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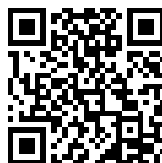
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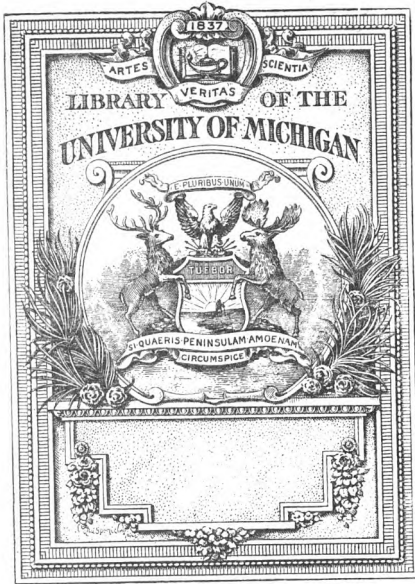
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HOMEOPATHIC WORLD.

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JANUARY 2, 1893.

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1893.

THE coming year may be looked forward to as one of great importance in the progress of homeopathy. To the devotion of our American homeopaths we owe it—to their indomitable independence, energy, and pluck—that homeopathy stands to-day, in the United States and before the world, in the position of importance that it does. If our American brethren of early days had adopted a policy humbly begging recognition from allopathic colleges, they would not have been able to assemble, as they will, in their thousands at Chicago this year, to show to the world that homeopathy is a fact which the world must accept, and the sooner the better for itself. Instead of appealing to a profession hide-bound in prejudices and stupid traditions, the pioneers of homeopathy in America appealed to a free people and to free governments. They obtained the right to teach and graduate students of their own beliefs, and now they are the strong and independent body which is at once the pride and the envy of old-world homeopaths. Aided by the free institutions of their country, and the emancipated minds of the people, they have been able to achieve what we have scarcely attempted. But now that they like Columbus, have shown us the way, there is no excuse for us if we do not follow them. The object for us to aim at is the acquiring of the right to teach and grant diplomas to our own students. Until we have this right we shall never make much headway. Let it be said to the

honour of the late Dr. BAYES, he saw this fact clearly, though he could not make all agree with him in the methods he adopted to bring it about.

Let us look at the situation. In all directions homeopathic doctors are wanted: Western Australia; New Zealand; Tasmania; Trinidad; from these and from all parts of our own land the same cry comes—send us a homeopathic doctor. Unhappily we haven't one to send. Our boys to be made into doctors have to go to allopathic schools, and nine out of ten of them come out allopaths overloaded with allopathic prejudices and conceit. Australasia does not possess a school, but Australasia will not be long content to do without one. The Melbourne Hospital has in it all the elements for a school. It has, besides, great popularity; it has a government as its friend, and a Governor at its head: it has only to make the demand in order to have it granted. With Melbourne's lead, Sydney and South Australia and the rest would soon follow; and then homeopathy in the south would not have to send a bitter cry to the home country for help that the home country does not possess for the supply of its own needs.

To come nearer home. The building of the new hospital already subscribed for has been delayed by necessary negotiations in connection with neighbouring property. These difficulties are now, we believe, practically surmounted, and it will now be possible to carry on the rebuilding without in the meantime interfering with the hospital's work. Of the new hospital something must be made. It will be seen in another part of our issue that the teaching powers of the hospital staff are being developed in post-graduate lectures; and it will be a lasting disgrace if out of this there does not grow up a fully-equipped medical school within a measurable time. It is our belief that if homeopaths only knew the power there is in the country to support them, and knew how to make the right use of this power, homeopathy in Great Britain might emulate the position it now occupies across the Atlantic. May 1893 see a large step taken in this desirable direction.



## NEWS AND NOTES.

### NEW WORK BY DR. WILKINSON.

OUR venerable colleague, Dr. Garth Wilkinson, has just published a new work on homeopathy. Its title is *Epidemic Man and his Visitations*. Homeopathy is contrasted with the old system, and is considered from its spiritual side, for the author believes that the rule *similia similibus curentur* must have a spiritual side, and, in fact, as a beneficent providence and insight, go through all dealings of man with man and of nature through man with nature. We have no doubt that the homeopathic world will hail with interest the appearance of a new work by Dr. Wilkinson, as they may be sure it abounds in original reflections and reveals novel and philosophic views.

### BROWN-SEQUARD'S *ELIXIR VITÆ*.

UGLY reports of evil consequences from Brown-Sequard's peculiar method of treating senility and various diseases have been very rife of late, but if what we read in the *Presse Medicale Belge* (reproduced in the *Rev. Hom. Belge* of November last) be true, then it would appear that the unfavourable reports are without foundation, and the method is not only absolutely innocuous, but marvellously successful.

The author of this article, who seems to be Brown-Sequard himself—or perhaps his assistant, D'Arsonval—says that more than 1,200 doctors have made trials of the liquid—we need not repeat what it is made of—and communicated their opinion about it. When performed with necessary antiseptic precautions the injections are free from danger, and do not even occasion any serious inconvenience. The 1,200 correspondents have performed 200,000 injections without an accident. The pain in some cases was pretty sharp, but always transient; in some cases it lasted for a day or two. Some Russian physicians observed a slight febrile action after the injections, but this has only been noticed twice by French doctors. In short, the injections are absolutely innocuous. How about their utility? Out of 120 cases of locomotor ataxy the injections only failed three or four times. This

would imply that they cured the ataxy in 117 or 118 cases. But can this be the meaning of the writer? In 21 cases of cancer, mostly uterine; there ensued invariably amelioration, cessation of suppuration, of pain, of hemorrhage, apparent diminution of the size of the tumour, disappearance of the edema. It should be observed that 19 of these 21 cases were declared to be unfit for operation. Uterine fibromas were always very considerably reduced in size. Of seven cases of shaking palsy, two were benefited, one of them almost cured. In tuberculosis the treatment was very successful; great amelioration, though not cure, was effected. No statistics are given. Diabetes was ameliorated, one case was even said to be cured, by the injections. No figures are given here. Finally we are informed that M. D'Arsonval has succeeded in preparing an injecting fluid twice as strong as that previously used. And we understand that he is prepared to sell the magic fluid at a fixed price, and declares none other to be genuine; for it appears that several enterprising persons have occupied themselves in preparing what they call Brown-Sequard's injecting fluid, which they barter for the current coin of the realm. See that when you order it you get the real B. and S. elixir.

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#### THE DRYSDALE MEMORIAL.

As will be seen by our advertisement pages, the fund for the memorial to the late Dr. Drysdale has reached the sum of £667, and we should think there should be little difficulty in completing the £1,000. In another part of our present issue, Dr. Burnett points out that there are other and more prominent ways in which the memory of our departed leader may be kept green, and may bear its proper fruit in the generations to come. There is no reason why both ways should not be adopted.

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#### AN AMERICAN MONUMENT TO HAHNEMANN.

As the adopted home of the New Therapeutic Art, the United States of America have every right to raise a statue on their own soil to the man whose genius inaugurated the great reform. At the last meeting of the

American Institute of Homeopathy the proposal was greeted with "wild enthusiasm," according to *The Southern Journal of Homeopathy*, and over a thousand dollars was subscribed in a few minutes. We are especially glad to learn that a splendid site for the monument has been guaranteed in a beautiful park in the city of Washington. The tercentenary of the Columbian advent nearly coincides with the centenary of Homeopathy; it would be a fitting thing if our American *confrères* could honour the discoverer of the new world of therapeutics in the same year that they with their fellow-countrymen are honouring the discoverer of the new world of the Americas. When two more centuries are passed and gone, Hahnemann will be recognised by the world at large as the greater world's benefactor of the two.

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#### MEDICO-CLIMATOLOGY.

In our last issue we drew attention to the part homeopathy is going to play in connection with the World's Columbian Exposition at Chicago. We are now pleased to announce that the great therapeutic question of Climatology is to receive a share of attention. We have received from Dr. T. C. Duncan, Chairman of the Committee of the World's Congress Auxiliary on Medico-Climatology, the committee's "Preliminary Address," in which the following topics are indicated as down for discussion:—

"The Leading Characteristics of the Climates of the Various States, Countries, and Sections of the World—Diseases Produced by the Climatic Peculiarities and Weather Changes in the various countries—Relation of Climate to Consumption. Climates in which Consumptives Recover, or are Materially Benefited—Health Resorts: Special Features—Relation of Climatic Changes to Epidemics—Changes of Climate due to Cultivation. The effects of the Destruction of Forests, and other Changes Incident to Civilised Life—The Relations of Diet and Climate—What May be Done to Improve or Modify Climates for the Promotion of Health and Comfort?—Geography of Carcinomatous and Sarcomatous Diseases—Geography of Bright's Diseases—Climatic Factors which Produce Epidemic Influenza—Relation of Climate to Rheumatism—Relation of Climate to Catarrhal Diseases—Relation of Climate to Longevity—Waters and Climate—Climatic Effects upon the Eye—Relations of Climate to Diseases of the Ear—The Effects of Sun Spots upon Climatic Conditions—What More Can the Weather Bureaus do to aid Climatologists and disseminate Climatological Knowledge—Comparison of

Climatic Differences as manifested by Similar Diseases in the North and South Temperate Zones—Climatic Relations to Remittent and Periodical Fevers, and to Continued Fevers—Climatic Relations to Malaria—Acclimation. Disorders Produced by Migration.”

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### THE MEDICAL CENTURY.

MESSRS. GROSS AND DELBRIDGE, medical publishers of Chicago, whose names appear on many notable homeopathic works, have determined to signalise the Columbian Year by issuing in January and following months “an International Monthly Journal of Homeopathic Medicine, Surgery, and Collateral Sciences,” to which they have given the felicitous name of *The Medical Century*. As editor, they have secured Dr. C. E. Fisher, whose name is well known in connection with *The Southern Journal of Homeopathy*. The *Century* will take the place of *The New Remedies*, a minor monthly journal hitherto issued by the same firm. As to the “platform” of the journal, it is to be “international, independent, progressive, high-minded, and strictly professional.” The price is to be two dollars per annum. It may be ordered of our own publishers; and specimen copies of the January issue will be sent to any address, on receipt of postcard, by Gross and Delbridge, 48, Madeson Street, Chicago.

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### CHARCOT'S HOMEOPATHIC TREATMENT OF SHAKING PALSY.

