost about seventy-five to eighty pounds from the shock, which I think might have been avoided to a great extent had I given her a few doses of *Ars.*; one each day, for, say a week.

J. C. WENTZ, V. S.

Spearville, Kans.

[*Passiflora inc.* is said to be almost a specific for lock-jaw in horses.—RECORDER.]

CONCEITS AND SALLIES OF A GRUMBLING INVALID.*

By Dr. von Villers.

A question frequently agitated in Homœopathic journals is the transformation or remodeling of the *Materia Medica Pura* of Hahnemann. The desirability of this undertaking may remain unquestioned so long as the *modus operandi* is not recognizable in the focus of our searching eye-glass. When certain persons excuse their lust of authorship by the assertion that Hahnemann's original topographic arrangement of the pathogenetic list of symptoms not only causes *difficulties* to the searching and

*The following aphorismic essays are the product of a muse forced upon the author by illness. While they were awaiting the file in the writing-map death hath partly thinned and partly changed the *personale* of Homœopathic practitioners. Nevertheless the author was unwilling to altogether blot out certain polemic digressions, because although personalities have changed the various views and opinions, though in somewhat less of hostile opposition, are nevertheless still maintained.

inquiring clinical practitioner, but is also no longer adequate to the modern status of the corresponding auxiliary sciences, no relevant objection can be made to this observation. That this matter, as all others, ought gradually to be amended and improved no one can deny, without being with one accord rejected among the ultramontanes; *i. e.*, the ultra-conservatives. But how often is that which is *better*, so long at least as it remains in our imagination and our wishes, the enemy of what is *good*! Even now it may be seen that the later aftergrowth among the Homœopathic physicians, especially of Germany, being perplexed by the propositions and plans found in our present literature as to amending the work, comes to the study of the *Materia Medica Pura* with a skeptical bias, and thinks it is too much trouble to control and rectify their prescriptions by a comparison with the text; such physicians content themselves with a more or less incomplete examination of the patients, and finally, from love of ease depend solely on the Homœopathic *pons asinorum*; the surest way to become dilettants, while yet among all human professions the medical profession is the one in which everyone should consider it a matter of honor and of conscience to become a master in his profession. We believe, therefore, that those who feel inclined to push the matter of remodeling the *Materia Medica* cannot be too urgently advised to be cautious. Any aids in studying the *Materia Medica*, especially for the sake of saving time, will surely be welcomed by all, and justly; but superficiality, which unavoidably neglects the welfare of the patient, must in nowise be encouraged or condoned, no matter how great an air of "scientific" advancement an author may put on. This caution is especially to be recommended when "the weeding out of the symptoms" is to be undertaken, a point on which a special stress has been repeatedly laid by the would-be remodelers of the *Materia Medica Pura*.

From several sides the objection has been raised against Hahnemann, that he has admitted a great number of unessential signs into his pathogenetic lists, whereby their compass has been inordinately distended, and the difficulty of gaining a bird's-eye view during the progress of the study has been unnecessarily increased. The topographic arrangement will be given up in time and will have to be replaced by a pathologic-anatomic-physiological arrangement. Nevertheless, as an initiative, this arrangement was on the part of Hahnemann an act of wisdom, and the completeness of his observation and the listing of his

symptoms was a merit that cannot be prized too highly. If we suppose that three of our modern authors would set about "to weed out" the pathogenesis of one and the same remedy, when a controlling comparison of these labors shall be made, one will not be willing to lose the symptoms weeded out by the other and will be able to prove their semiotic dignity from his practice, and *vice versa*. It is impossible that every Homœopathic physician, even after a few years' conscientious practice, should not have found out by experience, that in endeavoring to heal various diseases several seemingly exactly corresponding remedies will offer, and after several of them have been applied with hardly any effect another remedy, at first hardly regarded, at once promptly accomplished the object of healing after the physician had been brought to make his choice in a differentially diagnostic manner by a symptom seemingly quite unessential. One physician has experienced this in one way with one remedy, another with another remedy in his way. He will therefore not allow the removal of a symptom, however insignificant in its pathognomic quality, when it has served him as a criterion in his differential diagnosis, while another man may not have the opportunity in many years of learning the importance of this symptom in his practice. Viewed from this point, it is very doubtful whether the *Materia Medica Pura* of Hahnemann would receive any benefit from such "a weeding out" process. On the other hand, an attentively investigating practitioner, who has at heart the actual accomplishment of healing and not of a mere blind routine, will ever and anon become conscious of the necessity of further developing the *Materia Medica Pura* through the proving of new remedies or the faithful repetition of such as we have already in a rudimentary form. This observation brings to mind a case examined by me years ago which I will insert here as being unique, because it offered me an opportunity of filling out a vacuum in the text of the pathogenesis of remedies by a logical deduction.

I was requested by a man high up in the forties, but of blooming health, to give Homœopathic advice to his wife, who had suffered from a severe disease and been for eight years uninterruptedly under allopathic treatment and who had now been for several weeks given up as dying; I was at the same time assured that not the least responsibility should attach to me if I did not succeed in this forlorn hope, since the possibility of success was excluded. The only task assigned to Homœopathy in this case

would be to save the person who was slowly dying the now insupportable task of swallowing powders, pills and mixtures. Not a very honorable task, but yet accepted by me, especially because circumstances compelled me. Omitting a particular review of the whole case, which would take too much room, I subjoin a short statement of the present status as it appeared at my first visit.

The patient was a brunette of forty-six years, tall and narrow-chested, emaciated in the highest degree; there was transparent paleness of the complexion with a tinge of yellowness; an expression of deep suffering; the tongue, as also the mucous membrane of the whole buccal cavity was dry, the anterior half deep red, posteriorly thickly coated, aphthous, brownish-yellow; total absence of appetite; unquenchable thirst for water; vomiting of all ingesta; the stools, intermitting for several days, were mucous, semi-liquid, of predominantly dark color, accompanied with burning pains in the abdomen. The urinary vessel was filled for two-thirds of its depth with purulent slime of albuminous consistency and light-green color, which when poured out stuck to the sides of the vessel, with threads drawn out like glue. The urine standing above it to the rim of the vessel was light yellow, turbid, opalescent. In spite of extreme decrepitude the patient remained during the day in a half-sitting posture in a comfortable arm-chair, because while lying on her back in bed at night there was incontinence of urine, which was only stopped at once by an almost erect position of the trunk. The nocturnal, incessant oozing out of urine and the consequent, in spite of frequent changes, continually moist mattress had given the patient a bed-sore which occupied the whole breadth of the nates, together with the sacral region and extended to the lumbar region. The menses for several years had ceased to flow; the pulse was small, its frequency was not much above the normal, about ninety to the minute.

The auscultation of the thoracic cavity was omitted for the present, as in any case the digestion would first have to be assisted and the function of the kidneys to be regulated, if a curative process could at all be initiated. Nevertheless, and in spite of the desperate degree of renal phthisis before me, I had to venture the attempt, and I must confess that this was done on my part with a hope which, if not quite unconscious, was still unexpressed, and this hope was infused in me by the eyes of the patient which yet contained an element of life. Besides this we

know sufficiently well that even the most shattered organism responds in many cases in a surprising manner to a minimum dose of the specific remedy, if it is only saved from the brutal charge of hostile substances by which it has before been assaulted. I first gave *Arsenicum album* 30th, three globules dissolved in water, three times a day. Soon after this the thirst diminished, the tongue became moist and began to cast off its aphthous covering. In two or three days the appetite returned, and this could be satisfied without consequent trouble from the fifth day of her treatment, with good beef broth, dry wheat bread and some chicken meat. A painless and formed stool also appeared, and the patient would soon have regained strength, if the nightly incontinence of urine with the painfulness of her monstrous bed-sore had not robbed her of all sleep. The bed-sore I had covered with a porridge composed of grated turnips, flour and water. After a week had passed no further progress toward recovery could be seen; especially was there no change in the disturbance of the function of the bladder and in the excessively abnormal constitution of the urine. From this I concluded that *Arsen. album* would have to be stopped and its place supplied by another remedy. To find among the many remedies affecting the kidneys that remedy which would take a firm hold of the phthisic catarrh of the renal region, I clearly saw that the symptom of incontinence of urine during a position on the back would have to be necessarily included in the pathogenesis. But my search for such a symptom within the whole domain of *Materia Medica Pura* was, to my great sorrow, all in vain. Suddenly a ray of light pierced the darkness of my despair. I remembered the unvaried success attending my use of *Kreosotum* in excessive uterine hemorrhages (an instant cessation of a flux of even some weeks' duration often after the first dose of the thirtieth centesimal dilution) when these hemorrhages were characterized or increased by a horizontal position, while not at all or hardly perceptible during an upright position of the body. I asked myself whether the neighborhood of the two organs, the bladder and the uterus, the partially like supply of nerves and blood-vessels to these organs, further the same direction of the discharge of the two liquids; *i. e.*, the uterine blood and the urine discharge downward, together with the peculiar characteristic of the incontinence of urine in the present case, would, of itself, justify me in the use of *Kreosotum*. My doubts were submerged by the confession that I knew of nothing better.

The patient took the first dose of *Kreosotum* 30 at the beginning of the second week of her Homœopathic treatment, and it was to be repeated four times in twenty-four hours. The action of the medicine, which if not expected was yet earnestly desired, took place almost instantaneously. At once in the following night the patient enjoyed a sound sleep of two to three hours. The change of her subjacent linen was not required to be so frequent. On the following day the level of the deposit of purulent slime was two fingers' breadth less, and it continued to sink more rapidly during the following days, while the urine standing above it assumed a deeper color and allowed the passage of the light without opalescence. During this time the nightly incontinence of urine ceased entirely, the nightly sleep increased in duration, the bed-sore became encrusted and soon ceased to be painful, healing in an incredibly short time. In short after the second week of Homœopathic treatment the patient could be declared cured.

I am sure that no one would, in consequence, refuse me permission to recommend *Kreosotum* as the suitable remedy in a like case; nevertheless I would encounter a most determined resistance from several parties known to me if I should offer to insert "Incontinence of urine, in a horizontal position, stopped by an upright position of the trunk," as a positive effect into the text of the pathogenesis of *Kreosotum*. I would, therefore, at once confess that I have no disposition to make such a daring claim. Nevertheless I protest against the reproach made among others, also to Hahnemann, that "*he did not scruple to insert morbid symptoms which he saw disappear in a striking manner in consequence of giving a substance as a remedy into the text of the positive pathogenetic effects of the same remedy.*" If we epigoni should undertake to do this then the *Materia Medica Pura* would not long continue *pure; i. e.,* reliable. Hahnemann could do this, because he was enabled and called to it by his genial power of observation. I would not like to miss even an iota of this treasure that he has left to us, and I can truly declare that I should not have succeeded in many an actual cure. If I had desired to raise scruples at the pretended imperfections of the *Materia Medica Pura* I have not as yet found the man whom I would more willingly believe than Hahnemann. It is our part to use and to turn to account the material left by him (and this will give anyone enough to do all his lifetime), not to carp at it in the conceit that we now understand it better than he did. The "better" is the enemy of the "good."

The clinical experience inserted above proves something else besides the pre-eminence of Homœopathic medicines. It is even a question if this pre-eminence would be so striking if the old school favored by the State was not so wretched. From the case adduced and from many others no other proof in favor of Homœopathy can justly be deduced but this, that it allowed something to take place which lay in the domain of physical possibility. If even after the development of a pathological process for a number of years and in excessive degree these anomalies of function and of tissue so hostile to life could be brought back to their normal state in so short a time, it ought to have been an easy matter in the beginning of the disorder to have prevented its further development. The present status described above had been preceded eight years before by a fever, this had been maltreated by great doses and even by the greatest doses of quinine salts, and this treatment had caused such a chronic and severe disease. It is revolting! How would it beseem this doctrine to loudly challenge us in the words (as it really does in silence): "Imitate me; but imitate me exactly!"

I cannot lay aside my pen without mentioning a certain *haut-gout* which the case adduced above afterward afforded me. The surprise of the husband of the sick lady was greater than I had expected, but by no means so agreeable as I had expected. With the sure prospect of the near demise of the patient he had made "other engagements." The unexpected preservation of this life caused a great disappointment in his calculation. I was unceremoniously paid and dismissed, and could not even finish my observation of the case. I had made an enemy. Homœopathy is a dangerous thing to deal with. Sure enough!

II.

I have frequently heard an objection, not so much against the person of our master as against many of his pupils and adherents, namely, as to "the covering of symptoms." This is violently tabooed. "The coverer of symptoms" is threatened with excommunication. The least that is expected of him is that he may be "physiologically" ashamed in his heart.

Now let us honestly get together, look each other in the eye, lay the hand on the heart and let us tell one another how we began our career; when, after having gotten our bearings through reading and excerpts, we anxiously made our first Homœopathic clinical experiment. What had to be done? Of what act had we to become conscious to gain courage to become responsible for

the welfare and the life of a fellow-being? Here is the patient; we listen to his report, to his complaints; we question him, so as to complete the account and to procure a more graphic delineation; behind us is the text of *Materia Medica Pura*, memorized more or less completely; above us stands the law: *Similia similibus*. (I have elsewhere endeavored to prove that this is rather a law of identity than of similarity, if I retain the other expression it is only because this has become familiar to the reader.) This completes the external apparatus. Now everything depends on the fact that an internal process in the consciousness of the physician should properly meet and answer like an echo the image of the sickness received within. We call an echo perfect when it audibly returns not only the vowels of the articulated word or sentence, but also the consonants and even the aspirates in their proper sequence. Just so in the brain of the physician an express image similar even in its least particulars must come to meet the disease to be cured. A drawing, as we know, consists of lines arranged in an orderly sequence, and to control their harmonious agreement these must be singly compared with each other. The lines in our image are the symptoms. In the disease to be cured we observe symptoms 1, 2, 3, 4, etc. To this there correspond in the images of artificial diseases before received in our mind symptoms *a, b, c, d*, etc.; *i. e.*, *a* covers 1, *b* 2, *c* 3, etc., and if all of them are covered then also the whole disease is covered in its totality. And this is what is needed. Now if we have allowed this process to take place in our mind, and have become perfectly conscious of it, and have transferred this knowledge by means of the remedies at our disposal to the person to be healed, and have thus reflected outwardly; if in consequence we have seen the healing act take place and rejoiced in it, then we cannot see why we should not proceed in exactly the same way in the succeeding, the second clinical attempt.

The same question would arise in the 3d, 4th, 5th and other cases, so long as life should last and patients be treated. In order to show my fair-minded disposition I declare my readiness to leave this indicated procedure as soon as the anti-coverers will show me accurately where in the series of 1-1000 cases to be treated we find the number with which I may begin to substitute sounding phrases, called physiological, and may thus be allowed to cease puzzling my head. But let them not claim that they have not, one and all of them, been guilty of

this tabooed "covering of symptoms" in the Homœopathic treatment of their first case of disease. And since they have continued to follow the Homœopathic method the result of their first attempt must have pleased them. If later on they have left this path, which had led them to success, they are liable to the charge of unscientific thoughtlessness, which when practiced with patients amounts to lack of conscience.

Whosoever is present at the masterly rendition of a talented musician gives himself up entirely to the sublime enjoyment, which he is able to communicate to receptive ears and minds, and he is far removed from forming even the remotest conception of the technical practicing of the organs of the will producing the music—a practice which must have been carried on for years with an iron industry and an unbending perseverance and which many would conceive to be destructive of the mind. Nevertheless it is certain that the musician who gives such exquisite delight can never become a virtuoso without these strenuous efforts. But it is not even enough that such a completed virtuoso should have daily made during his apprenticeship such technical studies with his lips or his fingers, methodically progressing to ever greater difficulties, but he is even compelled after having attained the highest degree of the domination of the will over the limbs, to continually repeat them as frequently as possible else he will fall back and acquire all kinds of mannerisms.

It is the same with the physician, especially with the Homœopathic physician, who is called not only to acquire scientific knowledge, but also to practice an art. The mnemotechnic learning by heart of the pathogenesis of diseases, as also "the covering of symptoms," which with the beginner at least is merely mechanical—all this is to him the same (namely, means to an end) as the technical finger exercises are to the musician. Such exercises are considered as deadening to the mind by those who stand afar off, as we remarked above. But they have no such effect. They must be, on the contrary, presupposing that there is a specific musical talent in the person, in a certain sense rousing and stirring. We cannot doubt that the faculty of execution in the organs of the will, having become spontaneous through practice, facilitates and enlarges the conception of the musical thought. It is, therefore, quite absurd to assert, as is frequently done by certain parties within the Homœopathic camp, that the so-called "covering of symptoms" (and here I must remark

that this expression was not originated by myself, nor is it acknowledged by me, but only used because of its currency) is despicable, because merely mechanical and unworthy of a "physiological physician" standing on the pinnacle of the nineteenth century. On the contrary, we must not weary in saying and in repeating that it is the particular and immortal merit of Hahnemann that he has created a pharmaco-dynamic-therapeutic technique, and thus first made "the physician's art" a possibility. Now if it is an absolute need for some bashful souls to call this wonderful and wonder-working technique of Homœopathy by the would-be-contemptuous name of "covering symptoms," I would not rob them of this very modest satisfaction; but, for my person, I nevertheless protest most decidedly (some persons have even made the surprising discovery that in such a connection I can become rude) against the insinuation, that I in my position as "coverer of symptoms" *par excellence*, surrender the "physiological standpoint." This latter expression is one of those ever-ready, mighty cant phrases, in which the speaker as well as the hearer imagines everything possible; *i. e.*, nothing at all. Thus it is claimed that, owing to my position, I exercise a merely mechanical, at most a mnemotechnic activity.

But let us examine how such a so-called "coverer of symptoms" is internally constituted, what kind of a transformation of cerebral substance with the attendant molecular motion of phosphorus takes place in his skull while standing at the sick-bed. First, he will examine the patient, which, if he follows Hahnemann's direction, is surely not a light matter, while the ear-trumpet of the stethoscope peeps out of his coat pocket, and playing with the plessimeter offers a usefully diverting exercise for his fingers. Here already a mental operation takes place which is by no means to be called a merely mechanical one, for the signs of the disease, as they come to his knowledge, must be grouped, their semiotic dignity weighed and they must be ascribed to their several causes. These causes again are carefully distinguished. Here we have an interlocking synthesis and analysis all in one act, and these require pre-eminently a good amount of objective skill in observation and of penetration. Then follows the comparison of the state of the patient with the physiognomies of the remedies, and the result, which is the finding out of the most exact similitude, is a matter of human wit, in which again the co-operation of penetration must not be lacking;

for it is its function to distinguish most accurately between apparent and actual similiarity or agreement. The whole must be supported by a richly stored perspicuously arranged, mnemonic establishment very complete, indeed, as complete as possible, which must be ready and disposable, at all times, refusing its service neither night nor day. I think that this is just about sufficient, and as complicated a mental operation as ought to be required from an individual of the genus *homo sapiens*. But it seems as if the infallible physiologico-homœopathic popery, which has silently chosen as its motto: "Nul n'aura de l'esprit que nous et les nôtres," cannot be thus satisfied. The writer of this article, in the first years of his Homœopathic medical career, remembers receiving a severe reprimand from that side of the house because he had dared to illustrate by a clinical case the pains in the stomach peculiar to *Asafœtida*. He was accused up and down of the most trivial "covering of symptoms." Had he been able to show that the indications and remedial virtue of *Asafœtida* were owing to its well-known pharmaco-dynamic peculiarity and that it is distinguished by the closest relations to sentient life that it acts especially on the branches of the ganglionic system of the breast and of the abdomen, and specifically acts on the cerebro-spinal system, etc., he would, without fail, have received the applause of the Homœopathic Intelligence Bureau at Dresden; but he would have carried with him the sorry consciousness of having dished up to his readers empty phrases which, in practice, prove but empty wind. Instead of doing this I preferred to refer to Hahnemann's *Materia Medica*, where we read that *Asafœtida* causes pain in the region of the nerves of the stomach, which appear *intermittently*, by which we should understand that the pains appear in closed paroxysms with unequal intervals and, indeed, in such a way that a fit of pains appears frequently without any apparent and known cause, while it frequently does not appear when the patient thinks that he has given it a reason for appearing by an excess in eating and drinking. *Ceteris paribus* we have herein an easily recognizable characteristic of the action of *Asafœtida*, which I was lucky enough to be able to confirm and make of use to the reader by a concrete case of the cure of a case of chronic stomachache. In these endeavors which I have persisted in for a quarter of a century not even an *anathema* would ever have disturbed me. Therefore our opponents may continue unavailing their charges of "covering symptoms."

III.

I feel an itching to cause a goose-skin to our physiologists in Homœopathy.

I have been considered for some time among my like as an orthodox Hahnemannian, even while I still entertained some modest physiologic doubts as to several passages in the original text of Homœopathy; the Homœopathic louse stories *e. g.* were not at all to my taste. Only at a later date I had to confess with confusion of face that we do not even yet give sufficient credit to Hahnemann, from whom even the physiologists must acknowledge that they have learned something, be it ever so little. Before I proceed to prove this assertion, which makes the hair stand on end, by means of a clinical case, I must urgently entreat the reader not to doubt a word of what I am about to relate. I shall relate a fact which occurred before my very eyes, and which has had other witnesses besides me. It was in the winter of 1870-1871, when I was visiting a family because of the sickness of the younger children. For years these children, which were always puny when first born, had given me much trouble. After reaching their sixth year, however, they became blooming and I was rid of my care. Thus it was that I did not find it necessary at this visit to make any inquiry as to their first-born, then a boy of nine years. Just as I was about to leave the house the mother asked me to wait a moment, and she directed one of the servants to call the oldest boy. While this was being done she confessed to me, with blushes and stammering, that Kola had his whole head full of lice and she could not imagine whence they came. I remarked that with servants the presence of lice on the hair of the head, as well as on other hairy portions of the body, was by no means a rare occurrence, and that Kola had probably received his supply from that source. But the mother gave me the most solemn assurance that such parasites had never been seen on the servants of her house, who had all been in the service of her parents and were all of them very cleanly persons.

“In this case,” I answered, “the source will have probably to be looked for among Kola’s playmates.” But also this hypothesis was victoriously confuted by the declaration that Kola had no other intercourse than with his parents, sisters and brothers, and the servants of the house, with all of whom no trace of lice was to be found. During these disquisitions I had drawn the little delinquent between my knees and convinced

myself, by separating his thick hair here and there, of the presence of his troublesome tenants, and at the same time I perceived a rancid, flat smell coming from his scalp. This phenomenon I, being wrapped up in my physiological dignity, was going to leave on one side; and I thought it my duty to advise the mother to cleanse the boy's head several times a day with comb, soap and sponge.

"But I have not done anything else but that for the last three months," replied the mother, "and yet he has become worse every day."

The mother assisted my bankrupt silence by the modest question: "But I have heard that Homœopathy has remedies which drive away the lice?"

I answered: "I have also heard of it, but never seen it. *Staphisagria* is recommended for this purpose, and if you wish it you can make the experiment by giving the boy every day a dose of the thirtieth centesimal potency."

Shaking my head I departed. Four or five days after this conversation I again entered the house, looked at the younger patients, whom I had called to see, when Kola, whom together with his lice I had forgotten, was brought in. The mother presented him to me with eyes radiant with joy, declaring him free from lice. After a slight electric twitch which my physiological conscience had suddenly felt at this news, I took hold of the delinquent head and began to look for lice; to be frank, I discovered in the deepest bottom of my spiteful soul a slight hope that I might find at least one louse. A most industrious search did not bring me to this goal; I really found not a single louse; and there was another thing I did not find any more, and this was the specific smell of the scalp which I had noticed at my first call. Now I put aside my physiology and began to think. First I considered the facts as I had seen them, namely, the fact that five days ago Kola's hairy scalp was tenanted by lice; then he had received the slight dose of the decillionth attenuation of *Staphisagria* in his stomach, and that now not only the lice had disappeared, but also an important change in the function of the hairy scalp had taken place. Then I drove home and quietly allowed the facts to talk. These confessed to me what I had already thought on another domain of the doctrine of parasites, namely, that a merely mechanico-chemical destruction of the parasites was not sufficient, because the capacity for infection did not rest on a chance mechanical ground else we could not see why all

men should not be supplied with lice. But the affected individuals offer to the eggs of the parasites, which are found everywhere, a specific pathological distemper of the cutaneous function, in the chemical constitution of which they find the specific condition of their development and existence. Now, two things are clear: First, that the local killing of the parasites, however complete it may have been momentarily, still leaves behind the subjective faculty of infection; *i. e.*, the pathological chemical constitution of the cutaneous secretion; secondly, that it only needs the specific reduction of this constitution in order to make the surface of the skin unapproachable to these parasites. More convincing yet than the observation cited above is an observation made by our honored colleague, Dr. Brauser, in Riga (not to be confounded with Brutzer of the same place), on his own person, and which he related to me in the course of a conversation.

The peculiar position of my colleague causes him to spend several hours every day in the wild quarters of the honorable city of Riga. In the filthy dwellings of the Jewish, Polish, Russian, Livonian and Lettian inhabitants the morpions (a sort of louse) have made their home by preference, and are wont to accompany many a one who thoughtlessly enters these houses into the outside world. Our honored colleague, Brauser, enjoys a fine, vigorous and cleanly bodily organization, and he had been exposed to the above-mentioned danger for twenty-five years without ever having to complain of this merry company; but finally a few years before the conversation held with me he was seized by the measles. While recovering from the measles he had not for several weeks seen anybody but his wife and his nurse, when one fine day he was visited with a sensation of itching about the pubes, which he thought to be owing to the desquamation from measles through which he was then passing. This phenomenon, however, augmented in a few days in such a way that the patient began to become suspicious and to undertake an ocular inspection of the place affected. Great was his astonishment when he found the mons veneris thickly studded with a dense crop of the finest morpions. That he knew how to get rid of these guests, and the means used, we need not relate. But it becomes manifest that Dr. Brauser, so long as he was in good health, may frequently have unconsciously carried with him the nits of morpions from the suburbs of Riga, but so long as his skin perspired freely they perished, until finally the specific cutane-

ous secretion of measles, the smell of which is not dissimilar to that of the scalp affected with *pediculis*, gave to these parasitic nits the conditions necessary for their development and existence.

—*Q. e. d.*

If my honored colleague, whose communication I have here made use of, should read the above, and should not find it to agree perfectly with his account as given to me, he is herewith requested to correct me. What becomes manifest, however, from the preceding is that old Hahnemann was not after all so eccentric as the new fangled physiology would make us believe, and that we may confidently imitate at the sick bed what he has shown us.

Tolle Causam.

This was stringently enjoined on us when we were devoutly listening to our first lectures in special therapeutics, and it was given to us as the first and most general rule of healing. It appeared very convincing to our youthful reason. Our learned professor only forgot to tell us where and how we might get at the sources of the diseases. Perchance we shall yet learn this from Mr. Von. Pettenkofer. For the present we are secretly indebted (but who cares to listen to such stupidity!) to Hahnemann after we have learned from him to substitute for the unknown and unfathomable cause of disease a known cause, quite within our grasp, which serves to us as a handle by which to invert the morbid processes. But by this we are only protected against those strokes which are caused by the universal atmospheric-telluric causes, which came into activity through the very act of creation and against the psychic causes of disease. But in practice it is found not unfrequently that occasional causes, which seem quite insignificant, remain hidden from the physician, and these keep up the morbid process undiminished making even the most conscientious medical efforts of no avail. Such cases present the fairest opportunity to the physician of gaining an absurd and disagreeable notoriety as also happened, at times, in the beginning of his career, to the writer of this article. But the consciousness of the possibility of such disagreeable disrepute has also its good side. It has served me, at times, to make myself almost unendurable to a patient and his surroundings by my interminable cross-questionings. The patient must undergo such a criminal examination, a real torture, else the physician will not fail to be deceived. I have several times seen excitable patients of the female sex (male patients only get—disagreeable) break

out into tears of impatience and despair, so that I had to break off the examination without making a prescription. Later on, however, they came generally to see that the physician sought their benefit and not his own, and that he secured his success through his penal inquisition, and then they give us other notes (but unfortunately not always their bank notes). As an illustration, I will adduce a case from my practice which, in spite of its triviality, has remained impressed on my memory.

A childless couple, both the members of which were standing near the end of the forties, had transmigrated during the most unfavorable season from Odessa to St. Petersburg, owing to a change in the position of the husband, who served in the custom house. Both had always been suffering while in Odessa; but in St. Petersburg their wretched state, under the influence of the pernicious climate and of several months' of allopathic treatment, increased so much that they sought the aid of Homœopathy; not because they had any confidence in this method of cure, but merely because they despaired of any help from the school they had hitherto preferred. I had a hard position; first with the wife, who suffered from dangerous metrorrhagias. The husband wanted first to see what sort of a man I was before he would submit his worthy self to my care. The uterine affection of the wife, its course and its successful cure I shall not here relate; I need only mention this one circumstance, that it was combined with an intestinal catarrh, which remained after the cure of the uterine affection. When this was now to be treated next the husband also showed some inclination to make a trial of the matter by the new method, and to enter into the coutreband trade with pellets. When I heard that he as well as his wife had for years suffered with diarrhœa, which all opiates and styptics had failed to arrest, I demanded, according to my invariable practice in such cases, to see first of all one of the evacuations, which with them took place four or five times a day. It is, on the other hand, an invariable custom with the majority of patients of this kind to begrudge to the physician this comforting sight, as they estimate this demand to be an indelicate curiosity. So also in this case. I was therefore obliged to leave a prescription founded merely on their verbal report, but not without a repetition of my urgent insinuation that at my next visit, which I fixed both as to day and hour, I should have to see both of their intestinal evacuation. But we never eat things as hot as they are cooked! When I called a few days later I was

informed that the chamber maid had already emptied and cleansed the vessels. Renewed more urgent insinuations on my side! So the matter dragged along for two weeks, when I broke out with imprecations verging the big, big D. The chamber maid who had been summoned and to whom, especially, my winged words were addressed, looked like the cat when it lightens, and could hardly imagine what kind of a raging tornado this doctor must be. But it is quite incredible how useful such *strong* words sometimes prove to the physician. At my next visit the two vessels with the desired contents were in reality submitted to me. But then I immediately resumed my imprecations, especially because the sick couple, owing to the unsuccessfulness of my prescriptions hitherto, were already becoming mutinous against Homœopathy. The two vessels had not only perfectly homogeneous contents, while the abnormal intestinal evacuations of different individuals are wont to show quite a different character, but the light-yellow, thin, pappy mass was covered and interpenetrated with little broken grains of a shiny, dark-brown color and of irregular form. I reminded them of my particular orders to show me the excrements without any admixture, not even throwing in the cabinet paper used, and now they had carelessly used vessels in which some offal had been placed. The couple and the chamber maid, however, solemnly declared that nothing foreign had been thrown into the vessels, and that the diarrhœic evacuations of the husband and wife had always been of the same quality; just as I saw them they had come from their bodies. Now I in my turn must have looked like a cat when it lightens, for my patients pealed forth *unisono* in hearty laughter. This suddenly brought back my physiologic reason. I once more looked at the curious mixture, it reminded one of fleas and bed-bugs dried and rubbed to pieces; I then demonstrated to my patients, as if I had been on the platform in my auditorium, that this brown stuff could not by any possibility be a product of their abnormal digestive operation; they might tell that to the marines. But if this mysterious substance *had* issued from their rectum it must have first entered in the form of a food unknown to me through their mouth into the stomach, which would prove them guilty of an awful dietetic error. Let them then confess what unphysiologic food they had eaten yesterday! Deeply wounded and incensed at my accusations, which seemed to them but a cover for my ignorance and inability, they again solemnly assured me that they had not eaten anything but what had been their custom for years, namely, for dinner,

soup, heath-cock and *kasha*, and for supper, tea with white bread and fresh butter. At the word *kasha* a premonition of my coming triumph flashed over me. They had laughed at me, that they should repay me—with thanksgiving. The Russian national dish called *kasha* is prepared from buckwheat grits, in a farina boiler, in such a fashion that the greyish-red soft mass in the farina boiler, being baked, becomes covered on the top with a brown toasted hard crust. When the dish is set on the table this crust is taken off with the ladle as if it were a lid, then the porridge is served out from the boiler. This covering crust with its rough brown surface, which here and there, where it is baked hardest, becomes brown and shining, floated before my mind's eye, and I thought I could recognize the hardly comminuted fragments of this crust in the above mentioned, seeming disfigurement of the excrements. So I put the astounded question to them whether they were accustomed to eat up the crust of the *kasha* with the rest. But they gave me the most solemn assurance that they never did this. My physiological reason was again at fault. But I would not give up and bade them call the cook. From her I now expected the solution of our riddle. Out of the kitchen arises the history of the world; without it history would be lost in the sands! The ministering spirit thus adjured came in ensphered by a sensation of her dignity. I addressed her with the expression of that veneration with which the most honorable station of the cook has always inspired me and requested her to initiate me into the mysteries of the preparation of *kasha* as practiced in this house. My request was granted with as much of readiness as of volubility. I never heard a more interesting address. By it I acquired the knowledge of a peculiar aberration of taste of my patients, which they held in common with many of their countrymen, but which they had concealed from me because they had been so long used to it that they could not think that I would care to hear it. It was their practice to first gently toast the buckwheat grits and then to cook them. What a flash of light! When only slightly toasted a vigorous digestive apparatus might find no trouble in managing such grits; but it is unavoidable that in toasting the grits those parts which lie closer to the walls of the kettle, or where the grains are spread less thickly, some parts receive a more intense degree of heat and become almost charred. I, therefore, explained to my patients that vegetable charcoal can by no means be dissolved by the digestive fluids, and that, therefore, the comminuted par-

ticles of charcoal pass off unchanged with the rest of the excrements through the rectum, as seen in their case; but on the way there, owing to their unyielding and sharp edges and points, they cannot fail to exercise along the whole extent of the digestive mucous membrane a pernicious mechanical irritation, which of itself would be sufficient to continue their disorder, if it was not even the sole cause of its origin, and this would oppose any and every effort to cure their disease. They were very much edified, and declared their agreement with my views, and they promised to eliminate the charred *kasha* from their kitchen repertoire. This must also have been actually done: for after reiterating my first order, from which I did not expect much, the frequency of the evacuations with both my patients at once diminished, their appearance and consistence changed; in short, the whole process of their digestion soon returned to its normal mode. I was able to number this couple among my most grateful and devoted clients, and I never regretted the painful waste of time their cure caused me.

I expect that the report of this little episode will be considered by the areopagus of the "physiological school" as a splendid failure. If I have, nevertheless, ventured to write it down and to publish it I had in view chiefly the neophytes, all of whom, as I had much opportunity to learn, have much need of learning that life (with everyone, but especially with the practical physician) is a right peculiar thing and is unwilling to receive the stamp of the schools; yea, that after an apparent graduation from school the school *par excellence* just begins. If I had in the case reported been satisfied to diagnose an enterohelkosis as the anatomical cause of the abnormal secretion of the intestinal mucous membrane I would doubtlessly have obtained the applause of "the school," for the wife had even as a girl had a chlorotic diathesis and been afflicted with a high degree of spinal irritation, and at the period under consideration, after excessive loss of blood and defective nutrition, she had become anæmic (besides this, through the allopathic abuse of the most hostile medicines, which in part had been locally applied as hemostatica, and the rest through the stomach as *alterentia* and *coborantia*, all her organs and systems had been disturbed); consequently she was inclined to watery-mucous excesses of secretion. The constitution of her husband, on the other hand, inspired the fear of a tuberculous diathesis, to which he also eventually succumbed after another change in his position, which removed him to the

Siberia-Chinese border. A further investigation furthermore showed that he had been frequently sick with bronchial catarrh attended with hoarseness; this he had experienced at every northeaster even long before my acquaintance with him. An inspection of his thorax and auscultation of his cavity furthermore left no doubt of the presence of tubercular groups, probably cretaceous, in the tips of his lungs. If, therefore, in view of his chronic intestinal catarrh I had diagnosed tubercular intestinal ulcers, the learned circle would have unanimously proclaimed:

“ Bene, bene respondere
Dignus, dignus te sedere
In docto nostro corpore.”

But then I would also have been obliged to prognose a late and dubious result of a long-continued treatment; I should also have lost the gracious and elegant instruction from the cook. For he who has procured his wisdom at the dissecting table does not look for anything from the kitchen. Nevertheless, many mysteries are stored up there which the practical physician must needs know in order to assure the best results of his art. *Tolle causam!*—Translated for the Homœopathic Recorder from *Intern. Hom. Presse*.

Now, in cases of jaundice with white stools, a urine saturated with bile, with constipation or lienteric due to torpor of the hepatic cells, what is the curative dose of the hepatic drugs? Not the medium or high potencies—at least I have never found them of the slightest value. To be of real clinical value, the remedy should show its effects in a short time—a few days. One or more doses of the 10th or 30th, in such cases, with improvement only after ten or more days, cannot be called a drug-cure, for the *viz* medicatrix generally cures in ten days or less. If one desires to test the value of my law of dose in the above condition, let him prescribe the 2x trituration of *Euonymin* or *Podophyllum*, *Chelidonium* θ (Burnett, *Greater Diseases of the Liver*, reports splendid cures with ten drops of the tincture of *Chelidonium* and *Carduus*), *Mercurius dulc.* 2x or *Chionanthus* θ or 1x (five drops), and it will be found that if the drug is properly selected improvement will occur in a few hours or, at most, a day or two. There is not the slightest danger of medicinal aggravation from these doses if we suspend the medicine when improvement has obtained. The

normal physiological function of the liver once started into action will continue unaided by drugs.—*E. M. Hale, M. D., in Hahnemannian Monthly.*

MACKENZIE has found the Indian hemp, *Cannabis Ind.*, to give relief in cases of skin disease with itching not amenable to local treatment. Here the full effect must be produced promptly, and on this account he employs the tincture in doses of five or ten drops on sugar, repeated as often as is necessary.—*Polyclinic.*

BOOK NOTICES.

Obstetric Surgery. By Egbert H. Grandin, M. D., Obstetric Surgeon to the New York Maternity Hospital, Gynæcologist to the French Hospital, etc., and George W. Jarman, M. D., Obstetric Surgeon to the New York Maternity Hospital, Gynæcologist to the Cancer Hospital, etc.; with eighty-five (85) illustrations in the text and fifteen full-page photographic plates. Royal octavo, 220 pages. Extra cloth, \$2.50, net. Philadelphia: The F. A. Davis Co. 1894.

The points covered by this book are, obstetric asepsis and antisepsis, obstetric dystocia and its determination, artificial abortion and the induction of premature labor, the forceps, version, symphysiolomy, Cæsarean section, embryotomy, surgery of the puerperium, and ectopic gestation. The methods, we presume, are up to date, though to one not a surgeon it seems as though the authors laid too much stress on "antiseptic" chemicals, for the swing now appears to be towards simple cleanliness. But this they recognize when they say, after stating that these antiseptics are poisonous to the body, "overzealousness in matters of antisepsis may injure and kill." It does not look reasonable that these poisons even in degree small enough not to reach the border of injuring or killing can do any good. Gentlemen of the knife, when you learn the virtues of cleanliness and *Calendula* you will look back on your present antiseptics as things of the dark ages.

Prescription Card. By Stacy Jones, M. D. 16 pp. Price, 10 for 30 cents.

The profession, we think, has long felt the need of something of this kind. On the outside of the envelope of cards, the following is addressed to the physician:

Physicians by using one of these cards, when "going over" any case in hand, will find themselves supplied with a series of significant questions, the affirmative answers to which, *being underlined* as they proceed, will furnish *reliable pointers* to the right remedy.

The abbreviations used are the same as those found in the "Bee-Line Repertory" (the *complement* of this card).

The *cipher* used in the Card is formed by transposing the first two letters of the remedy. Thus Aco Bry Cal c, *in cipher* would be Cao Rby Acl c.

☞ After prescribing, hand a card to the patient, with request to comply with the directions therein contained.

Now, as the best mode of explication is by way of illustration, we will endeavor to illustrate the author's idea of the use and mode of using the prescription card.

Suppose a physician has a score of chronic cases on hand; several coming every day to the office to be looked over and prescribed for: and suppose the reception office is full of patients anxious to be waited on, and the doctor really feels as if he could not give those chronic cases suitable attention in the short time that can be allotted to them under the pressure of business. How he would hail with joy a record of each case, furnished to hand in the form of a chart, outlining the patient's symptoms.

How it would facilitate the selection of the right remedy! After prescribing he may retain this chart and study up the case in an hour of leisure. He would then feel that no injustice had been done to his patient and that a successful treatment be thereby the more insured. Now, it is precisely this use that is the *end* sought to be obtained by the prescription card.

It is a card in which the characterizing symptoms of disease are systematically arranged, with a few of the abbreviated names of the more prominently indicated remedies placed after each symptom—these abbreviations being given *in cipher*, therefore known to the physician and not to the patient.

This card, with name and residence of patient written on it, is to be handed to the patient at the time of the first prescribing and the patient requested to go carefully over the card and underline every symptom thereon found stated which the patient

then has or is subject to. Thus the card becomes a *chart and compass* for the steerage of the clinical craft safely into the harbor of Similia—the palladium of Homœopathy.

“Whatever is worth doing at all is worth doing well,” and if it should take the patient an hour to go carefully over the card and underline as directed, what of that? Does a client think an hour too much time to occupy in stating his case to his attorney, and is not the matter of health of paramount importance?

The time and deliberation thus given to the case by the patient may be *surety* of success in the management of the case.

Some of these cards, if bound separately, might be profitably used as *Quiz cards* by the students.

It may be that the “Jones’ cipher” will become a familiar word in the household of Homœopathy.

NOTES ON BOOKS.

The *Life and Letters of Hahnemann* will be on the market by the time this number of the RECORDER is out. It bids fair to arouse a great deal of interest in Hahnemann and Homœopathy in the world at large, it will dispell a great deal of ignorance concerning on those twin topics, and place the whole Homœopathic profession before the world in a clearer and better light.

The *Accoucheur’s Emergency Manual*, by Dr. W. A. Yingling, will probably be ready for delivery in February or early in March. It will make a pocketbook of about 300 pages of the size of the *Bee Line Repertory*, though a little narrower. It ought to be a welcome book to all who are called upon to attend women in labor, and used intelligently it will relieve the patient of much suffering at that critical time.

The *Pathogenetic Materia Medica*, by the Baltimore Club, will be in the binder’s hands early in January. It will make an elegant and original work on *Materia Medica*. Its general plan is pretty well known; it excludes all symptoms except those that are unquestionably pathogenetic, so that every symptom in it can be relied upon as being the result of the drug.

The *Chronic Diseases* of Hahnemann is slowly, but surely, making its way through the press. The first volume is now completed. It will, of course, in this edition be issued in one volume, and the reference to the “first volume” here refers to the first volume of the old Hempel edition. The monument to Hahnemann at the National Capitol, the appearance of the *Life*

of and Letters of Hahnemann, and the new translation of the *Chronic Diseases* will give the world a genuine Hahnemannian revival, and the world will be the better for it.

Before these lines meet the reader's eye, Dewey's latest work, *Essentials of Homœopathic Therapeutics*, will be out. Dewey seems to be a mascot in books, as everything he writes is wanted by book buyers. The reason, however, is not hard to find—his books give the reader just what he wants and nothing superfluous. This new book on therapeutics will be the handiest thing in the market for a quick consultation, which can easily be made by means of the excellent index. It will be bound in cloth and flexible morocco. Price, cloth, \$1.50; by mail, \$1.58. Flexible leather, \$1.75; by mail, \$1.83.

The new edition of Hering's *Condensed Materia Medica* sells for \$5.00 net.

The new edition of *Sharp's Tracts* is sold only in cloth binding, and at 75 cents net. It makes a book of 232 octavo pages printed on fine paper, and at the price is one of the cheapest medical works ever published, as well as the most elegant edition of Sharp ever issued.

Dr. Fisher, editor of the new work on Homœopathic surgery, writes that many parts are completed and all well advanced. When once put in the compositor's hands the book will be pushed through rapidly. Subscriptions to this book, the *Homœopathic Text-Book of Surgery*, may be sent to any of the Boericke & Tafel pharmacies. Leather, \$9.00; half morocco, \$10.00.

Dr. H. R. Arndt is engaged on his work on the Practice of Medicine, which will shortly be issued by the publishing house of Boericke & Tafel. The feature of this book will be that it is cut right down to business, that for which men seek books will be given and all else eliminated, thus enabling the publishers to issue a complete work on practice for a comparatively low figure—say four or five dollars.

THE BEE-LINE REPERTORY.—This is a pocket therapeutic guide for the homœopathic practitioner. It is arranged in such a way that those desiring to consult it may find just what to do for every abnormal sensation or appearance in any part of the body.—*Medical Record*.

Homœopathic Recorder.

PUBLISHED MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street,

Philadelphia, Pa.

SUBSCRIPTION, \$1.00 PER ANNUM.

Address communications, books for review, etc., for the editor, to E. P. Anshutz P. O. Box 921, Philadelphia, Pa.

THE tenth year and volume of THE RECORDER begins with this number. We send out some sample copies with subscription blanks of this number in hope of increasing our already respectable subscription list. A journal looks at subscribers as a miser does at money, wants to increase its list all the time. We think THE RECORDER, twelve numbers, not six as in the past, is worth one dollar a year, and if the reader is of the same opinion—why then it is plain sailing.

THE following letter or extract from a letter to the publishers of THE RECORDER is from one of the best known men in the Homœopathic profession. In compliance with his suggestion, THE RECORDER publishes this month a paper, on the heloderma, from the able pen of Dr. T. L. Bradford, that covers the whole ground and ought to command attention from all physicians. Still, though Dr. Bradford has given the gist of all that has been written on the subject, the question, Is the heloderma poisonous? remains unanswered. The published testimony from old school sources point both ways. In our opinion the virus sent to Messrs. Boericke & Tafel, by Dr. Belden, of Phoenix, Ariz., is unquestionably poisonous when taken into the stomach. To be sure this is but an opinion, but should anyone care to verify it he can easily do so by taking a few doses of the 6th—but do not take too many.

BOSTON, MASS., 31 Mass. Ave., Dec. 6, 1894.

MESSRS. BOERICKE & TAFEL.

Dear Sirs: Your firm has been so long identified with the publication of Homœopathic books and the preparation of those remedies that the profession has come to regard anything coming from your house and bearing your name as having the trade mark of absolute reliability and worthy of

full confidence. There is so much published in general literature, regarding new remedies which proves as utterly unreliable that we naturally look to firms of reputation for reliable reports.

I have been interested in THE RECORDER and in the various notes on heloderma, which have given me the impression that it was a powerful poison. I take the liberty of suggesting that when a firm of your reputation brings out a new remedy that both sides of the picture be painted and that, as in this case, when there are records of experimental research within easy reach they should be published as well; *i. e.*, the profession should be acquainted with all information possible regarding a new remedy when it is offered for sale. This may have been done and have escaped my notice. You will find a brief report of a few experiments in the Reference Hand-book of the Medical Sciences, Vol. viii., p. 449. William Wood & Co.

I have not written this for publication, but with the hope that all our information respecting new drugs from your firm will be as complete as possible.

DR. RICHARD HUGHES commenting, in Journal of British Homœopathic Society, on Dr. Lang's papers on the use of *Gaultheria* in inflammatory rheumatism and neuralgia, which was published in the RECORDER for May and July, 1894, intimates that the curative or palliative power of *Gaultheria* probably lies the *Salicylic acid* it contains. In this he is probably correct for, says the U. S. D.: "The oil of *Gaultheria* is very largely used on account of its pleasant flavor; it may, however, be employed as a substitute for *Salicylic acid* with excellent results. One hundred and sixty-nine grains of the oil contains one hundred and fifty-two grains of *Methyl salicylate*, and are therefore equivalent to one hundred and thirty-eight grains of *Salicylic acid*." *Gaultheria* in half ounce doses has proved fatal. Half an ounce produced in a boy (*Med. Exam.*) severe vomiting, purging, epigastric pain, hot skin, frequent pulse, slow and labored respiration, dullness of hearing, and, notwithstanding excessive gastric irritability, an uncontrollable desire for food. Boy recovered, but a half ounce has been known to produce fatal results. There is an artificial oil of *Gaultheria* now manufactured and probably more of it sold than of the pure article. It will not medically take the place of the genuine article. The artificial oil is one of the coal-tar tribe.

THE great banquet to the Lord Mayor-elect of London, Sir Joseph Renals, at which over one thousand persons of the greatest prominence assisted, took place at the Guildhall, London, on

November 9th. The loving cup list included the Earl of Rosebery, Lord Tweedmouth, Earl of Kimberly, Earl Spencer, Lord Russell of Killowen, Earl of Cork, Lord Reay and other equally distinguished persons. The cup was drunk in the famous G. H. Mumm & Co.'s Extra Dry, the success and popularity of which in the United States has been so phenomenal in late years. It can be inferred from the list of such distinguished guests that the speeches were listened to with particular interest by all present.

A COMMITTEE of pharmacists has figured out that in every \$2.18 invested in alcohol thirty-nine cents represents the actual cost and \$1.79 the taxes wrung from consumers by our paternal government. It would be hard to conceive a more unjust and at the same time idiotic bit of legislation than the laws in this country taxing alcohol, used in medicines and the arts, so heavily. They are and have been for years a terrible handicap to hundreds of enterprises. But the men who make the laws seemed to have a fixed idea that alcohol and whisky are synonymous and that they were doing the high moral act when they heap unjust taxes on legitimate business enterprises. The last Congress passed an act remitting this tax on alcohol used in the arts and sciences, but it seems to be inoperative. At the same time they increased the tax twenty cents per gallon, so the net effect is to burden business men and physicians still more.

THE editor of the *Medical News* writes: "Serum-therapy is the logical outgrowth of the modern doctrines concerning the infectious diseases. The fundamental ideas underlying it have for a long time been appreciated, and we have to thank the bacteriologists for rendering of practical therapeutic value our knowledge concerning immunity. The present methods of producing immunity are merely modifications of those used by Pasteur in dealing with chicken cholera and with anthrax, and by his followers with symptomatic anthrax and the pyocyanean infections. Pasteur's work was inspired, no doubt, by the success of Jenner's vaccination, the latter having been led to his experiments by observing the insusceptibility to smallpox of individuals who had survived the disease whether contracted from

ordinary exposure or by inoculation, after Lady Montague had brought back that method from China."

Jenner was not led to his experiments by observation, but by the belief of a lot of milk-maids that cow-pox prevents smallpox. Again Lady Mary Montagu (not Montague) picked up her fatal tad of inoculation not in China, but from the Turks at Adrianople, so says history.

THE publisher of "Dr." Carey's book and of the *Homœopathic News* has lost his temper over the RECORDER'S questioning his assertion that the first edition of 5000 copies of that book had been sold, and the second edition of 5000 would be sold by the first of January, and that thus, in his own words, "The record is broken." The RECORDER incidentally mentioned the fact that the combined sales of the eight Boericke & Tafel pharmacies up to date of writing had amounted to three copies. This angered the publisher of that pirated book, and he makes a characteristic reply in the December number of his journal—characteristic in dialect, taste and in dodging the question. The question is simply is the publisher of "Dr." Carey's book telling the truth when he advertises that nearly "10,000 copies have been sold." We have a letter that effectually settles the whole matter, and one that even the publisher of the *News* cannot very well dispute as it is from himself. An order was sent for a copy of the Carey book after he had announced the second edition: a duplicate of the first edition was received. Purchaser wrote that he wanted the *last* edition and received a type-written reply "dictated by F. A. L." from which we quote the following:

We only got but one edition of this book, and when we ran short, we simply had some more copies printed from the original electrotypes. There have been no changes whatever made in the additional copies so that they are identically the same as the first. As of course we did not know how the sale on this work would be, *we only got out a small number at first*, but reserved the electrotypes and had more printed when we ran out of the first lot.

The italics are ours. Really it seems hardly worth while to pay any further attention to a journal in which the truth is so lightly esteemed.

WE are sure that no reader of the RECORDER will complain of the space devoted to Dr. Villers' "Conceits and Sallies of a Grumbling Invalid" in this number, after reading the paper.

PERSONAL.

Working ten hours a day would cure the majority of cases of insomnia.

The Philadelphia Board of Health, it is reported, paid \$100 for twenty-five doses of antitoxine. Talk of your "higher priced" remedies!

"He fed fevers"—and perhaps made a mess of it.

Dr. H. D. Baldwin has removed from Montrose, Pa., to Elyria, Ohio.

Pasteurian Roux says: "There is truth in the Hahnemann method of curing like by like." There is hope for Roux.

Liebreich says that distilled water injected subcutaneously has a toxic effect.

The New Woman claims a place on the police force—says moral suasion must take the place of clubs. What a picnic the toughs will have!

Seventy per cent. of the men in a British regiment inoculated by Haffkine, to protect them from the cholera, died from that disease.

After whooping up "serum" in great shape the *Medical News* is now backing down in great haste.

Dr. George W. Dunn has removed from Tiffin, Ohio, to Fithian, Ill.

Close on the heels of the *Denver Journal of Homœopathy* comes the *St. Louis Journal of Homœopathy*, Vol. 1, No. 1. Dr. W. A. Edmonds, editor.

A New York crowd, strictly scientific you know, advertise in a medical journal "Tetanos-Antitoxic Serum," "Syphilis-Normal Serum" and "Erysipelas and Prodigiosus Toxines," "fifteen doses, \$2.50." Go it, Nineteenth Century!

Dr. P. G. Souder, Woodstown, N. J., contemplates removing to Philadelphia, and anyone wanting a good practice on fair terms should write to him.

Gentry's Record of the Homœopathic Materia Medica, Vol. 1, No. 1, Jan. 1, 1895, is the last comer. W. D. Gentry, M. D., Chicago, editor and publisher.

Lawson Tait jumped on the Germ Theory and now his brethern are jumping on him.

"Children are not taught they have *the hunger* or *the hungry*, for a lack of food cannot be an entity, but a condition caused by the lack of an entity. "Dr." Carey.

Dewey's *Essentials of Therapeutics* is completed and on the book-store counters.

Bradford's *Life and Letters of Hahnemann* will do more towards giving the world a clear idea of Homœopathy than any book ever published.

The six-year boy whose testis, appendix vermiformis and both legs were removed may perhaps ask: Was it worth it?

The RECORDER is glad to welcome the Homœopathic Medical College of Missouri to its advertising pages. See xxvi.

"Venesection is the most prompt and efficacious remedy at our command in all the acute inflammatory and congestive diseases." Dr. Laws, in *Therapeutic Gazette*, 1894.

It is in all seriousness asserted that the vermiform appendix is simply the last of the monkey-tail disappearing. Some, like Mark Twain, prefer to look upon Adam and Eve as ancestors. Tastes vary, however.

If Dr. Martin Deschere's paper, on "How to Prescribe for Infants," in last *Hahnemannian*, is a foretaste of his forthcoming book on the diseases of children it will be a rare good one.

THE HOMŒOPATHIC RECORDER.

VOL. X. PHILADELPHIA AND LANCASTER, FEB., 1895. No. 2.

TWELVE REMEDIES IN HEADACHE, WITH COMPARISONS.

By W. A. Dewey, M. D., 52 West 25th Street, New York.

I. *Belladonna*.

Belladonna is probably the first remedy thought of in headache; its symptoms, however, are so clear that by rights it should only be thought of when indicated. Of course *throbbing* is the great keynote, but violent shooting pains in the head, so severe as to drive the patient almost wild, are scarcely less characteristic. The patient cannot lie down, must sit up, nor can he bear light, noise or jarring; this last is most characteristic. The location of the ache is mostly in the frontal region or right side, flushed face, dilated pupils accompany. *Glonoine* is the only remedy having throbbing as characteristic as *Belladonna*. *Glonoine*, however, does not have such a lasting effect as *Belladonna*, it is more relieved by motion, the face is not so deeply flushed and there is aggravation from bending the head backwards, all of which will serve to distinguish the two remedies. *Cinchona* also has throbbing, but here it is due to anæmia. *Belladonna* has also a symptom common to both *Nux vomica* and *Bryonia*, namely, a feeling as if the head would burst. The headaches of *Belladonna* are usually worse in the afternoon.

II. *Nux vomica*.

Probably, taken all in all, *Nux vomica* is more often indicated in headache than any other remedy; this is, presumably, due in the main to the causes of headache calling for *Nux vomica*; thus, we have headache from the excessive use of alcohol, the morning "big head," tobacco, coffee, headache from digestive troubles, constipation, bilious derangement. These are all com-

mon causes of the *Nux vomica* headache. The ache is situated over one or the other eye, usually the left, or else in the occiput. It is apt to begin in the morning and last all day until night, and is accompanied with sour taste and perhaps nausea and violent retching. The dull, wooden, bursting feeling of the head following a debauch is most characteristic of *Nux vomica*. Headaches of high livers call for *Nux*.

There are some modalities to the *Nux vomica* headache that should be carefully noted, as this point will sometime aid greatly in making a selection, for instance: Stooping and coughing aggravate the headache; it is worse in the morning; moving the eyes and motion in general makes the head feel worse. What relieves the *Nux vomica* headache is not so clear; certain headaches calling for *Nux* will be better by wrapping the head up warm and by rest, but these conditions are rare ones calling for the drug. In general nothing relieves the *Nux vomica* headache, but it will often disappear after rising and being about for a few hours. This is a characteristic point in those headaches due to alcoholic excesses.

III. *Sanguinaria*.

Genuine sick headache calls for this drug, and the symptoms in brief are these: The pain begins in the morning and in the occiput; it comes up over the head and settles in the right eye. The pain increases in severity until there is vomiting of food and bile, then oftentimes the ache is relieved. Noise and light are unbearable, and sleep relieves. The pain will be so intense at times that the patient will frantically bore her head into the pillow for relief. *Belladonna* may be easily differentiated by the following points: It has hot head, more throbbing, flushed face and cold feet, and the pain coming up from the occiput is not so marked as under *Sanguinaria*. The *Sanguinaria* headache is relieved by lying down, *Belladonna* by being propped up in bed, and *Sanguinaria* is more useful in the gastric form of headache. There may be also profuse micturition with *Sanguinaria* relieving the headache, as we find under *Gelsemium*, *Ignatia*, and in a less degree under some other drugs.

IV. *Iris Versicolor*.

The *Iris* headache characteristically commences with a partial blindness or blurring of vision, being similar here to *Gelsemium*, and it is especially a remedy for gastric or bilious headaches.

It is a useful remedy for Sunday headaches, not, however, in

that form which sometimes occurs as a convenient excuse for non-church attendance, which is incurable, but that form which occurs in teachers, scholars, professors, etc., in whom a relief of the strain for the preceding six days produces the headache.

The pains are mostly located over the eyes in the supra-orbital ridges, usually on one side at a time. The pains are throbbing or sharp, and when at their acme, vomiting occurs which is apt to be bitter or sour. Especially characteristic is vomiting of matters so sour that the teeth are set on edge. The headache of *Iris* is aggravated by motion, cold air and coughing; moderate exercise in the open air relieves. In sick headache with continuous nausea it is one of our most useful remedies, and if indicated closely by the above symptoms it will not fail.

V. Gelsemium.

Gelsemium is another remedy which has a headache commencing with blindness, and especially is it a remedy for headaches due to eye strain. *Onosmodium* is another. The ache under *Gelsemium* commences in the occiput or nape of the neck. Comes up over the head and settles in an eye like *Sanguinaria*. There is a feeling as if a band were about the head, the patient is dull and apathetic, and there is great soreness in the eyes when moving them. Occipital headaches often find their remedy in *Gelsemium*. *Cocculus* is another remedy for these conditions.

Remember the copious urination which relieves the headache, and that the headaches are accompanied with visual troubles, such as double vision, squinting and dim sight, and *Gelsemium* will be easily recognized.

Gelsemium headaches are also relieved by sleep, and dizziness may accompany.

VI. Cocculus.

Another remedy for occipital headache is *Cocculus*, and it is a most excellent one; the symptoms are these: The ache occurs in the lower part of the occiput and extends to the nape, and it is nearly always associated with vertigo, the head feels numb, empty and stupefied, and with this vertigo there is constant nausea. Among the causes of headache calling for *Cocculus* may be mentioned riding in the cars or a carriage. A peculiar symptom of *Cocculus* is the sensation as if the occiput were opening and shutting like a door. *Cannabis Indica* has the sensation as if the vertex were opening and shutting. This is one of the most characteristic symptoms of *Cannabis*.

The headaches of *Cocculus* in general are worse from mental effort, and are better indoors and during rest.

VII. *Spigelia.*

This remedy holds about the same relation to the left side of the head that *Sanguinaria* does to the right side. The pains are neuralgic in character and settle over the left eye, and they are apt to follow the course of the sun, beginning in the morning, reaching the acme at noon and subsiding at sunset. There is often a sensation as if the head were open along the vertex. Noise and jarring of the bed as under *Belladonna* aggravates the pain, stooping and change of weather also make the pain worse. The pure neuralgic character of the pain, and its left side preference, should lead to the remedy.

VIII. *Cimicifuga.*

This is another remedy for the neuralgic form of headache, and it has some valuable symptoms. There is first a sensation as if the top of the head would fly off. There are sharp, lancinating pains in and over the eyes, shooting to the top of the head. The brain seems to move in waves, and there may be the symptom of a sharp pain extending from the occiput to the frontal region, as if a bolt was driven through the head. Headaches which are reflex or dependent on some uterine irritation are met by this remedy. When there is a feeling as if the patient would go crazy it is especially indicated. Many of the pains begin in the occiput and shoot down the spine; there is a tendency to bend the head forward, which relieves somewhat.

IX. *Silicea.*

Silicea is a very useful remedy in headache, but one not very often used. When a patient with headache has her head tied up with a towel or handkerchief it will probably indicate one of two remedies. *Argentum nitricum* if the head be tied up tightly, for here we have relief from pressure, and *Silicea* if the head is tied up simply to keep it warm. The headache of *Silicea* is nervous and caused by excessive mental exertion. It is supra-orbital and worse over the right eye, the pains coming up from the back of the head. Noise, motion and jarring aggravate. Warmth relieves. *Menyanthes* is similar in some respects to *Silicea*, but pressure rather than warmth relieves, and on going up stairs there is a sensation of a heavy weight on the vertex. The headache of *Silicea*, like *Ignatia* and *Gelsemium*, is relieved by copious urination.

An additional indication for *Silicea* is an extreme sensitiveness of the scalp.

X. *Argentum nitricum*.

A characteristic of this drug is that the head seems enormously large. There is much boring pain in the left frontal eminence. *Thuja* has a sensation as if a nail were driven into the frontal eminence. *Ignatia* and *Coffea* have these sharp, nail-like pains also. The pains under *Argentum nitricum* increase to such a degree that the patient seems as if she would lose her senses. Tying the head up tightly relieves the headache of this drug, it being the pressure that relieves.

XI. *Melilotus alba*.

A remedy often overlooked in the treatment of the congestive forms of headache is *Melilotus*. With this remedy there is a sensation of bursting; it seems as if the brain would burst through the forehead; the pains are intense and throbbing and almost drive the patient frantic. The eyes are bloodshot and the headache tends to recur every afternoon. Sometimes the headache culminates in nosebleed, which relieves. There is with this drug, which reminds of *Cimicifuga*, an undulating sensation in the brain.

XII. *Natrum mur*.

The headache of *Natrum mur*. is as if there were little hammers beating in the skull, worse from moving the head or eyeballs. It comes on in the morning, is worse about 10 A. M., and is preceded by partial blindness, as we found under *Iris* and *Gelsemium*. The little hammer sensation is also found under *Psorinum*. *Natrum mur*., as well as *Calcareo phos.*, is an excellent remedy for certain headaches in school girls during menses. A malarial basis for a headache will sometimes suggest this remedy.

ZINCUM.

A Contribution to the Study of the Homœopathic Materia Medica.

By the late Dr. Adolf Gerstel, Vienna.

Various methods for the individual study of Homœopathic medicines have been proposed. Hirschel especially, in his compendium of Homœopathy, has largely entered on the rules for

the study of pharmacodynamics, and has given practical examples of the synthetic as well as the analytic methods. Both of these, the *analytically* synthetic and *synthetically* analytic treatment of the list of symptoms of any one remedy of our *Materia Medica*, still leave too much room for the play of phantasy to satisfy the skeptic student of medicine; they would rather serve as a good manual for one already thoroughly familiar with the spirit of Homœopathy. For it is one matter for an older Homœopathic practitioner to deduce the value of a remedy from its symptoms and to gain a bird's-eye view of its effects by calling to aid his own experience and that of others; and it is quite another thing to present to a beginner, who besides this is a skeptic, the synthetically analytic method in such a way that he, through his individual study, may learn to recognize the value and the significance of the single symptoms, and then, from these, the total character and the mode of its action with some degree of self-confidence.

Hirschel, in his direction, limits himself solely to the elaboration of the list of symptoms in the *Materia Medica*. This would also be quite sufficient for beginners, if they should enter on this path under the guidance of a teacher, who would, at the same time, direct them to make their own provings under his direction as Hahnemann did with his pupils at Leipzig* or who would explain and confirm such an elaboration by practical examples. This ought to be done especially in combination with Homœopathic *clinics* or with reference to practical results.

But as we are so far without any such clinics in Germany, we consider the synthetically analytic way the best for those who would become physicians, but with this modification, that we should keep in view the *clinical method*, but *so long as we lack clinical institutions we should introduce instructive clinical cases, such as we find in our literature, as illustrations.*

Persons who wish to become Homœopathic physicians should be advised to first use, for their individual study only, such proved medicines which have approved themselves in many ways and, *undoubtedly*, perchance even in the old school.

Then should be studied the cases of diseases indubitably cured *by this medicine alone*, their character should be studied, if possible also according to their physiological diagnosis, but especially the corresponding, characteristic symptoms of the disease which

* See "*Reine Arzneimittellehre*," 2te Aufl. *Vorerinnerung Zum, 2ten Bde.*, p. 37.

were quickly and permanently removed, and thus cured by this medicine, should be considered.

The same internal character which lies at the foundation of these *natural* symptoms of disease and of this diagnosis must also essentially belong to that artificial disease, which *might* be caused by this medicine in the healthy body, and the symptoms of which, torn from their natural connection, we have before us in our Materia Medica; this will enable us to draw a conclusion as to the internal value and connection of these symptoms with some degree of certainty. That historical presentations of provings on the healthy body and of poisonings will facilitate this study is self-evident.

We shall now endeavor to present, in this clinical synthetic manner, the action of *Zincum*. We have chosen *Zincum* for several reasons:

1. *Zincum* has already been used as a remedy in the old school.

Trinks and Mueller (*Handbuch der homœop. Arzneimittellehre* 2 Bd., p. 1280) say: An exact description of this metal we first find in Paracelsus. Gaudius learned the use of flowers of zinc as a remedy from a certain Ludemann, who sold them as an Arcanum under the name of *Luna fixata* and who was said to have wrought wondrous cures by means of it.

We owe to Gaudius, therefore, its enrollment in the Materia Medica, for he convinced himself through many observations and experiments of the great efficacy of this metal. Its curative powers were in later times sometimes over-valued, sometimes under-valued, as has been the case more or less with all medicaments, with which indefinite experiments were made in their usual crudely empirical manner, for it is impossible to arrive at sure results in such a manner. But strange to say, it was used in many cases by itself alone and unmixed (though more frequently in mixtures) in diverse, mostly spasmodic diseases, and then *ex usu in morbis* definite healing powers were finally ascribed to it. We therefore find occasional cases of *pure experience* as to zinc in the old school, and therefore also an opportunity of presenting the character of our medicinal provings, founded on the supreme law of healing *simila similibus*, to our skeptical physicians, and of putting to use the symptoms of *Zincum*.

2. Also in *Rademacher's school* acetate of zinc is of great importance as a remedy in epidemics, and the reason of this also is found in the Homœopathic principles, and the key to its rational, successful use in the several diseases is only to be found in the Hahnemannian Materia Medica.

3. Into the Homœopathic Materia Medica *Zincum* was introduced as a pure metal by Dr. Karl Franz in Leipzig, a pupil of Hahnemann, and its provings were first published in the *Archiv*, Bd. 6, Heft 2, 5. 152.

Although the results of the experiments made by himself on himself and by other fellow-provers, whose names are given and among whom Hahnemann was one, are given in the well known symptomatic order, we nevertheless find in the prefatory remarks a short sketch, from which we can not only deduce in part the order of their appearance with some of the provers, but the size of the various doses, etc., is also given.

These points are very valuable, for they enable us not only to show the agreement of the symptoms among themselves, but also in the order of their appearance even with the various individuals, and they also permit us to conclude with greater certainty as to the character and value not only of these symptoms but also of those groups of symptoms communicated later on (in 1828 and 1829) in the *Reine Arzneimittellehre* of Hartlaub und Trinks (1st and 2d Vols.), in which these particulars are lacking.

We usually possess in most of the remedies only *one* cumulative list of symptoms. Of *Zincum* we find such a list collected by Hahnemann in the fifth volume of "*Chronische Krankheiten*" (2d ed., 1839), as he counts *Zincum* among the antipsorics. Then we find a very detailed account in Trinks and Mueller with a statement as to the provers, and a total summary in the detailed *Symptomen codex* of the year 1843. Later physicians commonly use one of these latter compendia, which are, however, frequently less complete. The original sources are seldom in their hands, because they are too much scattered. Now if it is difficult even in Hahnemann's *Materia Medica*, where every symptom forms a numbered paragraph, to form a whole or to gain a full view, this is the more tiresome in the other manuals owing to the manner in which all the symptoms succeed one another. All these facts seem to be mere trifles; but if all the circumstances are weighed, and if we consider the still greater external difficulties opposing the formation of a new growth of Homœopathic physicians, these seeming trifles acquire the more importance as it is owing to them that it becomes difficult to the young physicians to study from the original sources and to properly make use of our Homœopathic literature.

4. Besides the sources mentioned above, even after the second edition of the *Chronic Diseases* (1839) in the fourteenth volume of

the *Hygiea* (1841), there is an interesting verifying proving communicated by Buchner. This was caused by Dr. Werneck and made on several individuals. These provings are communicated in detail in their historical sequence, and they bring to view new symptoms and peculiarities of *Zincum*, to which in turn we are indebted for interesting Homœopathic cures, and which confirm former experiences.

Besides this, literature offers several instructive stories of poisonings, even with fatal results, and also the results of dissection.

According to Trinks and Mueller (l. c., p. 1281) the *physiological effects* of *Zincum* extend to almost all the systems and organs of the animal organism, but especially to the organs of the mind and spirit, the sensorium, the sensory nerves, the system of the spinal marrow with all its radiations, the intestinal canal, the liver, the kidneys, urinary troubles, the bladder and its sphincters, the sexual impulse of both sexes, the uterus, the heart, the venous vascular system, the respiratory nerves, the lungs, the sero-fibrous membranous tissues and the external cuticle.

We have, therefore, an abundant choice of morbid states, which may be picked out of the symptom-list of *Zincum*.

We shall, however, first consult *clinical experience* about it, and then compare with it the corresponding symptoms of *Zincum* enumerated in the *Materia Medica*. As to the experiences of the old school, we shall mention them, in so far as they are pure, in their appropriate places, and we begin with Rademacher.

Although I have never treated any case according to Rademacher's directions, I do not doubt the successes arrived at, which are confirmed by many perfectly credible colleagues.

Since the *acetate of zinc* is so largely used by this school in *cerebral affections*, we must acknowledge these cures and prove them from our standpoint, no matter by what combination Rademacher may have arrived at its practical use in this direction. I shall here consider what Dr. Kunkel relates concerning his experiences and observations about zinc in this connection (*Allg. h. Zeitg.*, 67 Bd., S. 45 flg.). Dr. Kunkel, as he tells us, belonged for nine years to Rademacher's school, and had abundant opportunity to learn the extraordinary medicinal virtues of zinc.

Rademacher ascribes to zinc, as Kunkel reports, a "peculiar

action" on that part of the brain which is to be viewed as the bearer of our spiritual activities (we are, I think, entitled to consider this as the function of the hemispheres); Kunkel from his experience agrees with this view. In the duchy of Schleswic there reigned in the years 1850-51 an epidemic of meningitis cerebro-spinalis, which Rademacher called "brain-fever." It appeared in two forms, the one which we shall consider bore the following traits: Quiet position, a seemingly natural sleep extending into a sopor, from which the patient can be roused only with trouble and often imperfectly; slow pulse, sometimes with large undulations (52-60), etc., a state such as is approximately found after lesions of the head and shots which glance against the cranium.

In most cases the state bore the *character of depression*. The only complaint uttered by the patients when asked about their condition was a pain or rather a **strangely pressive, pinching sensation in the root of the nose, with an occasional drawing proceeding down along the nose.**

This image of the disease occurred with every age and with changing forms. Sometimes it accompanied *dentition*, another time *erysipelas of the face and head*. In two cases the erysipelas regularly returned every week; they had arisen through fright during menstruation. Often there was only an indication of erysipelas, *e. g.*, *swelling on one or both sides of the nose*, while the general phenomena were very distinct. *Eruption of blisters on the upper lip*, affections of the serous membrane of the mouth, from the simple stomatis vesicularis to the most intense stomacæ. They came usually as a consequence of mental emotions, sorrow and grief, fright or sleeplessness after long night-watches. Also convulsions of the most violent kind, sometimes attended these states, *e. g.*, with erysipelas on the head of a child; or in consequence of vexation in a full-blooded girl, who had not before suffered from it; also the most violent toothache, especially during menstruation and pregnancy. There were no appearances of congestion; the complexion was natural, no increase in temperature, normally large, slowly reacting pupil, generally no photophobia, no sign of disintegration of blood, a clean tongue, normal urine, stool, etc. *All these forms of disease, says Kunkel, were removed by Zincum aceticum with a celerity and certainty that left nothing to be desired.*

Kunkel was therefore not in the position, to the great sorrow of our young physician of the physiological school, of proving his diagnosis by a dissection.

Concerning meningitis cerebro-spinalis, which continued long as an epidemy, much was written, and it was diagnostically illustrated by many of the first scientific men. We agree with Kunkel in supposing an affection of the cerebrum, and also that the nervous domain, ministering to nutrition, *i. e.*, the sympathicus is at the same time largely affected, and that thence there result, in consequence of the anomalies in the nerves, various material changes in the mixture of the juices and in the organs of secretion. Thence the appearance of erysipelas, forms of herpes, and affections of the serous membrane of the mouth are here only secondary consequences, but they point anyway to the fact that in those nerves which belong to the portions which are specially morbidly affected the innervation is also morbidly altered.

Niemeyer,* who describes a later epidemy, in which there was sufficient opportunity of also studying the disease in the corpses, adduces as the first, essential and constant symptom: **violent headache**. The *kind* of headache is not further indicated, for this would not be an anatomical symptom! Instead of this, we receive the following information (p. 30): "With respect to the origin (*sic!*) of the headache in brain diseases we are not clearly informed; we do not even know whether it is caused by a morbid irritation of the fibres of the trigeminus which ramify into the dura mater or of those nervous elements of the brain which form the central foci of sensation; but experience teaches that among the various encephalopathies, the disease and especially the inflammation of the *meninges* are the ones in which headache reaches its greatest intensity." Niemeyer further shows (p. 25) that the dissection constantly showed a meningitis cerebri with purulent exudation in the subarachnoidal spaces, and that we usually observe a great extension of the inflammatory process, *i. e.*, a simultaneous affection of the convex parts and of those lying at the base.

The constant essential would then consist in this, that it is the serous membranes which are diseased, and, *indeed, with a tendency to purulent exudation*.

We may grant, that the former epidemic observed in Sleswic was somewhat different in kind, for according to the description the epidemic in Baden showed more of an erethic character, during which the patient was in a constant unrest; the direction and

*The epidemic cerebro-spinal meningitis, as observed in the Grand Duchy of Baden. Berlin, 1861.

essence of the internal disease would have been, however, of a likely similar nature.* Kunkel has emphasized as an especially constant and characteristic symptom: "*The strange pressive and pinching sensation in the root of the nose, with occasional drawing proceeding down along the nose.*"

This kind of a frontal headache was evidently a neuralgia of the frontalis and a part of the naso-ciliaris as ramifications of the first branch of the trigeminus. But the quintus coheres through its ganglion Gasseri with the plexus of the sympathicus in the head and its original branches ramify again into the dura mater, as Niemeyer also states.

In the cases observed by Kunkel, therefore, the connection of this symptom *per se* with the simultaneous cerebral symptoms, and especially with the affections of the meninges, is anatomically shown.

That mental emotions, and especially *fright*, especially predispose to this disease, and therefore sensitive individuals are readily seized by it; that dentition with children predispose them to the disease, as also that an intermittent type was occasionally observed, shows a simultaneous affection of the cerebrum and the sympathicus.

Now let us see in what relation *Zincum* stands in its physiological effects† to all this, and what may be deduced in its favor therefrom.

We find printed with spaced letters, *i. e.*, as repeated and indubitable, and as having appeared in several provers, the following symptoms:

248. *Pressure on the root of the nose, as if it were being pressed into the head, almost unbearable chiefly at noon.*

89. *Pressive headache in the forehead, often, chiefly at noon.*

90. *Sharp pressure on a small portion of the forehead, in the evening.*

We, therefore, find here as an especial effect of *Zincum* a violent

* It corresponds to a second form also mentioned by Kunkel, which appeared simultaneously and was successfully treated by Rademacher with *Aq. nicotiana*, but which in Baden, especially in the army, caused many deaths.

† We quote these symptoms from the fifth volume of Hahnemann's *Chronische Krankheiten* (2d ed., 1839) and from the fourteenth volume of *Hygiea* (p. 493). The latter symptoms we mark in addition with W. (Werneck); while those marked H. refer to the symptoms enumerated by Hahnemann in the introduction to *Zincum*, as having been healed by *Zincum*.

headache, quite similar to the affection of the trigeminus described above, and that this pain from *Zincum* passes into the brain may be concluded from the following:

249. Pinching in the root of the nose with muddled feeling in the forehead.

83. Pressure in the forehead with a muddled feeling aggravated by pressure.

84. *Pressure in the sinciput with a muddled feeling, at noon and in the evening.*

91. *Pressure in the sinciput with a muddled feeling, extending to the eyes after dinner.*

The inclination to sleep and the soporous phenomena, which attended the cerebro-spinal meningitis described by Kunkel and healed by *Zincum*, we find *indicated* in the list by the following symptoms:

1297. Constant inclination to sleep, even in the morning he can hardly keep awake.

1298. She cannot keep from falling asleep at 2 P. M. and goes to sleep over her work; this passed off in the open air.

1299. Much sleep.

1300. Drowsiness, with tensive spasmodic confused feeling in the head without being able to go to sleep.

50. Absence of thought and slumberous state of mind.

51. Dizzy, chaotic and empty feeling in the head, as if he had not slept enough in the morning.

80-1. Stupefying headache, so that he had to lie down, or as from coal-gas, all the morning.

We do not, indeed, find in these symptoms any pronounced meningitis, which, perchance, was far enough developed to justify the above-mentioned dissection. *Nor are the pathologic-anatomical alterations the immediate objects of healing, but the pathologic process of formation on which they are based.*

For before the *final result* shown in the dissection is reached there is a manifold series of alterations (phases or stadia of the disease), each one of which may exist by itself; and is able to constitute and does constitute various forms of disease, which are essentially the same. The disease in these various stadia may also be brought to a standstill and to retrogression. *It is only this pathologic formative process which becomes known in the proving of the medicine* and from this its further consequences and stadia may become known.

In the symptoms of *Zincum* cited above such a pathological

formative process may be distinguished, and this the more as we also find there the other so-called secondary processes of the disease which accompanied the above-described brain-fever, according to Rademacher, and, indeed:

257. Swelling of the right side of the nose.

258. Swelling and pain, fullness of the left ala nasi.

261. A red, swollen, hard point on the left ala nasi, painful on pressure for three days.

These symptoms point to erysipelatous inflammation, the more if we consider the following symptoms:

260 and 1238. Freezing of the tip of the nose and the lobule of the ear in slight cold.

These may also serve to show of what importance even seeming non-essential symptoms may be.

Again in another direction.

285. Eruptive pimple on the upper lip.

286. Vesicles clear as water, or also purulent pustules on the upper lip.

287. Flat, red pimple on the middle of the upper lip, on the border, painful when touched.

These are light forms of herpes which Kunkel and Niemann observed.

So again the affections of the mucous membrane of the mouth.

338. Swelling of the gums.

339. Swelling of the gums with a sore pain.

340. Bleeding of the gums at the least touch.

341. *Severe bleeding of the gums.*

347. Formication on the inner side of the cheeks as from severe blisters.

348. Yellow little ulcer on the left inner surface of the cheek, especially painful in the morning.

353. *Blisters on the tongue.*

354. Blisters on the tongue, painful when eating.

358. Swelling of the ridge of the palate close behind the incisors with pain when touched for three days.

All these symptoms falling more or less in the domain of the trigeminus, and of the trophic nerves accompanying it, show a defective innervation and indeed an altered nutrition caused by a depression of the nervous activity. This change makes itself known on the one side through a passive congestion with corresponding serous and purulent exudations, and on the other hand through a diminished faculty of resistance to external influences,

whereby their cosmic influences are rendered the more possible (1238). These secondary attendants of the original nervous affection, which become visible to us in the external cutaneous parts in various forms, must be able to analogously proceed also in the meninges, where a similar and a simultaneous affection of these same nervous ramification exists; this is shown in the purulent exudation in the subarachnoidal tissues as shown by Niemeyer, and we shall also become acquainted with other corresponding forms of cerebral affections.

Kunkel also mentions the ready excitability of the mental sphere of his patients, etc. From the symptoms found under *Zincum* it may also be clearly seen that *Zincum* transforms the mental sphere in such a way that it is readily excited, is over-sensitive, and as if it were affected by terror; this appears from the following symptoms:

27. Irritable, easily frightened.

30. Every slight mental emotion produces an internal tremor.

31. After a slight mental emotion, long-continued trembling as from a chill.

914. Constant stinging on the edge of the shoulder blade, so violent that she was frightened; at the same time rising of heat to the head.

1330. Starting up from sleep at night with an involuntary jerk of the left leg.

1331. Starting up from sleep at night, unconsciously, during the menses.

1313. Very restless sleep with frightful dreams.

1314. *Frequent awaking on account of frightful dreams.*

H. Frightful dreams.

At the same time we must call attention to the fact that the curative symptoms confirmed in practice are not always so extraordinarily prominent among the symptoms observed in healthy individuals; Hartman* emphasizes this with respect to *Zincum*, which also he found useful in cramps originating in fright in agreement with the experience of *older* famous physicians.

From the old school we here cite: Ludwig (*Hufl. Jour.*, Bd. 35, S 114) praises zinc, among other things, also in spasms of infants, which are characterized by starting up and screaming at night and by a gnashing of the teeth, twisting the eyes, etc. According to Jahr (*Mat. m.* 4, *Aufl. Bd.* 2, S 725) it is especially

**Allgem. hom. Ztg.*, S Bd., 5 51.

useful in hysteric forms of spasms which recur frequently and cause the imagination *to be violently agitated at the least cause.*

Also the pulse symptoms we find only sparingly represented.

W. 148. Pulse spasmodic, small, without any increase in the beats.

W. 149. Tense, hasty, irregular pulse, with a hard and dull stroke.

By our clinic comparison of Rademacher's brain fever with the symptoms of *Zincum*, we find it proved for the present:

1. That Rademacher's cures in these cases rested on Homœopathic principles.

2. *Zincum* affects the serous membranes of the cerebrum, and in part also the cerebrum itself, the trigeminus which has its root and ramifies in this domain (and it seems this nerve by preference), as also the sympathicus, and, indeed, in such a way that the plexus accompanying the sensitive branches of the latter also produce corresponding disturbances of nutrition in the form of exudative processes in the various internal and external cutaneous spheres.

These exudative processes are not, however, a consequence of the primary dyscrasy of the blood, but they are secondary consequences of alienated innervation.

Having heard Rademacher, we now examine in the same way the following clinic cases of Homœopathic cures, and first such as fall in the same sphere. We begin, therefore, with an *inflammation of the brain* in a child of a year and a half during dentition, reported by Theuerkauf (*Allg. hom. Ztg.*, Bd. 57, S 180):

The disease had already reached the following dangerous degree:

a. Constant slumber with head bent backward, pressed deep down into the pillow.

b. The half open eyes with pupils dilated and twisted upward, alternately squinting, staring and rolling the eyeballs to and fro.

c. The face was peculiarly altered, sunken, pale, cold, or alternating with heat and redness of the cheeks.

d. Frequent piercing, loud screaming with starting up, constant groaning.

e. Jerking with the dry, cracked lips, or boring with the fingers in the nose even to bleeding.

f. Automatic movement with the head and the hands

g. Breathing irregular; short, dry, spasmodic cough.

- h.* Pulse small, frequent, very changeable.
- i.* He very eagerly took the water offered.
- k.* He rejected the breast the day before.
- l.* The abdomen costive for several days, hot, dry, sunken.
- m.* The urine passes involuntarily.
- n.* The child lies apathetic, becomes restless on moving, when the cough increases, and there is retching.

In this state, after previous remedies (including *Belladonna*) remained without effect, *Zincum* 6 was given in a solution of water every three hours, on which improvement set in on the second day and after a short relapse the child gradually recovered perfectly with a continued use of *Zincum*.

Here we have, therefore, an undoubted cure of a severe affection of the brain.

We shall not expect in this case the fully expressed image of the disease in the symptoms of *Zincum*; we have a child before us, whose subjective sensations we cannot find out, and must draw our conclusions from the objective appearances; we must, therefore, understand S. (*i*) "the child eagerly takes water," as "thirst." S. (*k*) "refusing the breast" as "lack of appetite;" so "boring in the nose" we must explain as "a sign of an internal pain in the nose;" for the same reason "the child jerks at its cracked lips;" so also (*f*) the "automatic movements" must be explained in the same sense.

With this explanation the above disease image is represented by the following symptoms of *Zincum*; those mentioned before and also to be applied here, we shall only indicate by their numbers:

The group of symptoms: (*a, d, f, n*) has as its correspondent 27, 50, 1297,* 1298, 1299, 1313, 1314, 1331, among which we

*REMARK. The symptom 1297 (Constant inclination to sleep; cannot even keep awake in the morning) corresponds to S. 297, and was observed by Rückert; the editor Franz makes the following remark about it: "A soporous fever with all the marks about it of a *hydrops cerebri* after suppressed measles was healed by flowers of zinc, he refers to *Hufl. Journ.*, Bd. 5, St. 6 S. 15 (1811)." Franz evidently wished to indicate that this symptom (1297) is of such a nature pathogenetically that if aggravated it might force hydrocephalus. I was, therefore, eager to look at the passages cited in the original, and what did I find? I read there verbatim: "Very curious was a case where the eruption was suppressed by a cold and the child fell into a fever with soporous condition and all the signs of a *hydrocephalus cerebri*; this continued for fourteen days, and then only after applying leeches and vesicatories on the head and a copious use of *Calo-*

call especial attention to the *Zincum* tendency to be frightened and startled; furthermore

1316. Deep, exhausting sleep, with many dreams.

1332. Loud screaming in sleep at night, while unconscious of it.

H. Talking and screaming in sleep.

54. Heaviness of the head as if it would fall off.

57. Obtuseness, sensitive heaviness of the occiput.

63. Dizzy drawing deep in the right side of the occiput, when sitting.

Remark: In the Archiv. this symptom is more sharply defined: "While sitting there is a dizzy drawing in the right side of the occiput, *deep in the brain*."

Partial unconsciousness is indicated in part by:

59. Stupor-like vertigo, in brief attacks, while things turn black before the eyes and there is general weakness, especially in the afternoon and evening for several days.

66. Vertigo in the morning on awaking, as if the head moved up and down; so also his fantastic images moved up and down; all while half conscious.

217. The eyes stand still, with absent-mindedness.

These two symptoms (59, 66) when we suppose them in a little child, may manifest themselves by "automatic motions of the head, and rolling or twisting of the eyes," while S. 54, 57 and 63 might be expressed by "the head falling deep into the pillow." The latter is also supported by:

105. Pain pressing asunder in the right side of the occiput.

106. Painful forcing asunder in the left side of the occiput, close to the cervical vertebræ.

925. Weariness in the nape, in the evening when writing.

926. Stiffness and pain of the muscles of the nape and the upper part of the back for several mornings, not during the day.

927. Cramplike stiffness of the left side of the neck.

928. Tension and drawing in the right side of the neck, both in rest and when moving.

The eye-symptoms of group (b) are affections of the three

mel, Zincum, Digitalis, Moschus and *Opium* it ended luckily with a breaking out of measly spots (*morbilli secundarii*).

How this case could have been adduced as a cure by *Zincum* and made use of for the diagnostic explanation of a symptom of *Zincum* in the *Materia Medica Pura* remains a riddle. It is only to be supposed that Dr. Franz took this citation out of some *Materia Medica* in good faith, without ever having known the original.

nerves of motion of the muscles of the eyes, the oculomotorius, trochlearis and abducens, which have their origin in the cerebrum, and also affections of the branches of nutrition belonging to the ganglia in the orbits. That these are also affected by *Zincum* may be seen especially from Nos. 91, 86, 217, and also from

211. Quivering in left eyeball.

213. Great restlessness and unbearable pain in the left eye, often with great weakness in the head.

215. Morbid sensation of weariness in the eyes.

Especially 213 and 217 show the connection and origin of these signs as being secondary and coming from the brain, while from 215 taken by itself, this connection cannot with certainty be deduced. The prover Franz (l. c. Sympt. 56) indicates the succession of the symptoms in his provings, and we find that the occiput was seized first and these are the symptoms 62, 63, 64 and 69, and together with these symptoms appeared also 215, which is rather an anomaly in nutrition and belongs to the sympathicus.

The affections in the occiput consisted of :

62. Vertigo in the whole brain, especially in the occiput, as if the person should fall over, without any reference to the eyes, when standing (aft. 1, 2, 4 hs.).

63. (Cited already.)

64. *Vertigo in the occiput when walking, as if he should fall to the left side (at once).*

69. Vertigo in the occiput, in the evening when sitting, while smoking tobacco as usually, with tenesmus.

To group (c) belong the symptoms:

W. 131. Vital turgidity much diminished.

W. 1. Head more or less muddled, with transient heat.

157. Sensation of heat in the head with heat in the face.

158. Heat in the head in the evening with redness and increased warmth of the cheeks.

W. 11. Pale face.

263. *Paleness of the face.*

264. Face earthy-sallow, as after a long illness.

221. Yellow, blue and green wheels before the eyes, with wretched looks and drowsiness.

All these signs show a deep depression of nutrition, which primarily is owing to an affection of the sympathicus.

GROUP E, I, K.

W. 15. Parched lips.

291. Dry, cracked lips.

256. Sensation of soreness in the extreme upper parts of the nostrils.

259. Itching in the right nostril.

Furthermore the symptoms 248 and 249 apply here, concerning which Kunkel correctly remarks (l. c. S. 52): "Thence it is, probably that in the *hydrocephalus infantum* we find so frequently the phenomenon, that the little patients endeavor every minute to, as it were, push away their noses with their little hands; this symptom, according to Kunkel's observation, is much more frequent than the often-mentioned touching of the head."

390. Burning thirst.

391. Much thirst for water.

W. 21, 22. Much thirst; increased thirst; desire for cold water, which is very refreshing.

398. Less appetite.

399. No appetite and hardly any taste.

W. 23. Increased thirst with lack of appetite.

W. 24. Total lack of appetite.

GROUP I., M.

604. Intermittent stool.

605. Constipation during the whole of the beginning of the proving.

679. Involuntary passage of urine while blowing the nose (after a laborious stool).

H. Involuntary micturition while walking.

H. Incontinence of urine while coughing, sneezing and walking.

These symptoms connected with urination point to a paralysis or relaxation of the sphincter vesicæ and 679 is particularly characteristic, as it shows at the same time an indolence of the rectum, characteristic of the constipation of *Zincum*.

GROUP G, H.

788. Frequent dry tussiculation without pain.

789. Tickling cough, very fatiguing.

791. Suffocative cough, the tickling irritation takes his breath.

Zincum frequently shows oppression of the chest, but this is not connected with head symptoms, and the breast symptoms are very superficial.

We, therefore, have found quite naturally the *essential* characteristics *pointing* to a hydrocephalus infantum in the action of *Zincum*, and have thence recognized the connection of the scattered symptoms and their deeper significance.

From the cases of Rademacher first considered we found out that the original affection starts from the meninges, and that the brain enclosed by them readily partakes of such disease. But as we do not consider the exudation in pleurisy, which also we cannot conceive of without exudation, as a sign of cure, but look at the inflammation of the pleura, which is the cause, and which is recognized by the shooting pains, so also in the hydrocephalus. In children, indeed, we can only draw conclusions from secondary signs manifest to the senses; with these we, therefore, chiefly endeavor to assure ourselves that the medicinal symptoms corresponding to these secondary symptoms of the disease are in connection with cerebral symptoms and especially with diseases of the serous-fibrous integuments.

But we have yet to mention a second circumstance. *Zincum* has always been famed as a remedy, especially adopted to the *infantile age*. The above account in part confirms this. The child was in the dentition-period, and Theuerkauf also explains the disease as a consequence of dental irritation; in the epidemic cerebro-spinal meningitis dentition was also adduced as a predisposing cause. The teeth and the gums receive their nerves chiefly from the second and third branches of the trigeminus, and various plexuses are also formed there. The posterior roots of the trigeminus can be followed even into the medulla oblongata, and it also provides, as before observed, the meninges with their nerves. We can therefore readily conceive that during the breaking through of the teeth there is a so called dental irritation attended with a cerebral irritation.

But there is also another factor to be considered. When the teeth come through there is a simultaneous development of the total infantile organism; changes not only take place in the dental system but the whole head and especially the brain is developing. Now since we have already found out that the pathognomic action of *Zincum* extends to these two spheres, it is readily to be explained that children *have a greater receptivity to the irritation of Zincum* in their infantile age and especially during dentition, in which these parts are being more rapidly developed.

The specific action of *Zincum* on the brain is also indicated

from the pathologico-anatomical stand point by the following report of a case of poisoning,* though the report of the dissection is not up to the present requirements of that school. A child, six years old, suffering from hereditary scab, was washed by a quack with a solution of *white vitriol* in wine. At once there was the most severe burning on the head, after several hours there was a *violent headache with thirst*; this was followed by vomiting and stools, and after five hours the child died suddenly in convulsions. In the post mortem the vessels and sinuses of the brain were found turgid with blood; at the same time much blood was found extravasated in the cerebrum and the cerebellum.

THE STORY OF THE PROVERS WHO ASSISTED HAHNEMANN.

By Thomas Lindsley Bradford, M. D.

So much has been said about the reliability of the original provers of the *Materia Medica* of Hahnemann that it has occurred to the compiler to collect as many facts about each one of them as possible. This has been done; nearly all the Homœopathic literature in German, French and English has been examined, but very little can be found concerning some of them. By even the present slight knowledge of their personality one may judge somewhat of their work. The personal characteristics of Hahnemann's provers are important in judging of the value of the provings.

The *Materia Medica Pura* of Hahnemann was first published by Arnold in Dresden in six parts, from 1811 to 1821. In this edition the symptoms observed by Hahnemann himself appear first and separately numbered. Under the heading: "Observations by Others," follow the symptoms observed by his pupils under his own directions and also those culled from the writings of others; these are arranged and numbered specially. Hering says of this:† "In his *Materia Medica Pura*, 1811 to 1821, he separated his own observations always from the symptoms by others. After Stapf had adopted the new doctrine and had brought over his friend, W. Gross, and A. Haynel became Hahnemann's assistant, he got a class of students, and nearly

*Translated from *Hom. Presse* for HOM. RECORDER.

†*N. A. Jl. Hom.*, Vol. xxii., p. 101.

all, willing provers. Hahnemann examined every report before the class carefully and with closest scrutiny. Every one had solemnly to affirm before the class that what they had written was the truth and nothing but the truth.

“Still Hahnemann kept his own symptoms separately, and what he observed himself was of greater importance to him. He did it to the torment of all who joined the new school and were obliged to read all the volumes as far as published, to find the similar drug, and he adhered to this plan and doubled the difficulty, not being credulous or incredulous, but he was more certain of his own symptoms. We all had to read both—first his, then that of others—in looking for a corresponding medicine.

“Even in the second edition he still kept up this, for all of us, distressing separation.”

The second edition of the *Materia Medica* was issued also in six parts by Arnold from 1822 to 1827, the same arrangement being observed.

In the *Chronic Diseases*, 1828 to 1830, he, however, included his own symptoms, those of his provers and those obtained from other sources (Old School books), in one arrangement, numbering them continuously.

Of the third edition of the *Materia Medica* only Vols. I., II. were ever published, in 1830 and 1833. In these the observations are all arranged together and numbered continuously.

The medicines are not arranged alphabetically.

In the preface of Vol. I. of Dr. R. E. Dudgeon's translation of the *Materia Medica Pura* may be found the following list of the men who proved one or more drugs for the *Materia Medica Pura* of Hahnemann. The names of the medicines proven by each are also given.

LIST OF HAHNEMANN'S FELLOW PROVERS.

- ADAM, DR.—Carbo an., Carbo veg.
AHNER, G. A.—Acon., Cap., Cina., Menyan.
ANTON, C. CHR.—China.
BAEHR, AUG.—Ars., Bell., China, Coccul.
BECHER, HULDA—Chelidon., China, Digit., Ledum, Phos. ac., Spig., Squilla, Veratrum.
CASPARI, DR.—Carbo veg.
CLAUSS, W.—China.
CUBITZ, C. A.—Dulcamara, Opium, Staph.
FLAMING, JOHANN GOTTFRIED—Coccul., Hyos., Nux vom.

FRANZ, CARL—Angustura, Argentum, Arnica, Asarum, Aurum Calc. acetica, Camphor, Cannabis, China, Conium, Cyclamen, Digit., Hyos., Ledum, Magnet north, Magnet south pole, Manganum, Menyanthes, Oleander, Phos. acid, Rhus t., Ruta, Sambuc., Spig., Stannum, Staph., Stram., Tarax., Thuja, Verat.

GERSDORFF, FRANZ VON—Amber, Carbo veg.

GROSS, WILLIAM—Acon., Angus., Argent., Arnic., Arsen., Aurum, Bell., Can., Chel., China, Cocc., Dulc., Digit., Ferrum, Ignat., Mang., Mercu., Moschus, Olean., Phos. ac., Rheum, Ruta, Sambuc., Opii., Stan., Staph., Thuja, Verb.

GUNTHER—North magnet.

GUTMANN, SALAMO—Coloc., Dros., Men., Merc., Mur. ac., Olean., Opium, Phos. ac., Spig., Spong., Staph., Stram., Tarax.

HAHNEMANN, FREIDRICH—Acon., Arn., Ars., Au., Bell., Bry., Cannab., Cicuta, Coloc., Dros., Euphras., Fer., Hepar, Hyos., Ign., Merc., Moschus, Nux v., Phos. ac., Puls., Rhus, Spong., Stram., Sulph., Thuja, Veratrum.

HARNISCH, ERNST—Angustura, China, North magnet, South magnet.

HARTMANN, FRANZ—Bell., Bismuth, Carbo an., Chel., China, Guaic., Hell., North magnet, Menyanthes, Merc., Mur. ac., Oleander, Phos. ac., Ruta, Samb., Sarsap., Spig., Spong., Squill., Stannum, Staph., Thuja, Verbascum.

HARTUNG, J. C.—Bell., Caps., China, Cyclamen.

HAYNEL, ADOLPH FRANZ—Argent., Cocc., Mangan., Menyanth., Mur. ac., Spong., Stannum, Staph., Thuja.

HEMPEL, GUST.—Aurum, Cannabis, North magnet, Thuja.

HEMPEL, H.—Bell.

HERRMANN, CHRISTIAN THEODORE—Argent., Aurum, Bell., Bry., Bis., Camph., Chelid., China, Cyclam., Ledum, Phos. ac., Ruta, Sarsap., Spig., Stannum, Staph.

HORNBERG, CHR. G.—Acon., Arnic., Arsen., Asarum, Bell., Bry., China, Cicuta, Coccul., Colocynth., Digit., Helleb., Manganum, Menyanthes, Merc., Puls., Rheum, Rhus, Ruta, Spig., Spong., Squilla, Staphisagria.

HUGO—Cannabis s.

KUMMER, ERNST—Arnic., Bell., Hell., South magnet, Spigel., Staphis., Taraxacum.

LANGHAMMER, CHR. FR.—Angustura, Argentum, Arnic.,

Arsen., Aurum, Bell., Bismuth, Calc. acet., Chelid., China, Cicuta, Cina., Coccul., Coloc., Conium., Cyclamen, Digit., Drosera, Euphras., Guaiacum., Helleb., Hyos., Ipec., Ledum, North magnet, Manganum, Menyanthes, Merc., Muriat. ac., Oleander, Phos. ac., Ruta, Sambuc., Spig., Spongia, Stannum, Staphis., Taraxacum, Thuja, Verbascum.

LEHMANN, CHR. F. G.—China, Rhus t.

LEHMANN, J. G.—Bell., China, Digit., Ipec., Spong.

MEYER, F. R.—Angust., Argent., Arsenic, Chelid., China, Digit, Phos. ac., Spig.

MICHLER, C.—Angustura, Bryonia, China, North magnet., Pulsat., Rhus t.

MOECKEL, A. F.—Bellad., Menyanthes.

MOSSDORF, THEODORE—Angust., Capsic., Helleb., Squilla, Verbascum.

MULLER—Dulcamara.

NENNING, CAJ.—Dulcamara.

ROSANEWSKY—Ferrum, Taraxacum.

RUCKERT, E. FERD.—Acon., Bry., Digit., Dulc., Hell., Pulsat., Rheum, Rhus t.

RUCKERT, LEOP. E.—Asarum., Bell., Cina, Colocynth., Manganum.

RUMMEL, F.—Merc.

SCHOENIKE—Opium.

SCHRODER—Rhus t.

STAPF, ERNST—Acon., Arnic., Arsen., Asarum, Bell., Bry., Camphor, Cannabis, Cham., China, Cina, Coloc., Digit., Dulc., Hell., Hepar, Hyos., Ipec., South magnet., Manganum, Merc., Moschus, Muriat. ac., Opium, Phosph. ac., Pulsatilla, Rhus, Ruta, Spigel., Spongia, Squilla, Staphis.

TEUTHORN, J. CHR. DAV.—Chelid., China, Digit., Guaiacum, Ledum, Manganum, Menyanthes, Phosphor. ac., Rheum, Sarsaparilla, Squilla, Staphis., Thuja, Veratrum.

TRINKS AND HARTLAUB—Cannabis, Coccul., Dulcam., Ignatia, Rhus t.

URBAN, F. C.—Manganum.

WAGNER, GUST.—China, Dulcam., Spong., Thuja.

WAHLE, WILHELM—Acon., Cannabis, Coccul., Dulcam., Manganum, Nux vom.

WALTHER, FR.—Chelid., China, Ledum, Spigel., Squilla, Sulp.

WENZEL, JUL.—Manganum.

WISLICENSUS, W. E.—August., Argentum, Arnica, Aurum, Bell., Calc. acet., Camphor, Capsicum, China, Conium, Dros., Euphras., Hell., Hyoscyam., Menyanthes, Nux vom., Phos. ac., Ruta, Sambuc., Spigel., Spong., Squilla, Stannum, Thuja.

Dr. Hughes, in his "Sources of the Homœopathic Materia Medica" (London, Turner, 1877), gives the names of the provers, but omits Adam, Caspari, Flaming, Von Gersdorf, Hartlaub, H. Hempel, Hugo, Muller, Nenning, Rummel, Schoenike, Schroder, Trinks.

Hering says of these provers: "Next to the practicing physicians outside of Leipzig, E. Stapf and G. W. Gross, they (a few students who had formed a class in Leipzig to attend the lectures of Hahnemann) were the first who assisted Hahnemann in his explorations."*

Of Adam, who proved the animal and vegetable charcoal, nothing is known except that he was a Russian physician.

Hahnemann in two places in the *Chronische Krankheiten* mentions Adams as Adams, although in the English edition of the *Materia Medica Pura* the name is given as Adam.

Of Ahner, Anton and Baehr no data has been obtained.

Of Hulda Becher Hering says:† "Went to parts unknown," and then gives a list of his provings.

CARL CASPARI.

He was the son of a village minister at Zschorlau, near Delitzsch.‡ He studied and graduated at Leipzig. He was the grandson of the Prof. D. Schott. In 1822 he delivered a course of lectures on practical surgery, to the students at Leipsic, being at the same time attracted to the teachings of Hahnemann. Won by these unchangeable principles, he relinquished a brilliant future in a celebrated school for a place, perhaps obscure, with those who were subject to ridicule.

After serious studies he published a work entitled "My Observations Upon Homœopathy." He sought to reconcile the

* *Hahn. Monthly*, Vol. vii., p. 173.

† *Hahn. Monthly*, Vol. vii., p. 176.

Rapou, *Histoire de la Doctrine Medicale Homœopathique*, Vol. ii., p. 130-36. Kleinert's *Geschichte der Homœopathie*, p. 130.

two doctrines. Having friends in both camps he attempted an impossible amalgamation between Homœopathy and Allopathy.

Surgery had been his favorite study, and his first researches into Homœopathy were to determine the reciprocal influence of this branch on the two parties in the art of healing. He published many memoirs upon the subject. He believed that surgery and medicine need no longer be divided, but that with the aid of Homœopathy surgical diseases could be more successfully treated. Rather than disturb his researches he refused the chair of Homœopathy at the University of Cracow, offered at the suggestion of the Consul General at Leipsic by the Russian Secretary of State, M. de Freigang. Caspari especially excelled in didactic writings. He was actively engaged in his literary work at Leipsic when, sometime in the beginning of the year 1828, he was attacked with the smallpox, during an epidemic, and, being delirious, during the absence of his nurse, he got hold of a loaded gun with which he shot himself through the head. This painful accident happened on February 15, 1828.*

Caspari during the latter part of his life relinquished his notions regarding the union of the Allopathic and Homœopathic schools and became a zealous Homœopath.

It is said that Hahnemann did not like him, and this amalgamation plan is cited to account for this dislike. He was at the time of his death about thirty years of age.

Rapou says of Caspari, that he had made electricity in connection with Homœopathic therapeutics a special study. He had designed to write a monograph upon the subject, but the multiplicity of his other literary labors prevented it, and he accorded this a vast power of healing that clinical experience did not uphold him in.†

Hartmann thus speaks of him:‡ "At this time (1826) two men were living whose premature death was a sad loss to Homœopathy, for both were gifted men, and their works testify that their powers of mind were such as the Creator intrusts to but few. I refer to Dr. Caspari and Dr. Hartlaub, Sr., concerning whom I can give no information except as regards their scientific character, for of their lives I knew but little. Dr. Caspari was the son of a very estimable country pastor, residing at Zschorlau near Delitsch, whose strictly religious character seems to have been

* *Hom. World*, Vol. xxiv., p. 497.

† Rapou, Vol. ii, pp. 208, 210.

‡ *All. hom. Zeit.*, Vol. xxxix., p. 289. *N. W. J. Hom.*, Vol. iv., p. 233.

inherited by his son, in whom it might have produced an over-excitement (though in this I may be mistaken), which rendered him not quite accessible by everyone; I must, at least, infer from his general deportment that he was possessed of an insufferable haughtiness, which seemed to be based upon a fancy that he was exalted above all others.

“I cheerfully acknowledge, however, that I might have seen more than really existed, and perhaps this false observation is to be attributed to my snail-house nature, the cause of which might have been found in my limited pecuniary means; but thus far my judgement was perfectly correct, that Caspari labored under an intellectual over-excitement, which manifested itself in eccentricities during his last sickness, and was, in fact, the occasion of his death. Caspari accomplished much at a time when Homœopathy needed perfecting in every direction; it matters not whether he was incited to undertake his many labors spontaneously, or upon the suggestion of others, it is enough that he always comprehended his subject justly and enriched the science by its development. Thus he felt deeply, with all Homœopaths then living, that the rapid spread of the new system among the people must depend upon the degree in which it enlisted the sympathy of the public. Fully possessed of this conviction he undertook the preparation of his work upon Homœopathic Domestic Medicine, in which he accomplished his purpose in a manner which leaves nothing more to be desired.

“Thus Caspari, by the preparation of his Dispensatory; occasioned the publication of the present Homœopathic Pharmacopœia. And who knows whether by his proving of *Carbo vegetabilis* he might not have excited Hahnemann to undertake the proving of both the charcoals. I am not quite positive as regards this last fact, but remember that Hahnemann was at one time quite angry at Caspari and cannot tell whether it was because he was always displeased with those who anticipated him. From all that has been said it is evident enough that Caspari was a man of intellect and great attainments, and would have rendered Homœopathy many an essential service.”

He published the following works:

De jejunii in morbis sanandis usu. Lipsiæ. Rueckmann. 1822.

Anatomico-chirurgical Treatise on Dislocations, together with a postscript on complicated Dislocations. Leipsic. Kohler. 1821.

System of Surgical Dressings systematically arranged and reduced to a Science. Leipsic. Zirges. 1824. (First edition. 1822.)

- Medical House Friend, or Self-help in the Treatment of Diseases. Leipsic. Leich. 1823.
- Injuries to the Head and their Treatment, from the oldest times to the present, with new ideas and a Treatise on Inflammation. Leipsic. Lehnhold. 1823.
- Stone in the Kidney, Bladder and Gallbladder; its origin and chemical, diagnostic and therapeutic consideration. Leipsic. Fleischer. 1823.
- Vade Mecum of Spring-Curing, or a treatise on the Judicious Use of Herb and Bath-cures, etc. Leipsic. Lehnhold. 1823.
- My Experience in Homœopathy; an unprejudiced estimation of Hahnemann's System. Leipsic. Lehnhold. 1823.
- Handbook of Dietetics for all Ranks. Arranged according to the Homœopathic principles. Leipsic. Lehnhold. 1825.
- Homœopathic Pathology; also under the title: Library for Homœopathic Medicine and Materia Medica. Leipsic. Focke. 1827-28. Second edition. 1834.
- Vol. I. Homœopathic Pathology. Vol. II. General Homœopathic Diagnosis. Vol. III. General Homœopathic Therapeutics.
- Dispensatorium Homœopathicum. Edited by Hartmann. Leipsic. Baumgartner. 1829. (Latin.)
- Homœopathic Dispensatory for Physicians and Druggists. Edited by Hartmann. Leipsic. Baumgartner. 1825. Fifth edition. 1834. Seventh edition. 1852. Also published under title: Homœopathic Pharmacopœia.
- Homœopathic Domestic and Traveller's Physician. Edited by Fr. Hartmann. Leipsic. Baumgartner. 1826. Fifth edition. 1835. Tenth edition, 1851. (Has been translated into English.)
- Catechism of Homœopathic Dietetics for the Sick. Leipsic. Baumgartner. 1825. Second edition, edited by Dr. Gross. Leipsic. 1831. Published also under the title: Catechism for the Sick.
- Catechism of the Manner of Living for Young Wives. Leipsic. Baumgartner. 1825.
- Hand-Book for the Newly Married. Leipsic. Baumgartner. 1825. Second edition, edited by Hartmann. 1834.
- Investigation as to the Medical Virtues of Charcoal from Beech-wood. Leipsic. Baumgartner. 1826.
- Demonstration of the Truth of the Homœopathic Method of Healing as founded on the Laws of Nature, according to the Experience of Bigel. Leipsic. Baumgartner. 1828.

SPEAKING of observations made during the sleeping state of the patient and at the moment of awaking we must not overlook certain positions which are forced during waking hours, and such a position is adopted because every other one is either uncomfortable or directly painful. The Homœopath is thus enabled to interpret these facts as aggravations, or especially ameliorations in certain positions, and again Bœnninghausen's *Pocket-Book* will form a reliable source of reference.—*Dr. Martiu Deschere in Hahn. Monthly.*

CONTRIBUTIONS TO PHARMACODYNAMICS.

By the late Dr. Lobethal.

Translated for the HOMŒOPATHIC RECORDER.

Calcarea carbonica.

This remedy, in practice, shows wonderful effects with children. No remedy in all our medical treasury corresponds so well to the reproductionary diseases of childhood in its first developments as *Calcarea carbonica*. This medicine is a most excellent remedy which rarely leaves us in the lurch in the indolence and apathy of scrofulous children, who, formerly healthy and vigorous, suddenly give up walking, become awkward, with distended abdomen; so also in the pale, cachectic complexion and bloated face of children before healthy, in the swollen nose and upper lip, in scrofulous inflammation of the eyes, especially when morbid metamorphoses have already formed on the cornea; so also in scrofulous eruptions of such children, from the malignant *Crusta serpigiosa* even to the common scrofulous sores, but less so in cases of caries of the bones, finally also in *atrophy mesenterica* with developed marasmus, wasting the child to a skeleton, with old wrinkled face. The remarks of Hahnemann as to the use of *Calcarea carb.* (*Chronische Krankheiten*, 1835, Vol. i., p. 312) are remarkably exact. Every practitioner finds in his practice that *Calcarea carb.* seldom or never affects a cure with an older person, and that its great effectiveness in female diseases is only manifested in cases where the menses appear before their four-weekly period and in excess. But under such circumstances *Calcarea* is the most beneficent remedy, which usually successfully cures many ailments connected with these menstrual disturbances, among which are especially: Great weakness of the whole muscular system and heightened irritability of the nerves, which are almost always connected with *Fluor albus*; a cure is usually affected by one dose, the effect of which must be quietly awaited. I have always found the 30th potency of *Calcarea carb.* sufficient and appropriate, and only with children I repeated this dose according to their ailments in longer or shorter intervals.

Camphora.

I have never used this remedy in another form than in that of the pure spirits of *Camphor*, never potentized to any attenuation. The volatile nature of *Camphor* and the temporary action of this

remedy, which is its consequence, do not permit any attempts with respect to the potentizing of this remedy. I have learned to value *Camphor* in many cases, and have especially frequently proved its eminent efficiency in Asiatic cholera. I acquired this experience in a convincing manner, even before my acquaintance with Homœopathy as the physician of a cholera hospital. Emulsions of several grains of *Camphor* proved more useful in the cholera with cold limbs and a clammy sweat than *Liquor ammonii caustici*, *Nux vomica*, *Bismuth*, *Magister*, Krajewizky's powders and all the rest of their paraphernalia. Nevertheless *Camphor* does not show an equal efficiency in all epidemics of cholera; in the epidemy of the summer of 1837 I could, *e. g.*, make only a very limited use of the spirits of *Camphor*, because the development of the disease usually proceeded so rapidly that even in one hour after the patients were seized the disease declared itself in its asphyxial form, the patients becoming blue-black (an entire suppression of the arterial quality and a predominating venous diathesis), so that success could only be expected from *Carbo vegetabilis*, *Secale cornutum* and the abundant use of ice pills. Whoever used *Camphor* in such cases, following his authorities, saw most of his patients die. It is a specific in cholera only so long as the body retains its *natural white* color, even though it be ever so cold. I have found *Camphor* specially useful in nervous fevers, and then indeed, when the strength of the patient has been exhausted through a long, very strong fever, while there is a general coldness of the body with a sticky, clammy sweat, when the cheeks are of a circumscribed red, the patient lies continually in a quiet delirium, and life, judging from the pulse, almost threatens to die out. These cases were always of older persons whose mind and body had already a long time suffered from the disease. With them I used, according to circumstances, every ten minutes, every one-fourth or one-half hour, five drops of pure spirits of *Camphor*, dissolved in the yellow of an egg, and I always excited thereby a decided improvement and a renewed receptivity for other remedies. Also in inflammations, especially in pneumonia, the use of *Camphor* in the nervous stage is exceedingly effective when the above-mentioned symptoms appear.

Cannabis sativa.

This is a remedy deserving particular attention in scrofulous ophthalmia. Often I have seen old spots and ulcers in the cornea, as well as incipient leucoma, disappear after the long continued

use of *Cannabis* 30, repeated two, three or five times a day. I even succeeded once in restoring a considerable power of vision to a young miller who had a very obstinate ophthalmia due to his scrofulous diathesis and to the quantity of flour-dust in which he worked; from this had arisen spots on the cornea and albugo. In a state of complete blindness after the ineffectual use of many Allopathic remedies, he consulted me, and by a persistent use of *Cannabis* he was partially restored to sight. In the inflammatory stage of gonorrhœa *Cannabis* is a quite efficient remedy, though it is as little able as other remedies to shorten the natural term for the duration of the gonorrhœa, which with the mild kind is twenty-one days.

A REPORT OF TWELVE CASES TREATED WITH STANNUM IODIDE.

By M. D. Youngman, M. D., Atlantic City, N. J.

So far as I know there exists no published provings of *Stannum iod.* I have seen from time to time accounts, chiefly in medical journals, of its clinical use. What I relate about is gathered by personal clinical experience with it. Not at all *scientific* data I admit, yet I hope not without some interest or profit.

Theoretically I hold that a Homœopathist has no right to report any remedy of which he cannot furnish a reliable, scientifically made proving, for upon such proving only can a true prescription be made. Practically, the busy doctor picks up many facts and points of practice, disjointed and obscure oftentimes; that, without being able to give a reason for the faith within him, he finds of great practical (clinical) value and makes use of.

I opine that if a proving were made (or has been made) of *Stannum iod.* it would show many of the characteristics of both *Stannum* and *Iodine*, but like its relatives, *Arsenic iod.*, *Antimonium iod.* and *Ferrum iod.* it would present many new phases and powers not possessed by either of its component metals, but entirely the result of their association and reaction upon each other.

From my experience with the remedy I have gathered the following general data of its action. Like all the metals it is a deep acting and long acting drug, and it has in my hands been chiefly of value in those chronic chest diseases characterized by

plastic tissue changes, and the twelve cases I am going to report speak of its use in this class of disease.

It is a wonderful "tonic" like *Arsenicum iod.* and *Ferrum iod.*, and has been of value in several cases of neurasthenia of melancholic complexion. It is chiefly indicated in those lung troubles of catarrhal origin where we find agglutination of the air cells and minor bronchioles constituting a plastic consolidation of the lung tissue, which is of slow progressive formation rather than in those cases of the same pathological state existing as the remains of an acute pneumonia, capillary bronchitis, grippe, etc. It is of prime value in cases that "hang fire," acting in the manner, as our old school friends would express it, of "an alterative" imparting an energy and tone to the whole system, and determining the hesitating recuperative process in the right direction.

It has one peculiarity of action, probably inherited from its ancestor, *Stannum*, which, if I was not opposed to "keynotes," I would be tempted to demonstrate as such, to wit: "A persistent inclination to cough, excited by a tickling dry spot in the throat; sometimes in one place and sometimes in another, often apparently at the root of the tongue. This cough, which begins as a weak-sounding cough, accompanied by shortness of breath, soon gathers strength and sound and execution, induces the raising of a free, copious, pale yellowish secretion; which at first, for five or ten minutes or so, gives a sense of great relief and satisfaction, but which is soon followed by a feeling of dryness, weakness in the throat and chest, and increases oppression.

CASE I. Girl, æt. 16, pale, chlorotic, emaciated. Had a hard dry cough, which after coughing awhile made her hoarse, scraped feeling in pharynx, copious expectoration of mucus, which was bland in character and so sticky that it dried in a lump of the same size as when it fell in the cup. *Kali bichronicum* had been given with good effect, together with a general constitutional treatment. *Stannum iod.* 3x trit., was given, and gave such gratifying results in the direction of relief and final disappearance of the cough that it was continued for over six months.

CASE II. Man, æt. 40, was an inveterate smoker of tobacco, had a hard, dry cough, and plenty of expectoration after he got it started: said it came from the throat and was ascribed by himself to his use of cigars. Physical examination revealed consolidation in areas of the middle portion of the right lung; temperature 100°, pulse 90, weak feeling in chest after coughing.

Iodine and *Drosera* had been given. *Stannum iod.* 3x trit., was prescribed and was quickly followed by amelioration of all the symptoms. He was ordered to Golden, N. M., at an altitude of 10,000 feet, where he now is in perfect health, and, as his wife writes, "freed from his disgusting habit of smoking."

CASE III. Man, æt. 32, in the second stage of phthisis pulmonalis, "coughing his head off," to use his own expression. Under the care of one of the most careful prescribers in New York. Had all the symptoms of this stage fully developed; was weak, perspiring, oppressed for breath, and unable to sleep during the night for persistency of cough and expectoration. Physical examination showed consolidation of both lungs in areas, small cavity in right. Was taking *Stannum met.*, which he said had benefited him more than any other remedy he had taken. When he got too much oppressed he resorted to *Hydrogen peroxide*, diluted, which acting as an expectorant gave him great relief, but he thought it affected his stomach. I substituted *Stannum iod.* 6x trit., which gave him relief as far as the cough and oppression was concerned, and so gratified him that he indulged in hopes of ultimate recovery, and this remedy continued his greatest comfort to the time of his death. Although he often abandoned it in an effort to find one that would cure him he was always glad to return to it.

CASE IV. Woman, æt. 71. Had had "chronic bronchitis" for forty years. Had been prescribed for by doctors of all schools and no school, and had a box of medicines of her own, from which I often watched her prescribe with much amusement and admiration. *Gallic acid* 2x was her stand-by when I met her, and I induced her to take *Iodine* exclusively for one year, under which she improved very much indeed in every way. I then gave her *Stannum iodide* 6x trit. with excellent results.

CASES V., VI., VII. and VIII. Were all cases of advanced phthisis with copious expectoration, bland in character and exhausting. The *Stannum iod.* was prescribed because of my confidence in its ability to lessen expectoration, lend tone to the pharyngeal and faucial muscles in their tiresome labor of pumping up the abundant secretion and the general tonic effect. While, of course, there was no lasting benefit, the relief afforded was gratifying to both patient and physician.

CASE IX. Miss H——, æt. 30. An only daughter of a widowed mother; typewriter by profession. Her mother came to me and told me her daughter had been "running down" for over a year,

was thin, without appetite, had night sweats occasionally, and had a cough with copious yellow morning expectoration. "But then she has had that for years," "it runs in the family; I have it." I gave her *Arsen. iod.* 3x, and prescribed syr. hypophor. comp., U. S. P., and told her to send her daughter to me when the medicine was gone. When she came I was distressed on having her bare her chest to find impaired respiratory murmur and prolonged expiration, with a foreboding quiet in the apices of both lungs. I gave her *Stannum iod.* 12x trit., and ordered a bicycle—much against my prejudice—and to-day she is well and free from cough.

CASE X. This should have been included with Cases V. *et seq.*, but for its marked testimony to my subject. Mr. N——, æt. 53, in the last stage of phthisis. I was asked to see him with a friend in a city where I was visiting. He was greatly distressed by the incessant cough and the copious sticky expectoration, which seemed ample in quantity, but gave no relief to the feeling of fullness and oppression to chest. The patient was evidently dying and beyond the doctor's aid, but his distress was painful to his poor wife and family. My friend had prescribed *Tart. emet.* 30th, *Kali bi.* 200, and lastly *China* 1x. The man's distress impressed me so much that I suggested a hypodermic of *Morphia* and *Pilocarpine*, or *Morphia* and *Apomorphia* as a palliative. At this my friend demurred, fearing that in the weakened condition of the patient the amount of *Morphia* I proposed would narcotize him until he passed beyond the vale. I then proposed *Stannum iodide* 3x trit., which was given and continued until his death, with the most satisfactory relief after about six hours.

CASE XI. Miss N——, æt. 26, a frail, delicate young woman with a short, dry, hacking cough, but abundant expectoration, weak, scraped feeling in pharynx and trachea, expectoration sweetish in taste. Physical examination revealed dullness over upper lobe of left lung, harsh rasping râles on coughing. She told me she did not attach much importance to the cough, for she had had that for a long time and that it came from her stomach. I prescribed *Stannum iod.* 3x and *Acalphya* θ , which I have found a good "running mate" in incipient cases of phthisis. Also prescribed a liberal diet, Spanish port for dinner, syr. hypophos. comp., U. S. P., for building material, and ordered her to the climate of Colorado, where she now is and improving daily in health.

CASE XII. Man, æt. 47. Had a chronic cough for several

years, which was pronounced "bronchitis;" had the grippe two years ago, from which he only partially recovered, has declined in health since. There was little or no expectoration at this time.

About eight months ago he lost his voice almost completely, and with it his ability to swallow food. Upon examination the muscles of the left side of the pharynx and œsophagus were found paralyzed. Shortly afterwards a mass, which proved subsequently to be tuberculous, on the right side of the neck. Physical examination of the chest disclosed absolute dullness of the upper two lobes of the right lung. There was great oppression of breathing but no cough. His general health was very poor, and he was sadly addicted to the use of alcoholics and morphia. He was taking when I saw him four grains of the latter per diem.

Bryonia, *Hepar*, *Arsenic jod.*, *Iodine* and *Kali jod.* (gr. x ter die) were prescribed with no result. Then, because the tickling which occasioned the cough was experienced in various parts of the throat, and because of his neurasthenia and debilitated condition and what little secretion there was was sweetish and flat to taste, I gave him *Stannum jod.* 3x trit. Within two days there occurred a free, easily expectorated muco-purulent sputa, grayish-green in color, and of nauseous, disgusting, musty taste and horribly offensive odor. This persisted for nearly three weeks, during which time the oppression disappeared. Air could be heard penetrating the diseased lung in every direction, and at the present time the cough has greatly subsided, the expectoration ceased and what little is coughed up is largely clear, transparent mucus. His general condition was much improved. The quantity of morphia is now reduced to three-fourths of a grain per diem. Of course he had other aids, as electricity, sprays for his throat, and careful feeding with good nursing, but no other medicine was administered internally than the *Stannum jod.*, and I mention this case to show its power of clearing up the lung complication, which I believe to have been catarrhal rather than tubercular.

About the time we had the lung pretty free the tarso-metatarsal joint of the right great toe became tuberculous and the mass in the neck growing rapidly; the patient was removed to Hahne-mann hospital for the removal of the toe and the mass in neck. This is a very unpromising case, but so far as the *Stannum jod.* was concerned it did its work well.—*From Hahnemanian Monthly, January, 1895.*

AMERICAN INSTITUTE OF HOMŒOPATHY.

Bulletin, No. 3.

Mr. Warren F. Leland having secured the management of the Ocean House, Newport, for a second season, dates already announced for the opening of the session and for the promenade concert may be considered as definitely determined. Mr. Leland will conduct the Ocean House on the same first-class plan and with the same liberal policy that have always characterized hotels under his control. The circumstance that this will be his second year at Newport is abundant proof of his intimate acquaintance with the peculiar requirements of visitors to this famous resort and sufficient evidence that all will be satisfactorily met. An excellent orchestra will give fine concerts at the Ocean House thrice daily; that in the forenoon may be utilized for dancing by the children should a sufficient number attend to render such action desirable. The rates will be from \$4 to \$5 per day. Orders for rooms may be sent to the undersigned and will be filled in the order of their receipt. When not otherwise specified engagements will be considered as commencing at noon on the opening day of the session and "all rooms engaged will be charged for from the time of engagement" whether the expected guests then appear or not, provided they do not give ample notice so that the room engaged can be given out to other people. There are fifteen private parlors, ranging in price from \$7 to \$10 per day, which with the adjoining bedroom *for a single person* will make the charge from \$12 to \$15 per day, according to size and location. In order to minimize discomforts and complaints officers of every grade, past officers and all others desiring a private parlor at headquarters should make application at once to the undersigned. They will be assigned strictly in the order of application, provided such course in no case prejudices the interests of the Institute.

Orders for accommodation at the Perry House have already been received. Rooms will not be reserved after 7 P. M. of the opening day unless paid for in advance. This rule will probably be adopted by the proprietor of the Hotel Aquidnick also, who has likewise filed orders for the anniversary.

The excursion on Narragansett Bay and the clambake will take place on Saturday, June 22. Local exigencies require the

boat to leave the wharf not later than 12 M. It would be better if it could start at 11:30 A. M. This will necessitate holding the annual election not later than 10 A. M., for the sail must not be devoted to lobbying, but rather its varied panorama and the curious viands of the bake be permitted to serve as balm to the vanquished.

Negotiations have been entered into for an excursion to Block Island, thirty miles out on the broad Atlantic, for Tuesday, June 25. This will afford the only opportunity for the doctors and their friends to take an ocean sail in a boat sufficiently large to afford any sort of a guarantee against the pangs of *mal de mer*. Unfortunately definite arrangements cannot be made for a month or two yet.

Pleasant sails of two or four hours' duration may be taken any half day to Narragansett Pier, Wickford, Rocky Point or Providence and return. For those unwilling to risk the qualms of seasickness tallyho or other driving parties may be arranged and thus a delightful *ride* to Narragansett Pier be enjoyed. This trip consumes the entire day and utilizes two steam ferries.

It is rumored that many delegates from the south and west propose to take the Fall River boat at New York, Wednesday night. That is a very pleasant idea. Such persons will find it no less pleasant, however, to stop over long enough on their return to sail up the Hudson River at least as far as Poughkeepsie. It should be remembered also that the New York and New Haven road affords excellent service by its Colonial Express from Washington (as well as by more local trains), and the Wickford boat for those whose time is limited. Sleepers over the Hoosac Tunnel route and on the Boston and Albany road may be switched on to the Old Colony system at Fitchburg and Framingham, respectively, and passengers deposited at Newport without change of cars. These are simply suggestions for those interested.

The offer of Rev. I. Newton Phelps, pastor of the First Baptist Church, to omit his regular Sunday evening service, June 23, that the Institute may then hold its Memorial Service in honor of its deceased members, has been accepted. The regular choir, and perhaps a special one, will be at the disposal of the special committee thereon.

Correspondence may be directed to the several hotels at which the visitors may stop, or to the First Baptist Parsonage, which stands in the churchyard. A bureau of information will be established at the Ocean House, where a competent adviser will

always be found. The undersigned will take permanent quarters at Newport not later than Monday morning, June 17, and as much earlier as the exigencies of the situation may require to make sure that all responsibilities entrusted to him have been fully met. He may then be addressed at the parsonage or at the Ocean House. It will be well for those interested to keep the several bulletins of the Local Committee of Arrangements at hand for ready reference, as announcements will not be repeated.

GEO. B. PECK,
Secretary Local Committee.

A DIAGNOSTIC POINT.

Inclosed find one dollar for next year's RECORDER.

As some physicians sometimes make a serious mistake in calling a bad case of follicular tonsillitis diphtheria, perhaps the following diagnostic point may be of value. In diphtheria the urine contains a deposit consisting of cast off epithelium from the uriniferous tubules of the kidneys. In follicular tonsillitis it is never found.

Continue sending the RECORDER to

Yours very respectfully,

A. E. MARSH, M. D.

Greeley, Colo., Dec. 26, 1894.

A PROVING OF PLANTAGO MAJOR.

I have been experimenting a little with *Plantago maj.* and wish to give your readers the advantage of the same.

I took on December 3d one dose of *Plantago* 6x, and forgot I had taken it until December 6th, 12:30 P. M., when I began to feel severe lightning-like stitches directly over the left eye, these stitches came and went till 5:45 P. M., when they disappeared.

On December 7th, at 12:30 P. M., I again noticed the above symptoms, except in greater intensity and more constant.

On December 8th, at 12:45 P. M., I again noticed the pains coming on, this time they gradually passed from the left to the right side, extending a little to the right of right eye. At 5 P. M. I was obliged to lie down, as the pain was so severe all over the forehead; the only way I could get relief was to press my hand (cold) firmly on the forehead. Warmth intensified the pain.

At 5:45 P. M. the pain had all left as suddenly as it came. I also noticed while the pain was the most severe (which was as night approached) I experienced a great sense of nausea at "pit" of stomach.

On December 9th the same symptoms made their appearance and at exactly same time, but much less severe. On the 10th did not feel anything of it.

I took another dose 6x 3 grains on the 12th, and felt my first symptoms on the 15th, and find my second experiment fully corroborates the first.

Conclusions.

1. *Plantago* acts on the front part of head alone.
2. It acts between 12:30-5:45 P. M.
3. It does not show effects at once.
4. It begins to act about three days after taking, and continues regularly for about five days.

I hope to hear through the medium of your valuable journal the experience of others, for it is by experience alone that we become perfect.

Very truly yours,

GEO. H. PETERS, M. D.

Peekskill, N. Y., Dec. 21, 1894.

WHAT IS THE REMEDY?

(The following was sent to the RECORDER by a well known physician with the request that it be printed "but you need not use my name.")

Mrs. ———, a mother, aged forty-two years.

Condition for about a year:

Head.—Headache most of the time, dull pains over the eyes and in the back of the head.

Mind.—Cannot think well; confusion of mind; fears she may go crazy; uses wrong words.

Eyes.—Blind spells, especially in the evening; letters run together after reading awhile.

Ears.—Itching and irritation in the ears, and after boring into them with the fingers oozing moisture.

Throat.—Frequent "clearing up," sometimes with hoarseness.

Bowels.—Inclined to constipation; sometimes has bleeding piles; sometimes pains in the lower bowel and leucorrhœa.

HOANG-NAN.

Inquiry has been made lately for literature on *Hoang nan*; there is none that we know of save a pamphlet once published by Lesserteur, of the Foreign Missions in Paris, and various articles in medical journals about the year 1880. From these we condense the following:

Hoang-nan is used by the natives of Tonquin for leprosy. It is the "tropical bindweed," and grows on the mountains between Anam and Tonquin. The bark yields two alkaloids, *Strychnia* and *Brucia*. Livon, of Marseilles experimented with it on frogs, and dogs. "In the case of *Hoang-nan*," he reports, "the tetanic convulsions begin always in the hind legs of the animal, and gradually spreading over the whole body become general."

R. P. Etienne, of Trinidad, reports that *Hoang-nan* was given to twenty-four lepers and caused a general improvement in all but one. "The remedy works almost simultaneously upon all manifestations of the disease without exception. Upon the muscular paralysis it seems to produce the least effect. Treatment with *Hoang-nan* extending over a period of two years did not tire the stomach nor injure the general health."