“BEFORE taken, to be well shaken” was the brief but too ambiguous legend on the bottle of Dr. Bolus in Coleman's well-known poem. The faithful attendants, with mistaken zeal in their endeavour to do all they could for the sufferer and carry out the doctor's orders to the letter, shook the *patient* instead of the bottle. As he grew worse they concluded it was because they had not shaken him enough, and so they went on shaking the poor man till they shook all the life out of his body. It is now plain that this unlucky patient's disease could not have been *paralysis agitans*, or “shaking palsy,” for, “to be well shaken” is the very latest prescription for this class of disease, by the most famous of modern neurologists, Professor Charcot. Noticing the homeopathic law exemplified by some of his shaking patients, who protested that they always felt much

better after a thoroughly good shaking on the railway or in an omnibus, he and his assistants have devised a variety of ingenious apparatus, chairs and the like, for administering "shakes" of the most aggravated description to his shaking patients. The "to-be-well-shaken" prescription seems to do them a "power of good"; whether the good will prove permanent remains to be seen. It will be remarked that the dose of "shakes" is not infinitesimal.

#### A CASE OF CHOLERINE.

In giving an account of the third trimester of the Municipal Homeopathic Dispensary of Antwerp, Dr. Lambrichts, *filis*, mentioned (*Révue Hom. Belge*, October) that he had treated about thirty cases of cholérine during the period. In several the stools had a dysenteric character. All were rapidly cured under the influence of *Verat.*, *Cupr.*, *Ars.*, *Ipec.*, and *Merc.-cor.* The severest case is described, and we will translate his own words.

"On the 22nd of last September, about 8 p.m., I was called in all haste to the house of a poor workman, who, in the words of his wife, 'had an attack of cholera, and was at the point of death.' On coming home from his work he had been suddenly seized with cramps, followed quickly with diarrhœa and vomiting. The state of the patient did, in fact, present a certain gravity. The face was contracted, the tongue dry, the extremities cold, the pulse small. There were frightful cramps in the body, the calves, and as far as the ankles. Thirst was acute; the stools, continuous and involuntary, had a whitish colour; the vomited matters had the same character. I had measures taken immediately for the disinfection of the stools; then I endeavoured to warm the patient, giving him warm tea, which he kept fairly well, and placing hot sand under his feet. I prescribed as remedies *Ars.*, *Cupr.*, and *Verat.*, a dose every ten minutes in alternation. I charged the wife to come and fetch me before midnight if he got worse. Not having received any message during the night, I went to see my patient the next morning, and I learned, not without astonishment, that he had gone to his work. His wife told me how, some time after my departure, he had begun to grow warm; vomiting and cramps had diminished and then ceased completely, so that towards morning there remained nothing more than a little diarrhœa. Despite his weak state, he had determined to take up his work for fear of losing his place."

Dr. Lambrichts points out the necessity of having wards in the public hospitals set apart for homeopathic treatment. As it is, when patients have to be sent to

hospitals they must undergo a complete change of treatment. In view of the possibility of a return of cholera next year this is a very important point.

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#### VETERINARY HOMEOPATHY.

ALL lovers of animals will welcome the appearance of the last League tract (No. 43), entitled "Homeopathy in Veterinary Practice." As the rule of the League about anonymity does not apply to members of the accessory branches of the medical profession nor to medical men practising abroad, the authorship of this tract is acknowledged. Mr. J. Sutcliffe Hurdall, M.R.C.V.S., of the Veterinary Infirmary, Sussex Villas, Kensington, who has written this tract, has done much to render the treatment of sick animals more gentle and humane and to deliver them from the awful doses with which allopathic "vets." are wont to treat their patients; but homeopathic veterinarians cannot work this beneficent revolution by themselves: they need an enlightened public to help them. The Society for the Prevention of Cruelty to Animals ought to circulate this tract. A farmer we once heard of who had been converted to homeopathy for the treatment of his cattle, said the reason he liked it was that it "paid best;" he did not lose anything like the number of cattle he used to lose under allopathy; and his animals were sooner out of the doctor's hands. With these two arguments to support it—the argument of the heart and the argument of the pocket—homeopathy for animals must make way eventually; but there is an immense amount of public ignorance to contend against, and every homeopath, medical and lay, must help to get rid of this.

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#### CHILDHOOD.

WE have received the first (December) number of this new journal, the prospectus of which we have already published. Among the contributions is a bright little essay by Julian Hawthorne, entitled "Make-believe." *Childhood* has a very distinct place of its own, the only wonder being that no one has thought of filling it before. The first number is a decided success, and its editors have our warm congratulations.

## OUR FUTURE.

IN opening another year of our labours, we look forward with confidence to the continued support of our constituency in all parts of the globe. As in the past, we shall endeavour, with the assistance of our valued contributors, to forward the highest interests of Hahnemann's great reform. Among other prospective contributors, our esteemed *confrère*, Dr. Gallavardin, of Lyons, has promised to send us some gleanings from his ripe experience. Our pages will be open for the expression of all shades of opinion; and we shall endeavour to keep our readers *au courant* with the march of events, so far as they relate to our art, and with the progress of literature and journalism throughout the homeopathic world.

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INFLUENCE OF THE MIND UPON THE BODY.—Tuke, in his work on the above subject, says: In 1862, Mr. Woodhouse Braine was called upon to give chloroform to a nervous, hysterical girl for the purpose of having two tumours removed from the scalp. In order to accustom her to breathing through the inhaler before giving her chloroform, he placed it over her face and she at once began to breathe rapidly through it. In half a minute she said: "Oh, I feel it, I feel I am going off. Immediately after she was found to be insensible to pinching and her muscles were flaccid. Both tumours were removed without her having taken a drop of chloroform, and after the operation she declared she had not felt a particle of pain. The doctor very facetiously adds: To the time she left the hospital she firmly believed in the potency of the anesthetic which had been administered. In illustration of the influence of fear or apprehension upon the vascular system, the same author gives the following example, the case of a highly intelligent lady well known to himself. Although the emotion had for its object another person, it none the less acted upon her own system: One day she was walking past a public institution and observed a child, in whom she was particularly interested, coming out through a gate. She saw that he let go the gate after opening it, and that it seemed likely to close upon him, and concluded that it would do so with such force as to crush his ankle; however, this did not happen. It was impossible, she says, by word or act to be quick enough to meet the supposed emergency; and, in fact, I found I could not move, for such intense pain came on in the ankle corresponding to the one which I thought the boy would have injured, that I could only put my hand on it to lessen its extreme painfulness. I am sure I did not move so as to strain or sprain it. The walk home—the distance of about a quarter of a mile—was very laborious, and, in taking off my stocking, I found a circle about the ankle as if it had been painted with red-currant juice, with a large spot of the same on the outer part. By morning the whole foot was inflamed, and I was a prisoner to my bed for many days.—*New York Medical Times*.

## ORIGINAL COMMUNICATIONS.

*ANTIMONIUM CRUDUM* IN CHOREA.\*

By DR. MARC JOUSSET, of Paris.

ON the first of July last, I saw a little patient of my father's (Dr. Pierre Jousset). Mdlle. de B., aged five years, who had been ill with chorea, worse on the right side, for a fortnight. *Tarentula* (12 and 3 trit.); *Agaric. musc.* 8 and *Stramonium* 8 had already been administered successively without modifying the patient's condition. I gave successively, without stopping the course of the disease, *Ignatia* 6, *Cuprum* and *Zincum* 12. By July 15th, the disease having lasted a month, the jerkings were strongly marked, but disappeared during sleep, which was so far satisfactory. The child was so clumsy that she knocked herself against all the articles of furniture, and frequently fell. In addition to this, for some days the appetite had greatly diminished, and there was even disgust for food. Under these circumstances, with a view to re-establishing the appetite, I interrupted the *Zincum*, which the little patient had been taking for some days, to give her *Antimon.-crud.* 3x trit. From the time of commencing this medicine, not only did the appetite come back quickly enough, but the choreic movements also rapidly diminished in intensity. At the end of four days I suspended the medicine; but since, during the two days of cessation, the movements seemed to come back a little more strongly, *Antimonium crudum* was repeated in the same dose and with the same favourable results. Fifteen days after the commencement of the medicine the child left for the country in a state bordering on convalescence.

I do not think we can in this case put it down to coincidence; the improvement began with the employment of the medicine, it was gradual, with a period of arrest, even with a slight recrudescence during the first stopping of the medicine. It appears to me then evident that *Antimonium crudum* exercised a favourable action in the termination of this chorea.

I must say that I was astonished with this curative action, and I have never heard of this medicine being recommended in the treatment of chorea.

The references I have made to Allen's *Handbook of Materia Medica*, however, show that there do exist pathogenetic symptoms that may explain this action.

Here are the symptoms which I have found. First, under *Generalities* we find "convulsions with vomiting"; "Twitching of the muscles of many parts of the body"; "Disposition to start

\* A note communicated to the Société Française d'Homœopathie, at the meeting of October 12th. Translated from *L'Art Médical*, of November, 1892.



even at slight noises"; under *Upper Extremities* "Trembling of the hand when writing"; "jerks in the arms"; "trembling in the muscles."

There is not, properly speaking, a complete picture of chorea in these symptoms, but there is an indication of a spasmodic action of *ant. crud.* on the muscular system; and this is sufficient to justify us in attributing to the law of similars the beneficent results it has achieved with our little patient.

There would, perhaps, be an opportunity of following up these observations in the case of other choreics where loss of appetite and disgust for food may be found to specialise the selection of the drug.

[The above case is an excellent object-lesson enforcing the necessity of taking the *totality* of the symptoms for guidance in drug-selection. "There are no diseases—only patients": hence there are no remedies for "chorea"—only for choreics, and each patient must have the one appropriate to his or her own case. The first selected remedies failed to do good because their similarity was only partial; whereas *antim. crud.* matched the case completely.

In addition to the chorea-like symptoms quoted by Dr. Jousset from Allen, Hering (*Guiding Symptoms*) gives under "Nerves"—"uneasiness of whole body," and "great jactitation of muscles."—Ed. H. W.]

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### *CALCAREA CARBONICA*—A WARNING.

By ROBERT T. COOPER, M.A., M.D.

(Physician, Diseases of the Ear, London Homeopathic Hospital.)

IN THE HOMEOPATHIC WORLD, p. 61, vol. xxii. (September, 1887), a most interesting case is given, reported by Dr. Powell, of a tumour in the right side of the abdomen, hard and painful, which was successfully treated by remedies alone, after having been condemned to operation. The man who was the subject of this tumour suffered as well from psoriasis palmaris of both hands, the palms of the hands being deeply fissured and the skin extremely dry and thick. This man happened to speak to me one day lately, that is some five years after the report given in THE HOMEOPATHIC WORLD, and he introduced himself by stating how much he owed to homeopathy for the cure of the dangerous and painful affection with which he had suffered, "but," said he, showing me the palms of his hands, "here is a condition that no medicine hitherto has been able to

touch." "Well," said I, "that is indeed remarkable, for although I question whether I should have been able in any way to relieve you of the abdominal affection from which you suffered, I cannot help thinking that I could prescribe successfully for your hands." The patient, be it remembered, was not consulting me seriously; I had only met him casually. Accordingly I prescribed some *Calcarea carbonica* 3x, 5 grs. to 2 drachms of water, five drops three times a day, and along with this an application of vaseline mixed with our *Calendula officinalis*. I saw nothing more of the patient for some six months, and one evening calling at his house I asked after his hands. He showed them to me triumphantly, pointing out how smooth and natural the palms of his hands were; and upon my complimenting him upon his good recovery and asking if they had got well while taking my medicine, he significantly remarked, "Well, not quite; it was not until three weeks after your prescription had been finished that my hands began to get well. Then they gradually recovered, and are now better than they have been for the last seven or eight years."