M. Guilbot, curé, in Danish Antilles, reported a case of "humid leprosy" treated with favorable results, the ulcers yielding to the treatment and cicatrizing.

Desaint and Jobard treated fifteen lepers in India with the remedy, and concluded that "*Hoang-nan* is an active remedy destined probably to be of great service, not only in leprosy, but also in the treatment of all indolent ulcers." It affects the substance of the spinal cord. In lepers it produces extraordinary improvement, the patients becoming more active and joyous. In about two months anæsthesia disappears and sensibility is more or less restored. Ulcers change in nature and tend to cicatrize.

Feron, of Pondicherry, says that it subsides the fever of leprosy. He treated two cases of scrofula with the remedy with good results, especially in relieving the ulcers.

A Tonquin missionary, Fiot, cured a bad abscess in the leg of a woman with the remedy that physicians had declared incurable.

A number of cases have been reported where *Hoang-nan* has

cured bites of mad dogs and of venomous serpents, such as the cobra.

R. P. Levy, a Messopotamian missionary, reported on this remedy: "I prepared the remedy Homœopathically, making 2,000 pills of twenty centigrammes each. I have given it both in large and in small doses in the following diseases: Infectious ulcers, especially venereal. From two to four pills a day, according to age of patient and severity of disease; cure prompt. In Homœopathic dose cure more slow, but without liver troubles or vertigo, which is brought on when the remedy is given in large doses. Constitutional syphilis. Slow recovery from either method of treatment. The complexion peculiar to the disease disappears and a rosy hue takes its place in time. Skin diseases of all kinds. Prompt cure from both Homœopathically and Allopathic treatment. Prurigo is most easily cured."

Lesserteur, in conclusion, asserts that *Hoang-nan* is efficacious in leprosy, ulcerations, serpent bites and syphilitic troubles, and thinks it ought to be curative in hydrophobia.

Epilepsy and convulsions are also said to have been cured by the drug.

THE CURE OF UNCLEANLINESS BY AMMON. CARB.

By Dr. J. P. Gallavardin, of Lyons. Translated by Dr. Clarke.

OBSERVATION I.

A lady, aged fifty-two, who had been affected with mania for a year, had become unclean to such a degree that she passed both urine and feces in the bed, and when at table for her meals spat on the tablecloth and into the plates.

On March 4, 1875, I gave her *Ammonium carbonicum* 30, one dose to be taken daily for six days in succession.

Twenty days after having taken this remedy she recovered, little by little and completely, the normal cleanliness which she had before her mania. This cleanliness persisted up till her death, which was occasioned by an attack of foudroyant apoplexy on June 2, 1875.

OBSERVATION II.

A lady, aged fifty-eight, affected with hemiplegia following apoplexy, had become idiotic, uncleanly, a spoiler, defecating involuntary once a day, and frequently wetting the bed.

On October 9, 1875, I gave her *Ammonium carbonicum* 30, to take once a day for five days in succession.

By the 13th of October she had already recovered her appetite, her intelligence, her liveliness and previously normal cleanliness.

OBSERVATION III.

A gentleman, aged seventy-three, affected with dementia, a spoiler to the extent of defecating involuntary four to five times a day, took *Ammonium carbonicum* 30, which cured him in five days of his dirty disposition. Afterwards he remained cleanly up to the time of his death.—*Homœopathic World*.

THE following extract from a letter from Dr. E. Lippincott, of Memphis, Tenn., will prove of general interest. We would state that the letter is headed: "Tennessee and Alabama State Homœopathic Medical Societies." The Tennessee officers are: President, G. E. Harrison, Chattanooga; Vice-President, Douglas Calkins, Knoxville; Recording Secretary, B. H. Enloe, Nashville; Corresponding Secretary, W. W. French, Chattanooga; Treasurer, T. E. Enloe, Nashville. The Alabama officers are: President, A. M. Duffield, Huntsville; Vice-President, Geo. G. Lyon, Mobile; Recording Secretary, A. E. Meadow, Blocton; Corresponding Secretary, A. N. Ballard, Birmingham; Treasurer, W. W. Clapp, Birmingham.

We now quote from Dr. Lippincott's letter:

"The heading of this sheet will notify you of a meeting of no small import. We would be pleased to have you give notice of this meeting in the RECORDER as well as editorially. Our prospects are not only encouraging, but flattering, for the largest, most interesting and instructive medical meeting ever held in the South. There will be a large delegation from all parts of the South, as well as the large northern, eastern and western cities. Huntsville is one of the most picturesque and romantic cities of the South and an ideal city for a medical meeting. A trip has been arranged for to the far-famed Monte Sano—the Mecca for sick babies.

"We specially invite physicians suffering with asthma, rheumatism, and other chronic ailments to meet with us, have papers, and participate in our meeting. The recreation, salubrious climate, and feast of good things we will have to offer will rejuvenate them and give them a new lease on life. This is no idle statement, as it is constantly being verified.

"Medical meetings in the South are measurably missionary, and it is the duty of every Homœopath to contribute to their success.

"There will be a public address by one of the foremost Homœopaths in the United States.

"Discussions will be led by representative men. No Homœopath who has the interests of Homœopathy at heart can afford to miss this meeting.

"Many of the subjects agitating the medical mind of the day will be presented for discussion. It is a 'free for all' meeting, not in the interest of any man, men, college, journal or anything, but the upbuilding of Homœopathy in the South.

"We will have reduced railroad and hotel rates.

"We would be pleased to have someone represent the RECORDER."

EDITOR OF HOMŒOPATHIC RECORDER:

I wish to correct a statement in RECORDER of January 15th. I stated to Dr. Wright that I had used *Cineraria maritima* in three cases of cataract with benefit in one case only. In that case it was as stated, lady had not been able to read for long while, and by use of this remedy, two months, she could read newspaper. The other two cases were not benefited, as I think cases too far advanced. All statements in regard to new remedies, or in fact any remedy, should be given carefully so as not to mislead anyone. Please correct in your next issue and

Oblige yours sincerely,

A. B. KINNE.

Syracuse, N. Y., January 22, 1895.

BOOK NOTICES.

Essentials of Homœopathic Therapeutics: Being a Quiz Compend upon the Applications of Homœopathic Remedies to Diseased States. A Companion to the Essentials of Homœopathic Materia Medica. Arranged and compiled especially for the use of Students of Medicine. By W. A. Dewey, M. D. 266 pages. Cloth, \$1.50; by mail, \$1.58. Flexible leather, \$1.75; by mail, \$1.83. Philadelphia: Boericke & Tafel. 1895.

It is a safe prediction that this, the latest of Dr. Dewey's books, will be quite as successful as were the *Essentials of Homœopathic Materia Medica* and that other well-known work in which he had a hand, Boericke & Dewey's *Twelve Tissue Remedies*. This book on therapeutics, as per title, gives the *essentials* that the student of Homœopathy must know before he can pass examination. It will enable the student to post himself almost at a glance on his weak places, provided, of course, that he has any. For instance, if he is not up on mental symptoms, and has a copy of this book, he can turn to page 150 and with but little effort post himself on the restlessness, anxiety and fear of death of *Aconite*, the irritability, haste and delirium of *Belladonna*, the imaginations of *Hyoscyamus*, the jealousy of *Lachesis*, the wild fears and terrors of *Stramonium*, the cussing propensity of *Anacardium*, the damned state of *Aurum*, the tearfulness of *Pulsatilla*, and all the rest of the emotional or

mental family; all brought together in *essentials* in thirteen pages and well delineated—not too much, but enough. The same may be said of all the other conditions or ailments, from “abscess” down to “yellow fever.” It is a book for both the student and practitioner, and in all probability the latter will appreciate it quite as highly as the man who still has his degree in prospect, for the true practitioner or professional man is ever and always a student, and the firmer he is grounded in the *essentials* of his profession the better can he master its intricacies and thus go up to the upper seats.

Non-Surgical Treatment of Diseases of the Glands and Bones, with a chapter on Scrofula. By John H. Clarke, M. D. 170 pages, 16mo. Cloth, 75 cents (by mail, 78 cents). London: Epps & Co.

The spirit of this book is in the following, from it: “Allopaths, who know nothing of actual cure, have some excuse for having recourse to operative measures; but it is the province of Homœopathy to show the world the true method of dealing with the diseased human organism, and I publish this treatise as a practical protest against surgical interference with diseased lymphatic glands.” In other words, a vast majority of the cases treated surgically to-day should be treated and cured by medicine. Dr. Clarke’s little work is worth reading.

Laboratory Guide for the Bacteriologist. By Langdon Frothingham, M. D. V. Illustrated. 75 cents. Philadelphia: W. B. Sanders. 1895.

A little long octavo book of about sixty pages, printed mostly on the right hand page only, giving technical methods for convenience in laboratory work.

Syllabus of Gynecology based on the American Text-book of Gynecology. By J. W. Long, M. D. 133 pages. \$1.00. Philadelphia: W. B. Saunders. 1895.

A book of 133 pages interleaved, thus making it equal in size to 266 pages. Its object is first, to be used as lecture notes; second, to enable the student more intelligently to follow and remember the lecture, and thirdly, as a convenient reference to practitioners.

Notes on the Newer Remedies. Their Therapeutic Applications and Modes of Administration. By David Cerna, M. D. Second edition, enlarged and revised. 253 pages. Cloth, \$1.25. Philadelphia: W. B. Saunders. 1895.

Dr. Cerna has made a gallant attempt to corral all the "new remedies," but we will bet high that a number of the tribes of al, in, ene, ol, etc., have got away from him and, as they breed like the *coma bacillus*, there will be a new horde before this book has its newness rubbed off. Still he has secured about eleven hundred of them and this is enough to keep the graduate of a few years ago hustling—provided he thinks it worth while. Some of them have deceived Dr. Cerna and got into his collection under the most barefaced imposition. What right has *Agaricus muscarius*, or *Bryonia*, or *Aconite nappellus* and a lot of others of that ilk to masquerade with Beta-nitrophenylpiperazin, Dehydrodimethylphenylpyrazin and big guns of that sort? It is certainly rank imposture on their part. Still, for all that, Dr. Cerna's book will be useful to anyone who wants to keep up with the procession, and the fact of a second edition shows that it is wanted.

Indigestion: Its Causes and Cure. By John H. Clarke, M. D. Fourth edition, revised and enlarged. 141 pages, 16 mo. 60 cents (by mail, 62 cents). London: Epps & Co.

"Considering the enormous influence the human stomach has exercised on the history of the world and of individuals, it is astonishing that people are so little careful how they treat it and what they put into it," is the way Dr. Clarke opens the preface to his little book. Then follows seven chapters of good advice and good treatment for the ills of dyspepsia and indigestion.

DR. H. C. JESSEN, author of the *Therapeutical Materia Medica*, writes as follows concerning McMichael's *Compendium of Materia Medica, Therapeutics and Repertory of the Digestive System*:

Permit me to add that Dr. McMichael's arrangement is excellent; this is the only rational way of the study of materia medica, and it was this of which I in my work attempted to give the skeleton. I have not yet examined it so closely that I can have any decided opinion of its contents; but this I dare say, that the mode you have published it is an honor to your publishing house. I have never seen anything in our school so beautiful.

Homœopathic Recorder.

PUBLISHED MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street,

Philadelphia, Pa.

SUBSCRIPTION, \$1.00 PER ANNUM.

Address communications, books for review, etc., for the editor, to E. P. Anshutz P. O. Box 921, Philadelphia, Pa.

IN this number of the RECORDER is begun the publication of an exhaustive and model study of a drug—*Zincum*—by Dr. Gerstel, that must prove of exceptional interest to all students of materia medica. The paper has never before been translated, and will run through several numbers of the RECORDER. It alone will be worth the price of a year's subscription. Please send in your subscription and receive the RECORDER regularly.

IN the January number of the RECORDER was a paper from Homœopathic practitioner Choudhury, of India, who makes a difference between *Rhus r.* (*radicans*) and *Rhus tox.* in treating his cases. A good many years ago botanists declared that there was no difference between these two plants, and as a consequence their symptomatologies were thrown together by late writers on materia medica, but recently botanists have revised their opinions and admit that there is a difference. *Rhus tox.* was proved under supervision of Hahnemann, and *Rhus radicans* under Dr. B. F. Joslin assisted by Drs. Barlow, Bayard, Bolles, Bowers, Snow, Taylor, Williamson, and Wright. In Jahr's *Symptomen codex* (1848) twenty-five pages are devoted to the symptomatology of *Rhus r.*, and twenty-four to *Rhus tox.* A hasty glance through the two shows that if anything *Rhus r.* has the most prominent symptoms, especially about the mouth and tongue, as for instance, "redness at the tip of the tongue," which is put in large caps, as are six other symptoms of that member, while in *Rhus tox.* but little is said of the tongue excepting that it is dry and parched. Unfortunately the old "Symptom codex" is out of print and very rare, but that excellent materia medica *Hull's Jahr* (Snelling) has maintained the distinction between the two remedies; it is the only materia medica in print, we believe, in which the two remedies are kept separate. The pharmacy of Boericke & Tafel has always kept the two remedies separate, and many of their patrons claim that there is a marked difference in the action of the two.

PERSONAL.

Dr. John E. Harner has removed from Honeybrook to 117 South Fifth St., Reading, Pa., taking the practice of the late Dr. E. Z. Schmucker.

Dr. S. S. Mann, formerly at Children's Homœopathic Hospital, Philadelphia, succeeds to Dr. Harner's practice at Honeybrook, Pa.

Dr. Webster says that "We have no single agent so reliable in permanently arresting the manifestations of spermatorrhœa and permanently curing them" as *Avena sativa*.

Dr. Kraft thinks that if the patient is a "tobacco-chewing, coffee-drinking hog and hominy-eating animal," and *Nux* is indicated, the tincture should be given, if finer grained, then a potency.

It is curious to watch the survival of the instinct that once caused men to run after horse-cars, send them tearing after electric cars.

If microbes are the *cause* of disease of what earthly use is medicine?

A certain board of health after decreeing vaccination right and left, was called upon to consider the question of the board and its employees being also vaccinated; it was held over.

Has any one found any good effects from *Lemna minor*?

The New England Hahnemann Association has been formed. Object: The advancement of the cause of Homœopathy. Our best wishes!

The Boston *Herald* says that it has been discovered lately that the cow that jumped over the moon was tuberculous.

It has been suggested that an extract of asses' brain might prove a useful, even if not popular remedy.

Are there male and female bacilli?

Always room up stairs! The latest Homœopathic journal is *The International Brief* "devoted to the advancement of Homœopathy." Dr. Edward Fornias, 1229 Spruce St., Philadelphia, Pa., editor. To be published in English and Spanish. Best wishes, doctor!

A New York hospital advertises, "Doctors furnished at any hour, day or night."

Oh, the happy days when man could eat and drink without thought or care of "bacilli."

A subscriber writes when sending his subscription to RECORDER: "I have already had the worth of the enclosed dollar in the article of Dr. Von Villers.

Between twenty-five and thirty sculptors have accepted the invitation of the Hahnemann Monument Committee to compete for building it. Their models will be on public exhibition during the first week in February, 4th to 9th, in the large gallery of the American Fine Arts Society, 215 West Fifty-seventh street, New York.

The best preparatory book for one contemplating entering upon the study of medicine at a Homœopathic college is *The Life and Letters of Hahnemann*. It gives him a historical view of the whole field that is invaluable.

The Queen of Honolulu ought to come to this country and go on the stage. It would pay better.

That genial writer of fables, King, of the *Medical Visitor*, wishes he had thought of the "Essentials" before Dewey. But such not being the case he congratulates "essential Dewey" on his success.

THE HOMŒOPATHIC RECORDER.

VOL. X. PHILADELPHIA AND LANCASTER, MARCH, 1895. No. 3.

ZINCUM.

In Scarlatina, Typhoid, Dropsy and Nervous Disorders.
By Dr. Adolp Gerstel, Vienna.

Translated for the HOMŒOPATHIC RECORDER.

The opinion that the *inflammation of the brain to which Zincum is related* has by preference and *primarily* its seat in the meninges is supported by the approved efficacy of *Zincum* in diseases of the brain occurring during scarlatina and typhoid fever.

It is pathologico-anatomically proved that such brain diseases rest solely on *acute meningitis*. We shall now examine more closely the Homœopathic results obtained in such cases.

ELB (*Allg. Hom. Zeitg.*, Bd. 31, S. 227 *fig.*) reports an epidemic of *miliary scarlatina* which reigned in Dresden in the year 1845. In the beginning it was mild, but with the increasing heat of August assumed a malignant character, so that many children died from it at that time, even as many as 7 or 8 in one family. The malignant cases could be divided in two classes, according as the brain or the lungs were pre-eminently affected. In the cases complicated with cerebral affections death took place by a paralysis of the brain while those with whom the lungs were affected died from paralysis of the lungs. The cases in which a paralysis of the brain were threatened, terminated much more rapidly.

When *Aconite*, *Belladonna*, *Rhus*, *Ammonium carb.* and other remedies did not answer ELB found through an extremely careful study of the symptoms that *Zincum* was indicated for the cerebral forms, but *Calcarea* for the thoracic forms.

A 4-year-old, highly fed, scrofulous child fell sick, December 20th, with repeated vomiting, which ceased the following morning; but the child became cool and restless and scarlatina appeared. By the use of *Calc.* the exanthema was fully developed

on the 23d, the points being very prominent and the single points grouped together. (The latter symptom mostly pointed to malignancy.) In the evening of this day the child became quite soporous the pulse collapsed, small, (152); the extremities cool. *Zincum*: one grain every two hours. The following night child was restless, with much delirium. After midnight there was some rest, wherefore the parents gave no more medicine. On the morning of the 24th child was entirely motionless, pulse very small, it could not be counted, total unconsciousness, extremities icy cold, body cool, skin all over the body bluish-red, *except the parts about the eyes, forehead and chin, which were white*; the exanthema appeared now only sparingly. *Zincum* was again given every two hours. After the first dose there were at once signs of returning consciousness to be seen; in the evening the skin was warm, the bluish red spots had disappeared, the pulse was higher (150) some perspiration; at night some sleep, but also delirium; next day (the 25th) there was a return of consciousness, the child desired to drink, the warmth of the skin increased, pulse 128, vigorous. Desquamation began. The child recovered.

In the stadium of this scarlatina-disease in which *Zincum* was indicated, it was first of all necessary to remove the cerebral affection which threatened danger and which had interrupted the exanthema of scarlatina miliaris. From the moment and in proportion as the affection of the meninges diminished, and as the brain returned again to its normal function, and thus was able to resume its ruling activity over the entire organism, the activity of the external cuticle also returned, and its morbid process resumed its normal course.

Zincum did not, therefore, act specifically and directly on the process of the scarlatina, but only indirectly by removing the cerebral affection which checked the normal course of the scarlatina.

ELB, however, was partly of the opinion that *Zincum* is also related homœopathically to miliary scarlatina, and deduced this from the following symptoms :

276. Eruptional pimples in the face.

296. On the chin severe itching and redness.

921. Itching between the scapulæ with much cutaneous eruption.

991. Miliary eruption in the bend of the left elbow.

1035. Red, small, round spots on the hands and fingers.

1231. Stinging itching of the skin with miliary eruption after rubbing it.

1232. Itching miliary eruption in the hough and the elbow-joint.

1234-5. Small red pimples with itching, which ceases after scratching.

These forms of itching pimples, coming after rubbing or scratching, have, however, very little similarity with the points of scarlatina; other symptoms of fever, throat, lungs, intestines and urine, all belonging to *Zincum*, are as little characteristic and cannot prove *Zincum* a remedy for miliary scarlatina *in genere*. The epidemy was one of *miliary* scarlatina. In comparing Rademacher's cases of brain-fever we have seen that *Zincum* causes erysipelatous forms in the face in the sphere of the trigeminous; according to this, *Zincum* might rather correspond to the *smooth* scarlatina, to which we shall return later. ELB himself disclaims putting up *Zincum* (and *Calcarea*, which proved useful in the cases of this epidemy which were complicated with affections of the chest) as remedies which would be suitable in all cases of malignant scarlatina. This we would extend further by saying that these two remedies did not correspond to any scarlatina *per se*, but only to these peculiar secondary symptoms respectively in the brain and in the lungs, as may also appear from the cases now subjoined.

In the year 1852-3 there prevailed in and around Leipsic a malignant epidemy of scarlatina. It was the *smooth* scarlatina, for which *Belladonna* was found by Hahnemann to be specific. Now there were also in this epidemy quite similar and just as dangerous cerebral complications, as MEYER* describes for us in his article, "Scarlet Fever and *Zincum*." Since all other remedies left him in the lurch, and he had even fatal cases to lament, he was induced by ELB's experience to use *Zincum*. We briefly quote one of his cases: A well-nourished, somewhat scrofulous little girl of two and one-half years, who had never before been ill, fell sick on the 8th of February, 1853, of violent fever with other symptoms which, as two of the children of the family were already down with the scarlet fever, also indicated scarlet fever. On the 9th in the morning she received *Belladonna*. In the evening her state was unchanged, the child had not slept during the day, *had cried much*. There was no trace of the exanthema. At 11 at night convulsions had appeared. She had

*Homœop. Vierteljahrsschrift, Vol. iv., p. 410.

slept shortly before for a few minutes but awoke with *twitching of the extremities*, which still continued; now and then there were *successive impulses throughout the whole body with gnashing of the teeth*; at the same time she would utter a *startling cry with quite an altered voice*; her eyes were half closed; *face now pale and sunken*, somewhat distorted; forehead covered with cold, clammy sweat; *skin rather cool and dry*; pulse very small, could be compressed away and could hardly be counted; respiration short and quick, but free from rhonchus; *Involuntarily urination and some liquid stool*. I gave at once *Zinc. met.*, two grains every two hours. Toward morning these symptoms diminished; in the afternoon she slept some, and now the red spots began to appear on her face and neck, and on the following day the eruption was out all over the body, and from now it had its regular course, under *Belladonna*. During the desquamation, however, in consequence of a cold, a state appeared again very similar to that before the outbreak, only that an œdematous swelling appeared on the ankles. After two doses of *Zincum* there was an evident abatement and soon a profuse perspiration, followed soon after by a perfect recovery.

We never have succeeded, either by *Belladonna* or any other medicine, in shortening the duration of scarlatina (whether smooth or miliary), nor have we heard of its being done by any one else; we can only moderate violent and abnormal states, and thus restore the normal course.

Zincum, therefore, was helpful in these diverse cases of scarlatina not from its analogy to scarlatina but as a *homoion* for just this intercurrent stage, and ELB (l. c. p. 239) further tells us: The very beneficial action of *Zincum* in the one state of scarlet fever resembling paralysis, could not fail to suggest that *Zincum* might prove itself helpful; also in like cases where there is no scarlatina, as we frequently find in the last stages of hydrocephalus, in the dentition period, and in *defective nutrition*, and he adduces such a case of a child of 9 months, of which he says: "Whether there was in this case a paralytic state of the brain or an exudation I would not dare to decide, as I could not bring the pathological proof by dissection, but appearances were more in favor of the latter assumption. *Zincum* 1 in $\frac{1}{2}$ grain doses visibly and undubitably brought about the favorable turn of the severe illness.

As an essential symptom we would call attention to the fact that *paleness of the face* attended almost all these cases; we shall

come back to this symptom later on. We must with reference to the last case mentioned by MEYER mention, besides symptom 1330, already cited, the following symptoms of *Zincum* which called for its choice in this instance:

1333. *Jerks through the whole body, in sleep at night and in the afternoon.*

1246. Muscular twitchings here and there in the body.

1247. Quivering in various muscles.

1248. Quivering and twitching in various muscular portions.

1249. Much visible twitching on the body and in the face.

1250. Visible twitching in both the arms and hands.

We will also mention one other distinguishing feature: *The relation of Zincum to the external skin.* From the hints given by FRANZ of the action of *Zincum*, from the results of single provers, and those by WERNECK, it becomes manifest that every single proving ended on the skin. The first proving made by FRANZ on himself, and which acted by preference in the sphere of the *vagus*, ended with a troublesome itching on the skin (1100, 1230). The succession of the symptom was as follows:

371. Sensation of cramps and spasm in the pit of the throat, or the upper part of the œsophagus, like a pressure from below upward, or as if in deglutition (soon).

528. Sensation of tension above the navel, with sensation of qualmishness in the scrobiculus cordis.

427. Two hours after dinner disagreeable sensation of emptiness in the stomach and abdomen with hunger.

809. Oppression and pressure on the stomach (after 7 hours).

626. Several soft, pappy stools a day, enveloped in bright red foaming blood, and preceded by colic (1st d).

593. *Rumbling and noises in the abdomen* in the morning (aft. 2 d).

1100. *Itching of the thighs* and houghs, very violent in the evening; with wheals, as from nettles, after scratching.

1230. Stinging, prickling itching in the evening in bed, on the forehead, the thigh, the ankle, the foot and other parts of the skin.

His fellow prover HAUBOLD was affected in a similar manner, and at the end of the proving there were found the following symptoms:

1227. Single, itching points on the skin, especially of the hands, without either redness or elevation, and simultaneous with it:

1028. *Paralytic state of the right hand*: it is quite bluish, as if dead, heavy and insensible, and the pulse in it is small, hardly perceptible and threadlike.

This latter symptom in its essence locally corresponds entirely to the general state in the cerebral affections mentioned several times before, which was a sort of paralytic state; and it also particularly corresponds to the symptoms emphasized in the cases of ELB, while in this stage: "the extremities icy cold, the rest of the body cool, *the skin on the whole body* (excepting the face) *bluish-red*."

The second experiment, made by Franz and which affected the occiput, the extremities, the general sensation and the chest, ended with:

1234. Small pimples on the thighs, calves and about the knees, with severe itching which ceases at once when scratched.

1101. Itching on the anterior side of the thighs, above the knee, for five evenings in succession, with pimples that are easily scratched open.

The experiments of Hartmann terminated in a similar manner with (1057).

This symptom is found in the *Materia Medica Pura* as follows:

Stinging itching on a portion of the left fourth finger; soon after a red pustule there with throbbing pain.

In the original (*Archiv*) this symptom is 233 and reads as follows:

"On the second phalanx of the fourth finger of the left hand there arises after 12 hours a stinging itching on a single spot, compelling him to scratch, but not disappearing from it. Next day this point had become elevated and red; this redness and elevation increased every day with increased pain; on the 4th day a small white point developed at the apex which became continually more yellow and caused a throbbing and burning pain; after suppurating for eight days it began to heal."

The experiments made by WERNECK on himself and others always *terminated with increased perspiration*, after which the indisposition ceased.

The same was also the case in poisonings which did not terminate fatally.

We conclude that *it is not the skin which is primarily affected by Zincum*, but that it is merely the critical organ of the *Zinc-disease*. It nevertheless is included in its sphere of action and gives indications for its use, in so far as similar *cutaneous dis-*

eases are accompanied by other more deeply seated disorders which at the same time are included in the primary sphere of activity of *Zincum*. These are mostly diseases like herpes, at times the consequences of anomalous disturbances of nutrition starting from the sympathetic and of secondary formation, but they may also appear independently as such, while just by this fact the primary state, which is their cause, becomes very distinct. From this point of view we can explain why Hahnemann eventually enrolled *Zincum* among the antipsoric remedies. It also is really more suited to chronic cutaneous diseases.

Now to return to our cerebral affections. Similar states as are found in scarlatina, also appear in typhoid fever. HIRSCHL (*Zeitschrift fuer homœop. Klinik*, Vol. I., p. 85) tells us of a severe case of typhoid fever in a man of 32 years whom he found in the second stage of the disease on the 16th day of his illness. We pass over the previous course of the disease and only emphasize among the indubitable symptoms of an abdominal typhoid fever, the peculiar symptom: That the muddled feeling in the head was combined with a staring look, an incapacity to relate anything connectedly, and a sort of **half-smiling loquacity**. There were also pneumonic symptoms present: a dry, and, as it seemed, painful cough, serous bloody sputa; short, quick, superficial respiration; a limited pneumonic exudation. In spite of *Bryonia*, *Phosphorus* and *Arsenicum* the condition continued to grow worse, and five days later it had reached a dangerous height. This was indicated by the involuntary, very frequent evacuations; the staring look, the relaxation of the facial muscles, which presented an almost Hippocratic appearance, *pale as wax*; there followed the gathering of tufts, subsultus tendinum, *constant trembling of the hands*, coldness of the extremities, complete unconsciousness; he did not recognize anyone; murmuring in his delirium; this alternated with attempts to leave the bed; there was a small, frequent pulse, hardly perceptible; a widely spreading bed-sore.

The patient received one grain of *Zincum* 2 at 8 P. M., another dose at midnight; the pulse then became more quiet, regular and less frequent; the gathering of tufts, the subsultus tendinum and the trembling of the hands diminished; the patient lay quiet, his extremities became warmer, the skin seemed to become softer, as takes place *before perspiration*. About 2 o'clock there was a light sleep, the first during the disease.

Toward morning the patient looked like a person brightly waking up from a deep sleep; he was fully conscious; the cerebral symptoms with their radiations were gone. The pulse was quiet, so also the respiration was regular and even (the more striking, when we consider the former pneumonic symptoms); *the skin was moist.*

HIRSCHEL makes the following remarks, which seem quite correct: "Every practitioner must grant that this sudden action after so considerable a *progressive* aggravation, *not at all* in agreement with the usual course of typhoid fever, and without a critical secretion,* can only be ascribed to a curative effect obtained by art. *And the further course proved this.* A few of the symptoms returned, especially the lung trouble, the abdominal symptoms and slight delirium. The recovery was a slow one on account of the bed-sore; it was 6 weeks before he could leave the room."

Our honored colleague, HIRSCHEL, is of the opinion, that this and another case of typhoid fever in a three year old child, in which these characteristic and dangerous symptoms did not appear before the 22d day, presented an *original* typhæmic process attacking the encephalon. We take another view. We are of opinion that in both these cases *originally* there was only abdominal typhoid fever, which in the first case also extended to the mucous membrane of the lungs, but in both cases *secondarily* also to the brain. Pathologic anatomy shows that typhoid fever *first seizes on the meninges*, so also in this case. During the typhæmic blood-crisis also the cerebral substance may have been affected. This then explains why in these cases, as well in those of scarlatina, the dangerous cerebral symptoms disappeared so quickly after the use of *Zincum*, while the process of the original disease, which in neither case had any closer relation to *Zincum*, took its further normal course.

HIRSCHEL, indeed, also labors to deduce an image of typhoid fever from the symptoms of *Zincum* (as ELB did with respect to miliary scarlatina), and thinks that even if the typhoid fever caused by *Zincum* does not fully cover typhoid fever it nevertheless shows a simultaneous depression of the central parts of the nervous system *and of the mass of the blood*, **similar** to typhoid fever, and that it may therefore in certain circumstances be advantageously used in this disease.

*Unless we regard the moist skin as a partial crisis for this intercurrent affection.

But we believe that the cosmic evil influences, causing scarlatina and typhoid fever, cannot be one and the same, so that, perchance, they may produce to-day in one individual scarlatina, and to-morrow in another individual typhoid fever. We cannot therefore assume on the other side that one and the same harmful agent, here *Zincum*, may produce forms of disease which *essentially* correspond to both these different diseases; we are rather of the opinion that *Zincum* corresponds in its physiological effects neither to scarlatina nor to typhoid fever. Both of these diseases are primarily blood-diseases and arise from a cosmic poison, a malaria, received into the blood, causing an extraordinary depression of the nervous system, and especially of the trophic part.

This phase of these diseases, which does not properly belong to the normal course of these blood-diseases, is the phase in which *Zincum* is of use.

Zincum according to our view does not primarily act on the blood; it does not primarily change the proportions in its mixture, but it solely rules the blood and the lymphatic system from the motory or sensorial side of their vessels by acting in a checking manner on the circulation, so that disturbances in nutrition arise which deeply depress the general feeling, produce general weariness and diverse debilities, less specially in the directions of single nervous rays, as may be seen from the following very characteristic symptoms of *Zincum*, which especially touch the general feeling. These symptoms only receive their true explanation by a further comparison with the various conditions just described as occurring in scarlatina and typhus and cured by *Zincum*.

Besides the symptoms already cited, 89, 99, 1028, 1333 and W. 149, they are:

4. Peevish, taciturn mood, especially in the evening.
- 41.* Fits of great talkativeness.
45. Good-humored and talkative.
46. Incapacity for all work (after vomiting); he feels best when lying down with closed eyes.
48. The ideas lack connection.
55. Sensation of weakness in the head, especially above the eyes.
76. Dull pain in the forehead with unusual impatience.

*This has a special relation to the case of typhoid fever related by HIRSCHHEL.

W. 129. Noticeable sinking of the strength and general internal discomfort and suffering.

W. 130. † His strength is deeply depressed, the whole organism is violently affected.

W. 131. The vital turgidity is considerably diminished.

1274. When walking, great weariness in the houghs and in the sacrum the whole day.

1276. Suddenly at noon a general weakness in the limbs with trembling and a sensation of ravenous hunger, more while standing than while sitting.

1278. Languid, prostrated in body, frequently, especially after dinner, also at times with tremulousness and heaviness of the head.

1280. Great lassitude in the limbs.

1281. Sudden swoonlike languor while standing, so that she could hardly reach a chair for faintness.

1289. Extension and stretching of the body and of the limbs with pale, sunken face.

1252. Fit of tremulous weakness of the lower limbs, with great paleness of the face; it went off on walking.

1320. Vivid dreams rendered the night's sleep uneasy.

1327. Restless night; on waking up he screams as if crazy that geese were biting him.

1360. Heat of the face without headache, with cool body, all the forenoon.

1369. Sensation of heat with coolness of the forehead in the evening.

1370. Heat and thirst with cool skin almost all over the body.

1029. Cool hands.

1191. Cold feet in the evening, continuing cold for a long time in bed.

W. 99. Sensation of cold in the extremities.

W. 100. Coldness of the hands and feet.

395. Thirst in the evening, till lying down, with increased bodily warmth.

396. Thirst with heat in the palms.

Hitherto we have only considered acute and feverish diseases,

†In consequence of a trial continued for four days with increasing doses the prover, who, as Werneck relates, felt in general very well before the proving, so much decreased in strength after the beginning of the proving and felt such debility, and the organism was so much affected, that he was compelled to end his proving.

in which, owing to the mutual reaction of nerve-life and blood-life, differing opinions may arise; all the less doubt is there in *chronic* cases. We find in *Rucckert's Klinische Erfahrungen* (Vol. 1., p. 212) the following case: A girl of 24 years, robust and of regular menses, suffered for 4 years from a *pressive tearing in the occiput*, shooting in the right eye, and tearing and shooting in the ears and alternately in the teeth. These attacks with every year increased in intensity, until at last *her mental faculties began to suffer*. *Belladonna* 30 removed the shooting in the eye, but only alleviated the other states. *Zincum* 30 cured her in 13 days.

The variety of pain here indicates that the headache was of an inveterate *rheumatic* quality, which has its seat chiefly in the meninges, for it was a *pressive tearing*, extending even into the ears and teeth.

Pathological anatomy has shown by the microscope that the so-called glandulæ Pacchioni on both sides of the great falx on the arachnoidea cerebri—which frequently pierce the dura mater and rise above it like little mounds and form corresponding depressions on the inner surface of the skull—that *these glandulæ Pacchioni are no glands at all, but the products of morbid exudations. And these glandules are found especially large in men who habitually suffer from headache and also in drunkards.*

Now these experiences justify us in assuming that the origin of the above-mentioned disease is also to be sought in the meninges, and that through the long continuation of the disorder even the vegetative forces of the brain were alienated whereby, as a secondary effect, the mental powers decreased. This case is the more characteristic, as we do not here have before us acute conditions, in which in the rush of action, primary and secondary effects are not so sharply or clearly to be distinguished. This is of great importance in judging of the *Zincum*-disease in its relations to the brain.

We have one symptom also in *Zincum* which is based on an intense acute headache in the meninges, though it offers nothing analogous to the above-mentioned case, it is:

78. Pain as if from a torn condition of the whole brain.

But the case above cited has in its favor the following symptoms of *Zincum*:

97. Pressure in the right side of the occiput.

98. Pressure in the occiput for several hours; after walking in the open air.

100. A dull shooting pressure on a small spot in the occiput.

124. Tearing on the right side and the left of the occiput.

125. Tearing in the occiput on the right side, with dull stitches in the upper part of the head.

232. *Constant keen tearing stitches, frequently deep in the right ear near the tympanum.*

233. Shooting and tearing on the left ear close to the lobule.

317-324. Contain *tearing* and shooting toothache; mostly in the upper molars.

These are the symptoms corresponding to the rheumatic character of the pain in the occiput, which, according to symptom 63 cited before, may extend *deep* into the occiput, and the seat of this pain is in the integuments of the encephalon. That as a further consequence *Zincum* may cause a depression of the mental powers suffering in sympathy may be seen from symptoms 50, 53, 57 and 83; also:

49. Difficulty in comprehending, and also in connecting thoughts.

51. Forgetfulness of what has been done during the day.

52. Great forgetfulness.

H. Great weakness of the memory,

as also the fact that according to symptom 83 the pains in the forehead impede the thinking faculty.

In the summary given by FRANZ (l. c. 157) for the use of *Zincum*, with reference to the results of the proving he emphasizes with respect to *headache*, that the pains in the occiput and in the middle of the forehead are rather pressive and drawing, and *that they are primary* and precede other bodily states (such as pains in the limbs, sensation of paralysis) or are continuous with them. Here we would only remark that drawing pain is only a lower degree of tearing pain. We have therefore found a similar series of phenomena in *Zincum* as in the preceding case of disease healed by it; for in this also the decreasing mental powers are only consequences of the constant occipital pain.

From this and the previous cases we think that we are also able to deduce a differential diagnosis between *Belladonna* and *Zincum* in cerebral diseases, in which these remedies vie with one another.

Belladonna, indeed, also acts on the brain and on the central ganglionic system, but in such a way that through its immediate relation to the sanguineous and to the capillary system it

causes congestive and inflammatory states in the cerebral system itself, but its integuments are only drawn into sympathetic suffering in a consecutive and secondary manner; but *Zincum* possesses no immediate relation to the sanguineous system itself. *Zincum* primarily acts on the sensitive sphere of several cerebral and ganglionic nerves, and, indeed, by preference on their serous integuments, *i. e.* the meninges and the inner sheath of the nerves. *Zincum* affects the circulation in this sphere only mediately through the vascular nervous system. Of course it is seldom possible to draw such a sharp diagnosis in any given case of disease; and this is the less possible since also in reality there is no such sharp distinction in the disease itself. Very often, therefore, *unless peculiarly characteristic secondary symptoms decide for us*, we can only conclude back *ex juvantibus et nocentibus*, or at least *ex juvantibus et non juvantibus*.

If *Belladonna* seems to answer, and if the brain itself is even secondarily sympathetically affected, it will in any case remove a part of the symptoms, *i. e.* it will diminish the progress of the disease; and if it does not satisfy the more essential symptoms of the disease then it is probable that the process started from the meninges, and then the indication for *Zincum* appears. Here also *Bryonia* is more closely related, from which *Zincum* is distinguished by the fact that *Bryonia* seems to act more directly on changes in the blood, and only through this excites the vaso-motor nerves, but nevertheless excites them actively, while *Zincum* acts on them directly and passively.

Thus, I think, also Hartmann's* indication is justified, who says: Incomparable in the first stage of dropsy of the ventricles of the brain is *Zincum* in the second and third triturations. I give it twice an hour when *Belladonna* is of no use. I have never given this medicine in vain, and in twelve or twenty-four hours the morbid state was at once completely removed.

Now let us consider another chronic case:

♁. WILCOX† relates: A man, æt. thirty-four years, who for years had been suffering from such violent *attacks of vertigo* that he would fall down several times a day, though without losing his consciousness. With this was a *dull pressive headache in the forehead* and crown, weakness of the memory, pain in the back and obstinate constipation. Sometimes bright blood would be discharged with the fæces. Much rumbling and discharge of

**Specielle Therapie*, Bd. 1, S. 540.

†*Allgem. hom. Ztg.*, Bd. 61, S. 163.

flatus with a sensation of heat in the rectum, urine at times very pale. *Sleep heavy and unrefreshing* with frequent restless dreams, so that the patient felt *sleepy all day*. Mood is very irritable.

Prescription: *Zincum* 30, two pellets; every sixth day a dose, continued with some interruptions for about four months.

Result: Vertigo less frequent and finally entirely removed. After these four months he made no further complaint, except that after rising there would be some sensation of heaviness which went off during the day.

While in our accounts of cures hitherto we have seen the curative action of *Zincum* limited to the cerebral affection either because the object treated was an independent morbid process of the brain and its integuments, or because this process had to be compelled to act secondarily to another diverse process of disease; we have here a case where the curative action of *Zincum* extends not only to the sensorium, but much further. The morbid process in this case, indeed, also started from the head and, indeed, from the meninges, as we may conclude in all probability from the dull pressive headache in the forehead and crown. The vertigo and weakness of the meninges show a sympathetic affection of the cerebrum in a peculiar manner, and these symptoms, strange to say, first diminished in consequence of *Zincum*. But at the same time the accompanying abdominal troubles found their master in *Zincum*, to which we will at present only call attention, but we shall come back to it later.

But let us first examine the case reported by DR. SCHMIDT.* With an unmarried lady of forty-six, in the clamacteric period of life, there arose insane ideas, with anguish, the cause of this state lay, as was said, to be in some vexation and grief, through which she had passed two months before. She thought she was about to be brought into court because she had done wrong. She passed her nights without sleep, while she had an unrefreshing tired sleep by day.

This disturbed state still continues; she believe that the devil is pursuing her; this is attended with heat of the face and head; the face is sunken; in the rest of the body moderate heat often alternates with cold. Her head feels giddy, her walk is unsteady. Lack of appetite, indolent stools, turbid urine with sediment like brick dust. Awakened from sleep she feels *great*

**Homœopathische Arzneibereitung and Gabengrosse von Dr. Geo. Schmidt, Vienna, 1846.*

languor and cannot recover herself at once. She feels broken-up, is very sensitive, more lachrymose than angry. Pulse is unchanged as to rapidity, but *unequal as to the strength of the beats.*

Venesection and purgatives have been used without effect. Oxide of zinc triturated thoroughly with sugar of milk was given her every four hours, one-sixth grain as dose.

After the first dose there was a brief nausea, but in two days she felt relieved as to every point. In eight days she did not complain any more of any morbid symptom.

In both of these cases, in which the cerebral functions were impaired, there were: "Vertigo threatening a falling down," or, at least, "an unsteady walk," disturbance of the mind by weakness of memory or insane ideas, unrefreshing sleep in the morning and drowsiness by day, insufficient evacuations; there was no fever, and while in the one case the dull pressive pain in the forehead and crown may have pointed to an attendant and affection of the meninges the other case showed nothing of the kind. With insane patients, however, chronic meningitis is nearly always found, nevertheless this case, if viewed as a case of insanity at all, owing to its brief duration, can only be viewed as an acute case; this does not, however, exclude the congestive character with respect to the brain and meninges.

In both these cases, however, the curative action of *Zincum* was not limited to the clouded brain, but all the accompanying phenomena in the remoter organs were removed at the same time. It is hard to decide from these communications which of these complaints were the primary ones and which the secondary; but in either case the secondary phenomena also lie within the curative action of *Zincum*. Their essential character is depression of nutrition and of the blood-life. But in the former case they extended over the back to the abdomen, and lie in the domain of the sympatheticus.

The symptoms of zinc corresponding to the two cases are the following:

(a) With respect to the cerebral symptoms: 22, 24, 62, 64 (already cited) and

67. Vertigo, as if he should be struck by apoplexy, with fear of falling down.

W. 132, 133. Vertigo—also with flying heat.

11. Afraid of thieves or frightful forms, while waking, as if in a feverish phantasy.

14. Despondency.

32. Excited imagination.

W. 165. Unrest of the spirit, as if he knew he was guilty of a crime.

(b) The symptoms referring to the general health have been already cited.

(c) With respect to the accompanying symptoms there are:

893. Pain in the back, more while sitting down.

894-904. Many painful symptoms in the back.

Hn. Pains in the back (as a curative effect).

666. Discharge of blood from the anus.

599. *Hot flatus is frequently passed, both loud and noiseless, in the evening.*

600. Hot, very fetid flatus is passed after dinner till night.

582. Movement of flatulence in the abdomen.

595. *Severe and frequent rumbling in the abdomen.*

596. *Loud grumbling in the abdomen, severe and frequent but painless.*

W. 63. Groaning and rumbling in the intestines.

675. Frequent and somewhat increased micturition, the urine varying in color from watery to citron-yellow color.

681. The scanty urine becomes turbid like clayey water.

682. The urine passed at night is in the morning quite turbid and of clayey color.

We again call attention to the fact that *the general depressed feeling* which manifests itself in weakness and in defective nutrition, beginning with sleepiness feeling in the morning as if there had not been enough sleep, even to a total decrease of vital turgidity, a total sinking of the strength with internal discomfort and suffering, *is a primary, independent phenomenon proceeding from the sympathicus and from the ganglia*, and that the head and mental powers have proportionally very little immediate part (as has been proved clearly and unmistakably, especially by the provings of WERNECK), and that these disturbances of the general feeling were present in all the clinic cases hitherto reported, only in various degrees, and that these symptoms are especially characteristic for *Zincum*.

This is already and particularly shown in the following.*

A delicately built, very affectionate and on the whole healthy young lady of twenty-three years, whose occupation for a living consisted chiefly in sewing and knitting, had become much af-

**Frank Magaz für phys. and klin. Arzneimittellehre and Toxicologie, Bd. II, S. 902 (ans. Hufel. Jour. Bd. 69, S. 119, told by MUHRBECK.)*

fectured bodily and at the same time much distressed mentally, in nursing her old father, though she had not felt any morbid symptoms except bodily lassitude. But when the father seemed to have recovered and she could get her rest and return to her accustomed work there appeared a somnolence without any other disease except total lack of appetite, while her tongue remained clean.

When she sat down to her embroidery-frame or to her sewing-table there began a deep sighing, the needle fell from her hand, she sank back in her chair and fell asleep, while her eyelids were spasmodically closed and her eyeballs at times rotated under the closed lids. After this sleep had lasted about five minutes to one-quarter hour she began to weep or sing, or sometimes to talk without connection, then she awoke for some minutes, would fall asleep again after one-quarter to one-half hour and awake in the same manner. I was called in on the 19th of April, when this state had lasted eight days. I gave at once Zinc. oxyd. alb., daily three times, at first one and a half grains, then I daily added one-half grain; she was to go into the open air, if only for a few minutes, between times. When she had come to four grains per dose she felt some slight nausea, and the somnolence vanished permanently. Gradually the doses of zinc were reduced in the same ratio. The patient was totally restored without any other medicine.

Here we have an example of purely *nervous disorder* which the relator diagnosed as "*Somnambulism.*" The physical and mental over-excitement acted on the nutrition, impairing it. We see bodily lassitude, and, corresponding to it, a checked sensory activity—sleep—and *checked* activity of the vagus; lack of appetite without any gastric cause. The reflectory actions of the muscles (rotations of the eyes) are here of a secondary nature, but are also within the reach of the activity of Zincum, as we have already seen. Zincum also rapidly relieved all these symptoms.

Now physiology teaches that the sensory impressions of the sympathicus are usually unconscious, therefore the centripetal excitement reaching the spinal marrow and the brain did not come to the consciousness of the patient—Zincum acts in a similar manner. It acts *first of all* on the sphere of nutrition, it is received by the sympathicus and vagus, at times also by the sensorial sphere of some other cerebral nerves and the ganglia and fibres of the sympathicus which accompany them, e. g. that

of the trigeminus; and it excites their sensorial sphere, checking and altering the same. In this case it is the encephalon itself, the oculomotorii and faciales which suffered in sympathy. But all this *with the exclusion of the sanguineous sphere*, and the nausea, excited here—as in the case of Schmidt*—by too large a dose of *Zincum*; indicates the consciousness of the reception of *Zincum* in the sphere of the vagus.

THE STORY OF PROVERS WHO ASSISTED HAHNEMANN.

By Thomas Lindsley Bradford, M. D.

W. CLAUSS, C. A. CUBITZ, JOH. GOTT. FLAMMING.

No data of these gentlemen has been discovered.

KARL GOTTLOB FRANZ.

Karl Gottlob Franz was born May 8, 1795, in Plauen in the Royal Saxon Voigtland where his father was a respectable well-to-do citizen and baker.† After attending the high school here and being fully prepared for college, he went, in the year 1814, to the University of Leipsic to devote himself according to the wishes of his parents to the study of theology, but soon following his own internal impulse, exchanged this for the study of medicine. In Leipsic he attended the lectures of the most celebrated teachers in this department and acquired a thorough knowledge of Allopathic medicine. From his childhood, owing to a wrongly treated cutaneous eruption, he had suffered from various considerable chronic ailments, and he found himself compelled in Leipsic to seek medical help. He was induced by another medical student to apply to S. Hahnemann, who was then living in Leipsic and lecturing on Homœopathy.

This meeting decided the future scientific direction of Franz, for as he was indebted for the restoration of his health then very much shattered, to the medical treatment of Hahnemann, his conversations and communications concerning medicines and especially concerning Homœopathy induced him to give par-

*A large dose of a good trituration is in every case more effective than a large dose of the crude drug.

†*Archiv fur die hom. Heilkunst*, Vol. xv., pt. 3, p. 167.

particular attention to the latter. Since the power of truth shows itself always and gloriously victorious with all pure, unprejudiced minds, and fills them with the deepest love for the truth the more they become familiar with it, so also, here. After having convinced himself theoretically and practically of the reality and worth of Homœopathy our Franz became its zealous friend and follower. As such he joined himself closely and trustingly to Hahnemann and the little troop who shared his views, and he especially enriched our knowledge of remedial agents with many and important symptoms which were the result of accurate and conscientious provings which he undertook with much intelligence, exactness and with considerable self-sacrifice.

The *Materia Medica Pura* of Hahnemann and the *Archiv für die homœopathische Heilkunst* give weighty testimony to these meritorious efforts of our friend. His name is often found in them, and it will continue to be mentioned with honor among the most efficient investigators in this field as long as genuine provings are valued and estimated according to their true worth.

Although he was made happy on the one side by the ever brighter light of the newly gained truth, there was no lack on the other hand of hardships which lay in wait for him on this new and thorny path. To his fellow-students who did not know Homœopathy except from the presentation of their teachers and thus only in a very defective and perverted manner, Homœopathy was an abomination, and everyone who received it a fool; thus he was shunned, mocked, and was also distressed in many other ways under the pretext of medical trials. So his stock of medicines was repeatedly sealed up and confiscated, and he himself on account of unauthorized cures, as they were called, was subjected to considerable fines; though many others of his fellow-students did the same, only not in the hated Homœopathic manner.

In the year 1820 he was even involved by some physicians of Leipsic in a very distressing law-suit lasting several years, though it ended favorably for him.

In spite of these harrassing and discouraging trials, he nevertheless remained immovably faithful to the good cause and advanced it by word and deed, as well in its internal development as against attacks from without. In the year 1825 he thought it best to accept a medical diploma. On this occasion he wrote and defended his inaugural dissertation: "Monographiæ de

labio leporino, specimen 1." Shortly afterwards he accepted an invitation of the Countess von Trautmannsdorf to Vienna, who wished to have a Homœopathic physician near her to direct her Homœopathic cure. He remained in this relation at Vienna and at Pressburg for nine months and returned to Leipsic rewarded by the satisfaction of the Lady Countess which she also testified by valuable presents and keepsakes. He then devoted himself with zeal and success to his Homœopathic practice.

In the year 1827 he married and lived a happy though childless marriage life. In his extended practice he enjoyed the firm confidence of his numerous patients, and also the most favorable results in his purely Homœopathic treatment of the same, so that a happy future seemed to open before him, recompensing him for his many trials. Unfortunately, however, the germs of the chronic malady which had been latent since his youth, developed anew, causing the production of the most painful and destructive ailments, namely, those of the liver and of the bladder. Later, also that of the lungs; which organs in the autopsy after his death were found in a state altogether precluding the possibility of cure. These long continued and severe bodily sufferings, as may easily be conceived, operated to check his literary and practical activity, so that during the last years he could only practice but little and still less could he communicate from the rich treasure of his experiences to the art to which he was so entirely devoted. Nevertheless his last efforts and his last wishes were devoted to Homœopathy, and to his patients to whom he had ever been a loving, faithful and careful friend and physician. So he departed November 8, 1835, peacefully and quietly, after unspeakable bodily sufferings, faithfully tended by his excellent wife and several trusty friends.

His memory will ever be dear to those who were more closely acquainted with him and to all friends of genuine Homœopathy.
 Sit illi terra levis!

STAPP.

Hartmann says:* Franz, at the time I made his acquaintance, was Hahnemann's assistant. He was a man of great intellect, but for many years was grievously oppressed by bodily sufferings which at length brought him to an early grave. He went to the University a year before I did, to study theology; he came to Leipsic out of health, and after taking medicine for years, without any considerable progress towards the restoration of his

**N. W. Jour. Hom.*, Vol. iv., p. 186. *Med. Couns.*, Vol. xi., p. 240. Kleinert's *Geschichte der Homœopathie*, p. 100. *All. hom. Zeit.*, Vol. xxxviii., p. 321.

health, which he had lost in consequence of a badly treated eruption, he came to the determination to take no more, and it is probable that, if he had carried out this purpose with his usual firmness, he would not have been introduced by a friendly medical student to Hahnemann and his new doctrine. He resolved to consult Hahnemann, and was not only cured, but found that Hahnemann's conversation upon medicine, and especially his clear and forcible exposition of his simple method of cure, had awakened in him quite other desires than those with which he had taken leave of his parents; he changed his purpose, became physician, then Hahnemann's Secretary, and indeed his very right hand man.

Assuredly few would have shown such perseverance as he did. As is well known, Hahnemann, at that time, no longer visited patients; those who wished to consult him came to his house, and where this was not possible they sent some friend; hence, Hahnemann had no further need of an assistant, and Franz would have been of no use to him had he not engaged in artistical and merely mechanical labors. He was a good botanist, at least he knew all the officinal plants accurately and their peculiar localities; he had spared no pains to make himself exactly acquainted with the peculiar soil of every species of plants; when he knew this he gave himself no rest till he had traced the plant, accurately, through all its known conditions and relations.

When it was once in Hahnemann's collection then no time was lost in preparing it as fast as possible for medical use; both then labored with diligence—no one was ashamed to perform the humblest labor, and the chemical laboratory was a sanctum from which we were as difficult to drive as a fox from his burrow; but, together with the artistic labors, there was a two-fold mechanical labor for which no one envied Franz; indeed, I would have preferred the most laborious out-door employment; in the first place was the arranging of the symptoms of the drug in accordance with Hahnemann's previously directed scheme, which must be done nearly every day, lest the new material constantly coming in from the prover should accumulate on his hands; secondly, the frequent copying of each particular symptom, so as to arrange them alphabetically in their various locations. This was Franz's almost daily labor, and he engaged in it every day with new zeal, never wearying, so that, by his increasing amiability, he might gain Hahnemann's esteem and confidence and that of his family.

It may be thought that he was a machine. By no means. A man of such fine intellect might well give himself up to mechanical labor, from love and esteem of such an extraordinary teacher, but so to mistake his position as to consider him fit for nothing else would argue but little knowledge of his character. He belonged to those most eager for the spread of Homœopathy, and after he was cured he became an earnest prover and greatly enriched the *Materia Medica* at this time and later with provings valuable for their accuracy. He was later engaged alone in the study of certain remedies, the scrupulous proving of which he undertook with great care and precision and with no trifling self-denial. Hahnemann's *Materia Medica* and the *Archives* (Stapf's) bear abundant testimony to his meritorious labors.

* * * * *

In 1821, at the instigation of Dr. Clarus (of the Leipsic University), the Homœopathic medicines were taken from the house of Hornburg and Franz, on the part of the Court of the University and the first actuary and by the aid of the two beadles, and were burned in St. Paul's church yard.

A prosecution befell him in case of a lady who suffered from phthisis florida. As all patients of this description ever hope to regain their health by change of physicians, so did this one; she had felt passably well under Franz's treatment, but this did not satisfy her; she wanted more; she wanted to be cured—a very reasonable desire, which she hoped to realize by subjecting herself to the treatment of Dr. Clarus. The Counsellor came, and a bitter accusation of his predecessor ensued; he was reproached with many sins of omission to which the death of the lady was attributed, though she was previously doomed to a certain death; in addition to this a second and third accusation was brought against him; he had practised, being as yet unqualified, and more than that, had dispensed his own medicines. This was surely enough to put the unlucky Franz out of the way of doing mischief, if not forever, at least for a long time, and so it happened; he committed the affair to an experienced lawyer and betook himself for a time to his parents at Plauen, where he was compelled to stay half a year on account of this prosecution. Although nothing material could be urged against him, yet he was condemned to pay the costs which had accumulated beyond all reason, and Leipsic was lost to him as a field for medical practice.

It was Franz who suggested at the celebration of 1829 the idea of the "Central Homœopathic Union."

Rapou says: The labors of Franz exercised an important influence in perfecting our doctrines. He was an exact observer, a stranger to theoretic discussions, devoting his time to studies of the *Materia Medica*, and experimentation on the remedies; an operation painful and laborious which does not win a brilliant name, but which gained him great estimation in the minds of the more thoughtful.

I saw him with my father in 1832, he was then a man already worn out with experimenting with poisonous substances; his delicate organization had received serious injury. He weakened little by little during our stay in Leipsic, and we departed regretting that we were no longer able to profit by the treasures of his knowledge of drugs. Fortunately the *Archives* published many of his works and the *Materia Medica Pura* of Hahnemann is partly composed of his works.

Hering speaks of Franz as "the noble self-sacrificing man."†

Lohrbacher says:‡ Of the other disciples Franz was a person of some importance. According to Hartmann's account he was a man of rare gifts, and this is borne out by his drug-provings, which are distinguished by their delicate and acute observation as well as by their preciseness. They are an ornament to our *Materia Medica*. Being a good botanist he it was who collected the indigenous plants, from which tinctures were prepared. He acted for many years as Hahnemann's amanuensis, and he preformed with diligence and perseverance the very tedious and mechanical labor of arranging the symptoms contributed by various provers into the schema invented by Hahnemann. He was a great favorite with Hahnemann as also with his fellow workers, whose hearts he gained by his mild and thoughtful nature. He died after years of suffering, in the prime of life.

He published nothing in book form.

HEINRICH AUGUST VON GERSDORFF.

But little data has been obtained. In the *Zeitung* appears the following short note of his death: "Leipsic 30 September, this day died at Eisenach, President Dr. August Freiherr von Gersdorff in his seventy-eighth year. The deceased has done much toward spreading Homœopathy.

**"Histoire de la doctrine medicale homœopathique," Vol. ii., p. 140.

†"Hahn. Monthly," Vol. vii., p. 175.

‡*Brit. Jour. Hom.*, Vol. xxxii., p. 456.

He was a nobleman living near Eisenach. In the proving of Carbo veg. Hahnemann speaks of him as State Councillor Baron von Gersdorff.

WRITINGS.

Cure of dangerous Diseases by Idiosomnambulism and by the Homœopathic Medicines prescribed by the patient when in a magnetic clairvoyant state. Eisenach, Baerecke. 1834.

FIVE CLINICAL CASES.

1. *Parotitis*.—One Guru Charau Dhar, of Kumvakar, in District Cuttack, in Ocripa, aged about twenty-two, gardener by occupation, suffering from the disease three days, to day (1-7-94) being the third.

Symptoms and history.—Both parotid glands inflamed, having large swelling and redness on both glands; earache on both the sides; both palpebræ conjunctivæ red; no stool since commencement of the disease; difficult deglutition.

Treatment.—*Merc. sol.* 6, half a drop a dose; to be taken one dose twice daily. Four doses given. Ordered to stop his usual bathing. As for his diet he was ordered to have *Khinsree* (soft rice and grains or peas, etc., cooked together.)

3-7-94, 7 A. M.—Inflammation of both sides less, and face reduced in size; palpebral conjunctivitis present in both eyes; earache of both sides present; difficult deglutition present, one stool this morning; tongue clean, but having slight whitish coating in the middle.

Treatment.—Repeat *Merc. sol.* 6, four doses as above. Bathing and diet as above.

Remark.—Patient never came back to the dispensary for further treatment, but I saw him passing by me when I was out on the 8th inst. I found him recovered, and on inquiry I came to learn (this writing in November, 1894,) that he was recovered and had to adopt no other measures for the treatment save the medicine mentioned above. Eight doses (four drops) of the medicine restored the patient to perfect health and in four days being under treatment, while others labored weeks under the disease under *Kabirajee* or Allopathic treatment.

2. *Blood-stools*.—A patient, Mulluck Chaud by name, aged about 25 years; color fair; seen on the 20th July, 1894, at about

9 A. M., with the following history and symptoms: One or two days before this illness he had to take fowl-curry with an excessive quantity of chillies as condiments. At about 8 or 9 A. M. yesterday he got an attack of a sort of gnawing pain in the stomach. The pain was a very severe one, and for which he was restless all along. About an hour after the commencement of the pain the patient passed one stool, first hard and then watery. Patient seen after the first stool; restless, with thirst for large quantity of water, tongue clean, weakness of the joints of limbs; trembling of limbs; feeling as if chilly; occasionally perspiring; blue color of the palmer surface of the fingers; pupils dilated.

Seen again afternoon, passed three blood-stools.

Treatment.—*Ars.* 6, half a drop a dose, to be taken every two hours a dose. Given four doses.

Night.—Repeat the above medicine as above, but every three hours a dose. Given four doses.

21-7-94, *Morning.*—Two blood-stools last night and one blood-stool this morning. No restlessness; no pain in stomach, but gets it occasionally, pupils yet slightly dilated; no trembling of limbs; no weakness of joints of limbs; no thirst; improving.

Treatment.—Repeat the above medicine as above, but twice daily. Given two doses.

Diet.—Nothing yesterday. Barley water to-day.

23-7-94, 9 A. M.—No complaints yesterday; yesterday felt hungry; one normal stool yesterday. No medicine yesterday. No medicine to-day.

Diet.—Soft rice and fish broth, two meals.

24-7-94, 9:50 A. M.—Well yesterday and well to-day. One normal stool this morning. Bathing ordered to-day.

Result.—Recovery.

Remark.—I have something to remark on this case. As mentioned above, the palpable cause of this dire disease had been the excessive quantity of chillies taken with the fowl-curry, and most of the symptoms indicated *Ars.* to be the remedy proper for the case. Is *Ars.* an antidote to chilli symptoms? I saw the patient after he had passed the first stool, which was not a blood-stool nor a watery liquid one; but his restlessness, his perspiration, his change of color of palmer surface of his fingers to blueness and thirst, too (though the latter one with some doubt, as it was for large quantity of water) made me to remember

that it was an incipient and a very bad cholera case for *Ars.* No medicine was taken at my first visit. My next visit was afternoon, when I found him passed these blood-stools. Medicine was given and taken after this visit: four doses afternoon and four doses at night and two doses next day. These all make ten doses, each dose of half a drop. Then five drops of the medicine in all were required to cure such a queer case. Is *Ars.* thirst for a large quantity of water? Look here, Mr. Allopath, the economy of Homœopathy and the rapidity with which it reaches its goal!

3. *Headache.*—A patient named Dyatyari Khetri, one of our servants, aged about thirty years, an inhabitant of Jajpur, in Cuttuck, came to my dispensary on the third day of his illness with the following history and symptoms: In the beginning, on the past fourth day, he worked in the morning in the garden which produced in him a good deal of perspiration when (in that state of perspiration) at about 11 A. M. was compelled *to work in water* of a pond of the garden to collect water weeds grown there till 1 P. M. The same day he first felt aching in both legs at about evening, did not take food that night; felt feverish the same night at about 1 A. M., the fever being with chill; no thirst; heat and then copious sweat. This fever lasted till morning. No more fever. *Headache since morning* day before yesterday, and since yesterday it has been much aggravated.

Present symptoms.—Headache both sides; *skin of head and part of face tender; heaviness of head* excessive, so much so that when he brings his head forward he feels as if it falls down; *feels somewhat better by compressing the temples; Fluent coryza of both nostrils; occasional tearing (lachrymation) of eyes; slight palpebral conjunctivitis of both the eyes; eye lids slightly swelled; pupils contracted.* Coughs with thin expectoration. Moist cough. Feels pain in chest about and beneath the sternum during coughing. *Submaxillary glands swollen and tender, and less so the parotids.* Tongue colored with *pair* juice. Taste bitter. Appetite not good. Bowels open daily once, but not freely. *Aggravation of headache by movement.*

17-9-94, 9 A. M. *Treatment.*—*Chin.* 30, globules, two globules per dose; to be taken a dose once daily. One dose given.

Diet.—Sago and sugar candy. Bathing stopped.

5:30 P. M. Better. Immediately after he took the medicine he felt relief of headache, and so it's going on now; only tenderness of scalp, slight coryza and slight cough remaining. No heaviness of head. On the whole, he is wonderfully well.

Treatment.—Placebo.

Diet.—Sago and sugar candy.

The next day he felt slight headache in the morning. No more medicine given. *Patient got well*, having no headache on the fifth day after taking the medicine. Patient did not come to repeat medicine.

Remarks.—Is it not a striking affair to see such a horrible headache to be cured with *two* medicated globules, the quantity of the medicine of which one may imagine but cannot measure for its minuteness? Here we have, you students of medicine, a good example of a well selected remedy. When this is done with a proper diagnosis of the disease and a thorough recognition of the cause of the case, Homœopathy does scarcely fail to make you happy with a good result. This cure one may think Nature's unaided property, but be glad to hear what the patient felt immediately after taking the globules (two): he felt as if water was poured upon a flaming fire to extinguish it, the patient getting immediate relief of the headache just after the administration of the medicine as if by an electric shock. Has Allopathy any such speedy acting thing to be boasted of?

4. *Pain in splenic region.*—A patient named Shiekh Golam Ali, aged about 60 years, seen on the 6th of September, 1894, with the following symptoms and history:

No history of being wet or getting cold. Yesterday at about 4 P. M. he first felt a very slight pain in the splenic region just below the ribs. This pain was not annoying till about 12 o'clock last night, when he changed his side in bed from right to left during sleep. The pain had been increasing since that time, but it is not so now as it had been last night. Bowels opened yesterday, day before yesterday and to-day at about 3 A. M. as usual. Taste good. No other pain in any other part of the body.

Treatment.—*Ceanoth* θ . one drop a dose; given a dose just now.

Result.—Recovery.

Remark.—Three doses more of the medicine were given to him, but according to my advice he found no need of any more medicine. The first dose, the one that was taken in my presence, was the only dose that was required. Our present patient had no enlargement of spleen, and neither was this pain a splenic one. However, *Ceanoth*. did not fail, as expressed by

Dr. J. Compton Burnett in his little but good book, "Diseases of the Spleen," to prove to be efficacious to thoroughly remove the pain. Patient recovered not to get the pain any more as yet (writing in the last part of November, 1894). *Ceanoth.* does not act on Indian spleens so efficaciously as we see in the hands of our American brethren. So it is evident that all the enlargements of the organ are not the same and one disease; and hence we cannot expect a never failing organopathic specific for the enlargement of the spleen. This is not my field here, so I wish to be excused to appear in another paper on the subject.

5. *Pain in both sides of chest.*—A patient named Shiekh Abdul Hahed, of Nagarhuba, Police Station Habra, of Baraset in Bengal, came under my treatment on the fifth of September, 1894, at 8 A. M., with the following symptoms and history: Acidity two or three hours after taking food which he takes at about 10 A. M.; pain relieved by upward or downward passage of intestinal wind; feels pain twice daily, once at forenoon and the other time afternoon, evening or after evening; pain somewhat relieved by taking food. Bowels open daily twice yesterday and day before yesterday, but before that he had constipation. Now the stools soft with slight mucus, but no tenesmus. Urination daily seven or eight times and more than this in rainy days.

Urine not colored. Drinks a large quantity of water after taking food. Three or four times micturition at night after going to bed. Thread worms passing occasionally with stools, and itching of anal orifice. No itching of tip of nose; no grating of teeth during sleep; no dribbling of saliva during sleep. Seminal discharge during sleep at night. Eructation now and then during pain. Good sleep. Had gonorrhœa at about ten or twelve years passed. Had no syphilis. Has ring worm in the groins.

Treatment.—*Nux v.* 6; half a drop a dose: to be taken twice daily an hour before meal (we having two meals in twenty-four hours generally). Four doses given.

Diet.—Milk and soft rice, in two meals.

8-9-94, 7:30 A. M. After using the first two doses of the medicine felt pain commencing after 4 P. M. on both sides of chest; then after a short while the pain of right side disappeared while the pain in left side continued till about 9 or 10 P. M.; the pain of the left side was felt like a rending one, while the pain of both sides was constricting-like. Yesterday pain commenced after 4 P. M. of less severity and of less duration, disappearing just after evening. Acidity diminished;

thirst after taking food less; bowels not opened freely, however, open twice daily, but yesterday and to-day only once daily. Yesterday at about 8 or 9 A. M. slight pain for one or two quarters of an hour. On the whole the pain as felt yesterday was half diminished. Last two nights two times micturition each night. Last two nights no seminal discharge. Taste good. To-day stool first part hard and the other part soft, not with bad smell as before.

Treatment.—*Nux v.* 6, half a drop a dose, to be taken twice daily. Four doses given.

Diet.—Soft rice with laxative vegetable curry.

11-9-94, 9 A. M.—Pain increased day before yesterday after 4 P. M., as he was late to take his mid-day diet. Bowels open daily, once rather freely than before. No seminal discharge. No thread worms. Passing water twice evening till morning. Morning pain hardly perceptible.

Treatment.—*Nux v.* 6, as above. Four doses given. Diet as above.

13-9-94, 9 A. M.—Improved. Pain almost gone. Stools better. One stool daily.

Treatment.—*Nux v.* 6, as above. Six doses. Diet as above.

20-9-94, 5 P. M.—Feels pain occasionally.

Treatment.—*Nux v.* 6, as above. Four doses given.

30-9-94.—Result. Recovery.

A. H. K. CHOUDHURY.

Satkhira P. O., Calcutta, India.

PHYSIOLOGICAL NUTRITION.

(The theories of Hensel are attracting so much attention in Europe and America that we here give a condensed translation of a paper by Dr. E. Schlegel, of Tuebingen, Germany, an eminent Homœopathic physician, on the subject. We may state that the "mineral elements" that Hensel so urgently affirms are necessary to the full development of the body, and consequent enjoyment of health may be supplied in several ways: In the Nerve and Tissue food, a powder that is simply stirred into soup, broth or taken in hot water; by means of a physiological bread-powder which is mixed with the flour before baking; by means of crackers or wafers containing that powder prepared by cracker bakeries in this country and Europe, and, lastly, in a cocoa and chocolate that is now being made. Dr. Schlegel's paper will

give every one a clear and concise view of the whole subject which even Homœopaths should not ignore, for there is no remedy for mal-nutrition in the materia medica.—Editor of HOMŒOPATHIC RECORDER.)

The publications of the physiological chemist, Julius Hensel, throw a flood of light on the subject of nutrition. The albuminous substances which form the most important part of our food need a certain proportion of mineral substances to effect a healthy growth and to sustain the continued normal activity of the body. These "earthy materials" (potassa, soda, lime, magnesia, iron, manganese, fluorine, phosphorus, sulphur, chlorine and silicic acid) form in the organism *the cohesive force* as opposed to the various gaseous constituents of the body (nitrogen, oxygen, hydrogen and carbonic acid). The albumen is very prone to dissolve into these gases—when its cohesion has been diminished, and after passing through the various intermediate stages it decomposes and putrefies.

Now it is a fact that the albumen in our cereals, and in flesh used for food, is gradually deteriorating. This deterioration is the result of our fields being continually "fertilized" with stable manure, which does not supply the more valuable mineral substances of which they are continually drained. Stable manure, solid and liquid, contains an abundance of nitrogen which forces growth, but does not supply the needed substances mentioned above. The results of this form of manuring are: that the grain is apt to lodge, and it does not rise again because the stalks have too little silicic acid and potash. The grain is small and shriveled, and the flour made from it is sticky and poor in mineral constituents, smearing the mill-stones and rollers. Other produce becomes too succulent, breaks up and rots easily, and falls a ready prey to diseases and infesting vermin.

Cattle which are fattened on produce grown on soil thus manured are liable to many diseases, and they show their craving for food containing more mineral substances by gnawing the wood-work of their mangers and stalls. A similar result has been observed in hogs fed with meat flour (Fray-Beutos), which also is deficient in mineral substances. The flesh of these hogs could not be used for packing, for it decomposed even in the brine.

Men who live on produce pastured on fields poor in mineral substances (*e. g.* on fields irrigated with sewage), more than others, are subject to diseases of the bones (rhachitis or rickets),

and succumb readily to the epidemics and maladies of civilized life. The teeth, which most abound in earthy constituents, show at this day most clearly the unnatural character of our nutrition. On the other hand, it is easily understood that grain and other produce grown on primitive soil (formed from the disintegration of granite, gneiss, porphyry and mica) show the opposite characteristics, *i. e.*, a wholesome development. It is on this account that the pasturage on mountains, where there is a thin layer of soil, and where the grass with its roots feeds directly on the stones, is so particularly favorable to the raising of cattle and to dairying; this is the reason why milk, butter, cheese and flesh from alpine countries are so savory and so healthy. If the roots of the misery of our present weakly and sickly state lies so deep, how can they ever be remedied? A radical cure will be found only in abandoning our false methods of manuring and spreading on the exhausted fields pulverized rock, *i. e.*, virgin soil; this can be done easily and in a paying manner, as has been abundantly proved elsewhere (See Bread from Stones.)

But until this method is generally adopted we shall have to remedy the present deficiencies by an artificial supply of the earthy material lacking in our food. This is best done by mixing the substances needed in a pulverized form into our flour. In this way our bones, teeth, muscles and nerves will be supplied with the substances they need. The use of such substances for the purposes of nutrition and cure, both with adults and children, is both inexpensive and harmless. These substances may be supplied either constantly or only at stated periods when there is a greater need for them. Mothers who nurse their children ought to eat physiological bread or physiological crackers. When the children are three or four months old they may be given twice a day physiological crackers cooked in a mixture of half milk and water, nervous, weak and sickly people will find in physiological bread or crackers the substances which they need to make them more active and vigorous. Physiological crackers are for some reasons preferable to physiological bread; they keep longer, are lighter and therefore more suitable for sending to greater distances and may be used in a greater variety of modes (also for soups). They are also especially convenient for persons who have no families or no opportunity to have their bread baked according to physiological rules.

Hensel has gone to the very bottom in investigating the question of nutrition, and has thoroughly solved the problem of proper substances of nutrition. All other attempts such as "infants' foods" and other substitutes are found in practice to be unsatisfactory and incomplete.

Physiological crackers should be prepared from the best wheat flour with the admixture of eggs, good milk and the best refined sugar. The proportion of physiological powders used is three per cent. of the weight.

Every one must see that the method here adopted is of the greatest importance for the welfare of each and every person.

Not all diseases, of course, are caused by the disproportion of the mineral substances entering into the human body, but all sufferers from disease may be benefited by proper mineral nutrition, as in this manner the continual endeavors of nature to produce a healthy equilibrium in the body will be very essentially promoted.

Tuebingen, January, 1894.

E. SCHLEGEL,
Practicing Physician.

THE "BEE LINE" AGAIN.

To the editor HOMŒOPATHIC RECORDER.

In your issue for November, 1894, I find a criticism on *Bee Line Repertory* by the editor of *Southern Journal of Homœopathy* which is quite unreasonable. The first point of his is of potency. The second is the omission of the section on condition of aggravation and amelioration. The third is that *Apis* is not recommended for hives. The fourth is the sense of duality is not credited to *Can. Ind.* If the critic had read the first paragraph of the preface once carefully there would have been no reason for such a criticism as this. He may be excused for his forgetfulness, but I remember him to the word "self-evident" in the first paragraph of the learned author's preface, which will not permit to pass any kind of criticism on the book except to point out some omissions of certain sections to which the author refers the readers. Those are the following:

1. As mentioned in preface there is *no separate section* opened in the book, but something is found under "Pain better" and "Pain worse" and some more were attention to be paid particu-

larly under different sections. However, it may be counted as an omission.

2. In page ten, under section Angina Pectoris, the reader is asked to refer to Gauræa, Ars.: in page nineteen, under the section "Bite," to *Gun Powder*; in page forty-six, under Collapse, to MUSK. These drugs are not given separate sections.

3. In page seventy-six, at the end of the paragraph on Typhoid fever, the parenthetical words ought to have been added: (See Alcohol, Tympanites).

If these omissions are supplied with and a complete list of medicines recommended in the book is added the book may be complete in itself without any room for criticism. If the author's "Self-evident" store is not exhausted and if he pleases to enrich the book by adding some more drugs which are to be found in his "Medical Genius," it will enhance the usefulness of the book. The bandage section in Medical Genius should be introduced in the book. Some hints on Post-Mortem Examinations, Medico-Legal Autopsy, Probable Cause of Death, Death, from Poisoning, from Hanging, etc., should be added also.

Yours sincerely,

T. C. R. IYENJAR.

City Poona, India, Dec. 28, 1894.

VETERINARY CASE.

While on my way home from a visit to one of my dumb patients, I was called in by Mr. C. to look at a mare which, he said, was subject to attacks of colic whenever taken off the farm and driven to town without being stabled at end of trip each way.

Inquiry disclosed the fact that it was renal colic. The mare was, to all appearances, sound; was in good condition and full of life; but had had three attacks within a week, and was attacked almost every week for three or four years previous.

Animal had been a livery mare previous to purchase by present owner.

I gave him three powders of *Nux vomica* θ , 5 drops in each, to be given once a day. Also gave him *Aconite 2x* *Nux vom.* θ to use if another attack came, but not otherwise.

Up to the present time there has been no other attack and no other medicine given.

I can explain the rapid action of the remedy only upon the hypothesis that the inclination to voluntary retention of urine departed simultaneously with the removal of the irritability which it had caused.

J. C. WENTZ.

Spearville, Kan.

UNSWEETENED CONDENSED MILK.

Unsweetened condensed milk, though the "First Swiss" brand has been in use in this country during some ten years past and is now carried by most of the large passenger steamers, deserves to be more widely known. The perfection to which the preservation of milk has been brought is well exemplified in this article, and when properly diluted the flavor of rich, creamy, fresh milk which it yields affords evidence in favor of the claims of the proprietors, that it is simply pure, fresh Alpine cows' milk of the highest and richest quality condensed to one-fourth of its bulk, and that it is not adulterated with sugar or any preservative.

Its thorough sterilization is also apparent, and (apart from the disadvantages arising from the continually changing quality of ordinary milk according to the food or pasturage on which the cows feed) the transmission of scarlet fever, diphtheria and other infectious diseases, for which our dairies are often responsible, is rendered by its use very improbable, if not impossible.

With these excellent qualities such a preparation cannot fail to be a useful adjunct to the sick-room dietary as well as a food for infants, and will be found especially useful in gastritis, gastric ulcer, peritonitis, etc. It is, however, in the feeding of infants that we have had most experience of the unsweetened milk. The tendency of sweetened condensed milk to cause catarrh of the stomach and bowels in infants is well known, and the resulting mal-assimilation and mal-nutrition, leading even to rickets, have caused it to be largely disused by medical men. On the other hand, the convenience of "condensed milk" and its cheapness make it still largely used by the public, especially the poorer classes. When the unsweetened milk is used we have seen no bad results and have often prescribed it in place of the sweetened with advantage. Medical men should be careful to specify unsweetened when advising condensed milk. The "First Swiss" is the only brand we have tried.

Professor Goodfellow's analysis, which we append, shows the

quality of this milk, and that it is free from added sugar. His report also states that microscopically it is free from microorganisms and that the fat globules are normal. Our own examination confirms the latter statement and establishes the general excellence of the milk when properly diluted.

Analysis:

Water,	61.3
Caseine,	9.1
<i>Soluble Albumen</i> ,	1.5
Fat,	11.7
Lactose,	14.3
Salts (mineral matter),	2.1

100.0

—*Monthly Homœopathic Review.*

This is identical with the "Romanshorn" brand of unsweetened condensed milk imported by Boericke & Tafel for the last six years.

THE PHYSICIAN'S LIBRARY.

Books are clearly indispensable, for reference and for study, to help in shaping a well-equipped mind—one that is ready when confronted by work to do, one that knows how to record old facts and new truths, and from these, as from fruitful seeds, propagate newer truths that shall bring forth fruit in future fields of use.

It remains to consider what sort of books are essential and what desirable. Beware of buying long rows of books to be used only in "future leisure," a deceitful will-o'-the-wisp that often lures one to many a needless purchase. Be warned in time!

Anatomy must have its text-book and its atlas, the latter to have handy when patients want enlightenment, a point which most appreciate very highly. Henke's is a good one, McClellan's fuller and more exact.

Physiology has yet to have its ideal manual, but its study in lectures is so fascinating that it is rarely forgotten, and doubtless for that reason seldom consulted. If you get one let it be bound in cloth, for old editions rapidly lose all value.

Chemistry needs ready and exact reference, such as in the works of Bowman, Wolff, Galloway and Attfield; but urinalogy

and toxicology must be inscribed upon the living mind indelibly.

Next in logical order comes *Materia Medica*, in which department we deem this much at least absolutely essential; an encyclopedic work, such as Allen's or Hering's or both; a shorter manual, such as Jahr's or Hering's condensed; and an old school work, such as the *National Dispensatory* or Shoemaker's *Materia Medica*.

But consider no such work superfluous; this branch should be as complete as possible and as rapidly as you can pray acquire Hahnemann's *Materia Medica* and *Chronic Diseases*, Lippe, Guernsey, Farrington, Dunham, Allen's *Handbook and Primer*, Hughes, the *Pathogenesis*, Teste, Hoyne, McMichael, Dewey, Jones, Hale, and the rest, and study them in their own light and by the light of *The Organon* till they mean something to you, and till you *think* you can write one for yourself. Get the repertories, including the *Bee Line*, and make yourself familiar with them.

Next comes diagnosis, mostly only supplementary to the clinical instruction at the college, without which books of this class are of no more value than anatomy without a full course of dissections.

Works on practice, such as Raue's, Pepper's, Flint's and Ziemssen's, generally contain enough diagnosis and pathology for early reference.

As a guide to therapeutics, Hahnemann's *Organon*, stripped of its bitter invective, is super-eminent and should be read in the original, in the fourth and fifth editions, and in Dudgeon's translation or Stratten's, but the latter is long out of print.

Next in value comes Jahr's *Forty Years' Practice*, which ought to be re edited in pocket form, and which is also the best book for a domestic guide, if one must be furnished. Next comes Lilienthal's *Therapeutics*, Minton's *Uterine Diseases*, which includes as pretty a *résumé* of *materia medica* as is to be found anywhere. Allen on *Intermittent Fever*, of which a similar remark is in order, only there are not so many drugs; Bell on *Diarrhœa*, Wells on *Dysentery and Diarrhœa*, the *Twelve Tissue Remedies*, and a host of valuable monographs and larger works.

Surgery needs Helmuth and his followers, with perhaps an old school work for contrast, but not many, for these, like physiology, biology and histology, go rapidly to new editions. Do not despise minor surgery, for a reputation is often made or lost in this field.

Know your "bones" like an "end man," but don't rattle them unless you have to.

Obstetrics and gynecology are just now enjoying a new birth and you must ask your professors; we confess to bewilderment in face of the hosts. Only do not forget these two adages: "Fear the man of one book," and again, "He who reads many books on one subject cuts the widest swath." Know at least one book thoroughly, but read many.

Hygiene, bacteriology, histology and climatology must have a corner, at least, for thought, while a good jurisprudence and *The Physician Himself*, by Cathell, may help to warn you of pitfalls in the path.

Get one of Miner's combined day-books and ledger for your accounts and study it well. Take notes of every case, carrying a little pad or blank book, and filing the sheets in an office file. You will regret it if you do not; such a habit promotes exact prescribing and wins patients.

Do not omit at least one or two journals, and borrow all the rest you can read. Belong to at least one society and contribute to its transactions and preserve them. Then with all these you will have a good working library and can add dictionaries, special works, collateral works, and all the rest you choose —*E. Cranch, M. D., Erie, Pa., in Homœopathic Physician.*

THE following extract from an address by Prof. Rosenbach, of the Breslau University, points out a great and growing evil and a tyranny that at times equals that once exercised by the church:

"Thus has arisen the conflict between clinical observation and bacteriological research. The physician diagnoses a simple inflammation of the throat, where the bacteriologist sees diphtheria with all its horrors. Thus it has come to pass that the bacteriologist knows only 'tuberculosis,' whereas the clinician must distinguish between phthisis, tuberculosis, broncho-pneumonia and catarrh—so many different species of the reactionary form.

"Thus, it may even be possible for the physician to consider a man dying, while the bacteriologist at a distance sends word in a few days that the disease is benignant—a case of cholera nostras. *Per contra*, it may happen that a man who does not feel at all sick is deprived of all human rights because he is found to be infested with comma bacilli!

"All these errors are due to a varying interpretation of 'diagnosis;' this profound divorce of practical from theoretical judgment has come to prevail, only because we have neglected individual diagnosis—the sole means of judging a case."

BOOK NOTICES.

The Life and Letters of Dr. Samuel Hahnemann. By Thomas Lindsley Bradford, M. D. 513 pp., 8vo. Cloth, \$2.50; by mail, \$2.75. Half Russia, \$3.50; by mail, \$3.75.

Opening this book at random the reviewer read the first paragraph his eyes rested upon, and having read it quotes it as a bitter but wholesome truth:

“At another time Hahnemann thus mentions the Allopathic system: ‘The small amount of medical instruction, which there is in the immense number of medical works, consists, in the cure, accidentally discovered, of two or three diseasemiasms of a constant character, as autumnal, intermittent, marsh fever, venereal diseases and cloth-workers itch. To this may be added the accidental discovery of preservation from smallpox by vaccination. Now these three or four cures are effected only in virtue of the principle *similia similibus*. Medicine has nothing more to offer us; since the time of Hippocrates the cure of all other diseases has remained unknown,’” p. 114.

And, barring what Hahnemann taught, it has remained unknown ever since. The books of five years ago are moribund, the books of ten years ago are dead and those back of that date have been sold for waste paper—all save the books written on the principles of *similia*; these are not dead but very much alive and, sooner or later, each late publication of Homœopathy is measured by their standard, and, if found wanting, quietly drifts to that bourne whence no book ever returns. That this is true of the books of both branches of medicine (Allopathic and Homœopathic)—of the books to which the practitioner looks for aid in saving a patient’s life—no one can deny, “since the time of Hippocrates the cure of all other diseases has remained unknown,” and is still unknown to all save to those who with clear eyes can match the disease with its drug *similimum*. To these the cure of disease is limited only by the bounds to which the domain of *similia* has been extended by provers of *materia medica*; others can allay pain by narcotics or cut away diseased growths, but they know no more of the actual *cure* of disease than did those who lived a hundred or a thousand years ago.

That, broadly speaking, this is literally true no one can deny; that it was the work of Hahnemann that led those who cared to be led up from the darkness of ignorance to the light of truth no one can deny. And the story of it all is told, and well told, in this beautiful volume, *The Life and Letters of Dr. Samuel Hahnemann*. There are probably many practitioners and students who think "I've no time for Hahnemann and his life. I must live in the present." This position is a mistake, for, after the materia medica, there is probably no more helpful book to the student than this same *Life*. A man might be taught the Greek language without knowing anything of the Greek history or the Greek classics, but no one would think of him as a Greek scholar. So with the Homœopathic practitioner who remains in ignorance and is indifferent to the past history of Homœopathy and Hahnemann—he is not as broad-gauged a man as he might be.

Heretofore the acquisition of a correct view of the history of Hahnemann and Homœopathy has been hampered by the scattered condition of the material. But, fortunately, this is now no longer the case, for Dr. Bradford has gathered it all in the pages of this *Life of Hahnemann* and the life of Hahnemann is really the history of Homœopathy.

It is not a book of the hour, but of the generations.

Dose-book and Manual of Prescription Writing: With a list of the official Drugs and Preparations, and also many of the newer Remedies now frequently used with their Doses. By E. Q. Thornton, M. D., Ph. G. Pp. 334 Cloth, \$1.25. net. Philadelphia, W. B. Saunders. 1895.

The title of this book describes the contents—it tells you how to write prescriptions, and those who want to know how to do that in professional style will welcome the book. It is very well printed.

A Pathogenetic Materia Medica, based upon Drs. Hughes' and Dake's Cyclopædia of Drug Pathogenesis. By the Medical Investigation Club of Baltimore, Md. Pp. 347. 8vo. Cloth, \$2.00; by mail, \$2.17. Philadelphia. Boericke & Tafel. 1895.

The Medical Investigation Club is composed of Drs. Price, Mifflin, Janney, Shower and Chandlee, all of the Faculty of the Southern Homœopathic Medical College of Baltimore, Md.

The *raison d' être* of this book is that it fills a place in homœopathic literature hitherto unfilled. This being so the book is needed, for homœopathic literature should be complete. The drugs considered are taken up in the following manner:

1st. Introductory remarks relative to the records used and the records unused.

2d. The general sphere of action of the drug, drawn from poisonings and provings, with suggestions taken from experiments upon animals.

3d. The composite symptomatology or synthesis of pathogenetic effect.

4th. The application of the symptomatology to therapeutics.

The symptomatology is drawn from the detailed statement of the individual provers, scientifically condensed and some questionable matter eliminated. Only *bona fide* drug symptoms are admitted, those experienced only by one prover are not accepted.

As a specimen of the condensation we may state that in the original records the noise symptoms of *Bryonia* are variously expressed as "whizzing in the ears," (two) "ringing in the ears," "singing in the ears," "hissing in the ears," "humming in the ears," and also as "noise" and "roaring." All this the book before us expresses in one line and six words:

"Noises in ears⁵; whizzing in ears²."

This certainly covers the noises in the ears caused by *Bryonia* and covers it, we think, effectually. "It is this composite method of expression which suggests the particular underlying state causing the symptom thus typified to which the term synthetic pathogenesis is due, and which is the salient point of the work of the Investigating Club." In other words, the provers' records are first analyzed, taken apart, and then synthesised, *i. e.*, put together again. Thus, as in example quoted, the seven provers cited *Bryonia* all experienced noises in the ear, but adopted six different words to express the quality of that noise.

Take the same remedy again. Nine of the proves experienced constipation; this and the concomitants are expressed as follows: "Constipation⁹: with small⁴, hard motions⁵, and urging to stool⁴." This seems to be a very fair condensation and to lose little or nothing in descriptive power from the condensation. This, we think, will be acknowledged even by those who will not agree with the Investigation Club in some other particulars as, for instance:

"The synthetic method has never before been applied to the

study of materia medica, and it is believed that with the preliminary health-record its application in the future will produce a result more closely approximating a scientific materia medica than any that has yet been compiled. In fact, until a more scientific method is formulated, it is probable that the plan here adopted must determine the future status of the homœopathic materia medica."

The "Therapeutic Application" that follows the synthesis of each drug is an able summary, and will be read with peculiar interest by all.

The book is printed on an unusually fine quality of paper, which combined with clear type and good ink makes it a pleasure to read. The indexing is unusually full and complete.

Internationales Homœopathisches Jahrbuch. Annales homœopathicar von Dr. Alexander Villers. Volumen II. Dresden, 1894.

Dr. Villers' Jahrbuch is divided into two parts, paged separately. The first part is a directory of homœopathic physicians in all parts of the world, first by countries and then by names. This part covers 238 pages. The second part is Bibliographia Annorum 1891-1893, an index to the articles in homœopathic journals during that time. This is followed by Nomina Autorum, in which the names of the writers are indexed. The book, in paper cover, sells for \$1.25, by mail \$1.36; cloth, \$1.50, by mail \$1.62.

NOTES ON BOOKS.

Year-Book of Homœopathy.—In 1870 Messrs. Boericke & Tafel published a book containing in a condensed form the articles that had appeared in the American, English, and some of the German and French periodical literature of the year 1869. Excerpts were also included from the Transactions of the American Institute of Homœopathy and from those of certain of the State homœopathic medical societies. This book was ably edited by Dr. C. G. Raue, assisted by a corps of editors. The series was continued for six years, when it was allowed to cease. It is the intention of Messrs. Boericke & Tafel to revive this annual record of homœopathic literature, provided a sufficient number of subscribers can be obtained to justify it. The subjects

embraced in the American, English, German, French, Italian and Spanish homœopathic literature of the year 1895 will be carefully condensed and arranged in the same general style as in the previous volumes, of which this is to be a continuation. The American national and State homœopathic society transactions will be also collated. Following the plan of 1870, the matter will be arranged under several general heads; there will also be a bibliography of the books published during the year. The editor-in-chief will be Dr. T. L. Bradford, who will be assisted by several other physicians. These year-books are really of the utmost value to all progressive physicians, embodying, as they do, *all* the medical progress of the year scattered through journals and transactions of societies. Every physician should subscribe. The price *to subscribers* will be \$2.00. The book may run anywhere from three to five hundred pages.

That *The Homœopathic Text Book of Surgery* will be among the most acceptable works ever issued from the Homœopathic press is attested by the list of authors and subjects. Dr. Wm. Tod Helmuth, Sr., contributes the chapters on Tumors; Dr. Wm. Tod Helmuth, Jr., follows in the department of Minor Surgery; Dr. E. H. Pratt gives several chapters on the Surgery of the Lower Orifices of the Body; Dr. W. B. Van Lennep has the surgery of the Brain and Nervous System; Dr. John E. James gives the chapters on Amputations; Dr. T. L. Macdonald discusses Anæsthesia, Asepsis, Antisepsis and Shock, besides special parts not otherwise covered; Dr. C. E. Walton takes the surgery of the Circulatory System; Dr. George F. Shears treats of Hernia and the surgery of the Breast; Dr. H. R. Chislett discusse Surgical Bacteriology and Pathology and Diseases of and Operations upon the Joints; Dr. DeWitt G. Wilcox has the Surgery of the Osseous System; Dr. W. H. Bishop, Fractures and Dislocations; Dr. G. W. Roberts treats of Syphilis; Dr. Chas. Adams has Gunshot Surgery; Dr. S. B. Parsons. Plastic Surgery; Dr. Sidney F. Wilcox, Orthœpedic Surgery; Dr. Harold Wilson, the surgery of the Eye; Dr. W. E. Green, the surgery of the Digestive Tract; Dr. J. M. Lee, the Surgery of the Liver, Pancreas, Gall Bladder, Duct and Appendix; Dr. W. R. King, the surgery of the Ear; Dr. W. B. Morgan, the surgery of the Glandular System. Dr. C. E. Fisher, who planned and is editing and developing the book, will take

Surgical Diseases generally, look after the thorough introduction of Homœopathic Therapeutics.

This book promises to be the full equal, at least, of any general system of surgery now in existence. The advance parts are really magnificent. Homœopathy will be proud of the book if the parts yet to come approximate in merit those now in the editors' hands. The cuts thus far made are according to the highest work of the engraver, and the chromo-lithographic and half tone plates are to be as attractive and life-like as the artist can possibly make them. The illustrations alone will cost some thousands of dollars. Neither pains nor reasonable expense are being spared to issue a book representative of the very best the printer, illustrator and binder can do.

Subscriptions to this superb book received at any of the Boericke & Tafel pharmacies. Leather, \$9.00. Half morocco, \$10 00 net.

ESSENTIALS OF HOMŒOPATHIC THERAPEUTICS.

The title of this little volume is somewhat like the bestowal of such names as Mysander or Theophilus upon helpless infants, but the "handle" can easily be overlooked when the quality of book or babe is taken into consideration. Dr. Dewey, a prolific and successful writer, is the author of the above-named work, one with the limit it assigns itself, that we can heartily commend. As a general rule the reviewer does not look upon manuals, compends, with a favorable eye, for the reason that too many rest satisfied with the modicum of information these contain, but in the present instance the character of question and answer have a flavor that cannot help but stimulate the reader to look up his *materia medica* oftener. As good sherry wine is composed of several wines so skillfully and intimately blended that the product delights the palate of the connoisseur, so in the work under consideration, Dr. Dewey has happily blended therapeutics and *materia medica*, that the reader while perusing the former has the later presented to his mind at the same time, refreshing his memory upon both subjects.—*The Clinique.*

Homœopathic Recorder.

PUBLISHED MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street, Philadelphia, Pa.

SUBSCRIPTION, \$1.00 PER ANNUM.

Address communications, books for review, etc., for the editor, to E. P. Anshutz P. O. Box 921, Philadelphia, Pa.

NEW YORK CITY NOTES.

Dr. Edwin J. Pratt has removed his office from 7 W. 39th St., where he was associated with Dr. Henry C. Houghton, to 45 W. 45th St., N. Y. City. Office hours: 9 to 11 A. M., 5:30 to 6:30 P. M.

Dr. Eugene P. Roberts, Class of '94 N. Y. H. M. C. and H., has located at 158 W. 53d St., N. Y. City. Office hours: 9 to 12, 6 to 8. Dr. Roberts is the first colored Homœopathic physician to locate in this city.

Dr. William L. Fleming has recently removed his office to 309 West 121st St., N. Y. City. Office hours: 8 to 10 A. M., 4 to 6 P. M.

The Improved Movement Cure Institute, Dr. G. H. Patchen, Medical Director, and Dr. George H. Taylor, Consulting Physician, has removed from 71 East 59th St. to 20 West 59th St., N. Y. City. The specialities of the Institute are Mechanical Massage and Swedish Movements.

The New Maternity Building of the Hahnemann Hospital of N. Y. City, which was opened in December last, is now in full working condition. In its equipments it is distinctly up to date, making use of all the latest and most approved appliances. The maternity department is a valuable accession to the hospital: it is also of great value and convenience to the local profession, who are cordially invited to avail themselves of the facilities of the new maternity and children's wards.

OBITUARY.—Dr. Stanton L. Hall, of Portchester, N. Y., died at his home January 13th, 1895, at the age of 53 years. He was a graduate of the N. Y. Hom. Med. College and Hospital, Class of '75. He was a member of a great many social and medical

societies, enjoyed a large popularity and large practice in Portchester, where he had been located since 1880. Prior to that time he had practiced for five years in Bennington, Vt.

OBITUARY.—Dr. Mary Woolsey Noxon died at her home, No. 28 West 45th St. on January 16th, 1895. Her death was very sudden, she not having complained of illness, and in fact had attended to her patients almost until the hour of her death. Dr. Noxon was one of the most prominent of the women physicians of New York, having practiced here for more than twenty years. She graduated in 1873 from the N. Y. Hom. Med. College and Hospital for Women: previous to that time she had given some time to the study of "Old School" medicine. In her practice she made Gynecology her speciality. Her death, it is thought, was caused by apoplexy. She was consulting physician on the staff of the Hahnemann Hospital and was a member of the N. Y. State and the County societies and of the American Institute of Homœopathy.

At the American Fine Arts Society there is an interesting exhibition of the models submitted for the Hahnemann Memorial to be erected at Washington, D. C. The exhibit comprises 23 models, most of which are well wrought and many highly artistic. All strive, aside from showing the physician, to show some incident or incidents of his life, and the different means to accomplish this has added no little to the interest of the exhibit. Attached is an article from the New York *Herald* of the 3d inst. descriptive of the exhibit.

NOT long ago the grave discovery was made by an eminent practitioner that oysters are a cause of typhoid. On this topic Dr. J. Early Hustler writes the *Medical Record* directions for eating oysters and avoiding the danger of bacilli. He says:

"First, then, the oyster, free from slivers, should be sterilized by steam, or broiled for one hour until it is reduced to one tenth or one-twelfth of its former size. After this it should be enveloped in a sterilized napkin sprinkled with sterilized salt and pepper, smeared with thoroughly baked butter; and eaten with a fork previously heated to redness in a Bunsen's burner. Bacilli seldom light on hot iron, at least not to live long. It is, however, necessary to maintain a high temperature for the fork to be absolutely safe. There is no danger of burning the lips or tongue as the instrument is buried in the oyster, and with a

wide mouth and an easy swallow the thing is done and the fork is then heated again for the next customer."

"All these precautions, however, will be useless unless the mouth, naso-pharynx, stomach and intestinal canal are in a properly aseptic condition. Cavities in the teeth should be previously filled with sterilized wax, the mouth and throat rinsed with carbolized water, and ten minutes before the meal the stomach should be washed with sterilized water and a ten-grain tablet of bismuth naphthol should be taken."

"Even then care must be taken to keep the mouth widely open to clear the beard and not to breathe or sneeze during the act of swallowing. Of course all this takes time and trouble, but only 'eternal vigilance is the price of liberty' from diseases 'which lurk around to hurry mortals home.'"

THE venerable Dr. Charles Peter Hart, author of the well-known Homœopathic works on diseases of the nervous system, is sojourning in Florida for his health, which had become greatly impaired by successive attacks of *la grippe*. We are pleased to learn that his condition has been greatly improved by his prolonged stay in that genial climate, and that he will probably be able to resume the practice of his specialty at his home, near Cincinnati, in the near future.

ONE of the funny things in medicine appears in *The Medical News* of December 8, 1894, by E. A. De Schweinitz, Ph. D., of the Biochemic Laboratory, Bureau of Animal Industry, Department of Agriculture, Washington, D. C. Its title is "The Attenuated Tuberculosis: Its Use in Producing Immunity to Tuberculosis in Guinea Pigs." After a long and minute description of his experiment Dr. DeSchweinitz says:

These experiments which, of course, in connection with so important and troublesome a disease, can be regarded as preliminary only, and must be confirmed by a large number of similar ones, serve to show that by the use of attenuated tubercle-bacilli and their products we may be able to control pulmonary tuberculosis. If the twenty-second generation has shown such attenuation and produced so much resistance, then the thirtieth generation, or later, should give still more satisfactory results.

So the thirtieth is in sight, the "thirtieth generation!" Why not go on up to the one hundredth, the one thousandth, etc. Would it not be rich to have our regular friends quarrelling over the respective efficacy of the "third gen." and "thirtieth gen."?

If Dr. De Schweinitz will promise to read Burnett's *New Cure for Consumption* the RECORDER will send him a complimentary copy. It will shorten and simplify his studies amazingly.

IN answer to the question, have we no working rule for the detection, treatment and prognosis of suppressed diseases? I am satisfied that we have such in the theorem of psora as advanced by Hahnemann. Following on the line of similars I wish to call your attention to the clinical fact that *disease suppressed at any point will usually reappear in that tissue most similar on histological structure.* Therefore, if we are unable to determine the cause of any chronic local lesion, let the search include the clinical history of all tissues of similar histological structure. Judiciously applied, this formula will aid the solution of many clinical problems.

I believe the position may be safely taken that a majority of chronic diseases are the result of suppressed acute disease. Certainly no debate can arise whether this be true of those cases that come to us from the hands of those who resort to heavy dosing, but the question is, do we Homœopaths grow careless and if so, what risks do we assume? If the observation of the writer is common to the profession "then indeed have we all sinned," and being tempered by the American spirit, have we not as a school sometimes been misled by the familiar "nothing succeeds like success," and thus have mistaken prosperity for progress.—*Dr. Wells Le Fevre, in Southern Journal of Homœopathy.*

IN order, however, to limit the subject to reasonable bounds, I will only speak of the danger of suppressing fever of a malarial type. We all know how easy a matter it is in treating an intermittent to prescribe quinine, and earn the present gratitude of our patient. The dreaded paroxysm is prevented, and in due course of time the patient is dismissed apparently cured. Time will show, however, that our supposed cure is not a cure. Within a few weeks our patient has another paroxysm, and we simply repeat the quinine, and in order to save ourselves from unpleasant mortification in the return of these unreasonable chills, we instruct our patient to continue quinine for an indefinite period. He may not have the chills and fever return, but he may have other unpleasant sequelæ involving the liver, stomach or spleen, as well as the head. Many cases of deafness are due to the use of this drug as a suppressing agent.—*Dr. H. R. Stout, in Southern Journal of Homœopathy.*

PERSONAL.

New journals have been coming in so fast that the "personal editor" let one of them escape him; i. e., *The Homœopathic Eye, Ear and Throat Journal*, and a very good one, too. Norton, Helfrich & Garrison, editors.

B. & T.'s illustrated descriptive pamphlet of their business has been much admired. It is an interesting bit of reading and instructive, too.

Dr. Coe (*Northwest Lancet*) says: "Doctors once universally dispensed their own medicine. They will do so again."

The *Southern Journal of Homœopathy* is walking on Herr Hensel. Many others have been doing so during the past ten years, and yet Herr Hensel placidly continues his physiological course.

The Weekly New York *Tribune* has raised a hornet's nest by calling attention to Hensel's fertilization theories. "Farmers'" journals, with fertilizer ads., are boiling over at the idea of looking to mother earth for fertilizers instead of to their advertisers.

The Missing Link has been discovered. His name *Pithecanthropus Erectus*. He resides in the post-pliocene deposits of Java. Welcome, old boy!

Always spray your girl with an antiseptic before kissing her.

The turning out of goods especially designed for the Bargain Counter has become a large and profitable industry.

The *Medical Record's* London man says he knows a number of physicians who are "more than sceptical" of antitoxin "from clinical observation."

Mrs. Rebecca Harding Davis in *Century* hints that a baby is one of the best prescriptions for many of the ills of women.

When the blizzard howls at zero one can recall the mosquito with kindly feelings.

Publisher's Weekly speaks of Hahnemann as "the inventor of Homœopathic medicine." Perhaps we shall next hear that little publication dis-coursing of Newton, "who invented gravitation."

A man on trial for "violating the Sabbath" recently wanted to define "the Lord's day" by the Lord's own words, but the prosecuting attorney said, "Your Honor, I object!"

Do not forget to take a look at the new *Pathogenetic Materia Medica*. Its arrangement will please many.

The *Accoucheur's Emergency Manual* is also worth examining. A neat and useful little book.

Secretary Stewart announces that the thirty-fourth annual session of the Homœopathic Medical Society of Ohio will be held at Cleveland, May 17 and 15.

The Mikado is not a popular opera in China.

The latest dodge of the pharmaceutical Cheap Johns is to sell filtered for distilled water. As usual they "defy competition."

They say that the oyster-typhoid racket has caused the demand for oysters to fall off one-half. So much the better for the pockets of sceptics who do not scare.

And not to be left in the race of progress others are hastening to denounce lobsters as dangerous, and salads and water cresses, too.

Wonder how much longer the world will gulp all this sort of thing down to the exclusion of oysters and lobster salad!

Dr. Freudenthal has been treating cases of rheumatism of the nosc.

THE HOMŒOPATHIC RECORDER.

VOL. X. PHILADELPHIA AND LANCASTER, APRIL, 1895. No. 4.

OBITUARY.

Adolph J. Tafel.

Mr. A. J. Tafel, senior partner of the firm of Boericke & Tafel, publishers of this journal, departed this life on Saturday, March 9th. He had all his arrangements made for starting on a business trip to Cincinnati and Chicago, on Friday evening, March 8th, but on going home he found a subpoena to appear before the Grand Jury on Monday as a witness in a suit that the Pennsylvania State Board of Pharmacy, on which he was the representative of Homœopathy, were bringing against several druggists for violation of the pharmacy law. This subpoena put a stop to his proposed journey. On Saturday morning he arose apparently well as ever, but while reading, as was his custom before going to his office, he was suddenly taken with severe pain at the heart. The nearest physician was summoned and also his family physician. The case was seen to be a serious one, but towards the evening the patient seemed to be getting much better, but at 5:15 o'clock he gave a gasp and fell back dead.

Mr. Tafel had so large a circle of personal and business friends that his sudden death was a severe shock to many; men who had parted with him the day before, when he was in the full enjoyment of apparent health and vigor, could hardly realize that one short day had terminated that busy life.

Mr. Tafel was born at Ulm, Germany, on September 13, 1839, and was consequently in his fifty-seventh year. He came to this country when about fourteen years of age, and was at different times engaged both in homœopathic and allopathic pharmacy, mastering them both. When the war broke out he en-

listed in the 27th Pennsylvania Regiment and participated in much of the hard service experienced by the Army of the Potomac and was present at Gettysburg. At the close of the war he married and bought the Homœopathic pharmacy, at 48 N. Ninth street, Philadelphia, Pa., and also tentatively engaged in the publishing business. In a few years he formed a partnership with his brother-in-law, Dr. F. E. Boericke, who had for many years run what might be called the pioneer homœopathic pharmacy of Philadelphia. Soon after Mr. Tafel removed to New York and took charge of the new firm's business there. Other pharmacies were purchased or established, and the firm's reputation for fair dealing and for the superior quality of their goods made almost each venture a success. Early in the eighties, owing to ill health, Dr. F. E. Boericke, the founder of the firm, retired and was succeeded by his two sons, one of whom, Dr. F. A. Boericke, remains in the firm and, by the death of Mr. Tafel, becomes senior partner. In 1891, Mr. Tafel's son, A. L. Tafel, was admitted to partnership. The firm, therefore, now consists of F. A. Boericke, M. D., and Mr. A. L. Tafel.

Before taking his degree Dr. Boericke had served a full and complete apprenticeship in the homœopathic pharmaceutical profession and understands it thoroughly from the ground up; the same may be said of his partner, Mr. A. L. Tafel. Both are men of experience, thoroughly grounded in the tradition of the house and fully competent to maintain it on the high level to which it was raised by their fathers in other years. The business, pharmaceutical, publishing and importing, will be conducted as in the past. No changes of policy will be made unless it be clearly seen that such changes are conducive to the better service of the medical profession.

Mr. Tafel left the business so well organized and in the hands of employees thoroughly trained and skilled by years of service in their various departments that the remaining partners will have no difficulty in conducting it as in the past.

FROM DAILY PRACTICE.

By Dr. Hochecker, Hildesheim.

CASE I. On December 13, Miss O., æt. twenty-eight, called on me with her mother. Patient had been troubled for several weeks with a violent neuralgia. She was quite tall, of robust build, had menstruated regularly and had never been sick before. She was unable to state what might have caused her present condition. The pains suddenly came on without cause, a twitching and tearing of the left side of the face, now in the ear, then in the lower jaw and were particularly aggravated by mastication; a peculiarity was that whenever the pains were about to commence a diarrhœa set in. The pains would also come on in the night, although she slept on a horse-hair pillow. By reason of the pains patient could eat very little, sleep was much disturbed and patient, in consequence, so low spirited that she could not make the trip alone, her mother had to accompany her on the railroad. A careful examination failed to disclose anything abnormal, and as I gave her six powders of *Spigelia* 6, with the direction to dissolve one powder daily in four spoonful of water, a spoonful to be taken every three hours. A week after I received a letter from the mother, thanking me in the warmest terms for the relief afforded. She stated that after leaving my office her daughter had such a furious attack that she was compelled to enter the nearest house for her to sit down to prevent a syncope. After the lapse of considerable time she was able to proceed to the station and, as the time was short, they had to walk fast to catch the train, but the excitement aggravated her condition to such an extent that she became unconscious in the waiting room. "We missed that train, and I was on the point of sending to you when she regained consciousness and I hastened to give her powder No. 1. The pains continued unabated for fifteen minutes longer, but we were able to take the next train. My daughter took the powders as directed, but had not another attack, but apprehensive that the pains might return we beg for some more medicine," etc. I again sent six powders, of which No. 1 contained five globules of *Spigelia* 20. Not until six months after did I see the mother again, who consulted me for toothache, when she related that her daughter had not had another attack. She really was cured by one powder of her violent pains.

CASE II. On May 8 I was requested to call at once on Miss Hp., as she was being driven to distraction by violent pains. As soon as practicable I made a call and found the patient, æt. twenty-one, pacing the room in excitement and pains, clamoring and weeping, with the exclamation: Help me! help me! she sank exhausted on a lounge. Quieted finally by her mother's consolation, I learned that for fifteen months patient had been troubled by a violent neuralgia. She was dark haired and dark complexioned (the former patient had been a blonde), mother and daughter believed that the trouble had been caused by exposure, on diverse occasions, to a cold draught of air after being heated by dancing. Soon after such violent pains appeared in the centre of the right cheek that patient had to seek medical aid. Three or four physicians were consulted who wrote many recipes, but none gave relief. But patient had a cousin who, two years before, had received his parchment. On him the patient set her hopes. The cousin was advised of the futile efforts of the other physician, and the young doctor promised speedy relief. Veratrina salve was applied for three weeks without success. Then morphia injections for awhile relieved, but three weeks after these also failed, so that after the lapse of another three weeks he declared her case to be incurable. Change of air failed to change the complaint. Electro-therapy was tried in vain for several weeks when finally I was consulted. Patient had a good appetite, a good digestion. Her menses came on every three weeks and then lasted for a week. I gave her two powders of *Spigelia* 3, to be dissolved in water and to be taken in one day in spoonful doses. On calling next morning I learned that patient had tranquilly slept for several hours for the first time in several years and that the very violent pains had not reappeared. I then gave two powders of *Spigelia* 6, to be taken during the day; but on calling on the 11th I heard the unwelcome news that she passed a very bad night. I again enjoined the use of all exciting beverages as well as of strong spices. On the 13th I was informed that the pain had not reappeared, whereupon I gave *Spigelia* 10. On the 14 also the condition was satisfactory. Then there occurred an aggravation on the 16th and I gave another dose of *Spigelia* 10. At my visit on the 17th a slight exacerbation was again reported, then I gave *Spigelia* 20 and several milk-sugar powders. On the 20th I was informed that not a trace of the pains was left. She begged me to call again for fear of a relapse; when I called on the 23d I was

informed, to my joy, that the pains had not reappeared. My next visit was on May 29, when she was in perfect health; mother and daughter jointly requesting of me further visits and medicine, I called for the last time on June 18. Since May 20 I only exhibited milk-sugar powders; however, I left a few powders of *Spigelia* 20 as a reserve, to be used in case the pains should return. But the ticdouloureux has not returned.

To this I would add some remarks: *Spigelia* cures pains on the right as well as the left half of the body, but most especially those of the left side. With the last patient the neuralgia which had been on the right side of the face had changed to the left side when I took charge of the case. It would be difficult to explain why this remedy is particularly valuable in leftsided complaints, but experience demonstrates it. In all nervous affections one must be careful not to operate with low potencies, but this is especially pertinent to neuralgia lest medicinal aggravations be caused. I confess that for some time I was skeptical as these aggravations brought about by low potencies; but I have been convinced of it for years. I gave Miss Hp. at first *Spigelia* 3, amelioration followed immediately, but soon an increase of the pains set in. *Spigelia* 6 was also too strong, even *Spigelia* 10 proved to be too strong, and not until I prescribed *Spigelia* 20, in longer intervals, were the attacks coupé. What holds good of *Spigelia* may also be said of the application of the electric current. Weak currents often have a good effect, while stronger ones only harm the patient. I made the same experience in treating myelitis and tabes dorsalis.

Finally I wish to state my reasons why I relate this case of sickness at such length. I premise that most of my colleagues have had the same experience as I did, which is, that were I to read in some journal a short notice to the effect: Ticdouloureux, too, in many cases have been cured by *Spigelia*, probability is that this remark would pass out of my memory by the time the paper is laid aside. Whereas when I have the whole history of the case before me, with a detailed description of the condition of the patient and the precise dose of the medicine, its action and finally a minute statement of the changes in the condition of the patient from day to day, then each description has the effect of the viva vox of a teacher of a performance in a theatre. You see before your mind's eye the persons described, you follow their ailments and the effect of the medicine

as if you were the attending physician, and you surely will recognize in many cases some similar experience of your own.

Case III. In the summer of the year 1875 I set out in the finest weather with a party of friends, to visit a neighboring watering place, in our carriages. I had been the attending physician at that bath the year before. Among those present were some strangers, one of them a married daughter of Mrs. F., of our place, on a visit. Questioned why her mother had not joined the party, she related, with tears in her eyes, that she was confined to her bed for two weeks with a crick in the back. She was unable to rise unassisted, could not even turn in bed by herself, with the aid of a stout assistant she would be set up in bed, while shouting with pain they would pull on her stockings and wrapper and carry her to a lounge so as to take part at the family dinner. Mrs. F., a small stocky lady, æt. 54, thought that the affliction had been brought on by a cold. And what did you do for her? I queried. Everything that was thought to benefit her. Our doctor (allopath) set 12 cups; when no relief was seen after three days he prescribed a liniment. When no change occurred then mamma had those celebrated subcutaneous injections (*Morphia*?) when the pains would ease for a few hours. The injections are still made daily, but it seems with less effect. I expressed my sympathy to the lady, but as I was not their physician could say no more. But I could not forbear to say that had you sent to me I could have relieved your mother by a few powders. The lady made a very skeptical face and then our conversation was interrupted.

About 10 o'clock that night we returned. I had to see some urgent cases yet, and was then just about to retire when my night-bell rang. I opened the window, and there was Mrs. F. servant asking for the promised powders.

I gave her six powders of *Rhus tox.* 3 x, with the direction to take two powders a day. On the second day after, Mrs. F. herself called at my office and, quoting me, she exclaimed, "but how was it ever possible to cure me in so short a time!" When I received your powder night before last I immediately took power No. 1 and soon after fell asleep. On awakening towards morning I found to my horror that I was lying on my left side. For fear of waking up the old pains I did not dare to make any attempt of changing my position. But the thing become unbearable after a time, and so I slowly attempted to stretch my limbs and to change my position. I succeeded without much

exertion and *without the slightest pain*. I slept a few hours more and awoke about 7 o'clock without feeling any pains anywhere. I slowly sat up, put on my stockings without trouble, clothed myself and went down stairs and spoke to my children who looked up in surprise and stood as if petrified. "I have laid in bed long enough, now I am well, come let us have our breakfast." Mrs. F. only took one other powder of the remedy, the other four she thought were superfluous. That this quick recovery attracted much attention all over the city was documented by the fact that many of my patients on receiving my visits spoke of that case. *Zeit. des Ber. Verenes hom. Aerzte.*

ZINCUM.

Poison Case, Effect on Animals, Case of Headache.

By Dr. Adolph Gerstel, Vienna.

Translated for the HOMŒOPATHIC RECORDER from Intern. H. Presse, III, p. 561.

The action of *Zincum* on the vagus appears from the following case of poisoning:* An apothecary apprentice, while preparing flowers of zinc incautiously filled the whole laboratory with the vapors. These caused in him *oppression on the chest, vertigo and headache*; the following night he was *sleepless* and next day he had *cough, vomiting and stiffness of the limbs*; on the third day he had a *strong taste of copper in his mouth, salivation, severe pressure in the stomach and pains in the abdomen*. The vertigo still continued so strong that the patient could not get up. After a copious evacuation the symptoms became milder and a fever appeared, which, through the perspiration that ensued, removed the disease, still the **general bodily debility** lasted three weeks.

Here we find general bodily debility, which, even after a partial crisis through perspiration, continued a long time.

Still more characteristic is the following:

DR. WEYNER (*Hyg., Bd. 14, S. 492: Ausden General-Bericht des rheinischen Medicinal collegs*) relates the following interesting case: On the neutral territory, between Prussia and Belgium, in the mayoralty Hergenrod there is a cadmia mine. In the month of May a furnace for smelting zinc was erected. Soon after the cows pasturing nearby took sick and died. The suspicion that

*FRANK l. c., *Bd. 1, S. 646.*

the cause of the trouble was zinc poisoning was confirmed by the fact that one of the cows recovered when she was sent to other pasturage. The animals showed a *diminished appetite and secretion of milk* and at times *cough*; later diarrhœa appeared which continued without interruption. In August WEYNER found the following symptoms in the animals: *General emaciation*, skin clinging tightly to the body, though with some it was still sleek; eyes pale bluish, *drawn back into the orbits*; horns and ears unequally warm, mouth hot and shiny and hanging down, at times dry; appetite undisturbed; rumination slower; dung greenish like grass, thin-flowing and fetid; pulse small and quickened, the heart-beat sensible far down, inspiration quiet, but on expiration a groove would form on the flank; at times cough. As the disease proceeded *the animals became more and more emaciated*, the hair rough, milk dried up and diarrhœa increased until the animals could no longer get up and *died of total prostration*.

In their cadavers there was seen a general *emaciation and anæmia*, but the meat retained its fresh and ruddy color. The intestines were so much shrunk that they were about the size of the intestines of swine and they contained a greyish green slime. Their mucous coat was in part dissolved and covered with black dots, but in part also with little ulcers; some of them looked as if sprinkled with coal-dust. The first two stomachs contained only a little food; so also the third stomach in which the food was in some soft, in others dry. The fourth stomach contained only a little greenish-grey chyme, *its mucous membrane was in all cases inflamed and at the same time loose in substance like jelly*; this inflammation extended for some distance into the *duodenum*. In some other cows this stomach only contained a leaden-grey mucus, the same color in the mucous membrane and dark-red spots. The LIVER was in part pale yellow and *lacking in firmness*; it was in part covered with blue streaks; the gall-bladder was distended and contained a dark bile, colored like turmeric. The *spleen* in all was *smaller than usual and anæmic*, pale blue in color. *Heart and lungs were relaxed and limp*. *The brain was mostly pappy*, and the blood vessels in the brain occasionally strongly injected and there was *much serum in the ventricles*.

The nutrition entirely impaired, as plainly shown by the shriveling of the intestines, the decomposition of the mucous membrane, the liver lacking in firmness, the decreased, bloodless

spleen, the pappy brain and the general emaciation; *in consequence of this* also actual *anæmia*, while the muscular substance remained intact in color, leave no doubt that the zinc disease proceeds from the nerves of nutrition, so that the anæmia, as well as the occasional paleness of the blood, is not the primary but the secondary disease, so that in contradiction of the view of our friend KAFKA,* it is *not the paleness of the blood which affects the nerves*, but the affected nerves cause the paleness of the blood. For Kafka reports the following highly interesting case of *Cephalalgia comite amblyopia sympathica*:

A pale yet vigorous lady of forty years had been suffering for two years from a periodic headache, appearing once every ten to fourteen days without any premonitory symptoms; this headache has the peculiarity, that simultaneously with it such a *weakness of the visual faculty* ensues that to the patient there seems to be a thick fog before her eyes and she cannot distinguish even large objects. The headache, now increasing, now diminishing, lasts from two to three days and manifests itself as a pressure on the crown and forehead, from without inward; the head at the same time feels very much muddled, face mostly pale, appetite deficient, mood cross and peevish. In the forenoon the pains are bearable, in the afternoon more violent and in the evening they become severe, with a reflex action on the stomach, which sometimes results in *vomiting*. Stools retarded for 2-3 days, everything else normal. With the pain amblyopia appears, which, with the aggravation, develops almost into blindness. *The pupils are rather contracted*, the rest of the eye perfectly normal. As soon as the headache remits the visual faculty gradually returns.

After fruitless allopathic treatments, Kafka saw her during an attack and gave her *Zincum met.* 3, one dose in the morning and one in the evening. The pains immediately diminished, the attack terminated in twenty-four hours. A like dose in the evening for a month, preventing any further attack. For the paleness of her blood he gave her *Ferr. Carb.* 1 for one month. There was no relapse.

Hahnemann enumerates among the curative effects of *Zincum*: "Amaurosis with contracted pupils." The following symptoms also point in this direction:

218. Obscurity of the eye.

**Neue Zeitschrift fuer hom. Klinik, Bd. II., S. 116.*

219. *Dun* and foggy appearance before the eyes in the morning after awaking.

220. Flitting before the eyes.

221. Yellow, blue and green wheels before the eyes, while looking wretched, accompanied with drowsiness.

222. Fiery flakes fly in great curves before the eyes when looking up into the sky.

These symptoms are to be regarded as affections of the plexus of nerves from the sympathetic which attends the expansion of the arteria ophthalmica. As is well known, the retina cannot be regarded as a mere expansion of the optic nerve, since it consist of several layers, the elements of which are in part lacking in the ophthalmic nerves; of these the cellulous layer consists, according to BRUCKE, of numerous brain-cells. Without regard to this, we found with respect to the cephalalgia the characteristic trigeminus symptoms, 83-91; these also cohere more or less with the eyes. Also the consensual phenomena, as also the repeated *pale ness of the face*, which Kafka correctly regards as important (only that he interprets it erroneously), are all found among the symptoms of *Zincum*, of which we have already cited the greater part. * * * *

In a previous clinical experience a differential diagnosis between *Belladonna* and *Zincum* in their relation to brain diseases was given, but we wish to add a few remarks, partly to confirm our position and to make a sharper distinction of their differences.

Their mutual relation is shown by the following interesting incident: The oxide of zinc proved an antidote in the case of a mare that had eaten half an ounce of *Belladonna*. The *Belladonna* had caused subsultus tendinum and muscular twitches, the respiration was changed, the animal could not keep on its legs and the viscera of the abdomen refused their function. Dr. Chivetti mixed three drachms of oxide of zinc with bran and divided it in four parts, which were given during the day. Even in an hour and a half the nervous symptoms had disappeared, but returned on the 5th day. 1 drachm of oxide of zinc again remove (*Hygea*, B. 6, S. 282).

To more sharply define their differential diagnosis I will mention a case of chronic headache reported by ARNOLD.* A lady who lived in the country and was vigorous and by no means pampered, but able to endure pain, had suffered from headache ever *since her childhood*. Her cure required a period of

**Zeitschrift fuer homœop. Klinik*, Bd. 2, S. 148.

8 months, and was accomplished by means of *Belladonna* and *Zincum*. Even when a child her headache made it impossible for her to study, and she had to be frequently excused from school on this account. Her period, which set in in her 16th year, was weak and irregular after only every 6 weeks. In her 18th year she passed through a severe inflammation of the brain accompanied with unconsciousness; this was treated with venesection, leeches, etc. When ARNOLD undertook to treat her by letter she was a mother (the age is not given), and the status was as follows: She had a dull pressive pain running right across her forehead, as if her head were compressed in a vise, formerly it had been more a throbbing and shooting; her eyes were inflamed, forehead red and swollen, she was compelled to lie down and had the most frightful visions, saw her child with its head shattered, while she hears everything that passes around her. It required great effort for her to realize the emptiness of these fantastic visions. With these visions her headache reached its highest point, an abatement would follow and then sleep. Her head during these attacks was dry and cold to the touch. The most violent pain lasted only one day, but the whole duration of an attack was generally 14 days, during which time the pain would increase and decrease and she would be well satisfied if the pain remained only bearable. At the time when naturally the menses should appear the headache would become more violent and more stupefying. A few days before and after the menses there occurred painful tearing and sensation of weakness in the spine. She does not look ill, having a good color.

Pulsatilla for a month brought no change. Then *Belladonna* 6. After five weeks the headache no more seemed to reach its most violent point and the menstrual flow was somewhat strengthened. After six weeks of *Belladonna* the headache intermitted for a longer time and the attacks were not so violent, except in wet weather. The menstruation was more copious and of a darker color. Four weeks later the violence and frequency of the attacks showed considerable decrease: but *she now was seized with an irresistible drowsiness*, and was troubled with a frequently recurring vomiting, (as the patient thought this was in consequence of an intercurrent gastric-catarrhal fever). She now received *Zincum sulphuricum*, the 2d trituration, for 16 days, a dose daily and then intermitted for 8 days. The headache now appeared before, during and after the period in a moderate de-

gree, but in the intermediate time she was without pain. In a similar way the *Zincum sulph.* was repeated three times, and then she was free from all pains and she wrote me after 3 months: "You have radically cured me from a great bodily ailment, and what is more, you have saved my mind from a yet more dreadful one." ARNOLD subjoins to this fine cure the following judgment: *Pulsatilla* did not help, because the scanty menstruation was not a cause but a consequence of the abundance of blood in the meninges, and the disorder existed long before the appearance of the menses. The full-bloodedness in the meninges was, therefore, the primary symptom, the irregularity in the menstruation the secondary; therefore when the former decreased through *Belladonna* the menses began to flow more strongly. But why was *Belladonna* which produced such a favorable and essential change not able to complete the cure? ARNOLD explains this by the fact, that the fullness of blood in the meninges, through its frequent return and long duration, had become habitual, and that it therefore of necessity operated to change the nutrition of the brain. But ARNOLD also knew from experience, that *Zincum* would now enter more quickly into the organization of the brain than *Belladonna* would if continued, also that it more lastingly reduces its abnormal activity to order, as it lies in the sphere of its activity. This independently existing anomaly of nutrition in the brain made itself quite characteristically known through an irresistible drowsiness, to which occasional vomiting was adjoined.

We see here again an affection of that sphere of the brain, which we shall yet consider specially, the sphere that coheres with the vagus, and which has a special relation to *Zincum*. As to the "drowsiness," which is also often a consequence of far extended disturbances in the nutrition, we have already cited some of the corresponding symptoms bearing on this.

Whether the tendency to vomiting was in this case in essential connection with the original suffering or accessory to it, is a secondary consideration, though we would suspect the former; and even if it had only been accessory, the disposition to it was given by the original disease; and even with the latter assumption it would also have been an indication for *Zincum*. That sulphate of zinc belongs to the most violent and surcest emetics is well known. And yet it is not within its sphere of operation to be indicated as a remedy to idiopathic vomiting from the Homœopathic standpoint. It is only apt to irritate the

nerves of the stomach in an astringent manner and to cause vomiting when given in large doses, wherefore it is also used enantiopathically especially in cases of narcotic poisoning and in torpor ventriculi. *Nevertheless it may be homœopathically indicated in certain kinds of vomiting, but only when the vomiting is caused by a primary irritation of the plexus gastrici of the vagus or secondarily by an irritation of its original focus, the medulla oblongata, and, indeed, especially in the latter case.* For the physiological provings of *Zincum* by WERNECK show that the vomiting only comes in later in the course of the artificial Zinc-disease and, indeed, after several hours, and after previous headache, vertigo and palpitation; even in an intense illness there was only a *tendency to vomit.*

THE STORY OF PROVERS WHO ASSISTED HAHNEMANN.

By Thomas Lindsley Bradford, M. D.

GUSTAV WILHELM GROSS.*

Rummel, his friend and fellow-worker after his death thus note of him:

Gustav Wilhelm Gross was the eldest of eight children. His father was the pastor, Joh. Gottfried Gross. He was born at Kaltenborn, near Juterbogk, September 6, 1794. His mother's maiden name was Christiane Eleonore and she was born a Schuricht.

After receiving his first instruction in the home of his parents he attended, from 1809 to Michaelmas 1813, the gymnasium at Naumburg, on the Saale. He was obliged to give up his intention of going from there to Wittenburg to study medicine, since this university had been discontinued; and so he went at Easter, 1814, to Leipsic, and there applied himself to medical studies. This circumstance is important, for the reason that he there became acquainted intimately with Hahnemann, whereby his life's career received a definite direction, which, but for this acquaintanceship might have been delayed to a later period.

Unfortunately I have not been able to learn anything more

*Rummel's account, in *Allg. hom. Zeit.*, Vol. xxxiv., p. 193. *Brit. Jour. Hom.*, Vol. vi., pp. 137, 425. *Stapf's Archiv*, Vol., xxiii., pt. 3, p. 132. See also Kleinert, p. 113.

definite concerning his early education. To his close acquaintanceship, and confidential intercourse with the founder of Homœopathy is due the fact that he then already belonged to those investigators who, under the eye and special guidance of the master, were helping to furnish the materials for building up the true system of healing; and, in fact, he began his experiments with *Chamomilla*.

It is certain that this practice in testing the virtues of medicines especially contributed to develop in him that fine observing faculty, which he had in an eminent degree, as well as to give such knowledge of remedies as is possessed by but few Homœopaths. He had seen the infancy of Homœopathy, had grown up with it and had observed many of the effects of its medicines upon himself; and all this, combined with his unusual faculty of observation, helped him to find his way in the wilderness of symptoms before they perplexed his powers of mind by their vast number. Moreover, the guidance given him by Hahnemann may have induced him to keep aloof from the purely fine spun theories of the schools and to pay more attention to the practical side of the art of healing, so as to become the successful physician that he was, in the true sense of the word.

Because his native place had meanwhile become Prussian, he left Leipsic in the fall of 1816, and won for himself on January 6, 1817, the degree of doctor of medicine in the University of Halle, on the Saal, by vindicating his *Dissertatio inauguralis medica, quæ versatur in questione: Num usui sit in curatione morborum nomenclatura*.

Already, in the spring of the same year, he was practicing as a Homœopathic physician in Juterbogk; but he was obliged, because the Prussian medical statutes had come in force meanwhile, to undergo in the winter of 1817-18 the medical examinations authorized by the Government. Besides this he had to contend with many cares and privations, since his means were very limited, so that he was actually necessitated to perform his studies and labors in the dwelling room of a tradesman; and only his strong powers of endurance and his fervent religious spirit enabled him to live down his oppressive burden of toil and care.

These inconveniences continued to harass his practice for a number of years; for the newness of the Homœopathic method of healing roused many opponents, and his continued testing of medicines on his own person, which he did not disguise, led

people to believe that he was really making only experiments with his sick people also.

From the Easter of the year he received his permit to practice medicine, up to the time of his death, he was constantly busy as a Homœopathic physician in Juterbogk, for he had declined a call to Magdeburg and another to Brunswick.

Although his residence was only a small provincial town, yet his success as a physician gradually procured for him an extensive practice in a wide field of operation, even as far as Berlin, several miles distant: and besides this patients frequently came to him from a distance or consulted him by letter.

His extensive practice as a physician did not prevent him from being busy with his pen. Already in 1822, he was an industrious collaborator, and the founder of the *Archiv für die homœopathische Heilkunst*, which was published by Stapf, with the assistance of several young members of the new school of medicine. Besides provings of medicines and clinical articles, he contributed many solid essays and important critical works. Among these is his criticism of Prof. Heinroth's "Anti-Organon" in 1826, which was published as a supplement to the 5th volume of the *Archiv*, and also issued separately, and which is characterized with great compass and depth of thought. He began editing the *Archiv* in its 16th volume (1837), and worked, then as before, in connection with Stapf as a director and promulgator of the new ideas which he accepted and in the real Hahnemannian spirit.

When the founding and editing of the *Allgemeine homœopathische Zeitung* was proposed to me (Rummel), in 1832, I accepted the proposition only on condition that Gross and Hartmann should be associate editors. Both of these friends consented, and Gross faithfully and diligently aided the undertaking until the 31st volume, when death called him away much too soon. He never opposed the publication of what his own views disposed him to exclude.

Homœopathy favored me* also at the outset with the friendship of Stapf, who lived near me, and through him I became acquainted, almost at the same time, with Hahnemann, who after the publication of my "Light and Dark Side of Homœopathy" (*Licht und Schattenseite der Homœopathie*), became more friendly, and also with Gross, who lived at a distance and who favored me with his cordial friendship. We three saw each other frequently, especially in Hahnemann's house at Coethen, which

(*Rummel).

was in many respects a desirable rendezvous for our friendly meetings.

There I learned to appreciate more and more the eminent worth of Gross as a man, friend and physician. His health was not materially affected at that time though he must have had to endure much hardship and excessive toil; but his features and the greenish gray color of his somewhat puffed up cheeks, then already gave warning of the unseen enemy which was to end his busy life.

On first getting acquainted with him one might have thought him to be of a phlegmatic nature, for he seemed somewhat cold and but little sympathetic; but when an idea reigned in his mind, his rather sleepy features became animated and he gave utterance with ready tongue and in eloquent language to his enthusiastic thoughts.

He was the very opposite of a charlatan; for he was earnest and truthful, and one could readily read his inmost thoughts. He won the full confidence of his patients, not by his outward appearance, but rather by his kindly nature and active benevolence.

New ideas animated not only his countenance, as already stated, but also his whole being. He grasped them, as it were, with a fiery zeal; and since his frankness would not permit him to lock up his soul-stirring thoughts for any length of time in his bosom to mature, he not only soon gave them words but also caused these words to make a deep impression. This peculiarity of his mind doubtless beguiled him into a certain over-hastiness and exaggeration, which he must have atoned for by many sad hours and many bitter reproofs of conscience. In fact, this peculiarity even caused him sometimes to incur the estrangement of Hahnemann, to whom he exhibited the despondent heart of a despairing father,* which the stern reformer interpreted as an apostasy.

He thereby showed himself not to be inflexible to the admonitions of his friends and to be less one-sided than would have been thought, as I have often observed; but the oft too little restrained remorse of his conscience drove him to bitter despondency.

He was so thoroughly convinced of the truth and superiority

*At the death of Gross' child, when he told Hahnemann that Homœopathy could not cure everything, and for which Hahnemann was greatly displeased.

of Homœopathy that he followed unswervingly the teachings of its founder without bringing his own opinions to the test of a sacrifice in this matter; and so Hahnemann loved him dearly and esteemed him highly. But he did not hesitate for a moment to oppose Hahnemann when he saw the right on the other side, as was the case in the dispute between Hahnemann and Moritz Muller.

Bitter were the reproofs which he experienced from the literary side of his conscience; and he felt them the more keenly the more he manifested too slight enthusiasm in defending the truth of his views or opinions. Later in life he escaped the influence of these affronts to his conscience, in that he completely overlooked them. Herein also lay the reason why he participated less in the conventions of Homœopathic physicians than one would have supposed in view of his genuine enthusiasm for the cause. Although a member of the Central Union he stayed away from the meetings in the latter part of his life, and refused most decisively the position of director repeatedly assigned to him.

He no longer felt at home among the young generation, as he called them, as his old acquaintance but seldom attended. It must not be supposed, though, that he had got thereby into an isolated position. He maintained a spirited correspondence with friends and with several Homœopathic physicians, and took an active and eager part in all that could promote the success of Homœopathy.

The Silesian Union of Physicians, the Free Union, of Leipsic, and the Homœopathic societies, of Paris, Palermo and Madrid elected him an honorary member. The government, too, acknowledged his services and appointed him a member of the Chief Examining Board of Homœopathic Physicians.

Where it was very important that he should be an active worker, as in the case of the Hahnemann jubilee, he was on hand. He not only furnished most of the matter for the jubilee memorial, but also elaborated most of it himself and then cheerfully handed it over to me for remodelling, improving and appending literary mementoes.

As in his public life there occurred many a gloomy experience to becloud his pure joy in the success of Homœopathy and of its future diffusion, so in his private life, sorrow was coupled with the blessing of a happy marriage. He married, in 1818, Marianne Herrmann, daughter of Pastor Herrmann, and they had

five children. But death took from this happy family a promising son and a beloved daughter, leaving but two sons, a daughter and the wife. One of the sons became a physician and the other chose the position of a master builder.

Neither his own medical skill, nor that of his friend Stapf, nor a second sojourn at Karlsbad, had been able to restore his deranged and enlarged liver to its normal condition. And to these ills were added gouty pains, dropsy and oppression in the chest; and a sojourn during the last summer at the Baltic Sea, from which he hoped to obtain relief, seems to have been disadvantageous to his weak and enfeebled body.

In order to recuperate as much as possible, he went to live with his son-in-law (who had already become a widower), Pastor Weise, in Klebitz, near Zahna. Here an easy and peaceful death suddenly overtook him at six o'clock in the morning of September 18, 1847, a death much too soon for his sorrowing family, for the friends, for the sick who sought his professional skill and, more than all else, much too soon for the cause of Homœopathy. But his works still live in the grand results they have achieved for medical skill and science. [RUMMEL.]

Hartmann who was a fellow student, says:* Gross, too, was a friend most valued by us all, and my intimacy with him continued till his premature death. However unassuming and modest he was, it was not easy for one, full of the joy and bouyancy of youth, to associate himself with a man naturally so serious that he seemed almost cold and but little communicative, and it was only after a long intercourse with him, that I at least learned that Gross could not only be a cheerful but a truly sympathizing friend. Although at the university a year before myself, yet he was but a little before me in making Hahnemann's acquaintance.

When I first saw him at Hahneman's house, I took him for a patient who wished to submit himself to Homœopathic treatment, since his whole outer man, his yellowish grey complexion, his bloated countenance, his backwardness in conversation, were all expressive of a diseased condition. As he left the room, however, before I did, I learned from Hahnemann that Gross had engaged in Homœopathy with zeal, and that he bade fair to be one of his best pupils; he earnestly recommended me to seek his

* Kleinert's "Geschichte der Homœopathie," p. 99. N. W. J. Hom., Vol. iv., p. 185. Med. Couns., Vol. xi., p. 239. *Allg. hom. Zeitung*, Vol. xxxviii., p. 310.

intimacy, and I never had occasion to regret having followed his advice. It was necessary entirely to disregard his exterior, for by this he gained the affections of none, and consider only the inner man, the very kernel itself, for there one would soon find his benevolent and warm disposition, and then it was impossible ever to separate from him unless one's own quarrelsome or perverse disposition or distrust of his affection led to the rupture.

Time has shown that Hahnemann justly considered him one of his best pupils, for Gross was, in truth, during the whole course of his practice, the most zealous Homœopathist possible; he never swerved from the course pointed out, and earnestly contended for the cardinal points of the master's doctrine, and even where he was of a different opinion he subjected his views to those of Hahnemann. This devotion to Hahnemann he practiced for a long time, till the many sad hours which he experienced from the frequent and bitter reproaches of his younger, but differently thinking colleagues led him to change his mind and determined him to use the same frankness in expressing his divergent opinions that Hahnemann had used in declaring his views. This led to discussions which were extremely unpleasant, and he ever after leaned upon two stools, since he could never quite agree with either party, yet he did not suffer himself to be misled but ever remained a most zealous Homœopathist, and did all in his power to advance the new system of cure.

Notwithstanding his sickly appearance Gross never suffered from any disease while I knew him, hence Hahnemann did not hesitate to accept him as a member of the Provers' Union; he even hoped that Gross would derive advantage from the provings and hence, if it were possible even for him to determine this *a priori*, he selected those remedies which he hoped would affect the inner and apparently suffering organs of Gross and produce consequent external manifestations. Gross was the most skillful prover of us all, and the symptoms observed by him have a great practical value. Indeed I place them with Franz and Stäpf, on an equality with Hahnemann's.

The following notice appeared in the *British Journal of Homœopathy*:* Dr. Gross was one of Hahnemann's earliest disciples, and from his first adoption of Homœopathy up to his death we find him actively engaged in the work of disseminating a knowledge of the new system, at one time in furnishing

**Brit. Jour. Hom.*, Vol. vi., p. 137.

practical and theoretical papers to the *Archiv* and editing that journal in connection with Stapf, now engaged in the translation of his master's works into Latin, and again occupied with the editorship of the *Allgemein. homœopathische Zeitung*, in conjunction with Rummel and Hartmann, besides publishing divers small works and being perpetually occupied in the proving of new medicines, some of the most valuable of which we owe entirely to him, and most of those given us by Hahnemann being enriched by his experiments on himself and others.

Nor has his career been unmarked by deviations from Hahnemann's beaten path. Accordingly we find him practically opposing Hahnemann's precepts and giving larger doses than usual; again we find him incurring Hahnemann's severe censure for his Isopathic views. And after Hahnemann's death he immediately broached his extraordinary views on dynamization and the high dilutions.

Whatever may be the opinion of Dr. Gross's novel views and therapeutic eccentricities, none will deny him the character of indefatigable industry and untiring zeal in advancing the new system, nor is it possible to doubt the sincerity of its convictions nor his earnestness of purpose, and hereafter, when the sifting hand of time shall have winnowed the good seed from the chaff the name of Gross will be regarded and respected as that of one of the stoutest champions of our faith—as that of one of the largest contributors to our remedial treasury.

The Isopathic views spoken of above relate to the adoption by Gross of Jenichen's potencies. In an article in the *British Journal*, vol. v, on High Potencies, the author says:* Dr. Gross's 'newest experiences' are to be found in the first volume of the *Neue Archiv*, thirteen years after Herr von Korsakoff's paper appeared, to which Dr. Gross refers rather cavalierly as though he were unwilling that another should share the honors of so notable a step in posology. Unlike the destiny of the Russian nobleman's suggestions, which were met on all hands by a contemptuous silence, this second edition by Dr. Gross creates a vast sensation in the Homœopathic world, and raises an acrimonious paper war with much shedding of ink and destruction of useful foolscap.

'Your model cures,' exclaims Gross, 'are as nothing at all in comparison with the results gained by the high potencies! I know what you will say, you skeptics, you will say Gross has

**Brit. Jour. Hom.*, Vol. v., p. 131.

gone mad—*Gross ist verrückt geworden.** * * * * He induced Herr Jenichen, of Wismar, a zealous Homœopathic amateur, to prepare 317 dilutions of the usual remedies, varying from the 200th to the 900th, and even 1,500th.

In a note to the sketch of Gross, in the sixth volume of the *British Journal*,* attention is called to the "Organon," 5th edition, page seventy, on which Hahnemann says: "The eccentric upholders of this doctrine, especially Dr. Gross, vaunt this Isopathy as the only true therapeutic rule and see nothing in the *similia similibus*, but an indifferent substitute for it.

Lohrbacher says:† Gross, an apparently unsympathetic and cold character, of unattractive appearance, of a hypochondriacal and dreamy nature. A nearer acquaintance showed him to be possessed of energy and industry, a warm-hearted man for the cause and to his friends. As a drug prover he occupies one of the foremost places. By his participation in the editing of the *Archiv* and *Allg. hom. Zeitung*, as also by his other literary works, whether of a defensive or didactic character, he has earned a permanent title to our remembrance. In his practice he held firmly to the precepts of the master, with whom he remained in friendly intercourse to the end of his life, notwithstanding the serious differences that arose between Hahnemann and the most of his disciples; though he never hesitated to oppose him in matters on which he believed Hahnemann to be in the wrong.

A peculiar trait in his character was that he always espoused new ideas with zeal, and came forward with his views upon them before he had subjected them to a thorough and repeated proof. I will only allude here to Isopathy and the high potencies. The consequence of this was that he drew down on himself many attacks and corrections, which occasioned him many bitter hours and gave him the appearance of vacillation.

Rapou says of Gross:‡ Gross was one of the converts that Hahnemann made during his course at Leipsic, between the years 1814 and 1816. He came a little after Stapf and is after him the eldest of the Homœopathic physicians. These two men adhered more strictly to the opinions and principles of Homœopathy than did many others. When the *Allg. hom. Zeitung* was established, and Rummel abandoned the *Archiv*, Gross remained faithful, and his pen was in use for both journals. Gross had established

* *Brit. Jour. Hom.*, Vol. vi., p. 137.

† *Brit. Jour. Hom.*, Vol. xxxii., p. 455.

‡ *Histoire de la doctrine Homœopathique*, Vol. 2., p. 430-600.

himself in the first years of his practice in the little village of Juterbogk, situated near the Saxon frontier, upon the railroad from Leipsic to Berlin, and he never left that place, where he had easy communication with all his confreres. There, alone, in the midst of an agricultural population, he gave himself entirely, without distraction to his medical and scientific correspondence.

To William Gross is due the honor of introducing into our method the employment of mineral waters. He wrote a book upon the Teplitz waters. He also made a study of the Karlsbad Springs. He completed a study of the Karlsbad waters in 1843, with a pathogenesis of 185 symptoms obtained from three bathers, one of whom was a lady affected with a very light complaint, so that the toxic effects of the waters were produced in all their purity.

The village where he lives is situated some distance from the railroad, and I leaped joyously into the wagon that was to take me on the shady road thither. I congratulated myself on receiving new data for my medical memoirs during my stay in the country; I recalled my excursion with Attomyr.

Gross is a man of parts. I entered his dwelling and introduced myself to a man, bilious, jaundiced, of a hypochondriacal manner, who immediately penetrated to the purpose of my visit; he said to me in a tone but little affable: "Monsieur, ask without any delay that which you wish to know because I have only about twenty (vingtaine) minutes to give you." Twenty minutes to a confrere who had come three hundred leagues to visit him. It was little, but I lost no time in psychological speculations and attributed this brusque and morose humor to an aggravation of the liver complaint from which Gross suffered. I entered at once upon the matter. The twenty minutes expired and I retired. Seating myself in an arbor in the village I noted my recollections of this short conversation.

Gross employs exclusively the high dilutions and sometimes goes as high as the 2000th.

Rapou here enters into an exposition of high potencies and hopes that Gross will be restored to health, mentioning the fact that he was in such an irritable and hypochondriacal condition that he was unable to do justice to the subject discussed. He says that Gross was of the small number of Homœopathic physicians who were devoted to the Homœopathic treatment of the diseases of children.

Stapf says* that he was at first destined for the clerical profession and was sent to the cathedral school at Naumburg, where he soon distinguished himself in the study of the dead languages, especially Hebrew. While there he caught the scabies, to the improper treatment of which he was wont to ascribe his delicate state of health in after life. He was induced to consult Hahnemann, in 1815, and soon became one of his most earnest disciples.

In the latter years of his life his practice averaged about 3,000 patients per annum, whose cases he always registered in the most careful manner. In 1827 Hahnemann invited Stapf and Gross to visit him and told them about his theory of psora. In 1834 a very severe illness was nearly fatal; and in 1837 he was affected with hepatic disease, and jaundice, and dropsy, from which he was not expected to recover.

In 1843 he was appointed, by the King of Prussia, a member of the Board of Examiners for Homœopathic physicians.

In 1845 his malady increased to a frightful extent, and so altered his appearance that he looked like an old man of eighty. He partially recovered by the care of his friend Stapf, who took him home to his house; but having again returned to the arduous duties of his profession his strength completely gave way, and on the 16th September, 1847, perceiving his dissolution approaching, he exclaimed: "I now have no more to hope for on earth, the account is closed, my path now tends upwards."

Owing to his wretched health which exercised an unfavorable influence on his mind as well as on his body, Dr. Gross was not at all calculated to impress one favorably at first sight; but a short intercourse with him soon revealed the richness of mind and the nobility of disposition concealed beneath the forbidding exterior. He was esteemed and loved by all who knew him, as a physician he inspired the greatest confidence, as a friend the warmest attachment. His character was open, true hearted, truthful and honest.

Notwithstanding occasional disputes and differences with Hahnemann, he continued to correspond with the illustrious founder of Homœopathy almost uninterruptedly to the last, and was esteemed by him as one of his best disciples.

WRITINGS.

Inaugural Dissertation: Num usui sit in curatione morborum nomenclatura. Halle. 1817.

Critical Examination of the Anti Organon, by Dr. Heinroth. Also pub-

**Neue Archiv*, Vol. xxiii., pt. 3, p. 132. *Brit. Jour. Hom.*, Vol. vi., p. 425.

- lished as a supplement to the first five volumes of the *Archiv. Leipsic. Reclam.* 1826.
- Dietetic Guide for the Healthy and for the Sick, with notice of Homœopathic Healing. *Leipsic. Reclam.* 1824.
- The Homœopathic Healing Art and its Relation to the State. *Leipsic. Baumgartner.* 1829.
- The Mineral Springs at Teplitz, with respect to their positive effects on Healthy Men, and as an Antipsoric Remedy. With 8 cuts. *Leipsic. Reclam.* 1832.
- Concerning the Mode of Living of Parturient and Lying-in-Women and the Dietetic and Therapeutic Treatment of the New Born Child. *Leipsic. Reclam.* 1831. (From the *Archiv f. d. hom. Heilkunst.*)
- Concerning the Treatment of the Mother and the Suckling from the Moment of Conception. A Handbook for the Newly Married. *Dresden. Arnold.* 1833. Also published in 1834 under the title: *Homœopathy and Life.*
- Co-editor of *Archiv für die homœopathische Heilkunst.* *Leipsic.* 1837.
- Co-editor of *Allgemeine homœopathische Zeitung.* *Leipsic.* 1832-47. He also assisted in translating the *Materia Medica Pura* into Latin, in 1826-8

AMERICAN INSTITUTE OF HOMŒOPATHY.

Newport Meeting.

Editor of HOMŒOPATHIC RECORDER.

The American Institute of Homœopathy will convene at Newport, Rhode Island, Thursday, June 20, at three o'clock P. M. The local committee have been and are still hard at work, and have already completed many of their arrangements. Among the plans definitely settled are:

A concert and reception, music to be by Reeves' famous American Band; an old-fashioned Rhode Island Clambake, and a trip to Block Island, thirty miles out on the Atlantic. Add to these the other plans of the committee and the special attractions of Newport as a noted summer resort, and there can be no question as to the excellence of the programme.

But the recreative and social side, although important, is not the most important to the Institute. The scientific side, the work done in medical science and allied subjects, this is the chief interest and duty of the Institute.

The meeting at Newport should be made note-worthy because of the scholarly value and timeliness of the papers presented, and because of thoughtful and scientific discussions.

An organization, like an individual, is measured by what it does not by what it professes. It augers well, therefore, for the coming meeting that most of the chairmen of the various committees are vigorously at work and that some of the sections are already quite fully prepared. But there is much still to be done and the time is getting short.

Now is the time for each chairman to do most effective work. The prospects are that the Newport meeting will be one of the largest and most successful ever held; the interest this year seems to be general.

One more *very important matter*. Let every member of the Institute get at least *one* new member. It is a prime duty often neglected. Blanks will be furnished on application, and each member will receive one when the annual announcement is issued in May.

This circular will contain full information concerning programme of meeting, railroad fares and routes, special meetings, hotels. "The Meissen," etc., will be sent to every homœopathic physician in the United States. Let every member of the Institute now determine to attend the Newport meeting and so arrange his business that he may not be kept away. The necessity of sustaining and strengthening our organization was never greater than at the present moment. The advance and growth of the Institute is in large measure an indication of the advancement and development of the homœopathic school.

Make the Newport meeting distinguished for a large and loyal attendance, broad, profound and tolerant learning, and marked by such earnestness of purpose as shall give impetus and power to the school at large long after the Institute of '95 has passed into history.

EUGENE H. PORTER, A. M., M. D.,
General Secretary.

*181 West 73d street,
New York City, March 8, 1895.*

WHAT IS THE REMEDY?

Editor of the HOMŒOPATHIC RECORDER.

I think the author of "what is the remedy?" will find it in *Silicea 6x* and *Kali mur. 6x* given alternately.

The practice of alternation is highly depreciated by many of our best and ablest men, but my short experience has proven to

me beyond doubt that in a complicated case of this kind and where there are so many conflicting or dissimilar symptoms that two drugs given in alternation work like a charm, whereas if one is given at one and the other at another time none of the symptoms would be removed.

If Dr. ——'s patient does not improve under this treatment I should advise him to have her eyes examined for errors of refraction and also make a thorough examination of generative organs (if necessary under the influence of an anæsthetic). He will probably find an endometritis and an enlarged uterus.

If she is passing through the change of life let him try *Lachesis* 12x.

Very truly yours,

G. H. PETERS.

Peekskill, N. Y., Feb. 20, 1895.

Since 1889, when Dr. Napier first called attention to *Solanum Carolinense* as a remedy for epilepsy, there have appeared here and there comments favorable and unfavorable to the drug, some claiming great things for it and others doubting its efficacy. The latest to write on the subject is Dr. E. C. Carr, in *Therapeutic Gazette*. The following is the gist of his remarks: Patient, a young man, twenty years of age, of good parentage on the father's side, but on the mother's side there was some tuberculosis. The boy himself is very large and strong, always lived on a farm, and was given to no vices. He had epilepsy several months before coming to Dr. Carr, and at that time (in May, 1893) he was having the attacks at intervals of about three weeks, usually in the early morning, at three or four o'clock, but sometimes in daytime, at the table, or while at his work in the fields. From the description, they were genuine epileptic seizures. After some other remedies, he began taking the *Solanum Carolinense* in 10-drop doses. In about three weeks he had a hard convulsion. The dose was increased to 15 drops, then to 20, 25, and finally 30 drops three times a day. There has been no convulsion since September 23, 1893. "The boy has taken the medicine regularly, until during the last six months he was permitted to take it twice a day, and to take two vacations of two weeks each. It may not have been the *Solanum Carolinensis* that interrupted the attacks, but if it was not the coincidence is a strange one. I am inclined to the belief that

fairly large doses are more likely to be of use, and have had no complaint of any disagreeable effects. I have used it in several cases, but not in any where I felt as positive of the correctness of my diagnosis, and at the same time had so obedient and faithful a patient."

A CORRESPONDENT of *Poultry Keeper* writes: "Some years ago I read in a German paper a method by which the editor said the sex of eggs could be distinguished. I tried it and found it was a very good one. I have since made use of it and the consequence is that I have nearly all pullets, and but a few cockerels, which I hatched on purpose. I simply take the eggs in the evening, after the lights are turned on, hold them to the light to observe where the air cell is located, which can be seen as a dark spot about the size of a five cent piece. In the male chicks it is located at the thick end of the egg, while in the female chick it is located at one side of the end."

MRS. H——, age 45, married. Has always enjoyed good health, except for occasional attacks of indigestion with diarrhoea. The house in which she lives is large, decidedly drafty, and not well heated. The cause of her present attack was presumably slippers and cold floors. Both feet were swollen: no redness, ankles sore and bruised and excruciating pain on walking. *Ledum* 1x was prescribed and forty-eight hours found her entirely relieved.

MRS. P——, age 29, married. In her former home suffered much from rheumatism or rheumatic gout, which is a family inheritance. Since coming to Brookline has been singularly exempt. In a former attack which was most sudden in its onset and attended with œdematous swelling of feet, *Apis* speedily gave relief. In the last attack there was less swelling, heels were sore, marked stiffness of feet, and marked aggravation from warmth, and *Ledum* 1x cured in twenty-four hours.—*Dr. Frederick B. Percy, Brookline, Mass., Mass. Hom. Med. Society—N. E. Med. Gazette.*

A CORRESPONDENT of the *N. Y. Sun* writes: "This is no time for young bacteriologists to come to Europe for instruction. The

men foremost in that field of science are too busy with their investigations to give lectures. A young bacteriologist who has been hanging around the University of Berlin for a couple of months, catching up any scraps of information that his professors might be good enough to let drop, and looking through microscopes in the hope of discovering something that he didn't know before, went off to Paris to see if he could find some one there who would stop his investigations long enough to give him instruction. He found even a worse state of affairs there. The scientific men of to-day who are making investigations in bacteriology are as feverish as were the prospectors for gold in California half a century ago."

The whole affair seems to be in a feverish state.

DR. WINGFIELD tells of two cases occurring in his practice in which the use of *Actæa racemosa* seemed to have insured living children at birth. In the first case, four children had all been born dead, from no discoverable cause, the mother never having had a living child; in the other patient there had been two dead births and no living one. After the daily administration of a single dose of *Actæa racemosa* 1x for two months before confinement, both mothers were delivered of healthy children which are now alive.

A WOMAN, aged fifty, applied at the Birmingham Homœopathic Hospital for advice. She had a tumor on the right breast, which had been noticed for six months, and was increasing in size. It was hard but movable, situated below the nipple. Glands were not enlarged, but there was much pain down the right arm, and the nipple was unmistakably retracted. A consultation having been held, it was decided that as the growth was probably cancerous the breast should be removed, and patient was received into the hospital for operation. *Belladonna* 1x was ordered internally. In a fortnight's time all symptoms had disappeared, and no trace of the tumor could be found. Nothing in the way of treatment was used except the *Belladonna*.—Dr. Wingfield, Birmingham, England, in *Monthly Hom. Review*.

MISS R., in September, 1891, had the right breast removed for a cancerous growth. About eighteen months after the growth

returned in the cicatrix. Immediate removal by a second operation was advised by a leading Bristol surgeon, who told the patient candidly that without this second operation six months at most would end her life. Dreading further surgical treatment Miss R. was induced to try the so-called "Mattei" remedies. She accordingly placed herself under a practitioner in London who advocated such treatment, and persevered with it for a long time but without relief. Her health failed, she wasted much, and at last became so weak as to be unable to leave the bed she had lain in for nearly twelve months. The growth, too, had increased in size and became very painful, the axillary glands were now enlarged. At this stage she relinquished "Matteism" and sought relief in Homœopathy.

She was found to be greatly emaciated, mere skin and bones, prostration was extreme, was scarcely able to move in bed. The growth in the cicatrix was about the size of a hen's egg and gave her severe pain; in its immediate vicinity in the healthy skin were several small hard masses, each about the size of a pea. Pulse was 130, small and weak. As the patient did not appear to have long to live, Dr. Morgan saw her in consultation. His opinion of her condition was most unfavorable. It was decided to try *Arsen.* 3x, night and morning, with *Hydrast.* 2x, twice daily.

In a few weeks these remedies had effected so great an improvement that the pain in breast had gone, her spirits were brighter, pulse had come down to eighty, she was gaining flesh and felt stronger. The same medicines have been continued and improvement has been steadily maintained until, at the present time, twelve months after commencing treatment, the growth is greatly reduced in size, and the small nodules around it have quite disappeared. There is no pain, appetite is healthy, patient gets up and dresses herself daily and knits and reads. During the last three months she has been at the seaside, getting daily out-door exercise, and seems, in short, a new woman. All this has been effected apparently by the sole use of the two remedies mentioned.—*Dr. Barrow, Clifton, England, in Monthly Hom. Review.*

My experience of *Veratrum Viride* is chiefly with its external use, and is almost limited to its use in the treatment of ordinary inflammatory otitis. And it is well to impress upon you, whose

sphere of practice does not lie in the same direction, that in a very extensive experience in the treatment of inflammatory earache, in which I have employed *Veratrum Viride* as a local application with *Glycerine* and water (four drops of the *Veratrum Viride* to two drachms of equal parts of *Glycerine* and water) I do not remember to have once found it fail to give relief. Over and over again patients have testified to the immediate and positive relief given by these drops. The strength here given is the maximum; if *Veratrum* be used stronger it may aggravate; seven drops to half an ounce of the *Glycerine* and water is now my usual prescription.

The most recent was that of a boy of 13, who on recovering from measles complained of double earache with deafness, always a most unpleasant complication in the convalescence of this affection. The application of these drops at once removed all pain and deafness.

It is simply invaluable to the general practitioner to know that *Veratrum Viride* possesses this property, as it is possible, I feel sure, to prevent hundreds of cases of deafness by the adoption of this treatment.—*Robert T. Cooper, M. D., in Homœopathic World.*

By an accident I discovered my mistake for flatulence in one particular case that I had. I had gone the rounds of vegetable remedies; I thought I would try something else; after looking over the various remedies I had at hand I selected *Calc. fluorica*. The change it wrought was magical. It was in a case of pregnancy, so I continued its use until the end of the term. When the full time arrived it was the quickest and least painful parturition I ever attended. It was the second child; the first had been a prolonged and hard labor. That was three years ago. I did not give the credit to the remedy at that time, but continued its use for flatulence, especially with pregnant women; results at birth always the same—whether multipara or primipara. *Sarah J. Hogan, Maternity Home, Chicago, in Chicago Medical Times.*

MR. H., aged forty, bookkeeper, a hearty appearing, robust man, father given to the too free use of stimulants at times. Mr. H. had been troubled with hæmorrhoids for over ten years. Had at one time placed himself under the care of a specialist,

and undergone an operation that he claimed had at least been successful in keeping him in bed two weeks; otherwise the relief received was only temporary. Mr. H. was a scoffer and an unbeliever in "little pills," and finally came to me simply as a last resort, claiming that he didn't expect to be helped, so he "wouldn't be disappointed."

At the time of his call he was in great agony, writhing and twisting on his chair, cursing everything in general, and the piles in particular.

He was free from the backache we so often find, was constipated, but had a fair appetite. The tumors were large and dark blue in color, seldom bled, but blood occasionally passed with the fæces.

I prescribed *Æsculus* 2d, as in the other case. In two weeks he reported cured. This has been a trifle over two years, and during that time he had but one slight touch of the old trouble, six months ago, which came after a hard drinking bout. A few doses of *Æsculus* relieved him and since then he has been perfectly free from any of the old symptoms.—*Dr. Burlingame, in Penna. Trans., 1894.*

THE dense ignorance that some persons show about Homœopathy is truly amazing. One of my patients, and not a lady either, once addressed me as a "Charming Doctor." I asked him why when I met him, and he said the man he was working for had told him that "charms" were used by Homœopaths in healing the sick, and although the man had been a member of Congress for years—not of late years, I am happy to say, he knew absolutely nothing about Homœopathy. It is high time we had a monument in Washington to tell all the world that such a man as Hahnemann once lived, and has followers who think enough of his memory to perpetuate it.

Another patient, a lady, sent some vials to my office to be filled with Nos. 7 and 10, thinking that all a Homœopath had to do was to give an already prepared remedy with the name of the disease on the vial, like our old-school brethren.

We must let the public know we are scientists, and that the study and practice of Homœopathy is no easy matter, and be ready at all times to answer for the faith that is within us. And when our patients are thus educated, we will have patients who will respect and honor us and do all in their power to advance

the cause. For our progress depends as much upon the intelligent laity as upon the skilled practitioner.

An old-fashioned book has served me well, and the more I refer to it the more true it seems to me. I refer to the *Organon of the Healing Art*, by Samuel Hahnemann. It is true, it contains only such matters as will serve as a correct clinical guide and how we are to select the appropriate remedy, but gives no easy way of practicing medicine; but it tells the true and only correct way of practicing Homœopathy. "Imitate me, but imitate me exactly," says the master. And my own experience is that the nearer I follow Hahnemann the better success I have.—*Dr. Bowie, in Penna. State Trans., for 1894.*

I DON'T know that I have anything to offer in regard to the cold pack or any other method in reference to fevers. I have never employed anything except the Homœopathic treatment in those cases. Thus far the results have been entirely satisfactory, so that I have not tried any experiments. I have looked upon these things, to a large degree, as experiments, consequently, knowing that under carefully applied Homœopathic medication there need be but a small death-rate in typhoid and such a rapid recovery as a rule, that I have never seen anything in a cold water service as a Homœopath. I know the cold water is recommended in typhoid cases, and that is the only method applied by some. Statistics in the practice with typhoid fever will prove to the satisfaction of any conscientious physician that it will be almost impossible to have more thorough or better results than you will get from the simplest applied Homœopathic remedy. I don't think there is in any average private practice a death-rate of one per cent.—*Dr. Korndorfer, in Penna. State Trans. for 1894.*

CHAS. M., four years old. Loud, wheezing respiration, could be heard all over the flat. Face pale, bluish and puffy. Copious cold sweat. Tenacious mucus running from nose. Child is greatly distressed for air. Starts up suddenly and wants head on high pillow. This condition had started apparently with a cold in the head two days before, and had gradually extended and grown worse ever since. The difficulty was not in the larynx, for there was neither hoarseness nor croupy cough. The loud

wheezing arose plainly from the chest, and was caused by diminution of caliber in the smaller bronchial tubes, either from spasmodic constriction or from viscid discharge. Whatever the condition may have been *Sambucus Nigra* 2x, a few drops in a glass of water, a teaspoonful given every hour for a few hours, made a very pretty and rapid Homœopathic cure.—*King, Medical Visitor.*

Now the prophylactic power of vaccination must be admitted, but much of the credit for scarcity of the dread disease should be given as well to sanitation and quarantine; and when we hold, as we now do, a better preventive, it should receive more attention from us than has hitherto been bestowed upon it. *Malandrinum* is more consonant with Homœopathic principles because similar, yet not the same; it produces no ill effects, not even incapacitating to the slightest degree from the usual avocation, and does not risk the introduction of syphilitic or tuberculous germs; or stir up within the individual any previously unsuspected, latent, scrofulous taint, and it is a protective agent, as shall presently be demonstrated.

Its antidotal power can be determined by any one in the manner that the writer has many times tested, namely by administering the medicine as a preventative of *vaccination*. Even repeated operations will not "take" after the remedy has been exhibited. This should show that it is the deeper acting of the two. Again it will overcome the bad effects of vaccination, and heaven knows there has been enough of this to do. Those directly exposed to the contagion of variola will escape its contamination by its protective influence.—*W. Jefferson Guernsey, M. D., in International Brief.*

"ONE would not suppose, at first thought, that *Terebinth* would cure diabetes mellitus. Its effects fall most prominently on the kinneys, and in diabetes mellitus we have something besides kidneys to think about. But Morgan says in his book on Diabetes (I know not entirely on what provings as authority): "At length we hope a drug has been found that will cause sugar to appear in the urine. That drug is *Terebinthina*." Morgan gives the experience of a German physician, Dr. Almer, but whether he had other provings in mind I do not know. Allen gives the symptoms from Dr. Almer, "sugar in the urine."

“Whatever the *modus operandi* may be, and I confess it is not very clear to me, it has done the business. I have had good results from *Terebinth* in Bright’s disease, but there, too, I have used it in connection with *Arsenic alb.*, the cases I have treated with it having had the dry parchment like skin and restlessness of *Arsenic*. My experience in this disease is that when the right remedy is found the sugar quickly disappears. It is my experience also that it acts better with an unrestricted diet. I know that it is contrary to the general opinion, but I cannot conscientiously, in view of my experience, advise my patients to follow the restricted diet. They hate it, they lose strength and vitality and I have succeeded in my cases without it. I have not had any case complicated with syphilis, so I have not had I suppose the most intractable kind of cases. My cures have been with the following remedies:—*Sizygium jam.*, *Strychnia phos.*, *Phosphoric acid*, *Arsenic* and *Terebinth*. I have not been able to cure any case with *Uranium nit.* That, of course, is because I have not had a *Uranium* case.—*Dwight M. Dodge, M. D., in N. Am. Jour. of Hom.*

WE have been informed, on good authority, of a practice pursued by one manufacturer in the making of tablets of the so-called narcotic tinctures (*i. e.*, *Aconite*, *Belladonna*, *Digitalis*, etc.), which, if true, is open to the severest censure. This manufacturer, finding that his tablets of these tinctures stuck together on keeping in stock, adopted a new procedure. Instead of making the tablets contain the tincture in minims, as represented, he makes a fluid extract of the drug, evaporates to a thick consistency, washes with petroleum benzine to remove resin, coloring matter and benzine soluble extractive, spreads on plates, dries with heat and makes up into tablets.

Now, apart from the question as to whether this benzine treatment removes or alters any active principles or not, the fact remains that such tablets are not what they are represented to be. *Instead of being made of tinctures, as claimed, they are made of fluid extracts, concentrated by heat, washed with a solvent that removes certain proximate principles, and then heated to eliminate the persistently remaining traces of benzine, which heat probably modifies, if it does not destroy, the remaining proximate constituents.*—*Philadelphia College of Pharmacy Alumni Journal.*

IN a study of the subject of trichinosis in the human I found 14 per cent. of a series of cases in the dissecting rooms of the University of Buffalo invaded by this parasite. When a quantity of trichinæ not sufficient to produce death is ingested, they bore into the muscles even of remote parts, and I believe that many cases of chronic muscular rheumatism are due to the lodgment of this parasite in the muscles. In fact, the cases investigated are corroborative.

I have frequently observed trichinæ in adipose tissue and had them photographed in this position. Encapsulation here is very imperfect.

Recently an epidemic of trichinosis occurred in Halstadt, Belgium. There were thirty-nine cases, thirteen of which proved fatal. Old and obscure trichinæ cysts may simulate Meischerian sacs, miliary tubercles, aggregations of fat globules and certain other conditions; from these they must be differentiated. Fifty thousand trichinæ may be present in a single ounce of pork. I have observed over 1,000 in a single slide.—*J. Frank Thornbury, M. D., Buffalo, N. Y., in Buffalo Medical and Surgical Journal.*

RECENTLY a patient came to me suffering intensely with toothache and appealed for relief, if possible, without extraction. *Plantago major* has proved a valuable remedy with me in odontalgia, but my supply of this was exhausted, and thinking over the list for a remedy *Passiflora* was suggested to me as a possible agent. As it was a soporific to an excited nervous system why not a panacea to an aching tooth? I saturated a pledget of cotton and filled the cavity of the tooth, and relief was almost instantaneous. Since that time I have made numerous like experiments with the same absolute results. It may be that the profession know the efficacy of the drug in this affection, but let that be as it may, I give this notice thinking perhaps that some may observe it who has not hitherto known its value, and thus extend relief to suffering humanity. A half dozen successful cases is certainly conclusive evidence. Try it and you will be surprised.—*S. D. Spees, M. D., Mt. Vernon, Ohio, in Georgia Eclectic Journal.*

IT is somewhat more than forty years since I began medical practice, and I hardly need say to those who have known me

that I have had my full share of cases, acute as well as chronic, to treat during that period. Among them I well remember the anxiety caused me by five or six of inflammation in the ilio-cæcal region. The remedies used were such as I have employed successfully in cases of inflammation in other parts of the intestinal tract. *I have never lost a patient with appendicitis, nor have I had one operated on surgically.*

* * * I do not doubt the possibility of appendicitis nor the advisability of appendectomy in some cases, but I am sure the frequency of such a condition and necessity of a resort to the knife has been enormously exaggerated. To such an extent has the exaggeration gone by talkative surgeons in need of patients, and sensational newspaper articles, that many of the people no longer enjoy the eating of fruits that may possibly leave a seed in the appendix, and many upon the occasion of pain in the right iliac region, whether from some ilio-cæcal obstruction or irritation, flatulent distention or other cause, have been the willing subjects of the surgeon's knife. From my observation and reading I am convinced *that more people have been killed by appendectomy the past five years than have died from the want of it in the last hundred years.*

* * * The loss or risking of human life by the removal of appendages, uterine or enteric, should have more safeguards put about it. The surgeon should not be allowed to operate except in the presence of two qualified consultants approved by the patient or the patient's friends, and some penalty should be attached for the removal of healthy organs not necessarily implicated by disease. There is altogether too much rash surgery in the world to-day.—*J. P. Dake, M. D., South Hom. Med. Association.*

DR. AMOS E. BALDWIN writes in the *International Journal of Surgery: The Medical Record* for September 9 criticised Dr. D. V. Thayer, of San Francisco, who uses solar heat for various purposes. There is no doubt of its great value, and I report a few cases for consideration.

In December, 1892, a gentleman living in San Francisco was badly bitten by a dog; the sun-glass was at once used and no ill effects were afterward noticed.

A carbuncle on the neck of three weeks' duration, was thor-

oughly burnt. Recovery followed soon after; systemic remedies, however, were used in this case.

A child fell and half severed the tongue; hæmorrhage was frightful; the sunglass stopped it in a moment.

A laborer, in San Jose, while attending a glandered horse, became contaminated through the broken skin of the wrist. When first seen, a patch as large as a dollar, very much raised, angry and hard, crowned with a yellowish thick crust, was burned deeply. This was repeated after four days, and again seven days later. He also took *Carbolic acid* internally, and was discharged cured.

I might mention many other cases; these will suffice. As to detail, a 5-inch sunglass is used and brought to a $\frac{1}{4}$ -inch white focus. The parts to be burnt are first cleansed and shaved, and scrubbed with a 1 to 10,000 solution *Corrosive sublimate*. There is little or no pain, but a benumbing sensation and an odor of cooked flesh. The application is continuous and may last two or two and a half minutes. The parts soften at once and all bleeding is arrested immediately. Incisions may be then resorted to without any blood flow. In the case of boils all pain ceases, and recovery is early. Practice only teaches the perfect use of this remedy, which I could not do without.—*Exchange*.

IN the scientific memoirs by medical officers of India appears a paper on "The Results of Continued Study of Various Forms of the Comma-Bacilli Occurring in Calcutta," by Brigade-Surgeon Lieutenant-Colonel D. D. Cunningham, F. R. S., C. I. E. It will be remembered that Doctor Cunningham is one of those cited as giving evidence in favor of the comma-bacilli; a citation which is far from correct, since an imperfect report of his was accepted as positive evidence when such was only intended to be preliminary. In this paper Doctor Cunningham emphatically declares that cholera in Calcutta is not invariably characterized by the presence of any cultivable comma-bacilli in the intestinal contents, and that even in those cases where such organisms are present they by no means invariably give the characteristics of those described by Koch and ordinarily accepted as true cholera-bacilli, but differ greatly in different instances both as regards their morphological and physiological properties.

BOOK NOTICES.

The Accoucher's Emergency Manual. By W. A. Yingling, M. D., Ph. D. 323 pages. Flexible leather, gilt edges, \$1.25; by mail, \$1.30. Philadelphia. Boericke & Tafel. 1895.

Dr. Yingling has completed a book that will be useful as long as babies are born in the world, which gives it a long lease of life. The word "Emergency" in the title is, perhaps, a little out of place, for while the book is of the utmost value to the physician when confronted with some sudden and alarming symptom in child birth—both before and after the event—it is also equally valuable in all cases of child-bearing, and properly used by physicians will be a blessing to mothers in the most critical hour of their lives. The two parts of the book are preceded by an introduction, in which the author speaks in no uncertain terms in favor of the exceeding value of the indicated remedy in child-bearing.

"The Homœopathician," he says, "has not much use for the forceps and other obstetrical instruments, and yet he should always be prepared to use them in cases of real necessity. I would advise, however, that the remedy be given a fair trial first and that the instruments be the last resort. By this means their aid will be very seldom needed. I make no complaint against the instruments, as they are sometimes necessary, but I protest against their indiscriminate and hasty use, frequently to the detriment of the mother and child."

Part I of the book, the "Therapeutic Indications," extends from page 29 to 206, inclusive, and covers the materia medica, or indications of one hundred and nine remedies, and it is safe to assert that there is hardly a condition of the parturient woman that cannot be met in these pages.

Part II, "Repertories," covers from page 209 to 316, inclusive, and is divided into repertories of Labor, Abortion, Hæmorrhage, Retained Placenta, Convulsions, After Pains and the Baby. The book is rounded out by an "Obstetrical Calendar for Calculating the Period of Utero-Gestation" and an index.

The book is an elegant specimen of the printer's and binder's work. It is pocket size, $5\frac{3}{4} \times 4$ inches, and bound in dark flexi-

ble leather with gilt edges. Get a copy without fail and take it with you when called to obstetrical cases, in which cases there is usually plenty of time for the consultation of the authorities, and Dr. Yingling has gathered the fruits of all their observations into his pages.

A Standard Dictionary of the English Language upon original plans, designed to give in complete and accurate statement in the light of the most recent advances in knowledge, and in the readiest form for popular use, the orthography, pronunciation, meaning and etymology of all the words and meaning of idiomatic phrases in the speech and literature of the English speaking peoples. Prepared by more than two hundred specialists and other scholars under the supervision of Isaac K. Funk, D. D., editor-in-chief; Francis A. March, LL. D., L. H. D., consulting editor; Daniel S. Gregory, D. D., managing editor; associate editors—John Denison Champlin, M. A.; Rossiter Johnson, Ph. D., LL. D.; Arthur E. Bostwick, Ph. D. Volume II., M to Z. New York. Funk & Wagnalls Company, London and Toronto, 1895.

Such is the full title-page of the second and concluding volume of "The Standard Dictionary," as people will persist in terming it, instead of "A Standard Dictionary" as the publishers more modestly put it—though probably they will not object to the popular usage. Volume two begins with page 1059, the title, and ends with page 2318. The following are some of the points in which the new dictionary bases its claims for recognition:

1st. It is the very latest in the field.

2d. It contains over 300,000 words, beating the record by at least 75,000—we have not counted them but take the publishers word for the statement.

3d. In the words of the State Superintendent of Public Instruction, Illinois: "The ease with which one finds what he looks for in the Standard Dictionary will endear it to all who make frequent use of the dictionary." This is termed "grouping," and an idea may be formed of the methods from the following note to the word "Mythology:"

"Mythology among the Greeks took the form of idealization of the beautiful and esthetic (see list of gods at OLYMPIAN); as developed by the Romans it deified virility, war, and the principles of law and order (see list

of gods at PANTHEON); in India it deified the forces of tropical nature (see ADITI, AGNI, ASURA, BRAHMA, DEVA, DYAUS, INDRA, KAMA, KRISHNA, NIRVANA, PURANA, SIVA, TRIPITAKA, VEDA, VISHNU,); in Egypt it centered about the Nile and its denizens (see ANUBIS, APIS, ISIS, OSIRIS, PTAH, RA, SEB, SERAPIS, SET, TYPHON,); in Scandinavia it idealized the struggle with the arctic forces of nature (see ÆSIR, ASGARD, MUSPEL, RAGNAROK, VALHALLA, VAN). See also ANTHROPOLOGY."

4th. Definitions which are exact, terse and clear cut.

These are some of the special points of the work. We do not know how it is with others, but this reviewer has a special fondness for the appendix feature of dictionaries, and the Standard is particularly rich in this feature embracing: "A Language Key," "Principles and Explanations of the Scientific Alphabet," "Illustrations, Groups and Tables in the Vocabulary," "Proper names in Bibliography, Bibliology, Biography, Fiction, Geography, History and Mythology," "Glossary of Foreign Words and Phrases in the English Language," "Faulty Diction," "Disputed Spelling and Pronunciations," "Abbreviations and Contractions," "Arbitrary Signs and Symbols Used in the Sciences, in Commerce and in Topography," and the "Poetical or Symbolical Significance of Flowers and Germs," and the whole sells for, half Russia, \$15.00; full Russia, \$17.00; full Morocco, \$22.00.

Suggestive Therapeutics in Psychopathia Sexualis; with Especial Reference to Contrary Sexual Instinct. By Dr. A. von Schrenck-Notzing (Munich, Germany). Authorized translation from the German by Charles Gilbert Chaddock, M. D., Professor of Diseases of the Nervous System, Marion-Sims College of Medicine, St. Louis; member of the American Medico-Psychological Association; Attending Neurologist to the Rebekah Hospital, St. Louis, Mo., etc., etc. One volume, Royal Octavo, 325 pages. Extra cloth, \$2.50 net; sheep, \$3.50 net. Sold only by subscription to the medical profession exclusively. Philadelphia: The F. A. Davis Co.

This is a curious book, one that the outer world would devour quite greedily perhaps if it had the opportunity, treating of onanism, satyriasis, nymphomania, "boy-love," nastiness and sexual perversion generally. The treatment is by hypnotism or "suggestions." Very curious reading. The book is sold by subscription only.

The Universal Homœopathic Annual of 1894. A Yearly Report of all the Homœopathic Literature throughout the World, and a Review of Allopathic Works of Interest to Homœopathy. Edited by Francois Cartier, M. D., Paris, France. 517 pages, 8vo., cloth. \$3.00 net; by mail, \$3.18.

Dr. Cartier has as associate editors Drs. T. F. Allen, Guiseppe Bonino, Geo. Burford, H. C. Houghton, S. Hurndall, Horace F. Ivins, Pierre Jousset, J. R. Kippax, W. B. Van Lennep, A. B. Norton, V. L. Simon, S. H. Ta'cott, A. Teste and Alexander Villars. They have covered the field of homœopathic literature for the past year very effectually indeed. Part first is the *Materia Medica*, and "the names of diseases placed under a substance of the *materia medica* show that the reader will find in the *Pathology* the clinical indications of the remedy." The second part, "Therapeutics," runs from page 130 to the end of the book, and seems to take in everything that has appeared in the journals during the past year. The only criticism that might be made on this summary, is that some of the foreign editors have included certain American proprietary articles in the summary which, being secret, have no business in such a work; they were probably deluded by the trick of "strictly scientific reading notices." Another slight blemish is that several papers are credited to the wrong journal, doubtlessly due to the fact that they were printed without proper credit, which is frequently done in certain places in this free country.

If any one wants a good "Homœopathic Annual" let him by all means get a copy of this one. It does not in the least conflict with Dr. Villar's "Jahrbuch;" the latter being a world's directory of homœopathic physicians and a bibliography of articles that have been published since the appearance of Vol. 1, of that serial, the article appearing by title with reference to journal and page only while Dr. Cartier's work gives an abstract of what was contained in the article.

It might be mentioned here that Messrs. Boericke & Tafel have concluded to withdraw their year-book announced in the March issue of the *RECORDER*, and leave the field clear for Drs. Villars and Cartier.

THE *RECORDER* acknowledges the receipt of "Diseases of the Eye and Ear in Children," by J. H. Buffam, M. D. It is an eighty page paper pamphlet, a reprint from Dr. R. N. Tooker's

Diseases of Children, a book, by the way, that the RECORDER has not had the pleasure of seeing. If the remainder of the work is as able as the part contributed by Dr. Buffam it must be a very excellent book.

The Eclectic Family Physician. By the late John M. Scudder, M. D., 8vo.; two volumes in one; 888 pages. Cloth, \$3.00; sheep, \$4.00; half morocco, \$5.00. John M. Scudder's Sons, Cincinnati, O. 1895.

This is the twenty-second edition of the most popular, indeed, we believe, the only Eclectic Family Physician on the market. To one used to homœopathic practice the doses seem rather heroic. To anyone wishing to practice the eclectic system in his family this is the book.

THERE are not many books concerning Homœopathy that one can expect a public or circulating library to supply to their patrons. When a book of that nature that can be justly asked for at the library does appear, every friend of Homœopathy should see to it that the library in his neighborhood lays in a stock of it. The newly published *Life of Hahnemann*, is a book of which every public library should have several copies. It is interesting, it is instructive, it is a book that properly belongs in a public library, and if the public can be induced to read the book it will go far in removing the ignorance concerning Homœopathy that prevails. Let each one who reads this speak to his librarian on the subject.

“IN a cursory glance at its pages (*Life of Hahnemann*) we find that Father Hahnemann was not such a fool as some of our latter day saints would have us believe.”—*Medical Current*.

IF every book written by a homœopathic physician were as excellent as this one (*A Text Book of Gynecology*) the reviewer's task would be a most easy one. But unfortunately many writers are not as well fitted as Professor Wood and will not spend the time and patience necessary to the production of something valuable. This really meritorious volume will bear comparison with allopathic text-books on the same subject and will not be

at all shamed by it. Every page bears evidence of the author's care and watchfulness and testifies strongly of his ability and zeal. Professor Wood is liberal in his views, but he has a reason for everything he does or advises and takes nothing for granted.—*North American Journal of Homœopathy.*

THE BEE LINE REPERTORY.—Perhaps our ethical Allopath could not obtain much information from Jones's 'Bee-Line Repertory,' because Homœopathy he has not seriously considered. Yet we feel satisfied that those "regulars" would learn much, if they would expend one dollar for the book, and seriously consider the remedies and their homœopathic indications, as they are neatly arranged throughout the book. The Homœopath *needs* the work, because he understands and has everything arranged to his satisfaction. And to the searching, liberal Eclectic must say, you can obtain much benefit from the book. The cost is small, and whilst the remedies are not prescribed a la specific medication, Dr. Jones tells you briefly and pointedly how the Homœopaths prescribe, and you all know there are some *good things* in Homœopathy.—*J. S. N., in Eclectic Medical Journal.*

THERE is a melancholy interest connected with this brochure (*The Truth About Homœopathy*), as it is the last work written by its author, who died before he could send it to the press. The text is the notorious Browning pamphlet, but the matter is of intrinsic interest and contains a valuable sketch of the beginnings of homœopathy in the United States. A short sketch of Dr. Holcombe's life concludes the volume, which will be welcomed by all who knew the author and all who cherish his memory.—*Homœopathic World.*

THE author deserves great credit for putting so much information into so condensed a form, or rather, perhaps, for bringing it forth in response to a set of questions that are not fanciful and theoretical merely. For there is an art of putting questions that not only tests the knowledge of the pupil but the tact, learning and good sense of the teacher also. Surely such study of the materia medica as will be stimulated by this book is greatly

better than the old trick of memorizing a lot of isolated and disjointed symptoms as a preparation for prescribing.—*The Clinique on Dewey's Essentials of Homœopathic Materia Medica.*

IN Bradford's *Life of Hahnemann* we are told that Hahnemann gave to several provers the determined dose; if, after several doses, there were any who failed to feel any drug symptoms they were dismissed from the proving as insusceptible to that drug. He wanted *provings* not poisonings. The great superiority of his materia medica—*Pura* and *Chronic Diseases*—over much of the later work, no matter how heroically it was carried out, is due to this fact. Every now and then we meet with some one who is peculiarly susceptible to certain influences; if these be certain drugs then a proving by such a person of a drug in a rather high potency would be worth a dozen violent poisonings in determining its homœopathic action.

FINALLY, as to the relation borne by the theories of Schuessler and of Hensel to the medical profession, we would suggest that they are merely tentative. The ideas suggested by Hensel should lead us to discriminate in the use of food; trying to supply the needs of the system with a greater degree of intelligence in the selection of food than if we had not read *Macrobiotic*. To Schuessler we owe thanks for suggesting the application of a group of useful inorganic substances for conditions in which they were not formerly used. Whether the indications for these salts depend upon the law of similars, we can not in every instance decide; but research on the subject leads us to infer that like all other drugs, the "tissue remedies" are no exception to the great central law of therapeutics. Study Hensel, therefore, from the food stand-point, and Schuessler from the drug stand-point, and much practical information of great value will be extracted.—*Southern Journal of Homœopathy.*

MESSRS. BOERICKE & TAFEL have in press a new book from the pen of J. Compton Burnett, M. D., under the title of *Gout and its Cure*. Like all of Burnett's books it is very interesting, and is packed full of odds and ends of medical lore, many of which will be found of the greatest value to the practicing physician. It is hoped to have the book out by the first of May or sooner.

Two hundred and forty pages of *The Chronic Diseases* has been printed, covering *Ammonium carbonicum*.

Homœopathic Recorder.

PUBLISHED MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street;

Philadelphia, Pa.

SUBSCRIPTION, \$1.00 PER ANNUM.

Address communications, books for review, etc., for the editor, to E. P. Anshutz P. O. Box 921, Philadelphia, Pa.

WHILE the Philadelphia *Medical News* with visor down and lance at rest is ever charging Homœopathy, its brother, the *Denver Medical Times*, whose "bright home is in the settin' sun" is waving the olive branch. The olive branch is not a very fresh one, in fact. "not to put too fine a point upon it" it seems to be one made in a factory. The *News*—solid old mossback with the odor of the Inquisition about it—would roast and damn all medical heretics in the good old way, but the western brother wouldn't. He is 'broad and liberal.' He would throw down the barriers. Let the poor deluded homœopaths come in. "Hahnemann may have been a crank, possibly insane, and there doubtless is very little that Hahnemann taught that was of any value that is not utilized by the regular profession," etc. In short they are a set of deluded followers of a crank, or an insane man, but "the time may come when the so called new school will be strong enough to turn the tables."

And, indeed, the "new school" is strong enough to turn the tables if it but knew it. It has the standard of truth in Hahnemann's books, and so long as it follows that standard it is invincible. Stick to the old battle flags and don't go gadding after the new bunting that is turned out, flimsy and fresh every day by the hosts who are "regular" in name only and change their ideas as often as the fashion of a woman's sleeve changed. Stick to the old battle flags!

THE following from the *New York Therapeutic Review* for March will be decidedly interesting to all who study the potency question:

"Within a very few years most interesting researches have been conducted upon the effects of water containing infinitesimal amounts of toxic salt upon the growth of some of the lower vegetable organisms."

“Loew and Rokorny’s researches upon the reaction of living protoplasm in the presence of *Nitrate of silver* were the starting point of these studies. Raullin succeeded in showing that *Nitrate of silver* in the proportion of one part in 1,600,000 parts of water would inhibit the growth of *Aspergillus Niger*, and still further, discovered that this organism would not live in water placed within a silver vessel although no silver can be detected in the fluid with the most sensitive reagents. Carl von Nægeli, the late distinguished botanist, was led to pursue these clues still further, and, after his death, a paper was found among his effects which reveals the most astounding facts. These are analyzed at length in a paper by de Varigny in the *Revue Scientifique*.”

“Nægeli’s pupils have gone over these experiments again and ascertained their accuracy. They have been published at length by *Schwendener of Zurich*.”

“Nægeli’s first studies revealed the fact that in the presence of the most diluted solutions of *Nitrate of silver*, the filaments of *Spirogyra* could not live. But he soon found that there appeared to be two modes of death. With comparatively strong solutions of the salt, the cellular contents disappeared from the membrane, the bands of chlorophyl changed color, but not position, and the cell lost its turgescence. With infinitely diluted solutions the chlorophyl spirals separate from the plasma, which remains in place, they become shorter, agglomerate, and the cells maintain their turgescence. Nægeli decided that in the first instance death was due to a chemical action, while in the second it occurred through the action of some hitherto unknown force, which he termed oligodynamia. His results are well described as stupefying. He found that death occurred in three or four minutes in a solution of 1-1,000,000,000,000,000. In such a solution there could not be more than one or two molecules of the salt to each litre. Was the distilled water itself at fault? No, for within it the *Spirogyra* thrived. Corrosive sublimate gave even more pronounced results; the organism died in a solution of 1-1,000,000,000,000,000,000,000,000. This could contain but a trillionth of a molecule in a litre. He endeavored to find what other factors could bring about such an unexpected result. Gases, the nitrous acid which is sometimes found in appreciable amount in the water of Munich, were all incriminated, and other waters were employed, but the results still remained. He then endeavored to discover what substances

could render water toxic, and which ones could impair or remove this toxic or oligodynamic condition. He discovered that many substances, hitherto reputed insoluble in water, such as the metals gold, silver, copper, iron, mercury, lead and zinc, by their mere presence in water, possessed this property. He was able, by employing gold coins placed in vessels of water, to vary the amount of toxic force according to the number of coins placed in the water, and to the time during which they remained there. The next step in his investigation revealed the fact that this oligodynamic power could be destroyed by adding to the water powdery substances such as flour, cellulose, soot, or fibres of silk, wool, etc. Further still, he discovered that toxic water became neutral if a sufficient number of the organisms were placed in it. The first ones died rapidly, while it took longer to kill the others, and finally a point was reached at which they began to thrive. It was also seen that different forms of Spirogyra appeared to be more easily affected than others. The *S. Orthospira* was quite resistant, whereas others were very feeble. The *S. Nitida* is weaker in the morning than in the evening. Cramer, of Zurich, discovered another interesting fact, namely, the strong neutralizing power of iron rust, and of *Leptothrix ocheracea*, an alga rich in iron oxide."

"This extraordinary sensitiveness of certain organisms deserves the attention of biologists, for might it not be a factor of great importance in the growth and cultivation of many bacteria, showing the necessity of precautions in the employment of the water and the vessels used in their study. It may also lead to the discovery of living reagents for metallic and other substances, which would prove far more powerful than the chemical ones which we are now compelled to employ for lack of something better."

V. S.

WE desire to correct an error that appeared in the RECORDER advertisement of G. H. Mumm & Co.'s champagne (page xviii) last month. The imports were there given as being from "Jan. 1 to Dec. 1." It should have read "For years 1893 and 1894." During those two years the imports of Mumm's champagne almost equalled that of all other brands combined. A fine wine for the sick room when champagne is indicated, none better.

PERSONAL.

Mr. W. Voight Frame, for many years with Boericke & Tafel has bought the Knerr homœopathic pharmacy, at 712 Penn street, Reading, Pa. He will restore the run-down establishment and make a first-class pharmacy of it.

Bind your medical journals with cover and advertisements, is the advice of an old hand in the business.

"We are heartily in favor of the elevation of fees." Gould, *Medical News*.

Bored ears are commoner than ear-rings.

Does the villain still pursue her? No; she can take care of herself now.

Dr. Clifton, 65 Arlington street, Northampton, England, is offering parts of his library for sale previous to removing to London. A set of the *British Journal of Homœopathy* is offered.

The *Bacteriological Review* advises the "placing of little plugs of cotton in the nose" to keep out "germs." But suppose one should suddenly sneeze them out? Horrors! How the germs with a yell of triumph would rush for that nose!

"It is quite clear to the writer that vegetables might be wholly eliminated from the bill of fare of human beings without any serious loss.—*Modern Medicine, January, 1895.*

Let's live on carbolized something and be happy.

"We see no objection to the incorporation of a course of lectures on homœopathy in the regular curriculum."—*Medical News!!!*

A European physician warns his colleagues of the danger of accepting spot cash from patients, as the bill or coin is apt to be infested with bacilli. Better face the danger heroically and pocket the cash.

The P. O. D. has decided that "disease germs" are to be excluded from the mails. It takes your Uncle Sam to settle things.

Dr. J. A. Utter has opened an elegant office at Crawfordsville, Ind. As it is his native place he was warmly welcomed by his old neighbors.

Dr. Fornias is making an unusually interesting journal of the *International Brief*.

And now some one asks: Why not sterilize mothers' milk?

The *Medical News* lets off a three-page broadside at Dewey's *Essentials of Homœopathic Therapeutics*.

Drs. Rothe, of Zurich, and Fevro, of Turin, have discovered that butter swarms with bacteria and is "*highly dangerous.*" Next!

There are as many methods of getting to sleep, floating around in medical journals, as the country boy has of curing warts.

Western Druggist says that most manufacturers have gone into tablet triturates "avowedly to supply a fleeting demand." So we should infer from the looks and quality of their goods.

Dr. W. D. Gentry has removed to Fort Union, New Mexico, to take charge of the National Free Sanitarium for Consumptives. He writes that he will continue his *Record of Materia Medica* from that place.

Accoucheur's Emergency Manual is meeting with much favor among Homœopathic physicians. It is a valuable little work.

Lookout for Burnett's *Gout*; as readable a medical book as has appeared for years. Out in April.

The *Bee Line* gains in popularity every day. It's a *hit*.

Subscribe for the HOMŒOPATHIC RECORDER, \$1.00 a year.

THE HOMŒOPATHIC RECORDER.

VOL. X. PHILADELPHIA AND LANCASTER, MAY, 1895. NO. 5.

A GLANCE AT THE PRESENT STATE OF HOMŒOPATHY.

If an adherent of Homœopathy called from this world thirty years ago were permitted to come back to day he would be astonished at the progress made by *Similia* in its native country, Germany. The number of the physicians practicing Homœopathy indeed has not increased in ratio to the increase in the number of physicians, for the rivalries of medical opponents and their continued assaults and those of the medical and daily journals have acted as a check to the adoption by physicians of Homœopathy. Only in the last decade can we report a gratifying progress, although the demand for homœopathic physicians is by no means satisfied.

The progress made by Homœopathy with the public, however, is very different, and we do not claim too much when we assert that at this day there are at least thirty times as many adherents as there were thirty years ago. Thus Dr. Schwabe's central pharmacy, at Leipzig, gave the number of adherents of Homœopathy, who are in steady intercourse with it at the end of the year 1891, as 60,000. As to the social standing of these believers in Homœopathy, we may mention the fact that among their numbers are fifteen members of reigning European dynasties; forty dukes, potentates and princes of houses not now reigning; twenty-one hundred and twenty counts, barons and baronets; six hundred and ninety five German and foreign military officers; two hundred and five higher and lower civil officers, professors, etc., and twenty seven monasteries in Germany, Austria and in foreign parts.

The central pharmacy then, as now, supplied numerous drug stores, physicians, hospitals and polyclinics in Germany and in foreign countries, and had extensive relations with the majority

of German and foreign missionary stations, as also with military establishments in foreign parts. Thirty years ago there were sent out 1,300 to 1,400 mail packages a year; at this day they amount to more than 70,000 a year. While Homœopathy was formerly limited to places in which a homœopathic physician happened to have settled, it has now become the universal possession of the German people. It has its enthusiastic believers both in the palaces of the rich and in the huts of the poor. Numerous lay-societies (more than four hundred) have arisen in Germany; many of these count several hundred members each, while thirty years ago only ten such societies could, with difficulty, sustain themselves. So also it is a fact that the majority of the allopathic pharmacies treat the homœopathic public more obligingly than formerly.

To bring Homœopathy to this position required many years' work by devoted physicians, pharmacutists and laymen. The homœopathic pharmacists have again revived the methods of preparing the medicines as handed down by Hahnemann. For instead of medicines prepared by his exact method, followed by the provers, arbitrary methods had grown up. Instead of preparing the *essences* of fresh plants, in many cases *tinctures* prepared from dry plants, or from parts of them, had been substituted, and from these dilutions were made, which were often ineffective, and sometimes acted in an essentially different manner from properly prepared medicine. Many other erroneous methods had been introduced, with the idea of improving on the work of the provers, without any regard to Hahnemann's motto: "*Imitate me, but imitate me exactly!*" The consequence was that even the treatment of patients on the part of experienced homœopathic physicians became uncertain. This was corrected by the publication of the *Pharmacopœia homœopathica polyglotta*, by Dr. Willmar Schwabe. This work was the result of a thorough investigation of all the sources of information scattered through the voluminous homœopathic literature, both domestic and foreign. A large number of homœopathic physicians, eager for the welfare and progress of Homœopathy, recognizing that a great difficulty hitherto disregarded by many was contained in the lax pharmaceutical practices, gladly took up the work, and as a consequence of forty-eight medical and pharmaceutic reports the *Central Verein homœopathischer Aerzte Deutschlands** and the *Verein homœopathischer Aerzte Oesterreich-Ungarus*† recommended

* Central Society of Homœopathic Physicians of Germany.

† Society of Homœopathic Physicians of Austro-Hungary.

this work to their governments as legal standard. Although not yet officially acknowledged, it is generally admitted that homœopathic pharmacutists who work with exactness and desire to minister to their customers in a genuine homœopathic manner cannot do without this work. This work appeared in its first edition in three, in the second in five and in the third in six languages. This same work served as a basis for works of a similar kind that appeared later on in England and in America. Without the support of the government it has conquered the world, owing to the principles on which it is founded, and which raise homœopathic pharmacists to a special discipline.*

We emphasized in the beginning, as one of the obstacles in the way of a more rapid progress of Homœopathy, the undeniable aversion of the allopathic medical profession to Homœopathy; this aversion has been, and still is, so pronounced that even when these physicians must acknowledge that their art is at an end they will not give way to the urgent requests of their patients so as to agree to the substitution of a homœopathic treatment but at once turn their back on their patients so as not to have to see or hear anything of Homœopathy. On the other hand, the successes obtained by homœopathic physicians, even in diseases supposed to be incurable, have increased the confidence of the general public in Homœopathy, so that it is difficult to understand why the general medical profession still maintains its repellent attitude. The idea of preserving this curative method at least among the people, and keeping it as a slumbering seed for the better times approaching, when the medical world will come to know better and will look on Homœopathy with a kindlier eye, was well received when proposed by the undersigned. There was no intention of thereby raising up amateurs in medicine. This is really excluded by the homœopathic curative method with its strict limitations. Homœopathy in the hands of laymen is purely symptomatic, aided by ætiological attendant causes; when this is practiced entirely in the way directed by Hahnemann it need not care about the ruling scholastic opinions in the field of medicine, for it was the especial desire of Hahnemann to make his medical colleagues independent of these scholastic opinions. It has, indeed, been found that this proceeding, though practicable in many cases, is not so in all cases, and is not always advisable in

* *The American Homœopathic Pharmacopœia* (Dr. J. T. O'Connor, editor) is based on Dr. Schwabe's work.

the interest of the patient concerned. From this point of view we especially distinguish between the approved homœopathic physician and the homœopathic laymen! Homœopathy is to a certain point a simplified medical system, in which even a simple, but educated man, with a natural, sound thinking capacity may find his way and may be therapeutically active with good effect. This we may see in the effective activities of numerous missionaries, as also with ministers and teachers in the country who are debarred from prompt medical assistance. Of course also non-physicians who wish to make use of Homœopathy must give to it a certain amount of study. The mere reading up of the treatment of a single disease is not sufficient. It is not sufficient to simply read up the treatment and give the medicine in a haphazard manner; but men must enter into the spirit of Homœopathy, must know the characteristic primary and secondary effects of the medicine they intend to use, and must compare the image of the disease they undertake to cure with the provers' image of the medicine to be chosen, having a due regard to the clinic experience of homœopathic physicians. Having premised this, every unprejudiced person will find it natural that Homœopathy seeks to create a literature which offers to the people what it seeks in a therapeutic manual. Homœopathic literature was formerly but poorly provided for in this direction. At this day various smaller and larger works are at our disposal, which contain excellent matter.

In how great a degree this has been done may appear from the catalogues of publications of central pharmacies. Nevertheless but few will have any conception as to the great circulation enjoyed by this literature. Of some of these works twenty editions have appeared, each one of not less than two thousand copies.

It has also been deemed necessary to found a journal in which to represent the interests of Homœopathy before the larger public and inform the public favorable to this curative method as to everything interesting happening in this domain. This journal is the "*Leipziger Populaire Zeitschrift fuer Homœopathie*"* appearing since the year 1870, published by Dr. W. Schwabe. This journal in the first year had hardly one thousand subscribers; but it has risen to be one of the best known and most widely circulated homœopathic journals on earth, for it is at present printed in an edition of twelve thousand copies, a cir-

*"Leipzig Popular Journal for Homœopathy."

culatation which has not been attained even by the most widely circulated homœopathic journals in the United States of North America. The wants of physicians are supplied by the "*Allgemeine Homœopathische Zeitung*"* published by the homœopathic publishing firm of A. Margraf; the 130th volume of this journal is now being published. Thus Leipzig has preserved its position as the center of Homœopathy.

The truth of the ancient Greek proverb: "The gods demand sweat as the price of success" is proved here. It has required unspeakable labor and care for many years to effect all this. Especially has it been found difficult to find and to educate suitable co-laborers. This is more difficult than many would believe. A homœopathic pharmacy is a special domain which requires pains-taking apothecaries, since the homœopathic potencies, at least in their higher degrees, are difficult to control. There is besides this a legal requirement necessitating the employment of regularly educated and examined apothecaries, in so far as the proprietor does not himself attend to the manufacture of the medicines. But apothecaries are but rarely willing to enter as assistants in homœopathic pharmacies, unless they have a particular predilection for the system. The proprietor of such a pharmacy is indeed protected by the sense of duty and the professional oaths of the majority of his assistants from the more gross irregularities. In the reliable pharmacies, as a further security, only experienced men are entrusted with the preparation and potentizing of the medicines. It is this point which has shipwrecked enterprising individuals who have endeavored to establish new pharmacies. * * *

Homœopathy has advanced for eighty years by the side of the *soi-distant* scientific therapy, and despite of all assaults, and despite of the fact that every few years since 1812 its total destruction has been prophesied, it has nevertheless steadily increased. Would this be possible if, as declared by her opponents, who have not been able to substitute for it neither anything new nor anything better, nor anything more constant, Homœopathy is nothing but a great *swindle*? Would most of the physicians, if they as therapeutists were in possession of the stone of wisdom, need to get beside themselves for fury, whenever Homœopathy is mentioned? The profession of the apothecaries has arrived at a parting of the ways. More than ever before they need now to confess their true color, and to be as exact in furnishing homœo-

*"General Homœopathic Gazette."

pathic medicaments, as they are well known to be in all medicaments not homœopathic.

(The foregoing interesting paper was translated from the March number of the *Populaire Zeitschrift fuer Homœopathie* and considerably condensed, the parts omitted being such as are of purely local interest. Gentlemen who are awaiting the dissolution and funeral of Homœopathy may as well go about their business. Homœopathy has been taken up by the people and they will not let it die. In fact, a truth cannot die.—Editor of HOMŒOPATHIC RECORDER.)

HOMŒOPATHY IN VETERINARY PRACTICE.

The February and March, 1895, numbers of the *American Veterinary Review* contains a paper read by Prof. E. C. Sayre, M. D., D. V. S., before the Illinois State Veterinary Medical Association, under the title "Homœopathy in Veterinary Practice," that has excited a great deal of attention from veterinarians. The paper opens with a fine *resumé* of the principles of *Similia*. This is followed by some very practical writing, from which we quote:

"In my own practice I have not kept any record whereby I can give any statistics. But I have recently met with remarkable success. During the winter of 1892 and 1893 I treated twenty-nine cases of azoturia (which under allopathic treatment we expect to lose seventy-five per cent.) homœopathically and lost four. The winter of 1893 and 1894 I treated but two and lost both; one of these, a large 1,800 pound horse, laid in a stone quarry all night and had been down twenty-four hours before I saw it. He improved considerably and got so he could walk about for fifteen minutes at a time, but the bruising he received on the stones caused immense sloughs in his shoulders and hips which, I think, was the cause of his death.

"For three years I have treated all cases homœopathically, with the exception of some few cases of colic, which had received large doses of opium before my arrival, when I have found it necessary to administer a cathartic to counteract the effect of the opium. In the three years I have not found it necessary to use a trochar more than once on the same patient, except in one case, as the homœopathic remedy prevented the further formation of gas, and all cases have been ready to work the next day (except those mentioned which had received a cathartic) as there was no

drug disease to recover from. I have lost some cases, but very few; on three of those I have held *post-mortem* examinations; two had ruptured stomachs and one had a ruptured colon.

Colocynth and *Carbo vegetabilis* are the remedies most frequently indicated in colic. In the proving of *Colocynth* we find "griping in the epigastrium, cramps in the stomach, pain relieved bending double, abdomen distended, tympanitis, incarcerated flatus, diarrhœa, stool accompanied with a great discharge of wind." Some of these symptoms are to be found in nearly all cases of colic, and *Colocynth* will relieve nine-tenths of them, and very quickly.

In those cases of gastric flatulence in which the gas is in the stomach and cannot be reached with a trochar, the horse constantly retching and eructations of gas, I have found that *Carbo vegetabilis* acts like magic.

In the provings of *Carbo vegetabilis* we find "colic with flatulence, stomach full to bursting, abdomen distended."

A few years ago I was called in consultation in case of impaction of the colon, which seemed hopeless. The patient had received large doses of cathartics, with anodynes, but the pain kept up. A short time before my arrival the attending physician had given a mixture which contained a drachm of the fluid extract of *Gelsemium*, alcohol and some other remedy, which I have forgotten, in an eight ounce mixture, giving one-half ounce every half hour. The dose of *Gelsemium* in this mixture was about four minims, certainly a very small dose for a horse. I made some remark at the time; the doctor agreed with me, but said the patient seemed to be relieved more by this mixture than anything that he had given, and that he had administered it before with good results. The patient recovered.

I thought very little about it, until shortly after I began the study of Homœopathy I was called one evening, about 6 o'clock, to see a valuable two-year-old colt, which I found lying at full length, looking occasionally at his side; pulse, 44; temperature, normal. On inquiry I found that his bowels had not moved all day and peristaltic movements could not be heard; so I made a diagnosis of impaction of the colon. The next thing was a homœopathic remedy for the case. He had drank no water for twenty-four hours. Here was a good symptom, thirstlessness. I could think of only four remedies in which this was a prominent symptom: *Gelsemium*, *Pulsatilla*, *Nux moschata* and *Apis*; so I concluded it must be one of these. I happened to think of the

case in which the small dose of *Gelsemium* had been given; this made me decide on *Gelsemium*.

I must confess that it was with some misgivings I put a few drops in a four-ounce bottle and ordered a half ounce every half hour until my return, which I did in about four hours, and found my patient up and eating hay. Before leaving I cautioned the groom to call me during the night if he showed any evidence of pain. I called about 9 A. M. the next day and found him comfortable, having eaten a bran mash, pulse 40, but no movement from the bowels. This was puzzling, as he had now gone twenty-four hours without a movement. I was strongly tempted to give a laxative and enemas; but reasoned if the trouble is not being relieved the pain he showed last night would have increased, he would not eat and the pulse would be higher instead of lower. So I concluded to let him alone. About 9 P. M. his bowels moved naturally and he was apparently as well as ever. This is a fair description of at least a dozen cases.

All cases of impaction do not exhibit these symptoms, but a great majority of them do. The great difficulty in treating animals homœopathically is the lack of symptoms which are characteristic of a remedy. Frequently we have to prescribe on one or two characteristics whereas in human practice one can always get at least three, and often a dozen symptoms, which the patient can tell. It is the symptoms of the individual case on which the homœopathist makes his prescription. It is not enough to know that a horse has pneumonia. The thirst or lack of it, the period of time in which he is better or worse, color of nasal discharge, if any, temperament, etc., all assist in making a homœopathic prescription.

The proving of remedies have thus far been on healthy persons. Before Homœopathy can attain its greatest usefulness in veterinary practice remedies will have to be proven on all the different animals. Doubtless the symptoms are the same with many remedies, as we have found they must be in our practice, prescribing on symptoms developed in man. But there must be some differences which may account for failures in some cases.

I have treated seven cases of tetanus that I can remember homœopathically, and lost one.

I have treated several cases of purpura hemorrhagica and lost one, and could mention many more diseases, but this is sufficient.

A few more peculiar cases to be mentioned, and I will close.

A black dog, of uncertain breed, was brought to me suffering from sciatic rheumatism he had had for five months, having been under treatment by two prominent veterinarians. For a month nothing had been done, as the case was considered hopeless. The entire right leg was greatly atrophied. I could get no symptoms at all peculiar, so I gave the lady that brought it a few powders of sugar of milk and told her to call again in three days. I read everything I could on sciatica, and found in the proving of *dioscorea* (wild yam): "Pain in the right leg, from point of exit of sciatica nerve, felt only on moving limb."

When the patient returned there was no improvement. I then gave *Dioscorea* and told the lady to call in a week. She reported that improvement began in four days, and he was then perfectly well. The muscles have since developed, until now the leg is natural. The same lady had a small terrier that had been vomiting for several days. The only thing peculiar about it was that every time it drank it induced vomiting, and there was great thirst. This I thought was a clear case for *Arsenic*, for we find in proving of arsenic, "great thirst, vomiting aggravated by drinking cold water." I gave *Arsenic*, but to my surprise was telephoned for the next day to call and see the dog, which had not improved. On careful questioning I found that the vomiting did not occur until about fifteen minutes after drinking. In the proving of *Phosphorous* we find "great thirst, vomiting of water as soon as it gets warm in the stomach." *Phosphorous* was given, and that was the last of the vomiting, as I called the next day to inquire.

One evening I was called to see an English setter bitch that had been in labor for fourteen hours. She was lying completely exhausted; there were occasional twitchings of the muscles of the face and body. There had been no pains for several hours. I made a digital examination but could feel nothing, as none of the pups had entered the superior strait. In the proving of *Nuxvomica* we find "twitching of the muscles of the face, pulse imperceptible, labor pains cease." *Nux* was the prescription, and I told the owner I would return in about an hour with forceps. It was about an hour and a half before I returned. The owner met me, smiling, saying about fifteen minutes after I left she seemed to brighten up, the pains returned, and in about half an hour the first puppy was born, and when I arrived she had five.

Hoping that what I have written will induce you to investi-

gate Homœopathy before you condemn it, I will close with a quotation from Dr. Sharp:

“We are not entitled to reject anything which professes to be a *fact*, if supported by a sufficient amount of evidence, merely because it is inconsistent with our expectations, does not coincide without previous opinions or is not within the limits of our former experience.”

(The publication of the foregoing article called forth so many inquiries that Dr. Sayre felt compelled to issue the following general reply:)

CHICAGO, *March 27, 1895.*

Dear Doctor: I have received so many letters of inquiry since my paper on “Homœopathy in Veterinary Practice” that I am compelled to use a circular letter in answer to them. This, I think, will answer very well, as the inquiries are all very much the same.

The only way to learn Homœopathy is to attend a homœopathic school.

The best homœopathic veterinary work is: “The Manual of Homœopathic Veterinary Practice.”

I would also recommend “The Science of Homœopathic Therapeutics,” by Carrol Dunham; Hering’s condensed “Materia Medica,” and Hawkes’ “Characteristics.”

Many have asked my treatment for azoturia, tetanus, purpura, hæmorrhagica, colic and other diseases. As I stated in my paper, you cannot treat cases homœopathically by name, the symptoms of each individual case determine the remedy.

The remedies most frequently indicated in azoturia are *Gelsemium Conium* and *Natrum mur.*; in tetanus, *Nux vomica*, *Mercurius*, *Kali bich.*, *Belladonna*, *Cicuta* and *Phytolacca*; in purpura, *Phosphorus*, *Crotalis*, *Lachesis*, *Ledum*, *Hamamelis*, *Secale*; in colic, *Colocynthis*, *Belladonna*, *Nux vomica* and *Carbo veg.*

By getting the books above referred to and studying the remedies and carefully questioning the attendants of stock, you will soon get so that you can apply Homœopathy intelligently. The publishers and sellers of the books and medicines are Boericke & Tafel, 36 E. Madison St., Chicago. Study one remedy at a time until you know all the symptoms of it, as given in Hawkes little book, then when you come across a symptom in a case think what remedy is indicated, and if you can get several symptoms indicating the same remedy you can prescribe it with absolute confidence.

Fraternally yours,

1246 Michigan Ave.

C. E. SAYRE.

WORTH READING.

There is a book bearing the date of 1885 that those who have the inclination to stray into unorthodox homœopathic paths may find interesting and, it may be, useful. We refer to *Progressive Medicine: A Scientific and Practical Treatise on the Diseases of the Digestive Organs and Complications Arising Therefrom*, by Ciro de Suzzara-Verdi, M. D. (published by F. E. Boericke, M. D.). That there is wisdom in the book no one can deny after reading the following, quoted from page 57: "Cooking is an art that may prove either salutary or injurious, and the health and happiness of millions of people depend to a great measure upon the knowledge of this accomplishment." It is an "accomplishment," though regarded by the world too often as mere menial drudgery. "It is a well-known fact," continues our author, "that a great deal can be done by a good nurse and cook. The former is to know how to apply what the latter has studied to prepare. A judicious diet may be often the means of restoration of the physical forces." This and a good deal more on the subject, a subject we are all prone to forget if not occasionally stirred up on it by writers like Dr. Verdi.

And that is the reason we believe in the old books—though this one can hardly be classed in that category—they recall to the mind so many useful things that we *know* but have packed away in our minds and forgotten.

Here is another bit from the book. It may stir up a growl of opposition, but we are calling attention to the book and not preaching: "Add coffee, tea, cocoa, wines, and we have all the substances that help nutrition and physical metamorphosis. These beverages have been instituted for the purposes of nutrition by preventing tissue waste. Nothing adds more to an intellectual worker than a cup of coffee and cream. It not only supplies a stimulus, but it does more—it supplies food by its nitrogenous constituents and prevents quick waste of vital force."

Tea drinkers are also comforted: "Tea, on the contrary, proves to be a respiratory fluid—increasing respiration by acting upon the vagi and pneumogastric nerve, thus eliminating carbonic acid in greater quantity. Tea is a stimulant which possesses, in very small quantity, nitrogen (thein), and helps the system to burn out carboniferous materials in the form of carbonic acid."

On that most dangerous of topics, alcoholic drinks, the author says that *excess* in these produces morbid conditions of the stomach, liver and kidneys and brain; to this he adds: "And there are many medical substances which would produce structural diseases of the organs in much less quantity and time than liquors, and yet they are considered inert. Even some articles of diet, were they so much indulged in, would produce some morbid effects upon the system." Liquors add "force to assimilation and nutrition, and so they are necessary to the physician, but only as organizers of an enfeebled recuperative power of nature. They exhilarate the imagination by propelling more blood to the brain, and thus give the brain more nutrition. They break up inactivity of the nervous matter, and they quicken action and reaction."

Yet it must not be understood that Dr. Verdi would encourage habitual drinking, for the very first clinical case he gives is one in which the abuse of liquor was one of the causes of the illness; he merely contends that wines and liquors may be made powerful agents for good in the hands of a physician who can look a little ways below the surface of things. "We, symptomatically speaking," he says, "might treat headache, pain in the stomach and back, irritability, aepsia and insomnia without looking deeper into the cause of these symptoms, then we would be no better than empirics ourselves."

Dr. Verdi's clinical cases, which are numerous and given in detail, are decidedly original and will repay the reader, even though he may not agree with the equally original treatment; each one is reasoned out in a manner that excites one's admiration, and in this respect are models worthy of imitation.

In tracing the disease back to its origin our author is both original and, to all appearances, logical, and his cases will open many medical eyes, provided those eyes will peruse his pages. Who, for instance, would trace a case of facial paralysis to a malarial origin? "The idea that miasmatic and infectious poison produce a great number of different maladies is correct."

Of electricity: "I have no hesitation in saying that it is one of the greatest panaceas for diseases of the organs of digestion and assimilation." And another is "water;" though "the use of water is to be carefully estimated before subjecting a person to its influences."

In fact, the tolerant and philosophical physician will read this book with much interest and, perhaps, with some profit,

even though it is not hot from the press and therefore "the latest."

THE STORY OF PROVERS WHO ASSISTED HAHNEMANN.

By Thomas Lindsley Bradford, M. D.

GUNTHER.

Of Gunther, who proved the *North Pole of the Magnet*, nothing is known.

SALOMO GUTMANN.

He was the first Homœopathic dentist. Hering says:* He became famous by the very peculiar ocular inspection he forced upon Prof. Jorg before a class of provers made up by the latter for the purpose of breaking down Homœopathy.

Hartmann says:† Gutmann, a dentist, who from some source had heard of Homœopathy, located at Leipsic about this time (1816) or perhaps six months later. He sought Hahnemann's acquaintance, thinking it might be of interest to dentistry. He also joined the Provers' Union.

The following notice is of interest; it was published about 1834 or 1835:

NOTICE.

Pearls and precious stones, although they have only an imaginary value, are not unfrequently esteemed more highly by their possessors, are more carefully preserved and more assiduously cleansed and cherished than the *teeth*. And yet this precious gift of creative nature has been given to man as much for his preservation as for his adornment. While the loss of jewels, which yet may be replaced, is guarded against by every precaution, man allows his teeth to be neglected until owing to this carelessness and this omitted attention they decay and are lost. Then only man laments his carelessness, but it is then too late. Nothing, not even the highest art, can ever replace nature.

To prevent this painful loss the teeth should be cared for *while they are yet sound*, and properly prepared dental medi-

**Hahn. Monthly*, Vol. vii., p. 176.

†*Allg. hom. Zeitung*, Vol. xxxviii., p. 326. *Med. Couns.*, Vol. xi., p. 269.

caments indispensable for this purpose should be used. Five minutes suffice to clean them, and this amount of time even the most busy man can daily devote to his teeth. Their longer preservation and the immunity from toothache sufficiently repay a man for this expenditure of time as well as for the small annual expense necessary to supply the proper dental medicaments and appropriate tooth brushes.

To facilitate the proper care of the teeth I make known the use of my dental medicaments, in the preparation of which I have followed the teachings of nature, eschewing the pernicious principles of following the fashions and prevailing practices. I may, therefore, assuredly hope that every one who uses them, if he accurately follows my directions, will receive from them the benefits intended.

My method of operation is the following: The little tooth brush is moistened with water, pressed on the tooth powder so that a little of it may adhere to the brush, then the gums of the upper teeth are brushed from above downwards, but the gums of the lower teeth from below upwards; the gums are thus not brushed across their breadth but lengthwise. The gums must be brushed as carefully on the inner side as on the outside. When the tooth powder is black and very fine, there often remains, even after repeatedly rinsing the mouth, a black, ill-looking rim between the loose still unsound gums. To remove this take water into the mouth, and bending over the basin rub the gums in the way above mentioned and repeat this until the water flowing from the mouth is quite clear and the black rim can no more be seen when looking into the looking-glass. When the gums become sound again, and are firmly attached to the teeth, this disagreeable feature will disappear.

When this has been done the tooth brush should be moistened with the tooth tincture or with the mouth water, and the gums should be rubbed with it repeatedly in the manner above described. In this way the teeth will be cleansed at the same time. With the looking-glass it will be seen whether the tooth brush be properly directed and the gums rubbed in the manner directed, for everything depends on this. When the gums are not sound they will ache and bleed at first with this treatment, and with the use of the tooth tincture; but if this practice is persevered in, this pain soon ceases and the gums become sound. Let no one think that it is only necessary to clean the teeth without cleaning the gums, especially when the gums bleed and are painful; in such case brushing the gums is of very great importance.

These symptoms are the surest signs that the gums are in an unhealthy state and must be healed, which can only be effected in the mode indicated. We must also add that the best dental medicaments will effect nothing if a worn out tooth brush or one that is too large is used; for with such we can never so conveniently brush the gums of all the teeth as with very small brushes, which I have ordered made for the last twenty years and which I always keep on hand. With these the gums of the back molars can be cleaned on the inside and on the outside as easily as those of the front incisors, even if the mouth is small and the face full. This is not possible with the ordinary large tooth brushes even when the cheeks are lean and the mouth large. This brush, therefore, also does away with the various forms of tooth brushes lately invented, and all who use the small tooth brushes are so thoroughly convinced of their superiority that they will never return to the use of the ordinary large brushes.

LIST OF MY MEDICAMENTS.

Black tooth powder at the box at 7½ to 10 Ngr.

Red tooth powder, the box at 5 Ngr.

White mouth water at 20 and 10 Ngr the bottle.

Spirits to cure caries of the teeth. Hollow teeth, which cannot be filled or where the right time for filling is passed, are protected by these spirits from the rapid spread of the caries. The bottle is 15 Ngr. These medicaments can all be bought at the above prices at the store of Mr. Neubert in Zittau.

“My harmless remedies against toothache are also for sale in the drug store there. A little vial costs 5 and the larger 10 Ngr. The cultured public in Bohemia, to which this circular is chiefly addressed, are sufficiently familiar with the usual scope of action of the dentist; but this announcement may be new to them, that I insert artificial teeth, as well the single ones, as whole sets, not only without pain, but also without any swelling or subsequent troubles which so often attend this operation.

Of the truth of this assertion any tooth-patient who wishes to give his confidence can become convinced by the written or oral testimony of the public at Zittau. In Leipsic I shall stay during the three fairs in Hain Street in Koestner's house, No. 1, first floor. At other times in Dresden, Toeppergasse, No. 12, first floor. At present my residence in Zittau is in the lower Webergass, in the house of Mr. Pretorius, third floor, where I shall remain till April 4th.

S. GUTMANN, Dentist.

WRITINGS.

The Toothbrush. Is its Use on the Teeth Useful or Injurious? Dresden. Adler, Dietze. 1850.

The Dynamics of Dentistry according to the Principles of Homœopathy. Leipzig. Kollmann. 1833.

On the Treatment of the Teeth and the Gums. Leipsic. C. E. Kollmann. 1828.

The Importance of the Teeth, their Care and Cure. Leipsic. Kollmann. 1827. Second edition, 1829.

Candid Words to Friend and Foe Concerning the Interdict of the Homœopathic Domestic Case of Tooth-Medicines. A small article in the History of Homœopathy. Greiz, Kenning. 1831. Also by Kollmann, in Leipsic, in 1833.

On the Simplification of the Rain and Shower Bath. Leipsic. Kollmann. 1835.

Advice to all Homœopathic Physicians.

FRIEDRICH HAHNEMANN.

Friedrich Hahnemann, the son of Samuel Hahnemann, was born at Dresden, November 30, 1786.* He attended the gymnasium at Torgau for his academical studies, from whence in the year 1808 he went to Leipzig to the Medical School. The "Organon" appeared in 1810, and in 1811 one Dr. A. F. Hecker made very bitter attacks upon it. Friedrich defended his father's book and published a "Refutation" of the attacks, through Arnold. Dresden. 1811.† In 1812 he defended his thesis, *De ulceris cancroso ortu et Curatoine*, and received his degree at Leipsic. Dudgeon says: After taking his degree at Leipsic he contracted a matrimonial alliance with a widow, who, I believe, still lives in Dresden (1851) with a daughter; but who, according to what I have heard, was not well qualified to make his married life happy. This marriage gave great offense to his father, and led to an estrangement between them which was never removed. (Lesser Writings p. 235). He soon after settled at Wolkenstein, a small town in Misnia. Here he purchased the drug store and was thus enabled to dispense his own medicines. He followed the system of his father faithfully. He was delicate in health, and was afflicted with spinal curvature.

*Hahnemann. Ein Biographisches Denkmal. Leipzig. 1851. p. 123. *N. W. Jour. Hom.*, Vol. iv., p. 229. Also *Allg. hom. Zeit.*, Vol. xxvi. *Hom. World*, Vol. xxvi., p. 265.

†"Friedrich Hahnemann's des Sohnes Widerlegung der Anfalle Hecker's auf des Organon der rationellen Heilkunde. Dresden. 1811."

Hartmann says: His great powers of intellect, which even his adversaries acknowledged, and his peculiar manners, gained for him the esteem and patronage of the public, but were very far from ensuring the kind regards of his near and remote colleagues, who ever looked upon the increase of his practice with an evil eye and upon the constant diminution of their receipts, which were already sadly reduced, with a mournful countenance. Both Zschopau and its environs brought him a large revenue, and the houses in which he opened an office once or twice a week, and to which he came tearing down the mountains in an open four horse wagon, were thronged with patients. But his colleagues, who differed with him in opinion, were not content with merely looking at him with an evil eye; they joined their forces to make a general attack, to which the Royal Sanitary Commission of Saxony readily lent a helping hand, and presented the accusation to which, properly speaking, no rejoinder was necessary, since the younger Hahnemann was a graduate of the country and proprietor of an apothecary establishment; hence no accusation for dispensing his own drugs could rightly be brought against him. However, the efforts of the stronger prevailed. Hahnemann was summoned to answer for himself which, on grounds already stated, he was not willing to do; preferring to put himself at once beyond the reach of this vexatious and unjust prosecution, he left wife, child, (a daughter,) and country, and removed to another part of the world, where he has not been heard from for many years. After this but little is known of his movements. He became a wanderer.

An account in the *Homœopathic World*, evidently taken from the "Biographical Account" of Albrecht, is as follows:* It is proved that he went to Holland and afterwards went to England. There all traces of him were lost. In a letter, dated September 8, 1818, from Helder in Holland to his parents, he says: I now think it right to give you some account of myself but not a very long one. I have generally been in good health. In many respects I am changed. I am now more cautious, steady and composed than when I last saw you. I have encountered many difficulties, but all have turned out well. I cannot give you any idea of my position, as it is now in a state of transition to something better. You will not hear from me again before the

*Hahnemann. Ein biographisches Denkmal. Leipzig. 1851. *Hom. World*. Vol. xiii., p. 381; Vol. xxvi., p. 265.

end of the present year. Do not write to me until I am more settled. I possess an ample and sufficient income. My engagements are numerous, as God and honest men are everywhere to be found. I am in no danger of perishing, as I am unwilling to do anything to displease them. This letter is written in a handwriting that displays the utmost wildness; as different from ordinary writing as the fiery glance and rapid speech of the clear thinker differs from the rolling eye and exaggerated language of the insane. Further letters dated from London, 1819, appear to have convinced Hahnemann, from their manner and matter, that Friedrich was mad. Hahnemann said: My poor son is certainly insane. One sentence is written in one corner of this letter, a large space is left blank, another sentence is in the middle and so on. A subsequent letter is written upon in detached places two or three inches apart, and in very minute characters. No trace of his after career or death was ever found, and the dreadful conviction settled over and darkened the mind of Hahnemann that his unhappy son had died in a madhouse.

This fate is doubly sad when it is remembered that Friedrich Hahnemann was a genius.* He spoke Latin, Greek, French, English and Italian, he understood as much of Arabic as could be required and desired from a highly educated physician. He was a very fair musician, played the guitar and piano, and had other acquirements.

The following letter, written to his sister on the first of April, 1819, shows the same eccentricity:†

Dear Amalie: I have just received a letter from my wife, and read the terrible words, your sister Minna is dead. The horror which I felt was excessive; nothing ever affected me so strangely. Sit down, my dear, and tell me all that has happened to the good creature. How is her child? Take care of it; do it for the sake of me, your brother. Tell me whether a good artist can be found at Leipsic, and what he charges for careful portraits of our father and mother executed in the style they would wish. I will send you the necessary sum to pay the artist. Did my parents receive my letter? Tell my wife that I will send her something next week. This week I shall not go to town to see the merchant with whom I am about to transact some business respecting my wife.

D. B.

* "Leben und Wirken." "Ameke," p. 159.

† Fischer's Trans. of "Biographisches Denkmal," p. 112.

This letter was also written in irregular, detached portions, and in very minute characters, and on small paper.

In a letter to his father dated London, May 23, 1819, he says:*

Dear Father : Not Bath, but London, is my present residence. That I write on Bath paper is merely habit.

You say I should dismiss all paltry fear. But you mistake prudence for fear. I am as friendly to the former as I am hostile to the latter. The prudent man neglects the unnecessary, the timorous man the necessary. In order to inform you that I enjoy a competency, and in order to learn how everything is going on, it was not necessary to give my address nor the date. But as soon as I learned how things had turned out I mentioned town and date. But I do not consider it necessary to make it generally known. Thus, for instance, it would be of no advantage to me if the people of Hamburg knew it, because I had there a bother with the apothecaries (and the doctors dependent on them), which came before the public, in the course of which I openly appealed to the conscience of the authorities. The affair is not yet ended. I do not want to go further in the business. It is known that I am travelling.

I have given to some one in Hamburg some papers to keep. For I thought that besides my diploma of M. D., and my passport, I needed nothing more (I found them quite sufficient). This man will, before the end of this year, send by post what he has in his possession addressed to you. (You have only to pay the postage.) When this happens I do not wish you to write an answer to the Hamburg man, but only let me know of it. Should he send a letter along with the papers you may send it on to me. Mother may open the packet, count the number of pieces it contains and tell me how many there are, but don't send any of them here until I ask for them. I might have saved you this trouble if I had thought it expedient to commission the man to address these documents to my wife. *Sapienti sat.*

She does not know that I write such long letters to you. She does not even know *if* I write to you at all, far less *what*. Therefore, what you do not consider advisable to tell her about my correspondence, or about what I send to you, leave it untold. I have already repeated that I commissioned Amalie (his sister) to give something to my wife. It would be agreeable to me were it forgotten. But you may tell her all you think needful,

**Hom. World*, Vol. xxvi., p. 266.

because I will neither deny nor affirm anything. I shall be, as it were, dumb. But if she talks of coming after me you can follow Plautus' advice: *Etiam illud quod scies nesciveris*.

According to my present mode of viewing things I think it right to make no, not any, change in the affair. That is to say, I will neither allow anyone to follow me, nor will I give her any explanation on this point. If it depends on me I will not say a syllable about it. My letters to her are extremely short. Before undertaking anything of the sort I think of talking the matter over with you and mother. I will only send her so much as will render it easier for her and the children to live. Nothing for any other purpose. Six weeks ago I sent her a bill for 8½ pounds sterling. (I thought this would just make fifty thalers, but they paid her nearly 52 thalers for it.) The next remittance I send will be for mother. Only after that will I send another to my wife.

Minna's death made a peculiar, I will not say a bad, impression on me. To be able to be serious is now a comfort to me, and everything of an opposite character is repugnant to me.

I am very glad in more than one respect that the second edition of your "Organon," and the fifth part of the "Materia Medica" have come out. I will procure them.

The bookseller Bohte (the h must be before the t) is a busy man. In his book catalogue he has already got the first edition of your "Organon" under the No. 3024. Though he understands more about commercial affairs, the scientific matters are managed by a member of the company, who is at the same time the royal librarian. * * *

Friedrich again wrote to his father from Truro, on September 12, 1819, saying that he would be at home in October, and asking that letters should be addressed thus: Mr. F. Hahnemann, Doctor and Physician, in Truro (in England).

His father answered as follows:

Dear Son: We are all in distress that you have not written to us for seven months. Your receipted bill, a sealed letter addressed to you, and your diplomas of doctor, magister and mineralogist have come from Hamburg and are lying here. In September you wrote that you were coming to Germany in October; in that short time you could not have received an answer from us. We expected you to arrive; you did not come: what are we to think? Dispel this uncertainty. We have some agreeable tidings to give you in writing. Write as soon as pos-

sible to your distressed family, and S. Hahnemann, your father.

Leipsic, April 24, 1820.

This letter is addressed not to Friedrich, but To Mstr. Samuel Hahnemann, M. D., and Physician, at Truro.

This letter bears no sign of having been posted, though sealed and directed.

Dudgeon says: * In an undated fragment of a letter I find the following caution given to his correspondent (probably his father) about writing to him: My address on this letter to be written as usual, and in German characters (but without naming this place), closely sealed. Then an outside cover, fastened with sealing wax, with the following inscription: Mr. E. William Smith, T. o. Gr. L., No. 70 Compton St., Clerkenwell, London.

He evidently was afraid to trust his own family with his address. Perhaps he feared they might tell his wife. The paper on which this is written, and the handwriting and style of the fragment correspond exactly to the undated letter given later on, which I imagine to have been the first he wrote from England, when he was in terror lest the Hamburg authorities should hear of his whereabouts and get him arrested.

In a letter to his mother, dated May 18, 1819, he says:

I need not assure you that every time I get something to read from you I feel a peculiar pleasure. But the receipt of your letter of this 19th of April was for me a still greater pleasure. The reason lay partly in the great hindrance to our correspondence that has existed hitherto, partly in the refreshment, so long withheld, of exchanging ideas in the language I inherited from you. I can well imagine what anxiety you must have experienced during my father's illness. Those were grave and impressive days. But on that very account they were the more important and valuable—the parents of deep feeling and of serious reflection, the grandparents of a knowledge of God and of virtue—without suffering, I may say, our existence here would be valueless, the worst fate— [Then follows a blank.]

You ask how long a letter takes to go between us. This varies very much, because the wind required for a sea passage is not always the same. I am told that in quite favourable circumstances the time occupied is from four to five weeks. I am sorry that you still have to pay postage. I make my letters as cheap as they can be made. A letter consisting of half a sheet and a thin envelope costs me one thaler, fourteen good groschen

**Hom. World*, Vol. xxvi., p. 348.

(Saxon reckoning). For your letters I have to pay something more. But I wish you not to hesitate on account of this postage, for that is only a temporal matter and does no injury to our mind. Every one of you write as often and as much as you like. And do not always wait for letters from me. I will soon send you some money which you may use for meeting this expense, and the remainder you may keep for yourself not give away.

He then continues in this letter to give his impressions of London life and of England. Further on he says: I do not think I wrote you that last year I did not hurry away from Germany, but undertook a number of journeys of an interesting character. Among other places I visited the divine Hartz, with all its remarkable sights, such as Baumannshohle, Stufenberge, Rosstrappen, the so-called Magdesprunge, Alexiusbade mines, stamping mills, smelting, refining, foundry, tin plate, iron and other works, powder mills, not to forget that most sublime object, the Brocken.

In a letter to his sister Louisa, of May 23, 1819, he relates how he was nearly drowned:* I have several times been in danger of my life. Thus, for instance, I was on board a ship which was smashed by a much larger ship. The fall of the mast, the crashing of the two ships, the tearing to pieces of the cabin (in which I was at the time), the cracking, the crashing of the other parts of the ship as they broke up, the breaking of the ropes, the cries of distress, the howling and calls for help, alas! in vain—the moaning and groaning of those who were injured, all together made a frightful scene. Luckily the lower parts of the ship kept so well together, that by pumping, the water could be kept under. A merchant in the anxiety of the moment got intoxicated. Without a hat and with a knife in his hand (he was about to take dinner) he jumped onto the large ship that was passing, and then looked piteously at us. I did not receive the slightest injury, though everything all around me was broken and smashed to bits.

He also wrote letters about this time to his other sisters, Eleonora, Frederika, Charlotte. In a letter to Amalie he says: I enclose here a bill for six pounds sterling, which Messrs. Kopler & Co. will cash in due time. You need not say anything about me to them. They will only look to the name of the drawer, if he is solvent they will pay.

As soon as you have got the money then call in the best

* *Hom. World*, Vol. xxvi., p. 447.

painter, and see that it is a day when neither father nor mother has had to undergo any vexation or annoyance. Tell the artist to do his very best because if he does, he may get other jobs to do for us. You should also see that no disturbance takes place while the artist is at work. (He had in a previous letter written about engaging an artist to paint the portraits of his father and mother). The manner in which this immortalizing shall be carried out must be left completely to the originals of the portraits.

But if I might be allowed to say a few words on the subject I would suggest that father's head (and neck) should be painted quite unadorned, uncurled,* and unpowdered, also without anything not absolutely required; therefore without cap, or neck cloth, or collar.

The same with mother, as simple as possible. But in her a piece of white handkerchief would be becoming.

"I would not take upon me to dictate anything. Only this much, that neither of them should be beautified or flattered. He should paint them just as they are, not otherwise.

"LONDON, June 25, 1820.

My Dear Parents and Sisters: I can scarcely describe what has occurred to me during the last nine months, at the end of the last and the beginning of the ensuing year. When I had promised to be with you I was far more distant than ever. I have just arrived here, on my way to Scotland.

In a few weeks I intend to go to Truro, where I hope to find letters in order to take a passage from Falmouth to the Continent. I am well, with the exception of a slight melancholy which must be attributed to my bachelor life. I wish you all every happiness, and embrace and kiss you most affectionately. In my next you will hear perhaps more from Edinburgh.

FREDERICK HAHNEMANN.

This letter is also written in the same disordered hand.†

The Biographisches Denkmal and Albrecht's Life of Hahnemann give June 25, 1820, the date of the last letter of Hahnemann to his father, as the time when all the traces of the wanderer were lost. It has been established that he was living in Dublin in 1823. It is quite probable that he afterwards lived in the United States.

*Hahnemann was in the habit, as early as 1819, of having his hair artificially curled.

†Fischer's Trans. of "Biographisches Denkmal." p. 112.

After his letter to his father of June, 1820, he must have made his way to Dublin. In a letter written by Hahnemann to Dr. Stapf, dated Kothen, July 19, 1827, he says:* A few days since I received from England a letter from my son, in which he promises to come over and see me this year for certain. I am very well pleased with the thought of seeing him.

Dudgeon says in a note that this letter from England seems to be the last tidings received from him.

In the *Homœopathic Times*, London, August 21 to September 4, 1852, may be found some facts relating to him.

Under the title, "Hahnemann in Dublin," Dr. R. Tuthill Massy wrote to the editor as follows: "A short time since I had a conversation with Mr. Boyton Kirk, of London; he then informed me that Dr. Hahnemann attended his brother, in Dublin, for fits, in the year 1823. The great Hahnemann, after prescribing, said that the child would have two more fits; he further stated the days and hours, and then said the child would never have another, which turned out correct to the moment.

The father, Thomas Kirk, R. H. A., the artist, so renowned in works of sculpture, took Hahnemann's bust in the year 1823, while the doctor had the spark and fire of manhood. This fact has been mentioned by more than one author; Lady Morgan has referred to it, and to Hahnemann's visit, in a number of *Bolster's Magazine*, published in Dublin.

It occurred to me that each of the English homœopaths would like to see this head and have a copy, I therefore wrote to Mr. Kirk, of Dublin, and he has offered to do fifty casts, full size, from the original mould, for 10s. each; twenty-five for 15s. each; twelve for £1 1s. each; so that if we get fifty subscribers we can have them very cheap.

The above casts would be in plaster; but Mr. Kirr, of the Royal Porcelain Works, Worcester, has offered to get the mould from Mr. Kirk, of Dublin, and to finish fifty in Parian china, for 100 guineas, which will closely resemble the marble bust of Hahnemann in the late Sir Robert Peel's collection, and which, Mr. Kirk tells me, Sir Robert prized beyond all the works, foreign or national, in his gallery.

Hahnemann wore a pointed beard in 1823, and with his beautiful head and elegant outline this bust has been frequently

**Hom. World*, Vol. xxiv., p. 366.

taken for that of St. Paul. You may put down one in my name for one in the Parian china.

(Signed)

R. TUTHILL MASSY.

Worcester, August 14, 1852.

The issue for September 4th brought the next two letters, settling the authenticity of the Dr. Hahnemann, who was in Dublin, in 1823.

Your number of Saturday, the 21st inst., contains a letter from Dr. Massy, of Worcester, in which it is stated that the venerable reformer, Samuel Hahnemann, practiced Homœopathy in Dublin in the year 1823, and that his bust at present exists in the studio of Mr. Kirk, the well known sculptor of that city. The minutest incidents of Hahnemann's life are too dear to the Homœopathic public to be allowed to remain long secret; and his numerous personal friends, admirers and immediate disciples chronicled each event of his truly important career so accurately that it seems impossible so noteworthy a circumstance as a visit to the British Isles should up to the present have escaped the notice of his biographers. In no record of his life that has fallen into my hands is there mention of such a journey; on the contrary, all seem agreed that in 1823 he was enjoying at Coethen comparative repose and professional freedom, after his stormy sojourn at, and final expulsion from, Leipsic. As regards the bust in question, allow me to add that I have frequently seen it in the studio of Mr. Kirk, with whom I formed an acquaintance some years ago in Rome, which I was happy to renew in settling here in 1850. Mr. Kirk was then under the impression that the bust was that of the founder of Homœopathy; but the first glance suffices to convince anyone acquainted with Samuel Hahnemann's well known head that it never could have belonged to him, though a certain family resemblance is unmistakably traceable. It is, in fact, that of his son Frederick Hahnemann, who practiced here at that time, and made no little noise in the Dublin world driving a coach and four and keeping a handsome establishment in Dawson St. The face is expressive of fiery energy, the eyes possessing a penetrating vividness, which is wonderfully rendered in the clay; but the head, which is bald in front, though striking and remarkably fine, does not exhibit the massive squareness and breadth of forehead of the father, being rounder and less lofty. The lower part of the face is concealed by a large beard and mustache. It is evidently the head of no ordinary man, and never fails to attract the attention of those who

visit the studio of my talented countryman. His age might be guessed at from thirty-five to forty. The bust was executed by the father of the present Mr. Kirk while Frederick Hahnemann was in attendance on one of his sons, whom he cured of a distressing malady and is one of the numerous proofs of the remarkable facility possessed by that lamented artist of infusing speaking life into the inanimate marble.

As a memento of one to whom fate attaches a melancholy mystery, independent of the interest connected with all that relates to the great Hahnemann, this bust would form an acquisition to the study or gallery of the homœopathist or dilettante.

I had already requested Mr. Kirk to furnish me with a copy, as a pendant to a bust of the father, to which, as I before remarked, it bears a family resemblance.

I remain, etc.,

W. B. B. SCRIVEN.

40 Stevens Green, Dublin, Aug. 24, 1852.

Dr. Luther also writes regarding this bust, as follows: I have just seen last week's *Homœopathic Times*, and hasten, both for the sake of the credit of Homœopathy and as a matter of pious duty towards the memory of our great and good master, to correct the erroneous impression which your correspondent in your last number seems to have received with regard to the person of the name of Hahnemann, who was in Dublin in 1823. This personage was not the "great Hahnemann" himself, but his only son, Frederick Hahnemann, a man of a certain amount of talent, but very eccentric in his opinions and conduct.

When shortly after the appearance of the "Organon," Hecker criticised the new doctrine with great severity in his "Annalen," Hahnemann as usual remained silent; but his son Frederick undertook the defense of Homœopathy (1811). This task he performed but indifferently. He also occasionally assisted his father in his investigations of the pathogenetic properties of various medicines; however, he does not seem to have risen above mediocrity. His restless disposition and eccentric habits, as well as domestic circumstance, induced him to leave Germany.

He went to Dublin, not to practice Homœopathy, but for the avowed and exclusive purpose of curing epilepsy. In this, if report can be trusted, he frequently succeeded; but his professional conduct exceeded even the ordinary limits of oddity and eccentricity, to make use of the mildest terms. He soon left

Dublin again, and when Hahnemann, for the last time, heard anything about him he was somewhere in the West Indies. You may rely upon this account, as I have heard, during my long sojourn in Dublin, and from the most authentic sources, a great many particulars which were very far from flattering, and always embarrassing, as people, like your correspondent, were apt to confound the two Hahnemanns. Besides this I had, in April, 1843, a long conversation with Hahnemann himself on this very subject. I was on the point of starting on a tour through North America, and intended to return by the West Indies. Although Hahnemann had great reason to be dissatisfied with his son, and seldom spoke of him, it would seem that his then weak state of health, from which he told me he would never rally, had softened his paternal heart, and he evinced great anxiety that I should make extensive inquiries in the West Indies about his lost son.

Circumstances, however, prevented my returning by that route. Possibly Frederick Hahnemann is still alive, and may be met with by some of our numerous transatlantic friends. When I asked Hahnemann how I should know him, he said: He cannot deny his father as to features; he is humpbacked and eccentric in dress, manner and habits. These brief particulars about Frederick Hahnemann will, I trust, be sufficient for all public purposes

I remain your obedient servant,

CHARLES W. LUTHER.

Dublin, Aug. 28, 1852.

The next article is in the issue for September 18th. Dr. Massy wrote to Mr. Joseph R. Kirk and received the following letter: In reply to your favor I beg to say that I have asked my mother the questions you desired respecting the Hahnemann who practiced in Dublin in 1824, and she tells me he was humpbacked and had a very old appearance, looking like a man of sixty; but my father told her he was not more than forty at the time.

With respect to the mention made of the bust, in an article written some twenty years ago, in *Bolster's Magazine*, supposed to be by Lady Morgan, she merely mentions the bust as an instance of fine modelling, but says nothing whatever about him. There is no doubt that this is the bust of Frederick Hahnemann, not Samuel Hahnemann, the founder of Homœopathy and father of the man whose bust I have.

At present I have in my possession a beautiful bronze basso-relievo head of Samuel Hahnemann, modelled by the celebrated French sculptor David to make a mould on, which I have done, and until I saw it I was always under the impression that the other was the founder of Homœopathy. (J. R. KIRK.)

The next we hear of any person resembling the erratic Friedrich is in America.

In a journal published by Dr. Dio Lewis, in Buffalo, N. Y., in 1851, appears the following articles from the pen of Dr. Frederick Humphreys :*

FREDERICK HAHNEMANN—AN INCIDENT OF EARLY HOMŒOPATHIC HISTORY.

In the year 1841, when essaying to practice Homœopathy in the Northern part of Tompkins county, N. Y., with the few meagre helps then to be obtained in our language, and supposing myself a pioneer in this part of the country, what was my surprise to find myself occupying ground already consecrated by one of the immediate disciples of Hahnemann.

I then learned from numerous sources that in 1828 an individual of most singular appearance and manner had landed from a boat from the East, and for a season had made his sojourn in the vicinity of Ludlowville, and had extensively practiced Homœopathy in the country around.

He was a German and his speech was marked with strong German accent, though generally correct. His height was about five feet ten inches, very round shoulders and a very prominent chest, giving him a decidedly hunchback appearance.

His age was about forty and his complexion very dark, almost inclined to copper color. He was very quick and vivacious in his movements and conversation, and exceedingly irritable and passionate in his temperament and disposition. His dress was peculiar, exhibiting but little regard for the fashions of the day—his face unshaved, his beard long, and generally attired in an old morning gown, gave him anything but an inviting exterior.

He represented himself as the son of Hahnemann. That his father was then at the head of the Homœopathic College of Germany, in Leipsic, and was in the enjoyment of an immense and lucrative practice. That he had left the old world from hatred to her laws and institutions and had determined to live and die in the land of liberty, the country of his adoption.

**The Homœopathist*, Buffalo, July, 1851 (Vol. i, No. 3).

His success in the application of medicines, which were always given in the form of a very diminutive sweet powder, was such as to excite the wonder and astonishment of all with whom he came in contact, while his minute and to them childish and needless directions, as to the dress, diet, and habits of his patients, only excited their ridicule and contempt. His irritable temperament brought him into frequent difficulties with the people, who not infrequently took delight in making him the subject of their small jokes and petty annoyances.

The details of a single case which he treated and which finished his labors in that locality will serve to give as striking a picture of the man as anything we can offer.

It was the cure of a little girl of nine years of age who had been treated by the physicians for some two years for dropsy. As their skill had been exercised upon her to no purpose, the German was called in.

Upon an examination of her case he decided that this dropsy was only symptomatic, and that the real affection was a disease of the heart; and that the former would disappear upon the cure of the latter. The application of his first powder entirely relieved her of a pain in her left side which had existed from before the appearance of the dropsy, and which all the medicines she had taken utterly failed to reach.

His directions were very particular in reference to her diet, habits, etc. She was to have her own plate, spoon and knife, and on no account was she to use any other. She was not to sit or sleep with an aged person. Her diet was rigidly prescribed in quantity and quality; she was to smell of no flowers, or perfumes, and neither camphor nor acids were to be used about her, and if anyone smoking or chewing tobacco came into the room he was instantly to be expelled.

The treatment for a time was very successful. The child gained in strength and flesh and was quite comfortable, yet the anasarca did not disappear. The child's mother was very anxious to see the "bloat go down," and to her continued entreaties he only answered "it will do no good." Finally he yielded to her solicitations, all the while protesting that no benefit would result. He gave a powder, and the old lady declares that while she yet looked the swollen oedematous skin became corrugated and in a little time every vestige of it had disappeared. At the next visit the child was worse. He began earnestly to question the mother in a passionate manner if the

minute details of all his directions had been severally complied with. The old lady, irritated by his manner beyond endurance, pettishly replied that she thought it was high time that something more was done besides attending to his whims. At the mention of this last word the Doctor broke into a passion of ungovernable rage. His fury knew no bounds. "Whim, whim!" he yelled; "hah! hah! you call my doctrine whim! hah! hah! whim! whim! I will no doctor her more, hah! hah! She will go to the fools and asses, hah! hah! She will die! whim! hah! hah!" yelled he as he stalked back and forth with the language and manner of a lunatic. When excited, as was often the case, he had a passion for throwing in this word hah! hah! between his sentences, and with such violence as to resemble more the barking of a small dog than the voice of a human being.

Finally unable longer to contain himself he seized his hat and rushed from the house into darkness and storm, repeating his hah, hah, and whim, whim, until the sound was lost in the distance; he made his way to a neighbouring house where he hired a person to convey him to the village, some miles distant, that night amid the rain and darkness.

In the morning a vexatious suit was commenced against him for the recovery of the money which he had received for attendance upon the child.

A leather-headed justice readily gave judgment against him for the amount; when finding there was likely to be a recurrence of the same scene he hastily packed up and placed his baggage on board a boat on the lake and was never there heard of more.

The old lady at whose house the above scene occurred cannot forget those fiendish sounds of hah! hah! whim! whim! as they died away in the tempest and storm, nor can she entirely dissuade herself to this day but that she had a visit from the old Scratch himself.

It is upon record that sometime in 1832-3, when the cholera was making frightful ravages in the entire Northwest, especially at St. Louis, Dubuque, and Galena, a strange individual came out from the lead mines at the latter place. He was represented as a hunchback, very dark complexion, strong German accent, wore his beard unshaved and was attired in a long flowing dressing gown or robe. He cured several hundred of the people during the epidemic, giving them from a small vial, which had neither taste nor smell, and which seemed to act like magic. He re-

ceived nothing for his services; but enjoined it upon all who were restored to become nurses and attendants upon the sick, a requisition by no means unnecessary at that period of universal panic and fright.

Whether he died during the continuance of the cholera or whether he returned to his former seclusion is to me unknown.

The same individual probably 'is described as having practiced Homœopathy in the interim between the two dates mentioned above' in some one of the western counties of Pennsylvania.

There was naturally a strong disposition to learn more of this strange individual, nor was I in any degree satisfied in my inquiries until many months ago I mentioned the circumstance in conversation with Dr. Hering. He assured me, after a careful comparison of the various circumstances, that in all probability this was no other than Frederick Hahnemann, the long-lost son of our venerable founder.

Hahnemann had a son, to whom he alludes in one of his published letters in the most touching manner.

In many respects Hahnemann resembled Washington. Both were exact and particular, even punctilious, with regard to the lesser matters of life. In writing, keeping records and accounts, correspondence, untiring industry and scrupulous regard to all the minutiae of daily dress and decorum both were models. The son of Hahnemann was the opposite of his father. He affected to believe that society had degenerated and became entirely fictitious, and that considerations of health and comfort demanded our return to a condition of primitive simplicity. Hence, despising the customs and usages of surrounding society, attired in his morning gown and cap, with unshaved face, he sought to give a practical exhibition of the doctrine he maintained.

Between the father and son irreconcilable differences sprung up, and it is recorded of the former, with reference to the latter, that he never spoke of him.

Friedrich Hahnemann was married in Leipsic, but his marriage, like every other event of his life, was unhappy, and in a moment probably of gloomy resolution he left his family and embarked on board a ship for this country, and by them was never heard of again.

F. HUMPHREYS.

It is possible that after his residence in Dublin Friedrich did take ship and come to the new world, where he must have known that the doctrines of Homœopathy even then were beginning to

gain a footing. There is no record in the German histories of Hahnemann after 1820. Albrecht says all traces were then lost. But, according to the letter of 1827, he was then in England, but did not make the promised visit to his father.

In a letter written by an English clergyman, and dated May 9th, 1850, he speaks of visiting Madame Liebe (Hahnemann's daughter,) he says:* I learned from her that there is also living in Dresden a grand-daughter of Hahnemann, the only child of his only son, who has been dead many years. She is, also, a widow, with six children and her mother, and is in great poverty.

The *Allgemeine hom Zeitung*, Vol. lvi., p. 72, contains the following note: Friedrich Hahnemann's widow died in Leipsic on March 22, 1858, of tuberculosis.

WRITINGS.

Refutation of Hecker's Attack upon the Organon of Homœopathic Healing of S. Hahnemann. Dresden. Arnold. 1811.

De medicamentorum confectione et exhibitione per pharmacopias. Jenæ. Croker. 1818.

PRACTICAL POINTS FROM THE AMERICAN INSTITUTE TRANSACTIONS FOR 1894.

You can get almost all the effects from the tincture of *Nux moschata* that is claimed for *Passiflora*. I use it by putting a half teaspoonful of the tincture into a half glass of water, giving it to nervous women and men on the verge of delirium tremens. A few doses will generally quiet them. A number of my patients have been so relieved of uncomfortable symptoms and nervousness and hysteria for the time being that they keep their bottle of *Nux moschata* on hand. Several experimented around and found out that it would cure headaches, sick stomach, etc. I remember once giving a patient with nausea a great many other remedies without much result, until one day she said: "Last night I took a dose of nutmeg and it cured my sick stomach."—A. L. MONROE, M. D.

Schussler, whose theory of tissue remedies is built entirely from materials furnished by others, evidently accepts this, for he says *Natrum muriaticum* acts on cartilaginous tissues, on mucous follicles and glands, and that it is indicated "in all catarrhs

* London *Hom. Times*, Vol. i., p. 665.

where the secretion is clear and transparent"—that is, of a strictly mucous character. The pathogenesis of sodium chloride and its clinical applications by both the old school and the homœopathic confirmed this long before Schussler was in small clothes.—S. A. JONES, M. D.

Regarding Dr. Kinyon's mention of pineapple, I wish to add that I have for three years past often prescribed pineapple juice in diphtheria. I let the patient gargle with it, or swallow it, *ad libitum*. This is a therapeutic resort well worth remembering. Children as well as adults like it, and it does not interfere with any indicated homœopathic remedy. Without doubt it seems to exert some favorable action in this infectious disease.—T. G. COMSTOCK, M. D.

[The B. & T. pharmacies keep this juice in stock, preserved by the same method employed in their unfermented grape juice.]

My next-door neighbor called on me one night at midnight, to visit his son, a lad of twelve or fourteen years, whom I found suffering with an excruciating neuralgia of the left side of the face. The affected side was swollen and so sore that he would not permit it touched. Besides this, other parts of his body were averse to contact. This was not his first attack by a hundred, more or less. They came periodically, irregularly so, at intervals of three or four weeks, and had done so since boyhood. I had heard his screams on former occasions, for he was a screamer when the pain struck him. I had also heard the symptoms from various members of the family and had mentally prescribed *Spigelia*. The family physician had given up the job months or years before, and at each successive attack a new physician was called. I held on to my mental prescription and waited my turn. My immediate predecessor had become alarmed at the boy's tolerance of *Morphine* under the skin and had called for counsel. Upon being told that he was the last in the regular line, and that the next in order was a Homœopath, he fired his loaded syringe into empty space and left, muttering something about the "fool killer." I dissolved a powder of *Spigelia* 3x in six teaspoonfuls of water, gave a teaspoonful and sat down by the bedside to give a teaspoonful every five minutes, determined to fight it out on that line for thirty minutes anyhow. I was agreeably surprised before the third dose was due to find my patient not only relieved but asleep. Thus within ten minutes was accomplished by *Spigelia* what for years opiates and other drugs had failed to do. That the relief was obtained by *Spigelia*

is confirmed by the fact that six months intervened between this and the next attack, when two doses of the same remedy in the same potency and frequency again relieved, the relief remaining permanent for two years, since which time I have not heard from the case.—T. H. HUDSON, M. D.

At this time, quite by accident, I obtained a remedy, the effects of which were so magical that I was prompted to give them for the benefit of other sufferers. In a conversation with a student, while speaking of ivy poisoning, he described how in the country when the boys developed the poison ivy eruption, as was often the case, it was their custom to gather the so-called *Blood Root*, *Sanguinaria Canadensis*, and rub it on the affected parts with the result of invariably relieving the itching and burning. Entirely skeptical as to its efficacy in my case, but willing to try it in response to the patient's demands for something, anything, to stop the itching, I took some of the tincture and painted the foot and other regions where there was the most distress. On calling the next day I was greeted with the remark: "Well, doctor, you have hit it this time," and was informed that the application had indeed acted like magic. It had relieved the itching and burning for hours, and several applications had made possible a restful night.—J. W. DOWLING, M. D.

Twenty years ago the late Dr. Thayer, of Boston, declared upon the floor of this institute that *China off.* will cure gall-stone colic. This was before my time, medically speaking, and it was before the time, medically speaking, of the majority of those who are now engaged in the active practice of medicine. The experience I have had in treating this painful ailment leads me to repeat the declaration of twenty years ago that *China* will cure gall-stone colic, or, I would rather say, cure the cause of gall-stone colic. I present this subject for the reason also that there may be some who have never tried the remedy for this purpose, or perhaps had not known that the claim is made that the remedy is capable of accomplishing such results. "Since 1854," he says (writing in 1874), "he has not failed in a single instance to cure permanently and radically every patient with gall-stone colic who has taken the remedy in his manner; and he has treated many from all parts of the United States. He gives the 6th dilution at increasing intervals till only one dose a month is taken; sometimes he says the first effect seems to be an increase in the frequency of the attacks, till, as he supposes, the gall

bladder is emptied; but then they subside and cease.”—W. J. MARTIN, M. D.

1. The Materia Medica should be presented to the beginner in the narrative form, as Dunham and Farrington. At the same time he should either be familiar with or study semiology. 2. The student should then be taught to group his drugs according to the tissues upon which they act, and again according to their special action on those tissues. 3. The different symptoms of the same drug should be grouped to correspond with groups of symptoms found at the bedside. 4. The different drugs of each group should be compared, placing particular stress on the mental symptoms and modalities studied in connection with the various dyscrasias. You will notice that by following this method you will also follow Bœnninghausen’s advice for making the homœopathic prescription. The first two points will give you your locations and sensations, the last two your conditions and modalities.—GEO. ROYAL, M. D.

How often do we hear some physicians extol the virtue of *Kali bichrom.* in croup beginning with its earliest manifestations and “pushing” the drug to the point of nausea; such observations show ignorance of the essential nature of the drug and an utter disregard of scientific and successful therapeutics. I would have you sear your memories with the notion “never exhibit any salts of potash where there is fever;” they are applicable only in a condition of weakness, soft pulse, coldness, general depression, never excitement; certainly not febrile excitement. A study of the symptomatology of these drugs show that in general there runs through them a tendency to sudden and sharp pains (neuralgic like) a marked tendency to periodicity, decidedly characteristic in *Kali carb.* and, perhaps, in *Kali bichromicum.*—T. F. ALLEN, M. D.

It is just here that we make our mistakes in teaching and studying materia medica. We have been taught it is a difficult study; that it is impossible to study it; and instead of adopting the simple, easily explainable rules of Hahnemann, we have gone in quest of some will-o'-the-wisp—some pet theory of some author—in an attempt to utilize pathology. To the genius of him who rescued the science of medicine from the chaos of empiricism are we indebted for the simple rules for the proving of remedies on the healthy, the recording of their effects and the selecting of the similimum after the record is made. It was

the genius of his master of observation who formulated rules for the practical application of the law in the cure of the sick. These rules are found in the "Organon," the only medical work contemporaneous with Hahnemann ever opened to-day except for antiquarian research. They are as fresh, as true, as clear and explicit in their beautiful simplicity as the day they were written, and here they will stand forever, a monument to the genius of their author.—H. C. ALLEN, M. D.

I have had some experience with *Passiflora* in epileptic cases, but very little. I almost always use it in those cases. I had a case I never saw, which seems to be an epileptic condition. The patient lives in Kansas, and is about six years old. The parents always write me the symptoms. It seems to be a *Passiflora* case. I heard about *Passiflora* and sent it to the child, and the child got well. I never saw the child, of course, and could not tell how it acted. But it did the work.—E. G. CONDON, M. D.

PHYSICIAN WANTED.

MESSRS. BOERICKE & TAFEL.

Gentlemen: We are in need of a homœopathic doctor at Belleville. Dr. Garver was here and did a good business. Now if you know of a physician wanting to locate I think this would be a good place, as there is none nearer than Lewistown.

Yours truly,

J. C. HARTZLER.

Belleville, Mifflin Co., Pa., April 1, 1895.

CIMICIFUGA AS AN EXTERNAL REMEDY.—Dr. H. Z. Gill, in *Kansas City Medical Record*, writes that *Cimicifuga* is an excellent remedy to be locally applied in cases of severe pain about the eye or ear.

The method of applying it is by means of a camel's hair brush, painting it on around the eye as rapidly as it will dry, using from a half to a drachm of the tincture for each eye treated. One case treated was that of a girl aged six years, of rather delicate constitution, who had inflammation of the right eye for three weeks. Various remedies had been applied with little or no relief. She had been in bed a week; no appetite; fretful; light very painful to the eye, and she kept it covered with a cloth wet with cold water. It could not be opened without assistance.

Examination revealed a deep and quite extensive ulcer on the inferior part of the cornea. The tincture *Cimicifuga* was applied, and in less than half an hour she opened the eye without assistance and the dread of the light had disappeared. In the evening the eye was much less sensitive to the light. In less than two weeks the eye was well. An opacity was left at the site of the ulcer. After the first application the relief was so marked she asked her mother why she had not had that on before.

DIPHTHERIA CURE.—Raymond, age 12, a sickly, overgrown boy. All the family of four children dangerously ill with malignant diphtheria. Hygienic conditions extremely bad, and nursing, food and clothing no better. Bright red swelling on inside of right side of throat—not swollen much outside. Very little fever or pain, except a general aching in the back and limbs. No further symptoms appearing *Lyc.*, c. m., one powder, was given and allowed to act for four days. At that time the membrane had nearly disappeared and generally appeared much better. On the following day was taken with vomiting and violent, lancinating pains in the stomach and bowels. They were the most severe I had ever witnessed, doubling up the patient like a hoop and throwing him violently about the bed with a single bound. About this time deep purple spots, petechiæ, appeared on the ankles, kneecaps and elbows, thence over the abdominal walls. Dark, clotted blood appeared in the urine, passages, nose, gums, and the dark green matter vomited contained clotted blood also. There was an aggravation of the sufferings in the evening and night, and from the least particle of food or drink. It is needless to say that “counsel,” as well as the attending physician, informed the family that death was near. However, those horrid, lancinating, tossing pains suggested one of the more virulent snake poisons, and agreeing also with the vitiated state of the blood discharged, five doses of *Lach.*, c. m., were given each evening for a week, when the pains and hemorrhages began to abate, and the medicine ceased. It was three weeks before the extreme restrictions on diet could be at all relaxed without a return of the trouble. He is now and since well and hearty—a magnificent victory for pure Homœopathy.

What a puny will-o'-the-wisp would Anti-toxine prove in such a case as I have recited. Till they can manage such cases

and restore them to health with their "Antis" I shall stick to pure Homœopathy and rarely lose a case.—G. E. Clark, M. D. in *Medical Visitor*.

TWO CURES OF ANEURISM.—I now want to speak of two cases of aneurism which, while not properly belonging under my subject, are of great importance if further experience bears me out.

The first was a boy of fifteen years of age, who had been at work in a chair factory, but quit on account of inability to use his left arm. He complained of pain in his left shoulder and arm, numbness of arm and hand and a dry tickling cough. Examination showed a pulsation at juncture of middle third with inner third of clavicle, a whirring sound distinctly recognizable with the stethoscope above and below the clavicle and in the back. Heart action rapid. Gave *Aconite* for twenty-four hours, then examined him carefully again; gave *Calc. phos.* 2x. In two weeks all the symptoms had disappeared. I examined him again in four months and there was no recurrence of any of the symptoms.