I give this case because I consider it conveys a very important lesson—a veritable warning. The prescription of *Calcarea* was due, I must confess, entirely to the appearance of the hands. In our *Hull's Jahr's Manual*, and under "*Calcarea*," we find mention made, as amongst the curative symptoms of *Calcarea*, "rhagades in the skin, particularly of those who wash in water;" and, acting upon this keynote, a case is reported by me and commented upon in the September number of *The Monthly Homeopathic Review* of 1879, a case which amongst other things illustrates the fact that *Calcarea* can and does act curatively in low dilution.

The case now reported illustrates a still more important truth, and it is one that ought to be taken to heart seriously by the young practitioner; it illustrates this very important and practical fact, that we often fail to cure chronic disease by homeopathy for no other reason than that we are too anxious to complete the cure in a short time, or are in haste to satisfy the patient that our remedy is acting beneficially: hence the warning.

Had the patient whose case I have just reported been a regular patient of mine—that is, had I been in regular attendance upon him, seeing him at short intervals—the

chances are that my efforts to cure him would have been unavailing. I would probably have gone off to some other selection than *Calcarea*, and have in this way rendered treatment—the proper treatment—unsuccessful; but the case is particularly interesting from the point of view of ear cases.

The majority of ear cases that require alleviation are cases that have lasted a long time; they are, I need hardly say, old-standing cases of deafness. Now, taking all the cases of deafness that one meets with at a hospital clinique, there are but a very small proportion of these that have continued for a shorter period than, say, six months.

It goes without saying that homeopathy, being a superior system of curative medicine, ought to be able to deal with every class of disease, ear disease being no exception, in a manner altogether more successfully than is possible by any other system or method of treatment.

It is equally certain that homeopathy has not done anything like her duty in regard to these chronic diseases of the ear. Why is this? I have no hesitation whatever in saying that the reason is, we have not allowed a sufficient time for the appropriate remedy to act.

To go back again to our case where the palms of the hands were fissured, we find a prescription of *Calcarea* given—we may, I think, leave out of consideration the local application of the vaseline and *Calendula*—and we find improvement taking place some weeks after the exhibition of this prescription. Considering the length of time that the case had lasted and the immense benefit that has accrued within a reasonable distance of time from the prescription of the right remedy, it is not unreasonable, I think, to suppose that the disappearance of the disease was due to the action of the *Calcarea*. That is to say, it acted only when a sufficient time was allowed to it.

Now this is exactly where we have gone wrong in regard to diseases of the ear. We have not allowed the curative principle to act for a sufficiently long time. We have kept wrangling as to the dilutions of remedies and as to the proper selection, but it does not seem to have occurred to anybody to rely to a far greater extent than has hitherto been done upon a single solitary dose with a sufficient interval allowed for the manifestation of its curative effects.

Given a curative principle—a principle that has showed

itself curative in, we will suppose, the deafness of a young person of ten years of age—what might we expect from such a principle brought to bear upon a much longer standing and pathologically similar case of deafness in a person of sixty-five to seventy-five years of age or even older? Is it at all unreasonable to suppose that in the latter case this curative principle will require a much longer time to effect its purpose, and that the reaction that it sets up in the organism is a reaction which goes on working to the ultimate dispersion of the infirmity, or to suppose that this curative principle which we know to act in accordance with the law of similars will only be injuriously modified by the administration of a second dose given shortly after the first one?

These at all events are thoughts that have exercised my mind very considerably for some time past; so much so that I determined, in treating these cases, to rely more than ever upon the administration of a solitary, single, uninterfered-with dose, and to allow a sufficient interval to elapse before the administration of a second one. And as we have been deterred from prescribing single doses of a remedy in homeopathy by the constantly reiterated assertion that no remedy can be successful which does not cover all the symptoms of the disease, as found in our repertories, I determined to throw aside all provings and repertories and to rely simply upon the action of the uninterfered-with curative principle of plants, which I believe to be none other than growth-force, and to freely administer tinctures at the hospital made by myself from ordinary field plants in accordance with indications such as occurred to me from the habits of the plants, their appearances, and other apparently unimportant features.

From the time I began prescribing in this way, the success that I obtained from treatment has been, and continues to be, much greater than I have ever been able to secure by the methods usually pursued.

As, however, it would be impossible to enter here into any lengthy explanation of the matter, and as I have already done so at some considerable length in papers that have been sent to *The Hahnemannian Monthly* of Philadelphia, I will say no more on the subject, except that the clinique at the hospital is open to any duly qualified practitioner who wishes to come and see for himself whether single doses of remedies can affect the dispersal

of long-standing serious symptoms such as deafness, and that I hope our young practitioners will be led by cases such as I have just narrated, to allow the homeopathic remedy to act over an interval to some extent corresponding with the duration of the disease to be cured. I hope that they will not continue the barbarous habit of repeating remedies as frequently as food is taken, from no other and no better reason, were it known, than that food and curative medicine are one and the same thing—an idea that is as contrary to fact as anything can well be.

When I look back upon the many years spent in investigating the action of the homeopathic remedy, and when I see how much I have lost, speaking for myself, by being over-anxious in treating chronic diseases, and when I see the glorious results that are to be obtained from the prescription of single doses, I cannot but call to mind a conversation I had with a friend in Southampton to this effect:—"I was," said my friend to me, "speaking to an American homeopathic practitioner about an article you recently contributed, and my American friend asked if you prescribed one dose at a time and allowed it to act. 'No,' said I, 'he does not that I am aware of.' 'Then,' said my friend, 'he does not know what homeopathy is;'" and I have only to regret that this warning was not taken in time, and to say that I believe, without offence, this warning applies as much nowadays to other practitioners as it did then to me.

At all events, there are hosts of cases of perfectly curable chronic diseases to be met with, which ought to have been, but have not been, successfully treated by homeopathy, and the reason of this is, I am convinced, more from the too frequent repetition of the dose than from the much discussed questions of the dilution or even of the homeopathic selection.

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NASAL CATARRH—*ARSENIOS SULPHIDE*  $As_2. S_2$ .

By AGRICOLA.

Early in the spring I received a letter from a poor girl (25), an infant-school teacher in one of the wealthy suburban districts some eight miles west of Bristol, in which she described her many-years' sufferings from a most intense

occipital headache and from a profuse repulsive nauseating nasal catarrh.

Some benevolent ladies, having their sympathies for the poor girl aroused by her devotion to her aged mother (maintained out of her pittance of a salary), sent her on two occasions to the Bristol General Hospital, where she remained on each occasion some three months without deriving the slightest benefit.

Her friend (the Bryonia case described on page 105 of the March number of the *WORLD*) having suggested her making an application to me, I sent her gratis an assortment of suitable medicines together with written instructions as to their use, purpose, &c., and directed her special attention to *Arsenious Sulphide* 6x after meals for the nasal discharge, cachexia, &c., and to *Belladonna* 3x as occasion needed for the headache.

Some three months afterwards I received from her a letter so brimful of gratitude as to what indescribable benefit Hahnemann's legacy to posterity had, through my humble agency, conferred upon her, that were this the solitary result curative of my study, I should yet feel amply recompensed. Amongst others is this ominous (as to her sex) sentence, "You can never know *all* you have done for me."

This I have recently learnt alluded to *leucorrhœa*, pelvic pains, menstrual troubles, irritations, &c.; while a most miserably anemic appearance has given place to a positive glow of robust health, so as to excite inquiry of her by numerous lady visitors of the church school as to what has so changed her general aspect.

But upon utterance of the magic word "*homeopathy*," a shrug of the shoulders from some, a smile from others, and a sneer from many these indicate, trumpet-tongued, that orthodox physic and its priests are still as unscrupulous as to influencing the minds of the wealthy anent the truth in therapeutics at the close as they were in the commencement of the nineteenth century.

## THOUGHTS FROM THE *ORGANON*.

POPULAR PAPERS.

By EDWARD MAHONY, M.R.C.S., L.S.A.

No. IX.

"ONLY one simple medicine to be administered at a

time." He lays down emphatically that "in no instance is it requisite to employ more than one." It is plain, as he remarks, that though we knew the action of every medicine singly, that would not tell us what was the action of two mixed together; so here again we are on the safe ground of actual experiments. Had there been such a thing as a proving of mixtures, as there has been of single substances, and the results carefully collated and recorded, it would be strictly according to law to administer such a compound in such cases as presented from disease, symptoms most similar to those that said compound had been known to cause in the healthy: such cases, however, are yet to be produced. And further, as our author observes, in those cases in which the medicine is only partially homeopathic, "the new symptoms which it excites confirm those which it formerly created, when tried upon healthy individuals—an advantage that can never be derived where compound medicines are employed."

Next we come to—"Strength of the doses. The manner of graduating them—the development of their powers;" and we are told that "It has been *fully* proved, by pure experiments, that when a disease does not evidently depend upon the impaired state of an important organ, even though it were of a chronic nature and complicated, and due care has been taken to remove from the patient all foreign medicinal influence, *the dose of the homeopathic remedy can never be sufficiently small so as to be inferior to the power of the natural disease which it can, at least, partially extinguish and cure, provided it be capable of producing only a small increase of symptoms immediately after it is administered.* This incontrovertible axiom, founded upon experience, will serve as a rule by which the doses of all homeopathic medicines, without exception, are to be attenuated to such a degree that after being introduced into the body they shall merely produce an almost insensible aggravation of the disease" (italics Hahnemann's). In a note he refers to the immense powers of light and heat, which nevertheless have no weight, nor have the injurious words which excite a bilious fever, or the afflicting news of the death of a son which terminates the existence of an affectionate mother, and insists that fact in every case must take the place of theory and imagination and *a priori* reasoning. Some further notes ensue on the proportion of effect produced by a medicine

relatively to the volume administered, and in a further note he states "the effects of the remedy on the body will merely be diminished about one-half each time that the quantity is reduced nine-tenths of what it was before." He again also insists upon the importance of the mixture being thorough.

In the first of the above italicised sentences it will be observed that time is no obstacle to the cure of any disease whatever, hence the remark so often made of a complaint being "chronic," or in danger of becoming so, is a proof how little the instruction of Hahnemann as to the nature of chronic diseases has been grasped: what really happens in neglected chronic complaints is either that they remain the same or some symptoms disappear or become modified, or their place is taken by other troubles: all of which circumstances increase greatly the difficulty of ascertaining the original disease; nevertheless, in all cases, though the complaints be those of a lifetime, they are perfectly curable provided the original disease can be tracked out, and the vitality be not too much worn out to prevent it answering to the power of the drug to restore, homeopathically, the disordered vital force. Then, as to the medicine, it must be "capable of producing increase of symptoms." This point has been gone into before, but in practice it is of such importance to remember, and therefore to act upon, that I would once more call the strongest attention to it. Nothing is more common than for neophytes in the homeopathic healing art to be greatly disturbed at feeling somewhat worse and even some individual symptoms, such as cough, pain, shortness of breath, heat or chill, &c., being both to themselves and others observably worse, and hence such persons are in alarm and consequent hurry to change the medicine or take it more frequently: whereas what is needed is to be quite certain whether the symptoms are the same, or new ones; and if the latter, whether caused by fresh aspects of the disease or by the medicine. In all cases of doubt the safe thing to do is to wait—a day or two in chronic cases, and an hour or two or less in acute will clear the difficulty, and prevent the obscuring of the case, and serious delay, by the introduction of a foreign element in the shape of a new medicinal disease. Then the next paragraph says that "an almost insensible aggravation of the disease" is all that is needed, so the amount of



suffering is at least very trifling and abundantly compensated by the material and permanent benefit that ensues.

A simple illustration may suffice to make this point clearer. Some years ago a patient, of Phosphorus build and organisation and mental and moral temperament, called on me complaining of intermittent facial neuralgia. He received a few globules of *Phos.* 30 on his tongue, and while I was preparing some more to be taken in solution, an aggravation of his pain came on, lasting perhaps five minutes : he needed no second prescription, so five minutes' suffering freed him of a complaint that had disturbed him at intervals for several weeks. It is noticeable that here, as throughout the work, no mere rule-of-thumb mechanical work will suffice : principles are announced, and judgment and experience must have full play.

In dealing with the severe cases of fearfully damaged vitality, especially from over-drugging and run-down nervous systems, which only too often come under the eye of the homeopathic physician, these points become only too painfully evident. For diminishing the volume and consequently the power of the dose, he further suggests that the volume being diminished, it must necessarily touch a less number of nerves, and therefore the power be transmitted in a smaller degree ; but, on the other hand, if the quantity of liquid in which it is administered be increased, the remedy comes in contact with a much more extended surface, and therefore its action is increased, contrary, as he observes, to what "theorists have asserted"—once more fact versus theory.

We now reach a very interesting and practical part of our subject, namely, "What parts of the body are more or less sensible to the action of medicines." First, as to mode of administration ; that in liquid form is stated to be "so penetrating . . . that we might almost call it a spiritual (dynamic or virtual) effect ;" then in a note he speaks strongly of the value of "smelling or inhaling the medicinal aura constantly emanating from a saccharine globule that has been impregnated with the higher dilution of a medicine, and in a dry state enclosed in a small phial. . . . It may be applied to the nostrils of small children while they are asleep, with the certainty of success," and "of late I have become convinced of the fact (which I would not have previously believed) that

smelling imparts a medicinal influence as energetic and as long-continued as when the medicine is taken in substance by the mouth, and at the same time that its operation is thus more gentle than when administered by the latter mode." It is interesting to find in this last sentence the frank admission of his own previous scepticism in this direction, and thus to see that Hahnemann himself heads the now long list of those who have come to believe in high potencies and dynamic or immaterial action—*against their wills*: convinced, as has been well said and written, by the stern logic of facts.

Next, as to the impressionability of different parts of the body. "Every part of the body that is sensible to the touch is equally susceptible of receiving the impression of medicines and of conveying it to all the other parts." I merely notice here the word "equally," and pass to the next paragraph. "Next to the stomach, the tongue and mouth are the parts most susceptible of receiving medicinal influence. However, the interior of the nose, the intestine-rectum, the genitals, and all parts endowed with great sensibility, are equally susceptible of the influence of medicines. This is the reason that when the latter are introduced into the body, through wounds or ulcers, they act as energetically as if administered by the mouth." Again we notice the word "equally," also "as energetically," and read once more, "Even those organs which have lost the sense that was peculiar to them—such, for example, as the tongue and palate deprived of taste, the nose of smell &c.—communicate to all the other parts of the body the effects of the medicines acting immediately on themselves, in as perfect a manner as if they were in possession of their own peculiar faculties." The value of this last statement in cases of paralysis and all partial loss of power will be self-evident: it also is confirmed by a fact previously noted in these papers, that sensation has been discovered by medicines in parts where anatomists and physiologists have hitherto failed to prove the existence of nerves, and is a part of the general truth that is perpetually coming to the front in homeopathy, which may be stated somewhat broadly as follows: that you can't reason from the condition of one part of an organ or function as to what will be the condition of other parts. Perhaps the remarkable condition known as catalepsy will be as good a general illustration of this as can be

advanced. In this condition there are most authentic records to prove that persons may be in a condition in which they are totally unable to communicate their feelings or even any distinct proof of life to the outer world, yet may be most conscious of what is being said and done around them, or, it may be added, of them: hence there comes the most practical caution not to say, in the presence of the sick, whatever their *apparent* insensibility, anything we should not wish them to hear. The last remark here is, "Although the surface of the body is covered with skin and epidermis, it is not less accessible to the action of medicines, especially of such as are liquid. However, the most sensitive parts of this covering are those which have the greatest tendency to receive it." A few remarks on "Animal magnetism (mesmerism)." On the application of positive and negative mesmerism," close the *Organon*. Mesmerism, he states, "influences the body of the patient by the touch, acts homeopathically by exciting symptoms analogous to those of the malady." "It acts likewise by imparting a uniform degree of vital power to the organism when there is an excess of it at one point and a deficiency at another." "Finally, it acts by immediately communicating a degree of vital power to a weak part or to the entire organism;" also, "it recalls to life persons who have remained in a state of apparent death during a long interval of time." All these are given as instances of positive mesmerism, and the mode of their application and the class of cases for which each is respectively suited, is carefully distinguished. Then follows negative mesmerism in which transits are made to awaken a subject from a state of somnambulism, and all the manual operations which are designated by the names *calming* and *ventilating*. Two cautions are given— 1. Under positive mesmerism that it "cannot effect a durable cure when the local affection is of an ancient date, . . . but is of no slight aid in the radical cure of the entire affection by antipsoric remedies." 2. "Repeating the passages daily, half an hour or a whole hour, . . . induces somnambulism, . . . a highly unnatural and dangerous condition." It will be seen here as throughout the work that what is taught is quite different from what is at present current under the various names of Mesmerism, Hypnotism, Electrobiology, Clairvoyance, &c., of the present day.

The classes of cases are carefully defined—in other words individualised: *cure*, strictly speaking, is claimed only for the antipsoric treatment; and last, but not least, the abuse which is only too painfully apparent in the present day, as witness the jaded appearance and loss of personal volition in those who give themselves to be habitually subjected to hypnotic or similar phenomena, is strongly protested against.

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## MATERIA MEDICA.

### A FEW FRAGMENTARY PROVINGS.

By E. V. Ross, M.D.

*Aconite*.—A sensation as if the skin of face was drawn tightly over the bones.

*Apis*.—A man who was stung by a honey-bee on the right ear soon experienced a violent itching and tingling of both hands; then the feet began to be affected in the same manner, the tingling sensation changing to a burning and itching; then the whole body became enormously swollen and red. This occurred some five years ago, and he has been troubled ever since with violent itching of the hands when they got the least cold.

*Cascara Sagrada*.—Brown watery evacuations, pouring out like water from a hydrant. Dull, griping pains in lower part of abdomen (below umbilicus) before stool and after stool; passes a great deal of offensive flatus; when he thinks to pass flatus stool escapes; tenesmus and burning, smarting pain in rectum after stool; dull, griping pain in rectum before stool and after stool.

*Iodine* (3rd cent.) produced *fine* acneous eruption on right side of face, with violent burning and itching; twitching of the right upper eyelid, with twitching sensations in various parts of the body.

*Lycopodium* (200 and 10m.).—A short time ago I administered to a lady, *æt.* 58, *Lycopodium* 200 (Tafel) for a few symptoms calling for this remedy. The remedy was repeated twice, and shortly after its administration it seemed to develop the following accessory symptoms: Heavy feeling in the abdomen when standing, as if it

would burst; > by pressure with hands and when sitting; lower part of body, from waist down, "feels as heavy as lead;" heavy, powerless feeling in lower extremities, so heavy she can hardly walk; sinking spells, with cold, clammy, sticky perspiration, occurring every other night; dreads to be left alone.

When my patient related to me the above symptoms, it recalled to memory my own experience, which happened about two years ago. I had taken *Lycopodium* 10m. (Fincké) for an attack of indigestion calling for this remedy; although the symptoms were quite prominent, I thought it a mere coincidence. The symptoms were as follows: Heavy feeling in the abdomen when standing, and walking; distended feeling in abdomen when standing as if it would burst; > by supporting abdomen with hands and sitting. These symptoms returned every afternoon for three days, then disappeared.

Allen's *Encyclopedia* gives a few analogous symptoms, as "fulness, heaviness, and tension (in abdomen); distension of abdomen (from flatus)," &c. The *Guiding Symptoms* gives under "sensations," "bursting pain in abdomen, bloated feeling of abdomen, heaviness of abdomen." *Encyclopedia* gives "desire to be alone." *Guiding Symptoms* gives "desire to be alone; also dread of solitude." Dunham says, "great fear of being left alone" (*Lectures on Materia Medica*, p. 264).

*Opium*.—Wants to climb up the side of the wall and trees, to climb up the side of the bedstead (from applying opium twist in cavity of a hollow tooth for the toothache).

*Podophyllum* (30th cent).—Yellowish - brown, slimy, stringy stool, griping in abdomen before stool, and escape of a great deal of flatus with stool, with a loud noise.

*Sulphur*.—A medical gentleman, who was very susceptible to the action of this remedy, experienced the following symptoms: Wheezing, asthmatic breathing, with tightness across chest and a tickling, creeping sensation in the bronchi; these symptoms were somewhat relieved by throwing the shoulders forward and placing both hands on the chest; then followed a profuse secretion of mucus from the nose, and bronchial mucus membrane with cough, and a profuse mucus expectoration.

*Tobacum*.—A gentleman could not smoke a cigar without the following effects: Dreams of being intoxicated; intense vertigo on the *least motion*, everything seemed to turn in a

circle, with nausea (like seasickness) ; when lying with eyes closed, everything in the room seemed to be going in a circle, greatly < by turning the head sideways ; deathly nausea with vertigo when walking ; frequent desire to pass water as often as every fifteen minutes, voiding the usual amount each time ; urine clear like water ; involuntary urination in sleep (compare symptoms in Allen's *Encyclopedia*) ; profuse sweat on hands and face, with weak, exhausted feeling. "It seems as if the entire nervous system had given out."

Rochester, N.Y.