The other was a woman of forty-five years of age, whose case had been diagnosed an aneurism by four physicians. When she came into the hands of Dr. Lucy and myself she had been under the treatment of an allopath, who had kept her confined to bed, regulating her diet and giving *Ergot*, *Bromide of Potash*, *Aconite* and *Chloral*. When I first saw her her pulse was 140, the aneurism showing an inch in diameter and pulsating at least a quarter of an inch forward just above clavicle. Her feet were much swollen. The pain was intense and she was delirious. She was broken out in large wheals all over her body. After treating her for the effects of the drug, given by the allopath, the aneurism had not decreased any nor had the swelling of the feet. We gave her *Calc. fluor.* 3x, and in a month the swelling of the feet had decreased materially, but the aneurism and pains remained about the same. For about two weeks she seemed to get some worse when she was given the 12x potency. After taking that for a month she was able to walk all over the house and stay up most of the day. She has now been on the 30x for five months, is able to walk any distance and attend to household duties without any inconvenience, except at times having some pain in right side after overexertion. I have seen her nearly every day and I

am satisfied that the aneurism has decreased about one-half.—
H. S. Feller, M. D., Ky. Hom. Med. Society, 1894.

BOOK NOTICES.

Urinalysis, including Blanks for Recording the Analysis and Microscopic Examination of the Urine. For Medical Practitioners, Life Insurance Examiners and Specialists. Arranged by Joseph C. Guernsey, A. M., M. D. \$3.00. Philadelphia. J. B. Lippincott Company, 1895.

The increasing importance of urinalysis in diagnosis and prognosis has rendered possible such a work as this, and no physician who is up in that most important branch of medical science can afford to be without a copy of it. The preface is brief and to the point, and is followed by the table of contents; the part devoted to "Apparatus and Chemical Reagents" follows, giving needed details; then "Chemical Tests in Urinalysis," which are given in a masterly manner, and, though brief, are all that are necessary, and they are so clearly presented that any one can easily follow them. Another short part is devoted to "The Centrifuge in Urinalysis," the latest discovery, and then a paper on "Diet" to be used in Bright's disease and diabetes, in the light of the latest scientific investigation. To make the book still clearer two pages of blanks follow filled out so as to show the proper use of the signs and abbreviations. A blank index with lettered margins for indexing names precedes the blanks, which make up the bulk of the work. There are five hundred blanks, each occupying a page $9\frac{1}{2}$ by $6\frac{1}{2}$ inches in size. For the convenience of those desiring the blanks separately they can be obtained in tablets of fifty blanks each. As there is no other work of this character published, physicians should give it a careful examination; for its use will further promote order, even in the most orderly office. To the life insurance examiner this book will be a necessity in a few months or as soon as its merits are known.

The Treatment of Wounds, Ulcers and Abscesses. By W. Watson Cheyne, M. B., F. R. S., F. R. C. S., Professor of Surgery in King's College, London. In one 12mo. volume of 207 pages. Cloth, \$1.25. Philadelphia. Lea Brothers & Co., 1895.

This useful little book is divided into three sections: "Treatment of Wounds," "Treatment of Ulcers" and the "Treatment of Abscesses," each general heading containing under it numerous subdivisions. The treatment, of course, is purely external, no internal remedies being prescribed in the book; but this fact does not detract from the book's usefulness to the homœopathic practitioner up on symptomatology. The book's usefulness is due to the fact that it treats of a class of cases that, though they might be termed surgical, are nevertheless daily met with and treated by the general practitioner. We quote from the publisher's announcement the following concerning Prof. Cheyne's book:

"Antiseptic methods have revolutionized surgical procedures and have added vastly to their successes. Moreover, by throwing light upon formerly unexplained failures, they have increased not only the knowledge but also the confidence of the surgeon, an element which must be recognized as having an important influence upon results. Professor Cheyne has long been known as one of the foremost of London surgeons, and as a critical student of antiseptic procedures in their practical bearings. In this volume he has described the methods of treatment which he employs and which he knows 'to be efficient and to be the simplest consistent with certainty in results.'"

We are always a little surprised on examining books of this class, and the one under review is no exception, to find no mention of *Calendula*. The wonderful healing properties possessed by this old remedy surely merit it a place, and a high one, in all works on surgery or the treatment of wounds.

Hahnemann's Therapeutic Hints. Collected and Arranged by R. E. Dudgeon, M. D. 60 pages, 8vo. Cloth, \$1.00 net; by mail, \$1.05. London: E. Gould & Son. 1894.

Scattered through his books, the *Chronic Diseases*, the *Materia Medica Pura* and the *Organon*, and also through his letters, are to be found many therapeutic hints by Hahnemann. These hints Dr. Dudgeon has carefully collected and published in this neat little volume. The matter is arranged in the form of a repertory arranged on the Hahnemannian schema. The book is of unquestionable and permanent value, and, we are glad to hear, is selling well in this country.

A Book of Detachable Diet Lists, for Albuminuria, Anæmia and Debility, Constipation, Diabetes, Diarrhœa, Dyspepsia,

Fevers, Gout or Uric Acid Diathesis, Obesity, Tuberculosis, and a Sick-Room Dietary. Compiled by Jerome B. Thomas, A. B., M. D. \$1.50. Philadelphia: W. B. Saunders. 1895.

The book consists of several hundred pages that may be easily detached, as they are perforated along the margins. As for their use: Say a physician has a case of fever to treat and wants to have an easy say in patient's diet; he tears out a page of No. 6 and leaves that as his instruction concerning that matter. On the stub of the book is space for name and date. On front of blank No. 6 is blank space headed "Physician's Orders," with other blanks for names and dates; the back of No. 6 contains diet for fever cases—what may and may not be taken. Now, if the attendant physician agrees with the author's ideas on diet for fever cases, this is certainly a very convenient way of leaving his instructions. At the back of the book is about a hundred detachable pages on sick-room dietary, how to make toast water, rice water, teas, and drinks and soups, about thirty in all.

A Manual of the Modern Theory and Technique of Surgical Asepsis. By Carl Beck, M. D., Visiting Surgeon to St. Mark's Hospital and to the German Poliklinik of New York city. With sixty-five illustrations in the text and twelve full-page plates. 306 pages. Cloth, \$1.25. Philadelphia. W. B. Saunders. 1895.

Dr. Beck bases his manual on the method employed in the treatment of wounds at the New York Post-Graduate School of Medicine and at the St. Mark's Hospital, with which institutions he is connected as visiting surgeon. It opens with a chapter on the Influence of Microbes, and then follows others on the importance of Asepsis, Means of Disinfection, Prophylactic Disinfection, Disinfection of Instruments, Sterilization of Catgut, Sponges, Drainage Tubes and Irrigation Fluid, the Aseptic, Operating Room, Aseptic Wounds, Infected Wounds, Aseptic Open Wound Treatment, Renewals of Dressing, Technique of an Aseptic Operation, Aseptic Injection, Anæsthesia, Asepsis in Private Practice and Index. The twelve full-page plates are unusually good. For one who believes in antiseptics and the whole modern doctrine involved therein the book is excellent.

"SKETCHES OF WONDERLAND," by Olin D. Wheeler, is the title of a beautiful tourist's book copyrighted and published by Chas. S. Fee, of the Northern Pacific Railroad, St. Paul, Minn.

It is beautifully illustrated and treats of that wonderful and almost unknown country along the line of the great northern trunk line. Anyone can obtain a copy by forwarding six cents in stamps to the publisher, and those who contemplate a summer outing in that direction should procure a copy.

TO THE EDITOR :

Kindly make mention of this pamphlet in your review of books, and say that it will be mailed free to any one on application to the STATE IMMIGRATION ASSOCIATION, 620 Common Street, New Orleans, La.

The above note was pasted on the outside of a rather primitive looking paper pamphlet of 60 pages sent to the RECORDER, entitled "Louisiana," which is offered free. The pamphlet is full of information concerning the land of sugar and flowers that is of more or less interest to all.

NEW YORK, March 22, 1895.

MESSRS. BOERICKE & TAFEL.

Dear Sirs : Your representative has handed to me the copy of "*The Accoucher's Emergency Manual*," by W. A. Yingling, M. D., which you so kindly sent with request for my opinion of it. We sat right down together, and put it to the crucial test as follows:

Supposing I am in the lying-in room, mentally cursing a thick, rigid os that keeps the woman in constant, fruitless pain. Assuring words to the sufferer are insufficient. Turn to the Labor repertory, and under "Os uteri, rigidity of," fifteen remedies appear. Of them three—*caul.*, *gels.*, *verat. v.*, are very prominent. Before studying the text of the fifteen look a few lines lower, at "Os uteri, thick, with." Two remedies are named, *gels.*, *lob. i.* That makes a strong combination for *gels.* Turning to the text of *gels.*, full confirmation of the foregoing is found and a string of concomitant symptoms. That case will be settled as soon as the potentized remedy has been given.

Or, let it be an instance where the os is soft but labor does not progress very well and the patient spends a large share of her time exclaiming: "Oh! my back! my back!" varying it frequently with "Oh! Doctor! CAN'T you do something for me?" Again the Labor repertory. "Back, pains worse in," has five remedies, three in italics—*caust.*, *nux v.*, *puls.* The text of *caust.* says, "distressing, sore, aching pain in her back is the chief complaint, with spasmodic labor pains." *Nux v.* and *puls.* do not read as strong in that respect. *Caust.* it is. Another case quickly decided.

In a few minutes I have demonstrated that this is a good book. Why will you have it *cimicifuga*? There is no such drug. Please put on the right label, *actea racemosa*. Before issuing a second edition, the author might read my six cases of placenta prævia. Perhaps he will then want to rewrite a part of page 20. The book is substantially and handsomely made, and is convenient to carry. I hope it will be used by many.

Yours truly,

EDMUND CARLETON.

The Accoucheur's Emergency Manual. By W. A. Yingling, M. D., Ph. D.

This manual is written for the purpose of giving *therapeutical* assistance in the emergency at the bedside. It presumes that the attendant knows everything else needful at the trying crisis. It is in two sections. I. Therapeutic Indications. II. Repertories. The field covered is an excellent compilation of the best our materia medica contains. A remedy is presented, *Pulsatilla*, for instance, and the symptoms of labor abortion, hæmorrhage, retained placenta, convulsions, after-pains, and generalities are clearly given. Each of the prominent remedies of the materia medica are similarly handled. The repertory is complete. The work closes with an obstetrical table. The publisher's part cannot be excelled.—*Hahnemannian Monthly*.

A Pathogenic Materia Medica Based Upon Dr. Hughes' and Dake's Cyclopedia of Drug Pathogenesy.

This important work is the result of provings made by the members of the Baltimore Club, and includes forty seven drugs. As the name indicates, it is purely pathogenetic, no clinical symptoms being admitted. We are glad to see this work in print, it is a step in the right direction, and we sincerely hope that it may be the means of encouraging others to make provings and reprovings of all our remedies. There is nothing so much needed in our school to-day as a pure pathogenesis of our old remedies based upon modern methods of observation and investigation. We believe with the authors, "That this work of reconstruction should be undertaken and accomplished for the sake of the scientific status of Homœopathy, as well as for the practical good that may result from the application of a system of therapeutics based upon so strict a method." In addition to its value as a text-book it will serve a useful purpose in calling the attention of the profession to the fact that we do not need new provings, but reprovings of the old drugs.—*Denver Journal of Homœopathy*.

Homœopathic Recorder.

PUBLISHED MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street,

Philadelphia, Pa.

SUBSCRIPTION, \$1.00 PER ANNUM.

Address A communications, books for review, etc., for the editor, to E. P. Anshutz P. O. Box 921, Philadelphia, Pa.

OVER twenty thousand citizens of Pennsylvania have petitioned the Legislature for money necessary to build an asylum for the insane where patients may receive homœopathic treatment. At present the allopaths have all the asylums in the State under their care. It is pretty safe to assert that over one-sixth of the taxpayers of the community are believers in Homœopathy, therefore this petition is for what is simply their right, unless citizens are not to be allowed any liberty in the choice of medical treatment. The petition has been received with favor by the Legislature and the public press. The *Evening Telegraph* of Philadelphia said of the petition:

“It is the duty of the State to recognize public requests of this sort, and it is to be hoped the the movement in favor of the Hahnemann Asylum will be favorably regarded. Pennsylvania should not be a laggard in matters of this sort.”

This favorable comment has made the *Medical News* angry, and its anger shows itself in its usual way—in an editorial that is untruthful and unjust. It is untruthful when it intimates that Homœopathy treats the insane with “potentized moonshine;” there is no such thing in the homœopathic pharmacopœia. It is unjust, and also betrays the absence of those traits that enter the make of what men call a “gentleman,” when it intimates into that the petitioners are after “plunder.” The *News* never says a word about the fact that in the homœopathic asylums for the insane in Massachusetts, New York and Minnesota the average percentage of recoveries of sanity are far higher and the death rates lower than they are in the allopathic asylums. It ignores this, avoids all discussion and resorts to methods of argument that should have no place in the columns of a journal that claims to be a representative of “scientific medicine.”

If the *News* must discuss this question let it do so in a scientific manner. Let it demonstrate that under allopathic treatment there is a larger percentage of recoveries of sanity than

there is under homœopathic treatment in asylums for the insane. If it can prove this to be the case it will have just grounds for opposing the granting of money for an asylum to be placed under care of Homœopathy. If, on the other hand, scientific investigation demonstrates that the insane have a better chance of recovering their reason under homœopathic treatment than under allopathic, what then? Is "the code" of more importance than the cure of disease?

An asylum for the insane is not, or should not be, a prison, where the patients are kept quiet by means of drugs; it should be a place where unfortunates, deprived of their reason, may be restored to sanity. This is the aim of the homœopathic asylums for the insane, and this official records overwhelmingly prove that they achieve.

DR. S. T. ARMSTRONG (*N. Y. Med. Jour.*, April 13, 1895,) advances a new view of *Antitoxin* in the treatment of diphtheria, and that is the globicidal power of alien serum on the blood of an animal into which it is injected. He writes:

"In a monograph on *Transfusion of the Blood*, published in 1875, L. Landois reported that the serum of the dog, the horse, or the rabbit dissolved the red globules of other animals with great rapidity; and in the last edition of Professor Stirling's translation of Landois's *Physiology* there is the statement that, if the serum of one animal is transfused into an animal of another species, the blood-corpuscles of the recipient are dissolved, and if there is a general dissolution of the corpuscles death may occur."

"Dr. G. Daremberg (*Archives de méd. exp.*, 1892,) stated that his experiments showed that, while the serum of an animal of one species did not destroy the red corpuscles of an animal of the same species, it rapidly destroyed the corpuscles of an animal of another species. If warmed to from 122° to 140° F., or exposed to the light for several days, the serum lost this globulicidal power."

"G. Hayem, in his monograph on *The Blood*, states that the serum of the ox more or less profoundly changes the blood of the dog, producing in it small emboli that may involve the functions of organs or even life itself. Microscopically, these emboli consist of degenerated elements of the blood, the hæmatoblasts and the red and white corpuscles being altered by the serum. He specifically states that horse's serum produces phenomena

similar to those caused by ox's serum. He further states that the urine is habitually suppressed and the kidneys are congested."

"The tendency of alien serum to produce emboli has also been noted by C. Lazet (*La France méd.*, 1891), who found that if the serum of a dog was mixed with the blood of a man, or *vice versa*, there were produced more or less pronounced alterations, and solid concretions were formed from the metamorphosed elements."

"The undersigned believes that it was this tendency of alien serum to form emboli that caused the death of the seventeen-year-old girl in Brooklyn. And this toxic influence of serum *per se* explains all the unusual and untoward phenomena that have been reported in diphtheria patients treated by antitoxine serum."

AN anonymous correspondent ("Optimus," of Cleveland,) of that snarling old moss-back, *The Medical News*, writes, defending his vote to admit homœopaths to his society:

"Undoubtedly the great majority of homœopathic practitioners are men ignorant of the fundamental branches of medicine; especially is this true with respect to physiology and pathology. The younger and brighter men who have been unfortunate enough to be educated in a homœopathic school soon realize this after being admitted to practice. But the regular societies make martyrs of them and they must be homœopaths or nothing. If they were allowed to come into the regular societies without going down on their knees and confessing that they have been sinners, and being forced to renounce their previous faith, they would soon after admission stop preaching homœopathy, as they became accustomed to their new positions, with that gradual change of mind that good fellowship produces. The majority of them now do not practice homœopathy, but they are forced to preach it in self-defence."

To this the editor rather shakes his noddle as if uncertain, but that it would be better to have the homœopaths hung, drawn and quartered. One thing in this stands out in beautiful relief, to wit: Gall, gorgeous gall; in view of the fact that every "advance" that remains an advance among the "regulars" is simply the appropriation of some of the time-tried homœopathic remedies and applications of them.

Another bit of gall is the cheeky assumption that the graduates of homœopathic colleges are not the equals of the allopathic graduates. It is, in fact, the other way. The allopathic student's knowledge is based on mental nihilism while the homœopathic student is founded on TRUTH.

At a recent meeting of the Society of the Alumni of Charity, New York, the President, Dr. A. Rupp, briefly spoke of the latest remedy, *Antitoxine*. In his opinion the whole question was in an "unsettled and unsatisfactory" state. He quoted Dr. Körte, of Berlin, who analyzed a series of diphtheria cases treated by himself. In the very mild cases the mortality was, as always, light, but in forty three severe cases the mortality under *antitoxine* treatment was 59.2 per cent., which certainly is

not a favorable showing. There is one feature of this new remedy that will be increasingly prominent in the future, and which should be considered, and that is advertising. Many firms are now making the remedy and they are not slow in the use of "reading notices," which may be easily mistaken for legitimate reports.

THIS is particularly noticeable in the department of female surgery, in which, emboldened by the immunity with which a woman will survive spaying, parting with her sexual organs—as essential to her moral equi-pose as are the testes in the male—now, on the flimsy pretext of securing "better drainage," the inhuman procedure of sacrificing the uterus is resorted to, and the practice is so rapidly spreading that unless the profession give an early and emphatic note of warning the number of women so mutilated will soon be very large. The modern shifting notions on pathology are largely responsible for the present state of things. The ever-haunting phantom of infection, from simple lesions, has led to the conclusion that local and radical measures are called for in the treatment of conditions, which in the usual order of things are remediable through simple means, with the aid of systematic therapy.—*Dr. John B. Roberts, Am. Med. Association.*

THE subject of drugs is a very wholesome, refreshing one after the nauseous dose of animal preparations given us by the medical press at this time. While so much experimentation with these animal products is going on there will, naturally, be a great increase in the amount of sickness. It is an ill wind that blows no one good, and those who have stuck to legitimate therapeutics will reap a rich reward in clinical success and the estimation of their fellows. In the meantime, prepare for the inevitable. Arm yourself with reliable drugs and study their effects until you have obtained a satisfactory treatment. The use of animal serums is prolific of nephritis, pneumonia, meningitis, etc., and to the rational treatment of these diseases we should give especial attention.—*Medical Brief.*

To celebrate the advent of the *Pathogenetic Materia Medica* a supper was given to the authors and their wives on the evening of February 28th, ultimo. After the supper the club held a meeting and initiated a movement looking to systematic practical pathogenetic work in the near future. The profession may be assured that whatever proving of drugs is done by the Medical Investigation Club will be done only after the preliminary health record has played its part; and the profession may also feel assured that at present, at least, the materia medica will not be further burdened with provings of new drugs, about which no one knows anything but the provers.—*Southern Journal of Homœopathy, March.*

PERSONAL.

FOR SALE.—On account of ill health, requiring a change of occupation and environment, I will sell for cash the good will of my long established and successful general practice. This is an opportunity for a Homœopathic doctor of some experience and capital.—Address: Geo. H. Lee, M. D., Washington, D. C.

Somebody wants to know why all picture-angels are women and devils men.

The critic is only a terror to beginners and taken seriously by no others.

To see one of them pointing out the literary weak points of *Tribby* is enough to make the gods grin.

"Can it be that bugs are endowed with a sixth sense?"—*Washington Star*.

Six years have passed, yet the Commission on Vaccination appointed by Parliament has not reported.

"Because a man says he knows a thing is no reason that he does know it."—*Chicago Proverb*.

The coming, the Twentieth century form of literature, so they say, is the advertisement. "Good morning! have you read the ads?"

A "scientist" warns the world against the "danger" of using coal—coal in a state of combustion. Go South, young man!

Every young man intending to study Homœopathy should read Bradford's *Life of Hahnemann*. It is a liberal preparatory course.

The makers of antitoxin are harvesting a big crop of hay while the sun of publicity shines on their horse-juice. But the evening cometh.

Though a stratum is a layer a hen is not a stratum.

A homœopathic physician is wanted at Saltillo, Huntingdon Co., Pa. For particulars address Mr. H. T. Weaver.

Wonder if the chap who started the assertion that "vaccination matinees have become quite the fashion in Paris" was inside or looked on from the curbstone?

Dr. Marian McMaster has removed from Utica to Syracuse, N. Y.

"I tell you that *Hypericum* is a great and coming remedy."—T. F. Allen, M. D.

The *Ohio Medical Journal* holds out the olive branch and tells the homœopaths if they will lay aside their "absurd doctrines" all will be forgiven.

"Health came like an avalanche in the Mountains of the Moon."—Orificial Writer.

The most successful, financially and curatively, among the esteemed "regular" brethren are those who quietly give homœopathic medicines on homœopathic principles.

The study of lesions resulting from injections of antitoxin is becoming a marked feature of medical journalism.

They are now "recommending" the use of antitoxine to prevent the spread of diphtheria. Let us pray that they may never command it to be used, for once incorporated in State medicine nothing short of an earthquake could dislodge it.

Subscribe for the HOMŒOPATHIC RECORDER. Published monthly. \$1.00 per year.

About three hundred pages of the new edition of *Chroni: Diseases* is off press. It will be a beautiful and useful work.

"Scientific Nutrition" is a free pamphlet describing the Nerve and Tissue Food.

The "Barley Oat Food" for babies is an old-time success. The demand for it steadily increases.

THE HOMŒOPATHIC RECORDER.

VOL. X. PHILADELPHIA AND LANCASTER, JUNE, 1895. No. 6.

HOW TO LEARN DRUG PATHOGENESY.*

By John W. Hayward, M. D.

Consulting Physician to the Hahnemann Hospital, Liverpool.

So much has already been said and written, and so well, on "How to Learn the *Materia Medica*," by such masters as Hering, Meyer, Dunham, Hughes, Pope, Wesselhoest, and others,† that anything more would have been superfluous had our *materia medica* not undergone reconstruction since these essays were published; and had such classifications of its materials as those of Teste, Hering, Hale, Gelston, Burt, Farrington and others not been issued in the meantime.‡ Since the publication of the "Cyclopædia of Drug Pathogenesis," a reconsideration of this matter is called for.

The object of the systematic study of the *materia medica* should, I think, be to acquire a knowledge of the pathological and the *general* symptomatic relationships existing between drug diseases and natural diseases, so as to be able to fit these together in practice; in other words, it should be to learn the genius and the sphere of the pathogenetic action of drugs, which is possible; rather than to endeavour to memorize the whole of minute symptomatology, which is not possible. The *schema* should now be reserved for clinical use only; that is, to be referred to when in search of special characteristic symptoms for deciding on the single medicine for an individual case.

To learn the *materia medica* is a very different thing now from what it was when the older members of this society began the

* Read before the Society, October 4, and before the Liverpool Branch, November 8th, 1894.

† For the List of Essays, see Note D. appended to this paper.

‡ For the Classifications of Drugs, see Note B. appended to this paper.

work; I say, began the work, because they have not yet ended it, and, as practitioners, never should.

A knowledge of the *materia medica* is one of the most important parts of a physician's equipment. There are four principal divisions of the professional knowledge essential to the medical practitioner, viz., anatomy with physiology, surgery, *materia medica* and medicine, conventionally so called. Anatomy is the foundation of surgery, and *materia medica*, with pathology, is the foundation of medicine. To the medical practitioner a knowledge of all of them is equally necessary. This necessary knowledge may be acquired in one or both of two principal ways, viz., (1) at first hand, or (2) at second hand. The second-hand way is from books; the first-hand way is from personal observation or contact; *i.e.*, by appeal to nature herself. The second-hand way of learning anatomy is by reading other men's descriptions of the parts of the body, the position of the muscles, vessels, nerves, etc.; the first-hand plan is that of dissecting the body one's self. The second-hand plan of learning operative surgery is by reading directions for the different operations; the first-hand plan is that of doing the operations one's self. So, the second-hand plan of gaining a knowledge of natural diseases is by reading the accounts of other persons' observations, and their details of the symptoms; the first-hand plan is that by personal observation at the bedside, and the practical treatment of cases of illness. The second-hand plan of learning the *materia medica* is by studying other persons' collections and arrangements of the material—the ordinary *materia medicas*, lectures, condensations, epitomes, abridgments, etc.; the first-hand plan is that of proving the drugs on one's self, and studying the original records of poisonings, experiments, *post-mortems* and provings.

I need not ask which of these plans would be adopted by the student or practitioner really in earnest. The student of anatomy, or surgery, or medicine, who trusts to books only, will make but a sorry figure when he comes to apply the information he has gained in this way; so the student of *materia medica* who trusts solely to lectures, arrangements, condensations, epitomes, or abridgements, will come off very indifferently in the use of the *materia medica* in practice. Such information should be obtained at first hand, at the fountain head, undiluted and unadulterated.

When our *materia medica* existed only in *schema* form, and

had to be learned from Hahnemann's "Materia Medica Pura" and "Chronic Diseases," or from Jahr's "Symptomen Codex," then to gain an adequate knowledge of the pathogenetic effects of the drugs we had to use was indeed work, and that not of a pleasant or interesting kind. Now, however, since the issuing of the "Cyclopædia of Drug Pathogenesis," in which records of provings, poisonings, *post-mortems* and experiments are detailed in the narrative form, showing the beginning and the course of the pathogenetic action—in which, in fact, drug diseases are described as natural diseases are described in other of our treatises—we may learn the pathogenetic action of drugs as easily and as pleasantly as we learn the pathogenetic action of the specific poisons, measles, scarlatina, small-pox, typhus, typhoid, etc., and we should learn it in the same way.

Drug diseases should, I think, be studied in the same way as natural diseases. Now the best way to gain knowledge of natural diseases is to study them at the bedside, and to read accounts of case after case of the disease—read case after case in succession: so the best way to gain a knowledge of drug diseases is to prove (or reprove) the drugs ourselves and on our relations and friends, and to read the accounts of case after case of poisoning, experiment and proving—read proving after proving in succession. In no other way can this knowledge be so thoroughly and so pleasantly acquired. Anyone, therefore, who wishes to learn the Homœopathic *materia medica* should select a drug with a well-defined and perhaps a limited sphere of action, such as *cantharis*, or a polychrest, such as *aconitum*, *belladonna*, or *phosphorus*, and prove (or reprove) it upon himself and his friends,* if possible; and in addition he should read it over, first of all in Pereira, or Phillips, or Christison, or Taylor, or some other work on toxicology; and of course in Hughes's "Pharmacodynamics." After this he should take up the Cyclopædia and read over first the poisonings, experiments and results of *post-mortem* examinations; and lastly, he should read over the provings—the provings should be read last. He must do this more than once, and he should do the first reading somewhat aimlessly, as if for more amusement, as Dr. Guernsey says, "in an easy chair, with his pipe in his mouth;" then he should read all over again, but this time carefully and somewhat seriously, noting the most striking or oft-occurring effects, and

*At least make a short experimental proving: see Wesselhoeft's paper, p. 155.

the parts or organs most affected; the order in which they are affected; and the kind of morbid effect produced in them; then he should *write out his own individual opinion of the special disease-producing power of the particular drug, and the nosological forms of disease its effects resemble or indicate.* He should then read the experiments, poisonings and provings over carefully, and make himself thoroughly master of the *peculiarities* of the drug action, noting carefully the *character* of the symptoms, the *conditions* under which they occur, and the *concomitants* connected with each symptom.

Having proceeded in this way and thus far he will have obtained a fair knowledge of the pathology of the particular drug, and will be able to predicate, in a general way, the class of diseases to which it will be Homœopathic, and he will have mentally pigeon-holed it for use in such cases. He should then take up another drug—an analogous one*—and study it in the same way; suppose the first drug was *aconitum*, he should next take up such a drug as *baptisia*, or *bryonia*; if it was *belladonna*, he should next take up such a drug as *hyoscyamus*, or *stramonium*; if it was *cantharis*, then *apis*, if *phosphorus*, then a serpent venom; and so on, always selecting a somewhat similarly acting drug.† By this method of study he will gain an insight into the physiology and pathology‡ of drug diseases, and acquire (not a mechanical but) a scientific knowledge of drug pathogenesis. Having so studied some dozen or more of the most important drugs given in the Cyclopædia, he should read over the same drugs in Hahnemann's "Materia Medica" and "Chronic Diseases" if there, and again note carefully the most characteristic symptoms and the conditions and concomitants. If he has a fair memory for words he will, by this time, have retained many symptoms in his mind, and will have become already a tolerable symptomatologist; but at this stage he need not make much effort to memorize the symptoms themselves as such; his endeavor should rather be to comprehend and fully appreciate the genius and the sphere of action—the *fons, et origo mali*—of the action of each drug,|| its special elective affinities, and the specific character of its action; whether, for instance, it acts principally on the nervous or vascular system, or whether it is febrigenic, like

*See Hering's paper, p. 253.

†For analogous drugs see Note A. appended to this paper.

‡The living morbid process, not pathological anatomy.

||See Meyer's paper, p. 445.

aconitum, or tissue irritant, like *kali bichromicum*; if febrigenic, whether its fever is inflammatory, like that of *aconitum*; or nervous, like that of *hyoscyamus*; if tissue irritant, what tissues especially it irritates; and if its irritation is acute and tends to run on to inflammation, like that of *bryonia*, *belladonna*, *phosphorus*, etc., and if so, what parts especially it inflames, whether the serous membranes, like *bryonia*, *cantharis*, etc., or the mucous, like *belladonna*, *euphrasia*, etc.; or the tendinous structures, like *rhus*; or the lungs, like *phosphorus*, and so on; or if its irritation, instead of being acute, is of a slow character tending to the production of effusions, hypertrophies, atrophies, indurations, degenerations, etc., and so on.*

The whole *materia medica* should be studied in this way so that the genius and the sphere of the pathogenetic action of drugs may be fully comprehended and mentally defined, and the student be made capable of writing out the pathology of drug diseases as easily and truthfully as that of natural diseases. When he can do this he will be fit to attempt Homœopathic practice, and he will then find the medicinal treatment of patients to be a pleasant, interesting and successful occupation. With this general pathological knowledge of drugs and diseases, immediately on a patient's complainings being detailed to him, one, two or three medicines will present themselves to his mind; he should then think over the patient's symptoms, and selecting the fundamental ones, *i. e.*, those indicative of the origin of the disturbance, and those peculiar to the individual patient, he should appeal to the *schema*, or the pathogenesis itself by means of the *schema*, and in it find the medicine in which these same symptoms are fundamental, idiopathic, or more distinctly marked than in any other. He will then be able to prescribe the medicine really Homœopathic to the case itself—to the individual patient. Say it is a case of *pneumonia*; immediately *tartarus emeticus*, or *phosphorus*, or *bryonia*, or some similar medicine will occur to his mind, and then, by the peculiar symptoms, such as the pain, or the absence of pain, or the kind of cough or expectoration or respiration, or some other characteristic symptom present—to be sought for in the pathogenesis by means of the *schema*, repertory, or index—the individual medicine may be definitely determined, and so be prescribed with the utmost confidence and satisfaction, and with certainty as to

*A reading of it in Ringer's "Manual of Therapeutics" (if there) would be an excellent finish to the study of each medicine (twelfth edition).

the results. The *schema* should be reserved and used for this ultimate reference and decision, and for such purpose only; it should not be made the subject of systematic study at all. The *Cyclopædia* provides the pathogenetic material for study and to be remembered; the *schema* that to be finally appealed to.

Such, then, is the plan I would suggest for learning drug pathogenesis, and it is, I think, very similar to the one adopted by Hahnemann himself, for he insisted upon both a *priori* knowledge of pathogenesis and a *posteriori* use of the *schema*, and he himself certainly learned drug pathogenesis by proving drugs on himself, his family and his followers, carefully recording the effects produced on himself, and diligently studying the records of the effects on others, and we may well suppose he would advocate the same plan for his disciples, especially when we find him insisting in his paper on "The Power of Small Doses," in Hufeland's Journal, that they shall know "what organs it (the drug) deranges functionally, what it modifies in other ways, what nerves it principally benumbs or excites, what alterations it effects in the circulation and digestive operations, how it affects the mind, how the disposition, what influence it exerts over some secretion, what modification the muscular fibre receives from it, how long its action lasts, and by what means it is rendered powerless, etc., etc."* It is also the plan pointed to more or less distinctly in most of the essays referred to in the list appended to this paper,† particularly those of Meyer, Hering, Wesselhœft and Guernsey. To the inquirer a perusal of all the essays mentioned would be most instructive and helpful, and not uninteresting. The first read should be that of Dr. Guernsey, then that of Hering, followed by those of Meyer and Wesselhœft, then the others in the order of their publication.

Since Hahnemann's time the number of our medicines and their pathogeneses have been much increased; they are now so numerous and extensive that a *general* knowledge of their disease relationship is all that can be borne in mind and made use of in the every-day work of the busy general practitioner. With this *general* knowledge he treats ordinary acute diseases, and he only resorts to minute symptomatology in consulting-room work, and with anomalous and chronic cases. Nor, indeed, is more necessary, for with a good knowledge of the *Cyclopædia* the practitioner

*See Note c. appended to this paper.

†See Note d.

may with confidence undertake the treatment of acute and definite morbid states, and with, in addition, appeals to the *schema*, by means of a good repertory, he may, without hesitation, attack any chronic disease, or anomalous or rare morbid state that may turn up to him, whether as a general practitioner or as a specialist. By acting in this way, whilst practicing symptomatically he will avoid the fault of mere mechanical symptom-covering and of mere key-note empiricism, as well as that of mere specificking, and whilst submitting to the exigencies of practice he will conform to the dictates of a scientific profession.

NOTES.

Note A, page 5.—As to “analogous drugs,” it must be borne in mind that though this analogy may in some instances extend to the symptoms generally, as in the cases of fever and tissue irritant symptoms, it is mostly topical, like that between *hyoscyamus* and *stramonium* on the brain, that between *belladonna* and *phytolacca* on the throat, that between *tartarus emeticus* and *phosphorus* on the lungs, and so on; also that the topical action of one drug may resemble that of another on more than one part or organ, as, for instance, that of *tartarus emeticus* on both lungs and stomach somewhat resemble that of *phosphorus*, and that of *mercurius corrosivus* on both stomach and rectum somewhat resembles that of *arsenicum* on these parts.

Note B, page 1.—Teste: see Teste’s “Materia Medica;” Hering: see *British Journal of Homœopathy*, ii., 264; Hale: see Hale’s “New Remedies;” Gelston: see *British Journal of Homœopathy*, xvii., 631; Burt: see Burt’s “Materia Medica;” Farrington: see Farrington’s “Materia Medica.”

Note C, page 8.—See Dunham’s “Homœopathy the Science of Therapeutics,” p. 40.

Note D, page 1 and 8.—List of Essays. As early as 1837—six years before Hahnemann’s death—that *materia medica* veteran, Dr. Constantine Hering, one of Hahnemann’s immediate followers and personal friends, then living in Philadelphia, in the introduction to his German essay on “Serpent Venoms,” enters very fully into directions as to how the *materia medica* should be learned. A translation of this essay was given in the *British Journal of Homœopathy*, vol. ii., p. 250.

In 1852 Dr. Meyer, another of Hahnemann’s immediate disciples, took up the same subject in a very learned paper in the *Homœop. Vierteljahrsschrift*, i., 259. A translation of this essay was given in the *North American Journal of Homœopathy*, ii., 438.

In 1862 Dr. Carroll Dunham, of New York, a real master in *materia medica*, published a very exhaustive paper on the subject in the *American Homœopathic Review*. This was afterwards reprinted as the opening chapter in his “Homœopathy the Science of Therapeutics,” see p. 30.

In 1864 Dr. Pope read before the Northern Homœopathic Medical Association a very elaborate paper on this subject. This was published in the *Monthly Homœopathic Review*, viii., 674.

In 1870 Dr. H. R. Madden read a very masterly paper on the subject before the Homœopathic Congress at Birmingham. This was published in the *Monthly Homœopathic Review*, xiv., 665.

In 1879 our English master in *materia medica*, Dr. Hughes, at that time lecturer on *materia medica* at the London School of Homœopathy, made this same subject the purpose of his introductory lecture. This was published in the *Monthly Homœopathic Review*, xxiii., 341.

In 1881, Dr. Pope, then senior editor of the *Review* and lecturer on *materia medica* at the London School of Homœopathy, returned to the subject in a very practical lecture, which was published in the *Monthly Homœopathic Review*, xxv., 204.

In 1887, Dr. C. Wesselhoeft, professor of Pathology and Therapeutics in the University of Boston, addressed himself to the same question in a most thorough manner. This dissertation was published in the *New England Medical Gazette*, xxii., 152, 209, 263.

In 1893, Dr. C. H. Blackley took up the subject in the December issue of the *London Homœopathic Hospital Reports*, iii., 1.

In 1894, Dr. Joseph C. Guernsey, of Philadelphia, took up the subject in a very masterly manner in a paper in the *Hahnemannian Monthly*, xxix., 235.

Ibid., Dr. Seibert, Easton, U. S. A., attacks the same subject in the same journal, p. 321.

Ibid., Dr. Hughes returns to the subject in a paper read before the American Institute of Homœopathy.* This also was published in the *Hahnemannian Monthly*, xxix., 412.

Ibid., The American Institute of Homœopathy took the subject up for its 1894 meeting; its *materia medica* section collected the opinions of 31 of the members of the Institute. These were published separately, illustrated with portraits of 31 of the writers, under the editorship of Dr. Frank Kraft, chairman of the section.

*Under the title of "The Best Methods of Studying and Teaching Materia Medica."

THE STORY OF PROVERS WHO ASSISTED HAHNEMANN.

By Thomas Lindsley Bradford, M. D.

ERNST HARNISCH.

No data obtainable.

CARL GEORGE CHRISTIAN HARTLAUB.

Hartmann says: Of the life of Hartlaub, Sr.,* though I was more intimate with him than with Caspari, I can say still less: his brother is still living, a true friend and advocate of Homœopathy, who can easily supply the deficiency of my narrative. He was Caspari's most intimate friend, and I have learned from his own lips that their conversation turned chiefly upon Homœ-

**N. W. Jour. Hom.* Vol., iv. p 235. *Allg. hom. Zeitung*, Vol. xxxix, p 291.

opathy and the manner of advancing its interests. My opinion cannot be taken as decisive, since I was little acquainted with Caspari, yet it seemed to me that Hartlaub was a still more capable man than Caspari, at least his works bear a more decided impress of originality, and manifest more of that power of production, which seems wanting, or at least doubtful, in the works of Caspari.

In 1829 Hartlaub left Leipsic in consequence of an invitation from Counsellor Muhlenbein to take up his residence at Brunswick and assist the Counsellor in his extensive practice, to which he could no longer attend on account the of infirmities of advancing years. I cannot think that he was very happy in his new residence, at least the contrary was currently reported, and one might easily suppose that such would have been the case from Muhlenbein's imperious temper, which was often manifested with great rudeness. He died, if I mistake not, of a nervous fever—many years before Muhlenbein—much too soon for science, which deeply deplored its loss.

Rapou says: Hartlaub was the most prolific writer of our school. His works, less rich in theoretic dissertations than those of Caspari, embrace more regarding practical medicine.

He applied himself at first in arranging our pathogeneses in a practical form, and formed a judicious summary and methodical classification of the phenomena. This manner of labor in which Weber, Ruckert, Bœnninghausen and Jahr later won great renown, was a source of great honor to this practitioner of Leipsic. Notwithstanding his feeble constitution, his failing health and his short existence (he died young), he gave to our literature many extended works, the labor on which would seem to have required a long life or the concurrence of a society of savants.

About 1830 Hartlaub left Leipsic to settle at Dresden near his ancient colleague, Dr. Trinks, and with him commenced to edit a clinical journal. This journal appeared in 1830 under the title: "Annals of the Homœopathic Clinic." His aim was to contribute to perfecting our method by publishing constantly observations in detail on the treatment of many varieties of disease; it was to complete, to verify the pathogenesis by means of the clinic, and to fix the new medicine on a firmer and surer basis. These Annals were published till 1834, at which time Hartlaub was called to attend the Duke of Brunswick. They were continued by the Silesian Homœopathic Society under the

title: "Praktische Beiträge," till the year 1840, covering a period of ten years and offering to practitioners a valuable collection of results from clinical lessons.

Hartlaub died at Brunswick. Rapou says that Carl Preu, of Nuremberg, who was the first to prove the effects of the mineral waters on the healthy body, about 1826 interested Hartlaub also in these experiments.

WRITINGS.

Nonnulla de venaesectionis in organismum universum vi, et in curan dā niminatim inflammatione usu. Lipsiæ. Voss. 1824.

Short Treatise on the Homœopathic Method of Cure. Prepared for the Laity. Leipsic. Focke. 1829.

The Education of Children. A Word to Parents and Teachers. Leipsic. Woeller. 1829.

The Same. Second edition, with title: The Homœopathic Physician for Children. Leipsic. Volckmar. 1833.

The Art of Preserving Health and of Prolonging the Life. Leipsic. Woller. 1830. Second edition, 1833.

Tabular Lists for Practical Medicine according to the Principles of Homœopathy. Large folio. Leipsic. Leo. 1829.

HARTLAUB AND TRINKS (C. F. G.)

Annals of the Homœopathic Clinic. 1st year. 1830. 2 nos. Leipsic. Fr. Fleischer.

The Same. 2d year, 1831—2 nos. 3d year, 1832—4 nos. 4th year, 1833—4 nos.

Pure Materia Medica. 3 vols. Leipsic. Brockhaus. 1828-31.

Systematic Effects of the Pure Effects of Medicine for the Practical Use of Homœopathic Physicians. Leipsic. Baumgartner. 1825-28. 6 vols.

Systematic Presentation of the Antipsoric Remedies in their Pure Effects. 3 vols. Also under the title: Systematic Presentation of the Pure Effects of Medicines, for the practical use of Homœopathic Physicians. Dresden. Arnold. 1829-30. 7-9 vols.

Principles of the New Healing Method Agreeing with Nature, called Homœopathy. Leipsic Kuenzel. 1834.

Catechism of Homœopathy. Leipsic. Baumgartner. 1824. 3d edition, 1829. 4th edition, 1834.

FRANZ HARTMANN.*

Of this distinguished man Rummel says: We follow the good custom of setting up a small written memorial in this journal for the champions of Homœopathy, although this harmless tribute paid to the dead has not escaped derision. Derision as

* By Rummel, *Allg. hom. Zeitung.*, Vol. xlvii., pp. 41-49. See also, *N. Am. Jour. Hom.*, Vol. iii., p. 566 *Phila. Jour. Hom.*, Vol. ii., p. 640. *B. Jour. Hom.*, Vol. xii., p. 159. *Prager Monatschrift*, Vol. viii., p. 110.

well as recognition and love has been richly meted out to our lately departed Hartmann; such derision was not only shown him by his enemies, but also from the camp of his allies, from whom it hurts most. His life was a series of cares and sufferings yet he knew how to win many joys and a beautiful family happiness, and to gain many faithful friends through persevering industry and his native cheerfulness.

He was born in Delitsch on the 18th of May, 1796, where his father was school teacher. In the year 1810 we find him as a weakly boy of fourteen at the lyceum in Chemnitz, preparing for the study of theology, and instructing the children of poor weavers so as to satisfy his few wants.

Thus, young as he was, he already found distress; but also formed the determination to work himself up by his own exertions. Soon he became convinced of his unfitness for the career he had chosen and the wish of becoming a physician increased in him, because his former fellow student, Hornburg, in his vacation was already making successful attempts at curing. In Leipsic, whither he went as student in his 18th year, he became the room-mate of Hornburg, who had exchanged theology, his first choice, for medicine and who was a great admirer of Hahnemann.

This genial man and born physician had this among his weaknesses, that he neglected the study of the Old School medicine and in his conversations treated opponents of Homœopathy, among whom were also his future examiners, in a brusque and challenging manner, which afterwards brought him such bitter fruits.

For Hartmann, however, who was modest and unassuming, went his way, and who had soon learned that some of the courses of lectures were indispensable even if it were only on account of the examinations, this nearer acquaintance with Hornburg was advantageous, as he appropriated to himself a good deal, from his thorough knowledge of medicine and through him became acquainted with Hahnemann. This ardent spirit, the founder of Homœopathy, soon exercised his full power of attraction over Hartmann, who entered into the Provers' Union founded by him and also frequently visited his family circle. Here the full aura of enthusiasm for the new doctrine reigned, and this strengthened the disciples to work and also to bear the contempt and mockery which the other students meted out to them unsparingly. With all this Hartmann preserved a cer-

tain unprejudiced soberness which caused him to continue also his other studies, but which soon caused a strained relation between him and the more enthusiastic adherents of Hahnemann.

After the lapse of 2½ years, on the 29th of September, 1817, he departed for Berlin with little money, but with much trust in God, intending to further prosecute there his medical studies; but he returned to Leipsic at the commencement of the long vacation because he could there pursue his Homœopathic studies more zealously than in Berlin.

On the 21st of March, 1819, he received his diploma in Jena; this step seems not to have been well considered; he thought he would thus hasten his progress in his career, but in reality it delayed him and involved him in many procrastinations. The arrival of the Prince of Schwartzenberg who intrusted himself to the treatment of Hahnemann had caused a great excitement in Leipsic; it had encouraged the friends of Homœopathy, but it only still more embittered the enemies, and their wrath broke out into open persecution after the death of the prince.

Hahnemann finally withdrew from the chicanery of the sanitary police by emigrating to Coethen, but only the more were these then concentrated on his adherents. In the midst of this tumult and these hostile conflicts Hartmann again appeared in Leipsic. Our young doctor had reported to the Dean, the Royal Councilor Rosenmuller, for the Colloquium (examination) incumbent on every one who received his diploma in another university, but at his death had neglected to repeat his report, and in the meanwhile he treated patients, although not legally entitled to so.

But Doctor Kohlrush scented out the Homœopathic powders with one of his patients and hastened to hand them over with a complaint into the hands of the Grand Kophtha, of Leipsic, the medical counsellor, Dr. Clarus.

This *ex-officio* persecutor of Homœopathy who hated it with all his heart received this matter with great indignation, and the fear that they would treat the Homœopath in no lenient manner at his Colloquium was certainly not unfounded.

Hartmann therefore left Leipsic on Jan. 1st, 1821, in order to go through the medical course in Berlin, but came too late for that year as he did not know that application had to be handed in in November, which he had neglected to do.

This put him out of humour, the more as he had refused the very attractive offer of Stapf: viz., to accompany him free of

expense on a scientific journey, this offer he had refused merely that he might not delay his official examination. Stapf was traveling at the time at the expense of the Prussian Minister of War, to the Rhine, in order to observe the contagious ophthalmia in the army and if possible to cure it Homœopathically.

Very much discouraged, Hartmann returned to his native town of Delitzsch, where six days after the sad duty devolved on him of attending his father, and six weeks later his mother, to their eternal rest. Painfully as these sad events touched, aggravating his position which even before was not bright, he nevertheless felt that the necessity of looking out for himself acted usefully in a stimulating manner on his mind, which, by his many unsuccessful attempts to attain his goal, had at this time become depressed.

Since the proposition of Stapf to settle down in one of the smaller States as a physician was hemmed with difficulties, Hartmann reported in Dresden for a Colloquium. He thankfully acknowledges the readiness to hasten the matter which was shown by the Royal councillors, Dr. Leonardi and Dr. Kreysig. The former he had pleased and won for himself by his well-written thesis, so that the fear of being discovered and persecuted as a Homœopath proved vain, and after a successful examination he could settle the same year (1821) in Zschopau as a practicing physician.

Although he covered up his medical treatment as much as possible in order to avoid troubles which then even more than now were inseparable from the reputation of being a Homœopath, nevertheless the variation of his method from that generally prevailing was soon noticed, the more as he succeeded in making some brilliant cures. To this was added the fact that the son of Hahnemann had a short time before dazzled the people of the neighboring town of Wolkenstein by his wonderful cures, and had caused great sensation and had quite a run of patients, so that Homœopathy was not unknown in the vicinity.

From here he met at an appointed meeting in Freiburg, Trinks and Wolff, whose attention had been called to the new doctrine in Dresden. These neophytes eagerly interrogated their young teacher, who himself was in many respects as yet inexperienced as to remedies for certain definite forms of disease. The vivid questions and explanations on this occasion were the first impulse with Hartmann toward the therapy afterwards written by him, and proved therefore of great influence upon him.

Another very important event for the advancement of Homœopathy, was the appearance of the *Archiv für die homœopathische Heilkunst*, founded by Stapf, Gross and M. Muller in 1822, and so successfully edited by Stapf. This was of particular influence on Hartmann, because it led him to become a writer, by which he became later on so universally known. Stapf had an especial ability in arousing his acquaintances to production, and Hartmann yielded to this influence, and his requests overcame his native shyness and he communicated his cures to the *Archiv*, beginning in 1823.

CASE OF BILIOUS REMITTENT FEVER TREATED WITH IPECACUANHA.

Patient—Mother of Mozabbar Khan Choudhury, of Polaspole, Satkhira Sub-division, District Khulua in Bengal; aged about 55, of slightly dark colour, with chronically enlarged spleen and slight enlargement of, and pain in, liver.

Description of the case:

21-8-93. 7.30 A. M. Temperature, 101.8° F.

Has been suffering since six days; was seen feverish to day, morning; skin slightly hot; spitting; no nausea; no vomiting; one loose stool last part of night or early morning; aching from loins and lumbar region down to ankle joints; thirst, but tongue moist; tongue in some parts coloured with *pâu*-juice; had indigestion and looseness of bowels previous to this fever.

Treatment: *Acon.* 6; half a drop-dose every 2 hours during fever. Six doses given.

22-8-93. 10 A. M. Temperature, 101.2° F.

Had no remission yesterday or last night; thirst continuing, but cannot drink for nausea; bilious vomiting once at about 4 P. M. yesterday, and last night three times bilious vomiting; spitting; paped thread-worms in her previous stools; complains of burning sensation in stomach; three loose stools last night (probability of mucus being with these night stools); enlarged spleen; pain on percussing right hypochondrium and a little above the costal arch on right side; thirst, but she cannot drink as it nauseates her when she takes water in mouth.

Treatment: *Ipec.* 6; half a drop-dose every 2 hours; 6 doses given.

4.50 P. M. Temperature, 102° F.

Three loose stools with mucus during this interval and one bilious vomiting; thirst, but cannot drink, as it causes nausea; burning of stomach less.

Diet: Barley-water.

Continue medicine.

23-8-93. 8 A. M. Temperature, 100.6° F.

Last night no medicine administered for negligence of her relations; last night three loose stools and two bilious vomitings; once bilious vomiting this morning; burning of stomach rather increased; cannot drink water as it causes nausea.

Treatment: *Ipec.* 6; half a drop-dose every 2 hours; 4 doses given.

5.30 P. M. Temperature, 101.2° F.

Three loose slimy stools to-day and two bilious vomitings; burning of stomach; cannot drink water as it nauseates her.

Treatment: *Ipec.* 6; half a drop-dose every 2 hours; 6 doses given.

24-8-93. 7.30 A. M. Temperature, 99.6° F.

Last night four or five loose mucus stools and two vomitings, consisting of mucus and not of bile; burning sensation of stomach before passing stool; wants to drink, but cannot as it nauseates her; tongue dirty, yellowish and furred. Since she is under my treatment her articulation is not in a proper order, not easily to be understood; after the commencement of her taking *Ipec.* she gets daily perspiration some part of the day; this sweat is slight; last night she had perspiration at about 12 o'clock night, and so the defervescence is gradual. This may be called a defervescence by *Lysis*.

Treatment: *Ipec.* 6; half a drop-dose every 3 hours; 4 doses given.

5.20 P. M. Temperature, 100° F.

Two loose frothy and mucus stools and mucus vomitings during the day; burning sensation of stomach less; pain in two arms; all previous stools were frothy and slimy.

25-8-93. 8 A. M. Temperature, 99.4° F.

Had one loose, frothy and mucus stool, and vomited twice last night, one of which was bilious and the other mucus vomiting; says of burning sensation to be the same; pain on sides (probably owing to continual lying on); tongue not clean, but in some places cleaner than before; fetid smell of mouth continuing.

Treatment: *Ipec.* 6; half a drop dose every four hours; six doses given. 6 P. M. Temperature, 99.6° F.

Pulse almost normal, one stool like the above ones, no vomiting but nausea, occasional burning of stomach, articulation better, thirst but cannot drink as it nauseates her, drank small quantity of water to-day.

Barley-water has been given previous to this date, but to-day *Chira**-water given twice.

This the patient has taken more freely. *Niesry* (sugar candy) —water given to day.

Continue medicine as above.

26-8-93. 8:30 A. M. Temperature, 99.4° F.

Had two loose frothy feculent mucus stools last night but no vomiting; nausea in taking water in mouth or attempting to drink; thirst less; tongue cleaner; burning sensation of stomach very seldom occurs especially before stool; looks better to-day, morning.

Diet: *Chira* water, and *niesry* water.

Treatment; *Ipec.* 6; half a drop dose.

Every four hours. 6 doses given.

5:55 P. M. Temperature, 99.8° F.

One scanty loose feculent stool to day at about noon; no vomiting but nausea as before; has not been able to drink water for nausea, has taken *chira* and *niesry* water (of course separately); no burning of stomach but some rumbling in; tongue cleaner; articulation better.

Continue medicine.

27-8-93. 8:10 A. M. Temperature, 98.8° F.

No vomiting, no stool last night, but one scanty formed stool this morning; nausea in attempt to drink water or in taking water in mouth; very seldom burning sensation of stomach; looks well; feels hungry.

**Chira* is a preparation of paddy. It may be prepared in the following manner:—Paddy thrown into a pot of boiling water and taken out after it is somewhat boiled and kept in a vessel with a quantity of the hot water till next day. The paddy is then taken out and kept on a basket for few hours so that the paddy may be somewhat dried and the water dropped down. This paddy is then fried and then prepared in such a manner as the rice, devoid of its husks, becomes flattened. This prepared rice is called *Chira*. When it is desired to make its water it is washed at first with water then soaked and well washed in it. The water is percolated with a piece of cloth. This water is often used as an article of diet at the end of diarrhœa and often looseness of bowels. This possesses a nutritious and astringent property.

5:20 P. M. Temperature, 98.4° F.

No stool no vomiting to-day, but she feels nausea if she attempts to drink or takes water in her mouth; no burning of stomach; heard only one rumbling of abdomen; of the pain in the sides she has only and very slight in the fingers of the hands; speaks freely; says of less bad smell of mouth.

Diet: Soft rice smashed with water; this rice water and *niesry* water.

Treatment: *Ipec.* 6; half a drop-dose every 6 hours; 4 doses given.

28-8-93. 7:30 A. M. Temperature 97.6° F.

No vomiting; one loose feculent stool of clay—consistence last part of last night; complains of burning of body and chest, tongue, etc., while pulse and temperature don't indicate any heat within.

Diet: *Bâtâ-Suktâ* juice;* Soft rice and fish-broth; *niesry*-water.

Discontinue medicine.

6:30 P. M. Temperature, 99° F.

Had one normal stool at about 2 P. M.; no vomiting; nausea continuing; complains of burning sensation all over body and in chest at about evening.

28-8-93. 9-5 A. M. Temperature, 97.6° F.

One feculent loose stool this morning, the stool being of clay consistence; no vomiting; right lower gum inflamed; complains of burning sensation of body.

Diet: Soft rice, fish-broth, *niesry*-water.

Medicine discontinued.

6:50 P. M. Temperature, 98.2° F.

One stool 4 P. M.; no vomiting; nausea still lingers as before; no burning sensation of stomach.

30-8-93. 8:10 A. M. Temperature 97.6° F.

One unusual stool this morning; no vomiting; taste not good; food does not relish well; complains of burning of body since evening yesterday till midnight but there was no heat. This burning commenced with the feet becoming cold.

*It is made by a cooking process. The principal ingredients are *Hydrocotyle asiatica*, Nat. θ , Umbelliferæ; *pidivra fætida*, Nat. θ , Rubiaceæ. A raw and fresh plantain fruit, pulp and some other minor adjuncts. These are cooked together, only the broth or decoction of them are used by the patient. This has a peculiar astringent and carminative action on the intestinal canal and this is always used to be given before any substantial food is ordered to a cholera or diarrhœa patient.

Diet: As above with chicken broth.

Tepid water bathing.

No medicine.

No more medicine given; burning of body continued four or five days, gradually diminishing day by day. Bathing and diet as above, till she was restored to health.

VETERINARY.

I am very glad to see in your journal semi-occasionally an article on veterinary practice by members of our school on the horse, indeed for all domestic animals. I have practiced Homœopathy since 1845, and soon after I adopted the practice my horse was taken very sick after eating corn and had a very sick two hours when I was informed of the fact. I knew the cause, and I determined to try the effect of our remedies on him. He was in great pain and very much bloated. It was in a country stable, and there were assembled a number of men to see "the little pill doctors' horse" die. Each man had a prescription to offer. I gave him four drops of *Colocynth* 3 x, and in forty-five minutes he was entirely relieved and ready to eat food. I have treated many others belonging to my friends, and never was an hour curing them. I have treated my own and others belonging to my friends for pneumonia and never lost one. I have treated the cow, dog and birds of various diseases and have always been successful. Besides having a knowledge of our *materia medica*, the doctor should have a knowledge of comparative anatomy to be successful. I always feel sure of curing my patient, whereas with the usual treatment of the drug school they never feel sure of a cure and most of them die.

The horse I now own was sold to me for a song, because the owner thought she would die as others had with the same disease. I cured her in one week. She has had pneumonia twice since I bought her, and I cured in less than ten days each time. She had nutritis once and ulceration of the throat once, and in neither case was any disease left behind, and is as well now as the day she was born. If what I have said will be of any benefit to the profession I shall be only too happy.

LOUIS DE V. WILDER

New York.

THE QUACK.

That grave doctor man who cuts such a swell,
Who or what is he, can any one tell?
He rushes about scarcely stopping to call;
But claims of the sick he doctors them all.

Why he's that great cure-all, but just come to town,
Who, judged by his ad., is a man of renown;
And then his great style and very wise look
Bespeak power to read each case like a book.

He dresses in fashion—a fop every inch,
And for jewels' he's sure of a dead open cinch
Of catching the ladies who eye him at church.
And never suspect them he'll leave in the lurch.

And, too, his devout, sanctimonious air,
Reminds e'en the pastor some great gun is there,
Who'll help in the church and Sabbath School too,
And hence, as recruit, soon passes review.

Then the wide-awake mammas and even wise dads
Will take to their bosoms this latest of fads,
And sing loud and long to the sick in the land,
“He's such a nice doctor”—“just perfectly grand!”

This ambitious young trickster is soon overrun
With patients, ostensible, who, for their fun,
Call him out of the church in greatest of haste,
Saying, “Some one is dying, there's no time to waste.”

“Oh, what a kind doctor to run when's he sought,”
Exclaims the good pastor—“a prize we have got;
And all the good brothers and dear sisters too
Should vote him at once their softest front pew.”

But, soon he's too busy the church to attend,
It has lost in the boom its most pious friend;
For, now he's engaged in faking the rest,
And not e'en the pastor his plan has yet guessed.

And lest cruel skeptics should know they'd been duped,
And from them their shekels this doctor had scooped,
They close tight their lips and silently pray
That not long in their midst this shrewd fraud will stay.

But, other societies yet must he work,
And, to lay his plans well, slyly works like a Turk;
Displays bogus parchments and a few musty books,
And dry human bones to remind you of spooks.

—S. S. MOFFATT.

TWO CASES OF SUDDEN BLINDNESS CURED**By Dr. Hirsch, in Prague.**

Translated for HOMŒOPATHIC RECORDER.

One of the most horrible diseases is doubtless the *instantaneous extinction of vision*, while the body is otherwise in good health. If anyone for two or three years, or, perhaps, for only as many months, pays his visits to a specialist and, as sometimes happens, finds that despite of the very energetic remedies of the eye doctor his visual powers are gradually decreasing, and when later on he is being told in the friendliest manner and with inmost grief that the pathological process shows an irresistible obstinacy; if furthermore two years or two months ago he was able to find his way to his specialist quite alone, but after this time is compelled to walk along shielded by dark spectacles and guided by a philanthropic hand, then the unfortunate had at least been given time to gradually acquaint himself with the most sad thought of becoming blind and thus to gradually accustom himself to his sad position. But if anyone is deprived in quite an unexpected, unforeseen and sudden manner of his eyesight, and believes himself condemned to eternal night, then an unusual fortitude, an astonishing power of soul is required to bear this inexpressible misfortune with something of composure. I am in the position of giving information of two such cases, which, however, under Homœopathic care, found a happy issue.

Mr. S., a bookseller of Prague, a native of Saxony, a vigorous, constantly healthy, unmarried man of thirty years, accustomed to a simple, very regular mode of living, had taken his frugal supper one evening in the hotel, and soon after went home and to bed, where he read yet for some time before sleep overpowered him. After sleeping all night quietly, and feeling refreshed, he awoke at the usual hour, but found that it was still quite dark and thought he had to ascribe this to his awaking earlier than usual. He endeavored to continue his sleep, but in vain; accordingly he thought he would look at his watch. One, two, three matches were lit without any result visible to him. In somewhat hastily striking the fourth match, the head, broken off, must have fallen on his hand, as he suddenly felt a pain as of burning, though he had not seen the slightest trace of a spark, and this circumstance it was that filled him with a nameless ter-

ror and first aroused the dreadful thought in his mind that he had lost his eyesight. When he then became assured by calling the master of the house that it was broad day, he came into a state of the most intense despair, he lamented, he wept bitterly, he wrung his hands and finally begged them to quickly send for a physician. I may freely confess that, never having had a similar case in my practice, I felt extremely dismal on entering his room. What rendered my task more difficult was that there was not a single objective symptom, except perhaps the somewhat dilated pupils, and no other subjective symptom could be gotten but that of an entire cessation of the visual powers. An inquiry into the history of the case gave not the least light. The one circumstance, that it was very sultry in the room where he had spent several hours the evening before, that there had been much smoking, that he had gone home in rough and stormy weather, might induce me to suppose a cold to be the cause of the sudden cessation of the functions in the optic nerve. Under this supposition I ordered the patient to at once return to his bed, and directed him to take two teaspoonfuls of a mixture of a few drops of Aconite 3, in a tumblerful of water. I limited his diet to a very simple fare, which he, however, in his disconsolate state, rejected, and only at the persuasion of those around him he took a cup of beef-broth several times during the day. At my evening call I found the patient in a heavy perspiration, still, with respect to the optic nerve, not the least improvement was to be seen. I consoled the patient to hope for an improvement next day and I was not deceived, for at my morning call he joyfully called out to me that he had perfectly regained his eyesight after sleeping quietly all night and sweating much. I allowed the patient to rise about noon, and after he had kept to his room all that day I allowed him next day, his state being altogether normal, to return to his business.

CASE II.

It was a lucky chance that the experience gained in this auspicious case was of very essential use to me several years later, as it gave me an infinite consolation in a similar sudden case of blindness, which, however, in this case, happened to myself. On a sultry summer's evening I met a colleague on the street, who told me that he was just about to take a bath in the river and persuaded me to do the same. Slowly we went toward our goal, took together a bath-chamber, slowly disrobed and my colleague was the first to quickly jump into the water ;

I myself being since two years less accustomed to cold baths first cooled off a little, and then followed his example. I scarcely had been in the water for two minutes, when to my great terror I perceived that every second things became darker before my eyes and in a few seconds my eyesight was all gone. That I felt very anxious in spite of my experience of a few years before must not appear strange. Guided by the friendly hand of my colleague I left the bath, and having thoroughly rubbed myself dry he was kind enough to assist me in dressing, and then arm in arm we proceeded to my home. I could not see a trace of the daylight which was still bright around me, for about me there was dark night. Having reached home I at once went to bed, wrapped myself up, took every hour two teaspoonfuls of a mixture Aconite 3, in water, and in two hours I began to perspire, when I sank into a quiet sleep lasting six hours, and when I awoke I was dripping with sweat. What had happened really seemed but a dream—my eyesight had fully returned.

But if we inquire into the cause of this sudden extinction of the eyesight, since there was no subjective symptom but that of the sudden extinction of the eyesight, and no objective symptom but that of the dilatation of the pupils, we are justified in believing that in consequence of an intense congestion of the retina—the brain of the eye, as HYRTH calls it—there was a stagnation of blood in its extremely delicate blood vessels and this caused a sudden check in its sensory function. In a similar manner we see peripheral paralyses of motory nerves arise from local disturbances of the circulation. HASSE tells of a case where complete paralysis arose on an arm which during sleep had been hanging over the back of a chair, and similar cases have been observed in porters and in soldiers in consequence of the long-continued and intense pressure of the carrying girths crossed on the back.—*From Inter. Hom. Presse.*

AMERICAN INSTITUTE OF HOMŒOPATHY.

CHICAGO, ILL., May 8, 1895.

MY DEAR DOCTOR.

The Transportation Committee beg to announce through your journal that reduced rates have been conceded to members and delegates of the American Institute of Homœopathy for the annual meeting, June 20th to June 29th next, at Newport, R. I., by the Boston Passenger Association and since concurred in by

the Trunk Line Association and the Central Traffic Association. The rate authorized being one fare and one-third certificate plan for round trip.

The rates for New England are as follows: Two cents per mile from points within twenty-five miles from Newport, with a minimum rate of twenty-five cents. One dollar from points from twenty-five to thirty-three miles from Newport, and one and one-half cents per mile from points more than thirty-three miles from Newport.

In order to secure reduced rates the members and delegates are requested to bear in mind that it is on the certificate plan only. This means that each person must purchase a first-class ticket at the regular tariff rate to place of meeting, and upon request to the ticket agent a certificate of such purchase will be given him. When he arrives at Newport he will hand his ticket to the chairman of the Transportation Committee, who will attend to the red-tape requirements of the New England Committee. His return trip ticket will then be furnished him for one-third the amount paid going.

All railroads running east from Chicago, St. Louis and intermediate points are in the association of reduced rates, and as there is to be no "official route" each person has absolute freedom to choose his own line. The ticket from Chicago to Newport is \$21.00 going and \$7.00 returning by the differential roads, and by other roads \$23.00 going and \$7.65 returning.

It is the intention of the Western delegates, at present, to leave Chicago and St. Louis on Monday, June 19, and spend one day at some attractive resort en route arriving in New York, Wednesday, 19th, and proceed thence by the Fall River Line steamer, "The Plymouth." This steamer has abundant accommodations for everybody and leaves New York Wednesday evening at 6:30 from Pier 28, North River, New York City.

The members and delegates of the American Institute are requested to bear especially in mind *that without a certificate no reduction in return fare will be made.*

Yours Fraternaly,

A. K. CRAWFORD, M. D., Chairman.

VACCINATION AND CONFIRMATION.—Archbishop Walsh, of Dublin, has recently issued instructions to the clergy of his diocese to the effect that no one shall be admitted to confirmation or instructions in preparation for it who has not been vaccinated, or who, having reached the age of seven years, has not recently been vaccinated.

THREE CASES OF INFLAMMATION OF THE KNEE-JOINT.

By Dr. Waszily, Kiel.

Translated for the HOMŒOPATHIC RECORDER.

1. Mrs. Chr. S., aged 42 years, a tall lady of dark complexion and stooping carriage of body, came under my treatment on August 21, 1894, owing to pains and swelling in the right knee-joint,

Some months before, she had become affected with violent pains and inability to walk; the swelling had formed gradually, first accompanied with redness of the skin then with unchanged color. The treatment so far, ice and massage, had been without result. Examination showed quite a considerable serious effusion in the knee-joint; above the patella the difference of measure between the swollen knee and the sound knee amounted to $2\frac{1}{2}$ centimetres. Walking was very troublesome, standing impossible. The general state of health left much to be desired. *At night* there occasionally appeared violent pains and stitches; lying under the feather-bed *aggravated* the symptoms; she had also to rise several times at night for micturition. The stool was varying. The urine at times showed a considerable sediment of urates. *The ailments were aggravated in wet weather.* When a child Mrs. S., had had *glandular troubles*. I prescribed *Sulphur* 30, a dose of pellets every 5th day. On the 23d of September the general state of health was reported as much improved; the violent pains had not appeared of late, only rarely at night, the swelling had decreased, but the limbs still grew tired too easily from walking. I ordered *Sulphur* 200, every week a dose of 5 pellets. On the 5th of November considerable improvement was reported; the swelling could hardly be noticed now, and the troubles only appeared after standing for some time. Prescription: the same. In a letter of December 20th, 1894, the patient reported herself as fully recovered, and she has remained so to this day.

2. Mr. H. W., a waiter, 17 years of age, was brought to me on the 27th of September, during my office hours. He was a young man of weak build and of very pale complexion. About three weeks before he had been seized with fever of a high grade.

In the course of a night the knee-joint swelled up so violently that all movement became impossible. The pains were violent;

the comparative measurement showed a difference of almost 4 cm. Even now there was very little appetite, the fever had disappeared, every motion of the knee joint was very painful, the stool was very inert, the urine showed a whitish sediment, *the sleep was disturbed*, there was a *profuse sweat* toward morning, *during the day frequent ebullition of heat*. The patient had formerly suffered from *glandular swellings and eruptions*, and finally he had jaundice. I prescribed *Sulphur 6*, two doses a day. On the 12th of October he was considerably better; the swelling had decreased by 2 to 2½ cm., the patient could make active movements with his limb, with only slight pains in the knee-joint; the night-sweat had ceased. Prescription: *Sulphur 30*, every other evening a dose of 5 pellets. On the 5th of November the knee had so far improved that the patient could walk without a cane, the measurement showed about ½ cm. difference between the two knees; cracking or friction was hardly noticeable now. The patient received a few more doses of *Sulphur 30*, to be taken in weekly doses, and he appeared before me entirely cured at the end of the month.

3. Mrs. S. in K., 68 years of age, came under my treatment on the 17th of July on account of a chronic *dropsical swelling of the knee-joint*. The ailment had continued for about a year, and was shown to have been caused by a fall on the knee. Three months before the joint had been punctured and afterwards rinsed out. The collection of serum had, however, recommenced soon afterward, and had at that time reached a high degree. The patient had no pains, or these were at least very slight. *Cold wet weather and standing produced a striking aggravation*. The general health was pretty good, only the sleep was not satisfactory. On taking a slight cold there was much urging to urinate, with passage of but little water; beside this, she suffered much from cold feet, formerly she had *foot-sweats*. As a young girl she had for a time had chlorosis, had also suffered once from *articular rheumatism* without any heat symptoms. I prescribed *Sulphur 200*, a dose of 5 pellets for three evenings in succession. On the 2d of July she reported that *during the use of the medicine she had been afflicted every morning with great drowsiness*, but the knee had not shown any change. I considered this drowsiness to be a favorable action of the remedy—remembering the motto *post hoc non propter hoc*—and now in order to produce a local reaction I gave *Sulph. 3*, in 4-drop doses, twice a day. After more than fourteen days the swelling

plainly decreased; the patient first felt that she could move about more easily. I allowed her to continue the remedy for several weeks more, until there was hardly any difference between the two knees; then there was a cessation of action. The movements had become quite free and painless, only when standing for some time some weakness manifested itself; there was still a slight cracking noise when moving. I now gave again *Sulphur* 200, one dose a week, and could dismiss the patient as cured in the beginning of December. A slight thickening of the synovial, however, still remained behind. Besides *Natrum muriat.* and other remedies, *Sulphur* especially acts upon the knee according to Bœnninghausen; *Sulphur* is also an excellent remedy to cause the absorption of exudations, as it acts on the glands, as well as the secretive; also the non-secretive, so it also influences the serious and the synovial membranes.

P. S. I can add another interesting case. I was traversing the seas as a surgeon on board of His Majesty's ironclad, "Heimdall," when I received one day a letter, in which my assistance was asked for a girl of sixteen years, who, according to the diagnose of the resident physician, was suffering from dropsy of the left knee-joint. The ailment had existed for two years, and was said to be owing to a blow. The pains appeared only at times, often at *night*, and, strange to say, they were worse during the full moon, during which the nights generally were more restless. The letter further stated that all manner of remedies had already been used, but there was no further guide to the selection of the proper remedy. I sent from my pocket-case *Sulphur* 200 (Jenichen's), to take during three days, with the request that she would quietly allow the medicine to finish its action, and to appear personally before me at my return to Kiel. To day, after three and one-half months, the mother visited me, and to my astonishment presented to me her daughter, fully restored. There was no trace any more of any dancing about of the patella, no friction and no pains. After taking the medicine the girl was reported to have been quite ill for a time, and even to have had fever. I had no reason now for giving her any new medicine. Thus a high potency, when suitable, will act.—*Allgemeine Hom. Zeitung.*

MULLEIN OIL AND SKOOKUM CHUCK.

TO MESSRS. BOERICKE AND TAFEL.

Gentlemen: I have the greatest pleasure in letting you know that I have got medicine, book and other articles sent by you according to my last order. The indent is neatly and carefully executed and please accept our thanks for it.

I have tried some of your special preparations. I have a strong objection in using those kinds of preparations, but I am glad to be able to say that your remedies are certainly valuable. I am writing you for two of them—the Mullein Oil and the Skookum Chuck, both are valuable.

Mullein Oil is very valuable in cases of *Deafness*. A young lady had deafness for about ten years. It is of a nervous character. Allopathic doctors declared the case as out of medical help. I treated her for three months with both internal and external application of Mullein Oil and she got well. She was very thin and nervous, and strange to say the remedy did her much service in those respects also.

Skookum Chuck has remarkable curative powers over Eczema. An elderly gentleman had the nasty disease for years. I effected a cure (apparent) several times. The last time I gave him Sk. ch. 3 trit., which I procured from your firm. This time there is no relapse.

I got some soaps from you and used them on two of my patients with good results. They are very nice preparations.

Yours faithfully,

P. C. MAJUMDAR, M. D.

Calcutta, India.

NOTICE EXTRAORDINARY!!

Having just been advised that many physicians are hesitating about visiting Newport because of hotel expenses, I take pleasure in stating that in accordance with Bulletin 2 I am prepared to furnish rooms with board as low as \$8 a week and rooms without board at \$2.50 per week. Arrangements can be made to suit any purse, but applicants must not expect Ocean House menu. I expect to spend most of my time at that hotel to meet the requirements of those who cannot arrange for quarters in advance.

GEO. B. PECK, M. D.

Providence, April 27, 1895.

INFLUENCE OF DRUGS UPON HYPNOTIZED PERSONS.

EDITOR OF HOMŒOPATHIC RECORDER :

It has long been a source of ridicule on the part of our Allopathic brethren, and too, on the part of some members of our own school, that some of us have claimed a magnetic or spiritualized action for homœopathic remedies; that it was true that remedies carried on the person under certain circumstances of increased bodily sensitiveness would exert an influence on that person. Lippe always said that certain medicines, among which was Phosphorus, would act much better if the patient were magnetized. The following published in the *Literary Digest* for May 25, 1895, seems to bear upon this fact that a medicine may exert a decided effect on a person even though it has not been taken into the body or even touched the patient. As will be seen these substances were in closed tubes and only brought near the hypnotized person. If thymol brought near the glands of the neck will produce swelling of those glands, bulging of the eyeballs and dilation of the pupils, the thymol being in a closed tube and not allowed to touch the person, then there certainly must be some sort of magnetic or spiritual emanation from that drug. Does not this go far to prove that the homœopathic remedy has a magnetic, dynamic, or spiritual power on the body?

Yours,

T. L. BRADFORD.

It has long been known that hypnotized persons are abnormally sensitive in certain directions. Recent experiments show that they may be made so sensitive to the action of drugs that the characteristic powers of these become evident when they are merely held in proximity to the skin, not even touching it. We translate below a brief account of some of these experiments from *Gaea* (Leipsic, June), and reproduce two striking photographs to illustrate them:

"The French physician and naturalist, Dr. J. Luys, has announced some extraordinarily interesting researches in this direction. The medicinal substances were in closed tubes and were brought near the hypnotized subject. Some kind of action at a distance took place, which revealed itself in an alternation of the bodily appearance and physical condition of the person experimented upon. In this way Dr. Luys produced convulsions, hallucinations, alterations of the pupils, acceleration and retardation of the pulse, etc. He was also able to excite symptoms of joy, pain, grief, or anger. The changes in physiognomy and expression corresponding to these symptoms were fixed by means of photography."

In the first a tube of thymol was brought into the neighborhood of one

of the glands of the neck. This region at once swelled. At the same time there was bulging of the eyeball, with evident dilation of the pupils. In the second, a tube of chloral with morphin was held below at the left. Fearful hallucinations at once occurred, evident dilation of the pupils and contraction of the arms. The hair became tangled.

"Dr. Luys has also experimented on the influence of colored light rays on hypnotized persons by allowing light to fall on them through colored glass. He finds that blue glass always produces a feeling of sadness, red rays excite joy and well-being, yellow the symptoms of strong affection. The violet and green tints vary in their effects according to their intensity and to the individual sensitiveness of the person experimented upon. Dr. Luys's experiments are of great importance, and seem to open way to new paths of knowledge."—*Translated for THE LITERARY DIGEST.*

CLINICAL AND THERAPEUTIC NOTES OF RECENT CASES.

From Monthly Homœopathic Review.

Collected by W. Theophilus Ord, M. R. C. S., L. R. C. P. Lond.

BATH HOMŒOPATHIC DISPENSARY.

Selected cases from Dr. Mackechnie's Notes.

Mammary Tumour.—*Bryonia* and *Lachesis*.

Mrs. J., aged 39, rather neurotic and hypochondriacal. For some months she has suffered from chronic diarrhœa. with tenesmus, stools being light-coloured, loose, and four or five per diem. After several remedies had been tried with little effect, this yielded to *Veratrum album*. Previous to the diarrhœa, patient had noticed a hard swelling in her left breast, with some aching rather below than in the breast. This tumour seemed to improve at first, but when the diarrhœa ceased it became larger and more painful, aching especially at night. The breast was swollen and tender, the tumour being probably an adenoma, hard and movable. There is no retraction of nipple or enlargement of axillary glands. Ordered *Bryonia* 3. In a month she returned, breast was improving, she found it was more painful when she used her arm. Repeat *Bryonia*. Two weeks later this was changed to *Pulsatilla* on account of some subsidiary symptoms, perhaps induced by cold. These were relieved, but in a few weeks breast again became painful and swollen as before. *Bryonia* again ordered for two weeks. By this time the pain and swelling had greatly decreased, though the tumour remained much as before. She now complained of constant and

very distressing flushes and heats. *Lachesis* ordered. From this time there was steady improvement in all respects, in a month the tumour had lessened considerably in size, there was no longer pain. *Lachesis* was continued, and presently changed to *Ignatia*. Four months after commencing *Lachesis*, no trace of tumour could be felt, though there were occasional darts of pain in breast.

Adenitis.—*Rhus Tox.*

Sarah L., aged 14, had for long been troubled by enlarged and often painful cervical glands. She has now pain in axillary glands also, and they are swollen. She is well in other respects, appetite good and bowels regular. Ordered *Rhus tox.* In a few days the pain and swelling disappeared and she considered herself well. Eighteen days after her first attendance she returned with a renewal of pain and swelling in glands (probably from cold?) and with sore nostrils. *Rhus tox.* was repeated, she soon reported herself well, swelling had gone, and patient did not return.

Psoriasis.—*Cuprum.*

Kathleen S., aged 10, a school girl, had for two years suffered from psoriasis. There were patches on elbow and knee, the latter being in a ring. They were covered with dry crusts, and the usual pink areolæ surrounded them. Her bowels were regular and general health good. Ordered *Cuprum metallicum*. In a week there was improvement, the patches were losing their areolæ, one or two had come off and were not being renewed. Continue *Cuprum*. Next week there was still further progress effected, but some swelling and tenderness of cervical glands had appeared. For this *Rhus tox.* was ordered every night, a dose of *Cuprum* every morning. Next time the glands were normal and the psoriasis nearly well. *Cuprum* continued alone. The following week—a month from commencing treatment—she was cured, no patches now to be seen.

Herpes Labialis.—*Rhus Tox.*

Frederick S., aged 12, school boy. A vesicular eruption had appeared at the angle of the mouth and on the chin; there was much itching. Previously he had suffered from a general eruption, with much itching, probably urticaria, but not now visible. His appetite was bad, but tongue moderately clean. Ordered *Rhus tox.* In a week he was better, though tongue was less clean. Next week eruption had nearly gone; tongue was

clean. The following week he was well in all respects and *Rhus* was discontinued.

Herpes Zoster.—*Rhus Tox.*

Elizabeth B., aged 4½. She had several patches of herpes on the chest, at level of the axilla, on the left side. Child was poorly, had had no appetite some days, was unable to attend school. Bowels normal, no other symptoms were obtainable. Given *Rhus tox.* In a week was much better and had returned to school. Next week herpes was cured, and beyond a few boils on the scapular region, for which *Sulphur* was prescribed, she remained well and did not return.

Lichen.—*Sulphur.*

Lucy P., aged 48, a dressmaker, had suffered for a fortnight from an eruption of fine papulæ all over the body, which caused distressing itching when warm in bed at night. On the nape of the neck was a small patch where the papules were confluent. She suffered from pain in region of back, worse on exertion. Bowels confined, the stools consisting of dark scybalous masses. Urine natural. Ordered *Sulphur*. In a week she was better, and next week rash had gone, bowels were regular and she considered herself cured. There has been no return.

Eczema of Face.—*Sulphur.*

Alice D., aged 19, a dressmaker. An eczematous patch has recently appeared on her right cheek, which is disfiguring and distresses patient. It is circumscribed, there is no inflammation, and but little oozing or itching. She is healthy and all the functions are normal. *Sulphur* 3x ordered *ter in die*. In a week there was obvious improvement. The week following all trace of the eczema had disappeared.

Pleurodynia.—*Cimicifuga.*

Sarah H., aged 49, housewife. She complained of constant pain in the left flank and cardiac region. It was aggravated by movement. There was great tenderness on pressure. Heart's action good, no valvular lesion. She suffered from great restlessness and slept badly. The bowels were alternately relaxed and confined. Urine copious and pale, but normal. Ordered *Cimicifuga*. In a week the side was better, bowels acted regularly, she fell quieter, urine still very copious. *Ignatia* θ ordered. Next week she was well and has not returned.

Bronchial Catarrh.—*Bryonia.*

Joseph B., aged 64, a fish hawker. For a month has had se-

vere cough at all times during the day. There is frothy expectoration. The cough is violent, shaking him and causing distressing shocks in his head. The tongue is much furred, bowels regular and urine healthy. Ordered *Bryonia*. In a week he was much better, expectoration now white and thicker. To continue medicine. Next week reported cured.

Hysteria in a Man—*Ignatia*.

John R., aged 38, a carter, thinks he has heart disease. He complains of nearly constant pain in region of heart, worse on exertion. There is dyspnoea on movement, worse ascending. He has flatulence, but bowels are regular, though appetite is bad. Urine is pale and copious, tongue dryish, sleep variable. He has a large chest, deep and regular respiration, good percussion note. Auscultation shows nothing abnormal, no valvular lesions, though perhaps the heart's action is rather weak. Ordered *Ignatia*. In a week he reported "much better." Next week there was some pain in chest wall on movement, for which a few doses of *Bryonia* were given, the *Ignatia* being continued. The third week he was well and has not returned.

Two Cases of Dysmenorrhœa.—*Nux Vom.* and *Sepia*.

Reported by Edwin A. Neatby, M. D.

1. Miss C., æt. 19, had suffered from pain at the period for three years. She came for advice in May, 1893. Menstruation, occasionally premature, was somewhat profuse and lasted one week; the hemorrhage was bright and in the early part clotted. The pain was in the hypogastrium only, and began one day before the flow, lasting 48 hours in all. While present it varies in intensity. While the pain is present there are waves of nausea, but no vomiting.

Apart from the period patient had sharp dyspeptic pains one or two hours after food, the tongue was indented, she had sour taste after food, and in the morning the tongue was coated at the back. She was of an irritable disposition, dark and slightly sallow complexion, and her irritability was worse at the monthly time. She suffered from leucorrhœa, causing irritation worse when warm.

She had headaches on the vertex and left side of head, worse in the morning and better in the open air. For medicine she received *Nux vomica* 30, three drops night and morning.

After several painless periods she returned in October and November for præcordial pain, worse on going up stairs, and for

dyspnœa. There was no cardiac disturbance. The abdomen was somewhat tender to the touch. There had been one painful period. Patient again received *Nux vomica*, which was followed by *Sulphur* on account of increase of leucorrhœa. Both that and the pain disappeared.

2. Mrs. D., æt. 40, of dark complexion and spare build, came for dysmenorrhœa in October, 1893. Menstruation was moderate and regular; the pain was severe, sacral aching beginning one day before the flow and lasting two days in all. She had had four children, the last four-and-a-half years previously. There was "bearing down" pain (much worse at the period), leucorrhœa worse from fatigue, but no protrusion; no frequency of micturition. On vaginal examination, a lacerated perinæum was found, the uterus easily prolapsed on straining, and was retroflexed. In addition to these local symptoms, patient complained of shortness of breath, pain in left chest and dry cough, worse in the cold air and after washing. For three months she took *Sepia* 30 and 200 and the pain at the period disappeared. The bearing-down, continued, however, and was only removed by repairing the perinæum, after which she could walk, stand and do her work easily.

TUBERCULOSIS.—At the recent meeting of the American Medical Association at Baltimore, Dr. Parsons read a paper on the etiology of tuberculosis, which the *Medical News* report condenses as follows. "He contended that the almost universally accepted germ-cause of tuberculosis is quite secondary in its influence, and claimed that it was necessary for the development of tuberculosis that there should be an abnormal state of the system, which he termed a "pre-tuberculous condition." He stated that tuberculosis is in reality not a disease, but a symptom of lymphatic disturbance or stasis, this being proved by the analogy between lymphoma, or surgical tuberculosis, and tuberculosis of the lungs. Dr. Parsons summed up as follows: 1. Pulmonary tuberculosis should be considered as primarily due to a lymphatic stasis of congenital or acquired variety, depending on incompetency of excretory function and deoxidation of blood-cells. 2. The tubercle-bacillus should be regarded as a phenomenal expression of the disease, only because a favorable medium exists in the lymphatic stasis for its cultivation, and, ce, symptomatic rather than etiologic. Its developmen

often takes place some length of time after the stasis is apparent, as evidenced by the so-called scrofulous condition existing in most tuberculosis persons.

“The great danger in considering the etiology of pulmonary tuberculosis lies in the fact that we are too prone to lose sight of the chemic composition of man, and the fact that disease is but a chemic decomposition in the universal furore after a specific germ, the phenomena of which may be observed in various media in and outside the body.”

It looks as though the ideas promulgated by Hensel are beginning to make an impression on the world.

SCIATICA AND JAUNDICE. LACHESIS.—A strong healthy labourer, aged 35 years, had been working some months during the summer in sewers, when he was seized with severe double sciatica. He could walk well, except during the paroxysms of pain, which occurred every 15 or 20 minutes, lasting about two minutes, and were most agonising. There was extreme tenderness to touch over the course of both great sciatic nerves. The general health was good, and tongue was clean, but his motions were very dark and offensive. *Mercurius* was prescribed, but without effect, when in a day or two distinct icterus developed, and in 24 hours became very pronounced, the motions now being colourless.

On the third day the case seemed to resemble one of acute blood-poisoning, especially affecting the liver and great sciatic nerves, and on these indications, the pain being severe and almost constant *lachesis* 6, which also matched the subjective symptoms, was prescribed, dose every 15 minutes. In the first hour after commencing *lachesis* there was only one slight attack of pain. The next day there was freedom from pain, and even from tenderness over nerves; the jaundice also had diminished. Patient, however, complained of an extraordinary pain at the back of his neck, as if he had been suddenly struck there. This he had felt several times; it was so instantaneous and real that he accused his wife of having struck him. *Lachesis* was therefore stopped, but in a few hours pain in legs began to return. Patient was then advised to endure the discomfort in back of neck, and to continue *lachesis*. In a week the jaundice had gone, pain in legs disappeared, and all other symptoms were permanently relieved; patient appearing in his usual health

again. There has been no return of the sciatica —*Dr. Bird, in Monthly Hom. Review, April 1895.*

THERAPEUTIC EFFECT OF LIGHTNING.—Some time ago a vessel on the Atlantic ocean was on several occasions struck by lightning and all persons on board were strongly electrified. On one of these occasions there was among the passengers one whose arm and leg had been paralyzed for three years, and who was lying in bed at the time the ship was struck. To the great astonishment of his fellow-passengers, he sprang from his bed and ran around the deck as lively as the liveliest. His recovery was not only temporary, but he regained the permanent use of his limbs.—*Algemeine Hom. Zeitung.*

WHEN THE BLADDER WASN'T EMPTIED.—*Causticum* I have used with marked success in shop-girls and schoolgirls, or school teachers, who, from the nature of their occupation, could not, at the call of nature, leave their task and empty the bladder. In a very little while paralysis came on and made matters very embarrassing and uncomfortable, not to say dangerous. I have two peculiar cases which I beg to recite as instances of this trouble, and perhaps the story will tend to associate itself in your memory in such form that you cannot dissociate *causticum* from it. One was a young man of tender age, who, on New Year's forenoon, some many years ago, as is the custom in St. Louis, visited his lady friends who kept open house, and being a white ribbon adherent, he took coffee in his, at each place. At half-past two o'clock he attended a theatrical matinee of the Lydia Thompson Blondes, and after being seated for three-quarters of an hour, the house now packed, not even standing room left, and, of course, with exit practically impossible, his bladder became obstreperous in its demands for "seeing a man" down the alley between the acts. He resisted the calls as best he could by giving his mind a little more closely to the shapely ballet, hoping soon to get out, and when he finally got to the urinary basin, he was unable to void, and there was danger of rupture; he fainted with his agony, was picked up, carried to an adjacent drug store, and when he recovered consciousness under the application of restoratives he lay in a pool of water, dress suit lazily lapping it up, with blander still leaking. For

many months thereafter that youth suffered because of his intemperance, and was only restored by a few doses of *causticum*.—*American Hom. Kraft*.

CARBOLIC ACID IN ERYSIPLAS.—*Carbolic Acid* is not given as a remedy for erysipelas in any medical paper or homœopathic hand-book, except in the fourth edition of Hales' *New Remedies*, in which there is a full description of the pathogenesis of *Acidum Carbolicum*, principally on the skin, but no mention is made of the use of this remedy in *idiopathic erysipelas*. Now I made the experience on my own body. On the 15th of February (the coldest day of this winter at Graz—15 Celsius) I was seized in the early morning with a violent trembling chill (Schüstelfrost) and great thirst for cold water. The next night with a severe tearing pain in the right elbow. In the morning *there appeared the erysipelas*, from which I had suffered already twice in my life, but always on the left side (extremities). *The back of the right hand, the three first fingers and the arm* showed a violet colour and swelling, with roughness. I took *Rhus* and the pain disappeared instantly, but the erysipelas increased. There was 39.8 degrees (Cels.) and uneasy dreams on the second night. On the third night 38 degrees (Cels.) only. But the erysipelas went on. Now, Dr. Streintz (my only homœopathic colleague here) visited me and advised me to try *Carbolic Acid* 30, and already after one day the erysipelas stopped and did not seize the last two fingers. I could move the hand better, and then began the desquamation, which continues still.—*Dr. Gustav Proel, in Homœopathic World*.

MEDICINE IN LABOR CASES.—June 16th, 1894, I was called to attend Mrs. H. in her first confinement. Finding I had arrived too soon, I sat down to await developments. After waiting two or three hours I jokingly said to her that if she did not hurry up she would keep me up all night. She said she had been thinking the same thing. But on getting up to cross the floor I noticed she seemed dizzy. Previous to this I had noticed her being drowsy; then I began to study my patient. She is a tall, slim, mild, timid patient, light hair. Dullness, drowsiness, dryness, with tardy dilatation, rigid os, led me to think of *Gels.*, which I gave in the 200th, a dose every twenty minutes,

until three doses were taken. In about two hours the child was born without the use of instruments or very severe pain. Made a good recovery.

Mrs. A., Scandinavian, slim, medium height, red hair, mother of two children, had been in labor thirty-six hours, attended by a midwife. I found her sad, tearful, fears she won't get well. Consolation aggravates, is very much exhausted, pains ceased, had a chill about ten A. M., has felt no movements or pain since. Midwife said the child was dead and could not be delivered without instruments. I gave her a dose of *Nat-mur*.²⁰⁰ in water; in about fifteen or twenty minutes she began to have pains; three doses twenty minutes apart brought the child alive and all right, with very little assistance.—*Dr. W. E. Everly, Glyndon, Minn., in Hom. Physician.*

[It is in cases of this sort that Yingling's *Accoucheur's Emergency Manual* is invaluable. It is so handy to consult while waiting developments and while there is time to quietly study the patient. It will confirm many in the truth of Homœopathy.]

AN OLD ULCER CURED.—Mrs. P., age 65; plethoric, scrofulous diathesis, with lymphatic temperament. She had been confined to the house for fifteen years and got no rest day or night. She had consulted about all the doctors in the city and adjoining cities, but got no relief from any of their treatment. I found both limbs swollen and edematous to the extreme, from the knee down. The left limb had more the appearance of a small sack of bran than of a leg. There was one large indurated, ragged, sloughing ulcer, which reached from the upper one-third of the leg to the middle of the plantar surface of the foot, covering about one-half of the foot and limb.

It eliminated a sickening odor and discharged a sanious fluid with profusion. The edges of the ulcer were thick, inflamed and extremely painful. I found no other specific indications

She was put at once upon *Echinacea* and *Passiflora*. Thirty drops of each every three hours. She rested well the first night, and continued to do so, and made a rapid improvement. A local wash of asepsin and peroxide of hydrogen was all that was used on the ulcer. The odor disappeared at once and the granulation was very rapid, and the old lady was promenading in the yard in two weeks. She made a rapid recovery.—*Dr. L. S. Downs, Galveston, Texas, in Eclectic Medical Gleaner.*

ANTITOXIN'S SEAMY SIDE.—In summarizing, I oppose the antitoxin treatment of diphtheria first, because in an experience of one hundred and fifty four cases during the months of January, February and March, 1895, in the Willard Parker Hospital. I have failed to see the slightest evidence that it neutralized the toxæmia in a single case. I have never found that it exerted the slightest influence for good in a single clinical manifestation of the disease--on membrane, pulse, temperature, gland swelling, laryngeal symptoms, etc. Every one of these cases has been examined daily; they have been examined with care and with great solicitude, and with a desire to discover some evidence of the virtues ascribed to antitoxin by others. Secondly, *I oppose it on account of its immediate danger to life, through its influence on the kidneys and on the nervous system, and remotely, through its influence on the blood.*—J. E. Winters, M. D., in *Medical Record*.

HIGH POTENCY MAGIC.—I have been talking within the last two hours to a man æt. forty eight, who has for nearly fifteen years been taking at least ten grains of morphine per diem. My father has cured him of the habit with ONE dose of *Sulph. cm.* (Swan). He has been cured now for eight months; gone up in weight from 135 to 195 pounds. The unpleasant symptom that remains is a "black-ball" stool (Opium), and that is getting better.

I cured a case of ringworm, that resisted a Texas doctor's salve, by one dose of *Tuberculinum*. The ringworm was on back of hands and of feet. Itching worse after midnight, worse by scratching—voluptuous itching. After midnight he woke up with a cold, clammy sweat all over. *Tuberculinum*³⁰, one dose. Prescription made was non-homœopathic; purely experimental.—William Keane, M. D., *De Soto, Mo., in Hom. Physician*.

VACCININUM CASE.—Lady, aged 30, came to me last summer, giving a family history of phthisis; had consolidation of the upper parts of both lungs; had been losing flesh constantly for three months; very severe night sweats and a hacking cough that was almost constant, with considerable expectoration at times. I gave her one dose of *vaccininum*²⁰⁰ in my office, and a package of *placebos* to take, one every day. She came back at

the end of a week reporting that from the time she left my office she had not had a severe coughing spell, and for the last three days had had only an occasional cough but nothing at all to give her any difficulty. I followed up her case giving her a dose of *vaccininum* once a week for six weeks, at the end of which time she went to business. I have not seen her since.—*Dr. Garrison in N. A. Jour. of Hom.*

TO START A BALKY HORSE.—An officer of the police detail said recently: "When I was a mounted policeman I learned of a most humane and kind method of curing a balky horse. It not only never fails, but it does not give the slightest pain to the animal. When the horse refuses to go, take the front foot at the fetlock and bend the leg at the knee-joint. Hold it thus for three minutes and let it down, and the horse will go. The only way in which I can account for this effective mastery of the horse is that he can think of only one thing at a time, and having made up his mind not to go, my theory is that the bending of the leg takes his mind from the original thought.—*Farm and Field.*

ASTHMA.—Last summer was telegraphed for to see Mr. ———, who suffers from frequent attacks of asthma, usually lasting about ten days. Breathing much labored; talking nearly impossible; bronchial asthma; expectoration thick, yellow; much rattling of mucus in chest; had been suffering 5 or 6 hours. Kali sulph. 3x trit, five grains hourly. The next morning when I called to see him, on my rounds, his wife informed me that he was greatly relieved before night, had slept fairly well all night, and had gone to his place of business. He keeps a supply of the powders on hand.—*M. E. Douglass, M. D., Danville, Va., in So. Jour. of Hom.*

BLATTA ORIENTALIS —In the HOMŒOPATHIC RECORDER for Sept., 1891, is a paper by Dr. Ray on the use of this drug in asthma, with several clinical cases. Its chief use seems to be to cause free expectoration, and thus relieve the sufferer. If taken at the commencement of an attack, it frequently aborts it. The drug needs proving. I have used it empirically in a few cases where other remedies have failed and nearly always with considerable benefit.—*M. E. Douglass, Danville, Va., in So. Jour. of Hom.*

SMALLPOX EPIDEMIC IN THE EAST.—"More than six thousand cases of smallpox have already occurred in this city since the beginning of February, of which seventy per cent. were fatal. Every means is being tried by Government authorities to put a stop to the epidemic, but without success. Almost all the people are vaccinated from virus of cow-pox (vaccin), and we regret that this vaccination does not prevent the attacks."—*Calcutta correspondence of Homœopathic World.*

A HYPERICUM CURE.—Mrs. M., aged 28. Burning and throbbing in vertex. Dull aching in sacrum, by rubbing and heat. Dull pain over crest of left ilium, caused by a wrench, in damp weather; this had existed for fifteen years and resisted all kinds of treatment. Oct. 2, R *Hypericum* 45 m. (F.), one dose, followed by *Sac. lac.* Up to date there has been no return. Feb. 26, 1895. No adjuvant treatment.—*Dr. C. M. Boger, Parkersburg, W. Va., in N. A. Jour. of Hom.*

BOOK NOTICES.

Degeneration. By Max Nordau. Translated from the second edition of the German Work. Third edition, New York, 560 pages, 8 vol., cloth. D. Appleton & Company.

"Degeneration" is the sensation of the hour among the more serious books, and not to have read it is to be in that state known as "behind the times." It is in some respects a powerful book and in others a curious one—powerful in its scientific criticism of current literature, art and music and curious as showing the state of the "scientific mind" in this "Fin de siècle" age, a turn for which the author expresses great contempt, characterizing it as "silliness"—an evidence of the widespread of "degenerations."

While the book was ostensibly written to point out the prevailing state of civilized man, nevertheless we are inclined to believe that the pique of the scientific man, at the sneers directed at his vocation by the various "cults," etc., in Europe to-day, had something to do with it; that the scientific man goaded by these sneers snatched up his iron mace and struck—and the smash of bric-a-brac has been great!

Dr. Nordau's method of hitting is unique—he simply proves, according to his lights, that the men he writes about or against, are insane, and what degree of success or popularity they achieve is simply due to a kindred madness among their admirers. This is not done sarcastically, but in a calm, scientific manner, much as the head of an asylum for the insane would write of the vagaries of his inmates.

The first outfit that he smashes is the "Pre Raphaelites," originating with the three painters—Rossetti, Holman Hunt and Millais, and those who followed, painters, poets and æsthetes, embracing Burne Jones, Maddox Brown, Swinburne, Morris, Ruskin and still later Oscar Wilde and his set (the late London scandals seem to bear Nordau out in this) all of whom are hysterical. Ruskin is delirious.

Then he turns his attention to France and finds the Symbolists, the neo Catholics and other sets raising an "incoherent cackle" and all of them are "degenerates." The terms hurled at these "decadents" are without velvet—"pseudo-artistic loafers," "drivelling," "circus riders," "dunces," "graphomaniacs" and many others equally vigorous.

Russia comes in next, and a very long chapter being devoted to Tolstoi, who is gently but firmly classed among the degenerate or insane. It is the religious side of Tolstoi's books that receive especial attention. The following quotations, which not by assertions but implication points out another eminent degenerate, throws some light on Nordau's position in regard to this subject. "When Prince Bismarck once said, 'I do not know why I should bear all the troubles of life if I were not able to believe in God and a future life,' it only shows that he is insufficiently acquainted with the progress of human thought." Our author's position might be not unjustly put as follows: There is no God but Fact, and the scientists are his prophets.

"Richard Wagner is in himself alone charged with a greater abundance of degeneration than all the degenerates put together with whom we have hitherto become acquainted," and the success of his music is an evidence of degeneration on part of the public. "With Wagner amorous excitement assumes the form of mad delirium. The lovers in his pieces behave like tom-cats gone mad."

We have not space for going over the list of lunatics at large, the number being too great. They embrace many names,

among them of note may be mentioned Ibsen, Nietzsche, Zola and Walt Whitman. If it were possible to find a jury of sane men in this mad world, it might be well to submit to them the questions of fact: Is not Nordau more degenerate than any of those whom he convicts? He sees in science the only hope for regenerating this degenerated world; in the fast life of this crowded century he sees the cause of this degeneration, which he terms "fatigue." "Now to this cause—fatigue—which, according to Féré, changes healthy men into hysterical, the whole of civilized humanity has been exposed for half a century. All its conditions of life have in this period of time experienced a revolution unexampled in the history of the world. Humanity can point to no country in which the inventions which penetrate so deeply, so tyrannically, into the life of every individual are crowded so thick as in ours." These conditions are the fruits of applied science, so if Dr. Nordau is correct in his etiology, he is insane to seek to pile more science on the overburdened backs of the "degenerates." Clearly that would be the act of a crazy man.

According to him (if we have read him aright), there is no God in the sense of "Our Father which art in the Heavens." The Scriptures are naught, and those who believe in them show ignorant superstition or degeneration. Religion is taught to the lower classes for state reasons and is unworthy of the scientific mind. Should inquiry "result in showing that all artistic activity is diseased, it would only be the acquisition of fresh knowledge." "Science has not hesitated to pronounce faith a subjective error of man," and so on. What is meant by faith being "a subjective error of man?" Does it mean that because the believer cannot "scientifically demonstrate" that man lives to eternity after the decease of the body he is not to entertain the faith that he does? Nordau himself has a most child-like faith in the doctrine of evolution, in which those who have faith in God and a future life do not believe. Now, these latter from themselves can no more prove to one in a negative state that the subject of their faith is the truth, than can Nordau prove that evolution is fact and not fancy. Indeed, it requires a great deal more credulity to accept as fact the notion that man was evolved from polywog, than to believe that he was created in the image and likeness of God.

But the book is very interesting.

Gout and Its Cure. By J. Compton Burnett, M. D., pp. 172. 12 mo. Cloth. 90 cents; by mail 95 cents.

Unlike a good many other medical writers, Dr. Burnett is always original. When he has investigated a certain line of treatment and discovered something new, something not to be found in the text books of to-day—though at times in the forgotten lore of the past—he gives that to the world in one of his well known small books assuming that the practitioner know the routine treatment. His books are all worth reading and re-reading and this, the latest, is no exception to the rule, for it is full of new ideas on the treatment of gout, and, incidentally, of the liquor habit: indeed he branches off on pages 40-42, the "Story of the Nettle as a Medicine," to the treatment of ague, or chills and fever, and gives the profession a hint as to the treatment of this prevalent disease that ought to cause a decline in the market price of quinine. *Colchicum* is the sheet anchor of many in gout, but says Burnett: "'Rely on *Colchicum* in gout, and you will get plenty of Bright's disease,' was the advice to me given by a most clear headed physician, and hence it has come to pass that I have myself no experience of *Colchicum* in gout, good or bad. I do not remember ever having prescribed it a single time." This to many must seem like Hamlet minus the Prince of Denmark. But there are plenty of remedies for all that. One especially, one of the old Rademacher remedies, *Spiritus glandium quercus* will attract considerable attention no doubt, as it seems to deserve. The section devoted to it is headed, "On a Remedy Homœopathically Antidotal to the Effects of Alcohol." Part of "Observation 1" will show the drift of this remedy.

"Colonel X., aged 64, came under my observation on January 15, 1889, broken down with gout and chronic alcoholism, and pretty severe bronchitis. Heart's action irregular; liver and spleen both enlarged, and has complained bitterly of a gnawing in the pit of the stomach. His gait was unsteady and tottering, his hands quivered, and altogether he was in a sorry plight. The poor fellow had lost his wife, and had for a good while tried to rub along with the aid of a little Dutch courage, in the shape of nips of spirits, for which he was always craving. Severe windy spasms; no sugar, no albumen."

"R *Spiritus glandium quercus* θ , 10 drops in water, three times a day."

"January 22.—On this day—a week from his first visit—he

walked briskly into my consulting room, and brightly exclaimed: 'Well, I think you have worked a miracle;' and the curious thing was that his craving for spirits was notably less, he having consumed only one-third of a bottle of whisky in the week, instead of two bottles, which was his usual allowance.'

The last prescription was in May "and I learned some months afterwards, from his daughter, that the colonel continued in fair health, and partook of stimulants 'like other people,' and without any 'craving.'" About twenty pages are devoted to this remedy, and they are worthy of careful study as is the rest of the book.

Diseases of the Heart and Arteries. Their Causes, Nature and Treatment. By John H. Clarke, M. D. C. M. Edin. 195 pages, cloth. London; E. Gould & Son. 1895.

Dr. Clarke's latest work is divided into ten chapters. The first is devoted to causes and classification, the second to the curability of valvular diseases of the heart in acute stages, third to the remedial power of Homœopathy in cases of chronic heart diseases, fourth to the action of *Thyroidin*, fifth to palpitation and fainting, sixth to alcohol and tobacco cases, seventh to angina pectoris, the eighth to aneurisin and remainder to diet regimen, etc. Thirty-six clinical cases are detailed at some length in the book full of practical details and treatment valuable to all who have to deal with heart diseases. The book deals especially with the therapeutics of heart diseases, pathology only being considered to make clear the case cited. "It must not be forgotten," writes the author, "that neither heart diseases nor aneurism, even when uncured, is necessarily fatal in the long run; the patient may live the full span of life and die of some inter-current and quite independent disease. So the prevailing popular notions about heart disease cannot be too strongly combatted, and more especially by Homœopaths. The helplessness of Old School medicine in the face of disease in general is responsible for much of the despair which attaches to the very mention of certain diseases in the popular estimation." A book like this will prove to be exceedingly useful to all who do not know all about heart diseases and their treatment. The essentials, a previous work by Dr. Clarke, "Iodide of Arsenic in Organic Diseases of the Heart," which work is out of print, are incorporated in this book. The new remedy to which we

are indebted to the Old School, the preparation from the thyroid glands of sheep, *i. e.*, *Thyroidin*, is considered in a special chapter and shown to be an excellent remedy when potentized and administered Homœopathically. This chapter contains a species of symptomatology compiled from the effects of over-dosing by the Allopaths. Dr. Clarke prescribed the remedy in the 3x potency, or higher.

A Clinical Manual. A Guide to the Practical Examination of the Excretions, Secretions and the Blood, for the Use of Physicians and Students. By Andrew MacFarlane, A. B., M. D. 139 pages, 12 mo. \$1.50. New York and London. G. P. Putnam's Sons. (Philadelphia, J. B. Lippincott Company.)

A very practical little book this. It is the custom in noticing books for the reviewer to add the stereotyped phrase, "every physician should own a copy;" when physicians understand the scope of this little book not every one will buy a copy but, we think, a great many of them will, for the simple reason that they will get value for their money. The book is divided into six parts, *i. e.*, "The Urine," "The Stomach Contents," "The Faeces," "The Blood," "Pathological Fluid," "Pathogenetic Micro-Organisms." Each of these parts is sub-divided and the paragraphs numbered; the paragraphs in compact form give the latest tests for the various abnormal elements to be found in the excretions of the sick. It is a book that enables every physician to be his own bacteriologist and chemist. There are thirty-nine illustrations, six of them being colored plates.

We acknowledge receipt of a fine photo-gravure picture of the old veteran, von Bœnninghausen. It is published by Dr. John Arschagouni, of New York. The size is 20x24 inches and the price \$2.00, mailed post-paid on receipt of price. Orders may be sent to the B. & T. pharmacies.

THE new *Homœopathic Text-Book of Surgery* will be ready for delivery to subscribers some time between July 1 and August. It will be a noble volume and a credit to Homœopathy. The price will be \$9.00 in leather or \$10.00 in half-morocco. Orders for the book may be sent to any of the Boericke & Tafel pharmacies.

Homœopathic Recorder.

PUBLISHED MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street, Philadelphia, Pa.

SUBSCRIPTION, \$1.00 PER ANNUM.

Address communications, books for review, etc., for the editor, to E. P. Anshutz P. O. Box 921, Philadelphia, Pa.

THE PHILISTINES ON HIM.—The *Medical News* and the *British Medical Journal* have been wrought up to an unusual degree of excitement by Dewey's last book, *Essentials of Homœopathic Therapeutics*. The B. M. J. says it is "delightful work" and will "desopilate the heaviest spleen." What especially tickles Mr. Hart is the personification of drugs. "*Stramonium* has visions of animals coming towards him from every corner," striks him as being very funny; in this he but echoes his double on this side of the pond, Mr. Gould, of the *Medical News*, who devoted a three-page editorial to the book. The hilarity of these gentlemen verges on the hysterical, and their hysteria (as intimated in a previous number) seems to be of the *Anacardium* nature. Dr. John H. Clarke, commenting on Mr. Hart's mirth, says that "it is of the same order as that indulged in by ingenious British youth when they hear foreigners speaking in language unknown to themselves."

But the really funny thing about the whole matter is that Hahnemann took this *Stramonium* symptom, over which Messrs. Hart and Gould are bending double, from an Old School authority. Another humorous phase, as pointed out by Dr. Clarke, is that in the same number of B. M. J. in which Mr. Hart laughs so uproariously over "the humors of Homœopathy," is an article in which a certain remedy is recommended for chronic diarrhœa; the writer gets the hint from Ringer, who filched it from Potter, who was taught it at the St. Louis Homœopathic Medical College, who got it from Hahnemann.

NON-IMMUNIZED SERUM.—Dr. Bertin, of Nantes, has made a discovery that is killing to the new ideas that have been disporting themselves lately in the warm sun of publicity. His discovery is that the non-immunized horse-serum is identical

with that of the immunized, and it acts in the same manner. The drug men who have laid in a large stock of "antitoxin" had better announce closing-out sales at an early date and at bargain counter rates.

THE CHILDREN'S HOMŒOPATHIC HOSPITAL, PHILADELPHIA.—The Children's Homœopathic Hospital, of Philadelphia, has just elected three new resident physicians for the ensuing year, Dr. Herman A. Newbold, chief; Dr. H. C. Hunsicker and Dr. Frank Traganza, associates. Last year there were 22,997 applicants for relief at the various special clinics in the out-patient department and the resident physicians made 3,263 visits. 184 children were treated in the main wards. The institution recently received a legacy of \$15,000 from the late Walter Garrett, a patient of Dr. Bushrod W. James, and of Dr. M. D. Youngman when residing at Atlantic City. Mr. Garrett also left a legacy of \$50,000 to the Hahnemann Hospital, of Philadelphia.

DISTRUST.—William Jacobsohn, B. S. M. D., sends a letter to the *Medical Record* which is headed as follows: "How the value of antitoxin is distrusted by some of the very men that advocate its use." And he shows "how," too.

UNINTENTIONAL TRIBUTE SO SIMILIA.—The leading paper in *Medical Record*, May 11th, is "Morning Diarrhœa," by Dr. Francis Delafield, of New York. After mentioning the various drugs that have been used with not much success, he concludes with the following rather curious statement: "The drug which has given me the best result is castor oil in doses of from five to ten drops." Is not that very like *Similia Similibus Curantur*?

THE RECORDER is now in its tenth year with a larger subscription list than at any time in its history. But editors and publishers are never satisfied—the more subscribers they have the more they want. Why not let us enter *your* name?

PERSONAL

Dr. E. H. M. Sell has removed from 161 West Sixty-fourth to 137 West Ninety-fourth street, New York.

Neuralgia, sick headache, dyspepsia, biliousness, catarrh of the bowels, jaundice and stone in the bladder are caused by microbes, according to *Bacteriological Review*. The moon was probably full and there was a black cat on the fence when the discovery was made.

Antitoxin is now advertised to "strengthen the heart." Its free use will also strengthen the manufacturers pocket-book.

The beef combine has gone into the "animal extract" business.

Dr. Brookins has removed from Bluefield, West Va. to Barton, Fla.

Dr. Oliver B. Wait, New York Homœopathic Medical College, '94, has opened an office at 354 West Twenty-fourth street, New York City. Dr. Wait is the son of Dr. Phoebe Wait, one of the leading women physicians of New York.

Dr. Horace Porter Gillingham, has removed from 123 East Seventy-sixth street to 28 West Eighteenth street, New York City. Office hours: 9 to 11:30 A. M. and 7 to 8 P. M., Sundays, 9 to 10 A. M.

Dr. C. E. Babcock, formerly associated with Dr. Gillingham, has removed to Boonville, Oneida county, New York.

The one drug on the market that all men are ready to prove is money.

The bloom of the peach and the purple of the grape is but "a growth of microbes," says Dr. M. Duncan. What a tremendous number of mics we've downed in our brief hour!

"No one ever tells the truth," says the Circus Advertising Agent in *Printer's Ink*.

It would be better for every woman to have a voter than a vote.

Undertakers have resolved that hereafter they must be known as "morticians."

Dr. C. McV. Tobey will remove on June 1st from St. Paul, Minn., to 361 Columbus ave., Boston.

Medical Age asserts "that too many physicians treat the thermometer instead of the patient.

Dr. Unna, of Hamburg, warns stamp collectors of the danger from bacilli in their vocation. At which warning your true philatelist smiles.

Homœopathic editors and millionaires heave a sigh of relief over the decision of the Income Tax case.

You will never miss the dollar sent as a subscription to the HOMŒOPATHIC RECORDER. Good investment, too.

A three page leading editorial on the Dewey *Essential* books in *Medical News* and another in the *British Medical Journal* show that they have the stuff in them that go to make up noteworthy books.

The little *Bee Line* repertory seems to grow in popularity. So does Yingling's *Accoucheur's Emergency Manual*. The latter is a great book for the mother and the baby.

Dr. Harlyn Hitchcock, 19 Broadway, New York, has started *The Anti-Vaccination News*. 50 cents a year.

Be fashionable; go to Newport.

THE HOMŒOPATHIC RECORDER.

VOL. X. PHILADELPHIA AND LANCASTER, JULY, 1895. No. 7

NOTES ON SCHÜSSLER'S REMEDIES.

During the past four months I have been devoting some attention to the Twelve Tissue Remedies of Schüssler, the whole of which I have tested remedially. The book from which my information concerning them has been derived is the work of Drs. Boericke & Dewey, third edition. It is a remarkable book, worthy of the most careful study, and ought without a doubt to be in the possession of everyone practicing medicine. The authors are not only men of erudition, but also of untiring industry; for only such men could have produced such a book. There may be occasionally an obscure passage or a slip; but this may, perhaps, be said of every book. For instance, on page 90, when speaking of *Phosphate of Magnesia*, the authors say: "Cold in general favors its action exceedingly, whereas heat and pressure interfere with it. Hence the patient is relieved by these." This passage is rendered more obscure by the remark on page 95, that "Schüssler recommends the 6x trituration, and adds that *it acts best when given in hot water.*" Again, page 77, we have—"Tongue white, slimy, *brownish like mustard.*" In England mustard is always of a distinctly *yellow* color, whatever it may be in the States. I will, however, make no further criticism on such an excellent book as this.

The theory of Schüssler is briefly this—After the incineration of the body there remain in the ashes twelve inorganic salts: the living body needs no more for health and cannot be in health with less; health may be restored by supplying the deficient inorganic salt and no other medicine is needed. Thus the system deals a deadly blow to all extraneous drug administration. Perhaps it is a little unfortunate for the theory that there should happen to be just twelve of these inorganic salts, because it gives to the system the appearance of being artificial; of being

a merely whimsical selection of twelve polychrests. This is, however, not the case. No doubt most practitioners, certainly all students, will hope that the new system will prove equal to the anticipations of Dr. Schüssler, for it affords a simplicity of practice never before found. Instead of having to run over in one's mind some fifty or more of Homœopathic medicines with a bewildering assortment of attenuations, we have here to consider only twelve remedies and only a very limited range of attenuations. This must surely be a great relief. So simple and so compact is this system of practice that any sufficiently intelligent man, taken from any walk of life, might successfully treat disease by a thorough study of this book of Drs. Boericke & Dewey. Of course I hope there will be no rush of amateurs wishful to act upon this hint, and that the law will continue to protect us from such irreverent innovation of our sacred privileges. At the same time it can hardly be denied that (speaking outside of Homœopathy) a thorough knowledge of this book will make a man more successful in his treatment of disease than the most minute knowledge of anatomy, physiology, surgery, etc., will do without the book; for the knowledge of these subjects never did and never will give any clue to the treatment of disease.

When Schüssler says that his system is in no way related to Homœopathy, he no doubt means that it is independent of the rule of similars and perhaps it is so. But for all this there is a very close relationship in the mode of preparing the medicines, for both systems recognize the importance of dynamization. But if this new "Therapy" is independent of all provings, it is difficult to see how the co relationship between symptoms and remedies is established. As an illustration, we may take a few examples from the repertory :

"Mental aberrations : *Kali phos.* After effects of disappointment : *Calc. phos.* Angry and irritable : *Natr. mur.* Bitter taste : *Natr. sulph.* Grayish coating on tongue : *Kali mur.*"

It is not necessary to quote more examples. Over 3,000 symptoms are given with their appropriate remedies appended. So far as I have tested these recommendations they appear to be correct, for the medicines have done good. The wonder is how all this valuable information was obtained. The process of reasoning must have been very subtle, and therefore most creditable to the philosopher able to accomplish it. He may be able to repudiate all connection with Homœopathy, but one can-

not help thinking that had there been no Hahnemann there would have been no Schüssler.

Some of these twelve tissue remedies have long been in use. These are *Ferrum phos.*, *Natr. mur.*, *Calc. phos.*, and *Silicia*—all valuable medicines. This fact should impress us favorably with regard to the rest. Indeed their virtues are no longer doubted by those who have used them. The question which now arises is, are these twelve medicines the only ones required for the treatment of all diseases? To answer in the affirmative, as I suppose Dr. Schüssler does, is to make a large claim for them. At least it seems like a large claim to us who have so long been accustomed to a much greater variety. Are we to abandon our *Aconite*, *Bryonia*, *Nux vomica*, *Pulsatilla* and all the rest in favor of these twelve tissue remedies? I think to a great extent we may do so. But there are certain diseases in which I myself should be inclined to continue the use of the old remedies previously found so valuable. I refer to the zymotic diseases. If we turn to Schüssler's book we shall find two distinct zymotic diseases classed together and *one medicine recommended for both*. Thus—"The specific remedy for Typhus and Typhoid is *Kali phos.*" If we turn to Drs. Boericke & Dewey we shall find the two diseases correctly separated, but instead of one remedy being given as the specific for both diseases we find that there are *six* remedies for Typhoid and *five* for Typhus. This multiplicity of medicines (in fact, half the whole of Schüssler's twelve) throws a little doubt upon their *specific* value. In contrasting this with my own practice in the former of these diseases; *i. e.*, in Typhoid, I can show a better record. I have always succeeded in curing this disease with one medicine only, and that is not one of Schüssler's. No matter how varied the symptoms may be in individual cases this one remedy has cured them all.

If we turn to the section on whooping cough (Boericke & Dewey), we shall find more than half Schüssler's *Materia Medica* mentioned; selected according to symptoms. Now in this disease also I am in the habit of relying upon one medicine only, and that is not one of Schüssler's.

In scarlet fever and also in smallpox *seven* remedies are respectively mentioned. This seems to throw a doubt upon the specific value of any one of them.

In influenza, strange to say, only *one* medicine is mentioned and this is said to be specific. My own experience does not lead me to believe that one medicine only will meet every

epidemic of influenza. We have during the last few years had four epidemics of influenza, and I found that the specific for the first one was useless for the second, and that the specific for the second was useless for the third. The fourth epidemic resembled the first, and the same medicine used then was successful again. Thus we see that in influenza there is no uniformity of poison, no uniformity of symptoms and therefore no uniformity of specific. It is different with typhoid fever; here the poison must be tolerably uniform because, as far as my experience goes, it has always been cured by the same medicine.

Whilst on this subject, I may say that I think there is a *specific medicine* for each epidemic, and I do not think this specific need be a dynamized one. Indeed, I have never tried dynamic remedies for the epidemic or zymotic, diseases and there seems no reason why I should do so when the non-dynamized have proved so successful. Hahnemann himself has told us (in his "Lesser Writings") of his success with the latter.

In reading the book of Drs. Boericke & Dewey, we discover the interesting fact that our Homœopathic medicines—the vegetable ones—owe their efficacy to the inorganic salts which they contain. A table is given showing the analysis of several drugs and the salts they contain. The following drugs, *e.g.*, contain *Phosphate of Iron*; one of Schüssler's twelve—*China, Gelsem., Veratr., Acon., Arnica, Ail., Phytol., Berb. vulg., Rhus., Asaf., Viburn. and Secale*. Now if *Phosph. of Iron* will supply the place of these twelve drugs, our practice, as before stated, becomes much simplified. But we cannot go entirely on this line of prescribing, because some of the drugs contain other salts besides *Phosph. of Iron*. *Phytolacca, e.g.*, contains no less than eight of Schüssler's inorganic salts! So that whenever we prescribe this medicine we are resorting to polypharmacy with a vengeance; for we are giving a compound of eight different chemical salts. This information will be a great shock to some members of our profession, and they will doubtless lose no time in joining the ranks of the illustrious Schüssler, who gives only *one* salt at a time.

When speaking of zymotic diseases I should have remarked that as in these diseases we have a poison introduced into the system which has upset all the inorganic salts of the body. Should we not endeavor to find another poison (or extraneous salt) to neutralize the former rather than to rely upon the exhibition of *normal salts*, which have already proved them-

selves ineffectual to resist the poison producing the disease? This would be the most rational proceeding, for I cannot help thinking that in these cases Schüssler's remedies would only be the equivalent of what is called the *expectant* treatment—a great improvement upon the Allopathy no doubt, but still by no means the best that could be done.

I do not at present propose to give cases showing in detail the success of Schüssler's remedies; it will be now sufficient to say that I have found them answer the purposes indicated by the authors, Drs. Boericke & Dewey. Not the least valuable part of their excellent book is the *Repertory*, at the end. Whenever one is in doubt over the selection of a remedy let him look at this repertory.

G. HERRING.

475 Mile End Road, London, England.

THE STORY OF PROVERS WHO ASSISTED HAHNEMANN.

By Thomas Lindsley Bradford, M. D.

RUMMEL'S ACCOUNT OF HARTMANN, CONTINUED.

Praxis frequens sed non aures was the motto at Zschoppau. In order to perhaps gain the latter, Hartmann in November, 1826, removed to Leipsic. As is well known, it is more difficult to become known and sought after in a large city, and this is especially the case in Leipsic, where, owing to the University, there is a strong annual growth of young physicians, and the way to a good career is generally through serving as an assistant to a renowned physician. The pressure of patients was not of course very great in the beginning, cares were not small and Hartmann had sufficient leisure to satisfy his inclinations for writing. That which might have paid him for moving, the closer intercourse with friendly and sympathetic physicians, was not found in a very great degree. There was even then no lack of Homœopathic physicians in Leipsic, partly the immediate disciples of Hahnemann, partly new converts from the old school, and some of these came together, especially at the instigation of Haubold, in order to hold scientific discourses, while others isolated themselves. These meetings were the first be-

ginnings of the Leipsic Local Union, from which the Free Union, which still exists, developed.

Despite this union, however, there was no lack in Leipsic of petty quarrels and of tell-tales. Wherefore? I know not, and if I knew it might be better to cover the past with the mantle of charity. It seemed as if too much regard was paid not to others, but by each one to himself; it seemed as if one day the intercourse was too familiar, and as if on the next day every one loved too well to diplomatically dissect any "on dit" which was reported. I had much intercourse at that time with the Homœopaths of Leipsic, and found their mutual relations by no means amiable. It was the period of storm and trouble for the younger Homœopathy, and in Leipsic was its focus. Then there were discussions between Hahnemann and the Homœopaths of Leipsic, which were not unreasonably explained as being caused by the secret accusation of some one individual or another. This perverse state caused suspicion and distrust instead of a close union, and this affected one and another more or less disagreeably; but it touched Hartmann most severely because he was not able to rise above it, but shut up his annoyance within himself.

I made his acquaintance at this time, and this became a real friendship which lasted till his death. I found in him an amiable man, a thoughtful, industrious physician, a cheerful companion, but one who easily was put out of humor by any rumor repeated to him, or by arrogant behavior, and who would even be suspicious in case his friends wished to help him over such a trouble and conceal it from him (see elsewhere in the *Zeitung*). His irritability was not indeed sufficiently regarded by others, when booksellers who were his friends nevertheless published pamphlets containing personal attacks on him, and still less did fate spare him.

The preparations for the joyous jubilee of Hahnemann brought the Homœopaths nearer together. The celebration was the cause of the establishment of the Central Union and roused the thought of establishing the Homœopathic Hospital which Hahnemann so eagerly desired and which his friends also approved of, but which they did not desire to see hurried too much. But then the zeal of Schweickert spoiled everything; he urged a speedy commencement, and when by the restless efforts of the friends of the reformed therapeutics the hospital at last was near to its inauguration, he on whom they had reckoned to

fill the position of chief physician withdrew, and M. Muller and Hartmann were obliged to take upon themselves the difficult positions of chief physician and of assistant. They were *personæ ingratae* with Hahnemann, and he did not hesitate to proclaim this openly and so to make more difficult this doubtful undertaking, aye, to undermine it medically.

Hahnemann did not rest until Schweickert entered upon the office, which had hitherto been an unsalaried one, with a salary of 400 thalers, whereby the fund, originally small, was consumed all the more quickly. But this arrangement did not last. A few years later Schweickert suddenly left the hospital to its fate without having raised it to the flourishing state expected. Now followed the sad mistake of entrusting the position to a swindler who, when he was unmasked, could only escape a shameful dismissal by a prompt resignation.

Hartmann was now urgently requested to accept the vacant position of chief physician; and he did so after some delay, but laid it down again after two years. He was followed by Noack, after whose departure Hartmann again filled the position, and when the hospital, owing to its pecuniary difficulties, was changed into a polyclinic, he still, until his death, retained its direction as chief physician with the assistance at first of Dr. Cl. Muller only, later with the further assistance of Dr. V. Meyer.

I could not entirely omit this disagreeable story of the hospital because it is too closely connected with the life of our friend, and because from this very source most of his vexations arose. The direction of such an institution, difficult in itself, and which was rendered more difficult by the as yet imperfect development of Homœopathy, and the high demands made on the institution, the little forbearance shown to the persons co-operating in it, and the other circumstances mentioned above, would have been sufficient to break down a stronger vitality. Hartmann knew not how to oppose a bold front to rude arrogance, but withdrew annoyed into himself, and felt the wounds more deeply than they deserved. Would he not have been able to have avoided much vexation if he had definitely and forever refused to have anything to do with the hospital? He might, but the circumstances were such that he could not do this without making its continuance impossible, and without doing violence to the wishes of his friends and the cause of Homœopathy. There was simply no one willing to be chief physician, and yet

no one was willing to allow another to be so. Hartmann, besides, was less fitted for the public office of a clinical teacher than for the activity of a practicing physician and the great work of an author.

Let us then pass over to this branch of his activity which brought him many laurels, but was also not without its wounding thorns.

After his clinical reports in the *Archiv*, the first independent work was an article on *Nux vomica*, and when this found applause he worked out similar articles on *Chamomilla* and *Belladonna* for the *Archiv* and on *Pusatilla* and *Rhus tox.* for the *homoopathische Zeitung*.

Another little treatise on the use of *Aconite*, *Bryonia* and *Mercurius* in diseases (1835) is of a similar nature. *Dieting Directions to Everybody*, and *Diet for the Sick* were printed in 1830. He also edited nine editions of Caspari's *Family and Travelling Physician*, and revised and augmented the work. He did the same with *Caspari's Pocket Companion for the Newly Married*, and a Homœopathic Dispensary for the same; he also augmented this and edited it in the Latin tongue. His largest work, *Therapeutics of Acute Diseases*, first published in 1831, passed through three editions. In this he endeavored to facilitate the practice of Homœopathy for beginners, and to make it more accessible to physicians of the old school by adjoining to the collective names of pathology the therapeutic experiences and recommendations of the suitable remedies.

This form displeased Hahnemann, as he thought it was a concession to the old school. Nevertheless, this book has found a very wide dissemination and has most contributed to make known the name of Hartmann. With the same intention and in a similar manner, while already on his sick bed, he finished his work on children's diseases. Several of these writings, and especially the latter two, have been translated into French and English. How much of the annual publications of the hospital is due to him I cannot say. In the *Journal for Materia Medica*, published conjointly by Hartmann and Noack, he only elaborated *China* in his well-known manner, with especial regard to practice.

In the year 1832, I received a proposal from the publisher, Baumgartner, through a mutual acquaintance, to edit a Homœopathic Gazette. Despite the many opposing difficulties, I accepted the proposal, subject to the condition that suitable

co-editors should be found. As is well known, these were found in the late lamented Drs. Gross and Hartmann. Since none of us, except, perhaps, Gross, nor he when closely viewed, favored extreme views, the *Zeitung* had its prescribed course which it had to keep, and which it will also maintain in the future. Although the views of the editors were not the same in all particulars, nevertheless in the many years since the existence of the *Zeitung* no discordance has arisen, and differences of views were always quickly reconciled. Hartmann, at first, had charge of the critical department and attended to the reviews of various journals; but later he was glad to assign the post to others, and contented himself with furnishing shorter notices, practical miscellanies, reports, especially those of the "Central Union," of which he was a diligent attendant, with arranging the matter for the press, and with the internal ordering of the *Zeitung*.

Besides the articles on *Pulsatilla* and *Rhus* which have been already mentioned, we would especially mention among his more lengthy contributions: "Concerning Hahnemann's Life," "Concerning the Sufficiency of Homœopathy," "Events," and the necrologies of his friends, M. Muller and Wahle, and "Review of the Past Year of this Gazette."

I will not leave unmentioned the fact that he wrote a small neat hand, and that his manuscripts were written very clearly, without many corrections, at once ready for the printer; his style was correct, though sometimes somewhat rambling.

Outside of his occupation as clinical director of the Homœopathic Hospital and his above-mentioned literary work, he attended to his extensive private practice with untiring energy. Cheerful, even if not free from care, he lived in his family circle, which was devoted to him, often visited and requested for information by many strange physicians, who visited Leipsic as a cosmopolitan city and as the cradle of Homœopathy. His more intimate acquaintances celebrated on the 29th of March, 1844, a jubilee in memory of the twenty-fifth year of his doctorate. During the year 1836 he filled the honorary position of president of the Central Union. The "Societe Gallicane," the "Homœopathic Medical College of Pennsylvania," the "Academia Omiopatica di Palermo," the "Irish Homœopathic Society," and the "Society of Physiological Materia Medica," elected him a member.

Gradually complaints of the liver, the chest and the heart

showed themselves, and finally he was afflicted with a painful degeneration of the legs, resembling elephantiasis, which for years confined him to his room, and to his chair, without quite interrupting his activity until this was finally ended by death, which released him from his sufferings at 9 A. M. on the 10th of October, 1853.

In one of the necrologies written by him he expressed the wish that his biographer might be able to say of him as he did of the departed: "Thou hast faithfully accomplished thy life-work," and I am able to say this with a full heart and surely with the concurrence of all who intimately knew him and loved him.

RUMMEL.

We are greatly indebted to Hartmann for the knowledge we now possess of the first provings by the little family of provers. He commenced in the *Allgemeine homœopathische Zeitung* for February 25th, 1850, a series of articles, entitled: "My Experiences and Observations About Homœopathy." These articles ran through six numbers of Vol. 38, and two numbers of Vol. 39 of this journal.*

Interesting data concerning Hahnemann's life may be found in Hartmann's "*Aus Hahnemann's Leben*," in the *Zeitung*, Vol. xxvi.

Hartmann not only gives us a very good idea of the home life of the great master, but of the personality of the favorite students and provers. He says:† Our Old Provers' Union consisted of Stapf, Gross, Hornburg, Franz, Wislicenus, Teuthorn, Herrmann, Ruckert, Langhammer and myself.

Speaking of the persecutions to which the students were subjected, he says: My career was interrupted in a similar manner. I had long before announced myself to the then Dean of the Medical Faculty, Counsellor Rosenmuller, Professor of Anatomy, as foreign candidate for a higher degree. To my great misfortune this celebrated man soon died. I did not suppose a second announcement to be necessary, as I thought that the duties of the Dean were all laid down and exactly performed, and that connected to them was an accurate report of all events pertaining to the Medical Faculty. Although it was

*Translations in *N. W. Jour. Hom.*, Vol. iv., p. 158. *Med. Counselor*, Vol. xi., p. 196, etc. Also Kleinert's *Geschichte der Homœopathie*, p. 96.

†Kleinert, p. 97. *Allg. hom. Zeitung*, Vol. xxxviii., p. 308. *N. W. Jour. Hom.*, Vol. iv., p. 184. *Med. Counselor*, Vol. xi., p. 238. *Brit. Jour. Hom.*, Vol. xxxii., p. 453.

clearly my interest to inquire whether my wish had been made known to the new Dean, yet I did not fully realize the importance of having this obstacle removed, as I found myself engaged in a practice by no means unprofitable, and with youthful presumption and carelessness did not even suppose that an obstacle could be laid in my way.

But with all the caution which I exercised in my practice, the then second surgeon at Jacob's Hospital, Dr. Kohlrusch (a man who occupied the place merely on account of his skill as an operator, but devoid of any further scientific education), discovered that I attended one of his patients, and lost no time in forwarding to the President of the faculty a packet of my powders and to accuse me before this court, so bitterly opposed to all Homœopathsists. The latter did not allow the affair to rest a long time; I was summoned before Clarus, overwhelmed with reproaches and threatened with the severest punishment if I dared to practice again before the Counsellor ordered my examination. I confess I found myself in an unpleasant position; I should have been glad if my examination had been held the next day, for I had studied diligently and felt confident of my readiness; however, I must wait until this gentleman was pleased to call for me, and in the meantime I could earn nothing. My situation was soon decided by the Secretary of the Faculty, who was friendly to me; he dissuaded me from being examined at Leipsic, as I should fail in spite of all my knowledge and then my hope of being examined at Dresden would be frustrated.

The prospect was not very flattering; on the one hand, my youthful presumption urged me to brave the danger; on the other, my better judgment assured me that I, a single person, could by no means withstand the malicious power arrayed against me, that I should exert my strength to no purpose and that a certain overthrow awaited me. Affairs being in such a condition, no other resource seemed left to me than to seek another University.

On the first of January, 1821, I left Leipsic in order to enter upon my course in Berlin, and to become a citizen of Prussia. I supposed the law of 1817-1818 still in force, according to which candidates could present their applications to the ministry by the end of April. I, therefore, was in no particular haste to do this, but studied diligently in order to pass my examination with *eclat*. Early in January I was very much surprised one morning by the arrival of Dr. Stapf, from Naumburg, who came for

the same purpose, having been commissioned by the Prussian Minister of War to examine the so-called Egyptian ophthalmia prevailing among the Prussian troops upon the Rhine, and see what could be done with Homœopathic remedies to check its progress. Thus commissioned he came to Berlin to receive further instructions. He improved this opportunity to find me and to propose that I should accompany him, which proposition I would have gladly accepted, as it would have been without expense, had it not been that it would have disarranged my plans in coming to Berlin, for a whole year. It was, therefore, necessary to entirely refuse the friendly offer, however painful it might be, and my refusal was quite as painful to Stapf, since he had no assistance but that of a novice in Homœopathy, a Russian not yet proficient, Peterson, I think, was his name.

The invitation had turned my head a little and I went about, half dreaming, till a few days later, after mature reflection and examination, I fully resolved to accept it, and I was the more induced to this resolution from having learned in the meantime that the application for permission to make a state examination could only be handed in early in November of each year. Stapf had already departed, so this, my resolution, came too late, and I found myself deceived in my other expectations; yet to leave nothing untried, I presented my application in the latter part of January, in reply to which I received, early in February, a refusal for that year. Immediately upon its reception I packed up and returned to my parents at Delitsch, only to bury my father six days, and my mother six weeks, after my arrival at home; an afflictive event in every view of the case since I found myself thus suddenly thrust out upon the world entirely alone, and was, moreover, thrown back quite a half year by the necessary arrangement of the little estate left by my parents. Yet I could not but rejoice that I had been led to refuse the journey with Stapf, and consider it was the hand of Providence which thus gave to me alone, of three living brothers, the privilege of being with my excellent parents in their last hours and of closing their eyes. It is unfortunate when an obstacle of any kind is allowed to hinder the studies of a young man; if some excitement from another direction does not remove the obstacle he is but too apt to sink into a gloomy *far niente*, which readily degenerates into idleness, an error from which I should not have been kept had I not found myself irresistibly

urged on by the solemn warning : Labor, if thou wouldst insure thy future success.

I had a few patients to treat, and being a single man they brought me in a sufficient income; but my position in Prussia was then too precarious, since I had no right to practice, and it was only through the kindness and indulgence of the circuit physician of that place that no notice was taken of me. After I had settled the most pressing affairs, I repaired to Stapf, at Naumburg, to advise with him relative to my further course. Many places were brought to my notice and refused again, as various hindrances offered which could not be removed. After a long and fruitless search, Stapf found a market town near to Neustadt on the Oder (I forget the name), the Justice of which was very friendly to him and to whom he earnestly recommended me. From the Justice I learned that the Medical Examining Board of this little place did not look with a favorable eye upon any stranger who came thither to favor it with his medical knowledge, and that hence it rarely happened that any one succeeded in an examination. My affairs in this place were therefore soon settled, and I retraced my steps as soon as possible to Naumburg, and soon resolved to pass my examination in Dresden, and to settle in Zschopau, in the Saxon Harz Mountains, which had been represented to me a friendly place and in need of a physician.

Hartmann now relates that he only remained in Zschopau five years, when he was obliged to go to Leipsic, on account of the poverty of the inhabitants. He also relates some anecdotes relating to Frederick Hahnemann, who practiced for a time in the neighborhood of Zschopau.

Hahnemann here got into trouble with the authorities, and Hartmann continues : Frederick Hahnemann's course showed me negatively what course to pursue in this little city in the mountains in order to be on good terms with both parties, the profession and the laity. Had not my method of treatment been suspected in the first few weeks of my practice and very soon recognized as Hahnemannian, I should not have found it necessary to conceal it, or in various ways to hide my true sentiments, so that I might not be taken for a Homœopath, at least, in the beginning of my career, as this would have been attended with many unpleasant circumstances. My remarkable cures soon gained for me a great reputation, but, from this poor manufacturing country, little profit. Afterwards I made no secret of my

method of cure, and I remained undisturbed during my residence at Zschopau.

It was soon after settling at this place that Stapf, Gross and Muller commenced to publish the *Archives** whose numbers soon found their way into my hands. I was deeply interested in this journal and influenced by a desire to become capable of contributing to its pages; it excited me powerfully, not only to renewed diligence in my practice, but to increased efforts for literary acquirements. However the matter went no further than a good intention, since my courage failed me and my time was so much taken up by my overwhelming daily labors that in the evening, when half dead, I had little energy for any labor. Thus my early desires would probably have never amounted to anything more than earnest desires nor ever have been realized had I not soon after received from my friend Stapf a kind letter containing a request that I should enter into their association and take part in their labors. My first effort was the communication of a case treated by me, which, however, gave me but little satisfaction, as it seemed to me that, considering the condition of Homœopathy, others could obtain but little advantage from it. I felt deeply that there must be some other, some better way to aid beginners at their entrance into Homœopathy, for it seemed to me that these few isolated cases afforded but little aid to them. However, a beginning is ever beset with difficulty, and a beginning must be made, though it might appear imperfect in its first rudiments.

The idea was present with me by day and night, and yet I could never satisfy myself with any plan till a happy circumstance dispelled my irresolution. I had been frequently consulted by letter by a fellow of the College of Health of Dresden in reference to a patient, and the Homœopathic treatment pursued proved successful; the favorable result had encouraged a young physician in Dresden and incited him to make a trial of Homœopathy; at the same time he made the acquaintance of Dr. Trinks, who had previously become somewhat acquainted with Homœopathy, and they both wished to confer with me on the subject in person, since our epistolary communications in which we had previously engaged proved unsatisfactory and took too much time. These communications passed mostly between a mutual friend, through whom we also agreed to meet at Freiburg, to which I was all the more willing, as it

**Archiv für die homœopathische Heilkunst.*

enabled me to make a visit to a patient—a noble lady—which I could no longer defer. There it was that Trinks, Wolf and I met in the year 1824, and after a friendly supper became so absorbed in discussing Homœopathy, and especially the *Materia Medica*, that the breaking day surprised us in our conference, and nature was constrained to consider our sleep for this night as accomplished.

This was the occasion upon which my ideas assumed a form which ever after possessed me more fully, but which was not realized and brought to a full accomplishment till after the lapse of some years, partly from the want of sufficiently ample experience and partly from the necessity of my engaging in an extensive course of study. It was Wolf who, provided with the four volumes of Hahnemann's *Materia Medica*, so closely plied me with questions about the effect of remedies in various diseases, distinguished by their collective names, that for the first time their effects assumed a distinct form, and I learned rightly to appreciate the single symptoms since I formed in my own mind an exact connection for each separate disease characterized by a general name, and thus learned to comprehend with more precision and promptitude the general character of each particular drug. Hence I am to this day under great obligations both to Wolf and Trinks, since I am indebted to them for marking out the way for the future Homœopathic Therapeutics, to the study of which I devoted my leisure moments for years.

Some time after this meeting I received a visit during the summer from Dr. Moritz Muller, of Leipsic, whose acquaintance I then made for the first time. He communicated to me everything referring to Homœopathy in the most concise manner, since his stay at Zschopau was very brief. He said that a new project was entertained by many Homœopaths, which was first broached by Hartlaub, sen., and with which Wolf and Trinks had expressed themselves as much pleased. It was a plan to form a society of corresponding physicians, who should, from time to time, communicate their practical experience as well as anything else pertaining to Homœopathy to the Secretary of the Society (Dr. Hartlaub, sen.), who should then print them in numbers at the expense of the contributors, amongst whom the numbers were to be distributed. From what has already been said, it was evident that Homœopathy had entered upon its first transition stage, through which, aroused from its infancy,

it must necessarily pass since it already presented indications of a more active life, which should be directed to a more rapid development and more extensive acquisition. amongst which, in particular, the cultivation of the collateral branches was to be reckoned. Time has demonstrated the justice of this view, since from that period Homœopathy advanced with the strides of a giant both at home and abroad.

In November, 1826, I left Zschopau and went to Leipsic, where I began a new career. During the first years of my residence there I had to struggle with many difficulties, for the throng of patients to the physicians with which Leipsic was already abundantly supplied was not very great, and I had plenty of leisure which I devoted to the preparation of my first work: "Upon the use of Homœopathy in Diseases, in Accordance With Homœopathic Principles," and other essays which appeared in the *Archives*. The critics were in these days lenient and forbearing towards works of this character, for they appeared none too often; and hence they always met a friendly welcome in the domain of Homœopathy, that other capable minds might be encouraged and spurred up publicly to unfold the powers of their minds. Some, and indeed many, would now hardly be worth printing, but then we learned something from every article, since everything was new to us, even those things which at this day have become notorious.

On this account we owe the critics thanks for the consideration with which they treated these efforts, never destroying but always encouraging new attempts, which thus brought a rich harvest to Homœopathy, which we certainly could not have expected had the unsparing critics of the present time held sway. Hence I cannot assert that my little work had any particular merit; but of this much I am certain, that the delight with which I heard it praised excited me with increased diligence to engage incessantly in literary labors, which, with my constantly increasing practice, left me little rest.

The first two years offered nothing of interest as far as Homœopathy was concerned, although they were memorable to me from having made the acquaintance of many of the elder Homœopathic physicians, among whom I may mention Rummel and Schweickert. The former took complete possession of me by his "Lights and Shadows of Homœopathy," after reading which it was my great desire to make his acquaintance.

With the latter I became acquainted at a consultation and

esteemed him as a learned man; but I never felt myself drawn towards him, and the future gave me manifold proofs that he often interfered in an unfriendly manner with my affairs; in a word, we never seemed to be at the same pole, which was not altogether his fault, but partly mine, to which my timid retiring within myself before a determined and imposing bearing undoubtedly contributed. At the same time he was not always forbearing towards the frailties of others and often lordly, despotic and even intriguing, which will be apparent in the course of this narrative.

It was Dr. Haubold, a recent convert to Homœopathy, and one who was constrained by his own experience to acknowledge the falsity of the assertion made by many of our Allopathic colleagues, that it was an easy matter to acquire the Homœopathic method of treatment; it was Dr. Haubold, I say, to whom the inquiry suggested itself, whether it would not be of advantage to Homœopathists to assemble occasionally in order to consult together regarding the new doctrine and to submit important interests connected therewith, difficult cases, diseases, etc., to each other's judgment. The proposal seemed to me a good one, though Haubold himself surely will not deny that his own interest suggested it to his mind, since Hornburg and Franz particularly, whom he wished invited besides me, had already acquired great skill in the practice of Homœopathy. Be that as it may, the object was a good one, and we all felt in the course of time that the meetings were attended with no little profit even to us elder Homœopathists.

But as it always happens with such enterprises, there were many to look kindly upon it, whom it was, nevertheless, difficult to get together; thus our first meeting, in the commencement of the year 1829, consisted of the four already mentioned, who came together upon a formal invitation from Haubold. We were not long, however, in convincing ourselves that we were mutually profited by these meetings; after that no formal invitations were necessary, but we found ourselves—I think it was every fortnight—at the appointed day and hour, now with this, now with that one, for the purpose of living a few hours for science. Thus we went quietly on till July, when the late Dr. Müller received intelligence of our meetings and wished to take part in them, in which we all most cheerfully acquiesced and received him by acclamation. At this time we held our meetings every month; but as Hahnemann's Doctor's Jubilee was to

be celebrated on the 10th of the next month a special meeting was appointed a few days before that date, at which many matters of importance were proposed and agreed upon for the coming festivity. The events of this festive day are already so well known through Stapf's *Archives* that they need not be detailed here; but the remembrance of those events substantiates the assertion already made, that the previous year prepared the way for important changes in Homœopathy, since at this meeting the suggestion advanced by our friend, Dr. Franz, since deceased, was accepted and matured, to establish a great and general union, which should meet every year on the 10th day of August, and consult upon the interests of Homœopathy and the best manner of advancing these interests at home and abroad. This thought could not certainly have been discussed with much interest had not we Leipsic physicians already learned how profitable such meetings were. The Union still exists under the name of the Central Union, and its meetings would be larger than they have recently been were it not that their usefulness had been questioned in several quarters. I am ready to acknowledge that the written essays which are there presented may not always be as useful as their various authors intended; it is also true that we soon after find the same essays in the Homœopathic journals, and on this account many avoid the expense of a journey to the place of meeting, which is often distant; but the assertion that oral discussions upon the points of Homœopathy, which are not yet sufficiently settled, would be much more advantageous is not so very evident, for in these discussions only those would take part who are gifted with fluency of speech, while others, quite as learned perhaps, and able to render good service with their pen, but not favored with these shining talents, are compelled to withhold their views. At such meetings there should be one or more secretaries, who should report the proceedings carefully and superintend their publication. But there are other objects to be gained by these meetings which are highly desirable and afford great pleasure—it is the forming a personal acquaintance with advocates of the same faith and actuated by the same spirit. This is an advantage which I have always highly prized, and men whom I have already known by their literary works either become invested with a new interest or are more estranged from me, since the personal bearing but too often carries the imprint of truth or falsehood, and by the aid of this I have often been able to deduce

the sterling qualities or the deception, the boasting, the eccentricities, etc., from the printed essays, and from mature experience I have but seldom erred. The advantage is great, and I have secretly made an apology and reparation to many whose writings filled me with distrust, when their personal bearing and a better acquaintance with them, and their frank, open, straightforward and honorable views firmly convinced me of their worth, which, without a personal acquaintance, I could never have been brought to acknowledge.

In an obituary notice of Franz Hartmann published soon after his death occurs the following :* Dr. Franz Hartmann, one of the earliest and most zealous pupils of Hahnemann, died at Leipzig on the 10th of October, 1853. He was born on the 18th of May, 1796, consequently not very old when taken away from his mourning family and friends. His constitution had been naturally feeble, indeed it was a wonder how the venerable patient kept such a weak organization alive. He had labored for years under hydro-thorax, but by a most careful and discriminating selection of the Homœopathic remedies he kept the enemy at bay from time to time, and when he had thus succeeded the face of the kind old gentleman would light up with a cheerful smile. Once when the writer of this visited him in 1848, Hartmann just then, having recovered from such an attack, indulged even in a pleasant joke at the cost of Prof. E. C. Bock, the celebrated leader of the pathological school in Leipzig, whom he (Hartmann) had deprived, as he jocularly remarked, of an autopsy. Bock, having pronounced Hartmann's disease incurable, had fixed the day of his death with a coolness and certainty of result that aroused Hartmann's most intense energy. From that moment, continued Hartmann, I was determined to cheat Bock of his post-mortem examination and cold diagnostic triumph ; I began to study closer than ever my own symptoms, took the remedies, and now you see me comparatively restored, although I should have died from suffocation a fortnight ago according to Bock.

In an article in the *British Journal* the author says :† For eight years before his death he was almost entirely confined to his room by a wasting disease that caused his legs to swell and exude. When we visited him in 1850 and 1851 he was emaciated to a skeleton, and a martyr to the most agonizing suf-

**Quarterly Hom. Magazine*, April, 1854, p. 47.

†*Brit. Jour. Hom.*, Vol. xii., p. 159.

ferings ; but still he continued to labor at his literary work, by which alone he could support his family. He loved nothing better than to hear of the progress of Homœopathy, and manifested the most eager interest in everything relating to its external and internal development. Disease and pain had produced an appearance of premature old age on his features—he looked at least twenty years older than he was ; but his eye still sparkled with all the fire of youth when he was engaged in an animated discussion on some practical or theoretical point connected with Homœopathy, and his mind was as clear and his intellect as vigorous as it had been in his best days. He seemed to forget his sufferings, and the *res angustæ domi* they occasioned in the constant literary labors in which he was engaged.

He has left behind him a widow and four children to deplore his loss. His oldest son is settled among us at Norwich, where he enjoys the confidence of a large clientele. A few weeks before his death we received from Dr. Hartmann a long and cheerful letter, wherein he mentioned, *inter alia*, that it was proposed to hold a meeting of the Central German Society for 1855, the centenary year of Hahnemann's birth, at Dresden, and thence to make a pilgrimage to his birth-place, Meissen. How many of Hahnemann's immediate disciples will remain to muster at his birth-place on his rooth birthday ?

Dr. Lorabacher says of Hartmann :* A simple, ingenious, practical man. With no desire to shine or put himself prominently forward, he endeavored to promote the new doctrine of whose truth he was convinced by continuous earnest work. The proofs of this are his provings, whereby our *Materia Medica* has been enriched by a considerable number of reliable symptoms, as also his literary activity which was directed to the publication of large works, among which we may mention his *Therapie*, to the writing of articles in the *Archiv* and *Allgemeine hom. Zeitung*, to the editing of the last named periodical, which he undertook at first in connection with Gross and Rummel, and subsequently carried on with the latter to the end of his life.

Of Hahnemann's earliest disciples he was the only one who after the first enthusiasm had evaporated permitted himself to assume, to a certain degree, a critical attitude, and did not shrink from opposing some of Hahnemann's views, whereby he latterly incurred the anger of the founder of Homœopathy. His amiability, his open, honest character, gained him many true

**Brit. Jour. Hom.*, Vol. xxxii., p. 455.

friends, who were a great consolation to him under the many misconceptions and hateful enmities by which he was assailed. I gratefully recall the friendliness with which he received me, when I came to Leipsic in 1845 to study Homœopathy, and with which he assisted me in my studies.

WRITINGS.

Dietetics for Everybody, presented according to Homœopathic Principles. Leipsic. Hauck. 1830.

Dietetics for the Sick who subject themselves to Homœopathic Treatment. Dresden. Arnold. 1830.

Practical Experience in the Domain of Homœopathy. Part I. The Use of *Nux vomica* in Diseases, according to Homœopathic Principles. Leipsic. Wœeller. 1828.

Part II. The Use of the Medicines, *Aconitum napellus*, *Bryonia alba* and *Mercurius* according to Homœopathic Principles. Leipsic. Hartknoch. 1835. Translated by Okie. Phila. Dobson. 1841.

Therapy of Acute Diseases elaborated according to Homœopathic Principles. Two Vols. Leipsic. Schumann. 1831-32.

The same. Second edition. Leipsic. Schumann. 1834.

Special Therapy of Acute and Chronic Diseases according to Homœopathic Principles. Third rev. enlarged edition. Leipsic. T. O. Weigel. 1846-55. Three vols. American translation, New York. Radde. 1847. Hempel.

Spanish translation of same. Translated into French by A. Jourdan and from the French by Pio Hernandez y Espeso. Madrid. Vol. I part 1, 1850.

French translation of the Homœopathic Therapeutics of Children's Diseases. Translated from the German, with notes by Leon Simon. Paris. 1853.

The Same. Translated into Spanish from the German. Madrid. 1853.

The Same. Translated into Spanish under the direction of Migue Valero. Madrid. Julian Pena. 1853.

Co-editor of *Allgemeine homœopathische Zeitung*, 1832-53. Editor of *Caspari's Domestic Physician*, *Pocket Companion for Newly Married Homœopathic Pharmacopœia*.

Co-editor *Year Book of the Homœopathic Hospital at Leipsic*. 1833-34. *Journal für hom. Arzneimittellehre*. Leipsic. 1839.

Diseases of Children and their Treatment according to the Homœopathic System. Leipsic. T. C. Weigel. 1852. Translated by Hempel. New York Radde. 1853.

GRAPHITES.

By Dr. Hirsch in Prague.

Translated for the HOMŒOPATHIC RECORDER.

There is hardly a doubt that since the appearance of the excellent monograph on *Graphites* by *Goullon jun.*, the attention of homœopathic practitioners has been more pointedly than before drawn to this medicine. It is very desirable that our whole *Materia Medica* may be worked over in this way, even if the work should be of only a *temporary* use; for its value would be much increased, as it would become much more comprehensible and accessible to the practitioner; for it must be granted on the other hand that Hahnemann's *Materia Medica Pura*, valuable as its original text remains owing to its dry monotonous enumeration of symptoms, by no means acts on the beginner in an enticing, encouraging manner, and it gives to the opponent who criticises with intentional or unintentional superficiality, occasion for mockery and abuse.

If we should work with united forces we could within a year be in possession of a *Materia Medica* which, taking modern science into account more fully, would unfold the real kernel of the physiological action of drugs, would quite essentially and advantageously facilitate the study of Homœopathic pharmacodynamics, and the more surely attract many of the quondam opponents and transform them into zealous adherents of Homœopathy. HAHNEMANN'S *Materia Medica* come from a time when the sciences subsidiary to medicine were on a much lower level than at present, while some of them were not even in existence as yet. We need not therefore wonder that we find somewhat of childhood's language in its text, the language of a talkative child, many words requiring very troublesome studies to find out the deeper meaning, significance and connection. The physiological re-proving of the medicines which will keep in view in every respect the standpoint of the science of to-day is a very praiseworthy undertaking of much promise, but years and years will pass before this task, if it should be thoroughly done, can be accomplished in its greater extent. But in the meantime, without being at all modest, we would be perfectly content with an elaboration of all the proved drugs in the manner in which we have it before us with respect to *Graphites*, *Zincum*, *Phosphorus*, etc. At the same time by this work the construction of the *new* *Materia Medica*, which can only be

expected after the lapse of some years, would be considerably helped forward, as a very useful preparatory work would thus be accomplished and much valuable material collected for it.

And now we shall proceed to give account of some cures effected within the last two years by means of *Graphites*, and we may also incidentally have occasion to consider quite a peculiar experience with reference to the size of doses.

A young married lady of twenty-eight years, through many objective morbid phenomena since her childhood, had plainly shown a lymphatic constitution. At one time it was a blepharadenitis, then an obstinate eczema in the axilla, then a long continued soreness and ulceration of the nostrils, all symptoms of a morbid constitution of the blood; these ailments the corresponding homœopathic medicines were always able to remove and usually in a comparatively short time; but they did not succeed in preventing their return in an ever changing form. In the month of September, 1873, she had an eruption of vesicles behind the right ear with itching, burning and soon after with moisture. First *Staphisagria* 6, twice a day, one drop on sugar of milk, was used; my choice fell upon this medicine, firstly, of course, on account of the perfect similarity of its symptoms to the image of the disease, and secondly, because in a blepharadenitis two month before. I was chiefly indebted to *Staphisagria* for the rapid and successful issue, so that this drug seemed particularly to suit her individual constitution. This time, however, I found myself radically disappointed in my expectations.

When I came to see the patient two days later I found a very considerable aggravation, as the eczematous spots had manifestly increased in size and she complained much of the troublesome itching, burning and moisture. Neither waiting for several days without remedy, nor the following exhibition of *Graphites* 3, *Hepar* 3, morning and evening, in doses as large as a pea, were able to stop the eczematous disorder. This advanced so rapidly that it really looked as if the whole of the external ear would next drop off. Excited by this lack of success, I again very thoroughly examined the medicines among which the choice would have to be made, and it was always *Graphites* which seemed proximately indicated. Beside the fact that the location and the form of the process of the disease plainly pointed to it, there was also the symptom of a scanty, frequently retarding, sometimes even painful menstruation. And yet

Graphites 3 had been given for some time without any result. Then I recalled, quite accidentally, a similar case which I had published some twenty years before in the *Allg. Hom. Zeitung*. This concerned a little boy, whose parents had been induced by a previous ineffectual Allopathic treatment of several months to seek the aid of a Homœopathic physician. A considerable very moist eczema behind the ear, the flowing secretion of which kept the skin of the neck for some distance in an erythematic excitation, caused nameless torment to the child by its intense itching and much disturbed its nightly rest. Also in its case, neither *Rhus* 6 nor *Hepar* 3 nor *Graphites* 3 would give the desired help, and only when after resting a few days I gave the little patient a dose of *Graphites* 30 and provided him for the following days with unmedicated powders. I soon heard the most gratifying reports, and it needed neither a repetition of this remedy nor the addition of any other to perfectly free the patient in a few weeks from his ailment. The remembrance of this case induced me to proceed quite in the same way in this case. To avoid any deception and to prevent the after-effects of the last medicines given from being ascribed to the curative effect of the higher dilution, the patient received a bottle containing one drachm of pellets, moistened merely with pure alcohol, of which she took some morning and evening, and after ten days the eczema, if not worse, was anyway no better. Now I gave one powder moistened with *Graphites* 30, which I followed up for some days by unmedicated powders, and when these had come to an end in eight days I again visited the patient. In the place where the violently humid eczema had been there was an almost quite normally organized skin of pale-red color, and I was further informed that the cure had commenced to advance with giant strides from the third day. After a few weeks I advised the patient, who was altogether free from her ailment and in the best health, to take some of the numbered powders to avoid a possible relapse, and now nine months have elapsed since the perfect cure of the eczema without the slightest sign of the return of the same or any similar disorder. I therefore believe that I may hope that the dyscrasic constitution of the blood, if not already quite removed, has at least been manifestly favorably changed; as formerly hardly ever two months passed without the breaking out of one or the other ailment belonging to the same category.

In my medical diary of the same year I find also a case of a sore lip, the cure of which was effected, after using various other medicines in vain for several weeks, through some doses of *Graphites* 24, given every three days. The patient thus afflicted was an unmarried lady of forty years, who had for the first time menstruated in her *thirtieth* year. The constitution of the patient was feeble and delicate, her complexion brunette, her disposition very irritable and sensitive, and she was disposed to gloomy moods. Frequent congestions to the head and to the organs of the chest were the natural consequences of the great delay in the appearance of her menstruation. Allopaths and Homœopaths had labored in vain for years to effect this flow, a manual investigation having shown that there was no mechanical impediment to the discharge. These efforts had been given up for several years, when one day quite unexpectedly the long desired guest was present, and since this time the menses had appeared pretty punctually and painless, but rather scanty. In the month of August, 1873, the lady began to complain of a very troublesome dryness of the lips; this obliged her to continually moisten her lips with her tongue. After several domestic remedies had been used for fourteen days and the result had been anything but favorable; on the contrary, a painful burning of the lips, a constant parched state, and chapping of the same had been added, my medical aid was called for. I found that, while the patient was otherwise entirely well, the visible pathological process was limited to the epidermal cells, in which the nutrition was evidently deficient; the epithelial integument of the bucal cavity showed quite a normal constitution. The trouble was doubtlessly owing to the little glands of the lips, which, as anatomy teaches us, are grouped together and situated in the bucal cavity in closest proximity to the red puffs of the lips; these glands were the cause as well of the objective as of the subjective symptoms of the lips, and they drew the capillaries and the lymphatics there as well as the very sensitive terminal club shaped fibres of the nerves of the lips into sympathetic suffering. The lips looked as they do with those sick of a severe typhoid fever. They were of a dark-brown color, parched, shriveled, here and there cracked open, and there was particularly an intense burning pain, of which the patient especially complained and to which was added, when she would draw together her lips in laughter, a very painful tension; traces of blood then also appeared on the freshly cracked lip. I used

Arsenicum and *Nitri acidum* in low and in high dilutions, but without success; but when *Graphites* 24 was given, with two days' intermission between the doses, a noticeable improvement appeared, as well with reference to the painful sensations as to the appearance of the lips, and the medicine being continued at longer intervals the cure was completed in a few weeks.

As in the above-mentioned case, the repetition, not too frequent, of the 24th attenuation seemed to be perfectly sufficient; so the same mode of dosing sufficed in certain anomalies of menstruation of delicate, rather nervous constitutions, and especially in youthful individuals, while in constitutions which were more of a spongy, gastric nature, with quiet disposition, not easily excitable, I was obliged to take my refuge to the 3d trituration, giving a dose as large as a pea, morning and evening; but then I could calculate on a favorable result with all the greater certainty. As to the character of the menstrual anomalies cured by *Graphites*, these manifest themselves, not only in the internal, but also in the external phenomena by very peculiar variations from the normal course. As to the internal changes, physiology teaches that during menstruation the uterus, as well as the ovaries, experience an increased inflow of blood, an appreciable increase in volume, a loosening of the substance, when from the expanded capillaries of the mucous membrane a flow of blood ensues by the bursting of their walls and at the same time one of the little eggs is detached, which, by a very deliberate journey lasting several days, arrives through the Fallopian tubes in the cavity of the uterus. This physiological process ought always to proceed without pain, which is, however, not at all the case in the anomalies of menstruation to which *Graphites* is adapted; for in consequence of the rush of blood to the ovaries and the uterus there is caused a considerably increased sensibility of the nerves which ramify from the plexus hypogastricus and spermaticus, causing the most violent pain and many reflex phenomena.

As to the external, exclusively objective phenomena of menstruation, it differs from the normal in so far as it comes to its outbreak somewhat retarded, and secondly, it discharges, under a continuance of urging labor-like pains, a less quantity of blood than the normal and of a paler color. We can hardly fail in attributing the delayed and essentially diminished flow of menstrual blood to the anomalous contractive activity of the muscular fibres around the neck of the uterus, as also in

attributing the headache which usually accompanies the entire complex of symptoms just mentioned to the irregular, scanty flow of the menses; this is the more certain in full-blooded individuals with an easily excited vascular system.

When in corpulent women the symptoms of abdominal plethora are plainly manifested, and with painful menstruation little, but dark blood is discharged, *Graphites*, which I gave as an experiment, both in high and low potencies, was of no use at all; *Sulphur* 15, however, given every evening, was all the more efficient.

This is a clear indication as to the exactness with which we must proceed in the selection of medicines, but such precision bears fruits which amply reward.

DEATH BY THE STING OF A BEE.

The *Journal du Jura* (of Bienne, Switzerland), of the 13th March, 1895, has the following article which may prove interesting for the pathogeny of *Apis*. "Yesterday a little after noon, a watch guildler, Fritz Moser, while walking near a bee hive, was stung above the right eye by a bee and died ten or fifteen minutes later with the symptoms of heart failure. Moser who is a bee keeper himself, had been stung already last year near his own bee hive by which a dangerous syncope had been brought about.

"Mr. E. Bertrand, of Nyon, the eminent director of the *Revue Internationale d'Apiculture*, says, speaking of an identical accident which happened in Belgium two years ago (the victim, a beekeeper, had been stung near the eye too and had also the year before received a warning which he had not heeded):

"Since eighteen years that we read or get to read by colaborers nearly all that is published on bees in Europe and in America, we remember only five or six cases of death caused by the sting of a bee or of a wasp alone. The proportion of subjects affected by this idiosyncrasy is therefore infinitely small and persons once stung need not fear the fate of the above said beekeeper. It is the *first* sting which kills or gives the solemn warning; therefore every time that we are asked to open a beehive in the presence of children or young people we never fail to ask: "Have you been stung before?" and if any of those present answers "no," we have him or her put on a veil and hide his hands, not caring to be the cause of an accident. We leave to medical men the trouble to explain how the death is produced.'

“In the above case the syncope or fainting happened two minutes after the sting; the body did not swell and remained warm during twelve hours at least. A small reddish spot indicated the place of the sting. From what our correspondent, Mr. H. Hossart, of Ahin, wrote the defunct Mr. Fiacre, of the Sarte-Huy, ‘was almost foolhardy with his bees; the death can therefore in no wise be attributed to the emotion produced.’”

When I first read the account of Moser’s death I knew that he did not die on account of any idiosyncrasis, but I suspected at once that his profession must be the cause; as gilder, he had to prepare the gilding solution or *bath* with that deadly poison, cyanide of potassium; in preparing the same he had often to inhale the fumes thereof for hours, as the bath has to be heated. Potassium alone is a heart poison, to say nothing of cyanide of potassium.

About three weeks after Moser’s death I visited his widow, to elicit any information useful to the profession. She said that in August, 1894, he was stung once in the middle of the forehead; he remarked to her that he felt unwell, went to the outhouse to vomit, and then fell to the ground and remained unconscious for twenty minutes; she threw cold water on his face and he regained consciousness; he laid down until noon, was very weak that day and was unable to work the next day.

This last time he was stung under the right eye in the lid; he walked a few yards into the workshop, felt dizzy and fearing to become unconscious sat down, resting his head on his arms; after a few minutes he jumped to his feet with a cry, and having made a few steps fell dead to the floor.

A post mortem examination made in the presence of several *regular* physicians (as such a rare case could not fail to arouse deep interest) disclosed a fatty degeneration of the heart; the brain, lungs and liver were sound.

Since such cases are so seldom, I did not want to miss any information; but we may put down as a fact that unless there is a serious organic defect in the body of the patient, the sting of a bee alone is not able to kill. I forgot to say that the regulars who performed the above post mortem took some blood from the eyelid which had been stung and sent it to the Bacteriological Institute of the Medical College of Berne for *cultures!*

A. A. RAMSEYER,

Salt Lake City.

CLINICAL AND THERAPEUTIC NOTES OF RECENT CASES.

Reported by Dr. W. Theophilus Ord, Bournemouth.

GOUTY PAINS.—*Benzoic Acid.*

Major H., aged 68. For some years past has suffered from shooting pains in toes, worst in joint of great toe, which he ascribes to gout. He is a healthy man, rather pale, white hair, has never had acute gout or rheumatism, has been a teetotaler for ten years. The pains are very severe, almost making him call out, sometimes he gets them in fingers, running up forearm. There is no swelling or redness of joints. Pains are better in bed at night, worse during damp weather. Bowels regular. He eats little meat. Water natural. The attacks of pain are getting worse, and now last three hours at a time. Has been given *Piperazine*, but with little benefit.

After treatment for several months with *Sulphur*, *Mercurius*, *Veratrum*, *Colchicum*, with slight relief, patient began to complain of severe headaches, frontal and temporal, extending to back of neck. They were worse on waking in mornings, increased by talking, better keeping quiet. He was pale. The urine was still clear and abundant, but smelt very strong. Ordered *Benzoic acid* θ tablets, one night and morning, In a few weeks he reported great improvement, and freedom from pain. Some months afterwards he wrote: "The gout seems quite to have left me; I have had freedom from pain for three months such as I have not enjoyed for six years previously." Patient shortly after had influenza elsewhere, and indulgence in port wine and beef tea for the resulting debility brought back a slight touch of gout pains, for which *Benzoic acid* was again prescribed with relief, patient soon wrote that he was decidedly better, though there were still twinges of pain in both hands, but none at all in the feet where formally pain was worst. Also that one of his toes had been quite doubled up, but that since taking medicine it had become almost straight again.

GOUT OF HAND.—*Benzoic Acid.*

Mrs. H., aged 62, housekeeper, has contraction of palmar fascia of right hand, especially affecting third finger. The finger has for the past year been numb, stiff, and contracted. She has now constant pain in it, worse on forcibly straightening finger,

but better when finger is kept straight out. Patient is a florid woman, tongue furred, no signs of gout elsewhere. Bowels always loose. Water thick. Says the finger is a constant hindrance and annoyance in her work. The flexor tendons are thickened. For two months patient was treated with various remedies, of which *Lycopodium* and *Merc. cor.* relieved slightly; others had no effect; finger then seemed in much the same state. On learning that water was very strong and offensive, *Benzoic acid* ix was prescribed t. d. s. Patient did not return for three months, when she reported that finger was altogether better and stronger, and seldom troubled her since last medicine. She complained of diarrhœa. *Merc. cor.* given alternately, with *Benzoic acid*. In six weeks patient said the diarrhœa was much better, she does not feel finger at all now, but her water is still strong, though less so than formerly. Finger is not now contracted, and can be straightened at will; tendons less thickened.

GOUTY LARYNGITIS.—*Benzoic Acid.*

John B., aged 54, formerly a sailor, now a colporteur. He is a florid man, well-nourished with relaxed capillaries, a teetotaler. Twelve years ago he began to suffer from chronic sore throats and elongated uvula; this became so bad that, being almost unable to speak, he gave up his employment. He has spoken in open air a good deal, but not for some years. Has had Homœopathic treatment without benefit hitherto. Never been free from discomfort in throat for ten years. Complains of constant sensation as of a plug in throat at level of supra-sternal notch, with a sensation of weakness on speaking which prevents his using his voice. This feeling is aggravated after speaking a few minutes, and if he continues speaking the throat afterwards aches constantly and feels swollen internally. *On examination*, mucous membrane of pharynx and larynx appears reddened, soft and relaxed, with blue capillaries visible. Uvula much elongated.

Patient says there is no discomfort on swallowing either food or saliva, but throat is much worse in east winds or fogs. He has had bronchitis, never gout, but rheumatism thirty years ago in China. He suffers from biliousness sometimes and heartburn, when he thinks his throat gets worse. General health good, but fish always disagrees and makes him vomit. Throat-trouble so genuine that he often avoids speaking to people for fear of increasing his discomfort.

Patient was treated with various remedies for six months—*Sulphur*, *Rhus tox.*, *Carbo veg.*, *Ignatia*, *Mercurius*, etc., including painting with glyco-tannic acid, with very little benefit. He refused to allow the uvula to be snipped.

Nov. 27th, 1894. Patient thinks his throat has been better lately, but felt it much during recent wet weather. He notices his urine smells very strong and offensive. On this indication and the suspicion of an underlying gouty diathesis, *Benzoic acid* θ gtt. j. night and morning was ordered.

Jan. 12th, 1895. Reported throat very much better, in spite of bad weather. He can speak longer without discomfort. sensation of plug and tiredness in throat gone. Voice does not give out as it did. Urine less offensive. Mucous membrane looks less congested. Repeat.

April 2nd, 1895. Throat has remained well during recent severe weather, and "is another thing altogether from what it was before last medicine." Can now talk for two hours without feeling it. Has continued *Benzoic acid* steadily, except for a few days when he had a bronchial cold. Only feels it now slightly in east wind.

May 1st. Throat continues well.

GOUTY NODULE.—*Benzoic Acid.*

Mr. A. C., aged 70, a vigorous man, no arcus senilis or signs of decrepitude. Never had acute gout, once had eczema of legs, liable to bronchitis in winter. His grandfather had gout. Patient has good appetite, all functions regular, has never taken alcohol. Fond of sweets, but was advised to use saccharin some years ago, owing to a slight pain in feet. For two months a warty growth, size of pea, has been forming on outer side of right forefinger, midway between knuckle and second joint. It is horny, projects $\frac{1}{4}$ inch, with a thickened area about $\frac{1}{2}$ inch in diameter, slightly red and inflamed, surrounding it. Occasionally there were pricking or shooting pains in growth: it was very painful if knocked or touched. Patient had several times pared it down with a knife, when it bled freely. The appearance of growth certainly suggested epithelioma. *Thuja* and *Kali bichrom.*, both locally and internally, were tried in succession for some weeks without benefit. It was then observed that patient had some warty thickening of skin in patches on temples, also on knees; palmar fasciæ also showed signs of contraction, and there was redness of pulp of finger tips and palms. From

these evidences of gout it was decided to try *Benzoic acid*, which was given internally, in the first decimal dilution, the mother tincture being applied frequently to the growth. After six weeks of this treatment the wart shelled out and dropped off, leaving a thickened patch of crater-like shape, which also vanished shortly after. The gouty patches on temples and knees also disappeared. In eight months there had been no return, and no trace of former growth was discernible.

SEBACEOUS CYSTS.—*Benzoic Acid.*

(1.) Miss F., aged 35, a chronic sufferer from spinal curvature; very neurotic. Lately noticed much pain about anus, extending up spine, there is a swelling which she fears is abscess. Examination revealed a sebaceous cyst at junction of anal mucous membrane and skin, about size of a walnut, hard but painless. *Hep. sulph.* 3x. had been given for some time without effect. Swelling caused pain on sitting, and was worse in damp weather. Ordered to paint with a saturated solution of *Ac. benzoïn* in alcohol. In a week tumor was softer, and in a month had practically gone, leaving only a little thickened skin at its former site.

(2.) Mr. B., aged 38, since childhood has had a swelling, size of a hazel nut, on left cheek. There is no pain, nor does it increase in size, but it is a decided disfigurement. To paint it three times a day with alcoholic solution of *Benzoic acid*. After three weeks the swelling, formerly hard, became soft and flaccid. A few weeks later it had almost gone, but the thickened cyst with liquid contents could be felt under the skin. The improvement continued for some months, when the sac re-commenced secretion, and swelling increased to half its former size, though its contents were not now hard. Patient now desired its removal by operation.

(3.) In two cases recurrent cysts of edges of eyelids, popularly called "styes," were speedily removed by painting with alcoholic solution of *Benzoic acid*, care being taken that none reached the eyeball. There was no return in either case; no internal remedy was used.

REPORTED BY DR. WASHINGTON EPPS, LONDON.

POLYPUS OF EAR.—*Hepar Sulph.*

G. M., aged eight years, has had an offensive discharge from right ear fourteen days. Three weeks ago had earache. Child's mother put in a piece of warm bacon for this. The discharge is

now yellow and very offensive; there is no pain. By speculum a bright red polypus can be seen. Watch heard on left side at thirty inches, on right side not even on contact. Patient has not had measles, scarlet fever or pertussis, but varicella last spring. She had gatherings in her ear when teething. Ordered *Hep. sulph.* 6, and to clear out ear twice daily with perchloride wool. In twelve days the discharge was less, hearing had improved, watch now heard in right ear six to seven inches. On examination, the polypus cannot be seen, and there was hardly any discharge visible. Six weeks later, ear was quite well. Watch heard thirty inches on both sides. No discharge. Tympanum perfect.

CHRONIC MORNING DIARRHŒA.—*Podophyllin.*

T. M., forty-nine years, a great snuff taker. He had typhoid fever nine years ago. For the last five years has had looseness of his bowels. At first this was only immediately before breakfast, it then continued on and off all day, and now it also occurs very early in the morning. With the looseness there is neither pain, straining nor discharge of mucus or blood, and the stools are not specially offensive. His meals are taken at irregular intervals, but bowels do not move after them, nor does his diet affect the character of motions. Tongue is clean. Teeth fairly good. Patient has become very thin, and has a look of malignancy. Examination of abdomen, also rectum, gave a negative result. Ordered *Podophyllin* 5x. He was cured by this in a fortnight, and has remained well ever since.—*Monthly Hom. Review.*

GLEANINGS FROM PRACTICE.

By John McLachlan, M. D., B. Sc., F. R. C. S.

ULCER ON LEG.

J. M. had been treated for many weeks at an Allopathic dispensary for an ulcer on the leg, during which time the ulcer was getting steadily worse. Some time before this the leg had been scalded, and before the scald was quite healed the boy had received a kick on the leg, and this was said to have started the ulcer.

There were little pimples or papules around the ulcer, and these, the mother said, formed little ulcers, which gradually spread till they joined the large ulcer. The pain was said to

be shooting and cutting, like knives. The ulcer and the parts around were very sensitive to touch. His feet were damp and cold, and there was much sweat on his head at night during sleep. The medicines that seemed most likely to help this case were *Hepar*, with its "papular outposts," and *Phosphorus*, which has "little ulcers outside big ones, some healing and some healed," and "ulcer below right knee, over head of tibia, surrounded by smaller ulcers." Very likely I should have given one of the above had it not been that Jahr, in his *Forty Years' Practice*, advised us to begin the treatment of all ulcers with a few doses of *Sulphur*, whenever we have reason to suspect that some chronic dyscrasia (other than syphilis) is at the bottom of the trouble. That such was the case here I strongly suspected, as otherwise I believe the ulcer would have healed long ago. I therefore gave the boy a dose of *Sulph.* 200, but practically made no other change in the treatment. I called four days later and was much pleased to see that it was healing beautifully, that there was no pain, and but very little discharge. The margin of the ulcer now presented, very characteristically, the "zones" observed in healing ulcer, viz.:—

1. An outer zone of thin, opaque, milky-white new epidermis.
2. A middle zone, not so thick as the outer, opalescent and bluish in color.
3. In the centre, a dark red zone, consisting of one or two layers of epithelial cells, so thin that the color of the granulations show through.

I need not follow all the details of the process of healing in this case; suffice it to say that in the course of four or five weeks the leg was completely and soundly healed, and has remained so to this day. The other medicines employed at varying intervals were *Hepar* and *Calcarea*.

A HINT FROM FARRINGTON.

One afternoon I was asked to go and see a little child, aged eight months. On examining the child the case seemed, from the physical signs, to be one of commencing capillary bronchitis. One could hear fine bubbling râles ("sub crepitant") at the base of both lungs, the temperature was raised, and, worst of all, the child was unable to take the breast in the usual way, for every few seconds *it would let the nipple go*, apparently to get breath, and that, too, although the nose was quite clear. On this point, Farrington says, in his lecture on *Antim. tart.*: "A nursing infant suddenly lets go the nipple and cries as if out of breath,

and seems to be better when held upright and carried about. Now, this is the beginning of capillary bronchitis. . . . *Antim. tart.* here nips the whole disease in the bud."

When I told the mother, she was much alarmed, and wanted to set about making extensive preparations for poulticing and keeping the child in one room. I told her I did not think she need trouble, and put a few drops of the 9th potency of *Tartar emetic* in half a tumblerful of water, and told her to give the child a teaspoonful every hour or so as long as it was awake. After a few doses the child went to sleep, and slept comfortably all through the night, and when I called the next afternoon it was easy to see that the whole disease had been "nipped in the bud;" the child was as lively as ever, and could now take a good long feed without letting the nipple go.

LACHESIS CASE.

This patient (an old lady of 60) I have never seen, as she lives about six miles from Oxford and was too feeble to attempt the journey. The friend who came for her gave me the following history: She (the patient) was said to have a "weak heart," and suffered very frequently from "attacks" resembling faints; these attacks frightened her attendants, as they feared she was at the point of death. Besides these faint feelings and frequent fainting fits, she had *flushes of heat* and numbness at times all down the *left* side. Her sleep was heavy, but otherwise she seemed to be in fair health. I gave the messenger a powder of *Lachesis* 30 to give her *at one dose*; not knowing the old lady, and she being so far away, and considering the probable nature of the case, I thought it better to give the powder at one dose, instead of in divided doses, lest it might cause an aggravation. A week later I was told that she was much better, and that the medicine acted "like magic;" she has had no "attack" since taking it. I prepared another powder to be taken only in case of need; this she took three weeks afterwards (*i. e.*, four weeks after the first dose, as there was a slight return of the old symptoms). I gave her a third powder to keep by her in case she had any return. From that time (April 18th, 1894) I heard no more of her till about two weeks ago, when her friend called for more medicine, as the attacks showed a tendency to return again, though they were not nearly so severe as during last year. All the three powders were taken at one dose each—and these three doses of *Lachesis* 30 were all she needed for her weak heart and faints for more than a year.—*Monthly Homœopathic Review*.

RECURRENT ATTACKS OF ACUTE INFLAMMATION IN THE LEFT FRONTAL SINUS.

Miss R., æt. 39 years. Complained of periodic discharge from the left nostril, accompanied by severe pain in frontal region, to which she had been subject for two years.

The attacks would come on suddenly and were usually preceded by headache. Then would follow intense burning in the region of the sinus, worse by bending the head forward. Next a discharge of glairy, often blood-stained, fluid appeared. The attacks would last several days and leave her very weak; they were usually accompanied by some elevation of body temperature and hyperosmia and hyperacusis.

The patient was under my care for a considerable period, and had, on an average, one attack every month. During this time she received various remedies and was finally put on *Aurum muriaticum*. Since that time to the present, a period of more than eighteen months, she has been perfectly free from any of her former trouble. She continued taking the *Aurum* on and off for about five months.

The next case is one somewhat similar to the last. The patient was an elderly lady sent to me by Dr. Moir, and was subject to severe attacks of pain in the left frontal region. There was a very gouty history, and the patient suffered from rheumatic arthritis. The attacks of which she complained would come on quite suddenly with irritation in the right ear, with slight bleeding from the same, followed in a short time by violent fits of sneezing and pain, and a sense of weight in the left sinus. This would last for about a week, and be relieved by the discharge of brownish fluid from the left nostril.

Examination showed slight tenderness to pressure and a slight prominence at the inner and upper angle of the left orbit. In the nose there was considerable obstruction in the left meatus by a deviation of the septum. There was some eczema of the left external auditory meatus. Electric trans-illumination gave negative signs. Washing out the left frontal sinus through the nose brought away a small amount of pus and produced a pain behind and at the side of the left eye.

The patient was ordered *Aurum* and *Kali iodidi*, both of which appeared to do good. The *Aurum* was given only for a period of four weeks, but since that time to the present—thirteen months—she has had no return of the attacks.—*Dudley Wright, in Monthly Hom. Review.*

Editor of the HOMŒOPATHIC RECORDER.

Dear Sir—The following clinical case will, I think, be of interest to your readers:

A mechanic, aged 27 years, of bilious temperament, contracted a gonorrhœa some twelve months ago, previous to which he had not experienced two days' sickness. Within a month from infection he succeeded with local measures in checking the discharge. By way of "vicarious atonement" seemingly he then became affected with an increase of smegma that necessitated daily ablutions of a carbolyzed solution to prevent erosion of contiguous parts and suppression of the fetid odor. For this condition he came to be treated.

The accompanying symptoms were sleeplessness, passage of pungent urine, especially upon rising; constant backache, commencing at this time, increasing towards evening, aggravated by sitting and bending over, relieved by walking; loss of flesh and coated tongue, with foul mouth and sticky teeth.

Treatment: *Thuja* 30, one drop, repeated in eight days, which overcame the insomnia only; eight days after this second dose one of *Nux* 30, repeated in eight days, which caused the backache to disappear for just two days. Eight days from this latter *Nux* 3x, one drop three times daily, which at the end of eight days had restored the smegma to its normal state. *Rhus tox.* of same strength and dose was then given, which slightly improved the backache, but, the smegma threatening to return to its former condition, *Sulphur* 30 was substituted on the fifth day, when all symptoms vanished, the patient reporting himself a well man ten days after.

Respectfully,

LISTER GIBBONS.

Dunkirk, N. Y., May 25, 1895.

Editor HOMŒOPATHIC RECORDER.

Will you please publish the following queries:

- 1st. Are negroes immune against sunstroke?
- 2d. Are they immune against smallpox?
- 3d. If they have smallpox, does it leave them any scars?
- 4th. Are they but little afflicted with skin diseases?
- 5th. What diseases, if any, never attack negroes?

An article embodying the answers to these questions from a physician with much practice among colored people would be

interesting. Any difference of virulence on account of lighter or darker shades in the negro race should be noted.

Yours truly,

A. A. RAMSEYER.

1060 E. 2d South Street, Salt Lake City, Utah.

KALMIA IN CHRONIC HEADACHE.—On January 21, 1895, W. S., aged 54, came to my dispensary complaining of a constant headache, from which he had suffered for years. He was never free from it, and for three or four days a week it was very bad, sometimes so severe that he had to shut himself up in a room alone and feared he would go out of his mind.

He described the pain as an opening and shutting sensation. It affected chiefly the right supra-orbital and temporal regions, but sometimes the left side. When very severe it was accompanied by swelling of the eyelids and temporal region. He seldom got up in the morning free from pain, and usually woke up with it.

In addition to the headache he complained of giddiness, weariness, and languid feeling in the limbs; also shifting pains in the joints and constipation. He was sometimes jaundiced, and usually had a bilious attack every three months or so. I gave him a few powders of *Kalmia* 3x, to be diluted in water and a dose taken every three or four hours. The effect was most marked. The headache was relieved at once, and completely disappeared for awhile; and then returned, but only slightly. He has continued taking *Kalmia* ever since, and finds he cannot do without it. I gave it gradually weaker, 4x and 5x, and then tried the 200th potency, to be taken when required; but it failed, and I went back to the 3x powders, which appear to keep him free from pain as long as he takes it. The only other medicine he has had is *Sulphur* 30, given a month after commencing the treatment for an irritation of the skin on the back. Not only has his headache been greatly relieved by the *Kalmia*, but his general health has been improved and the joint pains cured. It was these pains and the general symptoms that led to the selection of *Kalmia* as the remedy.—*Dr. J. R. P. Lambert, in Hom. World.*

BURNETT ON GOUT.—“For the successful treatment of gout,” says Dr. Burnett, “it is necessary to have a clear idea of what

constitutes its various parts; notably must we differentiate between its pre-deposit and its post-deposit symptoms, for much of the want of success in its cure is due to a mixing up of the two sets of symptoms." In the work before us Dr. Burnett shows how he distinguishes between these two stages, and how he deals with each. In this, the latest product of his pen, Dr. Burnett is as eminently readable, fresh, and original as ever. His discovery of the powers of *Urtica urens* in acute gout is an example of his keen powers of observation, and we have no doubt it will be thankfully welcomed by the Homœopathic profession. A considerable portion of the book is taken up with the description of the powers of this remedy, with illustrations of its action. We have tested it in practice in other affections on indications supplied by Dr. Burnett, and are convinced that it is destined to take a much higher place in the Homœopathic materia medica than has yet been accorded to it. Another remedy Dr. Burnett mentions is *Spiritus glandium guercus*, in which he has found a valuable antidote to the effects of alcohol.

On the gouty diathesis, Dr. Burnett has much that is interesting and practical to say. His exposure of the fallacy of the Allopathic method of neutralizing the acidity of gout by the constant administration of alkalis is particularly refreshing. His own notion of what gout is he puts as follows: "The gouty product is the uric smoke and soot of the human economy." But this does not take us very far. For the answer to the question why there should be this accumulation of smoke and soot, Dr. Burnett refers us to the individual organs at fault, and finally to Hahnemann's Sycosis as the parent of it all. This is new to us, and the evidence brought forward to establish the hypothesis is very important. In our experience *Psora* is the miasm most frequently found to be the *causa causans* of gout; but there are doubtless many factors capable of bringing about the "smoke and soot" accumulations, and Dr. Burnett has shown that Sycosis at any rate may be one.—*Homœopathic World*.

GIVE TABLETS INSTEAD.—It is a mistake to write prescriptions for your patrons, and why? A prescription that I once wrote for a case of colic was refilled for every case of cramps that occurred in that part of the city for five years afterward, and, for ought I know, the prescription is still doing business, and my share of the proceeds was fifty cents.—*Dr. B. R. Hubbard, in Ec. Med. Jour.*

ECHINACEA AND ITS USES —Pathologists tell us that the germ vibrio working on the mucous membrane of the small bowels, peyers patches and mesenteric glands is the real cause of typhoid fever.

Admitting this to be a fact, the germicide *Echinacea* is far superior to all other remedies in destroying the vibrios and cutting short the disease.

Echinacea will make a milder case out of a severe one, and that makes it more pleasant for patient and physician. It seems to reduce the temperature, pulse and delirium to a marked degree.

Then it will cut short the duration of the disease. This I have verified in two marked well-developed cases, from twenty-one, to one seventeen, to the other fourteen days. You would naturally ask the question, how can *Echinacea* do this? The reason is simple. It is a germicide to vibrios, thus destroying the disease or cause of the disease, and all the symptoms abate. Now, then, with me it is not the second, but the first remedy in typhoid fever.

Then again *Echinacea* is a splendid remedy in diphtheria, given internally, in proper doses. I suppose it is a germicide to the odium albicans, the cause of the disease. I would not willingly treat a case of diphtheria without it. Again, it is highly recommended in cerebro-spinal meningitis by good authority. My experience with it in this disease is limited, but in a few cases, where I prescribed it, the results were excellent. It seems to neutralize the disease in its severity, all symptoms giving away.

It is also an excellent remedy in diarrhœa, dysentery, cholera morbus, but more especially in the diarrhœa peculiar in typhoid fever. It is almost specific for it, being very reliable.—*Dr. John Henning in Chicago Med. Times.*

ICHTHYOL AND CONSUMPTION.—At a meeting of the Royal Academy of Turin on March 8th, Scarpa (*Gazz. degli Osped. E delle Cliniche*, March 16th) communicated the results obtained in 150 cases of pulmonary phthisis treated with *Ichthyol* between April 1894, and January, 1895. Having referred to the favorable results of the treatment reported by Cohn, of Hamburg, in 100 cases of the same disease, the author pointed out that from what was known of the action of *Ichthyol* as an astringent of the vascular system, as an antiseptic, as a disinfectant of the digestive

apparatus, and as an *ailment a'épargne* it was *à priori* presumable that it would be useful in phthisis. He employed the drug in the purest possible state, dissolved in the proportion of one-third in distilled water or any suitable vehicle. Of this solution he gave from 20 to 180 or 200 drops, dissolved in water, in the course of the day. The remedy was in all cases well borne. No other treatment was employed beyond attention to the hygienic environment and feeding up. Of the 150 cases 25 died; all these were of a desperate condition before the treatment was begun, but even in them the *Ichthyol* appeared to do good. Of the remaining cases 17 were apparently cured; in 50 there was notable improvement; in 32 there was some improvement; in 28, up to the date of report, the treatment had produced no effect. The good effect of the *Ichthyol* shows itself first in the influence which it has on the symptoms produced by the local lesions—cough, expectoration, dyspnœa—afterward on the general condition. Physical examination shows profound modifications in the lesions, especially in the circumscribed infiltrations of the early stage, but also not infrequently in those of the breaking-down stage. The author does not attempt to decide whether the *Ichthyol* acts only by improving nutrition or also by direct action on the lesions, or by neutralizing the toxins produced by micro-organisms—both Koch's bacillus and the staphylococci, etc., which are the causes of secondary infections. He insists on the advantages which *Ichthyol* presents over *Guaiacol* in the treatment of tuberculosis.—*British Medical Journal*.

BOOK NOTICES.

Syllabus of Eclectic Materia Medica and Therapeutics.

Compiled from notes taken from the lectures of Frederick J. Locke, M. D. Edited with Pharmacological additions by Harvey W. Felter, M. D. With Notes on Specific Medicines by John Uri Lloyd. 461 pages. 12 mo. Cloth \$2.50, net. Cincinnati, John M. Scudder's Sons. 1895.

“The urgent demands, repeated from year to year, by the students and graduates of the Eclectic Medical Institute who

have listened to the lectures on *Materia Medica* in that institution, that Professor Locke should prepare a work on this subject is the only apology offered for the advent of this book. A short time since, an imperfect, limited edition of 'Notes on the Lectures of Prof. Locke' was issued by members of the class, and since it has become necessary to supplant that work with this one. These notes have been corrected and are embodied in this work, with many additions. This book is, therefore, offered merely as a series of notes upon the drugs herein considered." "In many instances it was found necessary to crowd much material into one short paragraph, consequently the matter is merely presented as fragmentary notes, as few words as possible being employed to express the fact in question. The effort has been to make the subject-matter correct and of use to the student, rather than a striving after literary effect. Therefore, many of the notes stand as they were gleaned from the lecture."

So runs the preface. If anyone wants an abstract of Eclectic *Materia Medica* and Therapeutics this is the book to buy.

The Care of the Baby. A manual for mothers and nurses, containing practical directions of the management of infancy and childhood in health and disease. By J. P. Crozer Griffith, M. D. 392 pages. Cloth, \$1.50. Philadelphia. W. B. Saunders. 1895.

The eleven chapters of this printed book cover the time "before the baby comes," the baby, its growth, toilet, clothes, feeding, sleep, exercise, nurses, rooms, sickness, with an appendix containing recipes, prescription, etc. Three hundred and ninety-two pages of baby lore for those who do not know all about the baby, or think they do.

A Manual of Genito-Urinary and Venereal Diseases. By Bukk G. Carleton, M. D., professor of genito-urinary diseases Metropolitan Post-Graduate School of Medicine of New York City; visiting physician to Metropolitan Hospital, department public charities and corrections of New York City; State visiting physician to Ward's Island Hospital; State pathologist and interne, Ward's Island Hospital; State adjunct professor and demonstrator of anatomy, New York Homœopathic Medi-

cal College; with "Venereal Diseases of the Eye," by Charles Deady, M. D., member of board of governing surgeons, New York Ophthalmic Hospital; professor of ophthalmology and otology, College of New York Ophthalmic Hospital; professor of ophthalmology, Metropolitan Post-Graduate School of Medicine; editor of the Journal of Ophthalmology, Otology and Laryngology; and "Vesical Calculus and External Urethrotomy," by William Francis Hohan, M. D., adjunct professor of genito-urinary diseases, Metropolitan Post-Graduate School of Medicine; member of Auxiliary Board of Physicians to Metropolitan Hospital, etc., etc. Cloth, 315 pages, price, \$3.00; half Morocco, \$4.00; New York: Boericke, Runyon & Ernesty 1895.

The three hundred and fifteen pages of this book are divided into thirty-nine chapters. They run about so: Chapter I. "Diseases of the Prepuce and Glans Penis." Chapter II. "Special Therapy for the Prepuce and Glans Penis." The six pages of this chapter contain symptoms of forty-five remedies, covering the diseases treated of in chapter first, which are balano-posthitis, herpes progenitalis, vegetations, preputial calculi, varices of prepuce, epithelioma, phimosis, inflammatory phimosis and paraphimosis. Gonorrhœa follows, with special therapy of thirty-four remedies, and so on. The printing is good, the type large and the paper rather heavy for a book of its size.

Stories of a Country Doctor. By Willis P. King, M. D. Paper, 396 pages; 50 cents. Baily & Fairchild, New York.

These are stories by, but not especially about, a country doctor; stories of that fast-vanishing race, the pioneers of the West. Many of the stories are very good and generally seem to be true to life.

THE late Dr. Charles Neidhard wrote a number of books, as may be seen in Bradford's *Homœopathic Bibliography*, but of them all only one, we believe, remains in print—*The Pathogenetic and Clinical Repertory on the Head*—published in 1888 by Dr. F. E. Boericke. It is a really valuable work for those who have to treat the aches and pains of the head. All the curative symptoms noted by the author in his long professional career are put in a special type and are a most valuable collection.

APROPOS of curative symptoms, it has been urged against

Hahnemann's *Chronic Diseases* that many of the symptoms are of this nature. But, after all, as the object of medicine is the cure of disease, and as many of these symptoms are the very sheet anchors of cure in every day practice, why should that be an objection, even granting that they were obtained in this manner? That *fear of a downward motion* that characterizes *Borax* has brought victory and joy to many a worried physician, and would he value it less if positive that it was the result of clinical observations and not of proving? Not even Hahnemann claimed that all the symptoms of the drugs he proved had been elicited, and may it not be reasonably taken for granted that these well-established curative or clinical symptoms that are not in the pathogeneses are among those, and, therefore, properly belong to the drug?

It is rather curious, but a fact, that notwithstanding all the talk about "biochemistry" and the "tissue remedies," the O'Connor translation is the only book in which the English reader can find exactly what Schüssler wrote. Schüssler entirely repudiated Mrs. Walker's so-called translation, for the reason that much of her own work was incorporated, and, however, excellent that may have been, it was not fair to the German author to give it to the world as his work. The net price of the O'Connor translation is 77 cents by mail.

By the way, Mrs. Walker has quite recently accused Drs. Boericke & Dewey of "pirating my translation," a charge that to those who have compared the two works must seem rather amusing. Their work is, on a rough estimate, three or four times larger than Mrs. Walker's and is a masterly study of the twelve remedies both "Homœopathically and Biochemically considered," while Mrs. Walker's is—her own, a very nice book for the laity, but hardly up to the professional standard.

SOME of the critics are raising the usual point to *Gout and its Cure*, that they apply to the other books by the same author, namely, that he is "too cock sure" in his assertions, and that he lugs in too many new remedies. Now it seems (to this pen at any rate) that after a man has brought back health to a goodly number of people with a certain remedy, he has pretty good reason for being "sure" and that his brethren, provided they cannot cure everything that comes along, might get some very

useful hints from that writer's books. As for the "new remedy" complaint that is hardly just, for Burnett recovers from old and forgotten remedies, but never to our knowledge has put forth brand new ones. Hahnemann has shown us that the old and forgotten remedies may be vertiable treasures and so, unless it be claimed that Hahnemann exhausted the old store house, Burnett has a very good example in "the master." His last book on *Gout* and the liquor habit generally, is especially interesting.

AND that reminds us that Burnett has sent to his American publishers the manuscript for a new and much enlarged edition for his book on the *Diseases of the Liver*, which has been out of print for nearly a year. The book on the liver was nearly as popular as that on consumption, now in its third edition.

THE new translation and edition of Hahnemann's famous *Chronic Diseases* has reached about to page 500. The work is moving faster now and it is hoped to have it completed before December. It is a great book, a valuable book, an *interesting* book, and a needed book in these days of therapeutical chaos.

ONE of the books that from the day of its first appearance up to present writing has had a steady sale in Berjeau's *Homœopathic Treatment of Syphilis, Gonorrhœa, Spermatorrhœa*, etc. 256 pages. \$1.20 net, by mail \$1.27. Homœopathy, like truth, changeth not, and those who follow Berjeau in the treatment of those ills will not go astray.

THE fourth edition of Raue's *Special Pathology Diagnostics, with Therapeutic Hints* is in press. The author has thoroughly gone over the entire work, and brought its pathology right up to date, and has also added a number of new chapters. When completed the work will be *the best* homœopathic practice obtainable. The cry is going up on all sides for a return to purer Homœopathy and Raue's work is the exponent of pure Homœopathy, as all know. Another good feature of the book is its clear and concise language; a page of Raue will contain as much, essentially, as half a dozen pages of more difuse authors. The new edition will be one of the handsomest medical books of the year in the matter of paper and press-work.

Homœopathic Recorder.

PUBLISHED MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street,

Philadelphia, Pa.

SUBSCRIPTION, \$1.00 PER ANNUM.

Address communications, books for review, etc., for the editor, to E. P. Anshutz P. O. Box 921, Philadelphia, Pa.

NEW YORK CITY NOTES.

Dr. J. M. Holloway has removed to 105 Hoboken avenue, Hoboken, N. J. Office hours: 8 to 10; 1 to 2:30; 7 to 8.

Dr. Eric Vondergoltz has removed his office to 324 East 15th street, New York city. Office hours: 11 A. M. to 1 P. M.

Dr. Frederick C. Miner has opened an office at 1150 Forest avenue, New York city.

Dr. M. B. Beals has removed from 168 East 72d street to 163 East 71st street, New York city. Office hours: 9 to 10 A. M. and 5 to 7 P. M.

Dr. W. H. Bishop, for a number of years associated with Dr. Wm. Tod Helmuth at the Helmuth House, 465 Lexington avenue, has opened an office at 119 East 47th street, New York city. Office hours: Until 12 M. and 7 to 8 P. M.

Dr. W. A. Dewey has removed from 170 West 54th street to 52 West 25th street, New York city. Office hours: 9 to 10 A. M. and 3 to 5 P. M.

Dr. Francis Helmuth Dreyer has opened an office at Kingsbridge, New York city. Office hours: 8 to 9:30 A. M. and 7 to 9 P. M.

Dr. Stephen W. Goodrich has removed from 458 West 153d street to 507 West 152d street, New York city. Office hours: 7 to 9; 12 to 2 and 7 to 8.

Dr. E. F. Hoyt has removed from 36 West 27th street to 39 West 58th street, New York city. Office hours: 8 A. M. to 4 P. M.

Dr. A. W. Palmer has removed from the Hotel Endicott to 174 West 82d street, New York city. Office hours: 8 to 10 A. M. and 5 to 7 P. M.

Dr. Edwin J. Pratt, for a number of years associated with Dr.

Henry C. Houghton at 7 West 39th street has removed to 45 West 45th street, New York city. Office hours: 9 to 11 A. M. and 5:30 to 6:30 P. M.

Dr. Perry Seward, 113 West 85th street, has accepted a position on the staff of the *Medical Century*, of Chicago. Dr. Seward will conduct the New York department of this journal in which he will give a semi-monthly resumé of the Metropolitan happenings of interest to the Century's readers. At the same time Dr. W. A. Dewey will assume the entire charge of the Materia Medica department of this enterprising Western journal.

Dr. J. W. Dowling, 41 West 45th street, New York city, has been appointed on the staff of visiting physicians of the Metropolitan Hospital on Blackwell's Island.

Dr. Elizabeth Jarrett, 406 West 57th street, has been appointed physician to the school of the New York Children's Aid Society.

Dr. Timothy Field Allen will spend the summer in Europe; he sailed from New York early in June and will remain away several months.

Dr. J. M. Schley, 1 East 42d street, New York city, left on June 9th with his family for Glenwood Springs, Colorado, where he will spend the summer months. His practice here will be cared for by Dr. Walter E. Delabarre.

The following officers for the coming year have been elected for the New York Academy of Pathological Science: Dr. A. R. McMichael, President; Dr. George T. Stuart, Vice President; Dr. W. G. Fralick, Secretary and Treasurer, and Dr. George F. Laidlaw, Pathologist.

Dr. William F. Guernsey, 27 West 52d street, New York city, will leave early in July for Europe, visiting England and France and remaining away for two or three months.

PERSONAL

Dr. J. R. Humes has removed from Hollidaysburg to Altoona, Pa.

Preface your assertion by the statement that "it is a well known fact" and nine readers in ten will accept it as fact, even if it is the reverse.

If the chronic whistler could hear himself as others hear his mournful emissions, and see his puckered mouth and hollow cheeks, he would straightway reform.

Dr. Ridpath has removed from Huddersfield to 8 Grange Crescent, Sunderland, England, taking the extensive practice of the late Dr. Potts.

O Selah! Mr. Indicated Remedy may be disagreeably cock sure he is right, because he is right.

Dr. Mary B. Stevens has removed from Auburn to Clover Hill Farm, Turner, Maine.

"The public health commission suggests that all barber shops be placed under proper sanitary inspection."—*Med. Summary*. In time our surplus population can be profitably employed in "inspecting" things.

"It is a mistake, if the patient needs medicine, not to prescribe the best."—*Dr. B. R. Hubbard*. But if made no more what would become of the bargain counter, premium giving, pharmacists!

A man never sizes up to his own opinion of himself.

The English courts after profound consideration have decided that chewing gum is neither a food nor a drug and that it is lawful to chew it.

The *Accoucheur Emergency Manual* is what every practitioner needs.

To reach the homœopathic medical profession of the world send papers to the HOMŒOPATHIC RECORDER.

In Dr. Louis de V. Wilder's communication in JUNE RECORDER, p. 258, 4th line from bottom for "nutritis" read *metritis*.

The R. E. Dietz Company offer a new catalogue of their many driving lamps, For address see adv. p. 26.

Dr. Cantrell highly praises *Ichthyol* ointment in the treatment of erysipelas.

Dr. E. A. Hulst, of Perth Amboy, N. J., has been appointed a member of the Board of Health of that city. Dr. Hulst is a well-known homœopathic physician.

Dr. L. A. Burck has removed from 517 Strickler street to 1220 Linden avenue, Baltimore, Md.

Governor Morton has signed a bill establishing an Examining Board in Chiropedy, vulgarly known "corn doctors."

Laneo "stayeth the falling of the hair."

Subscribe for the RECORDER.

A new edition of Burnett's *Diseases of the Liver* is in press.

The *Bee Line Repertory* has made a bee-line to success.

THE HOMŒOPATHIC RECORDER.

VOL. X. PHILADELPHIA AND LANCASTER, AUG., 1895. No. 8.

POLYPHARMACY, HOMŒOPATHIC PHARMACISTS AND PHYSICIANS.

The June number of Dr. Fornias' *International Brief* and the July *Denver Journal of Homœopathy* contains the papers on the evil of polypharmacy which are reprinted below. The *Brief* says:

WARNING.—Homœopathy has reached a culminating point; her rapid and successful growth has bred danger ahead, and we must be prepared to overcome it. From various quarters the warning has been given and a vigorous protest must follow. While we have been wasting a precious time, disputing trivial points about the dose, which really is only a precept emanating from the law of similars, but not law itself, empiricism and polypharmacy have insidiously invaded our ranks. This is a great evil which must have an end, if we are to exist as a school of medicine. Thousand times better an honest opposition than a vile deception. Let us energetically make bare the imposition and those who try to frustrate our aims shall be reckoned as enemies. We have seen with real pleasure the *veteran North American Journal of Homœopathy* come out with the following:

"Bitter and implacable as is the hostility of the allopathic hosts, the greatest present danger of the homœopathic school does not in our opinion lie in that direction. The restless waves of the therapeutic sea have parted the anchor of the homœopathic craft and it is slowly drifting on the shoals of a dangerous and destructive polypharmacy. We are tending more and more towards the modern practices and methods of the allopathic school.

"The immediate duty of the homœopathic school is a return to homœopathic practice. 'Truth,' said Locke, 'whether in or out of fashion, is the measure of knowledge and the business of the understanding: whatever is besides that, however, authorized by consent or recommended by rarity is nothing but ignorance or something worse.' We commend this paragraph to those, who, masquerading as homœopaths, cannot find time or ability to make a homœopathic prescription, But if the school has won its present enviable and renowned position because of the faithful and untiring labor of those who have preceded us, it will as quickly lose its prestige and sink into obscurity if we are recreant to our trust."

The *Denver Journal* contains the following:

Polypharmacy.

“There are no tricks in plain and simple faith.”—Shakespeare.

Homœopathy is suffering more to-day from its alleged friends than from all its enemies combined. That plain and simple faith which animated the earlier Homœopaths has been very much weakened in later years through careless and inadequate instruction in our colleges, and by the selfish methods of our pharmacists. Polypharmacy has done more to lead astray young physicians and engender in them wrong principles of practice, slovenly methods of prescribing, and consequent uncertainty in results, than anything else. Polypharmacy, more than anything else, retards true progress. This has always been true of the old school, and is manifestly more dangerous in the Homœopathic school. The pharmacists have prepared combinations of homœopathic medicines in almost inconceivable numbers, and have the audacity to ask Homœopathic physicians to buy and use them, regardless of all proper indications. These pharmacy vendors unblushingly attempt to tell us exactly what these combinations will cure, and thus insinuatingly encourage in the unwary young doctor a lazy, uncertain and fruitless system of practice. Why this sort of pharmaceutical quackery has been so long tolerated by the colleges and the profession is difficult to understand. Nothing that has yet been done by its avowed enemies is so surely calculated to retard the steady and triumphant progress of Homœopathy as this insidious work of pharmacies. There has been an unexpressed feeling prevalent that this evil would soon be corrected through the silent protest and lack of patronage of the better class of Homœopathic physicians. It was a false hope, and the time has come when some decided and unequivocal action should be taken by the profession at large, by our colleges and by our teachers. It is a menace to the very foundations of our institutions, which must be met and overcome. There should be no hesitancy or compromise. It is an evil which we all recognize, and one which must be destroyed root and branch if we would save Homœopathy itself from destruction. Polypharmacy has done more to retard the progress of the old school than all their other false notions of disease and therapeutics. In fact, there can be no such thing as true progress under any system that favors a mixture of many remedial agents in the treatment of disease. Such a system naturally begets a lack of faith by the physician. He cannot possibly estimate results from multiple causes. He soon becomes a mere routinist. He gropes in the dark. He is simply an experimenter upon the unfortunate sick, whether he be Allopath or Homœopath. He learns nothing by his experiments. He cannot. He has no definite data from which to draw conclusions. He combines many drugs in a single dose and thus forestalls all legitimate deduction. Any Homœopathic physician who allows himself to drift into polypharmacy from that moment drifts away from Homœopathy. It is the entering wedge to heteropathy and consequent incompetency. It is not our purpose to discuss the principles of Homœopathy. They are unchangeable and fast spreading throughout the civilized world. A hydra-headed evil threatens us, and this we would combat. We appeal to the profession and to the pharmacists themselves to avert the dire consequences which will surely fall upon our cause if this departure from the

truth is allowed to go on unheeded and unchecked. We cannot afford to be slain in the house of our friends. We believe a little consideration on the part of our pharmacists will convince them that it is a mistaken policy, and one that will work evil to all concerned. Few physicians have altogether escaped the influence of this blighting innovation, but it is not too late to call a halt and cast off the incubus which threatens to destroy us. The work of restoration must begin in our colleges, and every effort should be made by our teachers to fortify our students against the encroachment of false teaching and erroneous practice. The Denver college was organized for the purpose of teaching Homœopathy, and we believe it will faithfully and fearlessly fulfil its mission. This much is distinctively set forth in its charter, and the men who prepared that charter meant to impress upon the officers and teachers all that the words imply. A four years' course of instruction by faithful teachers ought to fix the true principles of Homœopathy so firmly in the minds of the students that they will be impregnable against any assault of our enemies.

The importance of this question grows with its consideration. The men at the head of our national and State organizations should at once take active measures to avert the danger which threatens our very existence. We must stand for Homœopathy and all that the term implies. Individual effort will not suffice. United and harmonious determination will, if not too long delayed, settle this question for all time.

The pharmacist must of a necessity reflect the condition of the medical profession; he dare not and should not undertake to say what a physician shall or shall not prescribe. The business of the pharmacist is dependent in a great measure on the physician, and he must prepare drugs as they are demanded or prescribed by the medical profession. If the profession demand crude drugs, allopathic mixtures and nostrums, polypharmacy in short, the pharmacist must supply these; if cheap goods are preferred to good and reliable preparations some pharmacists will supply them. See what the homœopathic pharmacists at the present day advertise and you will have a fair picture of what the physician demands and will buy.

This point must at the same time be admitted, that the conscientious pharmacist should spare no trouble nor expense to furnish the physician with HOMŒOPATHIC remedies exactly like those from which the provings were made; that an attempt to use cheaper goods or to substitute similar, but in some respects different, preparations from those which the provers used, or the employment of unqualified help in the preparation of such remedies, or in the potentizing of them, the physician in consequence may have failures where exact prescriptions are made, and a more or less frequent repetition of such failures may cause a physician to lose confidence in the law of similars, and he may look for help elsewhere. This may be a reason, but certainly is

no excuse, for there are reliable pharmacies, and therefore reliable preparations.

Educate young physicians to ask for pure pharmacy, not by words, but by deeds, and the pharmacist will no doubt purify himself; but as long as the physician will patronize the first agent from such houses as Cheap John & Co. or Fluid Extract & Co., simply because they make preparations and mixtures not found in our pharmacopœia, or will sell so-called "homœopathic medicines" at a lower price than a reliable preparation can be made, just so long reform in this matter is impossible.

SIX CLINICAL CASES.

Case No. I.—A Case of Remittent Fever Cured with Mercurius Sol.

A patient, mother of Delâ, a Mahommedan adult woman of fair color suffering from remittent fever about ten or twelve days, when seen on 12th November, 1893, at about 10 A. M., with the following history and symptoms: No remission; temperature (taken just now) 102.6° F.; skin hot; complains of burning sensation; tongue slimy with thick, whitish, tenacious mucous coating; constipation; nausea; pain on pressure on pit of stomach; slight enlargement of spleen; heaviness of head; keeps her eyes closed as they seem to be sensitive to light; fever increases at about noon; fainting when rises from lying posture; always lying; jerking of fingers; bad smell of breath; occasional spitting of saliva; feels chilly at about noon; left upper extremity somewhat powerless; constipation; passing hardened balls of fæces covered with mucus; had been passing thread worms.

Treatment: *Merc. sol.* 6, half a drop a dose, six doses for twenty-four hours.

Diet: Sago

4 P. M. Found her not so indifferent as at my first visit.

13-11-93. 10:30 A. M. Temperature, 102.8° F.

Skin hot; photophobia less; to-day saw palpebral conjunctivitis. She says she cannot sit up as she trembles when she sits up; no stool; tongue not so slimy as yesterday.

Treatment: *Merc. sol.* 6, six doses as above.

14-11-93. 10:30 A. M. Temperature, 101.6° F.

Skin slightly hot; tongue clean; speaks in a better manner; says she is deaf, cannot hear, but she was not so before this disease; passed urine involuntarily in dressing

yesterday at about noon; can open eyes easily; no stool; has been coughing occasionally; not so much trembling of limb (left upper extremity); can change sides on bed rather easily.

15-11-93. 7:30 A. M. Temperature, 100.6° F.

Skin almost normal; tongue slightly dry; no thirst now; one hardened stool of a large quantity yesterday at about 11 A. M.; palpebral conjunctivitis less; opens her eyes easily, hence less photophobia; answers well; hands tremble; has not strength enough in her hands, cannot catch hold my hand firmly; she could not sit when passing stool yesterday; pulse almost normal.

Treatment: Placebo.

5 P. M. Slight increase of fever; one rather big and normal stool to-day at about 11 A. M.; tongue moister than before; answers questions; keeps her eyes closed but opens when speaks and when told to do so; can easily raise up her left hand; complains of hunger; not so much trembling of hands; sago and milk for diet.

16-11-93. 9 A. M. Temperature, 98.6° F.

Speaks well; makes a joke with me; can raise hands easily; catches hold of my hand with her hand more firmly; palpebral conjunctivitis less; eyes open but not fully so; complains of hunger; tongue moist with tendency to dryness; to-day much improved.

Treatment: Placebo.

Diet: Sago and milk.

17-11-93. 9:30 A. M. Temperature, 98.6° F. Pulse almost normal; tongue somewhat dry and in parts moist; complains of thirst, but taken no water; palpebral conjunctiva less red; one stool yesterday afternoon; another, but loose stool, passed and found on bed on which she is lying; no trembling of hands, cannot catch hold of my hands with her hands (separately) firmly; forgetfulness; complains of hunger.

Treatment: Placebo.

Diet: Sago and chicken-broth.

5 P. M. No fever; speaks rather intelligently; complains of heaviness of head; palpebral conjunctivitis; no stool; tongue now moist; she has taken some sago and milk just now.

18-11-93. 9 A. M. Temperature, 97.6° F.

Pulse normal; better; appearance healthier; speaks well; passed one loose stool yesterday about 11 A. M.; upper extremities stronger; can hear better.

Treatment: Placebo.

5 P. M. One loose stool about noon; temperature now 98.2° F.: pulse slightly quick; tongue moist, but furred, as seen before: hungry.

19-11-93. 9 A. M. Temperature, 97.6° F.

Pulse slightly excited; one loose stool yesterday; itching and boring of nose with fingers; tongue moist, slimy.

Treatment: *Merc. sol.* 6, as above, to be taken twice daily.

Diet: Chicken-broth and barley.

5 P. M. Temperature, 100.4° F.

No stool to-day.

20-11-93. 9 A. M. Temperature 97.6° F.

Pulse almost normal. Tongue moist and colored with *Pâu*-juice; hears easily; conjunctivitis less; no stool yesterday and to-day, morning. Continue medicine.

Diet: Sago and sugar candy.

21-11-93. 10 A. M. Temperature, 97° F.

Pulse normal; tongue moist and colored with *Pâu*-juice; easily hears and speaks; answers diligently; rather cheerful, seen smiling once; passed one soft, unctuous, black stool yesterday at about noon; can crawl up in the house from the veranda and from inside the house to the veranda. Palpebral conjunctivitis lessening.

Treatment: *Merc. sol.* 6, as above, once daily.

Diet: Sago and sugar candy.

22-11-93. 11 A. M. Temperature, 97° F.

Pulse normal; no stool yesterday; appetite well; speaks well; answers diligently and looks cheerful. Continue medicine and diet as above.

23-11-93. 6 A. M. Sitting, talking and is cheerful; only heaviness of head and a sort of buzzing in ears; no stool these three or four days; taken rice.

Result: Recovery.

Remark: She was under treatment 12th to from 23d November, 1893, including a period of twelve days. Medicine (*Merc. sol.*) given on the

12th.	6 doses,	half a drop a dose.
13th.	6 doses,	“ “
19th.	4 doses,	“ “
21st.	2 doses,	“ “
	<hr/>	
	18 doses,	“

Making nine (9) drops in all for the period of twelve days under treatment.

Month, Day.	TEMPERATURE.	
	A. M.	Rise.
12-II-93,	10:00,	102.6° F.
13-II-93,	10:30,	102.8° F.
14-II-93,	10:30,	101.6° F.
15-II-93,	7:30,	100.6° F.
16-II-93,	9:00,	98.6° F.
17-II-93,	9:30,	98.6° F.
18-II-93,	9:00,	97.6° F.
19-II-93,	9:00,	97.6° F.
20-II-93,	9:00,	97.6° F.
21-II-93,	10:00,	97° F.
22-II-93,	11:00,	97° F.

In this patient the defervescence took place by *lysis*, and not by *crisis*, as is well shown by the temperature and history of the case. Got no relapse and enjoying perfect health (writing in the second week of May, 1895).

Case No. II.—A Case of a Mammary Gland Inflammation Cured with Phosphorus.

A patient, named Tâliman, a female adult of about seventeen years; of fair color, thin, mother of two children, the younger one aged a few days less than a month; ill with inflammation of left mammary gland since yesterday; first seen on the 23d May, 1894, at about 7:30 A. M., with the following history and symptoms: Had on two other occasions during this short period after delivery inflammatory attacks of the same gland, with fever disappearing wholly on the third day; one normal stool yesterday and one stool this morning; pain in the gland, in the left shoulder; swelling about double the size of the other gland; black veins coursing upon the inflamed gland; *burning pain within the affected gland*.

Treatment: *Phos.* 30, two globules per dose, to be taken twice daily.

Diet: Rice, vegetable curry, milk (day meal); *âtâ*-bread, vegetable curry, milk (night meal). Fish or flesh not allowed.

24-5-94. 6:50 A. M. No burning pain; pain less; swelling less; bowels moved yesterday. Continue medicine and diet.

25-5-94. 8 A. M. Improving; better than yesterday; bowels moved yesterday. Continue medicine and diet.

Result: Recovery.

Remark: *Phosphorus* in inflammation and abscess, with or without fistulous openings of the mammary glands and in the treatment of axillary buboes, is, according to my experience, the best medicine we possess. In our present case the result is a satisfactory one. No more medicine, no more relapse.

Case No. III.—Ophthalmia Cured with *Rhus venenata*.

One, Peâr Ali, a Mahommedan, of about nineteen years, seen with ophthalmia of four days, on the 25th April, 1894, at about 11 A. M., with the following symptoms and history; Coryza for about eight or ten days, unilateral, no running, but drops of watery discharge from nose during lachrymation; no tightness of head; no headache; no deafness; no bad taste; tongue colored with *pâu-juice*; costiveness eight or ten days; ophthalmia, palpebral conjunctivitis, itching of margins of eyelids, lachrymation; photophobia; dimness of vision or mistiness if eyes be rubbed, left eye more affected.

Treatment: *Rhus v.* 1x, half a drop a dose, a dose to be taken twice daily.

Diet: Rice, vegetable curry, and milk (day); *âtâ*-bread, vegetable curry, and milk (night).

27-4-94. 8 A. M. Bowels opened freely yesterday; aggravation of left eye-symptoms yesterday, but less to-day; lachrymation less.

Treatment: Placebo for three days.

Diet as above.

Result: Recovery.

Case No. IV.—Chest-Pain Cured With *Rhus. tox.*

A patient, a Mahommedan adult named Mozabbar Khan Chondhury, seen on the 13th April, 1894, after evening, with symptoms as follows: Pain pressive, felt in movement, especially in deep inspiration; two free stools to-day. No spitting of saliva which he gets usually on other occasions of his illness.

The symptoms are more of *Rhus. v.* than those of *Rhus. t.*, but *Rhus. v.* not being ready I gave *Rhus t.*

Treatment: *Rhus. t.* 6, a drop a dose, to be taken twice daily.

Diet: As usual with no change.

14-4-94. After evening, pain diminishes after first dose. Going on well.

Treatment: *Rhus. t.* 6, as above.

Diet as above.

17-4-94. After evening, very slight pain remaining.

Treatment: *Rhus. t.* 6, as above.

Diet as above.

Result: Recovery.

Remark: Here is something new (as it appears to me) for the reader and the Homœopathic medical practitioner to learn a good result by chance. I was rather for *Rhus. v.* than *Rhus. t.* which cured the patient. The patient was under treatment for five or six days then he got cured. This fact may beget an idea that the cure was Nature's unaided property, but the history of the case goes against that when we see our patient getting immediate relief after the first dose of the medicine. I hope *Rhus v.* would have cut short the illness with a shorter period than taken by *Rhus. t.*

Case No. V.—Fit Cured with Ignatia.

A patient, the youngest daughter of Afseruddin Khan Choudhury, aged about two years, fair and thin; not vaccinated; father salivated; seen on the 27th of March, 1894, at about 8 A. M., with the following history and symptoms:

Chronic constipation; thread worms; fit when she cries but not with every time of crying and very seldom; fit with bluish discoloration of face; eyes open; itching of nose.

Treatment: *Ign.* 6x, two globules per dose, a dose to be given once a week.

Diet as usual. Dry cocoa-nut pulp* with sugar candy.

A remark in my case-book dated the 28th of August, 1894, "one or two doses totally cured the child."

Remark (writing in May, 1895): No more fits as yet.

Case No. VI.—Another Case of Intermittent Fever Cured with Baryta. Carb.

A patient, named Euâet Ali, writer's boy-servant, aged about fourteen years, black, dwarfish, seen on the 8th of April, 1895, at about 10 A. M., on the fifth day of his illness.

Characteristics of the case:

Type: Quotidian.

* Dry cocoa-nut pulp and sugar candy are a good article of diet for those who have habitual constipation with thread worms.

Time: 11 P. M. yesterday; after evening at about 8 P. M. previous day.

Podrome: Aching of limbs: joints of fingers, elbows, knees.

Chill: Slight; about two hours; *no thirst; horripilation.*

Heat: Whole night, with alternations of chills compelling him to cover himself now, and, then to throw away coverings, so on whole night; *no thirst.*

Sweat: When covered for chill with commencing heat which compels to throw away coverings. *No thirst.*

Apyrexia not complete, tightness of head. No thirst after taking some sugar candy. Bowels not opened yesterday and to-day. Urine yellowish. Tongue anterior part reddish with raised up red papillæ, and posterior part white. Pupil dilated. No history of worms. No nausea. Sleeplessness but sleepy. Vaccinated. Ringworms for five or six years. Hungry but cannot eat. Feels weakness in walking, tired and weary. Last day he took rice, he had good appetite but no sooner had he took few mouthfuls he felt satiety. Cervical glands enlarged. Scabies on limbs. Enlarged but soft spleen. Pain on percussion on right hypochondrium. Skin hot to touch.

Treatment: *Bar. c.* 3 (trit); about one grain a dose, to be taken a dose twice daily.

Diet: Sago and sugar candy.

9-4-95. 8:10 A. M. No fever last night; one stool at evening after the second dose of the medicine, stool being normal. Tongue better. Appetite good.

Treatment: Placebo.

Diet: Hand-made *âtâ*-bread and sugar candy.

10-4-95. 7:20 A. M. No fever last night; no fever since medicine taken; one normal stool this morning. Good sleep last night. Urine getting clear gradually. Much hunger. Scabies healed up; but ringworm continuing.

Treatment: Placebo.

Diet: Rice, vegetable curry.

11-4-95. 11 A. M. No more fever. No more medicine. Ordered to bathe to-day.

Result: Recovery.

Remark: Any one may envy here the riches of Homœopathy. Quinine, the so-called sure weapon of Allopathy to meet intermittent fevers in any shape and form, is even to an outward observer no better than our present medicine (*Bar. c.*) in the form of intermittent fever mentioned above. The first day the

patient took two doses of the medicine of about two grains in all and there was no fever any more—bowels opened and scabies healed up—but it produced no effect on the ringworm.

A. W. K. CHOUDHURY.

Satkhira P. O., Calcutta, India.

ON CALCAREO RENALIS PRÆPARATA IN GRAVEL.*

By Dr. Bredenoll, at Erwitte.

My professional engagements do not permit me to spend much time in writing; the following case, however, I deem worthy of note.

Born of healthy parents, I remained quite healthy until my twenty-third year. I had no trouble in getting over the diseases to which children are generally liable. Some of them, scarlet fever and measles, attacked me when I was already engaged in my professional career. I am now fifty-seven years old.

In the year 1808, while vaccinating children, I caught the itch from one of them. Although I washed myself with soap water immediately, yet a pustule made its appearance in about eight days, between the little finger and ring finger of the left hand; afterwards a few more came on at the same place, and some others between the ring and middle finger. I hastened to repel this eruption as fast as possible, which I unfortunately succeeded in doing within the period of eight days.

This suppression of the eruption was followed by a host of diseases: Liability to catching cold; frequent catarrh; rheumatic complaints; toothache; attacks of hemicrania, with vomiting; continual heart-burn; hæmorrhoidal complaints, at times tumors, at times fluent; excessive emaciation; afterwards a pustulous eruption over the whole body; painful swelling of the joints, arthritic nodosities in different places; a copper colored eruption

* The October, 1894, number of the RECORDER contained a short extract from an old paper by Dr. Bredenoll, on the use of *Calcareo renalis præparata*. It was published to show the esteem in which the *Chronic Diseases* was held by the older physicians, but incidentally it set up a demand for the preparation, none of which was to be had. Through the courtesy of S. Clifford Mitchell, M. D., of Chicago, Messrs. Boericke & Tafel are now able to offer to the profession two triturations of renal calculi, one *phosphatic* (6x) and one *uric* (6x). The RECORDER also reprints the paper by Dr. Bredenoll in full, as it appeared in *The Homœopathic Examiner* for 1846.

in the face, especially on and about the nose, which made me look like a confirmed drunkard, etc., etc.

These affections tormented me more or less, until in the year 1833 I visited Hahnemann at Coethen, for the purpose of studying homœopathia with him. Hahnemann treated me for three weeks, and I continued the treatment at my native place. My health improved steadily, and at the end of a year I considered myself cured. This lasted until October, 1836, when I was attacked with violent colic in one night. The pain was felt in the region of the left kidney, lancinating, pinching, sore; retching ensued, resulting in vomiting of mucus, and lastly bile. I took a few pellets of *Nux v. x*; after this the pain disappeared gradually, and the vomiting ceased. Next day I was well again. Two days afterwards I discovered gravel in the urine, and my sufferings had vanished.

One year elapsed in this way; however, I occasionally experienced an uncomfortable sensation in the region of the left kidney, especially when riding on horseback, driving in a carriage, or walking fast; I took at times *Lycopod.*, at times *Nux v.*, in proportion as one or the other of these two remedies appeared indicated.

In November, 1837, I was suddenly attacked with vomiting, accompanied with violent lancinating, sore or pinching pains in the region of the left kidney. The horrible anguish and pain which I experienced extorted from me involuntary screams; I was writhing like a worm in the dust. A calculus had descended into the ureter, and had become incarcerated in it. Repeated doses of *Nux* relieved the incarceration, and I distinctly felt that the calculus was descending towards the bladder. After twenty-four hours of horrible suffering the vomiting ceased, the pain became duller and was felt in the region where the ureter dips into and becomes interwoven with the tissue of the bladder; it continued for three days, and then disappeared all of a sudden (the stone had now got into the bladder). Thirty-six hours afterwards the calculus entered the bulb of the urethra. I felt a frequent desire to urinate; the urine was turbid and bloody, until at last a calculus of four grains made its appearance in the urine. After this, I frequently passed gravel and calculi, at times with slight, at times violent pains, sometimes accompanied with vomiting; I kept the larger calculi, with a view of using them hereafter as a curative agent.

Professor Nasse, of Bonn, where my son studied medicine at

the time, has analyzed the calculi, and has found them to be the urate of lime. He advised me to take *Merc. dulcis* and the *Sulphate of Soda* for some time; it is scarcely necessary for me to say that I did not follow his advice.

On the fifteenth of February, 1893, I felt the precursory symptoms of a new attack, which really did break out in all its fury on the 16th, and continued on the 17th and 18th. I now caused 5 grains of my calculi to be triturated in my presence with 95 grains of sugar of milk, according to the fashion of Hahnemann, and took $\frac{1}{2}$ grain in the evening of the 17th, another $\frac{1}{2}$ grain in the morning of the 18th. On this day I passed very turbid urine with a considerable quantity of gravel; however, in the region where the ureter dips into the bladder, I experienced an uncomfortable sensation, but was well otherwise. On the 19th I was obliged to visit a patient at the distance of two miles; on my journey I felt that the calculus was descending into the bladder; the urine which I emitted shortly afterwards was very turbid and bloody. That same evening, after returning home, I felt the stone in the bulb of the urethra, and on the morning of the 20th it came off during stool, but unfortunately got lost among the excrement. To judge from my feeling, it must have been larger than any of the preceding calculi, and also rougher, for its passage through the urethra was very painful and followed by an oozing out of blood.

The uncomfortable feeling in the region of the left kidney never disappeared completely; it became especially painful when pressing upon that place, when riding on horseback or in a carriage, when taking exercise or turning the body. It seems to me that the whole pelvis of the kidneys must have been full of gravel and calculi. I now took $\frac{1}{2}$ grain at intervals of eight days; the result was that I passed gravel and small calculi at every micturition. On the 30th of November my condition got worse, and I continued to take $\frac{1}{2}$ grain of *Calc. ren. præp.* at longer or shorter intervals, until Oct. 18th, 1840. After this period I ceased to pass any gravel, and I felt entirely well. On the 3d of February I passed some more gravel. Another dose of $\frac{1}{2}$ grain of *Lapis renalis*; another dose on June 3d. On June 17th precursors of another attack; on the 18th vomiting accompanied by all the frightful circumstances which I have detailed above; the vomiting of mucus, bile, ingesta, continued at short intervals until the 26th; my tongue was coated with yellow mucus, and my appetite had completely disappeared.

Bryon., *Nux v.* and *Pulsat.* relieved the gastric symptoms; on the 26th, in the afternoon, I passed a calculus of the size of a pea. I now resume the use of *Calc. ren. præp.* in $\frac{1}{2}$ grain doses, at irregular intervals. On the 23d of October I passed a calculus of the size of a pea, without vomiting; there were no other precursory symptoms except the uncomfortable feeling in the region of the kidney a few days previous. I have felt well ever since, and free from all complaint, although I continue the occasional use of $\frac{1}{2}$ grain of *Calc. ren. præp.*, lest I should have a relapse.

Every time I took a dose of *Calc. ren. pr.* I found that the so-called tartar on the teeth became detached a few days afterwards. A short while ago a nodosity hard as stone, which had appeared on the extensor tendon of the right middle finger about nine months ago, and which threatened to increase more and more, disappeared. I consider the tartar on the teeth, calculi renales and arthritic nodosities, very similar morbid products.

In conclusion I beg leave to offer the following remarks:

1. Hahnemann's theory of psora is no chimera, as many theoreticians would have us believe. I was perfectly healthy previous to my being infected with itch. What a host of sufferings have I been obliged to endure after the suppression of the itch!

2. Isopathy deserves especial notice.

It is true, the most suitable Homœopathic remedies afforded me relief; the incarceration of calculi in the ureter especially was relieved by *Nux*; but they were unable to put a stop to the formation of calculi; this result was only attained by the preparation of *Calc. ren.*

EPIDEMIC AND ENDEMIC DISEASES.

The originator of the terms *epidemic* and *endemic*, as applied to the fevers from which mankind suffer, may be congratulated upon having introduced two very useful words into the science of medicine. As usually understood, the latter word signifies a localized disease such as ague or typhoid fever, whilst the former comprehends all those fevers which spread over the whole country, or even throughout the world, having no reference to the peculiarities of any particular district. The epidemics known as *influenza* afford a good example of the latter.

These definitions, then, answer very well and the two terms need not be superseded by others. If the theory which I myself hold with regard to the origin of these diseases be correct, then the words *mundane* and *supra-mundane* would more accurately define them: for I hold that all the *endemic* diseases originate in our own world, whilst the *epidemic* diseases all originate in the regions above and around us. This distinction will be further noticed and explained as we proceed.

Of all subjects connected with the domain of medicine there can be none more interesting than a study of the causes which produce epidemic and endemic diseases. And besides the *scientific* interest of the investigation there is also the *practical* bearing which it may some day have upon our therapeutics.

This is partially true now, as witness the distinction now made between typhus and typhoid fever and the consequent difference in their respective treatment. A large proportion of our time must ever be spent in the treatment of these epidemic fevers, and there can be no doubt that we may, if we will, be better equipped to contend with them than our predecessors were. Still, we have by no means arrived at the degree of perfection which is possible: new truths will yet be discovered, and old errors will in time be abandoned.

When we begin to consider the origin of the poisons which produce the various forms of fever it is surprising how numerous are the questions which present themselves.

For example:

1. From whence do these poisons come?
2. How many of them are there?
3. Are they all of mundane origin, or are some of supra-mundane origin?
4. Are they all germs, or are some of them gases?
5. What number of the diseases which they produce are preventable and what number are non-preventable?
6. Are the effects of a particular poison always identical?
7. What determines the death of some patients and the recovery of others?

(A somewhat delicate question to ask, perhaps.)

8. Are there antidotes at our command which will neutralize these poisons and render them innocuous?

Other questions might be asked which we should find it difficult to answer. We are apt sometimes to think we know a

great deal, and this may be true; but what an immense number of things we are still ignorant of!

Classification.

It is of the utmost importance that we should have something like a correct classification of these epidemic and endemic fevers. The first and most important division of all is the one just indicated, viz., the separation of the *endemic* from the *epidemic*. The importance of this division, in every individual case of fever that comes before us, will be obvious when we consider how different must be the treatment which we ought to employ. And this differentiation is not always an easy matter; yet it is very desirable that it should be made. I hope the reader will bear in mind that endemic diseases are of *mundane* origin, whilst the epidemic are of *supra-mundane* origin.

As an example of the great desirability of separating these two classes of fevers, I will quote a case which came under my own observation and treatment. I was attending a little girl for what I supposed to be diphtheria; that is, the diphtheria of the epidemic or supra-mundane variety. The throat was in a swollen and ulcerated condition; there was enlargement of the cervical glands; and the temperature was 105°. I gave the medicines which I had always found answer in such cases; but they proved altogether useless. It then occurred to me that I would treat her as for typhoid fever, and accordingly gave Fowler's solution. The effect of this medicine was wonderful, for the girl rapidly recovered. Before giving this arsenical solution I had ascertained that there was often an offensive smell from the kitchen drain, and that this little girl often used to stand close to it. This case forever impressed me with the importance of knowing whether any particular fever was of an *endemic* or of an *epidemic* nature. Of course it is very unusual to have such a throat as the one mentioned in a case of mephitic poisoning, but it appears that such may happen.

There are two questions which will naturally present themselves to our minds at the outset: 1. Is the present nomenclature of these fevers the best which can be devised? 2. Does this nomenclature sometimes lead us astray in our treatment of them?

To the first question we must answer, No; to the second, Yes. And yet how difficult it is to have anything like a perfect classification. Still, we ought to make some improvement upon the

present one. The first step would be to sweep away a few of the old terms, some of which have no distinctive meaning, and some of which are only confusing and misleading. Take, for instance, the fever usually known as *typhoid*. But of this I shall speak presently.

Nearly all epidemic, and *all* endemic, diseases are attended by the symptoms which, grouped together, constitute what is known as a fever. Yet, curiously enough, if we look at the index of books treating on medicine, we shall find under the head of Fever only four kinds mentioned, viz.: intermittent, remittent, typhus and typhoid. Thus the fevers called measles, diphtheria, smallpox, whooping cough, etc., are not in the list, although all these are truly fevers.

Endemic Diseases, or Fevers.

We will take these first, as they are the products of what may be called home-made poisons; i. e., poisons originating in our own world. We cannot find fault with the etymology of the word endemic; it will do very well, as, when followed by the word *diseases*, it signifies those which are *in* or *amongst* the people.

To classify endemic diseases we need only two terms to include the whole of them. These are (1) malarial, (2) typhoid; the first being of vegetable origin, the second of animal origin.

Perhaps it will be thought that this division is not sufficiently definite; that we ought to distinguish between intermittent, remittent, yellow, conjestive, and perhaps others in the old nosology. But these terms tend to mislead and confuse both student and practitioner. It would surely be sufficient to add any adjective we please when we wish more definitely to describe the type of the disease. All those mentioned above owe their origin to malarial emanations, and it is sheer stupidity to speak of them as though they were fevers of an essentially varied character. We have always the *malarial poison* to deal with, however this may be modified by locality or by idiosyncrasy.

1. *Malarial Fevers*. How many kinds of poison, or variations of a poison, there may be which are productive of malarial fever it is impossible to tell. It is generally believed that the poison that causes malarial fever originates in decaying vegetable matter, and this undoubtedly is one mode of production. But may there not be other modes? Is it not possible for certain vegetables—trees, shrubs, flowers—to give off a peculiar aroma

whilst in their healthy condition, which to some persons may prove a poison? A person may have what is called hay fever and yet no hay is to be found in the neighborhood; and even if it was it cannot be said that this is a decaying vegetable. Therefore we may conclude that there are other vegetable productions besides hay capable of producing diseased conditions. And this must be the *aroma* of the vegetable, whatever that may be.

Again, there may be yet another mode by which malarial poison is produced, one in which neither decaying vegetables of recent growth nor the aroma from living ones is the originating cause. There was a time when malarial fevers were prevalent in England, notably in the counties of Lincoln and Cambridge. What was the origin of this poison? The question is more easily asked than answered. If we say that the draining of the fens has diminished the prevalence of ague we know that *moisture* has something to do with the production of the poison. But this is not enough. If, as some believe, these fen lands were formerly covered by woods, then we may conclude that the mouldering wood has left certain poisonous gases behind, which, percolating through the soil, have given rise to malaria. It is said that during the draining of these fens ague increased, but afterwards the country was much more healthy. This is easy enough to understand, for the digging up of the soil would liberate the poisonous gases. Afterwards, a portion of these gases would find their way into the newly-made drains, and thus the locality would become more healthy.

To obtain a knowledge of all that can be known about malarial fevers there is, perhaps, no book giving a fuller or more intelligent account of them than that of Dr. I. G. Jones, of Cincinnati. True, it is not a modern book, the date of the second edition being 1857; and, as it is written by an Eclectic, we cannot endorse the treatment, although it appears to have been successful. The book is a large octavo in two volumes of 1,600 pages, and no less than 144 pages are devoted to malarial fevers. In a future paper I should like to make a few extracts from this book, for although the remarks may be old to some to others they will be new.

G. HERING.

London.

[TO BE CONTINUED.]

STORY OF THE PROVERS WHO ASSISTED
HAHNEMANN.

By Thomas Lindsley Bradford, M. D.

J. C. HARTUNG.

No data obtainable.

ADOLPH FERDINAND HAYNEL.

Hartmann says:* Hahnemann took two of his pupils to Coethen, Drs. Haynel and Mosdorf. Haynel led the life of a true nomad, was at Berlin at the first invasion of the cholera, then at Merseberg for the purpose of assisting Dr. Rummel, where I saw him again; finally he visited me in 1830, in Leipsic, where he provided himself with a large stock of Homœopathic medicines with the intention of going to North America; since which time I have not heard from him.

Hering says:† Dr. A. J. Haynel died at Dresden, August 28, 1877, æt. 81. He was an inmate of Hahnemann's family for more than ten years, and proved a number of remedies for him. About the year 1835 he came to America and resided first at Reading, Pa., then at Philadelphia. In 1845 he lived in New York, and still later in Baltimore, from whence he returned to Europe several years ago.

Hering thus speaks of Haynel in another place: One of the oldest of Hahnemann's pupils and indeed the first who was a member of his family—the only student living of the first Leipsic period of Hahnemann's career—Dr. A. J. Haynel—even now (1868) hale and hearty and actively furthering our cause—mentioned in a conversation with Dr. P. P. Wells that he had given *Spongia* in heart disease, etc.

Dr. Gray, in an address before the New York Hom. Med. Society, said that Haynel established Homœopathy on a firm basis in Baltimore as early as 1838.

Dr. Raue says: I knew Haynel having often met him at Dr. Hering's. He had been an inmate of Hahnemann's family and he had been engaged to Caroline, Hahnemann's daughter but for some reason the affair was broken off, and that is likely the

* *N. W. Jour. Hom.*, Vol. iv., p. 210. *Med. Couns.*, Vol. xi.

† *Hom. Times*, (N. Y.), Vol. v., p. 216

reason why Haynel left Hahnemann. While in Philadelphia he was very ill with typhoid fever and Hering treated him; he was at death's door when Dr. Hering was induced to give him just one drop of red wine on the tongue, and this was the turning point in the sickness and he commenced to get better. Hering was greatly pleased. When the cholera appeared in 1851 Haynel was in Baltimore and was quite successful with a certain remedy. He sent a box of powders containing this remedy to Hering, but did not tell him its name. Hering wrote asking the name, but Haynel refused it. What is the name? I will not tell. This caused a coolness between them that continued for some time. It was not long after this when Haynel went to live with his sister at Dresden. Then, no doubt remembering Hering's kindness, he repented of his refusal to tell the name of the cholera remedy and wrote to Hering and revealed the secret. The remedy was *Bryonia*. Haynel's sister's son went to Baltimore while he lived there, and he sought to start him in practice; but the young man was just from the universities of Germany and he preferred to practice according to his own belief.

Haynel was a quiet, reserved man, corpulent and with a smooth shaven face.

WRITINGS.

Analecta ad historiam circuitus sanguinis. Jenæ: Schreberi et soc. 1820.

GUST. and H. HEMPEL.

No data obtainable of either.

CHRISTIAN THEODORE HERRMANN.

Hering mentions Herrmann as the apostle of Homœopathy in Russia.* Rapou, writing in 1832, says: † I regret that I did not see in Brunswick Dr. Herrmann, who had for some time practiced in Russia and who has shown us the actual state of our method in that vast empire. (*Archives*, Vol. xiv., part 1.)

Hartmann says of Chr. Teuthorn and C. Th. Herrmann: ‡

* *Hahn Monthly*, Vol. vii., p. 175.

† Rapou's "Histoire de la doctrine med. homœopathique," Vol. ii., p. 600.

‡ "Geschichte der Homoopathie." Kleinert. Leipzig. 1863, p. 97. *N. W. Jour. Hom.*, Vol. iv., p. 184. *Med. Counsellor*, Vol. xi., p. 238.

They were not enthusiastic; after a time track was lost of them, so far as I am concerned, for in spite of careful inquiry I never heard their names mentioned in connection with Homœopathy, hence nothing further is to be said of them.

After careful search through the German journals it is impossible to find any record of the lives or death of these men.

CHRISTIAN GOTTLOB HORNBURG.*

Christian Gottlob Hornburg was born in Chemnitz in the Royal Saxon Erz-Geberge, October 18, 1793, where his father, who is still living (1834), is a stocking weaver. Quite early in his youth he attended the lyceum there, where he was educated with the intention of becoming a philologist and pedagogue; here he greatly distinguished himself.

He gained the prize offered by a learned society, through an original Latin poem. In the year 1813, without any means of his own, but trusting to the support of some philanthropic individuals, he visited the University at Leipsic in order to devote himself to the study of theology. But in the course of one year already he developed a decided inclination for medicine, and encouraged by a well-meaning and intelligent friend to whom he communicated his intention namely, the merchant Becker in Chemnitz, who promised to support him in this new career, he passed over to the exclusive study of the healing art.

Besides other medical lectures, he attended with particular preference those of Dr. Hahnemann, who had then lately arrived in Leipsic from Torgau and commenced his lectures. With these lectures and with the correct views thus acquired concerning the nature and quality of medicine as practiced heretofore, and with his acquaintance with the new reformed art of healing, a new life began for him. It could not be but that his clear, vivid and free spirit should enter most deeply into these views. Unfortunately these studies were suddenly and violently interrupted by the death of his patron whose support alone had enabled him to continue at the University, and being deprived of all financial aid he was compelled to leave Leipsic and to return to his native city, where he found for some time a scanty support through his labors in the office of a lawyer of that place. But as favorable projects for continuing his studies

* By Dr. Stapf in *Archiv fur die hom. Heilkunst*, Vol. xiv., pt. 2, p. 120. See also, *Allg. hom. Zeit.*, Vol. iv., p. 78.

appeared after a time, he returned to Leipsic to complete his medical course.

A few years later he honorably passed the theoretical examination as baccalaureate, after which he attended the public institutions, the lying-in hospital and the clinic, during the years 1818 and 1819, while he pursued with increasing zeal the study of Homœopathy. Intimately acquainted with this new doctrine, and advanced in many ways by Hahnemann's personal intercourse and favor, he even then accomplished many Homœopathic cures with success and fame, and proclaimed himself, with his natural frankness, in his own forceful manner, only too regardless of consequences, in favor of the new method of healing and opposed to the old.

By this, as well as by his successful cures of certain cases given up by other physicians, he drew on himself a number of enemies, but also gained a sort of fame and sympathy, and even attracted the notice of the authorities. His course of action, which was not indeed strictly legal, but which in others, who were not devoted to Homœopathy, was nearly always permitted to escape reproof, often gave offense, and became the occasion of many disagreeable reminders and persecutions. No occasion was allowed to pass to denounce him on account of his unauthorized cures, because he had not yet acquired the license for practicing. Still how many *baccalauræi medicinæ* can do this in Leipsic quite openly and without fear; but these are of course honest adherents of the legitimate (?) art of healing!

Thus he became involved in the most disagreeable judicial trials and punished with fines, yea, with imprisonment. Yea, in November, 1819, his Homœopathic case of medicines was by order of the authorities taken from him by the actuary and the apparitor of the University, and there is a legend that the same was formally buried in the Paulina cemetery.

During the years 1814-1820, Hornburg did yeoman service with respect to extending our knowledge of remedial agents, as he, with great self-sacrifice, acute penetration and conscientious fidelity, instituted provings of the medicines on himself; the proofs of this are abundantly found in Hahnemann's "*Materia Medica Pura.*"

Several attempts to secure a medical diploma in various universities failed, as they wished to treat him most rigorously and to make the matter as difficult as possible since Hornburg

had an ill-name on account of his love for Homœopathy. It may be, indeed, that Hornburg may not have acquired and retained the highest degree of readiness in the Allopathic doctrines, which he did not esteem very highly, and which is nevertheless insisted on when an examination is made especially severe. In the year 1818 he married a Miss Kuettner, with whom he lived in contented wedlock, but without any children.

The zeal with which Hornburg lived and worked for Homœopathy, his solid knowledge in this department, his many successful cures, and especially his openness and readiness to give information to every searcher after truth, gained him many friends, especially many physicians in other places, who desired to become better acquainted with Homœopathy, turned to him and always returned from him well instructed and satisfied. Thus in living intercourse with the friends of Homœopathy, in restless practical activity, undismayed by his many persecutions and trials, he lived till the year 1833, and, as he was naturally of a vigorous bodily constitution, he would have retained his health for yet a long time, but that, in consequence of the grippe which was epidemic in the spring of 1833, and by which he also was seized, a trouble of the chest that had been latent in him now developed more and more. He succeeded, indeed, by the use of the most appropriate remedies, in substantially improving his condition; but a violent emotion which seized him on hearing of the publication on August 6th of a judgment condemning him to two months' imprisonment acted so injuriously on his health, already so weakened, that he was seized on August 9th with a violent hæmorrhage just as he was about to travel to Coethen for the celebration of August 10th; the hæmorrhage was several times repeated the same day.

This judgment against Hornburg was in consequence of a criminal trial on account of his treatment of a woman suffering from a violent attack of pneumonia, and who did not die from his treatment, but only after she had for nine days been treated by a medical officer who was known to be one of the most violent opponents of Homœopathy. The disease of Hornburg developed with an invincible violence and changed into actual pulmonary consumption, of which he died on February 4th, 1834.

Attended by his more intimate friends and a great number of

the inhabitants of Leipsic, his earthly remains were entombed on February 7th.

As a physician he was distinguished by a deep and active love for his career, by a rare acuteness and clearness of observation, exact knowledge of Homœopathy, undisturbable equanimity, firmness and security in action whence he enjoyed the fairest success and extended recognition in a practice which was very wide and extended quite beyond the boundaries of Leipsic, yes, of Saxony. As a *man* he was efficient, sincere, open, liberal, and zealous. When the advancement and defense of what he considered to be the truth was at stake, he indeed not seldom appeared to be regardless of others; and the great good that was in him was enveloped in forms so rough, and he violated the laws of a higher and more subtle refinement, and of the necessary prudence and urbanity which may well be conjoined with the purest and most ardent zeal for the truth to such a degree that he only too often gave his friends as well as his enemies occasion to lament these foibles.

Hering says:* Next came the great practitioner amongst the poor, Chr. G. Hornburg, one of the oldest disciples of Hahnemann, but who never could obtain a diploma, and therefore had to practice under certain persecutions (his box with medicine was once buried by the authorities with great eclat in a public place). He it is whom we have to thank for the first cures of pleurisy and pneumonia with Aconite. He had proved on himself and others, particularly women, for the second volume of the *Materia Medica Pura*, Causticum.

Rapou says of Hornburg: † Christian Hornburg was among the number of the students at Leipsic who composed the first audience of Hahnemann. He was like Franz, one of those generous and rare dispositions who adopt frankly that which they take to be the truth, and do not hesitate at any sacrifice to reach it. Each one of these students followed a different branch of knowledge. Caspari devoted himself to didactic writings, Franz to pharmaceutical researches, Hornburg selected a way more direct, sure and efficacious—that of practice. Filled with the experience of Hahnemann he became a brilliant and successful practicing physician. To him belongs the glory of greatly contributing to the triumph of our doctrines by clinical results. It is the success that extended the growth of the

* *Hahn. Monthly*, Vol. vii., p. 175.

† Rapou. "Historie de la doc. Hom.," Vol. ii., p. 141.

Homœopathic laity, and gave zeal to effectually counterbalance the fury of the Allopathic physicians. He died in 1833 of a neglected phthisis.

Hartmann says:* Hornburg was a very clear-headed fellow, of humble origin, who had been educated at the Lyceum at Chemnitz, where he had managed to not only pay his fees, but to assist his very poor parents by singing in the choir and by tutoring. He lacked in finish, for he never had been able to associate intimately with persons of thorough culture and refinement; during the time of my acquaintance with him he never could readily lift himself above the common place, at least not for any length of time, without feeling the pressure of his situation, and thus he found it difficult to move at ease in a refined circle. His remarkable conversational powers, however, enabled him to cover this defect, since he knew better than anyone else to imitate and enact ridiculous situations, scenes and memorable incidents and stories with such a humor and power of mimicry that no one ever thought of weighing his uncouth expressions, figures of speech, or gestures.

If later this weakness became obvious, his happy cures stood him in good stead—a very talisman—and pleaded for him powerfully. He thus gained a self-reliance and a certain tact in his appearance which at times became an almost recklessness; it was nothing unusual during his almost daily walks to one of the suburbs of Leipsic, where he commonly met prominent citizens, also daily guests, to make in the heat of conversation very imprudent speeches concerning the professors and officers of the medical faculty; if these remarks were received without dissent they were evidently repeated, as might be inferred from the severity of his examinations. This course on the part of his examiners should have brought him to his senses and should have led him to be more cautious in his speech, but his intense zeal for Homœopathy, his firm faith in its superiority over the older methods of cure, the stimulating effect of Hahnemann's lectures, the real pleasure manifested by Hahnemann when he repeated to him the sharp witticisms passed, only tended to confirm him in his chosen path; and thus his speeches grew in boldness and became still more cutting, led to his failure in his second examination, the proper examination for the doctor's de-

* *Med. Counselor*, Vol. xi., p. 198. Kleinert's "Geschichte der Homöopathie," p. 90.

gree, and developed such a bitterness of wrathful indignation, that to the very day of his death he could not rid himself of it.

It was a pity about Hornburg, for in him a great and talented mind was lost. He did not use a very large number of remedies, but the few he employed he knew so thoroughly, and by constant use had so fully learned to understand their sphere of action, that with the few he accomplished much more than most others could with a large number of remedies less perfectly understood. Of the so called antipsorics he only used *Sulphur*, *Calcarea*, *Silicea*, *Nitric acid* and a few others.

But he was eminently practical, and nature had been lavish to him in the bestowal of her gifts; often a few questions enabled him to recognize with certainty the disease, and to select, with unerring precision, the correct remedy. To him the daily duty of a physician seemed a recreation, a matter of play; but in the sick room one could see at a glance the seriousness with which he devoted himself to his art, and one could not help loving and respecting him. With a keenness of sight peculiar to himself he often selected the seemingly least important symptom as the one especially characteristic and most valuable in the selection of the remedy, and he seldom erred; with the same intuitive accuracy he would make the most daring prognosis, and point out medicinal aggravations from beginning to end. I have often witnessed this, and have had many a warm discussion with him to combat this spirit of daring in him; but I never succeeded, for he would always meet me with a long list of satisfactory cures, looking upon unfavorable cases as the exception to the rule. He demanded of others the same ability, and if they were not able to command the same measure of perfection he deemed them lazy; for it never occurred to him that he might be gifted above them. As a man, to know Hornburg was to love and revere him; he was a faithful friend, good-natured, sympathetic, frank, obliging, ever ready to counsel and to aid; and only his manifold bitter experiences, the complete ignoring of his true worth, the slanders which followed him, the ever-recurring intrigues which beset him, the whisperings of hate which he was forced to hear, furnished the first impulse to that growing distrust of all men, even of his best friends, which cast such a shadow upon the last few years of his life. This was the man who, by his example and by his introducing me to Hahnemann, exerted so great an influence upon my whole life. Perhaps even without him my inclination might

have drawn me into the medical profession, but it is very doubtful if I should have embraced Homœopathy; for in those days to express faith in it exposed the student to all manner of ridicule.

Hartmann says that Hornburg was the earliest friend of his boyhood, and that when he at eighteen repaired to the Leipsic University he became Hornburg's roommate, and in three months' time had been introduced by him into the inner circle of Hahnemann's patients.

Lorbacher says:* Hornburg and Stapf were the two to first become closely connected with Hahnemann. Hornburg is represented to us as a man of great gifts, of extraordinary practical talent, which gave him much certainty in the diagnosis of disease, as well as in the discovery of the right remedy, so that he soon obtained the repute of a successful practitioner. But he was deficient in refinement; his boyish manners, as well as his disrespectful behavior, especially toward all opponents of Homœopathy—he spared neither professor nor medical authorities—created for him many enemies and drew upon him much persecution, whereby the latter part of his life was much embittered, and may have been in some respects unfavorable to the spread of Homœopathy. And yet I am not prepared to say that occasionally a rude attack at the proper time may not be more effectual in advancing a cause than a delicate diplomacy. At all events, Hornburg, by his contributions to the provings of medicines, as well as by his mode of directing the attention of students to Homœopathy, has rendered permanent service to our cause.

THE MISSOURI-VALLEY HOMŒOPATHIC MEDICAL ASSOCIATION.

Editor of HOMŒOPATHIC RECORDER.

Arrangements are being perfected for a grand Fall Homœopathic rally at Kansas City, at the annual meeting of the Missouri Valley Homœopathic Medical Association. The dates will be about the 8th and 9th of October, and a fine programme is being prepared, and the success of the meeting is assured. The meeting in Omaha last fall was an enthusiastic success.

This society was founded to bring together the Homœopathic

**Brit. Jour. Hom.*, Vol. xxxii, p. 454.

fraternity of the several States along the Missouri Valley. Dakota, Iowa, Nebraska, Missouri, Kansas, and all other States desiring to enter. We have ample material for a most prosperous society, and there is no other meeting in the fall with which we will conflict.

Please to give this society the benefit of an announcement through your columns to your large list of readers. The names of the officers of this society are found upon the letter head herewith, and with one exception ("that's me") are representative men from the different States. Complete details, by your courtesy, will be announced in your September issue.

The names on the "letter head" are: President, D. A. Foote, M. D., Omaha; Vice President, T. H. Hudson, M. D., Kansas City; Secretary, W. A. Humphrey, M. D., Plattsmouth, Neb.; Treasurer, C. F. Menninger, M. D., Topeka, Kan.; Censors, A. H. Dorris, M. D., Lincoln; H. P. Holmes, M. D., Omaha; P. J. Montgomery, M. D., Council Bluffs; Legislative Committee, W. H. Hanchett, M. D., Omaha; Benj. F. Bailey, M. D., Lincoln; A. P. Hanchett, M. D., Council Bluffs.

Yours truly,

D. A. FOOTE.

Omaha, July 19, 1895.

THE LOCO-WEED.

LAS VEGAS, New Mexico, June 26th, 1895.

MESSRS. BOERICKE & TAFEL.—*Gentlemen:* I send you by mail a package containing two or three fresh plants of the celebrated Loco-weed, containing the root, stems, stalk and seeds of the plant as it stands on the prairie of this arid region at maturity. My attention was first called to this plant last winter during January, soon after my arrival in the territory, as it was about the only green thing showing itself above the snow which covered the ground at that time for two or three days. Some cattle had been eating the weed, and as I approached them they tried to move away; but in spite of their efforts they backed right towards me, and in their effort to escape made some mirth-provoking maneuvers. I observed them closely for more than an hour and was reminded most forcibly by their actions of the symptoms produced by the disease of the spine and nervous system of the human, known as Locomotor ataxia or Tabes dorsalis. I have noticed horses and cattle many times since under the influence

of the weed and always observed the same peculiar actions and effects. I have prepared the mother tincture from the whole plant and seeds and have given it in appreciable doses to two persons, and am now engaged in proving it on a third case. As soon as I can complete the proving I will complete my paper which I have had for some time under consideration, and send it to the journals. For the present I think it is of enough importance to the members of the profession for me to send you some of the plant, as it is ready and mature for use as a medicine, so that you can prepare and have it ready for use in such cases as any physician may desire to use it.

For the present I will only give a few of the leading symptoms produced by the *Locoweed*:

Brain and Mind: Stimulation of mind; pleasant intoxicated feeling. Satisfied indifference to all influences and interests.

Head: Full, warm feeling about the head.

Eyes: Strange feeling of fullness about the eyes, with sight obscured, so that it appears that one is looking through clear water which produces about all of the seven prismatic colors, red, orange, yellow, green, blue, purple and violet.

Paralysis of nerves, and muscles of the eyes, producing amblyopia.

Neck and Back: Numb, pithy or woody feeling about and in the spine.

Lower extremities: Loss of power to control movements of body or limbs.

Swaying, staggering gait.

Reflex action of tendon-patella lost.

General: Weakness and insecurity of all powers of locomotion.

Feeling of intoxication, with almost entire loss of vision.

Amblyopia: sense of touch greatly weakened.

Add. eyes; Pupils contracted and do not respond to light.

Eyesight lost with feeling as if in consequence of long exposure to strong, arc-electric lights.

WM. D. GENTRY, M. D.

SPASMS OF THE DIAPHRAGM IN A HORSE.

On July 4 a gelding belonging to Mr. Oberneeser was taken ill after a very long drive. The symptoms were: Pulse, 68, small and wiry. Respiration, 45 per minute, strong; spasmodic.

irregular action of the diaphragm; breath drawn in forcibly, attended with a snuffing noise at the nostrils, and as rapidly expelled without noise. To have 10 drops of *Stannum*, 6th dilution. One hour afterwards the pulse was 40 full and strong, and the spasmodic action less powerful. Gave 10 drops of the same. Two hours after the pulse was 35, full and strong. Now and then a slight spasm. Repeated the medicine. Three hours later the pulse 40, the respiration natural and all spasmodic thumping gone.

JOHN H. HOLLINGSWORTH, V. S.

Utica, N. Y.

ANSWER TO DR. A. A. RAMSEYER'S QUESTIONS.

1. Are negroes immune against sunstroke? I have not seen a case of sunstroke among negroes.
2. Are they immune against smallpox? They are not.
3. Does smallpox leave any scars? It does leave scars—pits.
4. Are they little afflicted with skin diseases? They are subject to skin diseases, especially the various forms of Eczema and indolent ulcers of the lower limbs.
5. What, if any, diseases that never attack negroes? I know of no disease that negroes are exempt from. They were comparatively exempt from Phthisis pulmonalis before they were freed, but now they seem to be equally subject to it as whites. I never saw a case of real Phthisis pulmonalis among the negro race before the war of the United States, but now I meet it frequently. They are not perhaps as subject to yellow fever as the white races are.

I. G. M. Goss, M. D.

Marietta, Ga.

MAGNESIA PHOS. IN FLATULENT COLIC.

On June 29, 11 P. M., I was called to see a large roan cart horse. The owner said he was very sick; thought he would be dead before we could get to him. On arrival at the barn, however, found he was not dead. I saw that I had a very bad case of flatulent colic to deal with. The night was very hot and the horse was in great pain. To have *Mag. phos.*, a powder, in hot water every fifteen minutes. The lookers on asked:

"Why don't you *tap him?*" No, I will cure him with my powders. 12 M. somewhat better. To have a warm water injection. 1 A. M. doing fine, bloated abdomen going down, lies very easy. 2 A. M. *Mag. phos.* every half hour. Abdomen normal, little pain. 3 A. M. powder *Mag. phos.* every hour and left him. Told the owner if there was any change for the worse to let me know. Called at 10 A. M. and found the horse well and eating.

In the proving of *Magnesia phos.* flatulent colic, incarcerated flatulence, rumbling and belching, abdominal pain; causes great restlessness; cannot lie still.

Yours truly,

JOHN H. HOLLINGSWORTH, V. S.

Utica, N. Y.

ITEMS FROM THE TRANSACTIONS OF THE EMPIRE STATE.

The RECORDER acknowledges receipt of the XXIX volume of the Transactions of the Homœopathic Medical Society of the State of New York. From it is gleaned the following points:

General Progressive Paralysis.

Dr. W. S. Searle, of Brooklyn, reported an interesting "Case of Ataxic Aphasia, or of General Progressive Paralysis," in a country-bred New York merchant, whose general constitution seemed to be robust. His first break-down was in 1870, sleeplessness with melancholia. He recovered to a certain extent, but had four successive attacks. In 1893 the case came to Dr. Searle. Patient, in brief, was somewhat emaciated, haggard countenance, flushes easily, distrust, confused mind, articulation thick, sleep broken and unrefreshing, gait staggering, legs clumsy and weak, joints feel stiff, but bodily functions generally performed well. All symptoms alleviated by eating and by conversation. Under *Cocculus* 3 the man made an excellent recovery.

Infection by Thermometers.

Dr. J. W. Sheldon, of Syracuse, read a paper on "A Question of Sanitation in the Use of the Clinical Thermometer" that called forth many favorable comments. It needs no elaboration to demonstrate that a thermometer stuck here and there in the

sick can become a very nasty means of carrying infections. In the discussion Dr. Asa S. Couch remarked that, "More than once I have seen a thermometer put from the mouth to the case, and from the case to the mouth, without any attempt at cleanliness.

Steam.

"The Advantages of Steam as a Therapeutic Measure" was the title of the paper by Dr. J. W. Dowling, of New York. Steam inhaled is especially useful in cases where, as the patient puts it, "if he could only get up something the cough would not be so distressing."

"In diphtheria it would seem as if these were certain indications for the employment of steam as a local application, which should not allow it to be overlooked. There are many ways of treating the diphtheritic membrane with the object of destroying it or of rendering it aseptic as far as possible. Many of these are good, not a few are comparatively barbarous and decidedly dangerous because of the after effects. All those of recognized worth may be employed, particularly the application of solutions of per oxide of hydrogen, and still will there remain the additional opportunity to secure the benefits of the steam. It can do no harm; it interferes with nothing else; it does tend to soften and dissolve the membrane. It does soothe the inflamed tissues beneath by the application of the heat, as in other inflammatory conditions; and when the membrane has begun to come away the moist steam keeps it more in bulk, so that there is less danger of its particles being scattered during coughing or respiration and they are more easily kept in the vessels and on the cloths employed for this purpose, with consequent lessening of the danger of infection for attendants and those in contact with the patient. To anyone who has not tried it in this disease I would urge its use in the very first opportunity, and I am sure the thanks of the patient for the relief obtained will convince him that, as a measure of humanity alone, he cannot refuse to use it. Nothing else in my experience acts in quite the same way; nothing else gives an equal amount of relief in so short a time."

"In true croup the same sphere of action is open and by softening the membrane, permitting it to be coughed up, the greatest aid is given and mechanical relief to the dyspnoea thus brought about."

“In false croup, or catarrhal laryngitis, particularly in children, I have often seen the distressing strangling and choking relieved in a few minutes, to the great relief of the anxious parents as well as of the sufferer.”