### ANEMONE JAPONICA.

By AGRICOLA.

*Anemone Japonica Acetate 2x* recently set into normal action a suppressed, or rather delayed, menstrual flow within a few hours after applying three doses of, say, 1 drop, by the finger-tip on the tongue's surface. Headache, dyspepsia, sacral and pelvic pains being quite distressing—all these vanished as if by magic after the third dose. In my own case I was awake by much oppression and distension in the hypochondrium cardiac region, causing me to sit up in bed for relief. *Anemone Japonica* as above set all in motion, and I slept. This happened two nights in succession. I think the trouble lay in the splenic end of transverse colon.

A young man sent to me for a distressing flatulent gastric distension and other symptoms of dyspepsia, mentioned casually that for upwards of a year he had suffered from psoriasis on the legs and which his "club doctor" (a most painstaking class by the bye) had told him was quite incurable.

*Carbo.-v.* alt with *Nux* during first week ; *Bryonia* during second week : these benefited the flatulent etc. dyspepsia ; then *Arsen.* 6x for a fortnight was given him for the psoriasis. But as the flatus again became so unbearable as to prevent his usual occupation, and as a return to *Carb.*, *Nux*, *Bry.* failed to effect a cure, *Anemone Japonica Acetate 2x* was given. When I next saw him he had become actually fat and declared that *this* was the medicine which had cured the psoriasis. I however drew his attention to the fact that the curative action of a suitably chosen

medicine of homeopathy often does not become exhausted weeks even after the last dose. Time will probably yet prove that *Arsen.* was the therapeutic agent.

### VIPERA—A NEW SYMPTOM.

A CORRESPONDENT has sent us the following cutting from a weekly contemporary. The peculiar symptom "sensation of swelling in the teeth" should be specially noted. We do not remember to have seen it before though *Tuberculinum Kochii* has caused "feeling as if the teeth were all jammed together and too many for his head" (see HOMEOPATHIC WORLD, 1891, p. 157).

### THE BITE OF THE VIPER.

"Viper bites are in this country by no means common, and except to children seldom fatal. Yet the venom may, especially on very hot days, and if the reptile has not been disturbed for some time, cause alarming symptoms. Mr. Rudge gives his personal experience of a mishap of this kind near Plymouth. After the viper had bitten his right thumb he immediately sucked the wound and tried to think no more about it. But this was impossible, for in fifteen minutes a livid patch formed round the point where the fangs had entered, and the hand and arm had swollen until he was unable to hold anything and in a fainting condition. 'A peculiar taste and a sensation of swelling in the teeth' followed. Then the tongue commenced to swell, and became so large that he could hardly move it, while his eyes were ready to start out of their sockets. In half an hour a terrible vomiting began, preceded by excruciating pains in the stomach and heart, and continued altogether for nine hours, every drop of liquid being ejected almost as soon as swallowed, accompanied by serious disturbance of the excretory functions. After a time, consciousness, which had never been completely lost, fully returned, and after two days the arm, which had been swollen the size of the leg, recovered its original condition, and, except for rheumatic pains and impaired digestion, the victim of this narrow escape does not seem to have been much the worse for his adventure. The rattlesnake's bite is so speedy that it is scarcely possible for the hapless victim to record his feelings, though, when plenty of spirits have been drunk, recoveries are frequent. The cobra and some of the tropical snakes are, however, fatal so rapidly that their bites are practically sudden death. No cure has been discovered, the subcutaneous injection of

*ammonia*, from which for a time such great things were hoped for in Australia, being effectual, just as the whisky treatment is, by sustaining the depression of the system until the bitten person can recover from the depressing effects of the poison on his circulation."

## INSTITUTIONS.

### THE MELBOURNE HOMEOPATHIC HOSPITAL.

#### TWENTY-FOURTH ANNUAL REPORT.

We have pleasure in reproducing the following from the last report of this important institution :

*To the Contributors.*

LADIES AND GENTLEMEN,—The Board of Management have pleasure in presenting to you the Twenty-fourth Annual Report of the Institution, together with a statement of accounts on the Maintenance, Building, and Endowment Funds, and tabulated statement of patients treated for the past year.

#### FINANCIAL.

The financial and commercial depression has to some extent effected the income of this Institution, whilst at the same time the increased accommodation afforded by the new wing, and consequent additional demands upon the resources of the Hospital, have entailed much heavier expenditure. Fortunately, the Board were enabled to carry a credit balance forward from the previous year, which has materially assisted them to meet their liabilities.

The Maintenance Fund shows that the credit balance brought forward at the commencement of the present year was £409 4s. 1d., the income amounts to £4,161 2s., making a total of £4,570 6s. 1d. to meet the yearly expenditure, which amounts to £4,533 17s. 11d., leaving a small credit balance of £13 18s. 2d. to be carried forward to next year. During the year the sum of £1,199 17s. 3d. was received in annual subscriptions, as against £1,446 13s. 1d. for the previous year, showing a falling off of £246 15s. 10d.; Hospital Sunday Fund, £553 7s. 2d., as against £869 9s. 4d. for the previous year. The expenditure shows an increase of £508 8s. 2d.; but during the last twelve months the Board have had to maintain the additional cost of the new wing and a much larger number of patients than hitherto. The increased expenditure, however, is not commensurate with the additional number of patients treated. Alterations have been made which, it is hoped, will considerably reduce the expenses



for the year just entered upon, without impairing the efficiency of the Institution.

The Building Fund Balance Sheet shows that the receipts have been £85 9s. 6d., and expenditure £136 2s. 2d., which, with the addition of the overdraft brought forward, leaves at present a debit balance of £513 8s. 8d.

The Endowment Fund shows an increase of £252 5s. 11d. The total amount to the credit of this fund is now £1,695 5s. 4d., £1,800 of which is on fixed deposit in the Union Bank, bearing interest at the rate of 5 per cent. per annum. The Board, whilst thankfully acknowledging the donations under this heading, desire to say that they trust this important fund will not be forgotten by all who have the welfare of this Institution at heart; and they hope to see it so considerably augmented that the interest will materially assist in the maintenance of the Hospital.

PATIENTS TREATED.

The total number of patients treated during the past year is as follows:

Total	...	...	...	...	...	3,527
Casualties	...	...	...	...	...	215
Prescriptions dispensed	...	...	...	...	...	16,354
Daily average of patients attended to	...	...	...	...	...	103·8

The return is particularised in the following manner:

IN-PATIENTS.

Brought forward from last year	...	63	
Since admitted	...	756	
			819
Discharged, cured, or relieved	...	691	
Died	...	64	
Remaining indoor	...	64	
			819
The average number of days each patient remained in Hospital was	...	29	
Daily average of In-Patients	...	69·61	
Prescriptions dispensed for In-Patients	...	7,618	

OUT-PATIENTS.

Brought forward from last year	...	321	
Since entered	...	2,387	
			2,708
Discharged, cured, or relieved	...	2,308	
Still attending	...	400	
			2,708
Number of respective visits	...	8,736	
Daily average	...	33·47	

## CASUALTIES.

Total number	...	...	...	...	...	215
Namely	...	176 males—39 females.				
Operations	...	...	...	...	...	111

The number of both Indoor and Outdoor Patients who have sought the relief of the Hospital has exceeded by far that of any previous year, and the Board are pleased to think that this large increase clearly demonstrates the extended usefulness of the charity. The increase will be clearly shown by comparison with last year's Report :

	Last Year.	This Year.	Increase.
In-Patients treated	572	819	247
Out-Patients „	2,456	2,708	252
Total	3,028	3,527	499

## THE NEW WING.

The new southern wing was fully occupied during the past year, and has proved a great boon to many who otherwise would have been unable to gain admission. This wing, with the exception of the private paying wards, has been set apart for the reception of surgical cases.

## APPOINTMENTS.

The following appointments have been made :

- Dr. J. P. Teague and Dr. W. R. Ray re-elected for a further period of three years in conformity with the Bye-laws.  
 Dr. W. K. Bouton (previously Resident Medical Officer), appointed surgeon to In and Out-patients, 1st Sept.  
 Dr. J. R. P. Lambert on the Out-Patient staff, 1st July.  
*Life Governors*.—Messrs. Edward Preston, Arthur Taylor, Edward Hart, Thos. Webb, Thos. Tyson, B. E. Bur-stall, and Councillors Robt. Walker and C. J. Davis.  
*Life Subscribers*.—Hon. J. M. Pratt, M.L.C.; and Messrs. William Wilson, Cook, and Joseph Bassett.

Mrs. M. Muffit resigned her position as Matron on the 2nd April. The Board desire to place on record their appreciation of her untiring efforts to promote the welfare of the Institution and the comfort of the patients, as well as her kindly care and supervision of the nurses under her control.

Miss K. Campbell, previously Day Superintendent of the nursing staff, has been appointed to the vacancy.

### SCHOOL FOR PUPIL NURSES.

The customary Winter session of Lectures in connection with the school for pupil nurses terminated on the 30th of September last, after which the annual examinations for certificates of competency were held by the Honorary Medical Staff. The subjects comprised—Anatomy, Physiology, and General Nursing. Eight candidates presented themselves for examination, and six succeeded in passing. The names of the successful candidates were—Nurses K. Martin, R. Hallett, M. Swan, P. Fletcher, P. F. Smith, and S. L. Ellson.

The Lectures in connection with the present year's examinations commenced on the 31st May, and will extend up to the 13th September next. The following constitute the lecturing staff:—Dr. Teague—subject: Elementary Anatomy; Dr. W. R. Ray, Elementary Physiology; Dr. Seelenmeyer, General Nursing; Dr. Bouton, General Nursing; Dr. Wheeler, Hygiene. The lecturing staff this year has been increased by the addition of Dr. Bouton, and Dr. Lambert has assisted by giving private lessons to the nurses on bandaging.

### GROUNDS.

The grounds in front of the Institution have been improved during the past year under the able direction of Mr. Guilfoyle, F.R.S., Director of the Botanical Gardens. Mr. C. R. Ricketts has been engaged to keep them in order, and has carried out the work in a satisfactory manner.

### LADIES' AID ASSOCIATION.

The Ladies' Aid Association have done much to assist the Board by supervising the detail working of the Hospital, and in many ways adding to the comfort, not only of the patients, but also of the nursing staff, and the generous efforts of the ladies in this direction are worthy of all praise.

Before concluding this report, the Board desire to impress upon all friends of homeopathy that a largely augmented income will be required for the maintenance of the Hospital, and they hope that the increased support of a generous public will be commensurate with the now increased importance of the Homeopathic Hospital.

### ANNUAL REPORT OF THE RESIDENT MEDICAL OFFICER.

20th July, 1892.

*To the Board of Management of the Homeopathic Hospital.*

GENTLEMEN,—I have the honour to present to you the Medical Report for the year ending 30th June, 1892.