“In quinsy when suppuration has started it is astonishing how quickly the hot steam will bring the pus to the surface and cause the abscess to discharge at once and in a safe place instead of permitting it burrow and find possibly an external opening with consequent scarring and disfigurement.”

“To be effective the steam must be given steadily and persistently, not less than ten minutes’ inhalation during each hour, and in bad cases twenty or thirty minutes. The relief is certain, though it varies in degree.”

Urticaria.

In his paper on this subject, Dr. W. S. Garnsey, of Gloversville, N. Y., said, among other things: “In my opinion, the Turkish bath is worth more than the whole materia medica in the treatment of this disease.”

Arsenicum Symptoms.

Dr. M. W. Van Denburg, of Fort Edward, N. Y., under the heading “Sources of Arsenicum Album Symptoms,” takes Hahnemann, Hering, Allen and the Cyclopædia to task for the way they have done their work in mixing up the symptoms of the various forms of *Arsenic*. “A fault begun by Hahnemann and perpetuated by all who have succeeded him.”

An Anacardium Symptom.

On the strength of the following *Anacardium* symptom—“During dinner nearly all symptoms disappear; they come on again two hours afterward”—Dr. W. T. Laird, of Watertown, N. Y., cured the following interesting case: “H. I. J., a healthy-looking farmer, about thirty-five years of age, first consulted me in July, 1889. He stated that he had a dull pain in the right hypochondrium, which had persisted more than a year in spite of old school treatment and patent medicines. This pain was always relieved by eating, but returned in two hours and gradually grew worse, until the next meal again brought a temporary respite. Upon examination the right lobe of the liver was found enlarged and sensitive to pressure. No other symptoms, either objective or subjective, could be obtained. As there were no special indications for any of the drugs usually pre-

scribed in hepatic affections, *Anacardium* was given, three times a day, as an experiment. In six weeks the pain, swelling and soreness entirely disappeared. There was a slight recurrence of the old symptoms in 1890 and again in 1892, and on each occasion a few doses of the same remedy afforded prompt relief. There has been no relapse during the past two years."

For Women.

Dr. Marion M. Hodge, of Niagara Falls, read a paper on some useful remedies in "Diseases of Women." She said among other things, "*Pulsatilla* has had a narrow range for me. I think there are more *Pulsatilla* men than women. and I also believe that *Pulsatilla*, like *Sepia*, is more active in the thirtieth potency than any other."

"*Lappa* I have found most useful to relieve abdominal soreness during pregnancy or after abortion."

"*Colinsonia* in prolapsus uteri if due to constipation."

"*Cypripedium* is preferable to opium in many cases for allaying pains and promoting sleep and having no narcotic effect."

"*Bryonia* is quite a hot weather remedy and the thirst, irritability, bitter taste even of water, tongue slightly coated white, water brash, nausea, and stools as if burnt, have been my guide. In acid dyspepsia, when the patient eats oatmeal and starches, and is distended with gas, particularly if vegetable acids have been neglected, a teaspoonful of lemon juice, clear, two minutes before taking food, has cured, promptly, dyspepsia, constipation and all. A glass of water before breakfast, or three, if the patient will take it, flushes out the canal and is useful in middle aged people with post-pharyngeal catarrh and bad breath."

"I think the importance of calling attention to the patient's habit of sitting is well worth the while, for the majority of men as well as women make a half moon of their spinal column, by tilting the head and sacrum forward, tiring the cervical muscles by constant strain upon them, causing headache; and by throwing the pelvis forward, increasing the tendency to retroversion, a condition that we meet every day, one of the most difficult in which to obtain satisfactory results, and is seldom cured if in the third degree by non-surgical means."

Natrum Mur.

"A Natrum Mur. Case" is the title of the paper by Dr. Louis A. Bull, Buffalo. Here it is, and worth reading:

"I was consulted January 4, 1894, by Miss C——, aged 18.

She is the eldest of a family of seven children, all born in America of parents born in Ireland. The parents are rugged and healthy in appearance, but the children all have lifeless complexions, prone to various forms of acne. I mention these family details because they are in accord with frequent observations which I have made, *i. e.*, that children of emigrants of Irish birth, who are themselves healthy, will be frequently found the victims of scrofula, eczema or acne. Miss C—— desired relief for a catarrhal affection which, she said, had troubled her for several years and for which she had previously consulted other specialists of good repute. In person Miss C—— was large and strongly built, but her skin, particularly over the face and neck, was colorless, dry, fishy in appearance and profusely dotted with comedones, large and small. Here and there an enlarged superficial lymphatic gland glowed red and hard, giving color and variety to her countenance. Examination of the nose and naso-pharynx showed the case to be one of atrophic rhinopharyngitis, but not of a severe type. The nasal chambers were very roomy and dry, and, more or less, lined with thin crusts, while the posterior wall of the pharynx had the bluish, glazed appearance so familiar in these cases. The functions generally were performed in such a manner as to call forth no unfavorable comment.

“While taking her case I was strongly reminded of Bous-singault’s physiological experiments in withholding salt from animals. I could not rid myself of the idea that here was a case in which the *Chloride of Sodium* was not properly assimilated. So when the invariable question, ‘Can you help me?’ came, I answered that I thought I could not only relieve the nose and throat, but also the face. She was much encouraged by this, as she had been under a prominent ‘skin man’ for some time without result. She came to me for a period of about three months, first three times a week, then twice, and the last month once a week. The local treatment consisted in cleansing the parts with *Sodium chloride* solution, ten grains to the ounce, applied with the post nasal syringe; then covering the membranes with a bland oil which at first contained a little *Menthol*. Internally she was given *Natrum mur.* Improvement first began to show itself in the skin in about ten days; this became softer and more oily, and the comedones were certainly fewer. In fact, the black-heads were about gone in less than two months. The swollen lymphatics took longer and were finally routed by the applica-

tion of *Phytolacca* cerate well heated in at night. In a month's time the discharge of mucus from the nasal mucosa was quite free and the pharynx had lost most of its glaze, looking soft and moist, with the consequent absence of the annoying subjective dryness. In three months she was as nearly well as it was possible for one whose tissues had undergone the pathological process of atrophy."

CLINICAL AND THERAPEUTIC NOTES OF RECENT CASES.

From Dr. Mackechnie's Notes of Cases Treated at the
Bath Homœopathic Dispensary.

[*Monthly Homœopathic Review.*]

NEURALGIA.—*Glonoine.*

Elizabeth L., aet. 22, for some time has had pains in both temples, very severe, occurring very irregularly and lasting various times. The catamenia were irregular, retarded and scanty. Bowels and urine natural. Ordered *Pulsatilla*. Next week she was no better. It was now elicited that pains were worse at night, preventing sleep, with much throbbing. They were aggravated by stooping, and she experienced constant flushings. Ordered *Glonoine*. This promptly cured. Eleven months afterwards she returned for pains in right flank with constipation, which were removed by *Bryonia*. There had been no more neuralgia after taking *Glonoine*.

NOCTURNAL ENURESIS.—*Belladonna.*

Annie R., aet. 15, a servant, for a year has suffered from enuresis. It is fitful, occurring every night for a week, then not for several nights. She is very restless in sleep, talks in sleep, dreams and wakes in frights. Appetite is good, bowels regular, no worms. No signs of sexual development yet. She has also hemicrania of right brow. Ordered *Belladonna*. Next week better. Has only once wetted her bed since commencing medicine. Headache gone. She still talks in her sleep, and dreams of falling. Repeat *Belladonna*. During next two weeks no enuresis and no dreaming. She now complained of frontal headache, for which *Glonoine* was given, and relieved. Six weeks after had no return of enuresis, and head was better.

EPILEPSY.—*Cuprum.*

William G., aet. 10, rather more than a year ago went to a school where he was locked in a room by himself. This was followed by the first fit. Has had fits frequently since, now every day he has one or more. The lad has a large head, and his memory has always been bad. His movements are choreic; he talks in his sleep, and is constantly in movement. Bites his tongue in fits. Does not sleep at all after an attack, but is unable to stand, and takes long to regain thorough consciousness. No worms; bowels regular. Ordered *Cuprum* ter in die. In a week he returned, had not had a fit since beginning medicine. Sleeps better, choreic movements have only been noticed once or twice this week. Continue *Cuprum*. Next week he had many and bad attacks, but he slept better and did not bite his tongue in them, neither had the movements recurred. Ordered *Ignatia*. He was not seen again..

ECZEMA.—*Graphites.*

Alfred B., aet. 26, a photographer, for five months had had an eczematous rash on face, arms and hands. It exudes moisture, but there is not much itching. Bowels constipated, is obliged to take aperients. Appetite good, urine normal. Ordered *Graphites*. Next week he reported much better; the rash was nearly gone. After commencing *Graphites* he noticed that it became dry and cracked on the surface, and then died away. Bowels now regular; to continue medicine. Was shortly cured, and did not return.

William F., aet. 12, a school boy. A patch of eczema had recently appeared behind his left ear. It exudes moisture, and irritates him so that he aggravates it by picking. Boy is healthy in other respects. *Graphites* ordered. Next week there was improvement. The week after it was worse through his picking it. Continue *Graphites*. In a fortnight it was almost gone, and he ceased attending.

SCIATICA.—*Cimicifuga.*

Thomas P., aet. 56, a laborer, several days ago was seized with a severe "laming" pain in his left hip, which is gradually increasing. Pain is now so acute that it drives him out of bed at night. It is better sitting up, and relieved by pressure. Bowels regular, urine clear and copious. Ordered *Cimicifuga*. In four days no better, very restless, bad nights. Three days later great improvement. In another week was well, except for

lameness, which continued for a short time after pains had ceased.

FLATULENT DYSPEPSIA.—*Pulsatilla.*

Albert R., æt. 25, French polisher. Complains of pain under left nipple, and shortness of breath. Nothing discoverable by auscultation. The dyspnœa is worse soon after food, when he feels distended with wind. Some tympanitis. Sleep is disturbed; pork and cheese disagree. Urine deposits a sediment. Patient has had hip disease, and is lame in consequence. Ordered *Pulsatilla*. In a week he was better. Next week reported himself well, all symptoms had gone.

DYSMENORRHŒA.—*Bryonia and Secale.*

Mary G., æt. 16. Catamenia first appeared before fourteenth year, had always been irregular. She now suffered every fortnight, there was much backache and pains generally. The discharge was very clotted, but otherwise normal. Appetite and general health good. Bowels costive, moving once in two days, stools hard and dry. Ordered *Bryonia* ʒ by day, a dose of *Secale* ʒ every morning.

The next fortnight passed with no recurrence of pain or menstrual discharge, bowels much easier, though still costive. Ordered to take *Bryonia* alone. Two weeks after this she reported that catamenia had occurred, lasting five days, lumpy discharge, but no pain. To now take *Bryonia* every night and *Secale* twice daily. In a week bowels were no longer costive. Repeat *Bryonia* alone. Two months from commencing treatment patient said that she had again passed three weeks between periods, there was no pain, and bowels were normal.

CASES ILLUSTRATING CERTAIN TYPES OF
DIARRHŒA.

By A. Midgley Cash, M. D.

[*Monthly Homœopathic Review.*]

I.—ACUTE INTESTINAL CATARRH.—*Merc. cor.* and *Hamamelis.*

A stout, healthy lady of about sixty years of age. Eight days before I saw her the attack was brought on apparently by eating some coarse oatmeal parkin.

Discomfort in lower bowel soon developed into sharp, griping pain coming on in frequent paroxysms, and the bowels began to

act, obliging her to make rapid visits to the closet. Copious actions did not relieve her; many abortive ones followed, only flatulence and white mucus being passed. In this state she was when I first saw her. Mucus over which she now had no control frequently escaped. She felt rather chilly; the tongue was clean; there was no fever.

She was kept two days in bed on a diet of white fish, soft eggs and milk. *Hamamelis* 2x and *Mercur. cor.* 4x were given alternately every two hours, and a tepid compress put on abdomen. In two days she was very much better, and on the third the bowels were reported normal again, and the catarrh gone.

II.—CASE RESEMBLING ENTERIC FEVER.—*Baptisia.*

Mrs. K., confined to bed, when first seen complaining of pain in abdomen, which was distended and tender. A frequent diarrhœa of copious pea-soup-like stools. No rise of temperature, but frontal headache, dry furred tongue, and a crop of rose-colored spots on abdomen.

She took *Baptisia* ix every two hours, which soon abated the diarrhœa. In two days it was gone and on the third she was convalescent.

This case was strikingly like one of enteric fever, but without fever. The rash, as at first seen, and the stools were just those met with in ordinary typhoid fever cases. She lived in a poor neighborhood, where the sanitary surroundings were deficient, and where there had been an outbreak of enteric fever during the previous year.

III.—CHRONIC FERMENTATIVE DIARRHŒA.

A long-standing affair. Seems to be the legacy of a life spent in Ceylon. For the previous six weeks attacks had become much more frequent, two to six or even more actions occurring daily, very urgent, driving the patient out of bed in the morning, then again directly after breakfast. Very watery evacuations, which pour out frothing like yeast, or discharged explosively with much wind, fetid, pale or white in color. There is no pain, but though he gets rid of much flatulency abdomen soon fills up again, "tight as a wind-bag." Colon much enlarged, overlapping liver area and diminishing its dullness on percussion. Spleen not enlarged. Tongue—as usual—quite clean. The diarrhœa is excited by mental causes, as when—being a clergyman—he has to preach. Already on a carefully considered diet, the first and last meal of the day being of cooked

arrowroot, with a little of the powder added raw. *Apocynum* θ , gr. i, 3 h.

Nux, *Colocynth.*, *Elaterium* and *Aloes* had been used with advantage in former attacks, and *Apis*, *Rumex* and *Croton* all seemed likely to be useful.

For four days *Apocynum* θ was given, followed by *Rumex* 3x; but at the end of eight days he was no better, but losing strength it became necessary to do something further. He was now confined to bed entirely, and no food whatever allowed, except milk, of which three quarts a day were to be taken, a tumblerful to be sipped every hour during the day. A cold water compress was put round the abdomen to be worn for three hours, and when removed a woolen belt was substituted.

After three days of this treatment it became necessary to peptonize the milk, as "it passes through him like sour cream." This checked the diarrhœa, but he found it very nauseous. Less milk was given and a little Brand's jelly between whiles, and half an ounce of brandy in the course of the day; the milk, plain or peptonized, every two hours. Later on, a little lime water was added to the milk, as a certain amount of change seemed necessary. *Arsenic* 3x, for medicine, gr. ii., ter die. Gradually a change to more nourishing food could be borne, with a glass of port wine, and though much reduced, he was soon about again, this severe attack having lasted about three weeks.

This case was intractable and complicated. He had lived a long time in Ceylon, where, travelling about as a missionary, he had been much exposed to malarious influences and fatigue in all weathers, and had had some severe illnesses. He had troubles at both ends of the alimentary canal, a very defective set of teeth and a dilated colon; also a fissure of the rectum, but this had been cured by operation.

IV.—PERIODIC DIARRHŒA.—*Arsenicum*.

An obstinate case which occurred to me some years ago in an aristocratic old lady visitor of about 65 years of age. Each morning it came on urgently about 6 o'clock. *Aloe soc.* 6x and then 3x were tried for four days. This seemed to break up the time, but a relapse now took place every *alternate night*. I found she had an attack of malarial fever twenty years ago—I think in Rome. *Arsenicum* 3x was given every three hours, and the next attack was missed. A few days later she was seen and keeping all right.

V.—MUCO-ENTERITIS.—*Mercurius*.

A stout lady of from 60 to 65, leading a sedentary life and of a constipated habit of body. Has no pain, but is tormented with an unnatural sense of the bowels wanting to act. Voids, per rectum, freely, balls and shreds of mucus, which can in water be teased out into films like seaweed.

She has been much given to the use of enemata to procure action of the bowels. Under microscope these films show as a fine stroma, with layers of fibres, having multitudes of small round cells between. She got *Mercurius sol.* 6x and 3x at intervals for six or seven weeks, twice a day, and became much better, but she finally passed a complete cylinder of about two inches long, which appeared to be the lining of a part of the small intestine. Probably the abuse of the enema had, in her case, much to do with the pathological condition.

VI.—THREATENED DISEASE OF MESENTERIC GLANDS.

M. B., æt. 5, a little girl of self-willed and rather irritable temper. Ailing a long time, and under allopathic treatment, with little improvement, better for a time and then relapses. First seen May, 1892. There is a general malnutrition of body, a low feverish condition, pain and swelling of abdomen, and extremely fœtid, semi fluid white stools, which persist in spite of careful dieting.

Concomitants.—Lips peeling and sore; palms and soles dry, cracked and scaling; her skin is thin, dry and mapped by fissures; tongue clean; no worms. Ordered Kepler's maltine and *Hepar sulph.* 6x, gr. ii., ter die. She was under treatment for three weeks, during which *Hep. sulph.*, *Ac.*, *Phosph.* and *Podophyl.* were given. The offensive stools became less frequent, that in the morning being often missed, the color and consistency improved, the pain became less, the skin much better, and the child's mental condition mellowed.

In spite of these ameliorations at the end of three weeks the diarrhoea persisted, so that if one day one action only occurred on the next there would probably be three. I decided to disregard diarrhoea indications and chose a remedy only from the constitutional state, and prescribed *Calcarea carb.* 6x, gr. ij., 3 h. In four days this had steadied the bowels to one stool every twenty-four hours, in another week the first formed and natural action she had had occurred.

She continued the *Calcarea* in various strengths for four months

and lost all her troubles. In June, 1893, thirteen months after commencing Homœopathic treatment, she was seen in good health, free of diarrhœa, and the abdomen had entirely regained its natural condition, and in all these respects she continues well to the present time.

Bell, in his work on *Diarrhœa and Dysentery*, states that in selecting *Calc. carb.* the character of the stool is of less importance than the type of the individual and the concomitant symptoms, and this seems to be borne out by the above case. *Hepar. sulph.*, though closely indicated, did not effect much against the diarrhœa, though under its use the skin became healthy. The mother was scrofulous, and the child's condition at the commencement was altogether very threatening, so that the result of treatment was gratifying, and secured for me the adhesion of the family—allopathic up to that time.

VII.—ACUTE ATTACK OF DIARRHŒA CAUSED BY HIGH TEMPERATURE.—*Jalap.*

A young married lady of about 30. Came on after sitting for two hours on some hot-water pipes at a public meeting.

Aconite, *Bryonia* and *Colocynth* had been tried, but the diarrhœa persisted for six days and was getting worse, with retching, flatulency and tormina. One grain of *Jalap* θ was dissolved in water and fractional doses given. Next day she was reported much better, having had only two actions since. A dose of the third decimal dilution was now ordered to be taken after every subsequent one, and the attack shortly subsided.

This case was allied to those commonly met with in hot seasons, which go by the name of summer complaint. Of this summer diarrhœa we see comparatively little in Torquay, owing probably to the fact that the mean range of the maximum and minimum temperature is so small and consequently the production of chill from climatic causes so much the less.

VIII.—DIARRHŒA, WITH SICKNESS AND VERTIGO.—*Cocculus.*

A florid, short, stout lady of 65, living in the country, had a sharp attack of diarrhœa, in addition to which there was vertigo and nausea going on to vomiting. She is liable to giddiness from slight causes, and often gets attacks of it. She had been ill nine days before coming under treatment and rest in bed had given no relief. I gave her *Coccul. ind.* 3x, gtt. i, 2 h. Under this she improved and wrote to me in two days that the medi-

cine had helped her much, that she had lost her nausea and was able to eat again.

Irritative diarrhœas from improper diet yield to spare feeding, which may be begun with advantage by a day entirely without food, sipping occasionally a little hot water. If severe, the patient should be kept in bed and firm pressure excited by a flannel abdominal bandage. By these means entire rest to the alimentary tract is maintained. *Pulsatilla* is often useful, as in—

IX.—A girl who had feasted on cockles which had set up sickness, gastric pain and diarrhœa. These symptoms persisting after six days, I saw her and gave *Pulsatilla* 2x every two hours. Under this the diarrhœa ceased. Afterwards *Bryonia* was required for the condition of dyspepsia which had been set up.

Before closing I must allude to *Podophyllum* as a medicine for diarrhœa. I have found it most useful in a large number of cases, especially in unhealthy children—children in a pre-tubercular stage, who yet do not seem to require or to be constitutionally bad enough for such remedies as *Calcarea* and *Silicea*.

Such children may have protuberant abdomens. The fœces may be in color green or whitish. They are extremely offensive, often consisting of a mealy or sedimentary fluid. The diarrhœa is liable to come on early in the morning. There is involvement of the liver, as evidenced by the tenderness of the right hypochondriac region and the fœter of the stools. The rectum is also often affected, and there may be prolapsus with or without proctitis.

When these symptoms occur *Podophyllum* 3x, one drop after each action, is generally rapidly successful in checking the complaint, and in my experience *Podophyllum* is, for all obstinate diarrhœas in unhealthy children, on the whole the most useful remedy we possess.

BOOK NOTICES.

A Regional and Comparative Materia Medica. By John Gilmore Malcolm, M. D. and Oscar Burnham Moss. 919 pages, 8 vo., cloth, \$7.00. Chicago, 1895.

Another laudable attempt to make the materia medica easy, though whether the attempt is successful time alone can show. The list of remedies number two hundred and sixty, and the

table of contents show forty-two chapters—"mind," "sensoriums," "inner head," "outer head," "eyes" and so on. Under these divisions are grouped the symptoms. The book opens: Chapter first, "mind."

"Abies can. Irritable and easily fretted."

"Abies nig. Very low spirited and melancholy. Nervous; unable to think or study."

"Abrotanum. Anxious, depressed—gastralgia. Child cross, depressed, very peevish—marasums. Feeble, dull. Indolence, aversions to bodily motions. Good humored or gloomy."

And so runs the first chapter for sixty pages, closing with a repertory, taking sixteen of the sixty pages. As said before whether this arrangement has any advantage over the old materia medica, with a good repertory, time alone will tell.

THE thirteenth annual announcement of the Hahnemann College of San Francisco, includes Bradford's *Life of Hahnemann* among the books which "are recommended to the students preparatory to attending lectures." "By reading these they will become acquainted with the principles of Homœopathy, which should be well fixed in the mind; why Homœopathy is preferable to Allopathy, the relative merits of the two schools; in other words the *reasons* for his faith."

It is a good recommendation and could be followed with profit by all the colleges.

THE *Medical Record* of July 20, contains the following comment on Burnett's *Gout*:

This is a well-written and readable little treatise on the therapeutic management of gout from the stand-point of a Homœopathic practitioner, for whom *urtica urens* takes the place of the orthodox colchicum. The author is an ardent disciple of Hahnemann, but his book is none the less interesting, and it contains numerous little hints that may profitably be followed even by those who have no faith in the mother tincture of nettle. It is even possible that *urtica urens* will do as much for gout as colchicum—which is not very high praise for either remedy.

THE *Amateur Sportsman*, published by the M. T. Richardson Co., 27 Park Place, New York, comes to our table this month richly laden with interesting reading for hunters, anglers and dog fanciers. It contains many appropriate half-tone engravings, instructive and practical articles on Hunting, Fishing, Camping, Natural History, the Rifle and the Dog. It is the purpose of its publishers and owners to make the *Amateur Sportsman* in all re-

spects a first-class paper for sportsmen. A sample copy will be sent free of charge.

MESSRS FRANK & WAGNALLS, publishers of the famous *Standard Dictionary*, announce a number of books supplementary to that publication as "in preparation." Among them are the *Student's Standard Dictionary*, *Standard Synonyms* and *Standard Speller*. These books ought to be very popular.

SOMETIMES we think that the younger physicians do not quite realize what exceedingly valuable books Hale's *New Remedies*—Symptomatology and "Therapeutics" are. Few medical works have had a wider circle of readers and none deserved it more. Many of the most reliable and most used remedies came to light through these books, yet there are still many others hidden in their covers that will amply repay exploitation.

P. C. MAJUMDAR, of the *Indian Homœopathic Review*, in a personal letter, says of Yingling's book: "*Accoucheur's Emergency Manual* is a wonderful publication and a great help to practitioners. Its preface is worth the money spent in buying it." It is a good book, one that will never get out of date, but always be "up to date."

As the new translation of *Chronic Diseases* approaches completion, so also (perhaps) may another outcry against the unfortunate Nenning, who furnished a number of the symptoms, be looked for. But it should be born in mind that Hahnemann, after his usual searching inquiries, accepted Nenning's symptoms; that Bœnninghausen said that he "had no reason to doubt the trustworthiness of Nenning's provings," and that Hartmann was one of his defenders. The reason for the multiplicity of symptoms by Nenning was that he employed many people in the provings and, following Hahnemann's exhortations, noted all their symptoms. The honesty of his provings are indirectly shown by Nenning's statement that "Few persons are to be found who will stand such trials a second time." But, doubtless, Dr. Bradford, in his useful and interesting "Story of the Provers," now running in the *RECORDER*, will throw a flood of light on the character and reliability of the much discussed Nenning, when he reaches that gentleman in the course of his story. This particular chapter of "The Provers" will be looked forward to with interest, especially in view of the forthcoming translation of the book in which he plays a prominent part as prover.

Homœopathic Recorder.

PUBLISHED MONTHLY BY

BOERICKE & TAFEL,
1011 Arch Street, Philadelphia, Pa.

SUBSCRIPTION, \$1.00 PER ANNUM.

Address communications, books for review, etc., for the editor, to E. P. Anshutz P. O. Box 921, Philadelphia, Pa.

THE SOUTHERNERS.—The Southern Homœopathic Medical Association will meet next November at St. Louis. The precise date of the meeting is not yet determined. William C. Richardson, M. D., of that city, is president.

SOME NOTES FROM CHICAGO.—Drs. A. E. & R. M. Genius, two of the rising young physicians of Chicago, have taken offices in the elegant new Reliance Building, one floor of which is entirely devoted to Homœopathic physicians.

Dr. F. S. Hoyne, returned home from the Institute meeting quite sick, but is now able to be out again.

Chicago was represented at the American Institute meeting at Newport by Drs. Vilas, Hoyne, Pierson, Pratt, Weirick, J. H. Mitchell, Delamater, Crawford, Ludlum, and Stettler.

ANOTHER POINT OF VIEW.—“In the thirty years personally devoted to the study and investigation of Hahnemann’s *Materia Medica*, I must confess my utter inability to detect the grave faults so blatantly charged, though I freely admit that in my early years I sometimes imagined that such really did exist. Truly, the rush-light finds fault with the light of the sun.”—*Korndærfer, before Hahnemann Club.*—(*Hahn. Monthly.*)

“How often have we seen *Aconite*, where constant fear of impending danger, fear of death, restlessness and anxiety prevailed, relieve our patient and bring about a calm and happy mental condition! How often has *Ignatia*, *Belladonna*, *Ipecac*, *Carlophyllin*, and a score of other equally efficacious remedies come

to the relief of our patient!"—*W. H. Hanchett, M. D., in Hom. Jour. of Obstetrics.*

It is for the numerous and various ills, fancies, pains, etc., of pregnant women that Yingling's newly published *Accoucheur's Emergency Manual* is so invaluable. The better that book becomes known, the more highly is it appreciated.

A correspondent of the *Homœopathic World* writes: "For several months past I have been studying Homœopathy from Hahnemann's *own writings* with immense profit and ever increasing interest." The italics are his and are suggestive. The theory, and the *Materia Medica*, of Homœopathy as Hahnemann left it in the *Organon*, the *Materia Medica Pura* and the *Chronic Diseases*, are a revelation to those Homœopaths who have never gone direct to the original source.

YET YE CHEAP JOHN FLOURISHETH.—The medical man is positively helpless without pure drugs. To comprehend a pathological condition, to recognize the remedy, is not enough. He must see that the chosen drug actually *performs* the work assigned to it, and this it will not do unless it is a pure and active preparation. The doctor *must* look out for the quality of his drugs. There is no doubt, whatever, that the annual death rate from disease could be greatly decreased by proper attention on the part of the physician to this very essential point. He *must* compel the druggist to be honest, by unceasing watchfulness. He *must* recognize that poor drugs and substitution exercise as much influence as "the hand of Providence" in filling up our cemeteries.—*Medical Brief.*

SCUTELLARIA.—In the domestic practice of country people *Scutellaria* has always been highly esteemed, and it is a remedy that should not be overlooked by the medical profession, for it is especially useful in diseases that are very troublesome. It may be prescribed with benefit in cases of nervous depression following sickness or any long continued mental or bodily exertion. Dr. Paine wrote: "All forms of chorea are promptly relieved by the proper use of this drug; in fact, it may be correctly pronounced a specific for these affections." Hale also claims precedence for it in many cases over *Chamomilla*, *Coffea* and *Belladonna* in the affections of teething children.

PERSONAL

Pemberton Dudley, M. D., President of the American Institute of Homœopathy, has been elected President of the State Board of Health of Pennsylvania.

J. A. Fischer (Hahnemann, Philadelphia), is located at 319 Green street, Philadelphia, and rapidly building up a large practice.

The doctor who cannot get a practice until he marries yet cannot marry until he gets a practice is playing in hard luck.

Farrington's *Clinical Materia Medica* is an excellent book for physicians' of other schools who desire to look into Homœopathy.

Dr. Van R. Tindall, Philadelphia, has removed from 205 Catharine street to 323 Reed street.

Dr. J. F. Boutin has removed from Abilene, Kansas, to Independence, Mo. He writes that his removal has left a good opening for a Homœopathic physician. Abilene has a population of 3,500 and well settled country around.

Dr. Custis' book on *Practice*, now in press, is without padding, and every word from cover to cover will count. It will be a pocket book and elegantly printed and bound.

FOR SALE. On account of ill health a physician in one of the busiest towns in Vermont wishes to sell out for a moderate price. Town of 10,000 population. Practice thoroughly established and will average \$4,000 to \$5,000 per annum. Collections good. This is a splendid opportunity to the right man. Address M. V., care Bœricke & Tafel, P. O. box 921 Philadelphia, Pa.

Many Homœopathic college advertisements will be found in **THE RECORDER** Read them.

A correspondent of *The Medical Age*, Dr. G. A. Williams his name, and Bay City, Mich., his home, has made a wonderful discovery, to wit: Homœopathy "is rapidly dying out!"

"Gastrodiaphanoscropy" is the latest medical-word terror.

The medical miscellany of an E. C. warns the aged against the use of bicycles and follows with a note on a ninety-eight year old doctor who visits his patients on a wheel.

An advertisement in **THE RECORDER** pays better than in any other medical journal. Try one.

Read *Gout and its Cure* and you will be refreshed by something new under the medical sun

THE RECORDER subscription list grows like an oak tree—bigger and stronger each year. Subscription, \$1.00 a year.

There is talk of having Boenninghausen's *Die Aphorismen des Hippokrates* translated into English and printed. It will require a show of hands though.

Send your name for a copy of the magnificent *Homœopathic Text Book of Surgery* to any of the B. & T. pharmacies. It will be out soon.

The *Med. Brief* thinks that the object of serum therapy is to reduce the surplus population.

"**THE RECORDER** is one of my most valued journals."—M. H. Creswell, Edwardsburg, Mich.

THE HOMŒOPATHIC RECORDER.

VOL. X. PHILADELPHIA AND LANCASTER, SEPT., 1895. No. 9.

FLUID EXTRACTS, SOLID EXTRACTS AND DRY PLANT TINCTURES.

The increasing use of fluid extracts and other allopathic preparations bearing the same name as the Homœopathic preparations is something detrimental to the success of Homœopathy. There is no doubt that these preparations are being largely used by some Homœopathic physicians and pharmacists. The cause of this is a desire to obtain drugs as cheaply as possible, and when the seller of drugs offers his tinctures and preparations at lower prices than his neighbor unthinking customers are apt to go to him, forgetting, or possibly not knowing, that medicines may bear the same name yet widely differ. It is much easier and also cheaper to buy allopathic extracts, etc., ready-made rather than to gather the plants of our American remedies, or to import those indigenous to Europe. Thus not only is labor saved, but one is enabled to sell cheaper and thus get trade. A good many buyers, and it is to be feared even physicians, have an idea that a fluid extract is quite the same as a Homœopathic fresh plant tincture; such an idea is erroneous, and pernicious to the welfare of Homœopathy.

In the whole range of these extracts water enters into their composition, and of course tends to cheapen them. In all of them the dried plant only is used, and many of them are compounds. This is enough to utterly condemn the use of fluid extracts on symptoms elicited by provings of fresh plant tinctures, but the worst about them still remains to be said. Hahnemann says (*Organon*, note 133 to paragraph 266:)

Plants, even of strong medicinal properties, are partly or wholly deprived of their strength by such modes of treatment. All roots of the iris species, horseradish, arum and the peonies lose nearly all their medicinal strength by perfect dessication. The juice of the most powerful plants is often transformed into an inert, pitchy mass by the ordinary temperature em-

ployed in the preparation of extracts. By being allowed to stand still for a long time the expressed juice of deadly plants is often rendered inert; even at a moderate temperature it rapidly passes into vinous fermentation; being deprived of much strength it grows sour, and finally putrid, whereby all its peculiar medicinal properties are destroyed. The amylaceous sediment, when purified, is perfectly harmless, like ordinary starch. Even in the process of sweating, to which closely packed mass of herbs would be exposed, a great portion of their medicinal properties are lost.

Such are the words in which the founder of Homœopathy expressed himself on the subject of allopathic drug preparations, and it is a matter of surprise that any homœopathic physician should resort to them for the sake of saving a few cents in the price. Not only are they totally unhomœopathic, but, as Hahnemann shows, are apt to vary widely in their nature, and this unknown even to the manufacturer. A striking confirmation of this was given by Dr. Aulde a few years ago—he who discovered *Rhus tox.*, *Hepar sulph.* and several other “new” remedies. His complaint, in the paper alluded to, was the lack of uniformity in medicines furnished by the various allopathic drug houses, and he relates an instance where this divergence resulted in a grisly fatality. The resident of an insane asylum had been in the habit of giving some of his patients a teaspoonful of the fluid extract of *Conium* “to lessen the excitement and produce a calmative effect upon some of the inmates who failed to obtain needed repose.” Well, in short, a new supply of *Conium* was received, the usual dose given, and in the morning the resident found seven of his patients dead from over-dosing. The “calmative” effect had been so great that they had given up the ghost. The allopathic extract of *Conium* is made up of *Conium*, *Acetic acid* and diluted alcohol.

A. J. T.

I'm sitting alone in the gloaming,
 O, friend of my earlier days,
 And memory, weary with roaming
 Through dusty and devious ways,
 Comes back to me laden with treasures
 Of pictures, so wondrously fair,
 Of faces and places and pleasures;
 I gaze, and, behold! thou art there.

In one of those pictures we're sitting
 Together with Comforter Kohn,
 The moments so pleasantly flitting
 We sigh when the last one has flown,

For Comforter Kohn in his cellar
Had something--well, call it divine,
For it was a trouble-dispeller
That came from the banks of the Rhine.

What though that small room was a kitchen?
We didn't go there for the style;
We knew just what vintage bewitchin'
Would suit us, and quickly beguile
The cares (that were writing their wrinkles)
To leave us alone for that hour :—
Ah, yes ; when the wineglass once tinkles
It breaketh the spell of their power !

But where is the genial old fellow
Who met with us once in a while ?
He wasn't obliged to get mellow
When he had a care to beguile;
For he gave his whole life to Duty,
Each moment he husbanded well,
Till he sank like a sunset whose beauty
No palette of pigments can tell.

And thou ; oh, that thou too should'st leave me !
Thou, younger and haler than I !
Oh, doth not false rumor deceive me
My strength and my courage to try ?
But, no ; I can not be the dupe, or
A dreamer of beautiful dreams ;
I know from the shock and the stupor
The story is all that it seems.

And sitting alone in the gloaming,
O friend of my earlier days,
My memory, weary with roaming
Through dusty and devious ways,
Comes back to me laden with treasures
Of pictures, so wondrously fair,
Of faces and places and pleasures ;
And, blessed be God ! thou art there.

S. A. J.

Ann Arbor, 3rd of August.

[Editor of the RECORDER : The writer desires to fling this little flower on the grave of him that was A. J. Tafel. "Comforter Kohn" has long since passed away. He was an Hungarian exile who kept his rare wines in an humble place on Broome street, and many are the hours we passed there. The "genial old fellow" was (alas !) Samuel Lilienthal, and he met with us to talk over the make-up of the "next number of the North American." The last of the trio is my lonely little self ; but, yet a little while and the call cometh. Even so, Amen !]

ENDEMIC AND EPIDEMIC DISEASES.

[CONTINUED.]

Malarial Fevers.

Before quoting any extracts from the work of Dr. I. G. Jones on these fevers, I should like to recapitulate the classification of which I previously spoke. Of course all classifications must be imperfect, because our knowledge of the origin of diseases is imperfect. And if we attempt to classify according to *symptoms* we also show how inadequate our knowledge is. In these circumstances we can only make an approximation to anything like a definite classification.

Here I might appropriately mention another difficulty. In our present nosology we have distinct diseases classed together under one cognomen—for instance, *cholera*. It appears to me that cholera, so called, is far from being one uniform disease; that, in fact, we apply the same name to a disease of *endemic* origin and to another disease of *epidemic* origin—two totally different maladies. The same remark will apply to diphtheria. But these will be spoken of further on.

When writing in the RECORDER last month I ventured to say that the primary division of the zymotic diseases was the *endemic* and the *epidemic*. And, further, that the former were of mundane and the latter of *supra*-mundane origin. To vary the words we might say—of telluric origin and of aerial origin. If I am mistaken in making this differentiation I shall be glad to be corrected.

Of endemic diseases I should recognize only two classes—the *malarial* and the *typhoid*; the malarial being of vegetable and the typhoid of animal origin. Perhaps *paludal* might have been a preferable word to *malarial*; but it is of little consequence so long as we attach a definite conventional meaning to the latter.

A writer in the *Daily Chronicle* (Lond.), speaking of malarial fevers, says: "The wholesale destruction of forests in the Mississippi valley is largely accountable for the malarial fevers so common in that part of the United States."

This statement is no doubt correct and agrees with one by Prof. F. Roberts, who says: "The malarial poison is ordinarily an emanation from soils more or less rich in organic matter, and which are not devoted to the maintenance of healthy vegetation."

The explanation of this would, no doubt, be thus—trees and other healthy vegetation withdraw from the soil, for their nourishment, those gases which would otherwise evaporate into the atmosphere around and prove poisons to man.

I will now make some extracts from the work by Prof. Jones, previously mentioned.

“The primary impression of the malarial poison is made upon the nervous system, invariably causing an essential derangement of the nervous functions.”

“Those symptoms characteristic of the forming stage, such as aching of the limbs, restlessness, debility, disinclination to exercise and pain in the back, all go to prove, beyond a possibility of a doubt, that the nervous functions are first disturbed.”

“Where the intensity of the cause is slight we find the fever slight; but where the malarial poison is more concentrated we meet with fevers of greater violence. Hence, at the South, where vegetable miasma is not only more general, but more concentrated or intense, we should naturally expect to find the most severe and fatal forms of fever; and it is there that malignant, intermittent and congestive fevers prevail.”

“It has been observed that at those seasons of the year when certain kinds of vegetable matter abound particular forms of disease are developed. Still, all the examinations of the atmosphere which have been made have failed to discover the real nature of malaria.”

“Experiments prove beyond dispute that in the decomposition of vegetable matter animalculæ are produced in the most rapid succession, having an exceedingly evanescent existence. Whatever may be the vegetable decomposed, wherever it may be placed, and whatever the attendant circumstances connected with the process, so far as microscopical investigations have discovered it is impossible to produce vegetable decay without developing animal life.” [I cannot agree with this statement, for it seems to favor the notion of spontaneous generation.]

“Vegetable matter excluded from the air, even under water, will not undergo decomposition. I have seen a log taken out of water, where it had lain for twenty years, with the bark as perfect as when it was put there.”

“Another circumstance is known to exert a serious influence upon the general health of certain sections of the country. I refer to excavations for railroads and canals, especially upon the borders of rivers. Here is thrown up a large amount of vegetable

matter partially decayed, and, according to the views presented, we should look for a prevalence of malaria, and under such circumstances intermittent and remittent fevers invariably occur."

"It is difficult to find *a term* which will express the whole character of a disease, or to adopt a classification which will conform in a satisfactory manner to the varieties of cause and pathology; and as an effort at a new classification of fevers might lead to some confusion without a compensating advantage in the promotion of practical science I shall in treating of fevers adhere to the divisions adopted in the books."

These words exactly convey my own ideas with regard to classification. It might be improved, but can never be made perfect.

Now, the development of the malarial poison is not uniform. It sometimes develops into an intermittent and sometimes into a remittent form. What is the cause of this? Is the poison the same, the difference being owing to its intensity? Or are there diversities of malarial poison? On this point Dr. Jones says:

"The distinction does not consist in a difference of origin nor of pathology, but in the greater intensity of the same cause, connected with or producing greater prostration of the nervous energy in remittent than in intermittent fever, leaving the system unable to completely throw off the irritating febrile influence after the paroxysm has spent its force. In the one, therefore, we have a complete suspension of febrile symptoms after each paroxysm, continuing for a longer or shorter time, according to the type of the disease, while in the other there is mere remission or diminution of the febrile excitement after each exacerbation. * * * Such is the essential difference. In fact they often run into each other; that is, the intermittent frequently degenerates into remittent fever by being neglected or improperly treated, and by a judicious course the remittent may often be transformed into the intermittent. Hence it is evident that those two forms are in reality the same disease, produced by the same cause, either more concentrated in the one case than in the other, or else modified by peculiarities in the constitution of the patient, or by attendant circumstances. What the modifying influence is it is often difficult to determine, and in fact it is not a point of great consequence, so far as the treatment of the fever is concerned."

Concerning *remittent fever*, Dr. Jones says:

"This fever has received more names than any other in the

posological catalogue. It is known by a different name in almost every distinct section of the world where it prevails, and scarcely any other disease is so nearly universal in its prevalence. It is often named in accordance with the location where it is remarkably prevalent. Thus it is called Bengal fever, owing to its prevalence in the vicinity of the extensive swamps on the borders of the Bay of Bengal. It is known in the malarious districts of Africa as African fever. In our country it is sometimes called Michigan fever, because of its prevalence in that State among the swamps and low alluvial lands. It has also been called bilious fever, and by this name it is more generally known than by any other. This last name has been applied to the disease because it was supposed to be a derangement of the biliary functions—a most egregious error, by the way, and one upon which has been based an enormous mistake in treatment. Not only did the name originate in a false view of the cause of the disease, but the false name has done much to perpetuate the error in regard to its character and treatment—an error which has carried more victims to the grave than the disease itself. Students and practitioners finding in their books the term bilious fever connected with certain characteristic symptoms, very naturally understood it to imply either structural or functional disease of the liver, and consequently directed all the force of their treatment to that organ; and, therefore, I have no doubt that the treatment has been more destructive to life than the disease itself would have been had it been left to contend with the unassisted recuperative efforts of the human constitution. While conversing sometime since with a very scientific and intelligent gentleman on this subject, he remarked that he had no doubt that most of the early settlers of the Scioto Valley, who had left this stage of action the supposed victims of bilious fever, were in reality carried off by the treatment resulting from this misnomer.”

I hardly need apologize for reproducing the above extracts, for they are too important to be lost sight of, especially the extract last given. We may often be misled by names, and we must have always a corrective at hand. What is this corrective? It is to ascertain precisely the origin of the poison which has produced the disease. We must not prescribe according to names, nor even to symptoms. We must know, if possible, whether we are dealing with a malarial, or a typhoid, or an aërial poison. Having discovered this, we must endeavor to

give a specific remedy. Names and symptoms must be considered secondary to the all-important knowledge of the origin of the poison and the equally necessary knowledge of the antidote.

G. HERING.

[TO BE CONTINUED.]

STORY OF THE PROVERS WHO ASSISTED
HAHNEMANN.

By Thomas Lindsley Bradford, M. D.

HUGO.

No data obtainable.

ERNST KUMMER.

Hering says that he was the youngest of the class, and that he died as a practicing physician in Saxony. He was one of the first who prescribed according to characteristic physiognomies.*

WRITINGS.

Diss. *Obstetricia Brevem Partus Humani Normam Omnino Servantis Historiam Sistens.* Jenae. Schreiberi. 1822.

LANGHAMMER.

Hartman says: † A few words must be said about Langhammer. I would prefer to pass him in silence if I could do so, but the frequent mention of his name by Hahnemann necessitates my speaking of him. He was a small, somewhat ill-shaped man, and this defect of body seemed to be reflected in his mind. Ten years my senior, this dwarfed mental condition could only be accounted for by an unwillingness to make the necessary exertion, lack of diligence, the cherishing of barren ideas and speculations, and a fondness for the *far niente*, characteristics which he could not master, even at the University, which, however, were brought into prominence by his poverty.

At heart he was a good fellow, but timid, diffident, suspecting, all this largely because he was conscious of his intellectual weakness. It may create surprise that I describe so painstakingly

**Hahn. Monthly*, Vol. vii., p. 176.

†*N. W. J. Hom.*, Vol. iv., p. 189. *Med. Couns.*, Vol. xi., p. 243.

the faults of Langhammer, but I am talking about the first provers' union and the results of their work as shown in the provings. The symptoms of each prover partake more or less of his individuality. A man's individuality, however, does not wholly depend upon his natural temperament or gifts, but is also a true mirror of the passions, habits, etc., which affect not only his acts, but his sensations, expressions and the functional activity of his organism. This was the case with Langhammer.

If he did not live in a world of dreary imaginings he was wont to give his mind to sensuous dreams of ecstasy. This accounts for certain peculiarities in the mental and sexual symptoms of the remedies proven by him, and their similarity in the various remedies. His other symptoms have scarcely any particular value, owing to a lack of exactness in the description of his sensations, and of clear, precise language. Hahnemann was usually obliged to name for him appropriate terms, of which he then made the selection.

Gross in the *Archiv* says of Langhammer : * Most of the provers who are introduced by name into Hahnemann's work are personally known to me, and I remember one person whose observations in a certain direction appeared to me from the very first liable to suspicion. I mean Langhammer, who was my fellow student at Leipsic, who with much feebleness of body was certainly a healthy young man, but lived in very straitened circumstances, by which his otherwise timid disposition was made still more retiring and rendered more liable to sorrow and care. For this reason all the moral symptoms which he observed in himself are of little or no value.

Let any one compare the symptoms of *Ledum palustre* (147.150) ; *Cicuta virosa* (203.204) ; *Calcarea acetica* (227.229) ; *Cyclamen European* (189.192) ; *Acidum mur.* (211) ; *Ruta grav.* (254) ; *Conium mac.* (278) ; *Spigelia anthelmintica* (530) ; *Verbascum thapsus* (140) ; *Stannum* (447) : "Feels discontented with his neighbors, and shuns them ; withdraws into solitude with tendency to weep ; anguish as if he had committed some crime ; deep reflection on the present and the future"—often repeated in the same words, but are conditions which must in his circumstances have been pretty natural to my good friend Langhammer, so that, practically, they lose all their value.

* *Archiv fur die hom. Heilkunst*, Vol. xx., pt. I., p. 76. *Brit. Jour. Hom.* Vol. xix., p. 626.

Also a great number of symptoms under the different medicines show that he was quiet, absorbed in himself, not inclined to speak.

Hering says : * Chr. Tr. Langhammer was one of the most zealous provers, and one of the most careful and successful. He was a hunchback, rather peculiar, and often the butt of ridicule to the class, but much favored by Hahnemann. He cured a blind girl, of great beauty and some income, who married him out of gratitude, and they lived together very happily. He looked upon his old classmates with great contempt, because his success in life had offended them. A stream of slanders has since been poured over him, and, of course, all has been carefully repeated by the would be critics.

Lorbacher says : † The least important among the members of this early circle of Hahnemann's disciples was undoubtedly Langhammer, a man deformed in body and mind, without energy, who spent his time in unprofitable brooding, and who never could acquire any enthusiasm for the cause. Unfavorable outward circumstances, for the successful combating of which an energetic nature was necessary, may have contributed materially to his depressed disposition. On these accounts the value of his contributions to the *Materia Medica* is, to say the least, doubtful.

An interesting account of the provings of Langhammer may be found in the *Homoopathische Vierteljahrschrift*, Vol. xiv., p. 406.

J. GOTTLÖB LEHMANN.

In the *Zeitung* appears the following : ‡ On January 9, 1865, the former assistant of Hahnemann, Hofrath Lehmann died in Coethen in his seventy-seventh year.

Dr. Lehmann became Hahnemann's assistant at Coethen about 1831-2, and remained with him during his stay in that place, and after his departure for Paris took his place, where he remained until his death. Hahnemann and himself continued to be firm friends till the death of the former. Lehmann prepared his medicines for him during all this time.

Some jealousy was excited during the hospital troubles by

* *Hahn. Monthly*, Vol. vii., p. 176.

† *Brit. Jour. Hom.*, Vol. xxxii., p. 457.

‡ *Allg. hom. Zeitung*, Vol. lxx., p. 40.

Hahnemann appointing Lehmann as General Supervisor to the Hospital. It was Dr. Lehmann who was sent by Hahnemann to install Dr. Schweikert as Director of the Hospital.

Albrecht thus quotes from a letter about Lehmann: * Hahnemann at Coethen, being unable to attend his numerous patients, though engaged till a late hour at night, obtained the assistance of Dr. Lehmann. He attended Hahnemann's patients for three years, afforded his employer the most complete satisfaction, and prepared the medicines with the greatest care. He won Hahnemann's heart more and more, not only by a zealous devotion to his master, but by his candid unhesitating opposition elsewhere. Hahnemann knew how to appreciate these qualities. Had he not raised himself to the highest station in the world of science by unwearied opposition to the old system? Had he not penetrated to the source of his new doctrine by his freedom of investigation? He reposed the highest confidence in Dr. Lehmann. Even during Hahnemann's residence at Paris, Lehmann prepared his medicines. His letters addressed to him from Paris breathe the warmest friendship. At the request of Hahnemann he had his bust taken. The busts of these two great men should, like the originals, stand together. So Hahnemann directed.

CHRISTIAN F. G. LEHMANN.

No data obtainable.

FRANZ MEYER.

No data obtainable.

THEODORE MOSSDORF.

He was born in Dresden. He married Louisa, the youngest daughter of Hahnemann. When Hahnemann went to Coethen from Leipsic in 1821, Dr. Mossdorf accompanied him. In the State document creating Hahnemann Hofrath, the Duke Ferdinand of Coethen granted permission for Dr. Mossdorf to act as Hahnemann's assistant, granting him the rights of preparing and dispensing his own medicines, and decreeing him a patent of naturalization. He received from the Duke a yearly allow-

* "Biographisches Denkmal," p. 106.

ance of sixty thalers for medical attendance on the Duke's servants.

In August, 1832, Hahnemann writes to Duke Henry, the brother of Ferdinand, who had died a short time before, saying that he had for some years availed himself of permission to have an assistant, and continues: "Whom I would have still retained had his moral conduct been only tolerable."

There was some serious disagreement between them and Mossdorf left Coethen. Frau Louisa was later divorced from him.*

WRITINGS.

Synopsis calculorum urinariorum. Jenae. Schreiberi. 1820.

MORITZ WILHELM MULLER.

The editor of the *Allgemeine hom. Zeitung* thus writes:† The ranks are ever becoming thinner and the circle closes more narrowly around the old faithful votaries, friends and representatives of Homœopathy, and soon under the present circumstances even these few will have given up to the new generation that place which in the former tempests only the inspired courage and the joyous perseverance of the old Homœopathic physicians could have maintained. Must it not give deep grief to us, who are left behind, when we see one after another of these old representatives of Homœopathy part from us and lay his weary head to rest? Surely even every one of the younger physicians will drop with us a tear of sadness and of deeply-felt grief on the grave of the brave champion for the holy cause, for our dear friend who has been snatched away too early for the cause of our science, namely, our beloved Moritz Wilhelm Muller.

He was born August 11th, 1784, at Klobitz, near Wittenberg, where his father, Wilhelm Muller, was pastor. Almost in the order of their birth, he, as the third son of his parents, was also the third to die, and only the youngest of the four brothers still survives. He was taught in his paternal home the first rudiments of all knowledge, and his memory as well as his faculty of comprehension must have been very acute in his youthful years, as he was able, even in the last years of his life, to give such remarkable proofs of his learning. He was at an early age

**Brit. Jour. Hom.*, Vol. xxxvi, p. 262.

†*Allg. hom. Zeitung*, Vol. xxxviii., p. 33.

ready to attend a school which prepared students for the university, for when only eleven years of age he attended the Gymnasium of Torgau, where he remained till his seventeenth year. From there he went to the University of Wittenberg, where he devoted himself to the study of medicine.

In physiology he was especially instructed by Krug, but in medicine proper by Kreysig, Seiler and Erdmann. Here also he learned to know Schweikert, Sr., who at that time determined to choose the academic career. These two ardent spirits felt much attracted to each other and became friends. This was the reason why Muller, after having convinced himself for two years also of the excellence of Homœopathy, by his striking arguments convinced Schweikert, who was then engaged as practicing physician, as well as school physician in Grimma. When Muller had entered on his twenty-first year he saw that the imperfect polyclinical arrangements (there was no clinic at all) in Wittenberg were not suitable for the gathering of practical experience. He, therefore, left this seat of the Muses to acquire in Leipsic what he still lacked. He was evidently born under a lucky constellation or his wishes would not have been fulfilled so soon and in a manner so unexpected to him.

Without any especial patron, when scarcely half a year at Leipsic, he became assistant at Jacob's hospital and surgeon's assistant there under the foremost clinical teacher; at the death of this worthy man Reinhold, at the end of November, 1809, three years later, he was entrusted with the direction of this hospital and clinic, and the magistracy, as a free gift for filling this post, gave him a municipal medical office.

After having favorably passed his examination as Magister, to gain his diploma he defended his *Commendatio historica: De schola Lipsiensium clinica*, on the 23d of December, 1809. He was promoted on the 19th of January, 1810, for which occasion he wrote a thesis—*De febre in inflammatoria*.

By the death of Reinhold he also entered on his lucrative practice, and his kind, predisposing manner, which he retained till his death, gained for him such complete confidence that he was much sought for as a circumspect, talented practitioner. In the meanwhile the year of war, 1813, so fatal to Saxony, approached. The war-typhus, which had spread over the whole of Europe, together with the great army fleeing from Russia, gave abundant work to the physicians of Europe, whose number was not excessive, so that even private physicians were obliged to assist

in the hospitals. This was, however, more the case in the year of the actual war, when many houses, churches, schools and other public buildings had to be turned into hospitals. To direct these new hospitals requisitions were made on renowned physicians in private practice, who took students of medicine and of surgery for their assistants. Our friend Muller was thus appointed to take charge of such a hospital. His hospital was rather remote, about a mile from the city on the Phonberg. His two daily visits there lead us to suppose that he did not have much free time at his disposal, especially since the typhus hospital fever was doing murderous execution in the city and also among the sick intrusted to his care. While he was acting as a substitute in this hospital, he was later on lecturing on *Materia Medica*, a science to which he was always devotedly attached.

When tranquility had been restored, in the year 1814, on October 31 he married Miss Rosetta Neuss, with whom he lived till his death in greatest happiness, which would have been more undisturbed if his wife had not been several times in danger of death from illness.

Two of his children are still alive, a son and a daughter. The former, Dr. Clotar Muller, is already known by his works and his deeds. And the latter has for several years been married to a man of the highest scientific attainments, whose preference for history has made it most desirable for him to enter into the academic career.

Muller was a deep thinker and his mental powers were most active with a subject with which he seemed least sceptical, and this was his practice from the beginning of his medical career even to the end of his life. His genial expressive countenance made it appear at first sight that he was no common man. His glowing enthusiasm for a cause that he had learned to love was moderated by a critical disposition, which was characteristic of him and kept him from rashness. He always applied to dogmas the measuring rod of experience, and his acute spirit glided over all the weak places, before he gave his assent and made it known by word of mouth. These words were indeed precious, unsought, clear, and, keeping to the subject matter, sharp, but without bitterness. Thus he became one of the first and one of the best critics of the Hahnemannian doctrines, without seeking or nourishing enmities against the author like the later Hygeists. Nothing in science remained strange to him; he was always striving to advance, and this the more quickly as he soon had

learned to know the weak side of practical medicine by his penetrating observations and experiences. He did not, like many others, rest self-satisfied in the knowledge he had acquired, nor did he selfishly rest on his laurels. He was ever urged forward to enlarge his knowledge for the benefit of his suffering fellow-men, and nothing escaped him from which he could derive any good for this purpose.

With this active zeal it would have been impossible for him to remain unacquainted with Homœopathy. He had already an excellent practice which would not only have sufficiently occupied another man, but would almost have crushed him; nevertheless Muller found time sufficient to become acquainted with every new movement, and to convince himself as to its reality and value. So it was also with Homœopathy. After this had attained to some acceptance in Leipsic, patients from other places applied to Hahnemann, among whom Prince Schwartzberg was especially eminent. I remember very well that time in the year 1819, when Muller sent his amanuensis to me with the request to lend him for a short time my copy of the "Organon" to read through. Shaking my head, I handed it to him with the remark that so celebrated a star of the first magnitude in the allopathic firmament would hardly accept Homœopathy with firm faith. But as we are sometimes deceived in this life, it was so in this case. The power of truth manifested itself most gloriously and victoriously in Muller's unprejudiced and pure spirit. He became filled with an increasing love for Homœopathy the better he became acquainted with it, and became its zealous friend and adherent with no thought as to the opinion of his former friends, with no thought that his conversion to the reformed medical art (as Muller himself was the first to denominate it) brought him for a time great pecuniary losses, as a number of his patients were not of the same opinion with him, and sought another physician.

Soon he heartily and confidently joined the then so small company who had the same convictions, and by his words and deeds gave also to others manifold opportunity to pursue a similar end. This may appear from the *Leipziger Tageblatt*, of 1821. A pernicious epidemic of scarlatina was then prevailing in Leipsic, when he wrote an article in that paper under the heading, "Prove all things, hold fast that which is good." In this article he urgently recommended Hahnemann's treatment of the disease. Several like minded physicians combined with him and

formed a society under the protection of which the first homœopathic journal, the *Archiv für der Homœopathischen Heilkunst*, was called into life. The first number of this journal contained some solid articles from his pen, and for a long time he took an active part in it. In many ways opportunities offered themselves to show his penetration and activity of spirit as well as his rich experience and energetic zeal for the good cause, for only a few of us were as well able as he to give a true explanation to appearances unfavorable to Homœopathy, to counteract intrigues, to prevent collisions with the state, with municipal and medical authorities and with the druggists. Many Homœopathists involved in lawsuits, persecuted and disgraced, were rescued by his sharp, incisive pen from their desperate situation. Yes, despite of his noble and dignified style he did not hesitate in such cases to give the sharpest points to his foil of attack; this several times exposed him to fines, by which the authorities hoped to paralyze his energy. But they mistook Muller's character. He was not to be easily rebuffed. When he was convinced of the truth of a cause he recognized no higher authority than justice; the medical officers highest in degree could not daunt him when they exposed themselves by shallow reasonings and false statements. This may be proved by the titles of two of his pamphlets.

In the year 1828 he received the very honorable request to treat an august member of the reigning family in Saxony homœopathically, and the order stated that he could act according to his own choice and would not be obliged to first consult the court physicians.

Our friend Muller was very active in the preparation for the celebration of Hahnemann's jubilee in 1829. He was a special originator and joint founder of the Central Society, and just at the time when this society was most active and influential he was its director, and very zealously and circumspectly guided the work of the committee which was then much occupied with establishing the hospital at Leipsic.

Whoever knows with what chicaneries the establishment of a new hospital, especially of a Homœopathic hospital, the first not only in Saxony but in the whole of Europe had to contend with, may be able to form some idea of the many unnecessary communications to the city council, the ministry and the medical authorities, which all fell to the part of our friend to prepare. For he was the notable man among us, and by his prudence and

skill he understood how to bring the matter to a successful issue, and he accomplished this in the short space of five weeks.

The definite resolution to establish a Homœopathic hospital was adopted by the Central Society on the 10th of August, and as early as the end of September, 1832, Muller received a letter full of praise and thanks from Hahnemann, to whom he had constantly reported all the steps taken in the matter. By this letter Muller felt himself well repaid for all his cares and trouble, and he was from then onward even more ready to make any sacrifice so that the work which owed its success almost to him alone soon came into actual operation. After these honest and altogether unselfish efforts and exertions he must have been not only astounded but deeply agitated and mortified to see Hahnemann publish in the *Tageblatt* of Leipsic a deeply insulting article against several honored Homœopathic physicians of this city, warning the public against the Homœopathic treatment they would receive at their hands. And this after Hahnemann's flattering letter of September 1st.

That libellous article could only have been caused by unhappy back biting and gossip! However much Muller's activity may have been impeded, his spirit broken, and his participation in everything pertaining to Homœopathy paralyzed, he nevertheless undertook the direction of the Homœopathic hospital for the first half year, and delivered lectures on Homœopathy which he printed by installments in the *Allgemeine hom. Zeitung*; but he refused to have a special reprint of these lectures made, though an offer was made him to that effect by a bookseller.

Through his many-sided activity there was formed in the year 1833 after the local society here had quietly disbanded, the *Freie Verein für Homœopathie* (Free Union for Homœopathy). In this he co-operated till his death, but lived more for himself and his family and did not willingly go into print except when the hospital founded by him unavoidably demanded it.

Though he had suffered much from the founder of Homœopathy,* and perhaps even more from false friends, he did not become bitter, but retained his noble, not to say, stately bearing with respect to those unprofitable matters, and thus increased the esteem in which he was held by his true friends, and these

* It may be mentioned that Hahnemann did not treat Hartmann, the author of the above sketch, very well at this time. He came also under the ban that the stern old man had cast on his followers and disciples.

friends included probably most of the genuine scientific Homœopaths, for to win the victory over himself when a man is justly displeased is worthy of the true man.

In his widely extended practice mostly among the higher classes he enjoyed the firm confidence of his patients and the best success in his purely Homœopathic treatment. This in part made him forget the troubles which envy, malice and intrigue had so abundantly heaped upon him. He eagerly followed and industriously studied every advance in the science of medicine, in order that he might not fall behind the younger physicians who would become acquainted with these new phenomena even while at the University. But besides this he occupied himself in his leisure hours with history, geography and politics. His extraordinary memory for names and for numbers was astonishing, and he could name for almost every day of the year some historical event that had occurred, without appearing to desire at all to boast of such knowledge. With geography it was the same, on the whole globe even the most insignificant place was not unknown to him, and often, when making a new acquaintance from a strange place he seemed better informed with respect to it than the person who came from there, so that he often would be asked with surprise whether he had traveled there.

As a father he lived most happily, and never desired to leave the circle of his beloved ones to seek happiness outside which he could not find at home. And if he could not refuse to join in some amusement outside, he would seek to shorten his part in it as much as possible, so as to return as soon as possible to his family circle. He was a man of honor, a noble man, a true friend, whose active sympathy in every relation of life could be counted on. This I can testify from my experience, with heartfelt thanks, since for almost twenty years he faithfully stood by my side as a sympathetic physician in the severe diseases which visited myself and my family. He knew no enmity, he bore no grudge against the malignant persons who had injured him, he often would defend a man who had injured him, against others.

I might mention that he had several times quite seriously fixed the time of his death on some definite day, and thereby disquieted his family and his friends, and he never wearied in fixing on some new date. This of course had, as a consequence, that we jokingly teased him about it, nor did we take it seriously when he assured us at the approach of the cholera with even greater impressiveness than before, that he would succumb to

cholera if seized with it. On account of this he was very cautious as to what he ate, and would commit no dietary blunder. On the 22d of September he visited me cheerful and joyous. I therefore apprehended nothing serious when I heard next day that he had diarrhœa several times, but that he was in good humor nevertheless, though as a precaution he had not left his bed. On the 24th, at half-past four A. M., vomiting had appeared, soon an icy coldness and lack of pulse were added, yet he complained of but little pain. In the first hour of the afternoon all hope for his recovery had vanished, and in the evening after 6 o'clock he had quietly passed away. He has left many friends, and those who were acquainted with him more closely will keep his memory faithfully within their hearts. Sit ei terra levis.

HARTMANN.

WRITINGS.

De febre inflammatoria quæstiones. Lipsiæ. Schonemann's Disput. Handl. 1812.

De schola Lipsiensium clinica. Lipsiæ. 1812.

Cholera, Homœopathy and the Medical Authorities clash. Facts published for the benefit of the Homœopathic Endowment Fund by the Local Society of Homœopathic Physicians in Leipsic. Leipsic. Schumann. 1831.

Contribution to the History of Homœopathy. From Documents. From Notes by Dr. M. Muller. Leipsic. Reclam. 1831. (From the Archiv. x. I.)

Justification of Dr. Jos. v. Bakody in Raab concerning the groundless attack by two physicians of that place, with judicial proofs. Leipsic: Kunzel. 1832.

C. MICHLER, A. F. MOECKEL, ROSAZEWSKY,
SCHONIKE, SCHRODER, and URBAN.

No data obtainable.

ERYTHROXYLON COCA AND NYMPHOMANIA.

Case II.*

The mother of a young sweeper-girl, the latter aged about fifteen, of robust constitution and vigorous growth, in the service of the Calcutta Municipality, consulted me and told me the story of her daughter's ailments in the following manner:

* See HOMŒOPATHIC RECORDER, January and March, 1891.

At the age of thirteen the girl was married to a young man of twenty. When she was married she had her external organs, the signs of puberty, all well developed, but she did not menstruate. She had a patch of eczematous eruption about the mons-veneris, continuous with the left labia majora. I did not examine the parts, but from the description of the eruption I came to the conclusion that the patch was an eczematous one. The eruption irritated the parts so much that she was often compelled to scratch it voluptuously. Each scratching was almost invariably followed by a tickling sensation about the vagina which brought about almost immediately a kind of milky discharge through the vagina. A month after the marriage the itching became so troublesome that it was felt at the vaginal walls also. The girl told her husband about it, who said that sexual intercourse would remove the trouble. The girl did not know what sexual intercourse was, so she gave her consent to it. As soon as there was sufficient penetration the girl felt as if something (probably the hymen) had ruptured inside the vagina, which was followed by profuse hæmorrhage through the vagina. This alarmed her and her husband. The latter communicated the matter to his mother-in-law, who also was very much alarmed and asked her daughter as to how she got this trouble. She related the story.

The mother called in a neighboring hospital assistant, who stopped the hæmorrhage. After stoppage of the hæmorrhage a pain appeared at the cervix uterus and the left ovarian region, which, however, went off without any treatment. The husband was not allowed to sleep with the girl for a fortnight or so, after which the girl had, as she told me afterwards, intercourse with her husband three or four times every night. I asked the girl as to whether she or her husband were for such frequent intercourse. She answered that it was herself who induced her husband to it against his will, for removing the itching and tickling sensation about the vagina. The object of my asking the girl this question was to ascertain whether she had nymphomania before pregnancy. About nine weeks after the first intercourse morning sickness commenced and there was much aversion for food, and the mother came to the conclusion that her daughter must be pregnant. At the tenth month the girl was delivered of a very healthy child, after a protracted labor of five days. During the whole term of pregnancy there was no desire for sexual intercourse, but itching about the vagina was

present, and even that only occasionally. There was no pain about either the cervix uterus or the left ovarian region. After the birth of the child there was much hæmorrhage, which amounted almost to flooding. The hæmorrhage was stopped by the hospital assistant who had treated her on the first occasion. The lochial discharges were regular and normal till the 18th day of the child's birth. On the 19th day the *lochia* was totally suspended, and the pain about the cervix-uterus and the left ovarian region appeared. Some bran poultices were applied to the abdomen by the hospital assistant. On the second day of this treatment the hæmorrhage from uterus appeared, and with the hæmorrhage the desire for sexual intercourse commenced, and on the following day the desire increased so much that the girl lost all sense of modesty and cried for her husband's embrace. Satisfaction of sexual desire was, however, followed by severe hysterical fits and fainting, and profuse hæmorrhage from the uterus. This alarmed the mother very much. I was consulted. When I saw the girl at 10 P. M. she had had sexual intercourse with her husband about twenty minutes before. She was then in a hysterical trance. On her recovery from the trance I took the history of her case, and she detailed, without reserve, all that had happened from the date of her marriage up to date, as narrated above. When examining her I learned, on inquiry, that the desire for sexual intercourse was induced or increased on lying down, especially on the back, at night or when alone. The desire commenced or increased with a pain and a pressive feeling about the *möns-veneris* and the genitals, and irritation about the left ovarian region, with frequent feeling as if there would be discharge of blood through the vagina and urging to stool and to pass urine. There was also discharge of a few blood clots with the hæmorrhage which followed each sexual intercourse, with excruciating pain in the uterine region, cramp-like pain about the chest, palpitation of the heart and difficult or anxious respiration, with hysterical fits and fainting, jerking and weakness in the lower limbs, especially in the thighs and the knees; her mood was changeable; that is to say, she was sometimes cheerful and sometimes very much depressed; she had a tendency to abuse, especially her husband, during an excitement of sexual desire.

These symptoms led me to prescribe *Platina* 6, in one-drop doses, a dose every three hours. I prescribed the 6th potency because I had very good results from its use in a case of ex-

cessive sexual desire after miscarriage previous to this case. After six doses were taken all the symptoms abated to a considerable extent. I ordered the continuance of the medicine, three doses daily, and did not see the patient for two days, during which she remained in the same state as before. Now a new symptom appeared—before taking *Platina* the patient had felt *very weak* after each intercourse, now she felt *stronger* after each intercourse, and nymphomania had increased fifty per cent. I thought it was a medicinal aggravation. So I stopped the medicine and let her alone for twenty-four hours. After this I saw her again, when I found that her nymphomania had well-nigh gone. She was ashamed at speaking to me, so she explained through a third party that there was much burning pain or irritation about the vagina, especially when moving the parts. This irritation, I thought, was due to the abrasion of the mucous surfaces of the vagina, perhaps owing to frequent friction during sexual intercourse. I prescribed now *Platina* 30, three doses daily internally, and *Calendula* ℥ mx, *Olive Oil* ʒii and *Glycerine* ʒi—to be well mixed and applied to the vagina morning and evening.

Three days' medication with *Platina* 30 did the patient no good; only the irritation about the vagina abated, probably owing to the external application which I had prescribed. Now the patient began to feel sleepy, without being able to sleep well: she felt giddy; she felt tightness about the heart; she had hurried respiration; she had no appetite for food; she felt much weakness about her thigh and knee; she felt, though occasionally, cramp-like pains in the calves; trembling all over the body, and frequent violent yawning, with profuse discharge of tears from the eyes. The more I studied the case, the more I was inclined to a further trial of *Platina*. So I prescribed it again, but at the 100th potency, three doses daily. This treatment was pursued for six days, after which she came to me again and said that she felt quite well after six doses of the medicine had been taken, with the exception that there was still more itching about the mons-veneris and the left labia minora, which induced desire for sexual intercourse now and then. I ordered *Platina* 100. again, six does twice daily. The patient came to me again, after taking the six doses, and said that she was very much the same as last week. I now prescribed *Platina* 200., a dose daily at bed time, at night, for six days, after which the patient told me that the nymphomania had increased so much that her hus-

band was quite disgusted with her, and that he was almost dying of exhaustion.

For four days I gave her no medicine. On the fifth day she came to me and said that she was very much as before. Now I thought *Platina* 100 was the suitable potency for her, and that I should try it again. So I did try it for four days more. On the fifth day she came again and said that she felt much worse than even when she had first consulted me. She complained that she now felt the desire for sexual intercourse so much that she had lost all sense of modesty and became inclined to have her husband's embrace every time she saw him, without which, she became, as it were, insane. When she was describing her ailments, she looked like a mad woman, and very anxious in appearance. Her mother told me that, notwithstanding these complaints, the daughter was very active in her work under the Municipality, as also in her domestic work, for which she did not show the least unwillingness, though *she took little food or drink*, and passed sleepless nights. Her mind seemed clear, as she answered any questions like a sensible woman, and with eagerness. Besides her Municipal work she had private service under a European gentleman, where she had to remove night-soil from a three-storied house, and she did it without any fatigue. These symptoms reminded me of my old friend *Erythroxyton coca*, on which I had written two papers, published in Vol. VI. of the HOMŒOPATHIC RECORDER of 1891. I noticed *Coca* symptoms in this girl. So I prescribed it in drop-doses of the 1x potency, three doses daily, for three days. On the fourth day the patient came and said that the old complaints had gone, but that some new complaints had appeared, such as weakness of the thigh and legs, weakness of memory, giddiness, palpitation of the heart, with a constriction about the cardiac region, which often disturbed sleep at night; occasionally she felt cramps in the calves and cramp-like pain in the left ovarian region; aversion to work or talk, because she felt it tiresome; a feeling of fatigue in all the limbs, especially the legs; shortness of breath, on account of which she frequently felt the necessity of taking a deep breath; also a feeling of suffocation on lying on the back and on the right side; she always felt drowsy, but when she went to bed she could not sleep well, and the little sleep she had did not refresh her at all. Most of these symptoms I had noticed in my own case, about two months after I had stopped taking *Coca* in way of experimentation. So I thought *Coca* was

the right remedy for this girl, and that only the proper potency had to be chosen. I knew from experience that in these cases material doses of this drug work better. So I prescribed *Coca* H in $\frac{1}{4}$ drop-doses for three days. On the fourth day the patient came to me with a *smiling face* and said that she was much better. The only trouble which she said she had now was that she had felt some excitement of sexual desire, once or twice, during these three days. I ordered *Coca* again in $\frac{1}{4}$ drop-doses, only two doses daily, for a week. On the eighth day the patient came again and said she felt no uneasiness or discomfort, except general weakness, for which I prescribed cod-liver oil, in three-drop doses, after morning and evening meals. This was continued for about three months, and her husband reported to me that his wife was all right. She did not feel the nymphomania and the patch of eczematous eruption which she had in her private parts had also disappeared.

My belief is that in conditions of both excitement and depression of the nervous and sexual systems *Coca* is a very good medicine. When the patient is in an *excited condition* we have to use this drug in *potentized doses*, and when in *depressed condition* we should use it in *material doses*, that is in the *mother tincture*.

From the results of experiments on my own person, and the experience which I have gained from the use of *Coca* in my own practice in case of disease of a varied nature, I am inclined to the belief that it may hold a very high place among the new or rare remedies of our Homœopathic Materia Medica. I would, therefore, recommend an extensive trial by the profession of this useful, but *neglected* agent of our Materia Medica, and I am almost sure that their labors in this connection are likely to be crowned with success.

R. K. GHOSH.

Nabábpur, Dacca, East Bengal, India, July 20, 1895.

OTHERS HAVE NOT REPORTED YET.

Two years ago I wrote a short article on the treatment of snake bites with *Sisyrrinchium*, and have since then been watching the journals for the experience of others with the remedy and for a proving of the same. Why is it that nothing has appeared? The new remedy was, as I understand, put upon the market by Boericke & Tafel, of Philadelphia. There are phy-

sicians who can vouch for all I have claimed for it. I have never undertaken a proving of it myself, simply because I am not in as good health as I should be.

U. W. REED, M. D.

P. S.—Any Homœopathic M. D. desiring a good location may find it by writing me. No charges.

North Manchester, Ind.

R.

CURE OF CATARACTA ZONARIS WITH A HIGH POTENCY.

Translated for the HOMŒOPATHIC RECORDER.

M. S., a ten-year-old blonde girl, rather animated, was brought to me on the 24th of April, 1894, on account of a gray cataract. The parents were advised to have an operation performed, but on account of their fear of this they came to me. A dimming of the sight was observed soon after she began going to school and this steadily increased. The parents could think of no cause. The girl learned to walk late, had many teething troubles and eruptions and later also headache—pain on the top of head, worse at night. The mother showed a scrofulous taint in her youth which was still apparent. An examination showed a greyish-white turbidity which was not sharply bounded. She would indicate the direction precisely of a candle at a distance of twenty-five feet. The examination for field of vision gave no special indication.

The child was very restless at night, was generally uncovered, had interchangeable appetite with aversion for meat and likewise changing stool which, if diarrhetic, came invariably early in the morning, the first being hard but the ending thin. The severe headaches which had troubled her earlier in life were rare latterly. Heat in the region of the part of her hair was frequent and cold feet still more frequent. The patient was quite comfortable in the open air, though easily affected by cold air. She had always been susceptible to colds from the least causes. The sight was poorer in damp weather. Her objective condition only called for an absorbent, but which one was to be applied in this case could only be indicated by the subjective manifestations. If we had not our *Materia Medica* with its precise and sharply defined proving-pictures we would be compelled to resort to experimentation, but instead we may go to work by

strict individualizing and with sure aim with the totality of the symptoms.

I prescribed *Sulphur* 500th in one dose, to wait a month for continued action. However, four weeks thereafter I was absent from the city, so that I did not see the patient for nearly two months. The sight was considerably improved, appetite good, stool regular, in fact, her whole condition was changed. The first day after taking the medicine the girl was extremely tired, and was awakened the following night by great itching over the entire body; small pimples and vesicles developed which after a few days gradually disappeared, and during this time her stools were very thin. The improvement in the sight began about in the third week.

The action of the high potency was striking and I prescribed *Sacch. lactis*, one powder a week. After three and a half months the patient could read the large E of Snellen's chart and in six months she was cured.—*Dr. Waszily-Kiel, in Allgemeine homoeopathische Zeitung.*

GRAPHITES, INTERNALLY AND EXTERNALLY.

By Dr. Hirsch in Prague.

Translated for HOMEOPATHIC RECORDER, from *Intern. Hom. Presse.*

I have to mention three additional cases, the relatively quick cure of which I owe to the internal joined to the external use of *Graphites*. The one case was a disease of the nails, with which a young lady of 19 years, coming from a scrofulous family, had suffered for several years. The affected nail was on the big toe of the left foot. Its horny substance was disfigured in a manner that I had never yet seen by hypertrophy and, at the same time, of a black color like buffalo horns. This disfiguration covered the anterior edge of the nail up to one-quarter of an inch, and it looked just as if a horn would grow out of it. The hardness of this horny substance was so great that every attempt to cut off a part of it with a knife miscarried, and only with a sharp file was it possible to file off a yellowish-gray powder; then the filed part of the nail showed a gray color. I first ordered a toe-bath morning and evening for several days, then I used a moderately strong watery solution of caustic potash to soften the horny mass. But this attempt only caused the nail to lose its shiny black color, and changed it to a very dark gray

without lustre, but the hardness of the nail remained the same. The peculiar symptom of *Graphites*, which is made prominent by heavy-faced type, "thick, crippled nails," caused me to use this medicine for some time in frequent repetition, first in dilution then in trituration.

Four weeks had passed without any change appearing in the diseased nail; as before, it remained thinner toward the root and gradually became thicker and thicker by the continually increasing deposit of new horny layers, until it reached the above-mentioned curious thickness. After declaring that I would for the present abstain from the use of medicine, I requested the patient to have her nail filed every morning and evening. This she did. The result was quite satisfactory. The thickness of the nail was diminished so that the level of it was even with its skinny matrix, which really indicated a lower level than the normal; but it must not be overlooked that the pressure of the shoe, lasting for several years, had affected an appreciable permanent lowering. The color of the nail was grayish, like that of filed horn. Under these circumstances it was to be foreseen that the improvement was not a lasting one, since the discoloration and the irregular hardness of the nail did not lead us to expect a normal new formation of the tissue; the more so, as on pushing back the encircling skin no healthy formation was to be seen in the matrix.

I now determined on the external application of *Graphites*. The conjuncture of time seemed most suitable for this, as through the constant mechanical operation of the filing the nail had removed it a little from its matrix, whereby the nourishing tissue, from which the formation of the new cells proceeds, had become more accessible to remedial influences. The patient was directed to apply *Graphites* ointment every evening before going to bed to the matrix of the nail, and then to cover it with the thumb of a glove. After eight days of this treatment it could be clearly seen that the grayish-black part of the nail, still left, had slightly raised itself from its bed and seemed to rest on it but loosely, so that the effective action of the ointment was the more facilitated. A week later the nail was quite loosened, and there appeared under it a normally colored bed in full integrity, so that we might expect with some certainty that a quite correct new formation was now to be hoped for, and this supposition proved correct. By a gradual advance and superposition of healthy cellular layers there was slowly formed a nail, soft at first,

but gradually hardening and of quite the normal form and color, which I directed to be only covered with a light layer of wax. After a space of nine or ten weeks from the complete detachment of the discolored nail a new one of perfectly normal formation and natural color had taken its place.

Now as to the other two cases in which the internal use and, especially, also the external application of *Graphites* was followed by favorable results. An unmarried lady of fifty-six years, of slender build, leucaemic constitution, pale complexion, who had from her childhood been delicate and feeble, suffered for nearly fifteen years from a cutaneous ailment which appeared most frequently on the forehead and the cheeks, very frequently also in the axillæ and with especial obstinacy on some of the fingers. The first traces of this disorder appeared about the climacteric period and, indeed, on the face and neck and also in part on the fingers. The form of this cutaneous disorder may, according to the description, have been in the beginning that of the eczema squamosum, in which a somewhat reddened, more or less extensive, spot on the skin was transformed into a tetter which continually threw off scales. As this disorder was so obstinate the allopathic physicians who treated her had full opportunity to try the whole series of most divers external remedies so particularly recommended by Hebra & Co., without any scientific basis and without any underlying rational principle. *Zinc*, *Bismuth*—precipitate tar and soft soap—one remedy after the other was challenged to show its curative powers; but they were not able to produce any but transient successes, no lasting improvement, sometimes they even caused transient aggravations. It was a sorry malignant chance which prevented the doctors entrusted with this therapeutic problem from catching in their blind groping, the specific remedy; and so at last the patience of the sufferer was exhausted after so many years, and she finally resolved to seek aid in Homœopathy. At the first glance I would have supposed that this patient, who was a stranger, and whose story of sufferings was quite unknown to me, had lately passed through erysipelas of the face, which was just scaling off. Thus it appeared on the face and the cheek. I found it different in the axillæ, where below the scaling epidermis a red, somewhat moist surface appeared, and besides this in the upper axillary region, as well on the right as on the left side, several spots were covered with diachylon-plaster, and when this was taken off there appeared some painless, soft,

glandular swellings, some smaller, some larger, some shaped like filberts and some like beans, of quite normal skin-color. On several fingers, tied up with linen rags, there was seen an eczema quite like that in the axillæ, and in some places the linen had to be taken off very carefully. Except a tendency to costiveness, which probably was due to former frequent purgatives administered, the state of the patient might be designated as normal; but she made the observation, to me not unimportant, that she always felt best when the cutaneous disorder was at its height, while when the doctors succeeded in effecting a greater or less decrease of the eczema her health was always worse, as she was then usually troubled with headache, frequent fits of vertigo, a general feeling of prostration and a striking diminution of appetite.

My treatment at once began with *Graphites*; the patient was directed to take every other evening a powder moistened with the fifteenth dilution of this remedy. One circumstance I would still add before I continue with the report of my treatment. The patient had not concealed from her former physician her determination to try Homœopathy. He had answered that he would not deny that a strictly homœopathic diet might act beneficially on the cutaneous disorder, and he would undertake to prescribe it for her with the greatest exactness, and he asked the patient to try a strict obedience to this regimen and the omission of all external and internal remedies for a few weeks. This was done. The patient suffered a life of deprivation; the use of coffee, tea and beer, as well as that of wine and all spiced food, was strictly prohibited, and after four weeks had thus passed the whole result consisted of a most striking drowsiness during the day, in a general atony very depressing to the spirit, while the eczema, especially in the axillæ, had visibly increased, and there, as well as on the fingers, the moisture had considerably increased. Having been instructed by a friend as to the erroneous views with respect to Homœopathy entertained by her physician, she finally came to it for help.

After fourteen days' use of the above mentioned powders of *Graphites* the secretive activity of the eczema was somewhat diminished, so also the redness of the surface in the axillæ and the fingers was paler, but the glandular swelling which were now uncovered had remained the same. More gladdening, especially for the patient, who still cared for her good looks, was the improvement in the complexion of the face, as its scaly

appearance was much diminished, so that it might be assumed that the cells of the epidermis had ceased to die off. Another supply of *Graphites* was given her, after using which her complexion was so much improved that the patient could promenade without her veil, and also began to attend parties. In those parts of the body, however, which were covered by her dress and gloves the improvement did not make the same progress, which caused me to give her the *Graphites* at shorter intervals; thus the patient received a powder every evening. When the improvement had notwithstanding this made no progress in fourteen more days, I allowed a full week to pass without any medicine, then the examination gave the following results: The skin of the face was in the normal state. In the axillæ as well as on the fingers a considerable roughness of skin could still be perceived, though the redness at the base had vanished, the humidity could only be observed now and then, but the glandular swellings had not changed. Now I tried the effect of a single dose of *Graphites* 30, but the result was not satisfactory. After waiting fourteen days everything was still in the same state, and the glandular swellings especially were a sore trial to my patience. I was considering to what medicine I should pass next, when a glance at the complexion of the patient, which now was quite pure, brought me to another determination. I again ordered *Graphites* but the third trituration, of which a dose as large as a pea was to be taken morning and evening. Besides this I had *Graphites* ointment applied to every glandular swelling every day with a rag. When I again visited the patient after eight days she could not sufficiently praise the action of the local application of the medicine, and she even asserted that the glandular swellings had become so imperceptible that in applying new rags she actually had trouble in finding the places where the swellings were. Incredible and exaggerated as these accounts seemed to me, examination at once convinced me that really there was hardly a trace of the swellings left; the eczema in the axillæ and on the fingers had also very favorably changed, so that the promise could well be made that if the improvement continued equally the complete cure could be expected in eight days. I was not disappointed in my expectations, though as a precautionary measure, though the cutaneous and glandular disorder was fully cured, I continued for some time the use of *Graphites*, though at greater intervals. Not the slightest sign of a relapse could be seen, neither at this time nor for several weeks, and yet—

I was disquieted by the remembrance of the many years this disorder had lasted, so that the radical cure of this disorder still seemed to me precarious. To remove my doubts I resolved, based on manifold previous experience, to give a few doses of *Sulphur* at considerable intervals, as a touchstone of the completeness of the cure. In a few days after beginning the use of *Sulphur* 15 the patient frequently felt a slight itching in the spots previously affected, but nothing of an objective phenomenon of disease could be seen for even many days afterward, until finally there appeared on two fingers some spots which showed an erysipelatous redness, combined with some desquamation. During late years in eczemas which are not extensive and which appear only in spots, I have been accustomed to recommend beside the internal use of the indicated *Sulphur*, also at the same time a local application by means of a bandage of vulcanized india-rubber cloth; this I also applied in this case. Two pieces of india-rubber cloth were fixed on the diseased spots of the skin with a bandage, the pieces being just large enough to cover the spots of eczema. They were removed in the morning and evening, and very carefully cleansed of the secretion, usually copious, clinging to it, and this treatment is continued to the total drying up and cure of the eczema. This result was attained in the present case within the space of three weeks. Ten months—a pause never yet experienced by the patient—have since elapsed without the least sign of a relapse.

A second case, in which, however, only a single dose of *Graphites* 30 was given, but the same medicine was applied also externally for some time, and where the most favorable results were obtained, was that of a young lady of fifteen years who was presented to me by her mother on account of the unbecoming way in which she carried herself. When examining the upper part of the body, which was uncovered for the purpose, I saw on the left side of the rather lean neck three soft, quite painless glandular swellings, the largest of which was of the size of a large thick almond, the other two were of the size of pretty large beans. On asking how long these had been there, the mother answered that it was two years since they were first noticed, and that two kinds of salve had been used for them; but as these rather increased than decreased their size, they had for a year made no further effort, but left it to nature, and they found that since that time there had not been any aggravation. My proposition, to give one harmless powder to work on the glands and

three small plasters to keep the swellings always covered, was accepted gladly by mother and daughter, the more as I called her attention to the fact that a simple thin kerchief worn around the neck would suffice to make the little plasters invisible. They promised to act according to my prescription, and the patient received besides a very simple arrangement for carrying herself straight. I expressed the wish that the young lady might call again after awhile. A few months later the patient appeared, accompanied by her mother, in my office-hour, and the mother reported to me first of all that friends and acquaintances found the carriage of her daughter essentially improved, and now they wished to hear my opinion. I looked in my journal and found: "Slight deviation of the middle third of the spine to the right, the right shoulder, therefore, somewhat higher," and to this was added the remark: "Three glandular swellings on the side of the neck, *Graphites* externally and internally, only one powder moistened with the 30th dilution." Now I remembered the case exactly, and with lively interest I inquired first of all about the glandular swellings, and heard to my greatest satisfaction that these had quite disappeared before the end of the firstmonth.

AS TOLD BY THE BOTTLES.

A Parable.

He said he would not pay twenty-five cents an ounce for *this* medicine, when he could get *that* for twenty cents.

Let the bottles of medicines tell their own history. They look alike, are labeled alike, and one has nearly as polished an exterior as the other:

No. 1, what do you call yourself?

"My name is *Apocynum Canabinum* 3x. I came from a place where we were taught good manners. I was taken to the place in question slightly mixed with a few plant friends, with whom I wished to associate, but the man in charge would allow none of them to remain with me, but threw them all out; then, in a cool, shady yard, I was cut up and crushed. Next I was placed in a bottle with some very fine alcohol. After this I was put in a dark, cool room to rest, but every day at a certain time I was well shaken up. After about ten days of this life another man took me in charge and put me into a clean, new bag, which had

never been used before, and placed me under a large press, where everything I came in contact with was pure gold. My juice, *myself*, was pressed out there and put into a new and scrupulously clean bottle, which was then put on a shelf in a large, airy room. I was twice decanted afterwards. Finally I was taken by another man, who treated me very gently and added more of that very fine alcohol, but seemed to be very careful that I should not get too much; he did this several times, each time violently shaking me up. That is my story."

Well, *No. 2*, what have you got to say for yourself?

"I am not *No. 2* but am just as *No. 1* as the other, and come from every bit as good a house, one a good deal smarter, too. I was pulled up by the roots one day by a countryman who, I confess, didn't know the difference between me and my brother, *Apocynum androsæmifolium*, and as no one else who handled me afterwards seemed to know the difference we were never separated. Then he sent us by express to our house, where we arrived next morning. When we arrived the boss told a boy to mash us; but the boy said he would do it after a while as he was busy picking some glass out of a trituration, the bottle of which he had dropped and broken; the boss told him if any of that trituration got lost he would charged him up with it. Well, we went to sleep and the boy must have forgotten us, and we did not wake up till next day when we awoke awfully hot. The boy noticed us while he was sweeping the store and threw us down into the cellar, and although it was cool there still we became hotter and hotter. At last on the second day the boy took us out of the bag and put us in a box; the boss came around once and took parts of me up to examine and I was afraid he would see my brother, but he only said to the boy that he should hurry because "That stuff is smelling mouldy already." The boy gave us a few knocks with a pestle and then jammed us into a bottle which smelled of *Arnica* and added some alcohol but I got a headache from it, not because it was too strong, for it wasn't, but because it had so much fusil oil in it. We were then placed on a shelf in the cellar alongside of a place where they were making triturations. Some days after we were pressed out and put back in the same bottle, but I must confess the press did not look very clean as it was quite green about the copper part, and the sack used wasn't clean. Then the boy put us on a shelf where we remained until yesterday, when a man took us down and poured one drop in a bottle and added more alcohol,

and I, at least, nearly died while he was doing it; for just alongside was an open bottle of *Ammonia* of which I got a great whiff. That is my story, and here I am just as good as anybody else, if I do say it myself. Hey, brother?"

"Just as good," assented *Androsæmifolium* from the bottle, "we're all right!"

TRIONAL IN SLEEPLESSNESS.—I suffered from this complication of grippe for nearly a week. Insomnia occurred. I could not sleep on account of the irregular action of the heart. One night I took five grains of *Trional* and slept six hours, and my heart beat normally all next day. In the evening, probably because I worked all day, the arhythmia returned, but after taking *Trional* three nights it left me for good. This mention of *Trional* leads me to the assertion that in a majority of cases of that disorder of the nineteenth century, insomnia, *Trional* is far superior to any other hypnotic. I have prescribed *Somnal*, *Chloralamid*, *Sulfonal*, *Paraldehyde* and others, but they all possess objectionable qualities. In considerable experience with *Trional* I have yet to see any unpleasant effects. I use it all the way from a grain of the one-tenth up to ten grains of the crude. It is of no value in severe pain, but when the patient has just enough to keep off sleep, or when pain has left behind it a nervousness which prevents sleep, then *Trional* is indeed a blessing. I know that in theory our school discards hypnotics, but, while we do this, our patients do *not*. They want sleep; without it they cannot battle with the cares of life, or work with any energy. There are many, many cases, when to deprive our patients of sleep-producing remedies is a positive cruelty. It is especially in cardiac affections, organic and neurotic, that I value *Trional* above all others.—*E. M. Hale, M. D., in N. Y. Medical Times.*

BLADDER WRACK.—*Fucus vesiculosus* certainly has a potent influence upon certain forms of abnormal adiposity, slowly but safely removing much of the excessive fat. It is a harmless remedy, invigorates the system and stimulates all organs to a normal performance of function. In the very "lean" it is said to often increase the fat, paradoxical as this may appear. It is best taken when the stomach is empty in the morning, and care as to diet and general conditions aids its action.—*Chicago Medical Times.*

(For fuller details see Hale's *New Remedies.*)

A PARISIAN MEDICAL QUARREL.—Drs. Proust and Roux are at present engaged in a bitter controversy concerning the merits of the diphtheria antitoxin. A child died soon after receiving an injection of antitoxin, and Dr. Proust said that the death was due to the remedy. No autopsy had been made on the child, and Dr. Roux naturally declaimed against the assumption that the antitoxin was to blame. The controversy has grown so acute that some of the participants even forgot their patriotism and assert that the antitoxin treatment is a German discovery anyway, and Roux simply appropriated it without warrant and proclaimed it as his own.—*Medical Record*.

ŒNOTHERA BIENNIS.—The Evening Primrose (*Œnothera biennis*) is a very valuable remedy in distress after eating, and in diarrhœa and dysentery. Over twenty years ago Dr. Nute, of Chicago, called my attention to its use in diarrhœa in children, and Prof. Garrison gave me two ounces to test its value. Dr. Nute, who had been educated in the school of medicine called allopathic, had become a homœopathist, consequently he gave small doses, two or three drops.

I found by giving eight or ten drops in a little water four times a day that diarrhœa and dysentery were soon cured. A young man who had been troubled with diarrhœa three years applied to me for treatment, and I gave him an ounce and told him to take eight drops four times a day. He reported a few days after that it worked like a charm and he was well.

A man sixty-five years old had been troubled with severe pains in his stomach after meals for over two years, and had been treated by allopathic and homœopathic doctors without relief, and had come to the conclusion that the doctors did not know anything and that he should die soon unless he got help.

About four months ago he was suffering with a severe pain in his stomach, in the night, and his wife said to him: "There is Dr. Hurd, an old physician, perhaps he might help you." So they came to the conclusion to get a neighbor to call me. I gave him twenty-five drops of primrose and in about an hour he was free from pain and wanted to know what he could eat, saying he had dieted so long and had eaten so little that he was nearly starved. I told him he could eat anything he liked, only take twenty or twenty-five drops of the medicine I gave him in a little water after meals. The result is that he has never been troubled with stomach ache since.—*Dr. D. L. Hurd, in Chicago Medical Times*.

LEMNA MINOR.—*Lemna minor* where the crusts and the mucopurulent discharge are very abundant with fœtor (in rhinitis atrophics). Its action is wonderful, but it must not be administered in too low a dilution, as it then produces a sensation of intense dryness in the pharynx and the larynx. Possibly if it were exhibited in a much higher dilution it would be applicable to cases which have only a slight amount of discharge. It seems best to stop the remedy as soon as its action upon the secretions is marked, and then to wait a while before returning to its further employment. Dr. Cooper, of London, was, I believe, the first to investigate the action of *Lemna minor* upon the upper air passages, but I do not think that he had tried it in cases of atrophic rhinitis. There is a great future for this new addition to our therapeutic resources, and it certainly deserves further investigation. It modifies the secretions to such an extent that we can more readily improve the condition of the nasal chambers with the aid of local measures. Whether it has the power to prevent or even retard the actual process of atrophy remains to be seen.—*Thos. L. Shearer, M. D., Baltimore, in Hom. Eye, Ear and Throat Journal.*

ABSINTHE.—Speaking of fascinations, we are led to mention one that is very largely on the increase, not only in Paris, but all over France—absinthism. Driving in any part of Paris in the morning about half after eleven o'clock, or in the evening at six, one sees hundreds of Frenchmen and women seated at the little tables in front of the cafés drinking, and three out of every four are sipping absinthe. This distillation of an herb that grows in some parts of France and Switzerland contains, besides alcohol at eighty-five per cent., an essential oil which possesses for absintheurs a fascination. The liquor when poured out resembles in color Scotch whiskey, but when a perforated silver spade is put across the top of the glass with a lump of sugar on it and water allowed to drip slowly through it assumes an opalescent green color, with a taste of anise seed. It is now ready for consumption, which requires from one-half to three-quarters of an hour. The absintheur then goes home with an excellent appetite and lies down at night to voluptuous dreams. Next morning he awakes quite well and the absinthe of the day before acts as a mild aperient. But soon the scene changes, and in a few years or a few months, as the case may be and as the number of glasses a day has been smaller or larger

we see him a prey to tremblings, epilepsy, dementia, neurasthenia or convulsions, cerebral or spinal congestion or paralysis, etc. For this, one, two, three, or, at the most, four absinthes a day are enough. One of the first actions on the nerve-centres is to annul all sexual desire, and it is for this cause, absinthe, that the population of France is decreasing, while suicide, crime, insanity and diseases of the nervous system are increasing.—*Paris Letter of Medical Record.*

VANILLA AND VANILLISM.—Orfila long ago described toxic accidents that attend the handling of these beans or the use of the extracts of these, which are known under the name of vanillism. Vanillism has been described under two forms; that of the vanilla workers, which is termed the "professional," and which is liable to assume chronic and constitutional conditions and characteristics, and the "elementary" or vanilla poisoning of the consumer, which is of the acute type and generally affecting the gastric regions. To this latter type belong many of the mysterious cases of ice cream poisonings and also at times, in a partial sense, some of the accidents that have followed soda water drinking, which have greatly resembled cases of cholera both in the symptoms and in the results. According to the labors of Professor Grasset, vanilla contains an active toxic principle of the same nature as strychnia, this being a convulsive poison that exercises its force on the spinal chord and on the motor nerves, but in the vanilla being in a greatly diminished and attenuated form when compared to that of strychnia. This should be borne in mind when treating nervous disorders in habitual chocolate drinkers or habitual ice cream eaters, as much of the chocolate is flavored with vanilla. The formation of some poisonous alkaloid from the vanilla caused by some chemical changes in the cream is undoubtedly at the bottom of many of the cases of ice cream poisonings that are yearly chronicled.—*Nat. Pop. Review.*

ANTITOXIN IN TOXIC DIPHTHERIA.—Save in a few exceptional instances, says M. Variot, of the *Hôpital Trousseau*, where death takes place with lightning rapidity, the powerful action of the serum in the way of opposing membranous exudation suffices to relieve the throat. The glandular swelling and the infiltration of the neck are reduced, the general condition is

ameliorated for the time being, and the child takes food and regains its vivacity. But this is a deceptive remission; at the end of two or three days the face becomes pale, general prostration supervenes, and the pulse intermits and then is altogether imperceptible. This pulselessness often persists for two or three days before death occurs, although the heart, of course, keeps on beating to the last. The limbs are cold, but not cyanotic, and M. Variot says that certain features of the child's condition remind one of the algid phase of Asiatic cholera.—*N. Y. Medical Journal*.

THE POWER IN WHOOPING UP.—Apropos of the treatment of diphtheria. To such an extent has the public been informed on the subject, and such is the force of public opinion, that once the diagnosis of diphtheria is made the treatment settles itself. Anti-toxine *must* be injected. The patient, represented perhaps by his relations or friends, is quite as likely to insist on the treatment as is the physician. The public mind has been as thoroughly educated in this direction as pictures and vivid descriptions can insure. Newspaper and magazine articles on the "great discovery" have been numerous, and all the technicalities of the production of, and all the details as to the uses and effects of, the new specific have been set forth with painstaking elaboration and precise attention to minutiae, even to the reproduction of photographs of laboratories and of the manufacturers themselves.

We might pause to note the indecent haste to attain notoriety that has been exhibited by those physicians (scientists?) who have contributed such articles to popular magazines. Such haste is neither creditable to medicine nor of real utility to the laity.—*Dr. J. P. Sutherland's Address to Mass. Hom. Med. Soc.*

IODINE AND SPONGIA.—One does not often think of *Iodine* as a remedy for diarrhœa, yet it is indicated for purulent stools, with cutting pains in the intestines, accompanied by nausea and vomiting and sour taste in the mouth. Several cases of winter diarrhœa have presented just such symptoms. *Iodine* produces extreme emaciation and increases the appetite. *Iodine* resembles *Spongia* in its therapeutic action. In children with black eyes *Iodine* is preferable; in children with blue eyes

Spongia. The *Iodine* cough is moist, but harsh; the *Spongia*, dry, barking, rough, with suffocation spells. *Spongia* is useful (after *Aconite*) at the beginning of croupous inflammation. *Iodine*, when the membrane is extensive, with jerking breathing. In scrofulous patients, with dry coryza becoming fluent in the open air, *Iodine* is beneficial; also when there is a chronic fetid discharge.—*Homœopathic Physician*.

THE MICROBE MAN.—“And this ubiquitous pretender seems to enjoy the distinction, and is autocratic in government and determined in his intentions. And through his favorite ministers the dictum has gone forth, and the temple reared by the fathers, the pride of generations and dedicated to truth, must fall; its altar desecrated and its book of the law trampled in the earth, and the devotees of medicine must worship at the shrine of bacteriology. Ancient customs must be changed. The mouth of the coy and innocent maiden, declared by poet and lover to be a beautiful laboratory with approach guarded by gateway of pearl and battlements of ruby, and its walls studded with cryptic chambers in which is distilled delicate perfumes, sweeter far and more sought after than the ambrosial dew in favor with the gods, is transformed into a horrible cave from which emanates poisonous vapor, more disastrous in effect than a breeze wafted from the far-famed upas tree of mystic lore.—*Dr. H. D. Hill, in Kansas City Medical Record*.”

INDICATIONS FOR SOME REMEDIES IN TYPHOID.—(The following indications are condensed from a paper on “Typhoid Fever and Its Successful Treatment,” by Dr. Phillips, in *Eclectic Medical Journal*):

You will perceive that I have left off the administration of drugs internally to the last. Never give a drug without a well defined reason for so doing. It is bad treatment to give sedatives from day to day for two or three weeks. *Aconite* should be used with extreme care, and only for short periods when specifically indicated.

Echinacea is the remedy when the tongue is dusky or purplish-red, seems too large for the mouth, with a furrow down the center, capillary circulation is feeble, with tendency to bronchial

congestion. *Echinacea*, $\bar{3}$ ij. ; Water, $\bar{3}$ iv. Teaspoonful every two hours. *Sticta* has been prominently indicated in the past two years, and no remedy has given me more satisfaction, as it does what no other remedy will do. Pain in the back of the head at base of brain, pain and soreness of the muscles of the neck, stiff neck, cannot rotate the head without a sensation as though the muscles of the neck and head were being torn, pain and soreness in the shoulder, soreness through the chest with cough: *Sticta*, gtt. xx. ; Water, $\bar{3}$ iv. Teaspoonful every two hours.

Hydrochloric acid is an old and well tried remedy that is oftener indicated than any other single remedy. The tongue, mouth, and lips are dry and dark-red, brown coating on tongue. *Hydrochloric acid*, gtt. xxx. ; Syrup, q. s. $\bar{3}$ iv. Teaspoonful in four tablespoonfuls of water every two hours.

Baptisia is a reliable remedy where the circulation is feeble, surface looks purplish or bluish, like one exposed to cold for a long time, patient seems to lack energy enough to get well.

BOOK NOTICES.

Diseases of the Liver. Jaundice, Gallstones, Enlargements, Tumours and Cancer, and Their Treatment. By J. Compton Burnett, M. D. Second Revised and Enlarged Edition. 244 pages. 16 mo. Cloth, \$1.00 net; by mail, \$1.05 Philadelphia. Boericke & Tafel. 1895.

The first edition of this book was published in 1891 under the title of *Greater Diseases of the Liver*. The book proved popular, and in 1894 or early in 1895 the last copy had been sold and more were asked for. Dr. Burnett then added two parts to the book one to precede the original work, which is designated "Part I. The Autonomy and Hegemony of the Organ in the Organism: Being remarks introductory to the cure of Organ Diseases by Organ Remedies in reference to Diseases of the Liver," which precedes the matter of the first edition, and "Part II" which follows and contains much new clinical matter. The first edition contained 186 pages and the second really 258 pages, though it only shows 244 pages, the difference being made up by the prefatory matter which is numbered by Roman numerals.

The distinctive feature of this book is the treatment of the liver diseases by what the author terms "organ remedies."

"I have for years," he says on page 17, "fought for the recognition of the organ in the organism from the clinical side, and maintained that organopathy lies at the very root of Homœopathy in its simplest and most elementary form, and now that orthodoxy is officially proclaiming "organotherapy" (Paracelsic organ-to-organ homœopathy), and now that physiologists firmly and faithfully believe that all the glands have a creative, formative, directing, controlling, nutritive, antitoximal internal secretion, surely I need fight no longer the cause of the organ in the organism."

While the term "organopathy" is very apropos in describing the thing it stands for—a treatment of certain organs by certain remedies that have a direct and positive action on them—it is, in one sense, a little unfortunate, inasmuch as it seems to antagonize Homœopathy. But this, we think, is but an appearance, believing that in reality it is a positive and decided advance of the great law on lines hitherto untouched.

Certainly the author's brilliant success in treating apparently hopelessly chronic cases that had been treated for years, both by Homœopaths and the old school, with no success, justifies the new departure in therapeutics, or, if it be allowed, the extension of Homœopathy. That others can do the same by the same simple means, and thereby relieve an immense amount of suffering, is almost unquestionably true. Will they avail themselves of the opportunity? This book points the way. If the proved remedies of the homœopathic materia medica will cure, there is no more to be said, for a cure is the end of Homœopathy; but if they fail, and they sometimes do, what can be the objection of utilizing this new extension of the great law of similia?

The book is an unusually beautiful specimen of press work and fine paper.

The London Hospital Reports. Edited by Geo. Burford, C. Knox Shaw and Byres Moir, M. D. Vol. IV. London, 1894. Price six shillings.

The table of contents show fifteen chapters or parts. The number of pages 188. There are a number of illustrations, among them five full page chromo lithographs. The contributors are Drs. A. C. Clifton, D. Dyce Brown, W. Epps, C. Knox

Shaw, B. Moir, E. A. Neatby, Dudley Wright, James Johnstone, J. G. Blackley, J. R. Day, Geo. Burford, E. A. Cook, C. E. Wheeler and J. R. P. Lambert.

A Manual of Electro-Therapeutics. By C. T. Hood, M. D. Octavo. 190 pp. Illustrated. Price, \$2.00. Chicago. Gross & Delbridge Company. 1895.

In his brief preface, Dr. Hood says: "This manual on Electro-therapeutics has been prepared at the request of many students and practitioners, who desire something on this subject that shall be concise and easily understood. I have undertaken to make the physics as complete as the necessities of the general practitioner demand, and so simple that a previous scientific training is not necessary for its comprehension." The book contains many electros of batteries and instruments, and is printed on good paper.

MESSRS. BOERICKE & TAFEL.

Gentlemen:

I am delighted with the little manual—"The Bee Line Repertory," by Stacy Jones. It is "*Multum in Parvo.*" It will save much time of the busy practitioner, as he can find the indicated remedy in a few minutes without a long search in large works. This work can be utilized alike by Alopaths, Eclectics and Homœopaths, as it gives the essentials in a brief style.

I. J. M. Goss, A. M., M. D.

Marietta, Ga., August 26, 1895.

Innere Heilkunst bei svgenannten chirurgischen Krankheiten insbesondere chir. Tuberkulose, Drusen--Knochen--und Gelenkleiden, Zellwebsentzündungen, Infektions zustaenden, Krebs und anderweitigen geschwuelten von Emil Schlegel Arzt in Tuebingen.

In the introduction the author states that it is his hope that he may exert a beneficial influence in enabling some of the sick and also the intelligent readers to form a more correct estimate of what those who are in the delight of performing surgical operations can accomplish and what standing such surgery is entitled to in a true art of healing and especially in Homœopathy.

In stating which diseases are properly surgical he states in regard to warts: "The extraction, burning with caustic and cauterizing of this little proliferation is a barbarous method. Every wart has its foundation in the corporal constitution of its owner, and nearly all warts may be removed in the course of a few months by the proper Homœopathic internal treatment." This, according to the author's idea, seems to apply to all similar growths and also to ingrown toe nails; bones in the œsophagus are also removed by the indicated remedy. The following case will illustrate to some extent the mode of prescribing which the author pursued:

"Emma K., age 15, had a right sided inguinal hernia which by a certain amount of straining attained to the size of an egg. She never wore a bandage. Stool regular, but she was troubled with frontal headache and inflammation of the eye (affections of the connective tissue). She had not yet menstruated. The patient came for treatment on the 13th of March. *Sulphur* mornings and *Belladonna* evenings.

April 24th. She came again and reported that in the last two weeks the hernia had not again made its appearance even when coughing or straining. Headache more frequent. Her menses appeared for the first time on the 19th of April.

June 17th. No sign of rupture; headache rare. One dose of *Thuja*.

July 10th. No appearance of either hernia or headache. Coughing and pressure do not cause the slightest change in the region of the hernia. *Nux vomica* 30

September 3. Completely healed

Another case of threatened relapse of cancer after the left breast had been removed by a surgical operation (there was a swelling forming in the right breast and great pain in the region of the former operation) was cured by "*Urtica urens*, *Psorin*, *Hydrastis*, *Bellis*, *Bacillin*, *Thuja*, *Acidum hippur.*, *Helonias*, *Ignatia*, *Rhus*, *Bacillin*, *Cypripedium*, and one or two more." He does not believe in the syringing of the female genitals except in exceptional cases such as hæmorrhage, where the heat of the water applied would be useful. It may be that in the way of close prescribing this book is a failure, but on the other hand the physician will find therein many valuable hints regarding abuses practiced at the present day. It is a book of 200 pages and contains many clinical cases. We would recommend the book as a valuable addition to any physician's library.

SOMETHING over a year ago the publishing house of Boericke & Tafel issued a book catalogue containing half-tone pictures of many of the authors. We understand that this catalogue is now out of print and that its successor will not contain any pictures. Any one having a copy of the illustrated catalogue will do well to preserve it.

THE *Denver Medical Times* is hot about doctors who borrow books, and it asserts that "ninety five per cent of all the doctors who borrow books never return them" and, the irate editor goes on, "it is our candid opinion that these doctors never intended to return the book when they asked for the loan." No wonder the *Times* man rages, for "during last year we lost over fifty volumes" through these book borrowing fiends. It is economy to stock the library by borrowing and forgetting to return books, but, as the *Times* man puts it, "the best men in the profession do not borrow books"—they own them. It is the poorest kind of economy for any physician, lawyer or professional man to stint himself in the books of his profession, and the most successful are those who have on the shelves all the literature of their professions. Such libraries are preserves for the borrowing poachers, but 'tis better to have had and lost than never to have had at all. (Pardon, shade of Tennyson!)

THE full title of Dr. Marvin A. Custis' book, now in press, is *The Practice of Medicine, a Condensed Manual for the Busy Practitioner*. It is to be printed on fine, but thin paper, to be bound in flexible leather so as to be conveniently carried in pocket or case. So far as may be judged by the advance sheets the book will be a very useful one, giving as it does the undisputed points on practice and following each disease with the approved Homœopathic therapeutics. It might have been very properly termed "The Essentials of Practice." While designed for the busy prescribers who want to get at certain points in the most direct way possible, it will be equally useful to students.

THIS (*The Accoucheur's Emergency Manual*) beautiful little duodecimo of 324 pages contains indications of all the remedies that are most useful in the treatment of women in confinement.

The book is in two parts. Part first contains the remedies in alphabetical order, with their most prominent indications, and part second contains the Repertories.

These Repertories are as follows: Labor, Abortion, Hæmorrhage, Retained Placenta, Convulsions, After-pains, and the Baby.

That the book is in the line of pure Hahnemannian Homœopathy is its pre-eminently valuable feature, especially in these days when such quantities of books of mixed practice are being showered from the press.

The name of the author is a sufficient guarantee that the book would be strictly homœopathic. He is well known to the readers of *The Homœopathic Physician* for his many valuable articles upon homœopathic subjects which have appeared in its pages from time to time.

In his introduction the author says: "The only direction that can be given for prescribing is to follow the direction of Samuel Hahnemann, as given in *The Organon* and *The Chronic Diseases*. Discard every fad, every allopathic adjunct, and rely implicitly on the homœopathic remedy. Live or die true to your declared principles. The female eunuchs, the female invalids, and female maniacs resulting directly from allopathic means of meddlesome midwifery should deter any follower of Hahnemann from resorting to their means of treatment."

The readers of this journal will peruse with pleasure this refreshing declaration of sturdy homœopathic principle, and be abundantly satisfied of the orthodox character of the book.

The editor is tempted to yet many more quotations from this book, but forbears for want of space.

In conclusion it may be said the book is beautifully printed in clear type, of small size, for the pocket, and has within it only such information as is absolutely necessary at the bedside, and so arranged as to be ready for immediate reference.—*Homœopathic Physician*, April, 1895.

On the Use of Medicated Inhalations in the treatment of Diseases of the Respiratory Organs. By John M. Scudder, M. D. With an appendix on Diseases of the Nose and Throat, by W. B. Scudder, M. D. Fourth edition. 159 pages, 12mo. Cloth, \$1.00 net. John M. Scudder's Sons, Cincinnati, 1895.

The first part of this work is a reprint of the late Dr. Scudder's work, under the same title, of 1874. The latter part, from the pen of Dr. W. B. Scudder, is new and, as we learn from the preface, covers a field in eclectic literature hitherto unoccupied.

Vaccination a Curse is the title of a thirty-two page pamphlet by Dr. C. W. Amerige, Springfield, Mass. "The system has doubtless caused more misery and mortality since its introduction by Jenner, in 1798, than that caused by war, pestilence and famine; and could the dead speak they would denounce the unclean thing in such unequivocal terms as would cause vaccinators to hide their heads in shame." So writes the author in his preface. If anyone wants a hot anti-vaccination pamphlet let him send ten cents to the author for a copy.

Homœopathic Recorder.

PUBLISHED MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street,

Philadelphia, Pa.

SUBSCRIPTION, \$1.00 PER ANNUM.

Address communications, books for review, etc., for the editor, to E. P. Anshutz P. O. Box 921, Philadelphia, Pa.

Dr. Bojanus, of Samara, was completely burnt out on the 21st of May. His very fine library of 7,000 volumes was a complete loss, and the doctor is now very ill with an attack of erysipelas. Dr. Bojanus was present at the World's Congress of Physicians, at Chicago, in 1893.

The RECORDER is steadily growing in favor and, as a consequence, its subscription list is growing in a manner very gratifying to both publishers and editor. One dollar pays for a year's subscription.

THE large, and very fine picture of the veteran von Boeninghausen recently produced under the auspices of Dr. Arschagoni, has met with quite a favorable reception. It is an ornament to the office.

To reach a national and an international circle of readers, send it to THE RECORDER.

"IT was first alleged that if the serum was employed sufficiently early, say the second day, the disease would be checked and the child saved. Koerte tells us he killed all his cases by his early treatment!"—*Medical Press*.

THE Eastern Penitentiary, at Philadelphia, has completely cured three men of the opium habit. One of them had used the drug for four, another for thirteen and the third for fifteen years. They had been sentenced to serve various terms, and were put in cells and treated the same as the other prisoners. Of course they suffered, or their appetites kicked up a row, but at expiration of ten days they were all right and felt better than they had for years. It seems that the way to cure a bad habit is to stop it.

THE editor of *Babyhood* recommends Graham wafers for young children, to be given them occasionally. Messrs. Boericke &

Tafel have a Graham wafer that also contains the proper proportion of Hensel's Physiological Bread Powder that is excellent for children, being at once palatable and also containing the elements that enter into the proper formation of bones, muscles, hair and teeth. Children are very fond of them and thrive on them in a very satisfactory manner.

THE *Medical News* of September 7, has a strong protest from Dr. Geo. S. Brown, of Birmingham, Ala., against the use of Apomorphin in opium poisoning. He gave gr. 1-6 hypodermically to a woman profoundly narcotized with opium; the heart's action at once thinned away into death.

MARIETTA, Ga., Aug. 26, 1895.

MESSRS. BOERICKE & TAFEL: I have examined that admiral *Essentials of Therapeutics* or Quiz Compend, written by Dr. W. A. Dewey. I am free to confess that it is indeed a guide to the use of remedies "to diseased conditions" of the body. It gives the "*Essentials of Therapeutics*," and gives what is really known of the science of healing. It teaches the student, as well as the physician, the fact, that certain diseased states of an organ, function or tissue, calls for a certain remedy.

I. J. M. Goss, A. M., M. D.

Dr. C. A. Ayres, of Wilkesbarre, Pa., has joined practice with Dr. W. Bayley at the S. E. cor. of 12th and Walnut streets, Philadelphia.

Personal Items From Chicago.

Dr. W. A. Dunn has returned from his European trip.

Dr. T. S. Hoyne has withdrawn entirely from all college work.

Dr. J. B. S. King contemplates accepting a chair in the new "Dunham" which has been tendered him.

Drs. A. Lovett, of Eaton, Ohio; O. K. Thomson, of La Grange, Ind.; W. A. Cate, of Nelson, Neb.; Hanchett, of Omaha, Neb.; Mrs. Dr. J. C. French, of Natchez, Miss., have been recent welcome visitors in our city.

Dr. C. A. Bozarth, formerly of Herrington, Kan., has concluded to locate in Mulberry, Ind.

Dr. W. H. Bonniwell, late of this city, has located at Boswell, Ind.

Dr. Geo. W. Bernard, of Rainsville, Ind., called recently and reported numerous good locations in his locality.

PERSONAL.

Dr. F. A. Boericke, senior member of the firm of Boericke & Tafel has been appointed a member of the State Pharmaceutical Examining Board of Pennsylvania.

Dr. E. Payson Small has removed from 39 S. Seventeenth street to 111 N. Sixteenth street, Philadelphia.

Dr. W. A. Yingling, author of *Accoucheur's Emergency Manual*, has removed from Nonchalanta to Ness City, Kan.

A strictly scientific medical exchange asks its readers to "Keep up with the band wagon."

Some of the prescriptions given by "the great dailies" who run a "medical column" are quite able to play the deuce with the people who take them seriously, even to giving the undertaker a job.

No book is more needed to-day than Hahnemann's *Chronic Diseases*.

Dr. Marion Hodge asserts that "there are more *Pulsatilla* men than women," which is one on the men.

Dr. Klingensmith, in *Med. Rec.*, says "we are on the threshold of discoveries in medicines, such as will eclipse all that have preceded them." Great discoveries are not more difficult than the task of beating them into men's skulls. *Vide*, Homœopathy.

What will they call the New Woman when she gets to be an old woman?

The "bicycle face," haggard and ashen, has been discovered by an English M. D.

Rychlinski says that *Trional* should be preferred to all our hypnotic remedies.

Take a look at the announcement of the Metropolitan Post-Graduate School of Medicine on page 24.

Advertisements of the Homœopathic Colleges at Philadelphia, New York (two), Chicago (two), Baltimore, Cleveland, St. Louis and Minneapolis, in THE RECORDER, offer fine inducements for a medical education.

Dr. M. R. Faulkner has purchased the practice of the late Dr. Tuller, of Vineland, N. J.

Eight hundred pages of the new edition of *Chronic Diseases* are off press.

Dr. C. F. Millspaugh, author of the famous work, *American Medicinal Plants*, has been appointed professor of medical botany of the Hahnemann College, Chicago.

A homœopathic pharmacist, located towards the "settin' sun," announces that "Mullein oil relieves micturation." A competition defer, of course.

The summer bravery of man and nature has become very seedy.

Soon they will assert: "Cold! isn't it."

"*Pinus Pumilio*" is a soothing aromatic and healing ointment, prepared by Boericke & Tafel.

Dr. T. S. Verdi, after nearly forty years practice in the United States, has returned to his native country, for the benefit of the climate. His books *Maternity*, *Mothers and Daughters*, *Special Diagnosis* and *Home Treatment*, have been very successful.

Dr. H. K. Leonard has removed from Binghamton to Norwich, N. Y.

President Carter, of Law Association, says that the worst laws on the books are those of a "compulsory" nature.

The new edition (the fourth) of Raue's *Special Pathology* and *Therapeutic Hints* will be one of the handsomest medical books ever published. It has been thoroughly revised and much new matter added.

Homœopathy has now a right in the *City Hospital*, Minneapolis.

The people and the courts always give *Homœopathy* fair play.

THE HOMŒOPATHIC RECORDER.

VOL. X. PHILADELPHIA AND LANCASTER, OCT., 1895. No. 10.

STORY OF THE PROVERS WHO ASSISTED HAHNEMANN.

By Thomas Lindsley Bradford, M. D.

CAJETAN NENNING.

It has been impossible to discover when and where Nanning was born, or many facts about him. His name is so often quoted and so much doubt has been expressed in regard to the verity of the great number of symptoms furnished by him to the *Materia Medica* that it is of interest to present all the facts obtainable.

In the symptomatology of *Dulcamara* Hahnemann incorporated certain symptoms taken from the *Materia Medica* of Hartlaub and Trinks, and signed "Ng." He also mentions in the *Chronic Diseases* (Ng.) as a prover of *Alumina*, *Ammonium carb.*, *Ammon. mur.*, *Causticum*, *Dulcamara*, *Graphites*, *Kali carb.*, *Magn. carb.*, *Magn. mur.*, *Mur. acid*, *Natrum carb.*, *Nitrum*, *Sarsaparilla*, *Silicea*, *Sulphur*, *Sulph. acid.*, *Zincum*. By "Ng." the provings of Cajetan Nanning are designated.

Nanning was a very voluminous collector of provings, although it is said he never observed a single symptom upon his own person. A writer in the *British Journal** gives the following table of his contributions to the *Materia Medica* between the years 1828 and 1836, published in Hartlaub and Trinks's "Annalen" and "Materia Medica," and Stapf's "Additions to the *Materia Medica*."

<i>Symptoms.</i>	<i>Symptoms</i>
<i>Æthusa cynapium</i> , 143	<i>Ammonium carb.</i> , 465
<i>Agaricus muscarius</i> , 26	<i>Ammonium mur.</i> , 448
<i>Alumina</i> , 662	<i>Bovista</i> , 266

* *Brit. Jour. Hom.*, Vol. xxi., p. 470.

<i>Symptoms.</i>		<i>Symptoms.</i>	
Baryta carb.,	309	Niccolum,	446
Cantharis,	489	Nitrum,	359
Causticum,	173	Oleum animale,	525
Castoreum,	276	Phellandrium,	369
Chelidonium,	138	Phosphorus,	531
Dulcamara,	51	Plumbum acet.,	287
Graphites,	178	Sabadilla,	18
Helleborus niger,	77	Sarsaparilla,	347
Indigo,	266	Senega,	19
Kali carb.,	365	Strontiana,	206
Kali hyd.,	303	Sulphuric acid,	249
Laurocerasus,	739	Tinctura acris,	285
Magnesia mur.,	646	Tongo,	185
Magnesia sulph.,	355	Tabacum,	104
Millefolium,	77	Zincum,	456
Natrum carb.,	594		
Natrum sulph.,	340	* Total,	11,447

Nenning, in 1833, in the *Allgemeine homöopathische Zeitung*, himself states that none of this vast array of symptoms was observed in his own person. Hahnemann, although he incorporated certain of these symptoms in the "Materia Medica Pura" and the "Chronic Diseases," yet himself doubted their accuracy. In a footnote to *Alumina* in the second edition of the "Chronic Diseases," he says: By these two letters merely (a real anonymity) Hartlaub and Dr. Trinks designate a man who furnished the greatest number of symptoms in the provings of medicines for their "Annalen," which often appear in very negligent, diffuse and vague expressions. I could merely extract therefrom what was useful under the supposition that he has acted as an honest, careful man. But it is hardly to be excused that the homœopathic public should be expected to give absolute credit to an unknown person designated merely with the two letters N——g in this most important and serious work, which requires circumspection, acuteness of the senses, subtle gift of observation and strict criticism of one's own sensations and perceptions, as well as a correct choice of expression in prosecuting a work which is an indispensable foundation of our healing art.

In Mr. L. H. Tafel's translation of the "Chronic Diseases" (p. 188), Dr. Hughes makes the following comments on Hahne-

* See Dr. Roth on Revision of the "Mat. Medica," *Hon. Vierteljahrschrift*, Vol. xiv., p. 151.

mann's footnote: * This note of Hahnemann has led to a good deal of mistrust of the symptoms of the anonymous observer in question, which has been increased by their excessive number, Dr. Roth having counted more than eleven thousand in the several contributions to our "Materia Medica" made by him between 1828 and 1836. The same critic also says that he has found great sameness in his pathogenetic lists. Dr. Hering, however (Allen's Encyclopædia, v. 3., 640), has explained why "Ng."—the surgeon Cajetan Nenning—had to keep his name concealed, and has shown that his symptoms were obtained by genuine provings on healthy subjects. Nenning himself has given in the *Allg. hom. Zeitung*, for 1839, a similar account to explain the copiousness of his symptom lists.

In the preface to *Magnesium carb.*, in the second edition of the "Chronic Diseases," Hahnemann says: The symptoms indicated by this sign, "Hb. u. Tr.," are from the "Reine Arzneimittellehre" of Drs. Hartlaub and Trinks, but not marked by the letters of the original prover; but they quite bear the stamp of the ever ready symptom manufactory of "Ng."

Hahnemann, in a note to Par. 143 of the fifth edition of the "Organon," says: † Latterly it has been the habit to entrust the proving of medicines to unknown persons at a distance, who were paid for their work, and the information so obtained was printed. But, by so doing, the work which is of all others the most important, which is to form the basis of the only true healing art, and which demands the greatest moral certainty and trustworthiness, seems to me, I regret to say, to become doubtful and uncertain in its results, and to lose all value.

When the first volume of Allen's "Encyclopædia of Materia Medica" was published, in 1874, this footnote by Hahnemann just quoted was placed in the proving of *Alumina* (Vol. I., p. 206). This aroused Dr. Constantine Hering, and in Vol. III. of the Allen (p. 640), under corrections, the following letter from him is printed: The greatest error in your Volume I. is the translation and reprint of one of the greatest blunders Hahnemann ever made; footnote, page 206. It would be a long story to tell how Hahnemann could have been talked into such a horribility as this note. Only the impudent, malicious and igno-

* This edition of the "Chronic Diseases" was translated by Mr. L. H. Tafel, of Urbana, O., edited by Dr. Pemberton Dudley, while Dr. Richard Hughes, of England, furnished the footnotes. It was published by Boericke & Tafel in 1896.

† Dudgeon's translation of "Organon," London, 1893, pp. 129, 274.

rant opposition of Trinks can excuse it a little. What Hahnemann says in his letter to Stapf explains the indignation he felt against the horribly ignorant and devilishly malicious Trinks. Hartlaub was only his tool. All that Hahnemann says about the anonymousness is nonsense. There was no such thing. "Ng." was a surgeon near Budweis, in Bohemia, a candid, upright, well-meaning man, not very learned; his name was Nenning, and everybody knew it. According to the laws of his country he had no right to practice except as a surgeon. A lameness of the right arm disabled him from following his calling. His wife commenced a school and instructed girls in millinery; she supported the family by this. Nenning became acquainted with Homœopathy, and soon was an ardent admirer. He had the grand idea to aid the cause by making provings on the girls in his wife's millinery shop. He succeeded in persuading them. Unluckily enough, he came in connection with Hartlaub in Leipsic, instead of with Hahnemann himself. All Austrians were forbidden by a strict law to send anything outside of Austria to be printed; hence not only Nenning, but all other Austrians, appeared in our literature with only initials, Watzke as G—, etc. This shocking law was abolished, but Hartlaub continued his N—g. In Roth's "Razzia" a most infamous use was made of this note by Hahnemann.

Since 1828, when Nenning first appeared in public with *Plumbum*, a medicine in which I was personally interested, as having been the first prover of it, "Ng." was studied with the greatest attention by myself, and in forty-eight years nothing but corroborations and confirmations have been experienced. My proposition to you is to cut this sham of our Master out of the plate.

Dr. Richard Hughes, in "Extra-Hahnemannian Sources of the Homœopathic Materia Medica," also tells the above story and says:* Nenning has himself given in the *Allgemeine homœopathische Zeitung* for June 10, 1839 (Vol. xv., p. 261), a similar account, to explain the number of his symptoms. If I have, perchance, so he writes, made too many provings, for it is remarked that I have furnished too many symptoms, that should, in my opinion, deserve sympathy rather than ridicule. The exhortation of Hahnemann not only to enjoy, but to put our hand to the work animated my zeal, and the active support of Hartlaub rendered

**Brit. Jour. Hom.*, Vol. xxxv., p. 107. Also, "Sources of the Homœopathic Materia Medica." London. Turner. 1877.

it possible for me to do that which perhaps strikes Hahnemann as surprising. A number of persons, partly related to me, and partly friendly, were gathered together by me, and, in consideration of board and payment, made experiments. Along with them were also my two daughters, and with complete reliance on the honesty of them all I gave one medicine to one, and another to another, writing down all that they reported. It was a matter of conscience on my part also not to omit the smallest particular; and that thereby frequent repetitions have arisen I grant readily, but I thought that just in that way the sphere of action of the medicine could be best recognized. If I failed in this it was the general failing of the provers at that time, and it is, therefore, not fair to judge me by the rules of the present provers. If I also received a proportionate support, still no one has a right to believe that I invented or multiplied symptoms in order to obtain a larger honorarium. Nothing but perfection and the exhortations of Hahnemann were my inducement; if I did not attain that, at any rate I cannot reproach myself with dishonesty. It is true that lately Dr. Hromada has had it cast up to him that he used salaried provers, as I did; but I still consider this the best way to get good results, provided you can trust the honesty of the individuals. Few persons can be found who will stand such trials a second time; and if you follow strictly all the rules and regulations prescribed in later times nothing good will be gained for a long time.

Hughes says that Roth counted more than eleven thousand symptoms of Nenning in the contributions to the *Materia Medica* between 1828 and 1830, and that the compilers of the "Cypher Repertory" felt themselves warranted in omitting Ng.'s symptoms altogether.

Hughes continues: It seems, then, that Nenning's symptoms were obtained in the true way, viz., by provings on the healthy body; but that the payment of the provers and the want of discrimination exercised in receiving their reports throw some share of doubt upon the results. I cannot think, however, that they warrant their entire rejection. The only thing which such symptoms need is clinical verification—testing, that is, by being used as materials wherewith to work the rule *similia similibus curantur*. If, when submitted to this test, they (as a rule) prove trustworthy, we may safely assume them to be genuine and admissible into the *Materia Medica*. Now, we have the testimony of three of the most industrious symptomatologists of our

school—Boenninghausen, Hering and Wilson—that they have found no reason to distrust Nenning's symptoms, and to use them as satisfactorily as those of other observers. No statement to the reverse of this has come from the other side: so that we may accept Nenning's contributions as at least provisionally established to be good and sound additions to our pathogenetic material.

Dr. Roth, of Paris, doubted Nenning, and said:⁸ The symptoms of Cajetan Nenning ought on no account to remain in the *Materia Medica*. The prover has himself admitted that his provings were not conducted with due caution.

In 1862 Mr. David Wilson began in the *Monthly Homœopathic Review* to pick to pieces Dr. C. J. Hempel's translation of the "Chronic Diseases," and here this disputed question as to the reliability of Nenning again appears.†

Then in Vol. VIII. of the *Review* Drs. Wilson and Dudgeon published letters polemical on accuracy in translation.

In April, 1864, Dr. Wilson says of Dr. Dudgeon:‡ It will be seen that he persists in writing sneeringly of Dr. Nenning, because it suits Dr. D—'s purpose to sacrifice the truth. He ignores what Dr. Bath said of this prover in the *Allgemeine hom. Zeitung*, 1839, and to which Dr. Carroll Dunham has called attention in the October number of the *American Homœopathic Review* (Vol. IV., p. 186).

The statement of Dr. Dunham, which Dr. Wilson also quotes, is:§ Hahnemann's note to *Alumina* was printed before this publication of Nenning. It is not surprising that Hahnemann scrutinized with unusual caution symptoms furnished by an *at that time* anonymous prover. When, however, he says: I was only able to extract what seemed useful from them, it would appear only *fair* to infer that *after* this unusually sharp scrutiny Hahnemann had admitted as valid and trustworthy those symptoms by "Ng." which he proceeds to include in the "Chronischen Krankheiten." We incline, therefore, to accept those symptoms as coming *with the endorsement of Hahnemann*, in addition to the signature of Nenning.

⁸ *Brit. Jour. Hom.*, Vol. xxi., p. 268.

† The discussion regarding Hempel's translations may be found in *Monthly Hom. Review*, Vols. vi., vii., viii.; *Brit. Jour. Hom.* Vols. xx., xxi.; *Am. Hom. Review*, Vols. iii., iv., July, Aug., Sept., 1862

‡ *Monthly Hom. Review*, Vol. viii., p. 241.

§ *Am. Hom. Review*, Vol. iv., p. 187.

Dunham gives a *resumé* of the discussion in the British journals, quoting from Hahnemann, and then continues: The British journalist goes on to say that "Ng." contributed such a host of symptoms to the "Chronic Diseases" that if he proved them all himself he must have suffered the tortures of the damned in proving them.* He intimates that "Ng." declined to reveal himself, possibly from a consciousness that he was a "bogus prover," and wishes that every one of his symptoms were eliminated from our *Materia Medica*. He finally thanks Dr. Hempel, as already stated, for his "rough and imperfect winnowing" of the *Materia Medica*, and cannot see "the use of restoring such rubbish." This view of the case, while admitting Dr. Hempel's utter faithlessness as a "*Translator*," presents him to us as deserving of thanks in the character of an "*Expurgator*."

Therefore, Mr. Wilson's question; "How far is Dr. Hempel to be trusted as a '*Translator*' of Hahnemann's works?" will still be pertinent if modified as follows: "How far is Dr. Hempel to be trusted as an *Expurgator* of Hahnemann's works?"

Dr. Dunham continues: The voluminous works of Hahnemann may be supposed to contain errors like all other human productions. The function of the faithful and accurate and judicious expurgator is assuredly an honorable one, and his labors should receive the hearty thanks of the profession. But how if the alleged expurgator be unfaithful and inaccurate to the last degree?

Dr. Hempel never assumes the position of expurgator. He claims only to give a translation in perfect accordance with the original. Mr. Wilson states, and the *British Journal* admits, that he did no such thing. The *British Journal* makes the expurgatorial assumption *for him*, and bases it on the statement that the defects of the translation are all comprised in his omissions of the symptoms of "Ng." which the *British Journal* says are "rubbish."

Now "Ng." did *not* decline to reveal himself. On the contrary, he published, says Dr. Bath, over his own name, Cajetan Nanning, his method of proving and of collecting symptoms from other provers, in a statement which is so clear, straightforward and manly as to convince the reader at least of his entire honesty and good faith.

Now for the "tortures of the damned." "Ng.'s" symptoms must be good for nothing because they are so numerous! Thus

* "Love's Labor Lost." *Brit. Jour. Hom.*, Vol. xx., p. 689.

argues the *British Journal*. Does the same reasoning hold good with reference to Hahnemann who, in his ten volumes of provings, has given us ten times as many symptoms as Nenning? The simple fact is that both Hahnemann and Nenning give as their own not only symptoms observed on themselves, but also symptoms observed on other persons who proved drugs under their personal supervision.

Dr. Dunham then proceeds to show where Hempel's omissions are not correct, and gives the percentage of the symptoms of several provers that are omitted by Hempel, concluding as follows: The author of "Love's Labor Lost" says: We cannot help feeling distrustful about his (Nenning's) recorded symptoms, and we only wish that they were every one eliminated from our "Materia Medica," for we are convinced that they do not add to its utility, and we are much inclined to think that the assumed initials "Ng." should be read "No go."

CLINICAL CASES.

A Case of Aconite Fever.

Aconite in the treatment of fever cases is nothing new, yet I am obliged to write this case with a short practical note on the use of *Aconite* in fevers. *Aconite*, as other remedies, should not be administered to patients unless guided by the totality of the symptoms; but I have seen its indiscriminate use in fevers, and not always with failures. They who use it indiscriminately go on as follows: A fever-patient, with fever-heat, seen, for instance, on the second day of illness or so, with thirst, and the prescription is *Aconite*—give four or six doses of *Aconite* to create a remission; they get remission two or three days after that, when they prescribe another remedy to cure the case. But in my practice I never give *Aconite* to my patient unless indicated. Keeping aside inflammatory fevers, we have to deal here more with intermittent fevers of various sorts and remittent fevers. Typhoid and typhus are very rare here. This is my practical experience, that intermittent fevers, with very few exceptions (I mean some chronic cases), require only one and a single remedy to be cured. Study the case properly before you prescribe, and you will see success follow your first prescription and often the first dose. It is better to watch the case, if possible, three or four days at the commencement of the fever, to note down

symptoms as they appear. Why should we use more medicines to cure a case, when a single remedy can do the same? The *Aconite*-fever case which follows, I think, would be an exemplary case where to use *Aconite* in fever:

Patient named Jânakee Nâtha Râya, Choudhury, aged about 18 years, color black, seen on the third day of his illness, the 21st of April, 1895, at about 6 P. M., with the following history and symptoms:

On the past fourth day we had here a rainy and stormy afternoon and evening; the following day the patient felt uneasiness in the afternoon, and hence took no food the following night; next day, morning, he was feverish when he attended the school; yesterday (20th inst.) the aggravation was with *chill*, the fever-heat continuing up to present time; slight greasy sweat occasionally; yesterday one hard stool, consisting of knots; urine colored; thirst; restlessness; tingling sensation in the fingers and toes; flushed face when lying down; feels giddiness when he gets up in bed; desire to lie down; occasional eructations producing relief; occasional nausea; headache on temples, relieved by pressing, aggravated by movement; no carotid pulsation; had epileptic fits since very early age to about one year previously; at present, though no actual fit, yet a sudden jerk of the right hand occasionally. Patient tossing about. Amelioration by eating something.

Temperature: 104.4° F.

Treatment: *Acon.* 6, two globules per dose; six doses given; to be taken every three hours, a dose during fever.

Diet: Nothing to-night.

23 4-95. 8:40 A. M. Seen forenoon yesterday; two doses of the medicine taken night before the last; one dose yesterday morning and the fourth dose yesterday at about 10 A. M.; the remaining doses ordered to be taken yesterday at evening and at night. Patient got cured wonderfully, with very slight rapidity of pulse now.

Result.—Recovery.

Remark.—No more medicine was required; patient got rid of the fever without relapse. An epileptic fit on the third or fourth day after recovery. Six doses of the medicine (twelve globules in all) were sufficient to restore him. Now, one can easily see the benefit of the use of *Aconite* in Homœopathy, very unlike the allopathic use of *Aconite* in fever as a fever-mixture, not forgetting to note the economy in the expense of medicine and money.

Now, let us compare the symptoms and conditions of the patient favorable for *Aconite*; and for that, let us see Dr. H. C. Allen's *Therapeutics of Intermittent Fever*. He has "*Aconite* is most frequently indicated in recent cases occurring in young persons" which is very likely the same as found in Dewey's *Essentials Homœopathic Materia Medica*, where he has "In the young and plethoric who are attacked suddenly with illness of an acute character, such as sudden congestions, violent fever, acute cold, desperate pains, benumbing, tingling neuralgias, etc, *Aconite* is found to be most useful." Here in our case the patient is a young man of eighteen years with a recent and acute attack of fever. Another remarkable feature of *Aconite*, *flushed face when lying down* and *giddiness when gets up* with paleness, is very plainly noted in the case. I remember I saw the patient with reddish face when lying down, and the patient, when got up in his bed, was giddy as expressed by him; but I could not note his paleness. Another symptom not much less important was *tingling sensation of fingers and toes*. These were corroborated by *restlessness, thirst, nausea, colored urine* and *sweat*. He must have been a person "easily affected by atmospheric changes," as there was a rainy and stormy afternoon and evening the previous day to commencement of his illness.

With all the above symptoms it was a remarkable case of *Aconite* which did not fail to prove satisfactorily efficacious to restore the patient to perfect health wonderfully within such a short duration. Hail Homœopathy!

One of My Sulphur Cases.

Before I begin to describe the case in question I wish to devote a few words of the use of *Sulphur*, as I have found it advantageous in relieving suffering humanity. *Sulphur* is a substance long in use in medicine. Allopathy bears its banner of benefit; the Greeks, the Arabs, the Hindoos, and I know not what, all have a share of its knowledge, all confessing the superiority of the medicinal efficacy of *Sulphur*. The science of Homœopathy does not fall backward to claim victory by *Sulphur*. *Sulphur* plays an important part in the treatment of chronic diseases; but it is no less satisfactorily used sometimes to remedy some acute illnesses. When used for chronic diseases, it would be more efficacious when there is a history of itch in the case of our patient, whether repressed with some external application or enjoying its primary place of appearance—the skin.

A somewhat elaborate and lengthy exposition of my views and results obtained by experience will be detailed in a future paper of mine relating *how I use Sulphur*, sufficing for the present to give a hint to my readers that I use *Sulphur* in *three* very different ways :

1. *Sulphur* as the sole remedy to cure our case.
2. *Sulphur*, to commence a treatment.
3. *Sulphur*, to complete a cure.

And I think *Sulphur* may be used intercurrently, but have had no opportunity to test this, or if so, my memory fails to remember any case treated with benefit.

I hope my present case may be a brilliant example of how *Sulphur* may be the sole and only remedy to cure a case:

Case.—A female Mahommedan, named Golap, aged about fifty years, came under my treatment for *constipation with feverishness* the 8th of May, 1895, at about 7:30 A. M., with the following history and symptoms:

Pulse slow; felt headache yesterday at about 11 A. M. so much so that she could not sit up, compelled to lie down and remained in that state till about 4 P. M.; *no chill; no thirst; heat slight since evening*, a burning sensation of body and *that of the palms of hands and the soles of the feet* after evening *with a desire to keep them on a cool surface*; bursting headache of top of head with heat of that part. No burning sensation of eyes. Felt uneasy last night till morning. No sweat. Apyrexia not complete. Bowels open with hard formed stools but not free.

Urine normal; taste insipid; heaviness of head; no itch; no vaccination; had small-pox in her infancy. Headache continues all along, day and night; enlarged but soft spleen of about her life-long duration.

Treatment: *Sulph.* 30, one globule per dose; one dose given just now.

Diet: *Khoi*, sugar candy and milk.

9-5-95, 8 A. M. Felt uneasiness yesterday, but less; felt no burning sensation of body, of palms of hands and soles of feet, but felt heat; head complaints less; constipation the same; could not sleep last night for restlessness; perspiration whole day yesterday after medicine taken, but no sweat last night as she had heat last night; is perspiring now.

Treatment: Placebo.

Diet: Rice and milk.

10-5-95, 8 A. M. More feverishness last night than night

before last; no burning sensation last night but had heat; no thirst; no change of state of bowels; sweat yesterday all day; appetite good; better sleep last night than night before last; appetite gradually increasing; pulse better.

Treatment: Placebo.

Diet: As above.

11-5-95, 8 A. M. No more burning sensation; very slight feverish heat last part of last night; sweat less than that of yesterday; less costive; sound sleep last night; appetite good; bellows-like sound in both ears, especially when ill with fever.

Leucorrhœa since 4 or 5 years, increased last rainy days, now not much; discharge occasional, increasing before and sometimes after menses; discharge whitish and slightly viscous. Menses increased in quantity since two or three months, but no pains. Continued last month a fortnight. Leucorrhœa less than on former occasions.

Treatment: Placebo.

12-5-95, 2 P. M. No feverish heat yesterday, but burning sensation of palms and soles; sweat first part of last night and all day long; very good sleep last night; one costive knotty stool last evening, stool knotty two days; better stool day following the day she took the medicine; appetite improving. No leucorrhœa since eight days; that is, after the last menses. This present menses of her continuing, but not like previous one, with large quantity, the present menses being with less discharge.

Treatment: *Sulph.* 30, as above; one dose given, to be taken at about evening.

Diet: Rice and milk.

13-5-95, 7:30 A. M. No feverish heat or burning sensation of soles of feet and palms of hands yesterday; good sleep last night; last night one stool (not knotty, but costive) at about 7 P. M., after taking the medicine at about evening. Appetite good. No leucorrhœa. Had sweat first part of last night. Sponged her body with tepid water yesterday, after which she feels very comfortable. Menses continuing.

Treatment: Placebo.

Diet: Rice, vegetable curry and milk.

14-5-95, 8 A. M. No feverish heat and no burning sensation of hands and feet yesterday; good sleep last night; no stool since yesterday; appetite good; pulse normal; taste occasionally bitter since yesterday; menses continuing with less quantity; no leucorrhœa; spleen enlarged in the same manner.

Treatment: *Sulph.* 30, as above; one dose given, to be taken just now.

Diet as above.

15-5-95, 8:30 A. M. No feverish heat; no burning sensation of hands and feet yesterday; one rather costive stool this morning; well yesterday and to-day; no menses since last night; no leucorrhœa; urine normal. No complaint to-day. No buzzing in ears.

Treatment: Placebo.

16-5-95, 8:30 A. M. No fever; no heat of hands and feet; two costive stools yesterday; no stool to-day; menses stopped; leucorrhœa seen to-day; appetite and sleep good.

Treatment: *Sulph.* 30, as above; one dose given, to be taken just now.

Diet: Rice, vegetable curry and milk in two meals.

Bathing ordered.

18-5-95, 8:30 A. M. Bowels opened not with much difficulty to-day once; no menses; leucorrhœa about half diminished, whereas formerly it continued after menses till next menses without lessening, rather with increase. Appetite and sleep good. Heaviness of hands, feet and body; urine normal in color; spleen somewhat reduced; much improved.

Treatment: Placebo.

Diet: As above.

22-5-95, 8 A. M. Well; leucorrhœa almost disappeared (this state lessening of the leucorrhœa never known to her during a whole year); one normal stool daily; spleen somewhat softened and reduced; felt burning of hands and feet afternoon yesterday and day before yesterday.

Treatment: *Sulph.* 30, as above, one dose.

Diet: As above.

24-5-95, 9:30 A. M. Going on well; leucorrhœa increased day before yesterday, less yesterday and to-day; bowels open daily normally once; spleen as in last report.

Treatment: Placebo.

Diet: As above.

25-5-95, 10 A. M. No burning of hands and feet; spleen much softened, and reduced slightly; leucorrhœa less; bowels open normally daily once or twice; pulse weak and slow; appetite and sleep good.

Treatment: Placebo.

Diet: As above.

25-5-95, 8:30 A. M. No burning of hands and feet; bowels open daily once or twice; leucorrhœa gradually less; sleep and appetite good.

Treatment: No medicine.

29-5-95, 8 A. M. Leucorrhœa almost gone; burning of soles yesterday and day before yesterday; daily one normal stool, but occasionally twice; spleen softer and more reduced than before; to-day spleen ache in the morning and nausea; appearance healthier; taste good; could not sleep last night for hot weather; appetite improved.

Treatment: *Sulph.* 30, one globule per dose; one dose given, to be taken just now.

Diet and bathing as usual.

30-5-95. Repeat *Sulph.* 30; one dose, as above.

Diet and bathing as above.

1-6-95, 8 A. M. Better; spleen continuing the same.

Treatment: Repeat *Sulph.* 30; one dose, as above.

Diet and bathing as above.

3-6-95, 8:30 A. M. No more leucorrhœa; never found in this state of improvement during a whole year; daily one or two normal stools; spleen as above; burning sensation of dorsum of feet since noon to evening yesterday.

Treatment: Placebo for two days.

Diet and bathing as above.

6-6-95, 8:30 A. M. Going on well; burning sensation of hands and feet less; bowels open daily once or twice; no leucorrhœa; spasms of calves yesterday; appetite and taste good.

Treatment: Placebo.

Diet and bathing as above.

Remark.—I am sorry that I cannot give you, my reader, the final result, as she has not any more attended my dispensary. Suffice to mention here, that she came under my treatment *feverish—with constipation and chronic leucorrhœa*; and we see by last reports that she had recovered from her complaints, her bowels moving daily once or twice and having no feverishness and leucorrhœa. Leucorrhœa was not mentioned at first, either for modesty's sake, or because she did not think that Homœopathy could cure her. She was under treatment for thirty days, and her medicine was *Sulphur*. What led me to prescribe *Sulphur*? Her *evening fever without chill and burning sensation of palms of hands and soles of feet with a desire to keep on a cool surface* were the guiding symptoms to select *Sulphur*. *Sulphur*, as

is expressed in the reports, was given only for eight days, each day a globule, making eight globules in all. This small quantity of medicine was sufficient to make her healthy looking, open her bowels regularly, and thereby, as if it were, washing out the effete materials, you may call productions of malaria, from her system, and then, giving tone to her generative organs, removed leucorrhœa. In the meantime it would not be less satisfactory to learn that her life's companion—the enlarged spleen—did not feel it a shame to receive reduction under the sway of *Sulphur*. This case being a case of *enlarged spleen with leucorrhœa* would give me a good opportunity to try *Ceanothus Americanus* had she expressed her leucorrhœa from the commencement of her treatment. When I heard of it it was too late to change my plan of treatment, as *Sulphur* had already wrought to my satisfaction, inclining me more to its continuance. I do not change my medicine when it goes well with my patient, be there a dozen more remedies better recommended by authorities. Our land is a fertile soil for the production of hypertrophy of spleen, and hypertrophy of spleen may well be met with by a number of other medicines than *Ceanothus Americanus*.

The use of *Sulphur* as a single remedy to cure such a chronic case is, to my opinion, noteworthy. Without the aid of other remedies *Sulphur* works wonders in the treatment of some intermittent fevers and in some cases of neuralgia, examples of which we find everywhere in our daily practice.

A. W. K. CHOUDHURY.

Satkhira P. O., Calcutta, India.

**ERYTHROXYLON COCA AND HÆMORRHAGE WITH
EXTREME PROSTRATION OF VITAL ENERGY,
LONG BEFORE AND IMMEDIATELY
AFTER DYSTOCIA IN A CASE OF
PLACENTA PRÆVIA.**

A lady now aged about forty-two, of a very *robust* constitution, residing at No. 7 Hazuri-Mál Tank's Lane, Calcutta, is now the mother of nine children. During her seventh pregnancy she had placenta prævia. In the seventh month of her pregnancy she had profuse hæmorrhage from the uterus. This alarmed her and her husband very much. I was sent for, but being engaged in another case at the time I was not available. So

another Homœopathic physician was called in, who prescribed *Aconite* and *China* alternately first, and then *Platina*. This treatment was pursued for eight hours, without any benefit. On the contrary the case took a serious, turn to the great alarm of the patient and her relations. I was now sent for again.

When I saw the patient I noticed that the hæmorrhage was alarmingly profuse; her countenance was sunken; the eyes sunken in their sockets and surrounded by blue rings; her voice hoarse and husky; there was cold, clammy perspiration all over the body; her fingers and toes were wrinkled as if long soaked in water, and her skin bluish; she had rigors every now and then; the pulse at the wrist was scarcely perceptible; she had, though occasionally, cramps in the calves and the cardiac region; hurried respiration and hysterical fits and fainting, with great dryness of the mouth and throat on account of which last fact there was distressing retching, being followed by profuse hæmorrhage. I understood it to be a case of placenta prævia from the nature of the hæmorrhage and *the absence of pain*, a distinctive symptom which I have found present in about ninety per cent. cases in twenty-four years' practice. My diagnosis in this case turned out to be correct, as will be presently seen. The symptoms enumerated reminded me of *Erythroxyton coca*. I prescribed it in one-fourth drop doses of the mother tincture, a dose every half hour. After the administration of two doses hæmorrhage stopped. After the administration of the third dose the patient began to feel a little more easy. Now the medicine was given every two hours, and in ten hours the patient had recovered from almost all her troubles. The sweat was over; the pulse became normal; the body became warm, and the countenance regained its natural look.

In the tenth month of pregnancy hemorrhage re-appeared and to a frightful extent. I was again sent for. Strangely enough this time also I was not available, being engaged elsewhere in a bad case. The friends of the patient sent for Dr. Mahendra Lal Sircar, the late Dr. B. C. Rudra, the late Dr. A. C. Khastgir and the late Dr. Karuna Kumarsen, all of them very eminent medical men of Calcutta. They, however, came singly at different times, and did not meet one another. I went last of all. When I arrived Dr. Khastgir was present. On examination I satisfied myself that the case was one of *placenta prævia*. But Dr. Khastgir did not agree in this diagnosis. He said that the hemorrhage was due to the accident said to have occurred on the

patient's getting down from her bed with a child on her lap from a height of about eighteen inches. He said he thought so because the hæmorrhage had commenced immediately after getting down from the bed, with a severe spasm in the abdomen. The other doctors also agreed with Dr. Khastgir. So I was outvoted. I was requested by Dr. Sircar to see him after I had seen the patient. Accordingly, I saw him and argued the case, and convinced him that it was a case of *placenta prævia*. He told me that he believed the case would prove fatal, and so he would have nothing to do with it. I agreed in this prognosis. The other medical gentlemen were also of the same opinion. I saw the patient first at 1 P. M., and the other doctors a little before that. At 5 P. M., on examination, I found the child in the womb still living; but the mother looked like a *corpse*, motionless and gasping for breath. After much deliberation I decided to try and save the patient and the child by obstetric operation, and that if I could save both well and good; if not, if I could save at least the mother that would also be a great gain to us. To strengthen the patient I prescribed *Coca*, in $\frac{1}{4}$ drop doses, a dose every hour, only 6 doses to be given. At 11 P. M. the fœtus was discovered to be dead in the womb. But the mother was much stronger now, and more fit to stand an operation. I had not commenced the operation so long as the patient was very weak. I again prescribed *Coca* now, but at the 1x potency, in one drop doses, a dose every half hour, and gave her six doses. I prescribed the first decimal dilution, and not the mother tincture, because the patient looked a little sleepy. I examined her again at 2 A. M., when I found her stronger even than at 11 P. M. Now, I thought, the time for operation had arrived. I called in Dr. U. C. Rudra and requested him to assist me in it. But he was afraid of the issue of the operation, thinking it would be fatal, and unwilling to assist me. This untimely unwillingness on his part put me at my wit's end. Still I commenced the operation with the aid of a midwife who was attending the patient. Dr. Rudra sat by me and watched the result. I have forgotten to mention that when I saw the patient first I thought of plugging by means of sponge to stop the hæmorrhage, which, however, for some reason or other, I did not do. On examination I found that the case was one of *placenta prævia centralis*. The patient was delivered of a still-born child by podalic version. After child birth the patient became much exhausted from hæmorrhage, which amounted to almost flooding. This alarmed

me and the husband of the patient very much. I prescribed *Coca* θ again in $\frac{1}{4}$ drop doses, a dose every hour. This treatment was pursued for eight hours, and the hæmorrhage decreased gradually, and I was informed at 2 P. M. next day that the hæmorrhage still continued, though in a mitigated state. On visiting the patient I found that the discharge was not so profuse as to be alarming. I took the bleeding to be nothing but lochial discharge, only a little in excess. I now prescribed *Coca* θ in the same dose, but at an interval of three hours. After the administration of six doses I heard that the patient was doing well. I saw her the next day, and found that the discharges were normal and the patient felt herself quite comfortable. After that I prescribed no medicine for her and I had no occasion to see her for fifteen days. On the eighteenth day of child birth the patient caught cold from exposure and got fever, from which she suffered periodically for two months, and was cured by me by *arsenate of quinine*, ix trit. , in one grain doses, three doses daily.

Seeing the very good results in this case from the use of *Coca*, I have, up to date, tried it in no less than twenty cases of post-partum hæmorrhage and metrorrhagia, with great prostration, with great success, when other well indicated and well chosen medicines had failed to do any or much good. Considering the success with which I have tried it in cases above referred to, I may say that it oftentimes *acts like a charm* and I feel no hesitation in recommending its extensive trial by the profession when opportunity and occasion offer.

R. K. GHOSH,

Nabatepier, Dacca, East Bengal, India, July 20, 1895.

HOMŒOPATHY IN MEXICO.

Editor of the HOMŒOPATHIC RECORDER.

Dr. Joaquin Gonzalez, of Mexico, has requested me to inform you that, through the untiring efforts of the distinguished Dr. Segura y Pesado, and with the valuable co operation of Lic. M. Romero Rubio, Minister of the Interior, the official recognition of Homœopathy in Mexico is an accomplished fact.

By a liberal decree of the chief magistrate of our neighboring Republic, General Porfirio Diaz, published in the *Diario Oficial* of the 16th of August last, homœopathic physicians in Mexico have been placed on equal footing with the allopaths, enjoying

the same privileges and prerogatives, but also bound to comply with the requirements of the medical law of the country.

The above-mentioned decree ordains the following:

1. The establishment of the homœopathic career in that Federal district.

2. That all applicants for the decree of Homœopathic Physician and Surgeon must have passed a satisfactory examination, not only on the preparatory studies required by law, but on all branches of medical knowledge and practice.

3. The creation of a *National Homœopathic School of Medicine*, under the charge of a homœopathic faculty appointed by the Government.

4. That the course of instruction in this institution must cover a period of *five collegiate years*, each year commencing on the 7th of January and ending on the 14th of October.

5. That the branches of medicine and practice shall be taught in the following order:

First Year: Descriptive anatomy, histology, physiology and dissection.

Second Year: Internal pathology, general pathology, materia medica and therapeutics, surgical clinics.

Third Year: External pathology, topographical anatomy, materia medica and therapeutics, medical clinics.

Fourth Year: Operative medicine, obstetrics, materia medica and therapeutics, surgical clinics.

Fifth Year: Hygiene, legal medicine, materia medica and therapeutics, fundamental doctrine of Homœopathy, medical and obstetrical clinics.

In a few days will arrive here a committee appointed to visit the homœopathic colleges of the United States and study the arrangements of their various departments. Said committee is composed of Drs. Segura y Pesado, Fernandez de Lara, Gonzalez and Narro.

Trusting that you may be able to take notice of this homœopathic triumph in the valuable columns of your journal, I remain yours with fraternal regard,

EDWARD FORNIAS, M. D.

1229 Spruce St., Philadelphia, Sept. 18, 1895.

RATTLESNAKE BITES.

Editor of HOMŒOPATHIC RECORDER.

CASE 1. In October, 1889, I had a mare two and a half years old bitten by a rattlesnake. I was within two hundred yards of her when it happened, and there was a knot as large as a walnut on her nose when I reached her. The bite was right in the vein between the nostril and lip and the poison rapidly ran through the system. I rode about half a mile to the house, and by that time her nose was almost swelled shut. Stringy flow like white of egg from nose, which soon became streaked with blood. I gave five drops of *Lachesis*, but could not give any more as her throat swelled too much to allow of swallowing. I gave spirits of hartshorn by olfaction and bathed the bite with it also. The next morning (about twelve hours after being bitten) her head was too large to put into a common sized pail, her tongue was black and stiff, breathing so difficult that heaves resulted therefrom. This last was relieved by *Ars.* followed by *Sulph.* in morning, *Phos.* at night. Result, recovery.

CASE 2. Colt two years old, bitten where vein crosses the nose above the nostrils, bite in the vein. Saw the colt in about six hours after the bite; smallest part of nose about one foot in diameter, same mucus flow as in case one. Colt had never been handled, and I had to dissolve ten drops *Lachesis* in a pail of water and set it before him to drink. Also bathed the bite with spirits *Hartshorn* as before.

Next morning the swelling was half gone, but the colt did not eat for about three days and wasted away badly, but made a good recovery.

CASE 3. Filly two years old; bitten in vein same as Case 2. I thought I would vary a little, and gave about twenty-five drops *Lach.* 12x, and in half hour periods gave five drop doses same remedy all night and until two o'clock A. M.

The mare did not get a bite to eat (was too sick to eat) from Friday about five P. M. to Sunday morning about ten o'clock. Her owner gave her some corn fodder and also about one quart of wheat (mare never had any grain). Had colic from weakness of digestion following the shock of the poison. Monday I was called to treat this condition, and gave *Ars.* and *Lach.* in alternation every hour. Tuesday morning I was compelled to evacuate the bladder by mechanical means, as *Cantharis* and *Hyoscyamus* both failed me.

The mare then made a good recovery and did not lose more than fifty to seventy-five pounds from the shock. I am of the opinion that all who have to treat snakebites will find *Ars.* and *Lachesis* in alternation the best treatment for man or beast. *But under no circumstances quit the use of liquor if it has been commenced, for death will result. But never use liquor if you commence treatment.*

Spearville, Kansas.

J. C. WENTZ.

COFFEE IN OBSTETRIC PRACTICE.

Translated for HOMŒOPATHIC RECORDER.

It is well known that among the many domestic remedies which midwives are in the habit of administering, now as an invigorant and again to promote labor pains, coffee is never wanting. During my former extensive obstetric practice I frequently witnessed this abuse of the Arabian bean and almost always without any effect, so that I often propounded to myself the query, how it was that coffee acquired so great a reputation as a popular remedy? A number of practical experiences, however, have of late not only convinced me that its salutary effect is based on the law of similars, but they also gave me reliable indications for its proper and successful application.

CASE I. On August 4th I was called to the wife of a carpenter who had been in labor for twenty-four hours. I found with the patient an old good wife of the staid old stock, of athletic build and provided with all sorts of domestic remedies, in the application of which in former times they were so prolific. Chamomile tea, cinnamon and coacus drops, valerian tea and what not had been poured into the poor patient; so that the whole sick-room smelled like a drug store. She had taken the prospective mother, together with the sheets upon her painful arms, and shaken her vigorously. She had taken hold of her under the arms and held her suspended for several minutes, which according to her protestations never had left her in the lurch before. She wanted to execute divers other manipulations and changes with the bedstead, which, however, the frightened husband would not allow. As a matter of course I interdicted all further contrivances; but could not work myself into a rightful indignation against her, for she presented too vivid and amusing specimens of a bygone period and in her

good nature and zeal she propounded still another dozen of fabulous experiences.

The parturient was *æt.* about 32, well built, and had twice past through easy confinements. Twenty-four hours before the waters were voided slowly, and since then she suffered with the most violent pain in the back and crampy drawings about the umbilical region.

The os uteri was opened about half an inch and felt soft. The child presented in the third occipital position, the pelvic proportions were favorable, but there was a total absence of all real throes. The general condition seemed somewhat serious, pulse was small, very frequent, face hot and red and the body almost burning. The most striking feature was her extraordinary excitement and restlessness. She was as if beside herself, threw herself about in bed, spoke incessantly and called out that they should kill her, that she could not bear that pain any longer, etc., etc.

I went into the next room with the husband to procure some pillows and cushions so as to prepare a suitable position on the left side, as the uterus rested on the right hip bone. These few moments the midwife profited by to give the patient a cup of strong coffee, and as I stepped to the bedside she just took the empty cup from the lips of the patient. I now, thoroughly worked up, put the midwife out of the room, fixed the bed and counseled rest and silence. To my great satisfaction the patient quieted down within a few minutes, the skin became moist, the pains came on regularly, the os opened out, and *within half an hour* the confinement was over, without any further complications, in a normal way. The gladdened husband loudly praised my skill to which I inwardly assented, and an awakening suspicion that the coffee might have done the work after all was proudly cast aside by my obstetrical skill. However, a better insight soon was forced upon me.

CASE 2. On January 4th, following, I was called to the confinement of a married woman, *æt.* 25. The preliminary pains had set in on the 3d, about 7 P. M., the child was in the first occipital position, the pelvis broad, and the parturient had been confined two years before, the birth having been easy and normal, so everything pointed to a favorable termination. I instructed the very sensible nurse, left a few doses of *Pulsatilla*, cautioned against giving any other drug, and requested to be called when matters should be further advanced. Next morning

at 9 the husband came, stating that matters were taking a serious turn. I found her in as high a state of excitement as that of the previous case, the fundus could be felt to contract slightly; but there was no pressure on the os uteri, but intense pains in the sacrum. The nurse begged to be permitted to give patient a cup of coffee, assuring me with an expression of conviction that in her many years' experience coffee would always bring on the pains where the parturients were so beside themselves, desperate and restless. The previous case came vividly back to memory, and I gave patient 6-8 pellets of *Coffea* 4. Within a few minutes patient became quiet, and another dose in fifteen minutes brought on regular effective pains; so that the birth took place within the next two hours in a normal way. I was ashamed inwardly that the nurse had to remind me of that remedy, and that the quite characteristic indications did not present themselves to my memory.

I had two more cases within the next few years where *Coffea* brought about a speedy and happy termination of lingering labor cases. I will now conclude with one occurring within the last few weeks.

CASE 3. I was called on June 15 to Mrs. P. She was young and vigorous, well-built, æt. 23. Primipara, preliminary pains commenced June 15, 10 A. M. The waters were slowly voided the evening before, so that a protracted and slow labor was to be expected. Towards evening, 5 o'clock, my assistance was requested. I found the patient harrassed and worn out by crampy pains, which had lasted for eight hours. Moderate contractions could be felt at the fundus uteri, but these seemed not to bear on the os but toward the sacrum. The os uteri stood high, was soft and opened about a half an inch, the position of the embryo was favorable, as well as the dimensions of the pelvis. Nothing was wanting but regular pains to bring birth about. *Pulsat.* and *Cham.* did nothing. *Bellad.* opened the os to an inch after two hours, but not one real throe had come to pass. Ten hours passed thus since my arrival without any real change having been brought about by the remedies. I laid down to rest some. When after an absence of two hours I came to her bedside, I found everything unchanged; but the poor parturient, who until then had borne her pains with great fortitude, had become highly excited. She continually tossed about in bed, with passionate exclamations; she deplored her loss, was sure to die, lamented the poor lot of her was to be bereaved husband, etc.

Her face had become suffused and bloated, with sparkling eyes, and frequent, but weak, pulse; she presented the most vivid picture of puerpural erethism that I had yet seen, and a prolongation of this condition was indeed dangerous. By some accident the vial with *Coffea* was missing in my pocket-case, so I had a cup of strong, pure coffee made in the kitchen, and during the few minutes that this took the patient continued in her violent and passionate exclamations, despite entreaties to keep quiet; it was as if she was compelled of a necessity to be loud, to make a noise.

When the cup of coffee was put to her lips she praised its invigorating aroma, and drank it with gusto. She then passed her hands several times across her forehead, as if coming out of a semi-conscious condition, and remarked: "That felt good, and I am now going to sleep." She actually laid upon her side and after some motions actually fell asleep. Ten minutes after she awoke suddenly, threw herself on her back and braced her feet violently against the bed posts. The first real throes had come on, and were borne without a murmur; from then on regular pains came on, without anything like her former passionate excitement, and the birth was accomplished in $1\frac{1}{4}$ hour's time, without any untoward symptom. I must confess I never before saw such a prompt and striking action of a remedy, and for that reason gave the full history of the case.

The administration of *Coffea* is easy enough and probably always successful when the characteristic symptoms of the sensorium are present, and I would not like to miss that remedy in confinements hereafter. But it would be of great importance to the obstetrician if we could glean some other symptoms which would guide him in administering this remedy in ante puerpural states, so as not to have to wait until, by protracted labor and cramp-like pains, the erethisms assume dangerous proportions.

The symptoms so far don't give us clear cut indications. And in cases where I gave it in protracted cases of labor, but without characteristic irritation of *Coffea*, it was of no benefit.

N. B.—I was twice able to relieve unbearable pains which came on in the morning in chancre ulcers, where excitement amounted to distraction, and where a few doses of *Coffea* ⁽¹⁾ gave prompt relief until the specifically indicated remedies for lues did their work.—*Dr. Kallenberg, of Cleves, in Vol. L. of Allg. hom. Zeit'g.*

SEMPERVIVUM TECTORUM.

A Popular Remedy for Scirrhus Affections of the Tongue.

Translated for THE HOMŒOPATHIC RECORDER.

Sempervivum tectorum, *Sedum majus*, large house-leek, is a popular remedy in many countries for indurations and sores on the tongue, and has of late been extolled by Maly, of Gratz, as curative in scirrhus linguæ.* Reichel, of Staben, considers the fresh juice of the house-leek curative in spasms of the uterus and in menstrual disturbances of all kinds as well as in all cases of too exalted vascular activity in the sexual sphere, as also in aural troubles consequent on hardened earwax and in inflammatory exudations of the ear.

These are the annotations I made while perusing medical serials, others may be able to complete these notices, but I have some practical experiences which I will transcribe from my journals.

CASE I. In the first year of my Homœopathic practice, Mrs. S., æt. 44, childless, of sickly looks, consulted me on July 18th on account of an affection of the tongue.

For the last six months her menses appeared only every eight to ten weeks, with pains darting from the small of the back to the uterus and vulva. During the same time she felt a stitching pain on the right rim of the tongue, about three fourths of an inch from the point, at which place there was formed, after a few weeks, a swelling of the size of a small bean, which bled at times, but which caused at night a burning sensation as of a small coal, disturbing sleep. Whenever she eats something sharp or sour it occasions pain. The swelling does not feel as it were very hard, but on its surface there are two hard nodules of the size of a lentil, one of which is denuded of its mucous membrane and bleeds when touched. Three enlarged veins of the size of a thin crow quill crossed the surface of the swelling and enter the tongue muscle, right behind it.

Aurum, *Arsenicum*, *Carbo. veg.*, which were given one after the other in the 4th, 10th, 6th dil., did not better the condition, on the contrary, the swelling became harder and increased in size, so that speech became hindered. Just then the number of *Hufe-*

*In *Hufeland's Journal*, Vol. LXXXVIII, the fresh juice is recommended in chronic aphthæ in grown persons in causal relation to hemorrhoids, as well as in scirrhus indurations of the tongue.

land's Journal mentioned above fell into my hands, and in my perplexity I at once grasped at the remedy there recommended. On September 2d I procured the fresh expressed juice from the leaves of the house-leek and had the swelling moistened therewith thrice a day. Within three days the tumor became smaller and softer and some folds appeared. Especially the enlarged veins presented a striking change, for they were strongly contracted, forming now thin tense vessels crossing the swelling and seemingly tying it. In the succeeding four days the patient, encouraged by the success, may have overdone the application, for I found then the surroundings of the tumor in inflammatory irritation and very sensitive. I at once stopped the external application and ordered the mouth rinsed with tepid water every half hour. Hurriedly I gave two drops of the second dilution of the tincture of the plant, made with dilute alcohol. After a week's internal use of the remedy the swelling had shrivelled to about one third of its former size, when *ten days later the menses, which had ceased altogether, reappeared* and continued very profusely for five days. Thereupon the whole swelling diminished to the size of a small pea, having a smooth surface covered with mucous membrane; it was firmer and harder, but altogether devoid of sensation. Menses appeared regularly from then on, and patient, considering herself cured, failed to call again.

CASE 2. Mrs. G., æt 53, ceased to menstruate six years ago; mother of four healthy children, has an ulcer on her tongue for about six months. It is situated one quarter inch from the left rim and as far from the tip, and is of the size of a ten cent piece. The bottom of the sore is bluish and transversed by a much enlarged renal branch; it suppurates profusely. On May 6th, when she first came under treatment, she received 3 doses of *Aurum 6*, and as these had no effect she received on May 21st *Merc. sol. H. 3*. On June 6th the ulcer had somewhat enlarged, the enlarged veins had increased in size and close to it there appeared a hard nodule of the size of a pin's head which was very sensitive. I gave *Semperviv. tect.* 3d dil., internally two drops a day, and as this also failed to make an impression I applied the mother tincture externally. On the second day there was decided aggravation, the inflammatory irritation of the circumference had increased with great pain. I stopped the application and recommended rinsing with tepid water. But patient ceased to call again, and I was unable to obtain information as to the outcome.

CASE 3. Miss B., æt. 20, always menstruated profusely, the submaxillary glands were much swollen and for several months she had a hard uneven knotty swelling of the size of a hazelnut close to the tip of the tongue, which pains on touching the teeth while speaking and eating. The swelling is still covered by mucous membrane, but some turgescient renal branches show through. The covering of the sore exudes continuously a white albuminous fluid which condenses to a white fine membrane, but which when removed still shows the mucus membrane intact. *Acid nitr.* 6, *Natr. mur.* 20, *Mercur. sol.* 3, which I gave on the 6th and 10th of August and 10th of September, were of no effect; *Semperv. tect.* 3, which I gave for three weeks, did nothing, and the patient did not call after that.

CASE 4. The last two misses almost made me forget this remedy, but about ten years after General v. Becher, in Russian services, consulted me about a tongue affection. He had been in Baden Baden during the summer for his recreation, when in the last few weeks there developed on the left rim of his tongue half an inch from the tip an ulcer for which he applied *Alum* externally and *Corrosive sublimate* internally. The sore was about $\frac{3}{4}$ inch long and $\frac{1}{2}$ inch wide, and about two lines in depth, with a sharp rim; it had an indurated bottom of a bluish shine, and had four elevated nodules the size of a lentil and was permeated by two branches of turgescient veins; it was very sensitive to touch and while eating. I accepted the patient on his promising to abide two weeks with me in Frankfurt, where I was then located. I immediately had prepared a fresh tincture of *Sempervivum*, and from it prepared the first cent. dilution, with which I moistened a piece of fine linen which was applied to the sore. I gave this and nothing more aside of a strict homœopathic diet. Patient visited me every day, and so I can give a detailed report. On September 6 (the second day of application) the case was less painful, patient could eat without discomfort, the rim is a little flatter. On the 7, 8, the swollen veins became smaller, the nodules, formerly of reddish blue, became paler. On the 10, 11, the nodules disappeared entirely, and the bottom of the sore was covered with a thin white membranous covering. On the 12, 13 and 14, the application was omitted, when the sensitiveness of the sore spot increased. From 15th of September the remedy is reapplied same as before, and on the 17 and 18 the ulcer was flat, with a clean bottom through which the scarce enlarged branches of veins showed. But now patient cannot be

kept any longer, and he took his departure with the intention of awaiting the completion of the cure in Leipzig and Berlin. He promised to send me word, but failed to do so.

CASE 5. The wife of a missionary in Frankfurt, aet. 27, mother of a six month's old healthy boy, formerly frequently afflicted with swelling of the glands, and very sensitive to homœopathic remedies, complained of a pain under her tongue, lasting since eight or ten days. It interferes with eating and speaking. A careful investigation with a fenestrated spatula disclosed a bluish red elevation pretty close to the root on the under side of the tongue. It was the size of a split bean, and, although smooth, was hard to the touch, and along both sides there were enlarged veins (the steady accompaniment of such sores). On one side there was a small spot denuded of the epithelium, which exuded a layer of a whitish albuminous matter, which could readily be wiped. Patient had not had her menses since her confinement, six months before; received six powders moistened with the 6th dil. of *Sempervivum*, one powder to be taken every forty-eight hours. She departed next day to the country on a visit to a friend, and on her return, three weeks after, reported that on the second day the swelling became less sensitive, and a week later had grown much smaller, and *that then her menses reappeared*, and that the whole swelling had now disappeared. On inspection I found indeed that in place of the former elevation there appeared only a somewhat engorged vein.

No one can be more impressed with the shortcomings of the curative attempts hereby referred to than I am, and my apology is that they were experiments with an unproved remedy, the true sphere of which was unknown to me. But they assuredly point to specific action of this remedy in indurations and ulcerative sores of the tongue, and it is worthy of note that the decided enlargement of the veins differentiate the cases in question from other aphthous and ulcerative sores of the tongue. In addition to this it would seem that the delayed menses are in casual relation to the sores. It is to be regretted that I failed to note the state of the menses in case three.

At any rate *Sempervivum* seems to be an important popular remedy, even though we may hold the question in abeyance whether or no the described affections were of scirrhus nature.

The leaves of the house leek contain a great deal of mucus, and the tincture should therefore be made with highly diluted alcohol, and the first three potencies with distilled water only.
—*Dr. Kallenbach, of Cleves, in Vol. L., of Allg. hom. Zeit'g.*

HOMŒOPATHIC CORRECTIONS OF ALLOPATHIC ERRORS.

By Dr. Hirsch in Prague.

Nocturnal Cramp in the Calves.

Translated for the HOMŒOPATHIC RECORDER.

The proprietor of a factory, Mr. Richter, came to me one day to get medical advice about his very frequent nocturnal cramps in the calves. He had tried cold rubbing of the legs before going to bed, and several varieties of friction with spirituous liquors, which had been advised by his allopathic physician. These had been of as little use as the nightly application of aromatic herbs to the lower extremities. It was owing to quite a peculiar accident that I had learned a very simple remedy for overcoming this nocturnal torment. Some years ago one of my patients, a very nervous individual, communicated to me a very strange observation, namely, that when the footway of the Karlsbrucke, at Prague, was still covered with corrugated iron plates he had to carefully avoid the footway and pass the bridge on the stone-pavement made for carriages; for as soon as he would walk twenty or thirty steps on the footway he would be seized with cramps in the toes, in the soles of the feet and at times even in the calves. This communication excited my interest in a higher degree, and on getting home I at once consulted the *Materia Medica Pura*, and looking among the symptoms of metallic iron I found to my joyous surprise among the morbid symptoms in the lower extremities the following printed with heavy type: "*Frequent cramps in the soles of the feet and in the toes, also with painful drawing together of the toes.*" "*Cramp in the calves.*" It was just as the patient had said. Chance directed that I had a few weeks afterwards an opportunity of applying this observation to use: The mother of a sick child told me during my visit, incidentally, that she had passed the preceding night very restlessly, not, however, on account of the child, but because she had been repeatedly seized with cramps in the calves, a torment by no means unusual with her, which always required prolonged friction and kneading for its removal. At once I remembered my nervous patient and his peculiar observation, and advised the woman to make the experiment of tying an iron key to the sole of her foot with a cloth. She did it every night and with the best results. Since

this time I have frequently successfully used this remedy, but have changed it in its application in so far that now I only advise the patient to place a somewhat large key under the covers about the foot of the bed, as it seems quite unnecessary to bring the sole of the foot into immediate contact with the key. In this simple manner I have relieved innumerable cases of cramps in the toes, the soles of the feet and in the calves; and when this has been continued for several nights the key is frequently not needed for months. In this way I also relieved the above mentioned Mr. Richter, who had frequently been obliged to jump out of his bed twice in a night, and to walk on the cold floor, to free himself from his cramps; and this in spite of the manifold remedies recommended to him by his allopathic physician. He was very much astonished to hear this very simple and strictly homœopathic advice, and with still greater astonishment he marveled at its success.

Impetiginous Eczema.

After patiently waiting for half year under the treatment of an allopathic physician, who had treated his one-year-old child for eczema, Mr. St. determined to flee for help to homœopathy. According to the statement of the father, the disorder of the little patient, at the beginning of the allopathic treatment, had merely consisted of a sore behind the left ear, but under the masterly treatment of the allopath, it made such a startling progress that one would have thought that the physician intended to turn the whole left side of the face and of the neck into an open sore rather than to heal the sore behind the ear. When I made a close examination of the original spot of the eczema it looked as if the cartilage of the external ear was already destroyed, and as if we might expect in a few days that it would be altogether separated from the head, the more so as also the inner surface was seen to be seized by the eczema. But also the left side of the face including the one-half of the cheek as well as the left side of the neck almost extending to the clavicle were already included in the eczematous process. The lobe of the ear with its loose wide-meshed connective tissue in consequence of the serous infiltration in the duplicature of its skin was considerably thickened, while all the eczematous surfaces looked shiny red and somewhat uneven, and were constantly moist. Quite near the border of the eczema newly arisen blisters could be seen, which foretold of its further extension. It is a matter of course that

this eczema which must be characterized as *impetiginous*, was accompanied with violent itching, which caused much torment to the little one, and through his moaning, especially at night, also to those around him. During the last days all salves and lotions for painting the little one had been laid aside, and only a light linen cloth had been used to cover the ever moist sore surface; still the frequent change of the cloth was accompanied with much difficulty, since even when removed with the greatest care it caused much pain to the child and also bleeding in the sore places. Partly on account of the similitude of the symptoms, partly to antidote preceding medicines, as mercurial medicines had been used by preference, I found best to first order some doses of *Hepar* 3, a dose as large as half a lentil, morning and evening. Besides this I directed that the eczematous spots, which were only covered with a linen cloth, should be cleansed twice a day with cool water and dried off lightly and carefully; so also I ordered that the linen cloth before its removal should be properly moistened. Twelve powders of *Hepar* had been used and there was not yet any sign of improvement, neither in the moisture of the eczema nor in the crying of the child. Now I intended to proceed to the use of *Graphites*, and I directed the nurse to call at the office that same day to get some powders. She came; but when I opened the box in which I kept my triturations and attenuations of *Graphites* I was sorry to see that there was no medicine in any of the bottles, except in one containing the 2d trituration and in the one containing the 100th attenuation. Though I am by no means, generally speaking, a friend of high potencies, I nevertheless determined to give them another trial, the more since I remembered that a year before I had used a single dose of the 100th potency with good effect in an eczema behind the ear, though that had been of a much smaller extension. So I gave the nurse twelve numbered powders of sugar of milk of which only the first was moistened with the 100th attenuation of *Graphites*, and I directed that every morning and every evening one of these powders should be taken. When I visited the child a few days later I was informed at once upon my entrance that a striking improvement had taken place, and, indeed, at once after the third powder. The improvement consisted in a great diminution of the moisture of the eczema, and in quite a striking improvement in the restlessness of the child. I again gave twelve numbered powders of sugar of milk, of which only the first contained medi-

cine. After six days they could not tell me enough about the progress in the improvement, and I also convinced myself that the cure of the eczema was progressing most favorably. From this time the child received nothing but unmedicated sugar of milk, and after five weeks of homœopathic treatment it could be called completely cured.

Scrofulous Disorders.

The Countess D., while temporarily sojourning in Vienna, consulted a children's physician of extended fame, Dr. M., on account of her seven-year old daughter, who had for some time been suffering from soreness of the internal parietes of the nose. He ordered *Iodine*, diluted with water, to be daily injected into the nose. Homœopaths will not be surprised to hear that this prescription proved anything but useful, as *Iodine* has no specific relation to such an affection of the nasal mucous membrane. It was only used for eight days, as a very painful obstruction of the nose was added after a few days to her former trouble, and beside this there appeared on the left cheek an intensely red spot.

Now my advice was sought. I diagnosed her trouble as caused by a lymphatic (scrofulous) constitution; I also promised a radical cure, but stated that they might expect that the sharply bounded spot on her left cheek, which was caused by erratic erysipelas, might disappear and reappear elsewhere before its final disappearance. As to the chronic coryza, this would also be cured, though it might take some time. Events proved that even this caution in my promises was superfluous, as four doses of *Graphites* given at intervals of five days sufficed to totally remove all the above-mentioned morbid symptoms and even to remove a costiveness and constipation which had troubled her for several months. More than a year has since elapsed, and the state of health of the blooming and vigorous looking child leaves nothing to be desired.

Neuralgia.

Mrs. S. von B., a vigorous, well-nourished lady of 42 years, the mother of five healthy children, suffered for several months of various ailments, which neither her ordinary nor her consulting physician, who had frequently been consulted, could effectually cope with. They determined eventually to consult Prof. D. in Vienna. Now this lady had the peculiarity, not rare with the female sex, of looking very well on certain days, despite

her many ailments, so that an allopathic physician thirty years ago might have thought himself entitled to order venesection, while on the other hand there were certain days on which, without any particular aggravation of her state, she would make the impression that she was anaemic, and very suffering owing to that state. It so happened that on the day when Prof. D. visited her the patient was looking very badly, and this circumstance seems to have had a great effect on his diagnose and his proposed therapy, for after a short examination he declared her to be anaemic and urgently recommended baths containing iron. The patient followed his advice and visited Franzenlead, but her nervous weakness there increased considerably, so that she was compelled to stop her use of the baths after fourteen days. She returned to Prague a greater sufferer than before, and resolved—so she said—in sheer desperation, to make one more effort with Homœopathy. The task of treating her fell to me. At my first visit I was, indeed, surprised to see my patient look so well, which was in manifest contrast with the comprehensive complex of symptoms which had been communicated to me. After listening to the whole litany, I asked the patient whether she had frequently tried the cherry-bay cordial. “Oh, yes,” she replied; “I took some this very morning, and that is as yet the only remedy which still gives me some relief, and in which I have as yet the most confidence.” I endeavored to show the patient that this remedy, least of all, deserved her confidence, as many of the symptoms superadded during the last stage of her disease owed their origin to these drops, which are only tranquilizing for the moment; *e. g.*, the lack of vital warmth, much yawning, sleeplessness at night, and drowsiness by day, the depression of the mind and spirit, the frequent spasmodic cough with sensation of constriction in the windpipe, etc. After this explanation I induced the patient to promise never under any condition to make any further use of this remedy, so as not to disturb the action of the homœopathic remedies, whose action would be directed against the chief original symptoms. These symptoms consisted on the one hand of a sensation of pressure and heaviness in the anterior part of the head as if it would press out the forehead; the eyes could not be moved, else a very painful and frightful twitching in the sinciput was added. This symptom appeared very frequently and especially about noon, and usually lasted from eight to ten hours and generally recurred two to three times a week. *Quinine, Caffein, Thein* and

many resolvent medicines had been used, and the result was that the headache really appeared more rarely, but a new, no less painful symptom appeared; namely, a violent almost daily cramp in the stomach, appearing almost immediately after the meal; this was described as an extremely painful violent constriction and pinching frequently accompanied by a burning sensation, from which the patient could find relief only by bending double. After these cramps had lasted two to three hours a few soft stools were wont to follow, forming, as it were, a crisis. For this symptom *Morphine*, *Magisterium*, *Bismuthi*, and especially cherry-bay cordial were given, but these were unable to do more than to produce a palliative alleviation, while they called forth a host of other symptoms attributable to the narcotics used. The well-known antidotal efficacy of camphor and the striking lack of vital warmth and continuous chilliness of the patient induced me to give the patient for several days, morning and evening, one drop of the first attenuation of camphor, so as to be able to afterwards count with more confidence on the effect of the specific remedy which should be selected. While the camphor was being given, the cramps of the stomach, indeed, appeared with but little change, but a striking diminution of the morbid symptoms caused by the frequent use of the cherry-bay cordial was observed. The sleep became more normal; the convulsive yawning and coughing, as well as the sense of constriction in the throat, disappeared with the exception of slight traces. In the meantime I had gained a respite, so as to find out the specific remedy corresponding most closely to the chief symptoms; and this I thought to have found in *Silicea*. The patient now received eight numbered powders of sugar of milk, of which only the first had been moistened with *Silicea* 30. Every evening one powder was taken, and when I visited the patient on the sixth day she knew not how to praise sufficiently the action of this remedy, as since three days she had only had very slight reminders of the cramp in the stomach and the head had remained quite free during this time. In a space of fourteen days, two additional doses of *Silicea* were given, and the obstinate, chronic trouble was removed, the patient had recovered her former cheerfulness, her looks now continue to be good, and what may besides seem remarkable is the circumstance that while my allopathic colleague had strictly forbidden her the use of both coffee and tea I allow the patient to drink weak tea for breakfast.

Chronic Stuffed Coryza.

The Countess J. T., a vigorous and perfectly healthy lady, the mother of six healthy children, had been treated for two years, say two whole years, by several allopathic physicians, among whom were several clinic professors, for a very distressing stuffed coryza. Manyfold vapors of tea, injections, rubbing on the root of the nose with an ointment of iodine, and many other local remedies, as well as resolvent medicines given internally, had been used, a sea bath also was tried, all in vain. The patient was especially distressed by her disturbed night's rest caused by the parched condition of her tongue and fauces by the troublesome, incessant pressure on the head, with a constant muddled condition of the same, and by the total loss of the senses of smell and taste. In consequence of the repeated urgent advice of a friend, the patient finally resolved to submit to Homœopathic treatment. The first remedy I found best to apply was *Sulphur* 15th, to which a number of powders of sugar of milk were added. After three days I repeated my call, and heard from the delighted patient that she was already able to blow some air through one of the nostrils. I again gave her some numbered powders, of which No. 1 contained *Sulphur*. The amelioration now extended also to the other nostril and progressed from day to day, and after a third dose of *Sulphur* the stuffed coryza was removed after four weeks of Homœopathic treatment; the other dependent morbid symptoms were of course removed at the same time. Only the defective sense of taste and the completely inactive sense of smell required an additional dose of *Silicea* 30, when they gradually returned to their normal function.

This case was begun in June, 1872, and completed about the end of September. In January, owing to a severe cold, a violent coryza appeared, and the patient already uttered the fear, of which I myself was not clear, that the recovery would be a slow one, but, quite against my expectations, a few doses of *Nuxvomica* 6 and a dose of *Sulphur* 15 brought about a full recovery within twelve days.

Odontalgia Rheumatica.

Two teeth had already been pulled, manifold tooth-drops and lotions for the mouth had been used, a little *Vesicans* had been appointed a modest place behind the ear, and Mr. K. a pretty vigorous man of about thirty-five years, was still unable to re-

main in his bed at night, and only toward morning there was usually an abatement of pains and some sleep. But this sleep lasted at most two to three hours, after which the pain resumed its sway all the day though not in as high a degree. Six long days full of pain and six nights still longer and more painful had already passed, when the patient finally determined to give Homœopathy a trial. The pain, appearing with especial violence at night, its peculiarities: tearing, raging, extending even into the temple, with a sensation of elongation in the left lower molars, which were also most sensitive to every touch of the tongue, all these symptoms pointed out to me *Magnesia carbonica*; the more as this remedy had repeatedly been of essential service to me in similar cases. So I sent the patient eight numbered powders of sugar of milk with the direction that he should take one powder every two hours. The first one alone had been moistened with *Magnesia carbonica* 15. This he had taken at 3 o'clock in the afternoon, and at my morning call I still found four powders; for the patient had slept quietly and uninterruptedly all the night. I allowed him to take these unmedicated powders during the day at intervals of three hours. For the night I prepared eight additional powders, of which the first, containing the medicine, should only be taken in case it was needed at night; but this powder was not used, as the pain did not return. It was difficult for me to keep silent, when the patient enthusiastically exclaimed: "It is wonderful, eight tiny powders effected more in such a short time than all these implements of torture."—*Inter. Hom. Presse, Vol. III.*

BOOK NOTICES.

A Hand-book on the Diseases of Children and their Homœopathic Treatment. Illustrated. A Text book for Students. Colleges and Physicians. 905 pages, 8vo. Cloth, \$5.00. Chicago: Medical Century Co. 1895.

Dr. Fisher's long announced and looked for "Hand book" is a very big handful now that it has arrived, but a very pleasing one to look at for all that. As for its orthodoxy, the author's long contests in the South in the cause of Homœopathy ought to be a guarantee for that. The book is divided into twelve "sections," and these into one hundred and twenty-nine

chapters, embracing all the ills of childhood and their treatment. On page 242 there is a statement that the author ought to change in next edition; that is, provided Dr. Winterburn, in his book *Value of Vaccination*, is correct in his statement. Dr. Fisher states that "Governmental reports show that during the Franco German war of 1870 and 1871 the mortality of the soldiers of the French army, the unvaccinated, was 23,469."

Now in Winterburn's curious little book on page 74 may be found the following: "During the Franco Prussian war (1870) there were 23,469 cases of small pox in the French army, all of them vaccinated. Dr. Bayard, of Paris, says: 'Every French soldier on entering a regiment is re-vaccinated; there are no exceptions.'" This is a direct conflict of statement, a question of fact. Which of the two is right?

Dr. Fisher's book is a very pretty specimen of good type, presswork and paper, and will doubtless be a welcome addition to libraries of homœopathic physicians.

Pathology and Morbid Anatomy. By T. Henry Green, M. D., lecturer on Pathology and Morbid Anatomy at Charing-Cross Hospital Medical School, London. Seventh American from the eighth and revised English edition. Octavo volume of 595 pages, with 224 engravings, and a colored plate. Cloth, \$2.75. Philadelphia: Lea Brothers & Co., publishers. 1895.

The seventh American edition of this valuable work was revised and enlarged by H. Montague Murray, M. D., F. R. C. P., lecturer on pathology and morbid anatomy at the Charing-Cross Hospital, London. Sixty new illustrations, one a lithograph, have been added, and also new text matter, thus giving to the practitioner and student, the last word to date on that shifting, or shall we say evolving, science, pathology. Only one more skilled in pathology and morbid anatomy than the writers of the work could give a worthy critical review, so this reviewer must content himself with a description of the book, which may be quite as acceptable to the average reader. Following the introduction comes what we may call the first division of the work: "Nutrition Arrested," one chapter; then "Nutrition Impaired," seven; "Nutrition Increased," two; "Tumors," six; "Diseases of the Blood," two; "Fever," one; "Inflammation," one; "The Vegetable Parasites," one; "The Infective Granu-

lomata," two; "Septicæmia and Pyæmia," one; "Malaria," one; "Diseases of Special Tissues and Organs," seven; and, lastly, "Pathology of the Central Nervous System" with one chapter, making thirty-two chapters in all, with a ten-page index.

On page 333, on the subject of bacteria, the author says that there are three possible answers to the question, "Whence do the bacteria come that infest a putrid wound?"

"1. They may find access to the body from some outside source; 2. They may exist in the healthy human body, developing only under special circumstances; 3. They may be spontaneously generated from the tissue." Of this last solution the author writes page 338: "The possibility of organisms originating *de novo* from the molecules of decomposing tissues must be mentioned but cannot be discussed." The great majority of observers having decided against this view "We conclude, therefore, that organisms found in a putrid wound have entered it *from without*," and the same is true of all other micro-organisms found in the body. We cannot help thinking that in this conclusion the author yields to "the great majority of observers," rather than because he is fully convinced that they are right. "Spontaneous generation," the creation of something from nothing, is absurd, but the "spontaneous" changing of diseased tissue to what is known as "bacteria" is not absurd but more reasonable than to hold that these must come from without and then propagate their kind in the wound, or diseased tissue. We believe the day will come when men will see that these so-called "organisms" are not living things, but simply the forms that effete, or diseased, matter takes in resolving itself into the elements again.

In the matter of type and paper the book is all that could be desired.

The Elements of Surgical Pathology with Therapeutic Hints.

By James G. Gilchrist, A. M., M. D., Professor of surgery Homœopathic Medical Department University, of Iowa. 343 pages, 8vo. Cloth, \$2.50. Minneapolis Pharmacy Co. 1895.

Dr. Gilchrist has written what we believe to be a very useful, common sense and helpful book. The key-note of the book is found in these words from the introduction: "The theory upon which this book is written is that morbid action is essentially a

question of organism, rather than of its environments." In other words, the author takes but little stock in microbes, but sticks to the sound homœopathic view advanced by Hahnemann. The part of his book devoted to therapeutics is excellent. For gonorrhœa he introduces a remedy to be met with in no other work, *Apis*. "For twenty years I have been in the habit of giving this remedy in all cases of gonorrhœa in the suitable stage and have rarely failed to secure the desired result."

Physical and Natural Therapeutics.—The Remedial Use of Heat, Electricity, Modifications of Atmospheric Pressure, Climates and Mineral Waters. By Georges Hayem, M. D., Professor of Clinical Medicine in the Faculty of Medicine of Paris. Edited with the assent of the author, by Hobart Amory Hare, M. D., Professor of Therapeutics in the Jefferson Medical College of Philadelphia. In one handsome octavo volume of 414 pages, with 113 engravings. Cloth, \$3 00. Philadelphia: Lea Brothers & Co. 1895.

Concerning this work we quote from the publishers' announcement:

"For many diseases the most potent remedies lie outside of the *Materia Medica*, a fact yearly attaining wider recognition. Within this large range of applicability, physical agencies when compared with drugs are more direct and simple in their results. Medical literature has long been rich in treatises upon medicinal agents, but an authoritative work upon the other great branch of therapeutics has until now been a desideratum. The author and editor of this work enjoy equal standing, and the volume is certain to command attention and to render widespread service. The section on climate, rewritten by Professor Hare, will, for the first time, place the abundant resources of our own country at the intelligent command of American practitioners. The extended section on Medical Electricity, likewise rewritten, conforms to the American development of this subject and explains the many excellent forms of apparatus readily available in this country."

Owing to the ever growing popularity of the sea shore, it may not be amiss to quote what is said of the effects of sea air:

"The physiological action of sea air has been investigated by a number of authors, especially by Beneke. It has been found to influence strongly the general nutrition, even in a more

marked degree than sea-baths. The surface of the body is cooled more quickly on the sea coast than in the inland stations; the nutritive processes are active; the quantity of urine, the excretion of urea and of sulphuric acid are increased, while that of phosphoric and uric acids is diminished. The body-weight is also augmented. There is generally a fall in the number of respirations and pulsations; sleep improves, and the nervous system is slightly stimulated. The last effect may, however, be so marked that, in impressionable persons, it causes insomnia."

The book seems to be a very useful one.

A LITTLE talk recently with a physician showed the wisdom or shrewdness, of those who are habitual book buyers. This one bought a copy of Burnett's *Gout*, and shortly thereafter had a chance to test its therapeutics; the success was marked, so much so that the physician had made quite a handsome little sum of money and was making more out of that book. He spoke very approvingly of the remedy *spiritus glandium quercus*, which Dr. Burnett introduces in *Gout*.

W. E. KINNETT, M. D., Yorkville, Ill., writes: "Some three or four years ago my attention was called to some articles in our eclectic medical journals in regard to the "Tissue Remedies." At first I thought but very little of the articles, but from time to time as more articles appeared in those and other journals, I began to wonder what was meant by the "Tissue Remedies" and the "Schussler Remedies." The more I investigated the more I was interested. About two years ago I purchased Boericke & Dewey's work, entitled *The Twelve Tissue Remedies*, and ordered four ounces of each of the twelve remedies, and began to study them and their action in disease. At first I thought they savored too much of homœopathy. But nevertheless I had commenced to investigate them, and was not going to drop them at this stage. The more I have investigated the more I am convinced that it is *not* homœopathy." That is a mere question of fact. The indications for those of the tissue remedies proved by Hahnemann are precisely those given by Schussler. Whether they act on Schussler's theory or that propounded by Hahnemann is another question. But they *do* act. Any one wanting to look into the matter cannot do better than follow the example of Dr. Kinnett, and study the Boericke & Dewey book which is the authority on the subject.

DR. BRADFORD'S *Story of the Provers who assisted Hahnemann* includes, in this month's instalment, what is known of the much talked of Nanning, a man who seems to have done a great amount of good and conscientious work for the cause of Homœopathy and received in return more kicks than glory. Dr. Bradford is doing a useful work in collecting what is known of the men who, with Hahnemann, made the homœopathic materia medica. We would suggest if any of the readers of the RECORDER know of anything concerning "the provers" that has not appeared in the matter published, it would be well, in the interest of homœopathy, to send it to the historian of Homœopathy, T. L. Bradford, M. D., 1862 Frankford Avenue, Philadelphia, Pa.

MESSRS. BOERICKE & TAFEL have bought the remainder of the second edition *Headaches and Their Concomitant Symptoms*, by Dr. J. C. King, from the publisher, who has given up the publishing business. The book is a good one to have in the reference library for cases where "headache" is the prominent feature, for by means of its "other head symptoms" its "aggravations," "ameliorations" and "concomitants," one can get much light on the remedy required. The repertory analysis that closes the book is a good feature.

THE Gross & Delbridge Company send us a very pretty little account book for physicians bearing on the title page the words Dr. Bailey's *Physician's Complete Pocket Account Book Perpetual*. It contains about fifty pages of ruled paper for entries, is nicely bound in red leather and sells for fifty cents.

THE other day a friend of the writer's was raging around to find certain data concerning a homœopathic society, the origin of a defunct journal and editions of a certain book. He *had* to have them, and was making out badly in his quest. "What's the matter with looking to Bradford's *Bibliography*, a third one asked, and then the writer and the searcher looked foolish, for in that book was every fact for which they were searching. For those who can afford the luxury the *Bibliography* will often prove itself a useful work of reference. It covers the whole field of American Homœopathic literature, societies, journals, hospitals, etc.

"The Life and Letters of Dr. Samuel Hahnemann."

Readers of the "HOMŒOPATHIC RECORDER" were prepared for the appearance of this biography by the monthly presentation of the material of which it is composed, but in its present dress as a complete book it deserves more than mere mention. The book contains over 500 large octavo pages of distinct and satis-

factory type. Its reading matter is presented in 92 short chapters which intimately follow the unusually long, varied and exceptionally useful life of its subject from his birth in 1755 to his peaceful death in 1843.

Of such a book it is impossible to say much, except that it is a particularly thorough, honest and unvarnished compilation, the material for which has been gathered by a painstaking scholar, from every available source. Those acquainted with the compiler's thoroughness, earnestness of purpose, and ability and facilities for doing the work will have no difficulty in accepting its statements as eminently reliable. The book is almost purely biographical, the object of the compiler being to offer his readers the story of Hahnemann's life simply and sympathetically told with scrupulous regard to minute detail, and having told the story as accurately as long preparation and exceptional opportunities permit, to leave comment and conclusions to others. Having done his work he can well quote the words of Hering found in the Preface, "Then let the estimate follow, not penned by the laborious biographer, but formed in the inmost soul of him who shall have read and weighed the whole."

The book presents all accessible facts connected with the life of this great man, in chronological order, narrating in a "concise manner the romantic story of his wanderings, his persecutions, his discoveries, his triumphs;" relating in simple language the experiences of the child, the youth, the student, the man as husband, father, physician, philosopher; and chronicling all the facts which led to the great discovery and evolution of homœopathy. Not only is the book valuable for its compilation of facts and statistics hitherto widely scattered and practically inaccessible, but it is especially valuable for its testimony to the moral worth and upright character of the man who was the leader of the greatest medical reformation in history.

The story as a whole is a fascinating one and every homœopathic physician should make it a duty to become familiar with it; and the book is one that can be heartily recommend to the intelligent laity who desire to know something of the famous founder of homœopathy; of the man who was, in the words of the compiler, Dr. Bradford, "Scholar whom scholars honored and respected; physician whom physicians feared; philologist with whom philologists dreaded to dispute; chemist who taught chemists; philosopher whom adversity nor honor had power to change."

We are told that it was nine years before the first edition of the *Organon* was sold. In justice to Hahnemann, in justice to homœopathy, in justice to the intelligence of homœopathists and their power to appreciate a work of such value, and in justice to the worthy purpose and industry of the compiler, it is to be hoped before nine years have passed not one but many editions of this book may have been published and sold.—*New England Medical Gazette*.

Homœopathic Recorder.

PUBLISHED MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street,

Philadelphia, Pa.

SUBSCRIPTION, \$1.00 PER ANNUM.

Address communications, books for review, etc., for the editor, to E. P. Anshutz P. O. Box 921, Philadelphia, Pa.

A TRIBUTE TO HOMŒOPATHIC PHARMACY.—The following tribute to homœopathic medicines, or homœopathic pharmacy, we clip from the *Medical Summary* :

“Dr. W. H. DeWitt says in a late issue of the *Lancet-Clinic* that his attention was called to a transcript from the Philadelphia *Polyclinic* in the *Lancet-Clinic* for July 6, on seminal emissions and its treatment. It speaks of the abandonment of the bromides and the substitution of hyoscine 1-200 of a grain at bedtime. In very many instances this remedy will give most excellent results, but still there are a certain class of cases, in my experience, that are not in the least benefited by this line of treatment. For some time past I have used nothing in these cases but the *thuja occidentalis* tinct. in six or eight-drop doses three times a day, half an hour before the three daily meals, and cannot call to mind a single case in which it has failed to correct the trouble, and that very promptly. The dose can be increased if thought necessary. In every instance I have directed my patients to procure the homœopathic mother tincture. The preparation usually kept and sold in retail drug stores I have not found reliable. I use the homœopathic preparation, but not in homœopathic doses. Try it and be convinced of its merits.”

There is not the least doubt but that the better class of homœopathic pharmacists supply better and purer drugs and tinctures than can be found in the corner drug-stores.

“PRIMITIVE PHYSIC.”—The *Medical Summary*, for September, prints a letter from Dr. J. W. Price, of Marlinton, West Virginia, made up of quotations from a book in the writer's possession entitled *Primitive Physic*, published in the last century. Among the “cures” for consumption is one that seems to bear a family

likeness to theory hinted at by Dr. Hering in his paper published in the RECORDER some months ago, namely, that malaria seems to have a beneficial effect on consumptives. or, rather that consumptives exposed to malarial influences do not contract that disease and are apparently benefitted. The cure cited by Dr. Price is, "cut up a turf of fresh earth, and, lying down, breathe into the hole for a quarter of an hour" every morning. Now the turning of fresh turf is known to be a more or less potent factor in causing malaria.

Dr. Burnett, who has given us a new use for *urtica urens*, in his recently published book on *Gout and its Cure*, may be interested to know that the old book recommends a decoction of nettles for "old age," which will *probably* renew the strength from some years to come. Externally nettles is also to be applied for sciatica.

Agrimony, or *Agrimonia*, the tincture from the cockle ben or stickwart, is a cure for "lunacy."

Guaiacum, thirty drops on sugar, and this dissolved in a glass of water, for rheumatism, "usually cures in a day."

FORTY-FOURTH SEMI-ANNUAL MEETING OF HOMŒOPATHIC MEDICAL SOCIETY OF NEW YORK.

The forty-fourth semi-annual meeting of the Homœopathic Medical Society of the State of New York, was held at the Berkeley Lyceum, New York city, on Tuesday and Wednesday, October 1st and 2d. Its last meeting was held last February at Albany, N. Y., when the following officers were elected to serve for a term of one year each: President, Dr. Charles E. Jones of Albany; Secretary, Dr. John L. Moffat of Brooklyn; Treasurer, Dr. Charles Deady of New York city and Necrologist, Dr. E. Hasbrouck of Brooklyn.

During the present session a large and varied collection of papers were submitted, most of which were read and many discussed. Dr. Edmund Carleton spoke of the value of cider vinegar as an antidote to *Carbolic acid*. He stated that this was mentioned some time ago in the RECORDER, and that it had recently been used with great success in all kinds of *Carbolic acid* poisoning, it restoring the natural health and color to the skin or membrane affected in a very short time after its application.

The use of *Antitoxine* in diphtheria came up for discussion and received a great deal of attention from the members present.

The general impression was not very favorable to the use of this preparation by Homœopaths. Local treatment for diphtheria was also discountenanced and only proper Homœopathic treatment recommended.

Dr. T. F. Allen addressed the meeting, the chief subject of his remarks being based on his recent visit abroad. He was present at the opening of the new Homœopathic hospital in London, which is a marvel for perfect appointments. It has one hundred and eighty beds and cost about a quarter million dollars. The opening of this hospital gave the school a great impetus in England. In Paris, at the St. Jacques Hospital, a new preparation called "Aviare" is being somewhat extensively used in the treatment of bronchitis of the apex of the lungs. This remedy is obtained through tuberculous infection of chickens and is said to be a specific for this disease. The doctor obtained a small supply which he took to Dr. Clarke, of London, who will further pursue the experiments and we may soon expect to hear more of this new comer in medicine. Dr. Allen further stated that Homœopathy had just gained a great triumph over bigotry in Mexico where a decree has been issued granting our school of medicine equal rights in every particular with those enjoyed by the old school. In the City of Mexico, where typhoid fever is so abundant, the hospital death-rate is thirty-five per cent., while under the Homœopathic treatment it is but thirteen per cent. The Homœopathic hospital there has forty beds and during the past year its out-door department has treated about forty thousand cases. Of twenty cases of typhus treated in the Homœopathic hospital eight were fatal which is a grand showing in a county where this dread disease is almost always fatal.

This meeting of the society was particularly interesting and well attended. It continued through two afternoon and two evening sessions and adjourned to re-assembled at Albany next February.

NEW YORK CITY NOTES.

Dr. J. M. Schley, 1 East Forty-second street, has returned from his two months' vacation, which was spent at Glenwood Springs, Col., and Watkins, N. Y. The doctor had been quite ill before and during his outing, but returns greatly benefitted by the rest and change of air. During his absence his practice was in charge of Dr. Delabarre.

Dr. Walter E. Delabarre has removed his office from 223 West Fifty-seventh street, to the Park View, 224 West Fifty ninth street. Office hours, 9 to 10; 5 to 6.

Dr. Rita Dunlevy has removed her office from 172 West Fifty-four street, to The Princeton, 328 West Fifty-seventh street. Office hours, 10 to 1; 5 to 7.

Dr. Thomas M. Dillingham and Dr. Arthur G. Allen have removed their office from 46 West Thirty-sixth street, to 8 West Forty-ninth street. Dr. Dillingham has been spending the summer at Chesham, N. H. Dr. Allen taking charge of his practice during the time he was away.

Dr. E. D. Franklin, 331 West Fourteenth street, has returned from Chautauqua Lake where he has been spending the summer months.

Dr. Henry Skinner Hathaway has removed his office from 140 to 146 West Ninety second street. Office hours, 9 to 10:30; 5 to 6.

Dr. T. F. Allen, 10 East Thirty-sixth street, has returned from Europe where he spent a two months' vacation.

Dr. J. H. Jolliffe, 105 West Eighty sixth street, has determined to take a two or three years' rest and spend the time in travel and recreation. The doctor was recently rather severely injured by being thrown from his bicycle and run over by a heavy truck. He has just returned from England where he spent a month. Is spending some time now at Ware, Mass., after which he will travel through the South and West of this country and then go to Japan. His wife accompanies him on all his travels.

Dr. E. G. Ogden, who is taking a three years' course of lectures in Vienna, reports the excellence of facilities for learning abroad. He is securing a great number and variety of specimens of diseased organs and tissues for his microscopic and anatomical collection which he hopes to be of great service to himself and his friends when he returns to continue his profession here. The lectures are given by the most eminent physicians and surgeons, and under the most satisfactory conditions, while the expenses are very moderate. The doctor with his family are living at the Grand Hotel, Vienna, where they will probably remain until their return to this country in '97.

Dr. H. H. T. Noble has located his office at 24 West One Hundred and Fourteenth street, N. Y. and Dr. J. C. Grafton, at

Deposit, Broome co., N. Y. Both are graduates of the class of '95, N. Y. H. M. C. & H.

Dr. Bukk G. Carleton has removed from 173 West Forty-seventh street to 75 West Fiftieth street. Office hours, 9 to 12; 6:30 to 7:30.

The N. Y. Board of Regents has established a branch office in East Forty-second street for the benefit of local aspirants for examinations. This is a new feature, and will be doubtless appreciated by those who will apply for admission to the colleges this year, and who would otherwise be obliged to go to Albany for their examinations as heretofore.

Among the physicians who have been out of town during the summer and are now back at their offices are the following: Dr. Clarence E. Beebe, who was at Norfolk, Conn.; Dr. Francis E. Doughty, New London, Conn.; Dr. A. B. Norton, Paris; Dr. C. S. Elebash, France; Dr. W. N. Guernsey, Europe; Dr. H. M. Dearborn, Lake Mahopac, N. Y.; Dr. Wm. O. McDonald, New London, Conn.; Dr. Bukk G. Carleton, Whitefield, N. H.; Dr. Fred. J. Nott, Crescent Surf, Maine; Dr. E. H. Porter, Upper Lisle, N. Y. and Dr. Wm. Tod Helmuth, Amsterdam, Netherlands.

Dr. J. Wilford Allen, N. Y. H. M. C. & H., has located at 44 West Twelfth street.

Dr. George Parker Holden, N. Y. H. M. C. & H., '94, has located at 256 West Fifty-sixth street. Dr. Holden until recently was on the house staff of the Flower Hospital.

Dr. A. S. Reed, N. Y. H. M. C. & H., the second colored graduate of the college to locate here, has opened an office at 157 West One Hundred and Fifty-first street.

Dr. J. W. Thompson has removed from 104 West Fifty-eighth street to his old location at the Sherman, 159 West Forty-eighth street.

PHARMACISTS report a number of calls for a new remedy *Aviare*, mentioned by Dr. Allen, at the recent meeting of the N. Y. Homœopathic Society (see page 493 of this number of THE RECORDER). Messrs. Boericke & Tafel will procure a supply at as early a date as possible. Anyone wanting the remedy will do well to send in their orders to be filled as soon as the remedy is procured.

PERSONAL.

The continuation of Dr. Hering's "Epidemic and Endemic Diseases" was received too late for insertion in this number of RECORDER. Will appear next month.

Mark Twain is left worse than penniless in his old age, through publishing his own books, and they sold well, too.

A physician of St. Louis has been sued for \$2,000 damages for publishing a half tone picture of one of his patients, illustrating a case.

Dr. Plumb Brown, Jr., has removed from South Manchester, Conn., to Springfield, Mass.

Dr. Sarah T. Rogers Eavenson has removed to 1711 Race street, Philadelphia.

"Hell Revised, Modernized and Made Comfortable," is the title of a pamphlet emanating from one of the long-haired.

Every one who makes anything like a speciality of the diseases of the digestive tract will find great help in Dr. McMichael's splendid quarto. *Compendium of Materia Medica. Therapeutics and Repertory of the Digestive System.*

There are forty-two Homœopathic pharmacies in Calcutta, and nothing goes there but Homœopathy.

If urine cannot be voided without constant use of catheter think of *Solidago virga-aurea*.

Horror before a rain indicates *Elaps*.

For condensed drug-pictures there is no better book than Cleveland's *Salient Materia Medica*.

Custis' *Practice of Medicine* will slip into a long felt want. It will sell for somewhere about two dollars.

There is a doctor who purchases every Homœopathic book; he recently purchased his third turnout and span, also.

Dr. Julia Gould Waylan has removed to 1832 Tioga street, Philadelphia.

Dr. Alfred Heath, in *The Echo* of London, says that "small-pox would be a blessing" when compared with the diseases of vaccination.

Drs. Sarah A. Colby and Esther W. Taylor have removed to 226 Ferry street, Malden, Mass.

The critics roar at each other over what is literature, and the public, as ever, reads what interests it regardless of all else.

It is true that a fool can ask more questions than a wise man can answer in a certain time, but then much of the wise man's time is taken up with revising the answers he had previously given.

Professor Gilchrist finds that with Iodoform dressing there was 50 per cent. suppuration while with *Calendula* it was 1 per cent.

The *Denver Journal of Homœopathy* is preaching the sound Homœopathy which always wins in the long run.

The new Dunham Medical College advertisement appears for the first time in RECORDER. See p. xxvi.

The "Hahnemann" of Chicago is out with a new electro, see RECORDER p. xxxi.

"I am the owner of Letters Patent," for "Phenactine, Sulphonal and Aristol" is the burden of a full page advertisement in the drug journals.

Boericke & Tafel are out with a new book catalogue.

THE HOMŒOPATHIC RECORDER.

VOL. X. PHILADELPHIA AND LANCASTER, NOV., 1895. No. 11.

EPIDEMIC AND ENDEMIC DISEASES.

MALARIAL FEVERS (CONTINUED.)

It is the fashion now-a-days to attribute every fever, and some other diseases also, to the action of what are called *germs*. It is a convenient theory and saves us the trouble of making any further investigation. But what does it really matter whether the poison producing a fever be a germ or not? My own idea has always been that some, at least, of the infectious poisons are not germs, but gases. We know very well that people have often been poisoned by gases; the carbonic oxide of the coal mines for example. Now is this carbonic oxide a malarial poison or not? Coal is said to be a vegetable product, and the gas comes from the clearance or opening up of the coal beds. Is not this something similar to the cuttings made for railways and canals in a swampy region, where, as we have seen, the malarial poison arises in a more intense or concentrated state? In this latter case the poison is probably not carbonic oxide; but may it not be some other gas, not so fatal, indeed, but quite bad enough to produce a fever? I think the gas theory quite as plausible as the germ theory.

My own impression, then, is that the malarial poison is a gas, and, moreover, a gas of some density, because it appears that "any deep sheet of water, especially running water, affords some degree of protection, and thus the intervention of a river may prevent the poison from passing from one of its banks to the opposite one. A ship at a little distance from shore is in comparative safety." Now a gas of great specific gravity would, of course, remain near the earth, and the reason why it does not reach the opposite bank of a river must be because it falls into the water and becomes absorbed by it. Carbonic acid is a gas of great

density, but whether this is the gas (or one of the gases) which constitutes the malarial poison I cannot say.

“*Winds.* These frequently convey the malaria for a considerable distance along plains, and may thus be the means of originating malarial affections in places remote from a malarial district, also counteracting the good effects of the intervention of water, etc. On the other hand, a storm may drive away the poison altogether.” In this latter case there may be either *chemical* or *electrical* conditions in operation, or both; and these, I think, would be more likely to act upon gases than upon germs.

“*Low districts* are more dangerous than those which are elevated, the malaria tending to cling to the earth. The lower rooms of houses are more dangerous than the upper.

“*Trees.* When in large numbers trees afford decided protection, both by interfering with the propagation of the poison and by keeping off the sun’s rays from the soil; in some cases, however, they seem to be injurious. Certain trees are said to exert a specially protective influence, particularly the *Eucalyptus globulus*; but this is more than doubtful.”

How do trees afford protection? Must it not be by their absorbing the poisonous gas? But how, “in some cases,” do they “seem to be injurious?” This I will not attempt to explain, because I doubt the theory. Yet one can readily understand that the leaves of some species of trees would absorb more of the poison than others; to wit., the *Eucalyptus*.

“*Mountains and hills* interfere considerably with the dissemination of malaria.” Yes, through the density of the poisonous gas, I think.

“*Time of the day.* Morning and evening dews augment the danger from malaria materially, probably from condensing the poison. It is highly dangerous to sleep in tents at night in malarial districts.

“*The air of cities* in some way renders the poison innocuous, for though a malarial disease may be raging in the surrounding districts it does not penetrate far into their interior.” This would probably be accounted for by the *fires* which would be burning in the cities.

“*Artificial heat* destroys malaria, if sufficiently intense.” Well, fires produce artificial heat.

“*Individual susceptibility* is increased by certain circumstances; namely, recent arrival in a malarial district; fatigue and exhaus-

tion from any cause; exposure to the full heat of the sun; sudden changes in temperature, and chills of all kinds; intemperance; over-feeding; mental exhaustion or nervous depression, and overcrowding. Some persons are far more susceptible than others. Young children and old persons are least subject to malarial affections, and males are said to be more predisposed than females. White races suffer more than black. It is stated that the use of drinking water from a malarial district may produce malarial diseases.

“Much doubt exists as to the *nature* of the malarial poison. It has been supposed to be a gas resulting from vegetable decomposition; but the favorite view is that it is *organic*, consisting either of *microscopic plants* or their *spores* or of *animalcules*. At present, however, neither chemical nor microscopic investigation has succeeded in demonstrating the nature of malaria. It has been suggested that there are different kinds of paludal poisons, but of this there is no proof. When animal matters are mixed with the decomposing vegetable material, the poison which escapes seems to be more virulent.”

The above extracts from Dr. Roberts are taken from the fourth edition of his work on Medicine, printed in 1880. It is somewhat strange that in these days of scientific investigation it has still to be said that “neither chemical nor microscopic investigation has succeeded in demonstrating the nature of malaria;” for one cannot suppose that this poison will forever baffle the scientist, and I should expect that the *chemist* will some day set the matter at rest. There is one more extract I wish to transcribe from this valuable book of Dr. Roberts.

“The poison is chiefly inhaled, and then absorbed by the pulmonary membrane; it may also be taken up by the stomach, which it often seriously disorders, and possibly by the skin. Malaria acts on the nervous system, and gives rise to fevers of an intermittent or remittent type, followed after a time by permanent organic changes, especially in the liver and spleen; while it also originates neuralgic affections. * * * Malaria imparts a peculiar periodicity to the affections which it originates, and once they have been developed they are liable to recur on subsequent occasions independently of the action of the original exciting cause, sometimes, indeed, apparently arising spontaneously. Various complaints tend to assume a periodic character in malarial districts.”

Is it possible to prevent malarial disease? This question

hardly ever presents itself to us, so remote appears to be any affirmative answer. If we have the misfortune to live in a malarial district, we are recommended to take *Quinine* as a prophylactic; and this seems to be the chief remedial panacea. It is taken for granted that nothing can be done to extinguish the poison. Drainage might do something; but it would have to be on such a gigantic scale that it must be considered impracticable. Plant the Eucalyptus, say some. This would be another gigantic undertaking in such an immense territory as would have to be covered. Take care not to be out at night is the advice of others, and the advice is good, but not easy to follow in a sultry region where everyone is longing for the faintest breeze. Perhaps nothing would be more likely to destroy the poison than *fires*; and if one were going to spend only a few days in the district it would be worth while making them. But those who live in the district all the year round would get tired of this, even if they could be reconciled to the additional heat. Upon the whole, the prospect of dealing with the *cause* of malarial fevers does not appear very promising. However, there is no telling what the ingenious American may not discover when he once sits down and thinks on the subject.

If the readers of the RECORDER should feel at all interested in my remarks about endemic and epidemic diseases, I will next pass on to speak of typhoid fever in a future communication.

G. HERRING.

London, England.

CICUTA VIROSA IN INFANTILE CONVULSIONS.*

By William Morris Butler, A. M., M. D., Brooklyn, N. Y.

Among the prominent symptoms of *Cicuta virosa* recorded in Allen's Encyclopædia, we find head bent to one side, jerking and twitching of the head. Spasms of all muscles. Convulsions, with loss of consciousness, frightful distortions of the limbs and whole body. Convulsions with wonderful distortions of the limbs, head turned backward, back bent as in opisthotonos. Cramplike stiffness of the whole body, with coldness. She lies as if dead with clenched jaws. Oppression of breathing. Staring; she stares with unaltered look at one and the same place, and cannot help it.

* Read before the New York State Homœopathic Medical Society, Oct. 1, 1895.

From such a picture we should naturally expect this drug to afford relief in many convulsive disorders.

The following case is presented as a verification of the clinical value of *Cicuta* in infantile convulsions:

Will Williams, four weeks old, was brought to my clinic at the Metropolitan Post Graduate School, Sept. 14th, 1895, with the following history:

For the past two weeks has had from twenty-five to thirty convulsions per day. Has several green slimy movements of the bowels daily. Has been under the constant treatment of two different allopathic physicians who have given him remedies, both injections and at times chloroform, but have been unable to control the convulsions.

While under examination the child had a severe fit in which he was completely unconscious, twisted the head to one side, clinched the fists and contorted all the limbs. In my absence Dr. A. R. McMichael prescribed *Cicuta virosa* 3.

Sept. 16. Child was brought back with the report that he had had eight convulsions the previous day, but none since. Movements of the bowels are less frequent and of more consistency and brown in color. Has taken twice the amount of milk. R *Cicuta* 3.

19. No convulsions since last visit. Cross and troublesome. Very hungry; cannot get enough. Three or four passages a day. Micturition profuse. R *Cicuta* 30.

23. No more convulsions; doing well. R *Cicuta* CC.

26. Seems to be cured of all tendency to convulsions.

A POSSIBLE NEW REMEDY FOR ECZEMA.

While attending a family, who for years previous had been farmers on Long Island, N. Y., the conversation one day turned upon the different schools of medicine and especially their ability to cure disease, when the *pater familias* gave the Homœopaths the credit of being able to cure more pleasantly, safely, quickly and thoroughly than any other school of medicine; but that there was one disease that even the Homœopaths could not cure, and that was Salt Rheum.

I told him that I had just cured a very great sufferer from that disease, but that it required time; and that one reason why patients often were not cured was that they became impatient and did not continue the treatment long enough.

Even so, but he could cure any case in eighteen days.

When asked how he did this he answered: With a tea or decoction of the *Swamp walnut*, of which he gave several times a day a wine-glassful as an internal remedy for three days, after which it was used as a local external remedy, or a wash, for three days. The medicine, if used in this way, using it alternately every three days as an internal and external remedy, and continuing it so for eighteen days, would positively cure the worst kind of Salt Rheum in that time. In this way he had cured time and again cases where the skin was cracked everywhere, but especially where it had a fold or crease, exuding a sticky, watery fluid from these cracks. Being unable to find the botanical name for Swamp walnut I applied to Messrs. Boericke & Tafel for information, who requested me to furnish them a branch with leaves. Through the kindness of my patient I was soon enabled to do so, when Messrs. Boericke & Tafel informed me that it was the *alternate leaved Cornel*, or, *Cornus alternifolia*, and offered to make a tincture of the shrub, which they did and have on hand at present.

An old school authority sums up the medical qualities of the *Cornus alternifolia* in the following concise way: Astringent, diaphoretic and febrifuge.

I think it would be well to prove the *Cornus alternifolia* in the manner Hahnemann taught us, and all remedies for Homœopathic use ought to be proved, and thus discover the true indications for its use in our practice.

The use of herbs and plants among the laity has given the medical profession in many instances the first hint of their usefulness in treating the sick, might not this be the case with the above?

Surely, if this can cure eczema, as the Long Island farmer claims it can, and do it in so short a time and in so sure and thorough a way, we ought to know it.

F. H. LUTZE, M. D.

Brooklyn, October 8, 1895.

TUMOR OF THE NECK CURED BY CALCAREA.

A. H. Tompkins, M. D., Jamaica Plain, Mass.

(Read before the Boston Homœopathic Medical Society.)

Mr. G. had been to the same hospital five times within nine years for the removal of tumors from the right side of his neck,

when he consulted me in March of 1892. He then had a growth as large as a hen's egg, partly beneath and partly posterior to the sterno-mastoid muscle. It had become painful more especially when exposed to cold winds, as his similar growths had been wont to do before. There was no marked tenderness to pressure, no indication of inflammation. It was not superficial in origin, as evidenced by the fact that it was only by pushing the fingers deeply down beside the tumor that its considerable size could be made out. He had been told at the hospital that pus was never found; that on two occasions out of the five the surgery had been quite critical for him, and, finally, that such growths were not amenable to medication. He had, therefore, every prospect apparently of coming under the surgeon's knife for the sixth time for the same affection at the end of a few weeks or months at most.

As one or two other physicians had agreed with the hospital authorities that medicine could do nothing for such growths the patient had sought no help in that direction until within the last year before he came to me, when he had put himself for six or eight months under the care of a "staff" of eclectic physicians who were tarrying for a time in Boston. This treatment was a generous one, and large quantities of medicine were swallowed, and many lotions and salves were applied under it, and not without good effect, it must be said, for the tumor was so far arrested in its growth, if not actually made smaller, that the patient took hope from it that medicine might not prove so futile as he had been given to suppose. The "staff" of eclectic physicians having removed their offices from the city for a time, however, their treatment was suspended, and now after a lapse of two or three months the tumor was decidedly increasing both in size and painfulness. Perhaps this relapse caused the new-found hope to wane; at any rate I was requested not to undertake the case unless I could hold out a good prospect of cure. Under this condition the case was not accepted on the spot (at another patient's house), but an appointment was made for an office consultation on the following day. At that consultation, on March 17, 1892, the case was accepted, and a very few night-and-morning doses of *Calcareo* were prescribed. On May 2d one dose of *Calcareo* was given, when my notes say "no trouble at all with neck now," and on June 10th two doses, and on the latter date my notes say: "Only one little hard kernel about the size of a pecannut low down on right side of neck. Everything

else is gone. No other medicine had been used." No change was made in any other circumstance of the patient's life. The patient reported that pain disappeared very soon after beginning treatment, and the tumor diminished in size steadily till it was practically gone. Eighteen months later there were "signs of trouble in his neck," according to the record, and he again received *Calcareea* night and morning for three days, and the signs rapidly disappeared.

But up to this point, what evidence has been given that *Calcareea* caused the tumor to disappear? Nothing conclusive, I think; but inasmuch as it might be worth something to us to know that the peril to life, the suffering, the loss of time involved in such surgical operations as this man had undergone could be averted by a few doses of medicine, you may bear with me while I recount some additional facts of the case wherein are to be found something very like the desired evidence.

Some one has said wisely that the indications for a remedy should, like a stool, have at least three legs to stand upon. As, for instance, that the nature of the troubles prescribed for, their location and their conditions of aggravation and amelioration, should find their counterparts in the provings of the remedy. It is somewhat so with evidence that the disappearance of disease was really the work of the medicine prescribed, though it may be questioned whether such evidence may not get along with two legs to stand upon, as a man does, instead of three. In such case the first leg would be the fact of recovery where nature alone could not reasonably have been suspected of working it, and the other leg the fact that according to the law of similars a curative effect was logically due in the case from the remedy prescribed. I will ask you to consider with me whether in this case a third leg may not be constituted out of the coincident removal of another of the patient's troubles which was not directly related to the tumor.

I will now give briefly the symptoms of the patient other than the tumor itself, and make you the judge whether according to the law, or rule, as you please, upon which our school of medicine is founded, curative effects were not logically due from *Calcareea*. Certainly nothing but that conviction on my part enabled me to accept the case on the conditions required by the patient.

Mr. G. is a short, thick-set, fleshy, light-complexioned man, decidedly of the leuco-phlegmatic temperament, who, according

to my notes of his case, "has sweaty hands and feet, requires three changes of hose per week on account of the perspiration; sweats easily and freely when at work, is a hearty eater and inclines to have at least two free stools per day. While having plenty of color and enjoying very good general health, he is very sensitive to cold especially about the neck, which he must keep well protected from the weather." So much for constitutional features, which I think you will agree with me, find a better counterpart in *Calcarev* than in any other remedy known to us.

Now next to the tumor Mr. G. complained most of an habitual heartburn, or burning in the centre of the chest, usually only after supper and from that time till he could go to bed at 1 A. M., aggravated by bending forward, relieved when he could eructate, almost instantly relieved by lying on his back. We have, to be sure, no such precise conditions of heartburn as this in our provings of *Calcarev*, and may, therefore, learn of one set of possible conditions from this case; but heartburn is a prominent symptom of this remedy, and the remedy is emphasized in our repertories for heartburn.

Now this heartburn was reported as worse, if anything, thirteen days after beginning on *Calcarev*, but fifteen days later still it was reported as gone; and he had resumed the eating of grape preserve at supper which he had been obliged to forego when his heartburn was particularly bad. Yet it was slight recurrences of this trouble which gave occasion for the first and second repetitions of *Calcarev*. It is now nearly two years since heartburn has given him more than a hint of its presence, and even this has been very rarely experienced. How will this answer for a third leg of the stool?

It only remains to be said that a habit of sick headache had to be dealt with when the tumor and heartburn had been cured; but for this *Belladonna* proved a sufficient remedy, which is in its way another confirmation of the *Calcarev* constitution of the patient, since much experience in our school has shown the complementary relation of *Calcarev* and *Belladonna*.

Doubtless most of us have often had occasion to grieve that our cures have not seemed so wonderful to the subjects of them as to ourselves. In this case the patient was duly impressed, however, thanks perhaps to the hardships which he had previously endured, and his wife tells me that the wonder grows, if anything, in her husband's mind with the lapse of time, and

they both claim that there has been a general elevation of the plane of health and vigor in his case.

It is now more than three years since the disappearance of the tumor, and there is no sign of recurrence.

THE HAHNEMANN ASSOCIATION.

The Hahnemann Association will hold its second annual banquet in New York, Thursday, November 21. Those who were present last year remember the occasion with so much pleasure that the coming event needs no special introduction.

It may be of interest to others to know the object of this association, and perchance to influence them to affiliate with this, the parent organization, whose success was so instantaneous that it led to the organization of a number of similar ones throughout the country. Briefly, it is proposed to popularize Homœopathy with the laity, and to yearly honor its founder, Hahnemann, and to bring together in a social way all its exponents, their wives and their patients.

Every believer in Homœopathy, professional and non-professional, is invited to join.

Applications for membership, with initiation fee enclosed, and orders for banquet tickets should be addressed to Dr. A. G. Warner, treasurer, 194 Schermerhorn street, Brooklyn. The initiation fee is \$1, and there are no dues.

The officers are: Drs. J. Lester Keep, Martin Deschere, J. B. Gregg Custis, etc.

STORY OF THE PROVERS WHO ASSISTED HAHNEMANN.

By Thomas Lindsley Bradford, M. D.

ERNST FERDINAND RUECKERT.

Dr. Rueckert's brother thus writes of him : * I have been requested by several parties to write something to serve as a memorial of my deceased brother, who left this world six years ago; and since no one else has been found who would wreath with laurels the grave of this roving wanderer I undertake this solemn duty. Nevertheless I do this with a heavy heart, well

* *All. hom. Zeitung.*, Vol. xxxviii., p. 81. (Nov. 26, 1849).

convinced that the biography of a physician who has become well known, even to the more general public through his numerous writings, would have been more fittingly composed by the pen of a person not related to him, than by his own younger brother.

I must, therefore, in advance, ask the indulgence of the reader if in some things I may not appear sufficiently impartial, or too diffuse, and if I mention also the failings of my brother as a man, contrasting these with his goodness :

Our eldest brother, Ernst Ferdinand Rueckert, was born in Grossshennersdorf, near Herrnhut, March 3, 1795; he was instructed there till the year 1807 by my father himself, who was pastor. He learned very easily, so that he also made good progress in the high school at Niesky, near Goerlitz, where he remained until the year 1812. He had an especial facility for learning the languages and quickly advanced in his classes.

His intention was originally to study theology: he therefore entered, on the 24th of June, 1812, into the school of the gymnasium at Zittau, and received on the 27th of September of the same year, in his eighteenth year, the *Testimonium maturitatis*, and went to the University of Leipsic. Now the time had come when the leading traits of his character could show themselves freely and openly. His fellow-students who are still alive may testify whether I judge rightly of my brother when I say that he was extremely good-natured, very cheerful in company, and entertaining by his witty notions. Whatever he undertook he seized with a mighty zeal, aye, he was enthusiastic and depicted its consequences in the future in the brightest colors; but he was lacking in endurance and firmness, therefore he could easily be turned away again from his first intentions and be led off to others. This was his misfortune and it followed him through life. In good company and under a good leader he was a most solid man, while giddy company easily led him astray. The beginning of his unsteady life was made already in 1813, when he renounced his first intention of studying theology and changed to medicine. After the great battle of Leipsic he effected the change and continued his studies until 1816.

He was then already acquainted with Homœopathy, and he was one of the first of Hahnemann's pupils, together with Dr. Hartmann and Dr. Hornburg. We find his name as prover of several remedies: *Dulcamara*, *Aconite*, *Rheum*, *Rhus*, *Bryonia*, *Hellebore*, *Digitalis*. From 1816 to 1817 he visited the Medico-

Chirurgical Academy in Dresden. He received his doctor's diploma at Jena in 1819, and had his *Colloquium* upon the same year in Leipsic, as he had chosen Grimma for his resting place in order to begin there his practical career. But his unsteady spirit drove him away from there in a short time. He was lacking in the firmness necessary to overcome the first obstacles which every practical physician must meet when he commences, and already the following year he thought that he recognized in the town of Mutchen the goal of his sanguine hope, and he exchanged this little town again in 1819 for Bernstadt in the Upper Lausitz. He soon found more to do here than in the two former places, and several years after he had left Bernstadt I still heard families, where he had made successful cures, speak of him gratefully.

But misfortune here also followed the poor man. Soon after his arrival another physician, an allopath, settled in the little town, who, although not hostile to him, nevertheless by his winning personality soon gained the whole practice.

Highly discouraged by this the vacillating man thought to cheer himself by company, and then lost the proper position, so that he found it best to change to Loebau. But even here he was not yet destined to find a lasting position, since his relations with his colleagues made his rising in practice difficult, so that he determined to give up the medical career entirely and to endeavor to make his living as a teacher.

He soon succeeded in finding a position as a tutor in a noble family in Livonia, and he cheerfully left his native land in 1822 and arrived, after a stormy voyage, without having become seasick, in Riga. The happiest time of his life he now spent in Livonia, until the year 1829. Living part of the time as a tutor in various families, the other part in educational institutions, he was esteemed and loved by all.

The study of the languages, which had always been so easy to him, was revived and cultivated now in his leisure hours, and he had soon advanced enough to be able to translate historical works from Russian into German.

But not valuing his success sufficiently he desired to see again his native land, and he arrived in Hahnemann's house in Coethen soon after his jubilee celebration of August, 1829, and was received kindly by Hahnemann and worked for him till Easter, 1830. Introduced anew to the art by the master, my brother began practicing as a physician a second time, first in

Bautzen, where he remained a year; then he moved to Camenz, where he remained several years; lastly he found his asylum at Königsbrück under the particular protection of the Count von Hohenthal.

His domestic life was also rich in experience during these last years, as he married twice, having lost his first wife by death. He bore patiently every severe affliction, owing partly to his cheerful temperament which enabled him soon again to see the rays of the sun even through the thickest fog, and partly owing to his firm faith in Christ of which the germ had been laid even in his tender youth. Finally as a weary wanderer after a journey full of thorns and thistles, after a lung disease had first undermined his strong health, he fell asleep in the eternal rest in the year 1843 at the age of forty-eight years.

With great zeal, industry and perseverance he made use of all his leisure time during his last twelve years to be active for Homœopathy, and especially to facilitate as far as possible the difficult task of finding the proper remedy in any given case. The most excellent of his works which even at this day has its classic value, and will retain it, is the "Systematic Presentation of all the Homœopathic Medicines known to this Time," a work which in a short time (1835) had its second edition, and is even at this day found in the hands of innumerable physicians, and will continue to be so, for the symptoms are there given just as they are found in the provings. Would that such names as *Atriplex** could not be found in it, as they remind us of an author who by his fabrications will remain a disgrace in the history of Homœopathy.

A second, larger work, which also in token of its usefulness rose to a second edition, is "A Brief Survey of the Effects of Homœopathic Medicines on the Human Body," in which also, unfortunately, some sham remedies are found; this appeared in 1834.

The third and last larger work is: "Sketch of a Future Special Homœopathic Therapy," 1837, a work which in its time filled a gap not unimportant in Homœopathic literature, although its tendency was questioned by Griesselich, who has also departed to his eternal home.

Many an observation might indeed yet be struck out in this work, and in my opinion, at least, the effect of the remedies

* By *Atriplex* the writer means Fickel a rascal of whom mention will be made further on. [ED.]

might be given a little more in detail, even though briefly. During the twelve years that have passed since the appearance of the work the published cures wrought by means of the various remedies have been greatly augmented, and I myself have for some time been occupied in collating them and at the request of several of my colleagues, as has been stated in the previous volume of the *Allgemeine Zeitung*, I shall as a trial make a beginning in printing some parts of this work arranged in a somewhat different order.

The fourth, smaller work from his pen is: "The Effects of Homœopathic Medicines under Certain Conditions represented in a Tabular Manner," 1833. The fifth work is "Cutaneous Diseases." The sixth work is a translation from the English of Jacob James' "Practical Experiences in the Domain of Homœopathy," 1842. The seventh, "Knowledge and Cure of the most Important Diseases of the Horse, etc., Description of the Diseases of Cattle, Sheep, Hogs, Goats and Dogs." The eighth, "Description of the most frequent Herbs and Ferns, both the wild and the cultivated, so also of some official Mosses and Mushrooms of Saxony, etc., with Statement of their injurious Properties."

Without giving any further judgment as to these works, we may see from them that he was willing to do everything possible to assist in the development of our art and science. The best reward of these labors is when many a patient through the easier finding of the fitting remedy has found relief from his sufferings.

TH. J. RUECKERT,
Practising Physician in Herrnhut.

Hartmann says of him: * Rueckert was an original man, but unsteady in all he undertook, wavering, with no perseverance, and yet very well informed; he rather skimmed over the surface of the sciences, and never attained any profound knowledge of them because he the more easily overcame the difficulties which the entrance to any science presents than the slighter ones that he met in his further progress; add to this the fluctuation which prevailed throughout his whole life, and which he might earlier in life have gotten rid of, perhaps, under the guidance of a more serious and steadfast nature, and we can understand his extensive but superficial knowledge.

* *N. W. Jour. Hom.*, Vol. iv., p. 188. *Med. Couns.*, Vol. xi., p. 242. Kleinert's "Geschichte der Homœopathie."

But notwithstanding all this inconstancy, one could not but love him for his captivating manner, his sparkling wit, his courteousness. On the other hand, it was difficult to gain his friendship, since he was ever distrustful of others, from which distrust he never could free himself, even when he was fully convinced of its unreasonableness. He was a kind of necromancer; he interested himself much in supernatural things and would sit by the hour together staring at a speck, and quite forgetting everything about him; hence he preferred to be alone and hired a summer house to which he might resort for solitude. Here I have often seen him, for my windows were directly opposite to his residence and I often worked at night, walking backwards and forwards, in summer and winter, by day and by night, with huge strides: frequently he delivered philosophic discourses from his window to the cats, who paid their respects to him in his garden.

Rueckert was quick at seizing anything, but the ties of order and regularity sat heavily upon him; he soon flagged in his good resolutions, and carelessly threw away what he had just undertaken, to seek some new phantom. It was thus with his drug provings: the *Materia Medica Pura* owes him but little, and the symptoms that are marked—Rueckert—were not reported by him, but by a namesake of whom my recollection is but indistinct.

Lorbacher says:* Ernst F. Rueckert, whom Hartmann confounds with a younger brother, co-operated in proving medicines under Hahnemann's direction. He published some original works on Homœopathy, and along with Lux may be considered the founder of Homœopathic veterinary medicine.

WRITINGS.

Systematic Presentation of all Homœopathic Medicines known hitherto, including the Antipsorics in their pure Effects on the Healthy Human Body. 3 Vols. Leipsic: L. Schumann. 1831-33. 2d Edition, 2 Vols. Leipsic. 1835.

Brief Survey of the Effects of Homœopathic Medicines on the Healthy Human Body, with Hints as to their use in various Forms of Disease. 2 Vols. Leipsic: Schumann. 1831-32. 2d edition. Leipsic: Melzer 1834-35.

The effects of Homœopathic Medicines under certain conditions, presented in Tabular Form. Leipsic. Melzer. 1833.

Cutaneous Diseases, or Systematic Presentation of the various Eruptions. Elaborated in the Homœopathic Manner. Leipsic: Melzer. 1833.

* *Brit. Jour. Hom.*, Vol. xxxii., p. 457.

Principles of a Future Special Homœopathic Therapie. Leipsic: Andra. 1837. With new title. Leipsic: Hunger. 1841. Trans. by Hempel. New York: Radde. 1846.

Diagnosis and Care of the Most Important Diseases of the Horse, elaborated according to Homœopathic Principles, for Agriculturists. Meissen: Klinkicht. 1839.

Description of the Diseases of Cattle, Sheep, Swine, Goats, and Dogs, with Directions as to their Cure according to Allopathic and Homœopathic Principles. For Agriculturists. Leipsic: Friedlein and Hirsch. 1841.

LEOPOLD E. RUECKERT.

The only data occurs in the German Gazette: On April 9, 1871, died at Jena, in his seventy-fourth year, the professor of theology, Leopold E. Rueckert, brother of Dr. Theodore J. Ruckert.*

FRIEDRICH JACOB RUMMEL.

Dr. Schneider thus writes of this eminent physician: Friedrich Jacob Rummel† was born April 26th, 1793, in Lauchstædt, where his father was merchant and deputy postmaster. He received his preparatory training for the university in the Monastery school at Rossleben and after its completion in 1812 he went to the university to study medicine. After having pursued these studies for one year at Halle and three-fourths of a year at Leipsic, he followed (after the battle of Leipsic) the call to the Saxon people to take part in the war for the liberation of the German fatherland, and he entered among the volunteers, but later on, as there was a lack of military surgeons, he was employed on account of his qualifications, as company-surgeon in another detachment of troops.

After the peace at Paris he left the military service, and to complete his academic studies he went to Gœttingen. He wrote a dissertation *De corneotide*, and was promoted in 1815 to Doctor of Medicine and Surgery.

He first practised a year in Lauchstædt, then went to Berlin to undergo the State examination. Having received his diploma as physician and obstetrician he settled in 1818 in the city of Merseburg. He soon found here ample occupation, but was after a time compelled to give up his obstetrical practice which

* *Allg. Hom. Zeitung*, Vol. lxxxii., p. 128.

† *Allg. Hom. Zeitung*, Vol. xlix., p. 9.

he had successfully carried on; this was because he was so much affected by attending a severe delivery that he was prostrated for several days after it.

Convincing facts changed our friend Rummel in the year 1825 from an opponent into a friend of Homœopathy, and he at once devoted himself to it with the warmth and zeal of a man true to his calling and free from prejudice, seeking but for light and truth.

As early as 1826 he sent an article to Hufeland's Journal: "Observations concerning Hahnemann's system." (5 pt., pp. 43-74.). Soon after this he wrote a larger work which is more generally known: "Homœopathy with its Lights and Shadows." During this literary activity he also more and more perfected himself in the practice of Homœopathy, for which he gained an ever increasing number of adherents.

Through the intervention of Stapf he now came into closer relations with the founder of Homœopathy and became a member of the small circle of younger physicians who with Hahnemann, and under his direction, formed the first Prover's Union, to which we all owe the pure *Materia Medica*, so replete with blessings to all futurity.

In the year 1832 he in conjunction with Gross and Hartmann founded the *Allgemeine homœopathische Zeitung*, and furnished very many excellent articles for it. In June, 1833, he followed a call to Magdeburg where he was assailed and frequently maligned and persecuted by the numerous enemies of Homœopathy, for his opponent there, in company with Alexander Simon, of Hamburg, still dared to present the leading stars of the new school as fools, and to accuse them of the sin of omission, a medical criminal misdemeanor, when they in cases of disease which became fatal had not used the prescriptions of the school of medicine recognized by the State. Nevertheless, Rummel here continued to gain more and more friends and adherents to Homœopathy, and also vindication from the assaults of his opponents, and finally compelled even these to respect him. Besides he introduced several young men to Homœopathy. In the year 1834 in conjunction with Muhlenbein he founded the North German Provincial Homœopathic Union.

In the years 1836 and 1845 he was president of the Central Society, and always exercised a beneficent influence through his friendly fellowship, his practical tact and mediating toleration.

Besides this he was restlessly at work to secure for Homœopathy the recognition of the State, and he contributed with equal zeal in the years 1842 and 1843 to secure for Homœopathic physicians in Prussia the right of dispensing their own Homœopathic medicines under milder legal restrictions. In consequence he was chosen, in Magdeburg, a member of the committee for examining Homœopathic physicians who desired to acquire the authority to dispense their own medicines. His honest efforts were also recognized on the part of the State, as Rummel was appointed, in 1846, as Royal Sanitary Counselor.

To his energetic efforts the monument of Hahnemann, solemnly unveiled at Leipsic in 1851, owes its existence, and the last act showing his love for the common good was the foundation, out of the surplus of the monies collected for the monument, of a fund, the interest of which is to be used for premiums for the prize essays on Pharmacodynamics, which the Central Society for Homœopathy may from time to time designate.

In his private life Rummel always showed a cheerful, kindly, lovable character. As domestic physician he was a sympathizing friend, to his patients a careful conscientious physician, besides he was a highly honored colleague, a faithful husband and a loving father.

Only one distraction and recreation from the labors of his calling he loved exceedingly—the enjoyment of the beauties of nature. He was therefore accustomed to make a journey every year. The strokes of fate he bore with manly resignation. Even the total deafness from which he suffered, from the year 1846 till his death, was unable to disturb the kindliness and cheerfulness of his spirit. Though it compelled him to relinquish by far the greater part of his practice, and to concentrate his active mind more upon himself.

In the year 1832 the cholera in Merseburg fell in all its malignancy almost the first upon his own family, so that he lost from it his wife and a daughter, and was himself brought to death's door by the same disease; but he recovered with the assistance of Dr. Heine, who was paying him a visit.

In the fall of 1846 he was seized with a typhus fever with rheumatic troubles, which again brought him near the grave and completed the loss of his hearing.

On the 28th of September at last his final illness occurred. At his return from business calls in the forenoon, after having been previously quite well, he was suddenly seized with weakness and

fatigue, and in the evening he frequently felt a slight chill. At night there came vivid dreams and dryness of the tongue. On the 29th there was a more decided feeling of illness with inclination to diarrhœa and thickly coated tongue. Still by using a carriage he made some professional calls. But from the 30th of September the patient remained in his room and prescribed for himself what seemed suitable.* It was not before October 4th that I was requested to visit him. This was the first time since I had been located here with him, for he had only suffered in 1846 a few times from a swollen cheek owing to toothache.

I found a violent typhus gastric fever (tongue coated thickly and tenaciously, with tendency to small diarrhœic stools, lassitude, languor, irritability, decrepitude, restless nights, with lively talking in his sleep, and at night so great dryness of the tongue that the patient compared it to an old highway of stones on which not a drop of water could stay, with normal pulse. During the day more drowsiness, but otherwise the same state. On the 6th of October the patient had risen as usual in the morning and had taken a cup of tea with toast, when he was suddenly (about seven o'clock) seized with violent colic and with two profuse, very fetid, diarrhœic stools and a violent chill which drove him to bed. As soon as I called I gave him *Veratrum*. The pains in the abdomen were soon relieved, nor did the diarrhœa recur soon, and the chill was followed by heat, which soon brought quite a copious sweat. The pulse now became feverish and was at times intermittent (which was also said to have been the case at the beginning of the illness). The patient who, however, seemed to retain his cheerfulness, at times talked deliriously and once there was singultus.

Under these circumstances I invited my colleague Rath, who had also visited the patient, to visit him with me. The disease had enormously developed up to October 9th, when also Fielitz, from Brunswick, had hastened to a consultation. The use of *Arsenicum* which had followed upon *Veratrum* was of no avail in checking the disease; at six P. M. the traces of incipient paralysis of the lungs and skin were unmistakably present. The stupefaction of the brain had in the meantime reached so high a degree that the patient never uttered any foreboding about his condition, and passed away in the night between the 9th and 10th of October at 2:30 A. M., without suffering. Numberless

* A foot note states that the Drs. Hartmann and Haubold were also with him.

are the tears of love, friendship and gratefulness that are shed for this noble man.

H. G. SCHNEIDER.

Dr. Gustav Puhmann in his History of Homœopathy in Germany thus mentions Rummel:* Dr. Frederick Jacob Rummel was born April 26, 1793, and died October 10, 1854. In 1826, after seven years of Allopathic practice, he adopted Homœopathy and joined the Provers' Society. In 1833, while co editor of the *Allgemeine hom. Zeitung*, he removed to Magdeburg, and there worked unceasingly for the recognition of Homœopathy by the government. He was particularly assisted in 1842 and 1843 by the fact that the Prussian physicians were under milder legal restrictions and were allowed to dispense Homœopathic medicines. By his efforts Hahnemann's monument was erected at Leipsic in 1851, and he was also the originator of the "Hahnemann Fund" which is controlled by the Central Society, and out of which prizes are awarded for the best essays on certain subjects prepared by the members of the society.

Rapou says:† In 1824 Rummel practised the old system of medicine at Merseberg, near Stapf, and such of his patients as were not cured went to seek aid from the celebrated Homœopathist of Naumburg, from whom many obtained the aid that the old method had failed to give. Rummel, excellent man, of great honesty, of true heart and lofty intellect, waited upon Stapf to study his system of medication; he only yielded step by step to the clinical results, and in his legitimate doubt evidenced the same tenacity that had characterized the blind resistance of others. I cannot refrain from quoting here that which he wrote a little time after he commenced to practice the new system. To physicians who, like him, abandoned their ordinary methods of practice, it will be of interest: "It has been two years since Homœopathy claimed my attention, a very short time to surmount the difficulties it offers to beginners, time sufficient, nevertheless, to comprehend its principles and to understand its spirit. Very often I was surprised by my remarkable success in the treatment of old chronic cases; often I could only relieve or palliate them; sometimes also I was obliged to return to Allopathic measures lest my patients grow weary of my futile attempts. This last event satisfied me that I knew but little of

* Trans. "World's Hom. Convention," Vol. ii., p. 28.

† "Historie de la doctrine medical homœopathique," Vol. ii., p.p. 405, 419, 421.

the resources of my new method. I became convinced that this system of healing was more direct and more speedy than Allopathy; still there are, I thought, a great class of maladies, the nervous for example, that do not yield to its powers." * * * Rummel gives then the various diseases where he found Homœopathy most useful.

Rummel, however, soon became an active and faithful follower of Hahnemann. Rapou continues: Ten years after his entrance into Homœopathy, Rummel was called to Magdeburg, where he settled; there an action was brought against him for dispensing remedies, a suit that caused some comment. He defended with energy that which he considered the right of all Homœopaths, and a condition of the existence of our school. He gained the suit and was happy to furnish so favorable a precedent to those of his confreres who were less active in taking the matter before the courts. Rummel was now less intimate with Stapf, his ancient master, but had for some time been associated with Gross and Hartmann in founding a weekly Homœopathic journal, the *Allgemeine homœopathische Zeitung*, a journal devoted to facts and shunning polemics so perpetually in our school in the last dozen years.

Rummel, who is of a very conciliating temperament, and who readily yields accessory points to those who accept fundamental truths, was, at the time of my second journey, the object of a particular proselytism; he had been induced by argument to make concessions that his experience did not warrant. The partisans of exact Homœopathy already mourned the loss of one of their best defenders.

Rummel wrote letter after letter in the *Allgemeine Zeitung* in response to Greisselich, where he clearly expressed his opinions in regard to the new method, and declined all communication with the partisans of the pretended specific reform.

Rummel employed the high dilutions. On my last journey I visited him at Magdeburg. I found him suffering with deafness, but he understood the aim of my visit and kept me and talked to me for three hours on practical subjects of interest. He was at this time considered in Germany to be the representative of sound Homœopathic doctrine. He is of the number of homœopathic physicians who have examined dilutions under the microscope and found visible molecules of the diluted substance. His conres doubting this observation he bade me send to Kallenbach for examination two preparations of the 200, one of *Arsenic*,

the other of *Platina*. Arrived at Berlin I took them to the microscopists.

Rapou then gives a very interesting account of these early microscopic trials of Homœopathic dilutions.

Rummel as is well known was one of the first to rush into the lists and to deny most emphatically that Hahnemann considered the "Organon" the sum total of all the medical sciences and declared superfluous all other studies. He maintained that a thorough and intimate knowledge of all the various branches and studies taught by the Allopaths was absolutely necessary to fit a man for the successful practice of Homœopathy. "Far removed," he said, "from waging destructive warfare upon science, Homœopathy is bound to acknowledge nothing but true science, and to free medicine from the purely conjectural. We do not propose to ignore the experience of the Allopaths when they stand the test of reliable experience, but we want to throw light upon their explanations and hypotheses; we do not propose to deny the usefulness of their method of cure in any case, but we are bound to show where physicians interfered with nature instead of studying it after the manner of Hippocrates; where they rudely suppressed the curative powers of nature, while prating constantly about guiding these efforts; where they cured symptomatically, and yet talked of methods suggested by the first cause; we propose to show them how little common sense is hidden beneath their high sounding phrases; how true common sense here is a recognition of the limit set us, enabling us to recognize the laws, but not the primary causes, of vital phenomena."*

In an article published in the *British Journal of Homœopathy* (Vol. xxxiii., p. 608) the author thus speaks of Rummel: Rummel of Magdeburg, the first of the converts to Homœopathy. Brilliantly gifted with suitable acquirements, penetrated by genuine humanity, and consequent gentleness and kindness, he had soon recognized the importance and significance of Hahnemann's doctrine, and at once his life was devoted to the perfecting, defending and extension of it. As a watchful warrior he stood unwearied at his post to repel the attacks of the enemy with sharp weapons, and never allowed himself to swerve in the strife from the various personal attacks and annoyance, which he had to endure. It is especially due to him that Homœopathy found legitimate recognition and protection in Prussia. He

* "Kleinpert," p. 150. *Med. Couns.*, Vol. xi., p. 307.

took as lively a part in all controversial questions within as he did in the battle without, and sought to decide them.

One of the most interesting passages in this category is his discussion with one who was in all respects his equal, and who represented the South German party, viz: Greisselich of Carlsruhe, when he sought to shake the foundations of Homœopathy. The course of this controversy carried on with so much spirit and good sense will give great pleasure to every reader, and it were to be wished that it should serve as a model in all scientific disputes. His work, "The Bright and Dark Sides of Homœopathy," is of special importance for the emancipation of Homœopathy from the person of Hahnemann, as well as a series of articles in the *Archiv* and the *Allg. hom. Zeitung*, which he, in conjunction with Hartmann and Gross, established, and which he continued to edit till his death.

The last part of his life was devoted to exertion for the purpose of giving a visible expression to the general respect for the Master by erecting a monument. With unwearied zeal he set on foot subscriptions for this purpose, and had the great happiness during the evening of his life (when he was afflicted with total deafness) to attend the unveiling of this monument. He obtained a lasting souvenir in Homœopathy by establishing out of the surplus of the subscriptions a prize for the physiological proving of a medicine.

In the *Allgemeine hom. Zeitung* (Vol. xlvi., p. 161) an obituary notice appears on the first page of the number. Died of typhus fever in the early morning hours of October 10, 1854, Dr. C. Rummel, of Magdeburg, the first anniversary of the day on which his friend and fellow-editor, Dr. Hartmann, died.

WRITINGS.

Remarks concerning the Hahnemannian System. (Hufeland's Journal, 1820.)

Cure of Cholera. Merseburg. Nulandt. 1831.

Homœopathy viewed in its Lights and Shadows. Leipzig: Reclam. 1826.

Review of the History of Homœopathy in the Last Decennium, with a Biography of Muhlenbein. Leipzig: Schumann. 1839-40.

Necessity for the Equalization of Homœopathy with the older Medical School. A petition of several Homœopathic physicians of Prussia to the Ministry of Education, etc. For consideration in the intended medical reform. Magdeburg: Heinrichshofen. 1848. (Reprint from *Allg. hom. Zeitung*.)

Concerning the Festival at the Unveiling of Hahnemann's Monument. Magdeburg: Baensch. 1851.

Co-editor *Allgemeine homœopathische Zeitung*. 1832-53.

CHRISTIAN AUGUST SCHOENICKE.

“Died May 29, 1865, Christian August Schoenicke in Bautzen, at the age of sixty-nine years.* He was a true follower of Homœopathy and for many years a member of the Central Society.” This is all the record that can be found in the journals.

CASES ILLUSTRATIVE OF THE APPLICATION OF
THE RULE SIMILIA SIMILIBUS CURENTUR.

NUX VOM., KALI-CARB.

By D. Ridpath, M. D., C. M.

From the Homœopathic World.

CASE I. (Dec. 28, 1887). Male, *æt.* 63. Complains of *severe* dry cough, which occurs very frequently; aggravated by movement, by going from a warm room to a cold one, and after going to bed at night until he gets warm. Tickling in the throat as from a feather. Anorexia.

About twelve years since was confined to bed with what he states his medical attendant called bronchitis. Well nourished.

Selection of Remedy.

Dry cough, aggravated by movement.—*Arn., Ars., Bell., Bry., Calc. c., Carb. v., Dros., Ferr., Ipec., Lach., Lyc., Merc., Natr. m., Nux v., Phosp., Sepia., Sil., Spong., Stan., Squi.*

Tickling in the throat.—*Dros., Nux v.*

Sore pain in epigastrium on coughing.—*Dros., Nux v.*

Cold air aggravates.—*Nux v.*

He was therefore given *Nux vom.* 3, two drops three times a day.

On December 31st his wife came to see me, and reported that her husband was so much better that he had gone to work, and as for the cough at night, that had entirely ceased, and there was only a slight cough in the morning. After continuing to take the same drug for another three days he reported himself as being quite well.

CASE II. (April 27, 1892). Male, *æt.* 22. Grocer. Complained of sticking pain in lower part of left chest below nipple, worse after getting warm in bed. Wakes every night at 3 A. M. with a severe cough, which troubles for the remainder of the

* *Allg. hom. Zeit.*, Vol. lxx., p. 192.

night. Tongue coated, swelling of cervical glands, warts on body; has been getting thinner lately. Expectoration viscid. Cannot lift a weight from the ground without severe distress from the sticking pain in the chest. Great weakness. Fat disagrees. The cough has lasted about two months.

Selection of Remedy.

Cough at 3 A. M.—*Amm. c., Bapt., Cupr., Kali carb., Mag. c., Mur. ac., Nitrum.*

Tickling in the throat excites or aggravates the cough.—*Amm. c., Bapt., Kali c., Mag. c.*

Sticking pain left lower chest.—*Amm. c., Kali carb., Magn. carb.*

Worse on becoming warm in bed.—*Kali carb.*

Kali carb. also has swelling of cervical glands, fat food disagrees, warts, emaciation and expectoration viscid.

I therefore gave *Kali carb.* 6, two drops three times a day.

April 29th, reported to me that the cough was now entirely gone, and that he sleeps all through the night without being disturbed.

I frequently met this patient afterwards, and am able to state that the cure was permanent.

CASE III. (Jan. 24, 1893). Female, *æt.* 23. Mill worker. Since 19th inst. has had a severe cough, which wakes her at 3 A. M. and continues for an hour or two. Expectoration purulent and tough. Wheezing respiration. Perspiration excessive with slight exercise. Sticking pain in chest. Dyspnoea. Starting during sleep. Cold feet.

Selection of Remedy.

Cough 3 A. M.—*Amm. c., Bapt., Cupr., Kali carb., Magn. carb., Mur. ac., Nitrum.*

Startings during sleep.—*Kali carb., Magn. c.*

Perspiration with slight exercise.—*Kali carb.*

Kali carb., has also wheezing respiration, purulent and tough (viscid) expectoration and cold feet.

I therefore selected this drug, and gave the patient one dose of *Kali carb.* 1m. (F. C.) and prescribed one powder of *Sacch. Lact.* to be taken three times a day.

On the 27th—three days later—the patient reported to me that on the night of the 24th she had slept all night without cough, but that the following two nights she had awoke at 3 A. M. with

a cough, which, however, was much less severe. The wheezing respiration is now gone, and there is no expectoration.

Altogether she feels much improved. I gave her another dose of *Kali carb.* 1m, and ordered her to continue to take the powders. I saw her in about a fortnight, when she told me that there had been no return of the cough, and that she was quite well.

COMMENTS.—(1) Cases II. and III. are very good illustrations of the curative powers obtained by the potentiation of a substance—*Carbonate of Potash*—which in the crude state is devoid of such medicinal powers.

As bearing on this subject, I quote here from the *Organon* of Hahnemann, par. 128, "The most recent experiments have taught that crude medicinal substances, if taken by an experimenter for the purpose of ascertaining their peculiar effects, will not disclose the same wealth of latent powers as when they are taken in a highly attenuated state, potentiated by means of trituration and succussion. Through this simple process the powers hidden and dormant, as it were, in the crude drug, are developed and called into activity in an incredible degree. In this way the medicinal powers even of substances hitherto considered as inert are most effectually developed by administering to the experimenter daily from four to six of the finest pellets of the thirtieth potentiated attenuation of one of these substances; the pellets having been previously moistened with a little water, should be taken on an empty stomach for several days."

(2) It has been objected by many that clinical symptoms are inadmissible in the selection of remedies for diseased conditions. Pathogenetic symptoms are those which are produced when drugs are given to healthy persons, the symptoms and conditions being carefully noted. Clinical symptoms are such as have not hitherto been noted as having occurred when drugs have been proved in the healthy, but which have been noted in sick persons, and which, during the exhibition of certain remedies for the other existing conditions, have been cured. These cured symptoms, when properly verified by repeated observations, are clinical symptoms. As bearing on this subject I quote par. 134 of *Organon*—"All noxious agents, and especially drugs, possess the property of producing a particular change in the health of the living organism. But not every symptom peculiar to one drug occurs in the same person, neither do all become manifest at once, nor during a single experiment. A prover first experi-

ences certain symptoms, and others during a second and a third trial. Other persons may perceive certain symptoms of another kind, while perhaps the fourth, eighth or tenth experimenter experiences several or many of the same symptoms which had been already perceived by the second, sixth or ninth person. Neither do these symptoms appear at the same hour."

The HOMŒOPATHIC RECORDER for July, 1895, p. 132, has a few remarks on this subject, and I quote one paragraph therefrom as expressing very well the views of many on this topic: "Not even Hahnemann himself claimed that all the symptoms of the drugs he proved had been elicited; and may it not be reasonably taken for granted that these well-established curative or clinical symptoms, that are not in the pathogenesis, are among these, and therefore properly belong to the drug?"

(3) With regard to the question of potency of dose, it will be noted that Cases II. and III. were similar as to their characteristic cough. In the former the drug was given in the sixth centesimal potency, while in the latter the one thousandth potency was administered. In each case cure was obtained. I cannot say what induced me to give the lower potency in the one case and the high in the other. All I shall say, however, is that, according to my observations, the more similar the symptoms, the higher may be the potency given. Also when patients can only be seen at rare intervals, the higher potencies may be more convenient.

8, Grange Crescent, Sunderland.

BEGINNING TO SEE.

Judging from the subjoined extracts from *The Medical Age* and *Provincial Medical Journal*, the old school doctors are beginning to open their eyes to a fact, clearly seen by intelligent laymen years ago, and to realize that the cry of "quack," "irregular," "charlatans," etc., applied to homœopaths, accomplishes nothing save rendering those who utter it ridiculous in the eyes of the public.

FOOD FOR THOUGHT.

Orthodox medicine for a half-century has sedulously ignored that wing of the profession known as homœopathic; and yet the fact remains that to this body of practitioners medicine owes many debts, not the least of which are palatable therapeutics, and the administration of remedies for their continuous effects.

Homœopathy has won many men of the highest standing to its ranks, and this truth cannot be downed by the cry of charlatan-ism. A natural query then arises as to whether more is hidden behind the title than appears on the surface. Is it possible Homœopathy embodies a natural law in therapeutics that is entirely ignored by us of the more orthodox branch?

The foregoing is suggested by the utterances of an "Old Correspondent" in the editorial columns of the *Provincial Medical Journal*—the editor of which, Doctor Thomas Dolan, is far removed from any possible charge of medical heresy—as follows:

The frequent opening of new homœopathic hospitals, with attached dispensaries, in the large towns, and the widespread popularity of these institutions, has caused me to reflect anew on the causes of such facts. The profession should desire to seek the true cause, apart from all professional jealousy or animosity, for we may be quite sure such facts have some true foundation in the order of nature. The first thought that arises is that the divine instinct, even of the most ignorant of mankind, reveals to them that disease must be orderly and subject to law. Secondly, the same divine instinct makes men feel that the most delicate and infinitesimal changes in the organism are great and potential in their results, being parts of universal laws. The first reflection noted raises the hope that disease conditions are preventable and curable; whilst the second convinces men that the means to this end may be infinitely small; thus mankind, when in an imperfect stage of education, is sure to embrace hypothetical systems of nature, and to put faith in remedies based on wide but purely fanciful hypotheses. At any rate, whether this statement of the position be intelligent and pat to the circumstances or not, there must be some kind of naturo-historic foundation and explanation of the widespread belief in Homœopathy. To make this clearer, may be cited the fact that the wildest speculations and experiments of the alchemists throughout many centuries were in absolute philosophic and scientific continuity with the splendid accuracy and results of modern chemistry and physics. Every great division of science has had its long-existing, pre-stage of obscure and fanciful hypotheses, and I think the homœopathic theories and practice will have a place in the historical development of our future and more scientific therapeutics. One is less surprised at the popularity of Homœopathy when he reflects that biology has only in this generation, even in our greatest universities, been held to be completely within the domain of accurate and searching science. Younger men, in the freedom of the present day, can in no sense realize the bitter opposition and obloquy which attached to logical scientific biology prior to the days of Darwin. It will, however, be many generations before even educated minds, not to refer to the masses of the people, are rightly suffused with a true philosophy of biology. And if biology be so inadequately grasped, *a fortiori* pathology must be vastly more a region of conjecture and wild hypotheses. Again, the labor of study and discipline of mind, essential in order to form right biological conceptions, is pressed out of the education of this country owing to the paramount necessities of commerce; hence it is but natural that a large portion of the semi-educated community should attach their faith to such hypotheses as Homœopathy

embraces, and which profess and present to the uninformed mind the captivating qualities of a completed system. It must further be remembered that orthodox medicine is still very much bound by the chains of the *names of diseases*. The public mind has thus been trained to view diseases as so many entities, and hence it is fitted to receive the impress of the homœopathic teaching—that each symptom and each disease has a specific existence and a specific remedy. But of late years the profession has been very much surprised and gratified to find the very widest and most just views of biology are being taught in schools to which every section of the community has access; and we are full of faith that ere long great light and knowledge will pervade the mind of the country, and great and just views will prevail on biology, and *a fortiori* on pathology and therapeutics.