The number of patients admitted to the wards during the past year has been 819. Of these cases 64 have terminated fatally. These have been cases mainly of the following diseases in the order given, viz., typhoid fever, diseases of the respiratory system, cardiac diseases, phthisis, cancer, accidental, and one case of dillirium tremens. The number of typhoid fever cases has been 176. Excluding those cases which were brought to the Hospital *in articulo mortis*, the mortality has been 6·8 per cent. The percentage of fatalities in typhoid fever cases admitted during and after the third week of illness has been large. The average mortality in all departments has been 8·6 per cent.

The number of Out-Patients this year amounts to 2,708. The average daily number of Indoor-Patients has been 69·61.

The total casualties treated number 215.

The surgical wards in the new wing have been in constant use during the year. Homeopathic medical treatment is found of great value as an adjunct to the surgical treatment.

There have been 24 major and 87 minor operations. A complete list of them is appended.

As shown by the Inspector's Report, the general sanitary condition of the Hospital is excellent.

I have the honour to be, yours respectfully,

R. S. STEPHENSON, M.B., C.M.

**HOW TO REMOVE NITRATE OF SILVER STAIN FROM THE FINGERS.**—A correspondent of *The Scientific American* gives the following harmless process: First paint the blackened parts with tincture of iodine, let remain until the black becomes white. The skin will then be red, but by applying ammonia the iodine will be bleached, leaving white instead of black stains of nitrate of silver.—*New York Medical Times*.

**SOME HIGHLAND CURES.**—A correspondent of *The Lancet*, who seems well acquainted with the Highlands of Scotland, writes about the medical folklore there, and mentions amongst rational cures that for whooping-cough some recommend that the child should be taken across a ferry; others that he should above all go to live in another property; others that he should go to a house where master and mistress have possessed the same surname. All these procedures involve change of air, which has in such cases no doubt been found beneficial. On the same general principle, coltsfoot is used in asthma, warts are washed in pig's blood, and a person with weak lungs takes with great advantage a preparation of twenty-four different herbs, which occupy several weeks to collect. An infusion of adders' heads is used as a dressing in snakebite, and, it is said, with excellent results. That is on the homeopathic principle.—*Chemist and Druggist*.

## EXTRACTS.

## HOMEOPATHY IN 1892.

THE march of progress during the last century is most conspicuous in every department of Art, Science and Literature. Nowhere is the advance more conspicuous than in the domain of surgery and medicine. Operations which would at one time have been considered hopeless are now performed with perfect safety. When Hahnemann inaugurated his reign of law in medicine in 1810, his colleagues soon drew a distinction between the new and the old medical practise ; and reviewing both systems after eighty years of trial, one striking fact stands forth to arrest public attention : the old medical practise has undergone marked changes until it is almost revolutionised, whilst the laws promulgated by Hahnemann and the drugs used by him in specific disease-conditions are to-day found occupying the same position—the bleeding, blistering, and purging of our younger days being no longer looked upon with favour in advanced medical opinion. The old allopathic treatment is gradually incorporating into its *Materia Medica* the laws of cure discovered by homeopathy, and one cannot help contrasting with the new some of the inconsistencies of the old system with its sundry drugs measured up and put promiscuously into a bottle totally regardless of what chemical reactions might occur. Large doses of these mixed compounds often astonished medical men by their unexpected effects. In the newer system, regulated by law, single medicaments are tried on the healthy system (proved), and then at once by the law, *similia similibus curentur*, they become specifics in everyday practise, acting alike in the hands of every student of nature. Many of the most useful of our medicaments have been discovered by observation, often by very ignorant persons, even by savages. Surgeon Parke might well say the medicine men of Africa could teach our professors some good lessons. It has been truly said that the study of the natural history of disease engrosses too much of the time of our medical students, whilst the practical study of therapeutics is almost a dead letter. What benefit is it to a patient to know that a certain *comma bacillus* is always found in cholera excrement, or that a rod-shaped one is found in typhoid ? The homeopathic law that a particular medicine produces a definite result is much more to a practical purpose than all the natural history of disease. The mention of cholera recalls again the value of homeopathic treatment. During the first epidemic, and before the father of homeopathy had ever seen a case, from his knowledge of medicine and the application of homeopathy, he pointed out the best and most successful mode of dealing with the

disease. This has now been well tested in the wards of cholera hospitals, where the percentage of recoveries is much greater in homeopathic than in allopathic practise. When a titled lady offered to endow one of our London Hospitals with a fortune if they would set a ward apart for the practical testing of homeopathy, it would have been a boon to humanity to have accepted it. Whenever the new practice and the old have been pitted together, homeopathy has come out of the ordeal triumphant. Lovers of fair-play will at once say: Do not strangle the new system, but let it have fair-play. There is ample room in the amelioration of disease. That the old practise of medicine has lost faith in itself is evidenced by the reply of the Royal College of Physicians to the Local Government Board on their asking for instructions as to the best medical treatment of cholera. The College replied that it proposed no instructions for the treatment of cholera, but gave instructions for the prevention of diarrhoea and of cholera, which might possibly be followed by the richer classes, but which were quite useless for poor people. Had the Local Government Board asked the homeopaths a like question, what a different answer they would have received! From those rough notes it may be thought that homeopathy is worthy of a trial as an aid in relieving human suffering.—W. Crespi, in *The Whitby Gazette*.

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#### RHEUMATISM IN A BABY.—*CHELIDONIUM*.

BABY VERA C. has had rheumatism for one week in both ankles until day before yesterday, when it settled in right ankle, which is now greatly swollen and very tender, painful, and hot.\* Has had constipation for past two months, with whitish stools. Rheumatism in right ankle, with constipation, condition as described, indicates *Chelidonium* according to the law of S. S. C., which is given. Commenced to improve in twelve hours, and is now, after one week, entirely well of both constipation and rheumatism.—*American Homeopathist*.

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#### COCCYODYNIA CURED BY *KREASOTUM*.

Miss J. A. complains of unbearable burning pains in sacrum extending down to coccyx, with feeling there, when sitting, as if an electric battery was attached with needles which were pricking through the skin. Better when rising from seat; attended with milky leucorrhœa. Prescribed *Kreasotum*. Well third day.—*American Homeopathist*.

BACILLINUM: ITS CURATIVE POWER ON  
DIFFERENT DISEASES.\*

By JOHN YOUNG, M.D. (formerly of Brooklyn, N.Y.)

THROUGH the *Homeopathic Recorder* (March number, 1891), I became aware of Dr. Burnett's little book, *New Cure of Consumption*. Being myself interested in the treatment of consumption, I bought the book at the store of Boericke & Tafel, as also the medicine *Bacillinum*. Having carefully perused the contents of the little book, I determined, as I was about to sail for Europe, to try its effect on my arrival in Switzerland. During my short stay in Basel I had occasion to administer *Bacillinum* to about six persons. From Basel I went to Herisau, Canton d'Appenzell. There I had occasion enough to demonstrate amongst my friends the wonderful effects of *Bacillinum*, amidst the great opposition of the doctors, who laugh and snarl at the idea of such a treatment as something completely new in practice. During sixteen months many very remarkable cures have been performed, even several known as incurable, so that from east to west, all through Switzerland, *Bacillinum* has found an entrance. In a journal, treating on "General Consumptiveness," I asserted that the principal cause of idiotism and cretinism is tubercles in and around the brain, and the only remedy to reach these tubercles, and to re-establish a harmony between the moral and the physical, is *Bacillinum* in its different strengths. This affirmation brought the strong phalanx of allopaths against me in controversy openly in the same journal. They could not deny the cures, but ridiculed the idea of using such means to cure diseases. My last words of defence were those which Dr. Burnett used: "Machs nach! Aber machs besser!" This ended for the present our controversy.

Allow me to send you here a few, but very interesting cases, where *Bacillinum* has shown markedly its curative powers.

1. A mother brought a child of 12 months, covered from head to foot with a syphilitic eruption, the eyes like raw flesh. I gave the child on her tongue 15 small pellets of *Bacillinum*, 200. A week after, the change was more than could be expected. Again the same dose;—8 days later the child could see well, and the eruption was more than half gone. Two weeks' longer treatment in the same manner, the child was perfectly healed—a proof that *Bacillinum* has curative effect on syphilis.

\* [From the *Homeopathic Recorder*, November 15, 1892. As the writer of this interesting article does not appear to have had an opportunity of correcting the proofs, the editor of the HOMEOPATHIC WORLD has taken the liberty of making some corrections, and also of altering the phraseology, which is not always idiomatic, English apparently not being Dr. Young's mother tongue.]

2. A Miss E., of 27 years, having spent the winter of '90-'91 in the hospital at Basel, being sent home in April, '91, pronounced incurable, suffering with consumption, sent for me May 16, 1891. Examination pronounced both lungs in an advanced state of phthisis. She began with 20 pellets of *Bacillinum*, every eighth day the same dose. In the July following she called at my house in Herisau, and, in truth, I was astonished to see her so well. Kept on in taking *Bacillinum*, when in September, visiting Basel, I found her very well.

3. A Miss S., teacher of 38 years in Basel, suffering for years with bad digestion, not able to keep food on her stomach, had the symptoms of commencing cancer of the pylorus. This lady received *Bacillinum*, one dose every eighth day, and after six months was totally cured.

4. A merchant in Basel, 32 years old, consumptive for several years, received from his doctors, as a last resort, *Kreosotum* in capsules. Getting worse from month to month, the family desired he should consult a homeopathic physician. Was consulted, and examination showed the upper parts of the lungs badly affected, covered by tubercles; also there was chronic bronchitis. Received *Bacillinum* 200, 20 pellets every eighth day, continuing the medicine for three months, and to the astonishment of his friends he became a healthy man.

5. A dessinateur here in Herisau suffering from weak lungs, constant cough day and night, underwent a so-called "Kneipp" treatment at a place in Germany. Six weeks afterwards he came back a skeleton, emaciated, miserable. Examination proved the whole upper part of the lungs covered by tubercles. *Bacillinum* cured him perfectly in two months.

6. A young girl of 16 years, of Lofingen, over two years ago had scarlet fever, was neglected, and lost appetite and sleep. Menses had ceased more than 18 months. To all appearance she was in a decline (consumption). I gave her *Bacillinum*, 20 pellets every week. The result was indeed beyond my expectation. The menses returned, and the other complaints disappeared, sleep came back, and after three months she became a blooming girl.

7. This is a very remarkable case. A maiden lady of 37 years, residing at Lichtensteig, being more or less sick for sixteen or seventeen years. The first cause was hysterical spinal irritation; grew worse from year to year; her spine curved over  $1\frac{1}{2}$  inches; her left hand inflamed, which led to amputation of her forefinger. Over two years ago she became helpless in both legs. The doctor at Wattwyl (city hospital), as it was then just the fury of Dr. Koch's lymph system, thought fit to inject her with the lymph. This he did eighteen times. After this had been done, her legs, from hip to foot, became as dead, without any feeling.



It was on December 2, 1891, I found her in that condition. I left her *Bacillinum*, 20 pellets, every week one dose. After four weeks some feeling returned; also she became able to move her toes. Treatment continued for some time longer in the same manner. In May last she was able to sit up. In June she was strong enough to get up and walk alone in her room. Now it is August 9th. Her legs are perfectly normal, and with the exception of the curve in her back and the sore hand, she is as well as she had been in her younger days.

This lady had been pronounced incurable, and people of Lichtensteig, with their doctors, are enchanted over such a cure. *Bacillinum* has done its work perfectly, and many such so-called incurable cases would yield under the blessed influence of this wonderful medicine.

8. Another case where old and new school doctors have more or less failed. A butcher's wife about 58 years old, residing in Lichtensteig, has been for years complaining of rheumatism, but more especially a stiffness and redness in her arms, hands, legs, and feet, which resulted gradually in arthritic gouty contractions of the joints of fingers, toes, and even of the knees, to such an extent as to render it impossible for her to close the hands, and to walk except with great difficulty. She received *Bacillinum* in the same way as the others, and in less than three months all her stiffness was removed, and she is now very well. Here it was evident that *Bacillinum* absorbed the chalky substance in the joints.

9. A case of *idiotisme* and *cretinisme*, which made a great stir. In August, 1891, I was called by telegram to go to a place near Neuchatel, about 150 miles from Herisau, and found there a ten-year-old girl, a perfect idiot and cretin. The history of the child was about this: Until after vaccination (she was 1½ year old) was very well; from that time she began to act as having no sense, growing worse from months to years. Her parents consulted doctors in different cities, as London, Paris, and Vienna without the slightest amelioration. They heard from a doctor of Basel that I had attended there a sixteen-year-old idiot, whose reason returned partially. I found the girl in the following condition: Height, 2 feet and 5 inches; age, 10 years; the teeth hidden in the gums; hardly able to stand; unable to walk and talk; head, front narrow and large at the back; several smaller and larger elevations on the skull, some soft, others hard; nose, eyelids, and lips extremely large—type of an idiot and cretin.

A careful examination, especially of the deformed head, with its elevations, disclosed nests of tubercles. [*Sic—Qy.*: What does Dr. Young mean by these? What were the appearances?—Ed. H. W.] Her eyes without life, no desire for anything; in

fact, the most ungrateful expression! Now what was to be done? My mind was soon made up on one point, to give an antidote to these colonies of tubercles, and I decided on *Bacillinum* as the only means to bring about a change. She received on the 10th of August, 1891, 20 pellets, to continue every week the same dose. I visited her in October of the same year, when there was a great change apparent: she had begun to talk and walk; the teeth were appearing out of the gums; the head had a better form, and the general condition of the whole body was changed. The same medicine was continued. In November it was decided that I should go to London to a conference, to consult with Dr. Burnett. (Dr. Burnett mentioned my visit to him in his second edition of *Cure of Consumption*, pages 151 and 152.) After this, every month brought some new change. It is just a year since the child came under my care, and what a change has *Bacillinum* 200 effected! The child talks, walks (even runs), has grown  $3\frac{1}{2}$  inches, intelligence restored, enjoys her life extremely, being quite cheerful and bright. Now am I wrong in asserting that the main causes of idiotism and cretinism consists in tubercles, the germ of such a dreadful calamity being introduced either by bad virus of vaccination or by inheritance from the parents?

## REVIEWS.

### THE SIDES OF THE BODY. KINDRED REMEDIES.\*

In the issue of THE HOMEOPATHIC WORLD for March, 1890, we reprinted this useful little work of Bönninghausen's, from Hempel's translation. Dr. Tyrrell, having in his possession the German copy from the library of the late Dr. Lippe, has made a new translation, and has incorporated Dr. Lippe's additions, and also his alterations in the underlining of the remedies: his experience having proved some to be more emphatically right- or left-sided than Bönninghausen was aware. Dr. Lippe's additions are indicated by being included in brackets. Dr. Tyrrell's preface runs as follows:—

"In giving the profession Bönninghausen's valuable work, 'Sides of the Body,' I have endeavoured to produce as literal a rendering as possible of his preface; following not only the spirit of the author,

\* *The Sides of the Body. Kindred Remedies.* By Dr. C. von Bönninghausen. Translated for the Homeopathic Physician and issued as a supplement to vol. xii. (1892) by Dr. J. D. Tyrrell, of Toronto, Canada. Philadelphia: The Homeopathic Physician, 1125, Spruce Street. London: Homeopathic Publishing Co., 12, Warwick Lane, E.C.

but preserving those little German conceits which mark the truth and simplicity of his great mind.

"My German copy having been one of the many obtained from the library of the late Dr. Ad. Lippe, I enclose in brackets those remedies added by him; also he has raised in degree many remedies, which I have marked accordingly, and give a list to distinguish them, and that any one having a copy may mark them. Again I wish to call attention to a mistake in the German text of Part II., copied alike in Hempel's translation and the reprint in THE HOMEOPATHIC WORLD, March, 1890, viz.: In 'Kindred Remedies,' opposite *Mur.-ac.*—take out *Mur.-ac.* and insert *Mezer.*

"The raised remedies in the numbered rubrics, left and right, are as follows:—*Amm.* 4 r.; *Arg.* 10 l.; *Ars.* 1 r., 3 and 16 l.; *Aur.* 1, 7, and 16 l.; *Brom.* 10 r.; *Canth.* 15 l.; *Caust.* 18 l.; *Chel.* 4 l., 9 and 15 r.; *Chin.* 1 r.; *Clem.* 4, 12, 16 and 18 l.; *Colch.* 9 r.; *Coloc.* 10 l.; *Con.* 6, 9, 14 and 17 l., and 6, 14, 16 and 18 r.; *Dig.* 16 and 18 l.; *Dulc.* 13 r.; *Euphr.* 8 r.; *Fluor.-ac.* 17 l.; *Ipec.* 1 and 18 l.; *Kali* 4 r., 17 and 18 l.; *Merc.* 1 and 18 l., and 12 r.; *Mur.-ac.* 14 r.; *Natr.* 1, 4, 6, 9, 13, 14, 16, and 19 r., and 17 l.; *Nat.-m.* 4, 6, 13, 14 and 16 r.; *Nitr.* 4 r.; *Nitr.-ac.* 1 16 and 18 l., and 4 r.; *Nux-v:* 10 r.; *Phos.* 18 l.; *Rhus.* 9 and 10 r.; *Sep.* 5 r.; *Sil.* 2 r., 6 l.; *Stram.* 16 and 19 l., and 17 r.; *Stront.* 18 r.

"Many unfavourable remarks bearing upon Bœnninghausen's 'Sides of the Body' have been published, but from my own experience I can testify to its great value to those who know how to use it. I therefore hope that this publication may in some slight degree aid in the fulfilment of the author's wish that his 'little work' should materially assist in the choice of the remedy. J. D. T."

### INDIGESTION.\*

The Preface to the fourth edition of this work, which has just been issued, runs as follows:

"The call for a new edition of the following treatise has once more given me an opportunity of putting it through a complete revision. Without increasing the size of the work so far as to alter its character, I have yet been able to incorporate a good deal of new matter, including two recent cases. Several parts which on re-reading seemed to me somewhat meagre, I have amplified; and I have taken advantage of the suggestions of correspondents, who have kindly taken the trouble to point them out to me, to rectify one or two errors that had formerly escaped me. I have also made additions to the *Materia Medica* part.

"JOHN H. CLARKE."

\* *Indigestion: its Causes and Cure.* By John H. Clarke, M.D. Fourth Edition, Revised and Enlarged. London: James Epps & Co., 170, Piccadilly, and 48, Threadneedle Street, London (pp. 141).

## OPHTHALMIC DISEASES AND THERAPEUTICS.\*

The growth of a text-book in its passage through successive editions is strikingly illustrated by the volume before us. "Allen and Norton on Ophthalmic Therapeutics," was a modest little book that could easily be carried in the pocket. The second edition of the work, brought out by the late Dr. George S. Norton, without the collaboration of Dr. T. F. Allen (whose *Materia Medica* labours absorbed all his spare time), had far outgrown the pocket size; and now we have the third edition, a complete text-book of eye diseases with their homeopathic treatment, a solid work of 550 pages.

From the preface we learn that, at the time of his lamented death, Dr. George S. Norton had planned and partly executed, with the aid of his brother, Dr. A. B. Norton, the text-book before us, a work of much wider scope than the first two editions; and it was only "after months of careful consideration and grave doubts as to the ability of the writer to complete the task creditably" that the task was undertaken. Dr. A. B. Norton has proved himself a worthy successor of his brother, to whose memory the work is most fittingly dedicated, an excellent portrait forming the frontispiece of the volume.

The present author, who has succeeded his brother in the chair of Ophthalmology in the college of the New York Ophthalmic Hospital, and is associate editor of the *North American Journal of Homeopathy* in the department of Ophthalmology, besides holding other special appointments, brings a full special knowledge to the work. The plan is the usual text-book plan plus homeopathy. Part I. consists of eighteen chapters, of which the contents of the first chapter are as follows:—

## "CHAPTER I.—DISEASES OF THE EYELIDS.

"Anatomy—Blepharitis acuta—Blepharitis ciliaris—Nictitatio—Hordeolum—Ptosis—Blepharospasmus—Blepharophimosis—Trichiasis and Distichiasis—Entropium—Symbblepharon—Anchyloblepharon—Epicanthus—Molluscum contagiosum—Xanthelasma—Miliun—Papillomata—Dermoid Cyst—Nævi—Chalazion—Epithelioma—Lupus and Sarcoma—Herpes Zoster Frontalis—Syphilitic Ulcers, Chancre, and Gummata—Contusions—Wounds—Burns and Scalds."

Under each heading there is a description of the affection, and where operative measures are required they are fully described. Then follows a list of the remedies most commonly indicated and their indications.

Part II. is entirely occupied with the therapeutics of eye

\* *Ophthalmic Diseases and Therapeutics.* By A. B. Norton, M. D. Philadelphia: Boericke and Tafel. London: Homeopathic Publishing Co., 12 Warwick Lane, E.C.

diseases. The original "Allen and Norton" consisted of this part alone. It comprises over 150 pages, and contains much clinical matter. Only the special eye symptoms with their conditions are given; so the work does not substitute the use of the general materia medica, which must be consulted for the general symptoms of a patient. We hope when the next edition appears a Repertory will be added.

The book is excellently printed, and contains numerous illustrations.

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### CLIMATE OF NICE AND THE RIVIERA: NECESSARY PRECAUTIONS.\*

There are many points in wintering abroad that can only be learned by experience; but sometimes the experience of others can be more available for those who are going to try it for the first time. For such the little pamphlet by Dr. Linn will be found especially suited. It contains advice on many topics that might not be thought of beforehand, and which to know would save much after trouble.