“LOST MANHOOD.”—A correspondent of the *Eclectic Medical Gleaner*, Dr. A. L. Davidson, of Mount Pleasant, Utah, maintains that saw palmetto (*sabal serrulata*) “is the true vigor of life in pre-senility.” There is no country, he says, so prolific of sexual disorders, and loss of verile power, as Utah. A man could not satisfy a dozen vigorous women and retain his full powers, yet until recently that is what many were called upon to do. For this state of affairs *sabal ser.* is the remedy according to Dr. Davidson, who says: “I have had occasion to put it to the crucial test in very many stubborn cases during the last three years, in pre-senility, prostatic troubles, in wasting testicles, mammary glands, ovarian pains, etc., and with universal success.”

“One case I wish to cite. Early in May, 1895, there came a man to my office, aged 51, of robust frame, who complained of difficulty in voiding his urine, great tenderness in prostatic portion of urethra; his urine about one year ago began to pass with less force and finally with no force at all. He also noticed a weakening of verile power, seldom having had erections. His wife, a buxom blonde, several years his junior, had also noticed his inability to perform family duty as of yore. She would tantalize him and threaten to get a substitute. All this nearly drove him to desperation. He became morose, everything went wrong, he complained of feeling tired, he could not endure any kind of exercise, his mind was beclouded, and sleep forsook him, his penis was shrunken and cold, and in fact he was a badly played-out man.”

Fifteen drops of the remedy, four times a day, were prescribed. “At the end of the first week he complained of drawing pains in the spermatic cords, there was a freer flow of urine, he slept quite well and he felt better generally. At the end of the second

week his testicles (which were so much shrunken) were gradually increasing in size. His urine flowed with more force; the tenderness of urethra had nearly disappeared; he slept and rested perfectly, except occasionally when awakened by erections of his *gladiolus*."

"Continued the treatment two weeks longer, when he reported that he was once more a man. He said Sallie (his wife) no longer complained of his neglect of duty, but says his touch thrills her with the same satisfaction and delight that she felt in his embrace in their early wedded life. His testicles had taken on greater dimensions than normal, but were firm in texture. Warmth and youthful vigor had returned to him to such an extent that he very much regrets there is a law prohibiting a plurality of wives."

CURES BY THE TISSUE REMEDIES.—On the gravid uterus *Calcarea fluoride* has a wonderful effect in strengthening the elastic tissue and making parturition easy. I had a case in July last, third child, had a predisposition to hæmorrhage. She came under my care at the sixth month; I put her on a dose of *Calc. fluo.* 6x twice a day. She was very much adverse to taking anything, as the doctor she had had previously told her that medicines would injure the child. I insisted that as I was physician she must obey orders. So instead of the labor being a protracted 48-hour one and then the use of forceps, the third was only of four hours duration. I saw her last week; she said, "Doctor, I have not felt so well since I was a wife."

In April last, a little anæmic woman came to my office for treatment for what had been called tuberculous ulcers. She had been under treatment for them for eighteen months in Ohio. One was situated on the acetabulum, one on the ileo-femoral fold and one near the anus—not a very desirable locality for me or the patient. I found no deep sinuses, but a continuous oozing of yellowish pus and lymph. I tried divers remedies internal and external—one was thorough irrigation with hot water. Two weeks ago I discarded everything except the hot water, and put her on *Kali sulph.* and *Ferrum phos.* In two days there was a marked change and then came a standstill. I was very positive I had the right remedy in the *Kali sulph.*, as there was an oxygen carrier needed. I abandoned the *Ferrum phos.*, still found there was still a lack, tried *Silicea*; that was the salt needed. Results

have exceeded my most sanguine expectations. I would say one word further: Should this cause any of my confreres to use these remedies, *never use them with other remedies* at the same time, for you will surely meet with disappointment.—*Sarah J. Hogan, M. D., in Chicago Medical Times.*

VACCINATION CURED BY ECHINACEA.—Mr. —, aged about 45 years, in apparent good health, was vaccinated, and as the result of supposed impure virus a most unusual train of symptoms supervened. His vitality began to wane and he became so weak that he could not sit up. His hair came out, and a skin disease, pronounced by experts to be psoriasis, appeared upon his extremities first and afterwards upon his body. This advanced rapidly, his nails began to fall off, he lost flesh rapidly and a violent iritis of the left eye with ulceration of the cornea in the right, set in, and for this difficulty he was referred to Prof. Martin, president of the Chicago Ophthalmic College.

Dr. Martin gave him ten grains of the *iodide of potassium* three times daily and fed him freely on *phospho-albumen*. The loss of hair was stopped but no other favorable results obtained. The condition progressed rapidly toward an apparently fatal termination. At this juncture Dr. Martin asked this editor into his office to see the case with him. It looked as if there was no possible salvation for the patient. As a *dernier* resort we suggested *Echinacea* and syrup of the *oxide of iron*, the *phospho-albumen* to be continued.

For perhaps ten days there was no marked improvement. The patient was confined to his bed, being too greatly prostrated to sit up. The nails on both hands and feet came off entirely. The thick skin from the soles of his feet and palms of his hands came off, and he lost the sight of his left eye. But from the first few days after he was put upon the *Echinacea* there was no advancement in the disease, and finally a slow improvement set in. His appetite returned, his vitality increased, the right eye was healed, he began to gain flesh and at present he has almost entirely recovered.

Dr. Martin being called away he sent the patient back to his previous physician who continued the treatment with the addition of the *iodide of iron*, but both of the physicians attribute the marvellous results to the action of the *Echinacea*, of which about sixteen ounces were given, twenty drops at a dose. The

patient can now walk five miles without fatigue, eats well, sleeps well, rides his bicycle and enjoys as good health as ever in his life.—*Chicago Medical Times.*

“SHUCKS” AGAIN.—I see that Dr. Pruitt, in the *July Journal*, says that his attention was called, some five years ago, to the use of corn shucks as a remedy in chronic malaria. My attention was called to it almost thirty years ago, with this variation: I was directed to take three blades of corn, and make a tea, drink and be cured. My informant assured me that he had seen a number of cases of ague cured by this simple means, after several doctors had failed.

Now, we may laugh at some of these cures, but I have always believed that there was something in this one. I advised a trial in a few cases, but most persons would not make it—it was too common. And, as chronic ague disappeared from this part of Indiana some twenty-five years ago, we have no need for such remedies.

When I was a lad, fifty years ago, the farmer did not like to “cut cornfodder,” saying it always gave him ague to do so, and the hired hand would quit work rather than cut fodder. I well remember that men who did such work almost universally had *chills* by the second or third day at the furthest. Why? My informant above mentioned, while speaking of the matter, remarked, “Why not use the hair of the dog to cure the bite?” (I can’t quite see the point in the above observation.)

However, levity aside, I believe, as I said, that there is something in this remedy; and I wish some of the brethren down southwest, in the malarial region, would give it a fair trial. My informant used *corn blades*, and spoke of their use in old cases where quinine failed in making a permanent cure.—*J. K. Heltman, M. D., Oaklandon, Ind., in Eclectic Medical Journal.*

(For Dr. Pruitt’s article see *HOMOEOPATHIC RECORDER*, November, 1893).

ABSINTHE IN EPILEPSY.—*Absinthe*, says Dr. James Kitchen, “is a remedy that I have now been using for over twenty years in various nervous affections, more especially in epilepsy. I refer particularly to epilepsy and epileptic affections, from the fact that I have derived more benefit from *Absinthe* in mild and in severe attacks of that disease than in other cases in which I have

been in the habit of administering it. I was induced to give it in such cases from various accounts I met with in French papers and journals of its effects when used as a common drink among the French people. Its deleterious effects when thus taken were chiefly noted on the nervous system. The hospitals and asylums of France were filled with inmates suffering from every grade of nerve poisoning as a result of its use."

CALIFORNIA WINES.—The California wines exhibited at the Columbian Exposition have been analyzed at the United States Laboratory of Department of Agriculture, at Washington, D. C., and judged by standards adopted in Germany. The result is summed up by Dr. Davenport, Boston *Med. and Surg. Jour.*, as follows:

"On the whole, it is evident that the California dry wines are fully equal to the European wines, and the red wines are in every respect superior to the young French clarets. The sweet wines are to be unconditionally preferred to those of Europe containing the same amount of alcohol and extract, as not being plastered. The superiority is already being appreciated in Europe; and it is only a question of time when an extensive foreign market will be open to one of the most promising American home products."

A CURE FOR BRIGHT'S DISEASE.—Some six years ago I had a case of Bright's disease and gave the usual gloomy prognosis. After my best chosen remedies had ceased to cause improvement, or even afford relief, on the recommendation of an elderly lady of the neighborhood my patient began taking Virginia Creeper (*Ampelopsis quinquefolia*). The dropsy disappeared, strength and energy returned, and patient was soon able to attend to her household duties and has done so ever since, though albumen has always been present in her urine, in varying amount, as I have determined by frequent examinations. Occasional slight relapses have made the repeated use of the remedy necessary, but she has maintained all the while a fair degree of health. Since then in all dropsical cases of renal origin, wherever practicable, I have used this remedy and it has given me greater satisfaction than any other drug. I say *renal* origin, but believe it in reality to be a fine remedy in all dropsical cases, from whatever cause. Dr. S——, a former student of mine, who now does

an extensive general practice, confirms my opinion of the value of this remedy, and especially asserts that its benefits extend to cases other than those of renal origin.—*Dr. S. M. Worthington, in Southern Journal of Homœopathy.*

CALENDULA VS. ANTISEPTICS.—A recent report of experiments made by Prof. Gilchrist, in the Homœopathic department of the State University of Iowa, is so much in point and so fully substantiates my position that I shall conclude this paper by a brief summary of the professor's report. He says: "One class treated all wounds, or rather left them practically to the vis medicatrix; using silk sutures, no antiseptic or aseptic precautions, and no medicated dressings, in the way of vulneraries, etc.

"Another used the ordinary *Bichloride* technique; another *Iodoform*; another used *Hypericum* for immediate dressing, followed by *Calendula*. The wounds were of all kinds, divided into series. One series were accident wounds as they occurred in practice; another series were operation wounds. The third series were made in cuts of uniform size, made in the thigh, and as nearly as possible alike in all essential particulars. The results were noted as to time consumed in healing, amount of suppuration, if any; range of temperature and kind of scar resulting. The following are the figures:

"*Iodoform*—Convalescence, twelve and one-half days; suppuration, fifty per cent. ; scar, good in seventy per cent.

"*Vis Medicatrix*—Convalescence, eleven days; suppuration, fifty per cent. ; scar, good.

"*Bichloride*—Convalescence, nine and four-sixths days; suppuration, two per cent. ; scar, good.

"*Hypericum* and *Calendula*—Convalescence, seven and three-fifths days; suppuration, one per cent. ; scar, good."—*S. S. S., in Denver Journal of Homœopathy.*

SOUND DOCTRINE.—The routine practice of washing every wound with bichloride solutions and then applying that vilest of all things, iodoform, is irrational, unscientific and non-Homœopathic. We possess much better resources, if we will use them. It is time we were getting out of this antiseptic rut, and in so doing demonstrate the superiority of Homœopathic surgery. We have many remedies which are specially adapted to the treatment of wounded tissues. *Calendula*, *Hypericum*, *Arnica*, *Aconite*, *Symphytum*, *Hydrastis*, *Ledum* and others have their own specific indications, and when properly selected, always

produce satisfactory results. The similitimum should be sought for in surgical diseases the same as in any other disease, and when this is done Homœopathy will be found the sheet-anchor of the progressive surgeon.—S. S. S., in *Denver Journal of Homœopathy*.

AFTER A NIGHT OUT.—“This is the remedy above all others for the insomnia following that ‘dark brown taste’ in the morning after an attack of delirium tremens. *Hyoscine*, 1-100 gr., hypodermically, every three hours, has been recommended, but it is not an equal to *Sumbul*, which, if given in fifteen-drop doses of the tincture, quiets the over-wrought nerves, relieves the nervous palpitation, mitigates the over-sensitiveness of the optic and auditory nerves, and induces a natural, peaceful sleep from which the patient awakens invigorated and refreshed.”—Dr. S. G. A. Brown, in *Medical Century*.

CUPHEA VISCOSISSIMA.—This remedy was introduced by the late Dr. A. A. Roth, of Frederick, Md., in the November number of the HOMŒOPATHIC RECORDER, 1888. Apparently very little attention has been given the remedy, though it is worth a careful study. Dr. S. G. A. Brown, in the September 15, number of the *Medical Century*, confirms the truth of what Dr. Roth wrote in the following words:

“This is beyond all controversy one of the best remedies we have for the various summer complaints of children. If you have a child that is fretful and feverish; vomits curdled milk, from a hyper-acidity of the stomach; has frequent green, watery, acid stools; or even if the stools are dysenteric, with great tenesmus and colic; high fever and sleeplessness, give *Cuphea* and cure your case. It is my sincere wish that every physician who may read this will give this worthy drug a trial in cases similar to the above.”

BOOK NOTICES.

Fuller on Male Sexual Disorders. Disorders of the Sexual Organs in the Male. By Eugene Fuller, M. D., Instructor in Venereal and Genito-Urinary Diseases, New York Post-Graduate Medical School. In one very handsome octavo volume of 238 pages, with 25 engravings and 8 full-page plates. Cloth, \$2.00. Philadelphia. Lea Brothers & Co. 1895.

This book is a new departure in the fields in which the advertising quack, or doctor, reaps his richest harvest. The author maintains that in the majority of cases of disorders of the male sexual organ pathological and physiological causes should be looked for, as the large majority of them are due to these conditions and not to psychological causes. The former have been almost uniformly disregarded in the books written on this subject, and the whole attention centered on the latter. In pursuance of his task the author enters upon his work by a thorough study illustrated by numerous plates, of the anatomy of the male pelvis and sexual organs; this is followed by a chapter on their physiology and one on anatomy, all of which are thoroughly and intelligently treated. Having thus cleared the ground the book proceeds to treatment, which is largely mechanical and, we believe, well worth studying by any physician who is called upon to treat such cases, but as to what it is we must refer the readers to the book itself, merely premising that "stripping" the seminal vesicles plays a large part in it.

An Eclectic Compendium of the Practice of Medicine. By Lyman Watkins, M. D. 457 pages. Cloth, \$2.50. Cincinnati, John M. Scudder's Sons, 1895.

This book is No. 3 of the Eclectic Manual series, published by the leading publishing house of eclectic works, John M. Scudder's Sons. The author's preface is rather interesting, as it gives a brief summary of what eclecticism, or, as they now term it, specific medication, is. Dr. Watkins writes:

"Plain as the teachings of the theory of Specific Medication appear to the majority of Eclectic physicians, there is yet considerable obscurity and misunderstanding upon this point in the minds of practitioners of other schools, and of the public generally. A misconception of the whole idea of Specific Medication which is rife in some directions, and which leads to its discredit and condemnation, is that we claim to have specifics for diseases, according to the popular nomenclature, when in fact no such pretension has ever been made; and it has never been attempted to adapt the theory to certain combinations of symptoms which have received distinctive names as diseases. So far as we know, there is no specific for the cure of pneumonia, or for peritonitis, or rheumatism, or any other disease. It is well known that no one given attack of disease is identical with any other attack of the same disease. Age, condition, idiosyncrasy and environment

have a modifying influence, and the symptoms vary with these circumstances."

"Specific Medication consists in adapting the treatment to the symptoms. We divide the force of morbid conditions and meet each separate manifestation with a remedy. As the symptoms vary the indicated remedies will also be varied; and thus, in our philosophy, there is no special remedy specific for the cure of any special disease. It is a law of nature that like causes will produce like effects, other things being equal. This law is so well understood and so wide-spread in its application that all ages of men have based their calculations upon its certainty and have been able to advance in knowledge and improve in the arts and sciences."

"It is assumed that there is no abrogation of this law in the vital operations of the human body, and that a remedy which will relieve a certain definite morbid condition at one time will always do the same under like circumstances."

"It is evident that, in order to be specific in the administration of remedies, it is essential that a very close observation of the symptoms of disease should be made, and that Specific Diagnosis must go hand in hand with Specific Medication. As our remedies are varied to suit the many different phases presented by morbid states, we must be on the alert to detect these phases and by study learn to apply the particular specific indicated by them."

All this looks to us like a rather round about species of Homœopathy: the remedies are not specific to the name of the disease, but to its varying symptoms, and some of them, for instance *Lachesis*, look queer among the "sp. med." set. However, if any one wants a book on the practice of "specific" medicine or eclecticism, why this is the one to buy.

The Pathology and Surgical Treatment of Tumors. By N. Senn, M. D., Ph. D., LL. D. Illustrated by 515 Engravings, Including full-page Colored Plates. 709 pages. Philadelphia: W. B. Saunders. 1895.

This book is "for sale by subscription only" at \$6.00 for cloth, and \$7.00 for half-morocco binding. Needless to say it is a very exhaustive work on the subject of tumors from the surgeon's point of view, probably the best published. But what an unoccupied field for Homœopathic therapeutics!

“WILLST DU GESUND WERDEN?” is the title of an eight-page popular Homœopathic monthly published by Rudolf Reuther, Leipzig-Reudnitz Elsaster 6111, Germany. Price of yearly subscription to countries outside of Germany, two marks—say fifty cents. The editor is an enthusiastic believer in Homœopathy and promises to make a journal that will be homœopathically sound to the core. Good luck! We cannot have too many of that class of journals.

“THE SIGNIFICANCE OF GERMS IN PULMONARY DISEASE” is the title of a pamphlet reprint by Dr. J. P. Rand, of Worcester, Mass. The keynote of the pamphlet is “If the world is not saved from tuberculosis by prevention it never will be saved at all.” In this Dr. Rand differs radically with Dr. Burnett in his *New Cure for Consumption*, who teaches that taken in time practically every case of consumption can be cured.

PUBLISHER W. B. SAUNDERS, of Philadelphia, sends us an announcement of *An American Year Book of Medicine*, the first copy of which will appear on the first of January next, edited by George M. Gould, M. D. It is a safe prediction that this will be the best year book published, for the editor of the *Medical News* is a very able man even if he is affected with a touch of crankiness against Homœopathy. Not only will all the methods and discoveries reported in the American journals be digested, but also those of Europe as well, thus making the work really international. The book will also be well illustrated.

COMES to hand, “Report of the First and Second Public Meetings of the Anti Vivisection Society of Calcutta.” It contains, among other things, an address by Dr. D. N. Bannerji, one of the eminent Homœopathic practitioners of Calcutta, that is very readable. Speaking of the oldest civilization, the Indian, he says: “The foundations of that civilization were laid in spirit that is eternal, and not in matter which is transitory.” The ancient Hindus believed in the oneness of life; everything in the manifested world is from God, and therefore to be respected; there is no dead matter. It is for these, and other kindred reasons, that the oldest civilization is bitterly opposed to vivisection.

“THOUGHTS ON HOMŒOPATHIC PHILOSOPHY,” by J. W. Thompson, M. D., is the title of a seventy page reprint of an

address to the Society of Homœopaths. Dr. Thompson defines Natural Law to be: "The orderly government of the natural universe by the Divine Being, through and by discrete degrees." The spirit of the pamphlet is found in these words: "We cannot give up one jot or tittle of the claims of God's law. When Constantine Hering said, 'If our school ever gives up the strict inductive method of Hahnemann we are lost,' he stated the truth." But that method will never be given up save in spots. The Homœopathy of the *Organon*, the *Materia Medica Pura* and the, as yet, but mistily known *Chronic Diseases* has come to stay.

DR. T. GRISWOLD COMSTOCK in a note to the publishers of Dr. Wood's *Text book of Gynecology* says: "You have published a work for our profession that you may well be proud of. The thanks of the profession are due to both author and publishers for such a work."

THE *Practice of Medicine* for the busy practitioner, by Dr. Custis, is rapidly approaching completion, and judging from the advance sheets it will be the most popular practice published.

THE fourth edition of Raue's *Special Pathology and Diagnostics, with Therapeutic Hints*, is about half completed. This edition of this old Homœopathic standard is not only brought up to date in regard to its text, but also in the matter of type, paper and mechanical get up. It will be by far the finest medical work of the year when completed.

THE *Chronic Diseases* is nearing its 1100th page, but there are a good many more pages still to print. It will be a very large book. The publishers discussed the advisability of making it into two volumes, but concluded to stick to the one volume plan as, where it is possible, a book of this nature should be in one volume on account of the convenience of consulting and comparing one remedy with another. The *Chronic Diseases* should not be looked upon merely as a book to be purchased because it was written by Hahnemann, but as an eminently practical book for everyday consultation by all believers in Homœopathy who have cases otherwise than acute to consult.

In reference to this work it may be well for our readers to know that only subscribers can obtain it at the price of \$8.00 delivered free of charge to any part of the United States. The price to non-subscribers after the book is out will be \$9.00 with postage extra. Better notify your pharmacist that you want a copy.

DR. T. L. BRADFORD, author of *The Homœopathic Bibliography* and the *Life and Letters of Dr. Samuel Hahnemann*, is at work on

another book that is needed by the Homœopathic profession of the world.

THE ADULTERATION OF DRUGS.—We are in receipt of an address delivered before the Brooklyn Institute, by Professor Willis G. Tucker, upon the adulteration of drugs. Dr. Tucker is professor of chemistry in the Albany Medical College and director of the New York State Health Board Laboratory. His remarks upon the subject of adulteration, therefore, should carry with them much weight. We have already made some criticism of the results obtained by the State Board of Health through their investigations as to drug adulteration. Dr. Tucker's present address, however, is in some sense supplementary to the report in question.

During the years 1891-'94, inclusive, 8,305 samples of drugs were examined. Of the total number, not one-half could be rated as of good quality; about fifteen per cent. were of fair quality, and about thirty per cent. were of inferior quality.—*Medical Record.*

Get drugs from a reliable Homœopathic pharmacy and this trouble will be obviated.

A NEW VIEW OF GERMS. Dr. A. M. Cushing, of Springfield, Mass., says, anent, germs (as reported by the *Union* of that city): "If we cut down a forest of hard wood trees evergreen trees take their places. If we cut down evergreens, hard woods follow them. If we plow the prairie where no white man ever saw a blossom, beautiful flowers spring up. Where do these seeds, or germs, come from? I believe that when the Almighty created this earth he placed in the soil the germs of all vegetation needed for the happiness, health and sustenance of man. I also believe that when he made man he placed within him the germs of all the diseases we are liable to have, smallpox, scarlet fever, etc., and why not of consumption? What a mistake it would have been to have peopled this earth with human beings with no chance for them to ever die."

MESSRS. LEA BROTHERS & CO., the well known Philadelphia publishers of standard medical works, send us an appendix to the 21st edition of Dunglison's *Dictionary of Medical Science*. This appears runs from page 1183 to 1206 inclusive, and it makes the work not only what it always has been, the medical standard of the English-speaking race, but also the most up-to-date medical dictionary published.

THE WILMER ATKINSON CO. sends us *Biggle's Poultry Book, a Concise and Practical Treatise on the Management of Farm Poultry*, a handsome little book well illustrated with numerous little half-tones, and also quite a lot of colored plates. The chapter on diseases, gives in addition to the common treatment, the homœopathic treatment.

Homœopathic Recorder.

PUBLISHED MONTHLY BY

BOERICKE & TAFEL,
1011 Arch Street, Philadelphia, Pa.

SUBSCRIPTION, \$1.00 PER ANNUM.

Address communications, books for review, etc., for the editor, to E. P. Anshutz P. O. Box 921, Philadelphia, Pa.

POLYPHARMACY AGAIN.

Dr. F. J. Boutin, lecturer on Practice at the Kansas City Homœopathic Medical College, writes to the *Medical Century* (October 15), on the subject of "Mixing Drugs," and from his letter we quote the following, which *every* physician should heed:

You can look over any newspaper or periodical and find advertisements of sure cures for every disease you ever heard of. Why not stock up your office with a line of that kind? The manufacturers would furnish you gratis a liberal supply of literature describing the wonderful merits of their combinations and probably give you the exclusive right to use them in your locality and put your picture and your name on every circular. I see no material difference between such a course and the use of a lot of combination tablets of so-called homœopathic remedies.

If the alternator of remedies will hold to the rule of getting the totality of the symptoms and take the additional motto of "the single remedy whenever possible," he will find the cases requiring more than one remedy becoming less and less frequent, and his practice becoming more and more satisfactory. But the continued use of combination tablets, or of any combinations of drugs, as specifics for disease will run any homœopath entirely off the track. He forgets his *materia medica*, and you might as well expect to find a good preacher of the gospel who is ignorant of the Bible as to find a good homœopathic practitioner who is not a persistent and intelligent student of *materia medica*. He loses, or fails to gain, the habit of closely analyzing his cases. He becomes utterly demoralized as a prescriber. I have previously given a hint at the possible origin of some of these combinations. It is evident their authors have but a meagre knowledge of the action of drugs or but limited experience in their uses, as in some of the combinations the drugs mentioned are but rarely indicated in the diseases for which they are named as specifics, and the most commonly indicated remedies are overlooked. It is also apparent that their authors are quite ignorant of the relation of drugs to each other, for in numbers of them drugs that antidote one another are mixed together. All authorities speak of *Rhus tox.* and *Apis* as being inimical. They do not even follow one another well. And yet we here find them named as occupying a social relation in the same combination tablet, as a specific for some disease. Therefore, as these combinations were originated apparently by persons of

limited brains, and sent out by the pharmacist with the intimation that their use requires but little brains, I insist that no homœopath who has any respect for his own brains will ever give an order for any of them. If you are sure that two or more remedies are indicated at the same time in a certain case, give them; yet I would urge this to mix medicines as little as possible; if you must mix, mix medicines with brains.

I have not been finding fault in this paper with the pharmacist for mixing and selling such compounds when they are called for. He is not in the business altogether for philanthropy. But there is one point at which I wish to raise objection, that is, the sending out by a self-styled "homœopathic pharmacy" to doctors of all schools, circulars describing these mixtures and in glaring headlines announcing to the world that "they are largely employed by homœopathic physicians." That is an insult and a disgrace to homœopathy, they are not largely used by homœopathic physicians, for those who prescribe medicines in that way are not homœopaths.

NEW YORK CITY NOTES.

Dr. Horace Porter Gillingham has removed from 28 West 18th street to 114 West 84th street. Office hours: 8 to 11 A. M. and 6 to 7:30 P. M.

Dr. W. A. Dewey has removed from 52 West 25th street to his former location, 170 West 54th street. Office hours: 9 to 10 A. M. and 3 to 5 P. M.

Dr. George W. Winterburn has removed from 230 West 132d street to 261 Edgecombe avenue. Office hours: 9 A. M. to 12 noon. The doctor has been proposed for appointment to the New York City Board of Public Charities, and it is expected that his appointment by the Mayor will be announced in the near future.

The new Medical Hospital connected with the New York Homœopathic Medical College is expected to be ready for occupancy by the beginning of the year. A portion of the building will be reserved for obstetrical cases, at least ten beds are to be devoted to this purpose. The hospital will have forty-five beds in all. The building and equipment, all of the latest in design and improvements, is expected to cost about \$65,000.

The Hahnemann Hospital had its day at the big Food Show held during October at the Madison Square Garden. Quite a neat little sum was realized chiefly through the excellent luncheon which was served in the afternoon.

The Homœopathic Medical Society of the County of New York held its first meeting of the season at Berkely Lyceum on

October 10th. The attendance was unusually large, and the various papers submitted elicited more than ordinarily brisk discussions. The papers read were, "Mastitis; Its Treatment, Medical and Surgical," by Dr. F. W. Hamlin; "Deaths After Laparotomy," by Dr. Wm. Tod Helmuth; and "Six Cases of Hæmorrhage," by Dr. George F. Laidlaw. A paper by Dr. C. C. Boyle, entitled "Does Macula of the Cornea Move?" was read by title, owing to the writer's absence. The Society will make great efforts to get together a large representation of American Homœopathic physicians to attend the International Homœopathic Medical Congress at London next summer. A committee composed of Drs. Porter, Shelton and Norton, was appointed to take the matter in hand and if their efforts are successful the most complete arrangements, including the chartering of a steamer for the trip will be made.

SAURURUS, A NEW-OLD REMEDY.—Readers who are interested in the remedies of nature rather than those produced in the laboratory and sold under trade-marks will remember that it was Dr. D. L. Phares, of Mississippi, who, over half a century ago, pointed out the wonderful virtues of *Passiflora incarnata*, so much used today. What Dr. Phares said of the remedy laid dormant until Hale, in his ever perennial *New Remedies*, rescued it from the dusty pages of old medical journals, in which so much of value is buried awaiting resurrection. Among such buried remedies is *Saururus cernuus* or, as it is more commonly known, "lizard's tail." Dr. Phares, who seems to have been an unusually keen observer, used *Saururus cer.* in his practice, as he did *Passiflora*, for many years before he communicated his observations to the medical journals, and the *Saururus* seems to be quite as important and useful a remedy in its sphere as is *Passiflora*, and one quite as worthy of a thorough proving. In absence of proving it may be said that Dr. Phares used it for years with marked success in all irritation and inflammation of the kidneys, bladder, prostate and urinary passages. He considered it peculiarly adapted to all such cases if they were attended by stranguary, or painful and difficult urination. Dr. Phares used the remedy both externally and internally and he found that the stomach was very tolerant of the rather heroic doses he prescribed.

The plant is an indigenous perennial found in swampy localities, in some parts of the United States, and has been, and is

still, used in domestic practice for those conditions for which Dr. Phares commends it. The botanists of the Boericke & Tafel pharmacies have lately had occasion to gather a supply of the plant for making a tincture. If any of the readers of the RECORDER know anything of this remedy, and its medicinal qualities, it would be well to communicate them.

We may state here that in a German publication, Rosenthal's *Synopsis of Plants*, *Saururus* is said to be a good remedy for pleurisy.

WHAT IS IT?—The following is clipped from the *Medical Sentinel* published at Portland, Oregon, and claiming to be rather liberal and progressive in its tendencies:

HOMŒOPATHIC DOXOLOGY.

Praise Hahn, from whom small doses flow,
 Praise him, blind creatures who don't know;
 Praise him above, ye pellets most,
 Praise Homœopathy and faith cure dose.—*E. Mingus.*

After reading this several times we fell to wondering, "what is it?" Do the editors and "E. Mingus" consider it witty? But wit, even if malicious, has literary polish and does not take the form of clumsy doggerel, and certainly would as soon think of parodying a thing so dear to the human heart as the grand old Doxology as of smirching a mother's name. Perhaps, though, the *Sentinel* regards the Doxology in the same light it does Homœopathy, in which case all is forgiven, for what it says is of no importance.

PHYTOLACCA DECÁNDRA FOLIA FOR EPITHELIOMA.—Goodman points out in the *South Carolina Medical Journal* for April 20, 1895, that while the root and berries of the above named plant have been largely experimented with, and have been found to possess therapeutic properties of great value, yet the green leaves of this plant possess a property which alone would entitle it to rank among the most valuable remedies of the materia medica. We refer to its power of destroying epithelioma.

The method of using the remedy is to bruise the green leaves to a pulpy mass; collect the expressed juice in a shallow receptacle, as a plate; allow it to evaporate to a thick, pasty consistency; spread a portion of this on a piece of silk or other suitable cloth, and apply to the morbid growth.

The plaster should be removed; the part washed twice daily.

The remedy causes severe pain. It has a selective action for the morbid tissue; follows out all the irregularities of the epithelioma; causes, as it were, its liquefaction and removal, and then acts as a cicatrizant for the open sore.

As soon as all the morbid tissue is destroyed, a bed of cicatricial tissue begins to spread from the periphery, and as this occurs the plaster should be cut smaller each day, so as to conform to the size and shape of the surface to be covered by it.

Under this treatment the writer has seen large epitheliomatous masses destroyed in a few weeks, and nothing but a faint scar left at the place occupied by the growth. In no case was there a recurrence at the original site.

Unlike other remedies, it can be used fearlessly, does not endanger the patient, combines within itself a caustic action and healing property, and requires to be used in the same manner from beginning to end.—*Exchange.*

The botanists of Boericke & Tafel gathered a lot of the leaves of the *Phytolacca decandra* and have made a strong tincture which may be used in lieu of the leaves, which are unattainable to most physicians. The same remedy may also be used in the form of an ointment. It is not at all improbable that this will prove to be a most excellent remedy, for *Phytolacca* berries are one of the best antifats known, and from the roots is made one of our standard Homœopathic remedies. *Phytolacca decandra folia* is the name of the new preparation to distinguish it from *Phytolacca decandra* tincture made from the roots of the plant.

DISTILLED WATER.—There is a growing opinion among medical men that pure distilled water is very much better than any mineral water that is on the market, in Bright's disease and other kidney affections, and the best among the mineral waters are those that have the least minerals in them, or in other words, that come the nearest to pure water.—*Dr. E. C. Price, So. Jour. of Hom.*

TRITICUM REPENS.—Conch-grass is an old remedy, and though its field of action is limited, it can be relied upon. We have seen most excellent results follow its administration in several instances. In one we remember quite distinctly there was more or less blood in the urine; it continued for a long time; there was no pain or soreness to indicate the exact location of the lesion; exercise caused a greater amount of blood to be passed.

The patient was a physician. After he had exhausted his own knowledge upon himself, with no material or permanent relief, he placed himself under the treatment of his neighboring physicians. The difficulty seemingly withstood all medical onslaughts. The urine persisted in being bloody.

After a long time, he came to us as a consultant. An infusion of conch-grass to the amount of four or five pints, was taken in doses of a wineglassful in twenty-four hours. Little if any other medicine was given him, and in the course of four or five days all traces of blood had disappeared from the urine, and he deemed himself well.

In several other cases, where there was more or less strangury and irritation, conch-grass proved very effective.—*Eclectic Medical Journal*.

MAGNESIA SULPH. A REMEDY FOR WARTS.—An editorial article in the *E. M. Journal* refers to my recommendation of this remedy for the cure of warts, and remarks that he fears that it requires faith for it to effect a cure. If faith on the part of the prescriber is necessary, I certainly ought to succeed with it, as I have cured a number of cases within the past eight years, and have never prescribed it with failure where the patient was kept track of until the remedy was accorded a fair trial. It is prompt in children, the only class of patients with whom I have tested it. In 1889, I cured a boy of five or six years, who was literally covered with warts, his face being very much disfigured with them. All disappeared within a fortnight. While in the East last spring a niece of sixteen, who was much mortified by the fact that her hands were disfigured by large warts, asked me to give her something to cure them. I therefore told her mother to give her as much *Epsom salts* as would lie on a dime, three times daily, and to continue it for several weeks. A couple of months afterwards a letter came in which was: "Tell uncle my warts are all gone." I certainly have a great deal of faith in this remedy, for the purpose named. It illustrates the tissue affinity of drugs typically.—*Prof. H. T. Webster, M. D., in Cal. Med. Journal*.

LION OR LAMB?—But how are you going to bring about your fusion, and what is it you are going to fuse? Are we to practice part allopathy and part homœopathy? The old school fellow would think that easy enough, for there is not one in five hundred of them that knows even what homœopathy is. He

has heard that *Nux vomica* is good for colic, *Belladonna* for headache, and *Aconite* for fevers, and that little doses are given where there is not much the matter, but that when something serious comes up we give medicine the same as he does. But in this consolidation of symptoms how are you going to arrange the stock, what *pro rata* of "consolidated stock" is each to have for his old "holdings?" Are the journals to fuse and the colleges? Plainly, our time is too valuable to ourself and family to be swapping, unless we can make something in the trade. Where is the gain? Are we not each of us in the school of our choice? Does not each revolving year strengthen our conviction of being in the right? Do we not have the best clientage of any of the schools of medicine, in point of intelligence, culture, wealth and influence? Why shall we exchange this, and for what? Are we not gaining in all desirable respects in this behalf as time runs? But to set all this at rest: when the allopathic and homœopathic lamb and lion lie down together one will be invisible. Between "oppressor" and "oppressed" we prefer to be the oppressor; we will be lion rather than lamb. Let us therefore be sure we are to be the lion before we thus hibernate.—*Ed. Ayres, M. D., before Joint Session Ala. and Tenn. Societies.*

NOSODES.—*Psorinum* is supposed to be a product of the scrofulous condition. If now it be prescribed in a given case simply because that case is one of scrofula, I cannot see that that is homœopathy. But if it be prescribed because it is indicated by the provings, which are as clear and definite as are those of other drugs, I cannot for the life of me see why the prescriber's homœopathy is not genuine, orthodox, legitimate. Am I mistaken? Is there any flaw in this reasoning? And if there is not, must we not be willing to accept all the other nosodes just as freely on the same basis? I see no escape from this conclusion. Under this view of the case we are confronted by a wonderfully suggestive series of drugs. Certainly there is no drug that we stand more in need of in chronic disease than a drug which will present a picture of tuberculosis. And certainly in the domain of acute disease there is no drug that would be more eagerly welcomed than one which would give us another strong picture of diphtheria. It would be a matter of the highest interest to learn the characteristic indications of the two nosodes which would furnish these two pictures.—*Dr. Charles Woodhull Eaton, Am. Inst. Hom., June, 1895.*

PERSONAL.

Dr. C. A. Williams has removed from Mystic to New London, Conn.

The shortest road to fame nowadays is to invent a new remedy, operation—or bacillus.—*Medical News*.

How many readers of *Tribly* know that the unabridged name of that young woman was Miss *Tribly O'Farrel*?

A California paper characteristically says, of gossips, "All the whisky ever made could not cause the havoc of one of these whirlwinds of iniquity."

Nothing worse can happen to the reputation of a book than to have it offered as a "premium."

Dr. Crawford, of the Pulte College, does not believe in fighting microbes but in treating disease. The Cincinnati *Tribune* gives his lecture a column and a quarter notice.

New York *Medical Journal* advises State Medical Examining Boards to use "care and moderation" if they wish to retain and increase their power.

"Your *Medical Genius* and *Bee line Repertory* are worth their weight in gold, and should be in every physician's library in the United States." Drs. Hall and Allen, St. Paul, Minn., to Dr. Jones.

A swallow of wood alcohol the other day killed the person who swallowed it.

The number of deaths from diphtheria in 1891 in New York City was 1349, in 1894 it was 2264, yet antitoxine "has reduced the death-rate nearly fifty per cent."

Medical News man fills two of his broadside pages about "A Humbug at Lourdes." Similar space to humbugs at other places, and the price of paper would ascend.

Dr. N. G. Burnham, of Denver, reports five cases of tuberculosis successfully treated on general lines laid down by Burnett in his *New Cure for Consumption*, a book in its third edition but which should be in its twelfth.

When will some great, strong man arise and free his brothers from the tyranny of starch!

"Sycosis * * * is always caused by a microbe." Well, what causes the microbe?

A St. Louis doctor, as "expert witness," testified that he has treated two million insane persons during the past thirty years; that is, 66,666 cases a year. Chicago cannot beat that, great and mighty as she is.

A French hygienic genius proposes to put a high tax on corsets for the benefit of the public health.

Papers read at society meetings, especially of a clinical or therapeutic nature, are always welcome to the RECORDER'S pages. Also observations on any of the old or new remedies.

Blessed be the man who plants a tree!

Amorphous Silicic Acid 1.5 and *Precipitated Sulphur* 1.5, according to Hensel in his *Makrobiotic*, will make new hair grow.

The RECORDER'S subscription rate is one dollar a year, twelve numbers. Subscriptions may begin at any time. Send in your subscription.

By the time spelling reformers get in a little more work every man can spell as he pleases, and no man can call him down.

THE HOMŒOPATHIC RECORDER.

VOL. X. PHILADELPHIA AND LANCASTER, DEC., 1895. No. 12.

EPIDEMIC AND ENDEMIC DISEASES (CONTINUED).

In my last communication I continued and ended the first great division of Endemic Diseases, viz., the Malarial. I now go on to speak of the other great division, the

Typhoid, or Enteric.

Some forty years ago, more or less, no distinction was made between the diseases which are now known as typhus and typhoid fevers. In consequence of this we can place little reliance upon the books treating of these fevers, written before the distinction was pointed out. When the authors speak of *typhus* fever we cannot always tell whether they mean typhus or typhoid. What these authors say is, however, of not much importance, for we are able to make our own observations of these fevers; and we certainly shall not be guided by their therapeutic recommendations. To make a correct diagnosis between these two diseases is of great importance, both for sanitary and for therapeutic reasons. One disease is infectious; the other is not. One disease depends upon the use of impure water, or milk, or upon defective drainage. The other disease has no connection with either water, milk, or drains. These are good sanitary reasons for our making a correct diagnosis. And the therapeutic reasons are equally important, for the medicine which cures one may be useless for the other. I say *may be*, because I am ignorant as to whether there is any medicine which may be called a *specific* for *typhus*, although no doubt there is. I can speak with much more confidence of the other fever, the *typhoid*, for there is no fever more amenable to treatment than this when treated Homœopathically; that is, by the *Arsenite of potash*, usually called Fowler's Solution of Arsenic. I mention this, by the way, because several gentlemen have written me to

enquire what the medicine is which I have found so efficacious. But many readers of THE RECORDER will remember that I spoke of this remedy some time ago in a contribution specially on this fever and the treatment recommended for it at one of the London hospitals. Of course, I am not the discoverer of this remedy, for I got the information from that well-known author, Dr. Richard Hughes.

Typhoid fever is always the result of decomposing animal matter. This may be inhaled as a gas, or it may be swallowed with the water drunk. I have distinctly traced the disease to both these sources. An interesting case where the patient was poisoned by the water from the cistern occurred to me a short time ago. I was sent for by the widow of a doctor to attend her for what she called a "bad bilious attack." Sometimes, in the practice of medicine, we are put upon the wrong scent by the statements of our patients, and we have to make a little investigation on our own account. It was so here. Having looked at the tongue and taken the temperature of this lady I disagreed with her diagnosis, and told her I was afraid she had typhoid fever. This information surprised her, and if I remember correctly she said she had not been anywhere likely to catch it. So she could not agree with *my* diagnosis. We are sometimes obliged to hold controversies with our patients, and this is always very disagreeable. I then asked her daughter whether the drinking water was good. Yes, she thought it was. "Have you had the cistern emptied and cleaned lately?" Yes, they were particular about that. "Well, your mother has typhoid fever; but how she contracted it we cannot yet find out, I am afraid," I said.

I left her medicine and went home, half inclined to believe that another doctor would be sent for—one who would be disposed to give a more favorable opinion. However, not having received any message to that effect, I called again next day. Immediately after I had entered the parlor the daughter came in and said to me: "The mystery is solved." She then went on to say that when her husband came home the previous day and had heard of my enquiries about the cistern, he said: "Send for the turn-cock and let him empty the cistern." This was accordingly done, and at the bottom was found a dead rat. Of course I was glad to hear this, for it is always satisfactory to find out the causes of untoward phenomena and, moreover, I thought they would then give me credit for having a wonderful prescience. But there was not

quite so much credit due to me as my story may seem to indicate, for on the very morning on which I made my first visit I had been reading a little pamphlet written by an advertising Homœopath giving instances of his sagacity in various cases which he had treated, and amongst these was one where he had caused a cistern to be emptied in the endeavor to find out whether that was at fault in the production of a case of typhoid fever and that a dead cat was found there. One or two other doctors had been called in before him, but had been unable to say what the patient's complaint was. So one cannot help admiring this gentleman's smartness after all, and certainly he was the means of my being posted up for a similar case.

Perhaps there is no disease so frequently overlooked as typhoid fever. Patients come to us with what we should call anomalous symptoms if the thought does not occur to us that it may possibly be typhoid fever. Fortunate it is for such patients if we detect the disease and straightway send them home and to bed. Some cases are so mild that the idea of typhoid does not readily present itself to the mind. The thermometer, however, will be very valuable here, for if we find the temperature above the normal we may rationally suspect that there is a poison of some kind in the blood. Of course it may not be typhoid poison, but then, again, it may.

Is typhoid fever infectious? It certainly is not. And yet, strange to say, authors of good repute say that it is. For instance there is Dr. A. Stevens, who has published at Philadelphia a valuable book on the Practice of Medicine—valuable in every respect save in its therapeutics. Dr. Stevens has, in the "Contents" classed this fever with the "acute infectious diseases," and again, on page 48, we read that diarrhoea may be a symptom of "certain infectious diseases as typhoid fever." To be sure the *stools* of the patient, if not mixed with some germicide, might percolate somewhere and poison a well which supplied a family with drinking water. But surely this is not what we understand by the term "infectious fever!"

Thus if ever an instance of infection *should* arise it will be entirely the fault of the nurse or other attendant. And this cannot be said of any really infectious fever, such as small-pox, measles, scarlatina, etc.

Another distinguished authority, Prof. Roberts, of University College, London, holds the same opinion as Dr. Stevens. In his fourth edition of the Practice of Medicine he says: "There is

abundant evidence to prove that typhoid fever is infectious, and when once it finds its way into the midst of a number of individuals it tends to spread amongst them."

This statement he immediately proceeds to modify, as follows: "It is most important, however, to understand clearly how the disease is mainly conveyed. The exhalations do not appear to contain the contagium, and there is very little danger from merely coming into the vicinity of patients suffering from typhoid. Indeed the probability is that the malady cannot be transmitted in this way, and medical men or nurses rarely take it from attending upon patients. It is in the *fæces* that the poison is chiefly contained, and by their agency the disease is propagated."

Why does Dr. Roberts say "*very little danger*" when he must know that there is no danger at all? When he says that "medical men and nurses rarely take it," are we to conclude that he has known instances where they have done so? He has left us in doubt. I have myself attended many patients with typhoid fever, but never once have I known either nurse or any other member of the family take any harm. And why does Dr. Roberts say that it is "chiefly" in the *fæces* that the poison is contained, when he knows that it is *entirely* in them that the danger lies?

Again "the atmosphere may become impregnated with the emanations from the excreta, either because the latter are thrown into some open space, or because the water-closets, privies, sewers, etc., are imperfect, and undoubtedly the poison may thus find its way into the system by inhalation of the tainted air. Water is, however, the great channel by which it is conveyed, and numerous epidemics and endemics, as well as sporadic cases of typhoid fever, have been traced to some special water supply. * * * It has been clearly proved that *milk* is not uncommonly the vehicle by which the typhoid poison reaches the system, either in consequence of water containing it being mixed with the milk or used for washing milk cans, or from this article of diet becoming tainted in some other way with the excreta of patients suffering from the fever. The opinion has been advanced that typhoid may be communicated through drinking the milk of cows fed on soil containing much sewage matter, or from eating the flesh of animals suffering from the disease. Recently an outbreak of enteric fever in Germany was attributed to eating veal thus infected."

From these remarks it will be seen in how many different ways

we may contract this disease. And here an interesting question presents itself to us, viz.: Is the poison always the same, no matter what the source of infection may be? Is it always the same gas or the same germ? Dr. Stevens says that the exciting cause of typhoid fever is "the bacillus of Eberth." On the other hand Prof. Roberts says: "With regard to the precise nature of the typhoid contagium, it may be confidently affirmed that at present *this is unknown*." Specific organisms have been described as present in the typhoid stools, but the latest researches have failed to demonstrate the existence of any such special organisms. Perhaps this discrepancy may be reconciled by the fact that Dr. Stevens writes at a later date: "Although the germ theory of disease has been ridiculously over-strained, and has been made the convenient explanation of a multitude of diseases, it may happen that in this instance the theory is correct."

But we find variations in this fever—variations of temperature and of pulse; sometimes there is no diarrhœa, sometime no eruption. Do these variations depend upon whether the patient has received a large or a small dose of the poison? Do they depend upon idiosyncrasy? Or do they depend sometimes upon variations in the character of the poison? Is it always the "bacillus of Eberth?"

G. HERING.

[TO BE CONTINUED.]

STORY OF THE PROVERS WHO ASSISTED HAHNEMANN.

By Thomas Lindsley Bradford, M. D.

JOHANN ERNST STAPF.

Johann Ernst Stapf was born the 9th of September, 1788, at Naumburg. His father, Johann Gothofredus Stapf, was first pastor to the church of Mary Magdalen. His father taught him the first principles of religion and Latin, Calov's works among others, in order that he should be prepared to enter, when eleven years old, the provincial school that flourished at Porta, of which he always retained pleasant recollections. He had as instructors, Heimbach and the Very Rev. Illgen, Fleischmann and Schmidt, as also his grandfather on the mother's side, Prof. Gernhard, dean of the school. After remaining there three years, his

health failing, he left that school and returned home to his native city, and here he devoted himself to the study of natural philosophy and especially chemistry, following the line of study that his college curriculum was intended to lead him to. Besides this, he attended the school of nobility at Naumburg, of which the learned Fuerstenhaupt was Rector and Staffel Co-rector. In 1806 he entered the Leipzig University, of which Eccius was President. His instructors were: Platner and Clarus, in philosophy; in anatomy, Rosenmüller and Clarus; in physics, Hindenburg; in botany, Schwaegerchen; in the literary history of medicine, Kühn; in physiology, Platner and Burdach; in materia medica, pathology and zoochemistry, Burdach; in natural history, Ludwig; in chemistry, pharmacy and the art of dispensing, Eshenbach, whose assistant in chemistry he was for two years; in obstetrics, Joerg; in the theory and practice of surgery, Clarus, Gehler and Eckoldt; in general and special therapeutics, Reinhold; in chronic diseases, Haase; in clinical medicine the immortal Reinhold, and Müller.

He also traveled in the train of Mme. Elisa von Recke and Chr. August Tredge, illustrious personages, visiting the Bohemian baths, Carlsbad, Teplitz, Eger, studying their nature and diseases, in the summer of 1809, making at the same time an extensive and illustrious circle of friends; returning he was generously received by the noble families of Quandt and Winkler. The 10th of June, 1820, he sustained the examination for Bachelor, reading his thesis a few days later, entitled "De eudiometria, novaque aeris benignitatem explorandi methodo," and on the 14th of February he sustained the examen vigarosum. The 6th of April he delivered the thesis "De antagonismo organico," defending it against everybody, Prof. Kühn being moderator.*

Stapf was the first to embrace the principles of Hahnemann. Rapou says: † Stapf is the most ancient disciple of Hahnemann and more celebrated than the others. He commenced to study Homœopathy in 1811, and in 1812 practised only with the remedies mentioned in the first volume of the *Materia Medica Pura*. He was at the time the only partisan of our method, and he developed it well.

* Transl. from: Kühn (Carl Gottlob). [Pr.] febrifugina remedia quæ cortici peruviano vicaria succedunt, considerantur. [With life of Stapf included.] 4to. Lipsiæ, 1810.

† "Histoire de la Doctrine Medicale Homœopathique," Paris, 1847, Vol. ii., p. 395.

Stapf had his days of persecution, but for a long time all has been peaceful with him. He is no longer regarded by his conferees as a charlatan, but as a physician with a European reputation and is given their friendship.

Stapf is a type of the pure Homœopathist. He disdained Isopathy. He is the great favourer of the remedy—*Lachesis*. Hering introduced it into Europe through him. Since 1830 our brother of Naumburg has prepared it for the German Homœopathists. He also made experiments with it. Stapf, like Hahnemann, considers the habits of the patient regarding coffee, wine and tobacco. The important thing is to remove during medication the cause of the trouble. He employs olfaction of the higher dilutions. He commenced his studies upon high potencies the last of 1843 and published the results in June, 1844.

Ameke says: Hahnemann's oldest admirer and disciple, Stapf, of Naumburg, met with the same fate. He, too, was scorned and ridiculed in every possible way like his Master, and lived for many years as one under a ban among his professional brethren.

There is no doubt that Rapou's account of the date of Stapf's conversion is true. We find by letters written him by Hahnemann in 1814 that he had been for some time engaged in proving medicines. Hahnemann says to him in 1814: "Your good sentiments towards myself and our art give me much pleasure and lightens many burdens of my life." He mentions his provings of certain remedies by name, tells him that he will not overtax him, asks him to write for the *Allgemeiner Anzeiger* in favor of the Homœopathic system. (*Hom. World*, Vol. xxiv., p. 206.)

Hartmann in speaking of the original Provers' Union in the year 1814 says: Stapf was no longer living in Leipsic, but only came occasionally from Naumburg, where he was settled. •The benevolence beaming from his eyes readily won for him the hearts of all; a more intimate acquaintance with him soon showed that in every respect he was far in advance of us in knowledge, although he had not long been honored with the title of doctor, and the regard was awarded to him unasked for, which was due to his extensive scientific acquirements and his natural talents as a physician. His conversation was instructive in more respects than one, and he seemed hardly conscious of his superiority over others, while he was all the more esteemed on account of this very modesty. But, as desirous as all were of obtaining information from him, and ready as he was to gratify those seek-

ing it, yet it was not in the power of one possessed of such a temperament as his to adhere to any one thing for any great length of time. To this trait his remarkably quick and accurate powers of perception might have contributed.

He was the first pupil of Hahnemann, and was by the master very dearly beloved. He continued to correspond with him until the day of his death, and always showed the greatest confidence in him and his medical methods. While with the most of the rest of his pupils he was at times cold and repellent, there is nowhere in his writings one word to show that there ever was the least difference of opinion between Hahnemann and Stapf. It was to Stapf, in connection with Gross, that Hahnemann first divulged the secret of the chronic diseases, or psora theory, calling them to Coethen for the purpose in 1829.

Hartmann says: Early in January, 1821, I was very much surprised one morning by the arrival of Dr. Stapf from Naumburg, who came to pass his examination (at Berlin) having been commissioned by the Prussian Minister of War to examine the so-called Egyptian ophthalmia, prevailing among the Prussian troops upon the Rhine, and see what could be done with Homœopathic remedies to check its progress. (Hartmann was also there for the same purpose, examination.)

He improved his opportunity to find me and to propose that I should accompany him, which I should have done had it not been that it would have disarranged my plans in coming to Berlin for a whole year. It was therefore necessary entirely to refuse the friendly offer, however painful it might be, and my refusal was quite as painful to Stapf, since he had no assistance but that of a novice in Homœopathy—a Russian not yet proficient—Petersen, I think, was his name.

Lorbacher says of Stapf:‡ Endowed with brilliant talents, a wealth of knowledge, and personal amiability, he was the active and vivifying element in the small circle, for which his peculiar and somewhat mercurial vivacity and his sparkling wit eminently qualified him. That both the above named qualifications remained to him in a high degree in advanced life I had an opportunity of becoming personally convinced during a visit I paid him at Naumburg. The hours I passed in his company

* *N. W. Jour. Hom.*, Vol. iv., p. 184. *All. Hom. Zeit.*, Vols. xxxviii., xxxix.

† *N. W. Jour. Hom.*, Vol. iv., p. 227.

‡ *Brit. Jour. Hom.*, Vol. xxxii., p. 454.

are among the pleasantest recollections of my life. A firm friendship which nothing could disturb bound him to his Master to the end. By his participation in the provings of medicines and the great number of accurate and reliable symptoms he contributed, as well as by his *Archiv* and the number of scientific articles he furnished towards the foundation and establishment of the new doctrine, he has raised a lasting monument to his memory.

Stapf was the prover of thirty-two medicines. He was an indefatigable worker and was much esteemed by his fellow physicians for his extended knowledge.

To him is due the honor of originating the first Homœopathic journal in the world. In 1822 he became the editor of the "*Archiv für die homoopathische Heilkunst.*" It was published at Leipsic, three times a year. He continued its editor until 1839. It was the organ of the German Homœopathic Union. He published several pamphlets upon the subject of Homœopathy. In 1829 he collected and edited the fugitive writings of Hahnemann which he issued under the title: "*Kleine medicinische Schriften, von Samuel Hahnemann.*" Dresden. Arnold. 1829. This book was presented to Hahnemann on the occasion of his fiftieth Doctor-Jubilee, August 10, 1829. He also published a book known as Stapf's additions to the *Materia Medica Pura*. It is a collection of the provings originally published in the first fifteen volumes of the *Archiv*.

Stapf wrote for the *Archiv* under the nom du plume of "Philalethes," and we find Hahnemann in letters to him, asking him about the articles and also praising them. In the sixth volume of the *Archiv* are several essays, and in them he describes his conversion to Homœopathy, which was by reading the *Organon* soon after its publication.

During the last years of his life he seems to have held himself aloof from his former associates on account of ill health.

At the time of the dedication of the monument to Hahnemann at Leipsic, on August 10, 1851, Stapf was present. Russell in his "*Homœopathy in 1851,*" says: Hereupon the aged Dr. Stapf, the oldest and dearest friend of Hahnemann, stepped forward and deposited at the foot of the statue a wreath of laurel. It was touching to see the feeble old man, who seemed to be deeply moved by the part he had to perform in the ceremony, as he tottered with uncertain steps to bestow the emblem of immortality on the effigy of the dear friend of his youth and man-

hood, with whom he had borne the scorn and persecution of an illiberal world, and whom he would ere long rejoin.

He died at Kosen, on the 11th of July, 1860, in his seventy-first year.* At a meeting of the Leipsic Homœopathic Society, held July 21, 1860, the President expressed sorrow for the death of his associate, Stapf, and said: Stapf's meritorious services to the cause of Homœopathy are too well known to need particular mention here. During the last years of his life, as his bodily powers were no longer sufficient to still co-operate in the prosecution of the heritage directly entrusted to him by the Master, it was his express wish that the feud among Homœopathists might cease, and an honorable peace take its place. And so, may the peace which he so heartily wished when living reign among us now that he is dead.

Lutze thus chronicles his death: † On the 11th of July, 1860, 10, 1860, p. 112. there died at Kosen the first and greatest scholar of Hahnemann, the Sächsisch Meining'sche Medizinalrath Dr. Ernst Stapf, in his seventy-first year. Peace to his ashes, and rest, now his long pilgrimage is over.

WRITINGS.

De antagonismo organico meletemata. Lipsiæ: Hæhm. 1810.

Lucina. Berlin: Maurer. 1818.

Additions to Materia Medica Pura. Leipsic. (From articles publ. in first fifteen volumes of *Archiv*.) Trans. by Hempel. New York: Radde. 1846.

Editor of *Archiv für die homöopathische Heilkunst*. Leipsic. 1822-39.

Lesser writings of Hahnemann. Dresden: Arnold. 1829. (Kleine medicinische Schriften.)

J. CHR. DAV. TEUTHORN.

Teuthorn proved fourteen important medicines, but did not long continue a disciple of Hahnemann. Hartmann, a fellow-prover, soon lost sight of him. Lohrbacher says: ‡ We may leave out of consideration Teuthorn and Herrmann, who seem to have been inconsiderable personages, and of whose appearance as Homœopathic physicians nothing is known.

* *Allg. hom. Zeit.*, Vol. lxi., pp. 24, 32, 48. *Die hom. Volksblätter*, Vol. iii., p. 128. *Prager Monatschrift*, Vol. viii., p. 127.

Schweikert's *Zeitung*, September 7, 1831. (Account of portrait painted by Fräulein Louise Seidler.)

† *Fliegende Blätter für Stadt und Land über Homöopathie*. A. Lutze. July

‡ *Brit. Journ. Hom.*, Vol. xxxii., p. 453.

CHARLES FRIEDRICH GOTTFRIED TRINKS.

The following biography was written by the old friend of Dr. Trinks, Dr. Hirschel, soon after his death. It was translated by Mr. Walter H. Dunn, of Cambridge, England, and published in the *Monthly Homœopathic Review*.*

Trinks was born at Eythra, near Leipsic, January 8, 1800. His father, Daniel Gottfried Trinks, was a miller. At nine years of age he was sent to the village school. Fortunately for Trinks, his father's brother, Christian, was connected with this school. He being a well-educated man, soon perceived that in his nephew he had a boy of more than ordinary ability entrusted to his care. Under his direction Trinks made his first acquaintance with Latin and French, with history, mathematics, and some branches of natural science. With Greek he scraped an acquaintance with no other aid than that of a Greek grammar.

In 1814 he was removed to the Grammar School of Merseburg. Here he worked hard, his industry being rewarded by the love of his teachers and the generosity of his uncle, through whose liberality he was enabled to devote himself to the study of medicine. Unhappily his uncle died shortly after his entrance at the University of Leipsic. With his death his means of living became greatly straitened. His mother having always opposed his desire to become a physician, in the hope of turning him to more profitable account as a miller, limited his allowance to some six shillings a week. Trinks was in earnest, and a poor dinner never yet stood between the man who is really in earnest in the acquirement of learning and the accomplishment of his design.

What Trinks wanted in money he made up for in energy. Before going to Leipsic the surgeon of his native village, Bodentein by name, had given him some instruction in the elementary parts of practical surgery.

With this gentleman, who removed to Leipsic, he resided during his career at the University, which commenced at Easter, 1817, by his being enrolled a pupil of Beck, a well-known physiologist of that day. He remained at the University until July, 1823, taking his degree of doctor of medicine in the September following. The title of the thesis defended by him on this occasion was as follows: "De primariis quibusdam in medicamentorum viribus recte æstimandis dijudicandisque impedimentis

**Monthly Hom. Rev.*, Vol. xiii., p. 122.

ac difficultatibus." In this essay the author displayed that love of therapeutics which he never ceased to feel during the whole of his career, and to his intimate acquaintance with which may be traced his success as a practical physician. In this youthful production he displayed, in correct and classical Latin, the sources of error in acquiring a knowledge of remedies which have arisen through theoretical speculation and fallacious experiments. He pointed out the difficulties surrounding the prescription of medicines caused by variations in the susceptibility and power of reaction of the organism, those presented by age, sex, constitution, mode of life, and by the combination of drugs in estimating aright the nature of medicinal action. The influence of the Homœopathic school upon him is here observable in his desire for experiment, for obtaining the specific and dynamic action of drugs, and in the need he sees for a simple arrangement of remedies.

Previously to the time when this thesis was defended he had been acquainted with some of Hahnemann's colleagues, with Franz and Hornburg, and subsequently with Hartmann, Langhammer and others. No one, however, had greater influence over the young student than Hartlaub, senior, who earnestly directed him to the new therapeutic light, their mutual interest in which formed a bond of union and enduring friendship. Hahnemann, whom he frequently saw on the promenade at Leipsic, he visited first at Coethen in 1825, again in 1832, and once, subsequently, with Councillor Wolf.

In 1824 Trinks settled in Dresden. He and Ernst von Brunnow were the earliest Homœopaths there. His intellectual clearness, his critical acumen and ability as a physician soon gave him that prominent position required for the success of the new school, to the development of which he devoted an energy and a zeal which could not brook imperfection in anything towards which they were directed. Notwithstanding his increasing professional engagements he felt dull and lonely in Dresden and removed to Bremen, only, however, to return to Dresden at the end of the year 1826. His practice and reputation spread rapidly and provoked the enmity of his Allopathic neighbors so far as to lead to his being summoned before the magistrates on the charge of dispensing his own medicines, a practice prohibited in Germany, but long since permitted to Homœopathic physicians. In December, 1827, he married. In 1830 Trinks attended the first meeting of Homœopathic physicians held at

Leipsic, and assisted at the foundation of the Central Society of German Homœopathic Physicians. In 1832 he made the acquaintance of Griesselich, whose views, coinciding with his own, induced him to contribute largely to the *Hygea*.

The only volume of importance published by him was that in which he was a joint author with Noacks—the well-known Noack and Trinks' Handbook of Materia Medica; but the essays he has contributed to the periodical literature of Homœopathic medicine are numerous.

The two diseases in the study of which he felt most interest were typhus fever and cholera. On the former he was engaged in the preparation of a monograph at the time of his death. In August, 1867, at a meeting of the Central Society, he excited the admiration of the members present by his excellent, albeit extemporary, address on cholera.

In person Trinks was tall and stately; his head handsome and well developed; his blue eyes expressed the earnestness and power of penetration which marked his character; while the roseate hue of his cheeks gave the old man quite a youthful freshness of countenance which he never lost to the last.

Intellectually he was clear, keen, and critical to a fault. It was in polemical rather than in original oratory that he excelled. He was an eminently practical man with but little poetical taste. He possessed a well-stored and a wonderfully retentive memory. This preference for fact over theory, his love for the real rather than the ideal, contributed largely to make Trinks what he was, a thorough physician. Homœopathy he loved, because in its school alone did he meet with that full development of the principle of pure observation he felt to be so necessary for the practice of medicine. A thoroughly independent thinker, it was not long before he found himself somewhat opposed to Hahnemann; and on one occasion he had a warm discussion with Bœnninghausen, when he endeavored to introduce mixed medicines into the practice of Homœopathy. He most earnestly opposed everything in the shape of mysticism, everything having the aspect of humbug with which it was sought to connect Homœopathy. On these grounds he declared himself an enemy of the so-called high potencies and a supporter of the lower dilutions.

Trinks' manner to one seeing him for the first time was often blunt and even somewhat repulsive. In diagnosis and prognosis a want of caution in communicating his apprehensions to

patients was often remarked in him. His dietetic rules for those under his care were very rigid, his prescriptions, carefully selected, were adhered to with a tenacity which, though often regarded as unwise by those around him, was generally rewarded by satisfactory results.

Books afforded him the only recreation from professional duty he cared to enjoy. His habits were of the simplest, and their being so doubtless conduced materially to maintain that degree of sound health which during forty-four years of arduous professional labors knew not the interruption of a single day. His reputation as a physician, and his services to persons of high rank, met with suitable acknowledgment in his decoration with several royal orders and his advancement to the position of Medical Councillor.

Throughout the North of Germany Trinks was regarded as the most distinguished physician who had practiced Homœopathy since the time of Hahnemann. His sound and varied learning, his thoroughly critical character, the care he bestowed upon his patients, and the success which attended his treatment of disease, together with his important and valuable contributions to medical literature, rendered him much sought after by patients, and his opinion highly esteemed by his medical brethren.

He died at Dresden on the 15th of July, 1868, after an illness attended with much suffering. His widow, a son, holding a judicial position in Leipsic, and a daughter, the wife of a military officer, survive him.

Dr. Trinks died at Dresden, June 15, 1868, at the age of sixty-nine years.* One of Hahnemann's earliest disciples, he was also one of the greatest gains to the new system. A man of indefatigable industry and self-sacrifice, he contributed largely to the construction of the Homœopathic Materia Medica, and his name will be found constantly recurring among the band of provers who aided Hahnemann in his herculean task. He edited with Hartlaub the valuable *Arzneimittellehre and Annalen*, which gave to the world so many excellently proved remedies and practical observations. In conjunction with Noack, or we should say almost single-handed, for Noack soon gave up, he published the Materia Medica that bears their joint names. He was incessantly contributing papers of the most useful sort, practical remarks, criticisms, to the Homœopathic periodicals almost to the day of his death. In these papers he always showed himself

**Brit. Jour. Hom.*, Vol. xxvi, p. 693.

fully up to the science of the day, and to the last he took the keenest interest in the progress made in all branches of medical science. At an early period of the history of Homœopathy, when Hahnemann was in danger of being led away by some of his enthusiastic but incautious disciples to promulgate crude and untested notions, Trinks' common sense prevailed with the founder of Homœopathy and prevented him committing himself to views that could not stand the test of experience.

Trinks enjoyed a large practice and retained for life the confidence of a large circle of patients. He was a man of genial disposition and had a fund of wit and humor which sparkled in his conversation and often appears in his writings. He was buried at his birthplace, Eythra, a village not far from Leipsic, and was followed to his last resting place by a numerous company of admiring and sorrowing friends.

WRITINGS.

De primariis quibusdam in medicamentor. Viribus recte æstimandis dijudicandisque impedimentis ac difficultatibus. Lipsiæ: Brockhaus. 1823.

Homœopathy, an Open Letter to Hufeland. For the Benefit of the Homœopathic Endowment Fund. Dresden: Arnold. 1830.

Samuel Hahnemann's Merits in regard to the Healing Art. An Address at the Meeting of Homœopathic Physicians in Dresden. August 10, 1843. Leipsic: Schumann. 1843.

Handbook of Homœopathic Materia Medica. Edited by Noack, Trinks, and Muller. Leipsic: Weigel. 1843-48.

[See also Hartraub and Trinks.]

F. C. URBAN.

No data obtainable.

G. WAGNER.

Dr. Langheinze in an article, * "Relation of Peruvian Bark to Intermitent Fever," says of Wagner: Still more defective appears the last of the proving histories to be adduced, viz., that of G. Wagner. Nothing but the idea of enumerating here, in connection, as many as possible of the symptoms of the *Materia Medica Pura* could justify or excuse its insertion here; for out of seventeen symptoms only nine have the time specified. Besides which we know neither the condition of the prover, the dose, the form, nor the time of taking it!

* *Brit. Jour. Hom.*, Vol. xxiv., p. 377.

PICKINGS FROM THE TRANSACTIONS OF THE INDIANA INSTITUTE OF HOMŒOPATHY FOR 1895.

Eye Strain a Cause of Anæmia.

A paper by Dr. W. B. Kreider opens the Transactions. It tells of a case of a fair and apparently healthy young girl, or woman, who was compelled to give up all studies, and work, and who developed what looked very much like pernicious anæmia with "headache, loss of appetite, the happy nature despondent, and neuralgic pains to cause sleepless nights." Treatment was useless. At last she came to Dr. Kreider, who examined her eyes, prescribed a pair of glasses and the troubles of the young lady were over. Surely, as the writer says: "The science of ophthalmology does not tread a narrow field."

Placenta Prævia.

Dr. Wilmot Moore's paper tells of a lady whom he attended in three cases of Placenta Prævia, with dead fœtus, in all of which the patient made good recovery. One year, one month and three days after the last case the lady gave birth to a fine boy and in due time this was followed by two others, all living. The sole remedy used by Dr. Moore in the three cases was the "valuable, but sadly neglected," *Erigeron Canadensis*. "This was my sole reliance, and has been my trusted remedy in all cases of active uterine hæmorrhage for a period of more than thirty years and I am glad to record the fact that all such cases in my care have been conducted to a successful termination." Dr. Moore uses the first decimal trituration on the tongue. It is a remedy well worth bearing in mind by practitioners when called in to these alarming cases.

Malaria.

Dr. G. W. Bowen's paper was unusually interesting and we will quote from it rather extensively. He had for many years made a study of malaria, and "in the summer of 1862 vegetable matter of different forms was decomposed in my office in glass jars, and malaria was freely generated. Persons were hired to inhale the gas evolved in its different stages of decomposition, and a careful observation of its effects on them was made that gave me a clue to its future use, and the only reliable guide for combatting its effect when acquired naturally."

“Not only did the gaseous form demonstrate, but subsequent use of the liquid product prove it capable of producing not only the three leading types that the past years had made me conversant with, but also others of a minor grade yet of unsuspected parentage.

The miser made delight of added gain,
Was like a pebble on the shore again,

In comparison to the satisfactory consolation that came as a realization of the comprehension of the producing cause. Henceforth the battle need not be carried on mid the gloom of night.”

“The decomposition of the vegetable matter passed through three stages or degrees. The first gave off gases freely, yet of not so offensive odor as later. After ten days or two weeks the expense of securing inhalers was more than doubled, even for one moment of time. After three or four weeks not much gas was generated, for it seemed only capable of lying still and sending its fearful odor heavenward. Inhalation of the gases evolved produced for the first week or ten days a headache, nausea, distress in the stomach, coated the tongue white, and this in from one to two hours time generally; and there, if not carried too far, would generally pass off in two or three days. Inhalations after ten days or two weeks did not produce results in less than twelve or twenty-four hours, according to time and amount inhaled. Then there was fearful headache, nausea, aversion to food, distress through the hypochondriac region, first in the spleen, the liver and stomach, and on the third day chills that would doubtless have continued on indefinitely if not interfered with.”

“After decomposition had gone on for three or four weeks, it was ascetic and simply fetid to a fearful degree, and no results except nausea were apparent in any one exposed to it in less than three or four days. The first was extreme lassitude and loss of appetite, and apparently a continued fever, with an unlimited amount of pains and aches and a lassitude that limited locomotion.”

“Three vials of the watery tincture was saved, one each from the various stages of decomposition, and from these an attempt was made to make provings and find out what were the reliable antidotes to them, and thus be able to cope with my invisible foe in my daily avocation. Their provings were not carried far enough, or continued long enough to be justified in placing them in our materia medica, but are ample to aid and guide the

future steps that ought to be taken. Its discontinuance was rendered rather necessary by my enthusiasm that led too far in a few cases, but the antidotal effects of certain remedies amply compensated me for my financial and reputational loss."

"Bilious colic, nausea, cramps, diarrhœa and headaches was readily secured from a few drops of the first vial, in many cases, while the second vial gave me a large number of cases where the liver, spleen, stomach and kidneys were apparently seriously involved, and not them alone, but fair types of intermittent fever with its attendant shakes, some daily, some tertian."

"With the third vial trouble came, as it did reduce many that had been able to be up and around to their beds, and unmistakably cause them to get worse, and cause them to degenerate into a typhoidal or semi-paralytic condition. In a few cases I was deprived the liberty of finding my antidotes and helping them out of the dilemma."

Among the experiments made with these strange tinctures, if they may be so called, was the following, which the RECORDER'S readers will recall as strangely confirmatory of a speculation advanced in one of Dr. Hering's recent contributions that consumptives are benefitted, or even cured, by being exposed to malaria.

"It was a lady, the last of a family of five, all others had died of consumption, and three in her preceding generation of the same disease. I doubted the probability of saving her, yet *theoretically* decided that as the primitive action of malaria was first, the spleen, next the liver and stomach, that I would develop an artificial or drug disease there, in hopes that her chest would be relieved and doubtless be benefitted. She was given the tincture from my second vial, and on the fifth day she had a fairly perceptible chill, and a harder one the sixth and seventh. On the eighth I saw her shake for one hour, and her fever lasted over six hours. Out of pity my drug was neutralized and her health was restored, with no more cough distress in her lungs or heart. She was cured of her tendency and certainty of dying with consumption. She remained well for twelve years when she was lost to my call."

In his search for remedies, or antidotes, for the malarial poisons, Dr. Bowen was disappointed in *Eupatorium perf.* In his experience the following remedies are best:

"For the first or primitive effects, the remedies that did act most promptly and effectually were *Nux vomica* and *Bryonia*,

thus calling to mind the effect of those remedies that experience had led me to use in the attacks that come in the summer, that are usually designated as of a bilious nature."

"In the secondary form, or where my malaria seemed to be the result of the decomposition of the material or vegetable fiber, its effects were more permeating, as different symptoms were developed by it. Then a change of remedies (or chemical antidotes, if you please), became necessary, and far the best results were secured by the use of *Bryonia* and *Arsenicum*. *China* did not act well or give any reasonable satisfaction."

"Prior and later experience give ample satisfactory proof of the utility of the use of *Arsenicum* in all types of an intermittent nature, yet not to discredit the fact that other remedies can and will cure this form. But that a pernicious case can, or will be as readily restored by any other remedy, I reserve to myself the liberty to doubt. Opportunities and time have demonstrated that these two remedies are amply able to restore the system and remedy a majority of the diseases that are wont to make their advent in the early Autumn or late in the Spring."

"Later, after the total decomposition of my vegetable matter had taken place, and it almost seemed to possess a demoniacal potency or power to undermine the noblest human form, then to my surprise *Bryonia* seemed to hold prestige, and give splendid results, but needed a different assistant, one that could and would permeate the muscular system, yet slowly, and for this *Rhus tox* was called into requisition, and from that day to this it has not been the means of causing me a single disappointment."

Again, and as a last quotation from this interesting paper, we quote :

"Many years of observation have demonstrated one more important fact in relation to the means that will render the system less liable to its absorption, at least to that extent that it will give evidence of its presence, and that is, by the liberal use of coffee."

Artificial Diseases.

Under this heading Dr. A. W. Holcombe gave some of his experience in treating drug diseases. Here is one of them:

"Mrs. D——, aet. about fifty-eight, twenty-six years ago had ague, took immense quantities of *Quinine*, and suppressed the chills, since which time has never been well. Has neuralgia, rheumatism, palpitation of the heart, kidney and stomach trouble,

Two of the best Homœops. physicians in Chicago had prescribed at various times, but when one trouble was relieved another one appeared. Upon inquiry, as Hahnemann directs, I found that *Quinine* was the only medicine that she had taken in any quantity, and so I gave her a dose of *Chin. sul.* cm potency. In forty-eight hours she had her old chills again. I let her shake for a week, during which time all her other trouble disappeared. I then gave her a dose of *Nat. mur.* cm., which cleared the whole field."

Another case, that of a lawyer, who complained of loss of memory and absent mindedness; he had several large well-worn amalgam fillings in his teeth; he was restored to health by *Amalgam* cm. Also a baby who had taken too much *Castoria* was cured by *Castoria* cm., and so on.

Pyrogenium.

Dr. J. H. Allen treats of this remedy at length. Of its use in typhoid he says: "In typhoid fever running over four weeks there is very apt to develop a condition calling for this remedy; of course, depending on the character of the symptoms. Cases coming from the Old School after having run along for three or four weeks, and being treated by the usual methods, either run into typhoid pneumonia, or a septic condition is set up."

"The symptoms that will first call your attention to this remedy are usually the foul smelling discharges, the breath, the diarrhœa or perhaps urine, while the patient may be suddenly taken with a chill, with a rapid rise of temperature; pulse so quick it can scarcely be counted, tongue dry, nose pointed, upper lip drawn, exposing the teeth, which are covered with sordes, and a cadaverous smell from the mouth, it will often follow *Baptisia* or *Rhus*, especially if we get a high temperature, with rapid, feeble pulse, more especially if we find a subnormal pulse or temperature after the disease has run a course of three or four weeks, or about the time the temperature should begin to decline. These cases, whether treated Homœopathically or not, never had any similia or this dreadful condition would not have developed. When a case of typhoid fever dwells on my hands longer than three weeks, I am fully convinced in my mind that I have not benefited the case and that similia has not been truly applied. A case of typhoid fever treated by the true similimum should have very little, if any, delirium, no sordes on the teeth no subsultis tendinum, and the diarrhœa should not last longer than a few days."

“Threatening paralysis of deglutition or the voice are symptoms frequently calling for this remedy in typhoid fever. She speaks as though the mouth was full of partly masticated food, or she complains of a numb feeling all over her, with a taste of blood or pus in the mouth. Abscesses following typhoid fever, typhoid pneumonia, typhus or other septic fevers, which discharge a dark-colored, foul smelling pus, often blistering the part it passes over; neglected pneumonia, especially where pus has remained long in the lungs, where the cough has been suppressed by cough syrups, or there has not been vitality enough to raise it. In tuberculosis we have received no benefit from it whatever, although my good friend Dr. Kent, in his article on *Pyrogen*, to the “Advance,” some time ago, highly recommends it in septic fevers of tubercular patients. With all due respect to the Doctor, I think he is very much mistaken. For my part, I can see no relation between the sepsis produced by the breaking down of the tubercle in tuberculosis and *Pyrogen*. A potency of the tubercle is better. The symptoms of *Pyrogen* are quite unlike that of tuberculosis, and I think you will all readily see the difference. The cough is like *Pulsatilla*, being better by motion and worse in a warm room, and is accompanied by rattling in the chest, similar to *Tartar emetic*. The face is often pale, clorotic, greenish, hypocratic, sunken, death like, bathed in cold sweat.”

Vaccination and Smallpox.

Dr. E. W. Clarke is out in his war paint against vaccination and winds up his paper, entitled “A Century of Medical Dishonor,” as follows:

“The inherent ridiculousness of vaccination (if I may use a word comparable with the practice) is shown by the fact that no less than sixteen different vaccination agents have been used. After variolation Jenner used swinepox, then humanized cowpox, then horse grease cowpox; then plain horse grease, then plain cowpox and back to variolation when he had lost the others. Other physicians introduced different “vaccine lymphs,” one having its source in the cattle plague, another in sheep smallpox, and another in goat smallpox. We have also the smallpox buffalo lymph cowpox, the “pure calf lymph” hobby, donkey lymph and the arm-to-arm human scabs kind. To this noble thirteen the Homœopaths have added three variations—vaccinum, variolinum and malandrinum (the latter being horsepox), evi-

dently preferring to let the patient eat his poison instead of having it injected into his blood direct. The variolinum is, of course, somewhere near scientific, all the others crude superstitions and rank blood assassinations."

"In conclusion, it is a wonder that this ridiculous delusion can continue to hold a lodgment in the brain of anyone who pretends to have received a scientific education. The superstitious practice has long been weighed in the balance, and from the very first found wanting. Let us hear no more of it, and if we are obliged to hear of it let us do all in our power to make it but a memory of the foul blot on the fair escutcheon of the noble art and science of medicine."

An Antidote to Cocaine Poisoning.

Dr. J. G. Gundlach, of Spokane, Washington, contributed the following paper:

"In November, 1894, I was called to the office of Dr. ———, a prominent Dentist, to attend a young woman into whose gums they had injected a small quantity of a ten per cent. solution of *Cocaine*, from the result of which they soon thereafter noticed some difficulty with her breathing, along with a condition of stupor, from which they could only arouse her by loud calling. They began at once to apply such stimulants as *Spt. of Ammonia* and Whiskey to counteract these symptoms, but all to no purpose. Jerking and twitching of the limbs began, soon going on to clonic spasms. At this the Dr. became alarmed, and I was called in to help."

"By this time she was having general clonic spasms, beginning with twitching and jerking of both upper and lower limbs and throwing her body, so that it was with difficulty we could hold her in the chair. The spasms always began in the limbs, passing on to the body and neck, reaching the larynx, when her struggles became frightful, lasting so long that I feared she would die before it would pass off. She would throw her head back as far as she could get it and with both hands beat and clutch at her neck. At this point she would give several loud crowing inspirations and the spasm would relax, to repeat itself after a short interval with all its horror. The stupor was now profound and she could not be aroused from it, even during the interval of spasms. The organs of deglutition became paralyzed; fluid placed in her mouth would run out again."

"The symptoms of profound stupor with inability to swallow,

and the spasms of the larynx, brought Gelsemium to my mind. The only preparation of this remedy which I had was the 1 M. potency, B. and T., which I gave to her, thinking that if she did not get better at once I would send and get the remedy in the θ . But to my wonder and astonishment, it soon began to do its noble work, and, in fact, right nobly did the POTENCY do it. She had only one or two spells after the first dose; they became lighter and further apart. Consciousness and power to swallow soon returned and in an hour's time, with the assistance of friends, walked down two flights of stairs and was driven home. Report next day—No further trouble."

"Gentlemen the story has been told; you can draw your own conclusions. I am sure you will all rejoice with me in the fact that an antidote, hitherto not known, for such a useful but dangerous and treacherous drug as *Cocaine*, and that in line and through our beloved law—*Similia Similibus Curantur*."

The Doctor in whose office this case was treated now keeps *Gel.* on hand, and having a very large practice has daily use for *Cocaine*, and before this discovery was made was always in fear and trembling, as he never knew how *Cocaine* was going to act, but now he does not mind it in the the least, for as soon as any symptoms manifest themselves, he gives a dose or two of *Gels.* and that is the end of it, which he has proven scores of times.

ASAFŒTIDA AND THE SECRETION OF MILK.

By Dr. Kallenbach, in Berlin.

Translated for HOMŒOPATHIC RECORDER.

The disappearance of the secretion of milk in nursing women is a mischance every physician meets with at times, and it is a very troublesome concomitant of the lying-in period; and the nourishing diet usually advised to meet it, as well as the coffee frequently used as a domestic remedy in various forms, nearly always leave him in the lurch. From my reading of Allopathic journals, if I mistake not, from *Casper's Wochenschrift* of 1842, I gathered the observation that the repeated application of *Asafoetida* on the gastric region, a measure frequently resorted to with hysterical women, at times has *the swelling of the breasts and the running out of a milky fluid* as a consequence.

This experience I have made use of effectually in the following cases:

a. Mrs. Gaertner, aged thirty-four years, the mother of six children, of vigorous, athletic build of body, and of a rare, abundant fullness of health, has never been able to nurse her children, because every time, eight to fourteen days after her delivery, the milk diminished and after at most three weeks it entirely vanished. In April, 1843, she was delivered of her seventh child, and after the milk had appeared to a moderate degree after four days, on the tenth day it began to come more sparingly, so that on the fourteenth day after her delivery only a few drops could be squeezed out of the nipple. Of our officinal tincture of *Asafœtida* I put *one drop* into a drachm of alcohol, and every day I gave her three times five drops on sugar. *On the second day after beginning the use of this remedy the secretion of milk was again in full operation.* The suckling drew in in full draughts its nourishment, and on the third day the evacuations of the suckling plainly smelt of *Asafœtida*. After eight days I intermitted the remedy and the nursing now proceeded uninterruptedly for three and a half weeks. After this time an interruption again occurred, which called for the repeated use of *Asafœtida*. But as the lady complained much of the bad taste of the remedy I now gave her the third dilution made according to Hahnemann's prescription, though even in this attenuation the drug was perceptible both to the smell and taste. The result was again favorable, as the milk reappeared. After respectively eight and thirteen weeks relapses in the flow of milk took place, but they were always removed by the third attenuation of *Asafœtida*, until the milk totally and suddenly ceased to flow in the eighteenth week, owing to a fit of vexation; this time it did not return despite all the remedies used.

b. Mrs. Kæmpf, a youthful, vigorous wife of twenty-one years, after her first delivery, in the sixth week from that time, perceived a noticeable diminution of the secretion of the milk, so that the suckling, who was very vigorous, no more found sufficient nourishment. I ordered the third dilution of *Asafœtida*, and after four days the secretion of milk was again abundant. I then made her take every week a dose of five drops on sugar, and to this day, the ninth month after delivery, the suckling is still at the mother's breast.

c. Mrs. Schwarzrock, aged thirty-four, of somewhat delicate build, had nursed three children; but according to her own expression the milk always flowed sparingly, so that after the sixth week she had usually to give the bottle besides. On the 16th of

September, the preceding year, she was delivered of her fourth child, and on the 17th of November I had her under my treatment on account of an insignificant rheumatic affection of the hip. On this occasion she lamented that her milk had already decreased, and that the child had received additionally other food for three weeks. The nipple appeared limp, and on squeezing it only a few drops of very thin milk were pressed out. After removing her rheumatic trouble she received *Asafetida*, third dilution, daily three times, but without any visible result. When the expected result did not appear for eight days I increased the doses and gave the first dilution (Hahnem. scale) every day three times, and this time again with striking result. The first doses were taken very unwillingly on account of the disagreeable smell and taste. But when on the third day the breasts were manifestly more turgid, and the milk flowed more abundantly, the nursing mother took the medicine without opposition for five more days. Then I allowed her to stop as the secretion was abundant. On the 28th of December Mrs. Schwarrock complained that for several days her milk was again checked, and she asked for the former remedy. I then again gave her the third dilution in the expectation that a slighter impulse would now be sufficient, and I was not disappointed in my expectation. The nursing mother now takes a dose of five drops of the third dilution and her milk flows more abundantly than in her former deliveries, and is at the same time more nutritious, as she has been able to altogether leave off the additional bottle of milk which she had been giving before. In her own food she has not made any change, so that the more abundant and nutritious secretion of milk may be unhesitatingly ascribed to the remedy.

d. In a fourth case, Mrs. Voigt, the remedy did not act, because four days after its use peritonitis puerperalis set in, which after two relapses was only healed in four weeks, during which time the breasts had shriveled up and despite every effort could not be brought back to their function.

LITHÆMIA AND PSORA.

Edward Cranch, Ph. B., M. D., Erie, Pa.

(Abstract of a paper read before the County Society, October 2d, 1895.)

The President, Dr. Wilson, having requested a paper on

Lithæmia, or some similar subject, one was prepared, comparing the requested subject with Psora, as Hahnemann knew it. Lithæmia was pronounced, on the strength of modern authorities, identical with latent gout, or the gouty diathesis, also called arthritism.

Foster's first definition of psora, viz., scabies, is only a modern limitation of a more general former meaning given by Foster, as, "any cutaneous disease, attended with abundant exudation, pustulation, and crusting," the name derived from *ψαω*, to rub. Foster might have added the psora "of Hahnemann," and defined it as follows: An acquired or inherited non-venereal contagious diathesis, predisposing the organism to yield readily to all other causes of disease; its local sign, if any, being a vesicular eruption, with furious itching and an alleged specific odor. For its symptoms, when comparatively latent, see Hahnemann's work on *Chronic Diseases* (Vol. I., pp. 58 to 100, 2d ed., 1835). Hahnemann also used the ancient meaning of sycosis, from *σῦχος*, a fig, hence the figwart disease. Foster gives this meaning, but the modern meaning is more common, and different, viz., a scab of the beard, or barber's itch. Hahnemann uses miasm in the sense of diathesis, as when he speaks of the gigantic miasm of psora, asserting its derivation from the leprosy, although the quotations from the Old Testament which he offers (incorrectly copied in Hempel's translation) show as great distinction between leprosy and itch then as now. A brief account of his idea of psora is given in § 80 of *The Organon*, where, after speaking of syphilis and sycosis, he says: "Immeasurably greater and more important than both these known chronic miasms is that of psora. While the other two declare their specific inner disorders, one by the venereal chancre, the other by the cauliflower excrescences, psora, after it has completely poisoned the whole interior of the organism with its monstrous miasm, shows itself by means of a peculiar skin eruption, sometimes only in single pimples, with an intolerable tickling and voluptuous itching, having also a specific odor. This psora is the true fundamental cause and promoter of all the other, yes, countless forms of disease, which appear in pathology as distinct independent diseases, under the names of neurasthenia, hysteria, hypochondria, mania, epilepsy, rickets, caries, cancer, neoplasms, gout, hemorrhoids, pruritus ani, bleedings from stomach, nose, lungs, bladder and uterus, asthma, hemicrania, dropsy, paralysis, scrofula, consumption, chronic catarrh, etc., etc." (Hahnemann

names many more, here and in his *Chronic Diseases*, but these are enough to show the drift of his argument.)

It is known that Hahnemann was well acquainted with the itch mite, and at one time advocated its extinction by a wash of *Hepar sulphuris* and Cream of Tartar.

This was in 1792. In 1805 he began publicly to reject the common practices of his day, in 1810 he published the first edition of his *Organon*, in 1811 he began his *Materia Medica Pura*, in 1816 he began a systematic study of chronic diseases, which he first published in 1828, inserting an allusion to it in a note to § 73 of the fourth edition of his *Organon*, being § 80 of the fifth, and quoted just above.

In the first volume of his *Chronic Diseases* (pp. 22-40, 2d ed.) he gives scores of quotations, all carefully annotated, from writers who observed ill effects following suppression of various skin diseases, and from these quotations he draws his great argument, in the following words (p. 41, *ibid*): "Who now, after reflection upon these four examples, which are taken from the writings of older physicians, and augmented by my own experience, could well remain so foolish as to overlook that great evil, psora, concealed in the interior, whose signs are the itch-eruption, *and other forms*, scald-head, milk crust, eczema, etc., and not see that where these local symptoms are outwardly soothed there remains an interior, uncured disease of the whole organism? Who, after reading only these few cases, would deny that psora is, as said above, the most pernicious of all chronic miasms? Who would be so bold as to maintain, with the modern Allopathic physicians, that the itch-eruption, scald head, and eczema are only superficial skin affections, and can and must, without hesitation, be driven away, while the interior of the body takes no share in them, and so remains healthy? Truly, beyond all mischiefs which one can point out among the modern physicians of the other school, this is the most harmful, infamous, and inexcusable! He who will not, from such and countless other examples, see the contrary of that assertion, beguiles himself on purpose, and works intentionally for the destruction of mankind."

Hering, in his preface to the *Chronic Diseases*, says: "Improvement in diseases takes place from within outward."

Now in modern writings, especially in the works of Henry M. Lyman, of Chicago, writing in Pepper's *Text-book*, and Stedman's *Twentieth Century Practice*, gout is demonstrated to be the

underlying diathesis for a list of ailments nearly as long as Hahnemann's that *he* charges to psora. Lyman speaks of "the two great diatheses, gout and scrofula," and declares his inability always to distinguish them. It begins to look as if the old-school men were on the track of psora, but did not know what to call it.

Perhaps they will discover that beyond or within the chemical changes of lithæmia, lack of oxidation, etc., is a morphologic change in cells, inherited or acquired, a sort of *cyto-stenosis*, or cell-contraction, which, by hindering processes of elimination and repair, performs the part that Hahnemann ascribes to psora.

"And so the whirligig of time brings in its revenges.

—*Homœopathic Physician.*

CLINICAL AND THERAPEUTIC NOTES OF RECENT CASES.

Reported by Dr. McLachlan, Oxford.

Chronic inflammation of the Prostate.—*Pulsatilla*.—C. E., aged thirty-seven, came to me more than a year ago complaining of "pain in the fork," just behind the root of the scrotum; he described it as a *weight* or a *pressure*. It was better lying down or by leaning well back, and was made worse by leaning forwards. He sat on the edge of the chair with his legs well apart, and feels very much afraid lest anyone should run against him and increase the pain. His sleep was broken and restless. In regard to his other symptoms, there was nothing worth noting except that *during the time he was relating his symptoms tears were silently trickling down his face*; he was otherwise mentally depressed. There was no reason to suspect venereal disease of any kind. The condition had lasted about ten months. My diagnosis was "chronic inflammation of the prostate." I ought to have been in no doubt what medicine to give, but I am ashamed to say that I did not at first make a "bull's-eye." He was a worshiper of Beecham's pills (aloes probably), and that fact, together with the possibility of "portal congestion," and a hazy recollection of the dense venous plexus just under the capsule of the prostate led me astray. During the first week of treatment he got a few doses of *Nux vom.* 30. That producing no improvement, next week he got a dose of *Sulph.* 200. His

next report was that he had flatulence very badly, and had taken a few of "Beecham's pills;" this made the pain very bad again (which up to this time was *perhaps* a little easier). This time I gave him *Nux vom.* again, and a scolding. At his next visit there was no improvement worth noticing. At this visit his peculiar *mental state* at last impressed itself on my dense sensorium, and I was annoyed with myself for my stupidity in thus wasting a whole month in useless medication. On March 30 he was put on *Pulsatilla* 15, and on April 9 his report is "decidedly better." He then got *Sac. lac.* On May 5 he reported that he was better till yesterday, when after a long bicycle ride he felt a slight return of the pain. He was again put on *Puls.*, and since that time there has been no return of the symptoms.

[Consult *Pulsatilla* in *Materia Medica Pura*, symptoms 465, 487, 488, 489, 493, 494, 495, and various others up to 524, for a fairly good picture of diseases of the prostate gland.]

Infantile Colic.—Borax.

A baby, ten weeks old, had for some days been troubled with *sudden* screaming fits. They seemed to come on every ten or fifteen minutes, night and day. The baby would lie quietly for some time and then suddenly begin to scream and kick. During these attacks the face was red. *It must be nursed and carried about constantly*, but even then it would have the screaming attacks just the same. A day or two before this it had "white mouth," and had got a few doses of borax and honey, which very soon caused the "whiteness" to disappear. It was very *easily startled by noises*, etc., and they said it seemed to *start as it was being laid into its crib*. This last admission, however, was not voluntary, but only made after I had put "leading questions" about it, and therefore its value as a symptom was doubtful. I left *Chamomilla* 30, but in case it should fail I sent two powders, No. 1, of *Coloc.*, 30, and No. 2, *Borax*, 30, with instructions that they were only to use the powders if what I left did no good, and should No. 1 relieve not to go on to No. 2. I called in a day or two, and was told that the medicine I left did no good, and that No. 1 powder (*Coloc.*) was equally useless, but that after getting a dose or two of powder No. 2 (*i.e.*, *Borax*), it was not like the same baby. There had been no return of the colic. I suppose the colic was caused by the "white mouth going through" the child.

Progressive Muscular Atrophy—Plumbum.

I have given this case the above name, though whether it was

really a case of "progressive muscular atrophy" the readers must decide. The disease is one of the most chronic and incurable of all spinal affections. I was asked to go and see a Mr. H—, aged seventy-seven years. At times he was very sleepy and at other times just the reverse; his wife said he made too much water, though it was very clear. What caused her most alarm, however, was his peculiar mental state, together with his great muscular weakness and emaciation. Notwithstanding this, he was very restless, could scarcely sit still a minute, and even when sitting he could not be at rest, *e.g.*, he would constantly want them to change his boots, to take off one pair and put on another. In the mental sphere he did not look at all "himself." He would say "cutting" things to his wife and was *very* irritable; nothing was right; and he would not allow her to do anything else but wait on and attend to him. Once, too, his wife told me he struck her and attempted to bite her. At night he was specially restless, would get out of bed often and walk about, in spite of all his wife could do or say. In fact, he could not be left alone for a minute night or day, so great was the muscular weakness that he was apt to tumble down at any moment. His hands were cold and blue, and pricked on squeezing them. For about two months I did my best for this case, with but very little success, and what little improvement there was never lasted more than a day or two. One day I happened to notice that the *muscles of the ball of the right thumb were very much wasted*—especially the abductor pollicis and the opponens pollicis (supplied by the *median nerve*). Besides being wasted this part felt *numb*. His wife said that condition had existed for years, and they did not think anything about it. I sent him one dose of *Plumbum* 1,000 (the only potency I had) with *placebo*. In about a week there was a very decided and marked change for the better, both mentally and physically. In a few weeks he was able to take long walks (several miles) into the country by himself, and also to attend divine worship on Sundays; his house is about a mile and a half from the chapel. Further, he eats well and sleeps well, and is altogether better than he has been for many years. That was seven months ago, and the improvement still continues. His wife thinks the change little short of marvellous, and was at first doubtful whether it would last. This case shows the necessity of a minute and careful examination. In such examination we should (1) *hear* (2) *look* (3) *touch*.

—*Monthly Homœopathic Review.*

ACTION OF BORAX AND BORACIC ACID ON THE SKIN.

By Dr. Dudgeon.

The skin symptoms observed in Mr. Dudley Wright's case from *Boracic acid* are something like those observed by Dr. Molodenkow, of Moscow, from washing out the pleural cavity with a solution of *Boracic acid*. This was followed by an erythematous eruption on the face, followed, in a day or two, by erythema over the body and thighs and vesicular eruption on the face and neck. The pathogenesis of borax in Hahnemann's *Chronic Diseases* shows a number of skin symptoms similar to those in Mr. Wright's patient. Thus, we find "Erysipelas of the face;" "Swelling, heat and redness of the cheek;" "Swelling of the face, with papular eruption on nose and lips;" "Burning heat and redness of fingers;" "Erysipelatous inflammation and swelling of left leg and foot, after dancing much, with tearing, tension and burning in it, the burning pain increased by touching;" "Burning, heat and redness of the toes." Dr. Hughes, in his *Pharmacodynamics*, seems to think these symptoms, for which Schreter is the authority, were observed in patients, and therefore not very reliable; but the observations of Molodenkow and Mr. Wright, with regard to the very similar effects of *Boracic acid*, should give us more confidence in Schreter's record. The psoriasis observed by Dr. Gowers after a prolonged use of borax (*Cycl. of Drug Path.*, I., 586) shows that this substance has a marked action on the skin and deserves our consideration in cutaneous maladies.—*Monthly Homœopathic Review*.

WANTED.—However easy it may have been, or for that matter yet continues to be, to fill every chair in a Homœopathic school, it requires for the materia medica chair not simply some good-natured party with orotund delivery to strut through his brief hour, aided by mendacious manuscript and ancient anecdote, but a specialist—in the best sense of that much abused word. And the materia medica teachers, for obvious reasons, are not so plentiful to-day as the surgeons and gynecologists. It somehow seems to be dawning upon the other eighteen or twenty men and one woman that, perhaps, after all, there may be something in materia medica aside from the monotonous mouthing of a

borrowed, or a boughten, or a stolen papyrus; that the Homœopathic college—certainly many of the modern copies of the Homœopathic college of our fathers—has lost almost all its ancient landmarks in its hurried and indecent scramble to be abreast, if not in advance, of the dominant school, in order to be dubbed scientific and progressive and advanced; that now, at last, something must be done; the barbed wire must be stretched afresh and higher than ever before between the smiling and patiently waiting allopath, who has been lying low and watching the inevitable trend of the modern Homœopathic school; and so the eyes are turned once more upon materia medica in the hope that now, as in the beginning, it may again put life and enthusiasm into many of the so-called Homœopathic colleges of to day.—*Kraft, Am. Hom.*

CALCAREA FLUORICA IN CATARACT.—Mrs. H——, aged seventy-two years, came to me in October, 1892, presenting a well formed cataract in each eye. About a year previous to this she had begun to notice that her eyesight was failing her; re-fitting of glasses seemed to do no good. In July, 1892, she consulted an oculist who diagnosed the case as one of cataract but advised waiting three or four months before operating, though he thought the operation could be made at any time.

At the time that she presented herself to me it was with the utmost difficulty that she could read type as large as newspaper headings. There seemed to be very little difference in vision between the two eyes. She thought there was, if anything, a little less darkness before the right eye. Individuals could not be recognized. It seemed to her that she saw everything through a thick smoke. She could see the outlines of forms indistinctly at a distance of six feet, but could not recognize features.

Calcarea fluorica, 12x, one grain dissolved in twenty teaspoonfuls of water, and two teaspoonfuls were given three times a day. After this was taken four days were skipped without medicine, and the same prescription was repeated.

In February, four months later, she thought there was a lightening up of her vision, as there seemed to be less darkness before her eyes. The treatment was continued, but the medicine was given less frequently, and the following August she was able to recognize individuals on the other side of the street.

In February, 1894, one year and four months after the treatment was begun, she reported her eyesight as good as it was before the trouble had first made its appearance. In other words, she was able to read all ordinary print and do fine sewing on colored material as well as on white, by lamplight as well as by daylight. Considering the age of the patient I look upon the prompt action of *Calcareo fluorica* as remarkable.—*Nancy T. Williams, M. D., Augusta, Maine, in Medical Century.*

GOLD FRAMED SPECTACLES—Dr. W. H. Bates contributes a rather curious paper to *Medical Record* of October 19 on the subject of headaches caused by the gold in spectacle frames coming in contact with the skin. The paper covers four cases, each one the same in substance—patients relieved of asthenopia and headache by proper glasses, but when the same glasses were changed from steel to gold frames the asthenopia and pains became very severe and persisted until the gold frames were either removed or the part touching the skin covered with cork or rubber.

BOOK NOTICES AND GOSSIP.

Plea for a Simpler Life. By Geo. S. Keith, M. D., F. R. C. P. E. London. Adam and Charles Black, New York, Mac-Millan & Co., New York. 149 pages. Cloth, \$1.00.

Unlike most "pleas" this one does not appeal to the emotional side of human nature but to sound common sense; yet correct, yes, even scientific, though it is, we doubt if it ever will be a popular book, though it thoroughly deserves to be so. The author took his degree at Edinburg in 1841, and since then has traveled and studied in nearly every part of the civilized world. "From my varied medical education and experience it need not be wondered at that I gradually lost faith in the ordinary medical dogmas of the day, and especially in the depleting and drugging system as then practiced and considered orthodox. I had a strong conviction that Homœopathy—however wrong in its own dogmas—would at least show the absurdity of the orthodox system of drugging." He does not change his opinion of Homœopathy nor of "orthodox medicine" when it changed

into the latter day "scientific medicine." It is not, in his opinion, scientific, but the very reverse. "A genuine medical fact is about the most difficult fact to establish, so that it may be usefully and safely acted on." "Medicine as a fixed science does not as yet exist." While denying the truth of Homœopathy he is yet thoroughly in harmony with the teachings of Hahnemann in the *Chronic Diseases*. "I have constantly pointed out to my patients that eczema is a natural relief to the system, as it throws out safely on the skin some of the excess of plastic matter in the blood which it cannot dispose of in the natural way through the kidneys." But unfortunately "skin diseases" "are treated as diseases *per se*, and are checked if possible." The root of the majority of human ills is eating too much, and then, when the stomach rebels, physicians, nurses and friends make matters worse by seeking to "keep up the strength" by the very means by which the patient has been laid low. Some of his cases are really remarkable, but on these we have not space to dwell; but can assure the reader that a careful perusal of this book will make him a better practitioner. Even though Dr. Keith would not admit it, his book is a plea for a return to the earlier practice of Homœopathy in all respects save that of medication.

An American Text-Book of Obstetrics, for Practitioners and Students. Richard C. Norris, M. D., Editor; Robert L. Dickinson, M. D., Art Editor. Nearly 900 colored and half-tone illustrations. 1009 pages. Large 8vo. Cloth, \$7.00. Sheep, \$8.00. Half Russia, \$9.00.

This unusually fine specimen of the art medical illustration—which is becoming a very important branch in medical publishing—is "For sale by subscription only." Dr. Norris, the editor in chief, has been assisted in his work by Drs. James C. Cameron, Edward P. Davis, R. L. Dickinson, C. W. Earle, James H. Etheridge, H. J. Garrigues, Barton C. Hirst, Charles Jewett, Howard A. Kelly, Chauncey D. Palmer, Theophilus Parvin, Geo. A. Piersol, Edward Reynolds and Henry Schwartz, representing nearly all the great medical centres of the country. As said before, the illustrations are wonderfully fine and the text represents the latest in the "Science and Art of Obstetrics." Whether that latest will equal in satisfactory results the work, old though it be, of our own Henry N.

Guernsey is a question for the practitioner to decide. The mechanical part of the book is in the same excellent style that characterizes all of Mr. Saunders' books.

Pregnancy, Labor, and the Puerperal State. By Egbert H. Grandin, M. D., Consulting Surgeon to the New York Maternity Hospital; Consulting Gynæcologist to the French Hospital, N. Y., etc.; and George W. Jarman, M. D., Obstetric Surgeon to the New York Maternity Hospital; Gynæcologist to the Cancer Hospital, N. Y., etc. Illustrated with Forty-One (41) Original Full-page Photographic Plates from Nature. Royal Octavo, Pages viii, 261. Cloth, \$2.50 net. Philadelphia: The F. A. Davis Co. 1895.

"To-day the major part of obstetric practice is founded on *fact*. Where divergent views obtain, the weight of authority is on the one or the other side; at least it is safe to teach that which commends itself to the majority of teachers even though in a very short time further experience may cause modification in the teaching." So writes the author, and "on such grounds the present work has been prepared." It is divided into three parts, "Pregnancy," "Labor" and "The Puerperal State." The book is illustrated with forty-one full page half tones, all taken from life, throwing light on the many normal, and abnormal, conditions of child-bearing. The illustrations are printed on plate paper and bound in the work.

The Physician's Visiting List for 1896. Philadelphia: P. Blakiston, Son & Co.

The ensuing will be the forty-fifth year of the publication of this neat list. The price for a list allowing for twenty-five patients a day is one dollar; for fifty a day one dollar and twenty-five cents. The principal feature of the sixteen printed pages that precede the ruled matter is a "dose table," giving maximum and minimum dose by both apothecary and metric system, a great convenience to those who prescribe appreciable doses.

Practical Urinalysis and Urinary Diagnosis: A Manual for the Use of Physicians, Surgeons and Students. By Charles W. Purdy, M. D., Queen's University; Fellow of the Royal

College of Physicians and Surgeons, Kingston; Professor of Urology and Urinary Diagnosis at the Chicago Post-Graduate Medical School. Author of "Bright's Disease and Allied Affections of the Kidneys;" also of "Diabetes: Its Causes, Symptoms and Treatment." Second, Revised Edition. With Numerous Illustrations, including Photo-Engravings and Colored Plates. In one Crown Octavo volume, 360 pages, in Extra Cloth, \$2.50 net. Philadelphia: The F. A. Davis Co. 1895.

While it is true that the knowledge concerning urine, and the diseases of the urinary organs is fully abreast, or ahead, of the other branches of medical science, nevertheless that knowledge has, heretofore, been scattered through so many different works as to make its attainment both difficult and expensive. Dr. Purdy has gathered that scattered knowledge into one volume, and that his work is well done is evidenced by a second edition within a year of the first. The book is divided into two parts: Part I being devoted to the analysis of urine and Part II to urinary diagnosis. There are forty-four illustrations in the work, several of them colored and all of them illustrating the text in a very satisfactory manner.

A Manual of Syphilis and the Venereal Diseases. By James Nevin Hyde, A. M., M. D., and Frank H. Montgomery, M. D. With forty-four illustrations in the text and eight full-page plates in colors and tints. 618 pages. Cloth, \$2.50. Philadelphia: W. B. Saunders. 1895.

The authors say of the scope of their work: "This manual has been prepared with the intent of meeting the special needs of the student and of the practitioner, rather than the expert. The aim has been to supply in a compendious form, and with detail, all practical facts connected with the study and the treatment of syphilis and the venereal diseases. Care has been taken to avoid all points of controversy and to exclude the data which are to be sought for in the more voluminous treatises on these subjects." As for treatment of simple syphilis the authors, following Hahnemann, say that "*Mercury* by the mouth is in these cases the one efficient remedy." They recommend it in doses of $\frac{1}{6}$ to $\frac{1}{10}$ grain. While we cannot agree with the authors in all their therapeutics, we can say that outside of these the book seems to be replete with sound information and good sense,

probably the best published on the subjects treated. And as for therapeutics the Homœopathic practitioner has Lilienthal and Berjeau at hand to guide him in that field.

The Practice of Medicine. By William C. Goodno, M. D., with Sections on Diseases of the Nervous System by Clarence Bartlett, M. D. Vol. II. Philadelphia: Hahnemann Press. 1895.

The first volume of this work was published in the fall of 1894; the second and concluding volume is now out. It is almost a duplicate of the first volume in size, there being a variation of only twenty pages between the two. The first volume was sold through the regular book trade, but the second can be obtained through authorized canvassers only.

Materia Medica and Therapeutics. A Practical Treatise with Especial Reference to the Clinical Application of Drugs. By John V. Shoemaker, A. M., M. D., LL. D., Professor of Materia Medica, Pharmacology, Therapeutics and Clinical Medicine, and Clinical Professor of Diseases of the Skin in the Medico-Chirurgical College, of Philadelphia; Physician to the Medico-Chirurgical Hospital, Philadelphia, etc., etc. Third Edition, Thoroughly Revised. Reset with New Type and Printed from New Electrotype plates. Royal Octavo, Pages ix., 1108. Extra Cloth, \$5.00 net; Sheep, \$5.75 net. Philadelphia: The F. A. Davis Co. 1895.

In bringing out a third and thoroughly revised edition of this standard work Dr. Shoemaker has taken this opportunity to combine the two volumes of the second edition into one; this is undoubtedly a great improvement, as, whenever possible, works of reference should be in one volume, it being extremely exasperating to be forced to take down several volumes when in search of something. We would suggest to the publishers that if they bring out a fourth edition they could make another great improvement by using a little larger type for the dose table and the very excellent indexes. The book, though an accepted authority on well-known drugs, goes astray when it runs up against drugs that are run as proprietary medicines. Dr. Shoemaker, like Dr. Goodno, has got sadly mixed on the phytolacca berry question. He says, under the heading of "Phytolacca:" "M. M. Griffith claims that this remedy has very decided power

in diminishing obesity." Dr. Griffith said that a pill, or a tablet, made from the concentrated juice of the frosted berries of the phytolacca, had power to reduce obesity, and *not Phytolacca radix*. Going on Dr. Shoemaker gets tangled up with the pseudo science of the proprietary medicine ads., and says: "A resinoid called phytolin, said to be obtained from phytolacca berries by a process of sun distillation, possesses the property of reducing obesity without, it is claimed, affecting the general health." As a matter of fact this "remedy" is, to all appearances, simply diluted pokeberry-juice preserved by anti-ferments. In these days of purely scientific "reading matter" ads., book writers should be very careful about "new remedies." Aside from this little slip, Dr. Shoemaker's work is one that may be heartily commended to one who wants a late "old school" materia medica.

"DELICATE, BACKWARD, PUNY, AND STUNTED CHILDREN" is the title of a new book by Dr. J. Compton Burnett that will be out before the next number of the RECORDER appears. Dr. Burnett enters a new field in this book on diseases of children, and gives the profession something *new* on that subject. Readers of Burnett's books sometimes complain that he ignores all the old remedies, but this is an appearance only and not a fact; he assumes that his readers know the routine treatment, and the mission of his books is to inform the profession of the possibilities that lie outside of routine treatment and to point the way to the cure of cases hitherto regarded as incurable. This new book on children is unusually interesting, and may be the means of curing many a child that would otherwise remain in the category of incurable.

ANOTHER book that will be out probably in December is *The Practice of Medicine* by Dr. M. A. Custis, a book that will undoubtedly be immensely popular, not only with the Homœopathic profession, but among physicians of other beliefs. In it the practitioner will possess a pocket practice that will answer nine questions out of ten that may arise, and, also, will give him therapeutic points culled from the best Homœopathic authorities.

THE third rewritten and enlarged edition of that standard work, Raue's *Special Pathology*, has passed the six hundred page mark and will soon be on the market.

As the new edition and translation of the *Chronic Diseases* is nearing completion it may not be amiss to remind our readers again that the publisher's price to subscribers is eight dollars, delivered to any part of the United States, free of postage, or expressage. After the volume is out no more subscriptions will be received, but the book will be sold regularly at a considerably higher price. The book will be larger, and much more costly than was estimated at the beginning, owing to the paragraphing of the symptomatology, hence the advance in price. Remember that this is the first time that that much discussed book has been offered to the English speaking world in its purity. Hempel once translated it but he mixed up Hahnemann, Hempel, and Noack and Trinks so that the reader could not very well tell where one stopped and the other began. This new edition contains what Hahnemann wrote and nothing more.

AMONG the month's pamphlets is President D. A. Foote's address to the Missouri Valley Homœopathic Medical Association at its Second Annual Session. Dr. Foote is proud of the new association, proud of its birth-place and proud of Homœopathy — "Homœopathy is the name written upon the standards of an earnest body of broad-minded physicians, surgeons, scientists, who are enlisted to lead medicines to the highest possibilities." The pamphlet also contains minutes of meeting and the constitution and by laws of the new Association. President for 1895-6 is Moses T. Runnels, M. D., of Kansas City.

It is curious to note what mistakes will creep into even the most carefully written books. As a sample of this we quote from the recently published *Practice of Medicine* by Goodno, p. 926, the subject being Obesity.

The use of drugs for the reduction of corpulence cannot be commended. *Phytolacca*, which has been extensively employed, is useless, the good results reported being due to the dietetic and other measures which are adopted at the same time.

We never heard of the drug *Phytolacca (decandra)* being employed, or recommended, by any one for the treatment of obesity, though the juice of the ripe, frosted berries of the *Phytolacca* plant are suggested by Hale for that purpose in his *New Remedies*. The suggestion was never acted upon, however, and the treatment did not attract any attention until after Dr. W. M.

Griffith had published his second communication on the subject in the *Medical Summary*. The good results reported of the treatment can hardly follow from dietetic or other measures adopted, inasmuch as Dr. Griffith, and others, in recommending the treatment, lay special emphasis on the fact that no change of diet or habits are required. Considerable confusion has resulted from confounding *Phytolacca decandra* with the juice of the ripe *Phytolacca* berries.

THE Eclectic *Chicago Medical Times* comments on the *Essentials of Therapeutics* (Dewey) as follows:

Our students obtain much benefit from the study of Homœopathic therapeutics. These publishers have a reputation for producing practical works, which at once meet the demand of their own busy doctors, and which give the liberal investigating doctor of other schools a chance to take a comprehensive view of their methods. This is one of those books and we can recommend it.

A NUMBER of five cent, or "nickel," magazines have made their appearance to the dismay of the haughty ten-centers. And in the mean time it seems to hold good of the high-priced publications that the rich are getting richer and the poor are getting poorer. If you want a fine coat you must pay for it.

THE *Medical Record* handles the second edition of Dr. Burnett's *Diseases of the Liver*, etc., as follows:

The author of this Homœopathic treatise is evidently one of the minority who still adhere to the original doctrines propounded by Hahnemann. He prescribes *Chelidonium* for jaundice and enlargement of the liver, because the plant has a yellow juice. But this remedy must be used only when the enlargement is in a perpendicular direction. If pain starts on the right side and goes toward the left, one remedy is to be given; another if the pain has a contrary direction.

The most remarkable statement in the book is that several cases of carcinoma of the liver, which have been diagnosed as such by several reputable physicians, have been thoroughly and permanently cured by the administration of *Cholesterine* in small doses.

It would require many grains of *Sodium chloride* to make this statement digestible, and we are forced to the conclusion that the reputable physicians made a mistake in diagnosis.

It will be news to many who have studied Hahnemann's writings to learn that his "original doctrines" require the prescribing of a remedy according to the color of its juice. Dr. Burnett maintains that cases of carcinoma of the liver have been cured, or so relieved that they no longer gave any trouble, and

what has been done can be done again. The *Record* seems to think that when reputable physicians diagnose carcinoma of the liver, and the patient is cured by what we may term scientific Homœopathic treatment, the reputable physicians made a mistake in diagnosis; when the patient dies reputable physicians were correct. There is no answering this. It is very severe on diagnosticians. And yet we are possessed by the idea that the limits of Homœopathy are co-existent with human ills. But the men of to-day are a long way from those boundaries, and many years of deep study through many generations are yet before the profession before scientific medicine. *i. e.*, Homœopathy, shall have been mastered. That study to avail must be on the lines of *Similia*.

THE *Southern Journal of Homœopathy*, as all familiar with the subject know, is intimately connected with the Medical Investigation Club, the investigations of which are gathered in the recently published *Pathogenetic Materia Medica*. The November number of the *Journal* has the following anent that book:

In Dr. Dewey's materia medica department in the *Medical Century* for Oct. 15th ultimo, we find the following: "Cicuta Virosa. According to the new Pathogenetic Materia Medica *Cicuta* will give prompt relief in certain forms of 'sick headache' due to cerebral congestion. They are accompanied by vertigo, obscuration of sight and nausea or vomiting. Out of thirty-five provers fifteen had vertigo, yet just why 'sick headache' due to cerebral congestion should be promptly relieved by *Cicuta* is not quite clear, as only two of these thirty-five provers had pains in the head." Although only two of the whole group of provers had pains in the head, yet twenty were "unconscious," three had "redness of the face," four were "stupefied" and four had "dilated pupils"; all of which would suggest a condition of too much blood in the brain. Add to this the symptoms to which Dr. Dewey refers, and we think there is ground for suggesting *Cicuta* in "'sick headache' from cerebral congestion."

And just here we would say that in this same *Pathogenetic Materia Medica* the department of Therapeutic Application is simply suggestive; the suggestions being based entirely upon the preceding general sphere of action and the symptomatology. The members of the Investigation Club tried to keep out all mere imaginary indications for drugs, and they believe very little superfluous symptomatology or therapeutic suggestion has been included.

IF you wish to cure your patients you cannot do without Bœnninghausen's (*Therapeutic Pocket Book*), no other work is comparable with it. And to use it with accuracy and celerity, Yingling's *Checking Lists* are indispensable."—*Dr. A. McNeil, in Homœopathic Physician.*

THE *Homœopathic Journal of Obstetrics* of November makes the following comment on Burnett's recently published *Gout*:

"The price of a book is no gauge of its value, for this little work, costing less than a dollar, is of far greater worth than many a more pretentious volume. While treating of gout and its cure, the author does not confine himself to that subject, but makes little divergencies to one side, as in the story of the nettle as a medicine, and drops now and then a few pregnant words, which open a new line of thought, as where, speaking of the use of *Spiritus glandium quercus* in the treatment of the alcohol habit, he brings up the question of the symptomatology and the pathology of drugs. Written in the doctor's inimitable style, the book will find many readers, who will be the wiser for the reading."

WE are all in the same boat and have felt our weakness in the presence of sick infants. At first sight it seems almost impossible to prescribe for them. Guernsey's *Obstetrics and Diseases of Women and Children* and the last chapters of Hering's *Diseases of the Mind* are two splendid books and they will help us to cure almost every case in infancy. We should learn to study carefully the actions of the babies, as every little sign means something, and there are remedies to meet these various conditions.—*Dr. A. McNeil in Homœopathic Physician.*

THE librarian of one of the libraries of Omaha recently died of consumption "contracted from books which had been infected by consumptive patients." This unqualified assertion cannot be disputed, since it is impossible that consumption can be innate, according to obsolete ideas, and, therefore, he must have contracted the disease from books. Commenting on this a respected contemporary says: "It would be wise to exercise a sanitary supervision over the circulation of books." This would answer two purposes, namely: It would stop to a certain extent the spread of consumption, and would be a boon to over stocked publishers, for, after a book had been fumigated several times or treated to a few carbolic acid or corrosive sublimate baths, it would be ready to give way to its brother, fresh from the bindery. It would necessarily be very dangerous to the man who fumigated, or bathed the books, but high wages will tempt men to incur great danger, so there would probably be no difficulty in getting men to fill the position.

I HAVE read this little book (Burnett's *Diseases of the Liver*) with much pleasure and profit. The author's style is fresh, vigorous and impressive without betraying any evidence of having been studied. The matter is as valuable as human life itself, if the author has not habitually mistaken coincidences for medicinal effects, and it seems as certain as anything in medicine can be that he has made but few of such mistakes. Certain it is, that it will well repay any doctor of any school to familiarize himself with the contents of this valuable little contribution to therapeutic literature.—*C., Medical Gleaner.*

Homœopathic Recorder.

PUBLISHED MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street,

Philadelphia, Pa.

SUBSCRIPTION, \$1.00 PER ANNUM.

Address communications, books for review, etc., for the editor, to E. P. Anshutz P. O. Box 927, Philadelphia, Pa.

OBITUARY.—Dr. A. R. Thomas, Dean of the Hahnemann Medical College, of Philadelphia, departed this life October 31, 1895, after a painful illness. Dr. Thomas was born at Watertown, N. Y., on October 3, 1826. His father served his country in the war of 1812. In later years the son, the late Dr. Thomas, also served his country as surgeon during the late war. In 1874 he was chosen Dean of the Hahnemann College of Philadelphia, and served in that capacity until death terminated his long honorable and useful life. During his long administration the college and hospital grew from the comparatively small quarters on Filbert street to the present splendid building on Broad street, and the prosperity of the school and the usefulness of the hospital have kept pace with the increase of their quarters. Surely can one say that another useful and honorable man has gone to his well earned rest.

Dr. Peter A. Sprunger, of Berne, Indiana, was stricken down with apoplexy and died on November 7. Dr. Sprunger was one of the pioneers of Homœopathy in Indiana. He was a staunch believer in the principles of Homœopathy, and his departure is a distinct loss to the profession in Indiana.

Dr. W. E. Fraser, of Fernandina, Florida, departed this life on October 6. He was a successful practitioner of Homœopathy, and had built up a large and successful practice. Mrs. Fraser writes us that there is now a good opening for a Homœopathic physician to take up his work. As she is left with but slender means of support, she would be glad to dispose of the practice to some good Homœopathic physician. The address is Fernandina, Fla.

“INDIGESTION AND BALDNESS” AND SCISSORS.—Close on to a year ago the *Charlotte Medical Journal* printed an original

squib on the subject of baldness and indigestion which has been scissored by nearly every medical journal in the *United States* and may make the international round. It opens as follows:

Dyspepsia is not only one of the most common diseases, but it is also one of the most common causes for the loss of hair. Nature is very careful to guard and protect and supply the vital organs with the proper amount of nutriment, but when she cannot command a sufficient quantity of blood-supply for all the organs she very naturally cuts off the supply of parts the least vital, like the hair and nails, so that the most important organs, like the heart, lungs, etc., may be better nourished and perform their work more satisfactorily.

Is dyspepsia "one of the most common diseases?" Are not true dyspeptics, as a rule, noted not for baldness but for a rather abundant growth of hair? Did you ever see a dyspeptic whose nails had ceased to grow or had fallen off? Did you ever hear the venerable joke about the "bald-head row" at the theatre when there was a "spectacular" show on, and did you never note that these bald-headed ones are anything but dyspeptic? As a rule, are not bald headed men those of full body and well nourished?

The concluding paragraph of this widely quoted squib runs as follows:

Be more careful about what you eat, when you eat it, and you will have less dyspepsia and fewer bald heads.

A humorous paragraph that, shining by its own light.

HE IS A COSMOPOLITAN.—The *Medical Record* of November 9th contains the following editorial:

MONUMENTS IN AMERICA TO FOREIGNERS.

The proposal to erect a beautiful statue to the German poet, Heine, in the Plaza, at the entrance to Central Park, naturally aroused a good deal of protest. This was partly because Heine was a foreigner, partly because the same statue had been rejected by a German city to which it had been offered, and perhaps partly to the fact that Heine's genius did not warrant such a tremendous exploitation. A project quite as preposterous has been started by some enthusiastic admirers of Dr. Samuel Hahnemann. They propose to erect a statue to this particular foreigner in Washington. According to the *Journal of the American Medical Association* the subscriptions to the monument go on swimmingly, while those to the American, Dr. Benjamin Rush, are somewhat halting and insufficient. It would seem wise, apart from any questions of creed or sect, that America wait until a man's own country honors him before they do it themselves. Germany has never ventured to erect a statue to Hahnemann, although he has been dead long enough to allow all personal prejudices to subside, and there is no tendency in that direction among the Germans now. In fact, the pre-

vailing opinion among his countrymen, so far as we can ascertain, is that Hahnemann, although an earnest student, was a self-deceived philosopher. However, if our American *confrères* wish to put up a statue they have a right to do so, and we say, let the work go merrily on. We can't have too many good statues to great doctors.

As a matter of fact there is a statue of Hahnemann in Leipsic, a very fine one in a very prominent place.

The money to pay for this really magnificent bronze statue was subscribed by the people of Germany. It is a pleasure to note that the *Medical Record* classes Hahnemann among the "great doctors," and the measure of his greatness as compared with that of Dr. Benjamin Rush is shown by the fact that the money for the monument to Hahnemann is coming in freely and enthusiastically, while that for Rush is "halting and insufficient." And, furthermore, the name of Hahnemann is known and respected in every country, while the system of medicine, or, more properly, the law of cure, that he discovered is steadily enlarging its borders with every year; it is not "dying out," but conquering, or absorbing, the medical practice of the whole world. This may not be acknowledged, but it is a fact for all that, as anyone skilled in Homœopathy can see who studies the therapeutics of the old school in its latest text books, these being nothing more nor less than crude Homœopathy. Hahnemann and Homœopathy are known in all nations, but aside from the more scholarly physician who knows anything of Dr. Benjamin Rush? The contrast between the world's knowledge of these two men is a good measure of the virility of the two great schools. The world knows of Hahnemann because Homœopathy is instinct with life, because it is a great truth. But what did Rush teach? Who knows?

IT IS LAW.—The editor of the *Medical Age* writes of the treatment of malignant tumors without the knife, and claims that many cases can be better treated by *Acetic acid*. In support of this he quotes Dr. W. H. Broadbent who, in 1866, called attention to the possibilities of *Acetic acid* in the treatment of malignant growths, and cited a number of cases in which permanent relief followed its employment; the editor also confirms the treatment from his own experience of thirty years. As a further proof of the value of *Acetic acid* in the treatment of cancer, we would call his attention to a proving of it made by a "regular" physician and published in Bennett's *Physiology*, which prov-

ing seemed to develop what was to all appearances a typical cancer cell. By the great law of therapeutics, *Similia*, *Acetic acid* must be one of the remedies for cancer.

MALLEIN.—In an article in the *Union Médicale*, M. Jules Rochard says that the French Minister of War has issued an order that all the animals kept in one stable should be subjected to injections of mallein. After the test they should be divided into three groups: The first to be composed of those which, not having shown any organic or thermic reaction, may be considered as healthy. These animals may remain in the stable and take part in the work of the service. They should, however, be subjected to another test with the mallein. The second group is to be composed of animals the temperature of which is elevated more than one degree, organic reaction being more or less completely absent. They should be considered as suspicious subjects, isolated, and again subjected to the test; if any among them react completely, they should be passed immediately into the third group. When two injections have been administered successively without causing reaction, the animals may be restored to the service. The third group is to be formed of animals which have reacted completely, for example, by persistent and extensive œdema, dullness, prostration, trembling, loss of appetite, and hyperthermia, the minimum being 3.2° F. above the normal. Those of this class that continue to react in this manner after two injections of mallein administered at an interval of a month should be killed; those that show no thermic or organic reaction after the two injections may be kept in the service.

Mallein is a "liquid of yellowish color obtained from sterilized and filtered culture of bacillus mallei" *alias* glanders. This order of the War Minister will be an excellent thing for Germany in case of another war, unless that country follows suit and glanders all of her horses.

A SABAL SERRULATA CASE.—"A case of enlarged prostate gland treated by removal of the testicles, death. Such is the headline of a paper in *Medical News*, November 9, by Dr. John B. Roberts. What a pity it is that science cannot come down out of the clouds long enough to learn how to medicinally treat cases of this class. With remedies at hand like *Sabal serrulata*,

or *Solidago virga aurea*, there should be but little use for the catheter.

SAW PALMETTO IN GONORRHŒA.—Dr. J. D. Hatton, in *Medical Age*, highly commends Saw Palmetto (*Sabal Serrulata*), in both chronic and acute gonorrhœa. In the chronic cases of this malady—those which appear to be cured, but are prone to recur on slight indiscretion, such as the drinking of spirits, sexual indulgence, etc.—and which are a cause of great trouble to the practitioner, this remedy promises results that are more than satisfactory. In these cases the pus discharge is re-established on apparently little provocation, and once fairly re-established is apt to persist indefinitely and resist all ordinary remedial efforts. It is here that the remedy is most effective. The discharge is usually arrested in three or four days, and if the remedy is continued two or three weeks permanent relief appears to result. Of course the doses may be gradually given at longer intervals. In acute gonorrhœa the remedy has a soothing effect—an action that is potent as regards all mucous membrane of the genito-urinary tract. It tends to in great measure relieve the burning urethral pain that accrues to efforts at emptying the bladder, and likewise the feeling of weight and uneasiness which obtains to this organ and is also manifested in the testicles. It does not, however, control the discharge as readily as in the chronic form of the malady.

UNSCIENTIFIC POLYPHARMACY.—Editors and college professors are valuable and fluent enough in theoretic teaching as to the law, but we suspect are woefully at fault in practice, if we may judge by the discussions in our societies and in the observance of a crude unscientific polypharmacy in prescriptions. We solemnly believe that nothing in the world's history save and except the promulgation of the doctrines of the Christian religion, has had such a beneficent influence on human health and human destiny as the law and teaching as promulgated by Hahnemann. Now if this proposition be true let us come to the fore in the defense of the truth in practice as well as in theory. Let us not be led astray by sentimental show of tolerance and liberality toward men who will at any time turn upon and spurn us. Let us not be enticed away into forbidden paths by the easy modes of an indiscriminating polypharmacy, leaving the disease to make the selection which we should make in prescribing.—*St. Louis Journal of Homœopathy*.

PERSONAL.

Dr. Josephine Van Dusen has resumed practice at 1128 Walnut street, Philadelphia.

Dr. Isaac Van Dusen has removed to 2036 North 18th street, Philadelphia.

A London Journal remarks, anent the investigations of bacteriologists, that "it is absolutely dangerous to live at all."

The *New York Medical Times* is shocked at one of THE RECORDER'S high-potency translations. But the 500th was given and the patient was cured. What would you?

Dr. Richard Kingsman has removed to 711 E. Capitol street, Washington, D. C.

Dr. D. P. Terry has removed from Cleveland, O., to Trumansburg, N. Y.

Between the dog on one part and the dog-catcher and the law on the other, the average man's sympathies go with the dog.

"The great obstacle to the advancement of medical science in the past has been respect for authority," writes Surgeon General Sternberg, of the U. S. A., in *Medical Record*.

"That Prince of Materia Medica text-books, Farrington." Kraft at Newport.

WANTED. To purchase a practice of not less than \$2,000 per annum within one hundred miles of New York City. Give full particulars and terms. Address, M. D., care Boericke & Tafel, 1011 Arch street, Philadelphia, Pa.

Dr. W. H. Tobey has removed to 173 Newberry street, Boston.

"Our bigoted belief in reading and writing is not in the least justified when we look at the mass of mankind," says Flinders Petrie.

Dr. Stephen Hasbrouck has removed from Morris Park to 116 West 133d street, New York.

For the benefit of his wife's health Dr. David A. Strickler, eye, ear, nose and throat specialist, has removed from St. Paul, Minn., to 705 Fourteenth street, Denver, Colo.

"The trouble is that we have too much talk about reflexes and quite too little reflexion."—Dr. R. Ludlam.

Dr. Mary A. Cooke has removed to 2113 N. 18th street, Philadelphia.

Dr. D. A. MacLachlan, who so long held the chair of Ophthalmology, Otology and Laryngology in the Homœopathic Medical Department of the University of Michigan, has removed to No. 6 Adams avenue, West Chicago.

Dr. Osler shuns *Life* "as I would a blackguard of the slums" because of its anti-vivisection cartoons.

Dean Stanley tells of a visitor who once knelt in Westminster Abbey to pray, but the verger told him that praying was not allowed there.

Dr. Simon Barruch says of Kneip, the water cure parson, "there is nothing yet for the police to remedy."