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### GRASSE: STATION HIVERNALE.†

THIS tiny brochure contains in its small compass much useful information about Grasse, which has become one of the most famous of all the health resorts in the Riviera.

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PINEAPPLE-JUICE DIGESTS ALBUMEN.—It is not generally known that the juice of the pineapple contains a proteid-digesting ferment; its action is weak, it is true, for three ounces digest only ten to fifteen grains of coagulated albumen, but it acts equally well in acid and alkaline media, and best in a neutral fluid. The juice also contains a milk-curdling ferment. When we speak of an enzyme being weak, it does not follow that the dose of it must be proportioned to its strength; for it is probable that a small dose will act as well as a large one, by setting up the process of digestion in a fresh line when the digestive function of the stomach is impaired. Then the peptic secretion follows the lead. On that basis, a slice or two of pineapple at dinner is not a bad thing.—*Chemist and Druggist.*

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\* On the necessary precautions to be taken to obtain the most benefit from the climate of Nice and the Riviera. By Thomas Linn, M.D. Nice, 1892.

† Grasse: Station Hivernale. Par le dr. Gabriel Peillon. Grasse: Imprimerie E. Imbert & Cie. 1892.

## NOTICES.

LECTURES AT THE LONDON HOMEOPATHIC  
HOSPITAL.

## HAHNEMANN GOLD MEDAL THESIS.

THE Educational Committee of the Medical Staff desire to make the following announcements:—

Dr. Dyce Brown has been appointed to the Quin Lectureship, and will accordingly deliver two special lectures in January.

Dr. Burford has been appointed to the Bayes Lectureship, and will deliver two special lectures in April.

Post-Graduate Lectures will be given by the members of the Medical Staff during the months of February, March, and May.

These lectures will be delivered in the Board Room of the London Homeopathic Hospital on Fridays, on the specified dates, at 8 p.m.

All medical practitioners and medical students are invited by the hospital staff to attend.

## CALENDAR.

1893.

- Jan. 13.—QUIN LECTURE I. Dr. Dyce Brown.  
“On some Functional Disorders of the Digestive Organs, and their appropriate Therapeutics.”
- „ 27.—QUIN LECTURE II. Dr. Dyce Brown.  
The same (*continued*).
- Feb. 10.—POST-GRADUATE LECTURE. Mr. Dudley Wright.  
Lecture-Demonstration “On the commoner Affections of the Nose and Throat.”
- „ 24.—POST-GRADUATE LECTURE. Mr. Knox-Shaw.  
“Pit-falls in the Treatment of Eye Diseases.”
- Mar. 10.—POST-GRADUATE LECTURE. Dr. J. H. Clarke.  
“On the Therapeutics of the Serpent-Poisons.”
- „ 24.—POST-GRADUATE LECTURE. Dr. Roberson Day.  
“On the more important Aspects of Children’s Diseases.”
- April 7.—BAYES LECTURE I. Dr. Burford.  
“On Malignant Lesions of the Abdomen of Pelvic Origin; their Natural History, Differentiation and Therapeutic Management.” Illustrated by specimens, charts, and lantern slides.
- „ 21.—BAYES LECTURE II. Dr. Burford.  
The same (*continued*).
- May 5.—POST-GRADUATE LECTURE. Dr. Edwin Neatby.  
Lecture-Demonstration on “Diseases of the Spinal Cord, with Practical Remarks on Treatment.”

## HAHNEMANN GOLD MEDAL THESIS.

The Medical Staff of the Hospital desire to announce that a Gold Medal of the value of £10 will be offered biennially for the

best Thesis on such subject or subjects as will be determined and announced by the Staff at the necessary times.

The first Award will be made in December, 1894, and Theses must be delivered at the Hospital before September 1, 1894.

The Medical has selected as the subject and scope of the first Thesis as follows, viz. :—

An original monograph on the physiology and therapeutics of some one or more of the newer remedies, comprising exact observations on the physiological phenomena induced by the drug action, and verified observations on the therapeutic range of the remedy or remedies.

The detailed conditions under which each Thesis must be written and sent in may be obtained from the Secretary of the Educational Committee, at the Hospital, and to whom all communications are to be addressed.

## APPOINTMENTS, VACANCIES, AND REMOVALS.

\* \* We shall be happy to insert notices of appointments if gentlemen will be good enough to forward them to us, and also of posts vacant and likely to be vacant, on receiving information from secretaries or committees. Under this heading also, we shall mention good openings for homeopathic practitioners and chemists.

NEW ZEALAND.—A correspondent writes: "I would just say what a grand opening there is in Wellington for both a homeopathic chemist and a practitioner as well. There are homeopaths in all the other large centres but none here, though this is the seat of government, and a great many wealthy people reside here, far more than in the other towns. Numbers of people I know have expressed the opinion that a homeopath would do well here, and many feel there is a lack that ought to be supplied."

PROGNOSIS IN ASPHYXIA.—A Paris doctor was called to a woman who, with her child, had been suffocated. "They are both dead," he remarked, "we can do nothing." The bodies were removed to the hospital St. Louis, Paris, where the same statement was made. The house-surgeon, however, asked permission to try artificial respiration with insufflations of oxygen, alternated with hypodermic injections of ether. Four receivers of oxygen were used, and the young doctor worked over his patients for three hours before a sign of life was perceptible. He finally succeeded in saving both patients. There was some sound sense in the saying of one of the Paris faculty: "Never admit as irremediable the death of an individual who has been asphyxiated, drowned, or hanged."—*Medical Reprints.*

## GENERAL CORRESPONDENCE.

## THE DRYSDALE MEMORIAL.

SIR,—Will you grant me a little space in your columns so that I may make a few observations on the question of a memorial to the late Dr. Drysdale, for I venture to think that the proposed “Free Bed” in the Hahnemann Hospital at Liverpool is not a little lacking in appositeness and sense of proportion to the great work achieved by the late Dr. Drysdale. This man was no more and no less than the scientific father of homeopathy throughout the English-speaking world; his work is colossal, his motives were unselfish, his methods pure, his learning considerable, his industry steady and constant, his devotion unswerving and unwavering, his abilities uncommon, his character high, his moral self sweet—and all devoted modestly to the development and propagation of homeopathy as *the* science of drug therapeutics, and withal ever strictly within the four corners of the medical profession in its highest and noblest conception. Such the man, such his objects, such his aims!

What was the money-value of the time which Drysdale gave gratuitously and ungrudgingly to the cause of scientific homeopathy during his long labour-rich career? Certainly not less than a hundred thousand pounds if he had employed the time with equal industry in the gathering-in of fees. But the sterlingness of our Drysdale cannot be computed in pounds sterling. I just mention it to get some little notion of the vastness of his labours.

Endow the little bed, by all means, and put the name Drysdale over it, but do not let us call the thing a memorial to such a man as Drysdale. The utter want of proportion is positively painful.

I venture to suggest that Drysdale's companions in arms—the still living homeopathic practitioners of Great Britain and of Greater Britain and the many mighty men of America—I say I venture to suggest that all these together can and will raise a memorial to their grand companion and leader now gone home that shall be in harmony with the ideal of his beautiful life. We want his noble face painted and hung up in the Board Room, and his bust placed in the hall of the Hahnemann Hospital, and let us present his faithful and accomplished



widow with a replica of the work of art. Let us nominate his old friends Dr. Dudgeon as Treasurer and Dr. Richard Hughes as Secretary, and all the editors of all the homeopathic journals printed in the English tongue as a General Committee to carry out some such fitting memorial to our departed leader and companion.—Your obedient servant,

J. COMPTON BURNETT.

London, Christmas, 1892.

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### THE VIVISECTION ACT EXPLAINED.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—The Vivisection Act of 1876 is a very plausible Act on paper, and seems to provide almost everything required, especially if one assumes—what so many people do assume—that the fact of a man belonging to a noble profession and being eminent as a physiologist is a sufficient guarantee that he will do no wrong. But to make such assumption is, of course, to beg the whole question. The Royal Commission of 1875 had to admit that “it is not to be doubted that inhumanity may be found in persons of very high position as physiologists,” and the whole system of licensing and inspecting is based on that fact. I hope, therefore, that you will allow me to present the matter to your readers from another point of view, in an equally fair and reasonable manner, I trust. The reasons why we object to the Act are as follows:—

1. Because under it are licensed the very men whose deeds and writings a few years ago raised so strong a feeling of abhorrence in the public mind that the Royal Commission was called for. One of the witnesses, who candidly admitted that he had “no regard at all” for the animals’ sufferings, has been regularly licensed since 1884.

2. Because when a man is once licensed there is absolutely no limit in duration or intensity to the suffering he may inflict. Some cruelties perpetrated under the Act have been about as bad as any on record.

3. Because the qualifications for obtaining a license do not depend at all on the applicant’s moral character, but wholly on his scientific training; and the members of the scientific societies and the professors who vouch for his competence are themselves vivisectioners or in favour of the practice, and thus they practically recommend each other.

4. Because all the inspectors hitherto appointed have been vivisectioners or keen partisans, one of them having called our

movement "a mischievous and senseless agitation." Imagine a sanitary inspector who had a personal liking for bad smells and thought that typhoid fever was on the whole beneficial to the community, and you will have a parallel case.

5. Because the Parliamentary Returns, as their wording shows, are compiled, not from personal observation, but from the statements furnished by the vivisectors themselves. Accounts of horrible experiments published in scientific journals thus never appear in the Returns, or only in such a form that they cannot be recognised.

6. Because curari, though not recognised as an anæsthetic, may still be used in conjunction with real anæsthetics. The administration of chloroform, morphia, &c., is well known to be difficult, and to need the most careful watching; but when the animal is rendered perfectly motionless by curari there is no means of telling whether the other drug is having any effect or not.

7. Because no licensed person can be prosecuted under the Act without "the consent in writing of the Home Secretary." Previous to this Act the vivisector was liable to be prosecuted under Martin's Act, but now he is safe; and thus the Vivisection Act, instead of protecting the animals, in reality protects the offender.

That vivisection thrives under the Act is shown by the last Parliamentary Return, from which we see that since the year 1876, when the Act first came into force, the number of licensed vivisectors has increased from 23 to 152, and that of licensed places from 19 to 66, while the number of experiments during twelve months has risen from 481 to 2,661, of which those without anæsthetics have increased from 164 to 1,406.

The Act is a bad one because it is not based on any definite principle, and the parties chiefly concerned—I mean the animals—have been considered least. It is in reality a compromise made in the hope of satisfying two opposing parties. To please the humanitarians vivisection is prohibited under heavy penalties; to pacify the physiologists it is again allowed by a system of licenses and certificates; and between the two the animals' interests have been left out, and they are practically worse off than before.—Yours faithfully,

ERNEST BELL, M.A.

(Chairman Anti-Vivisection Society).

20, Victoria Street, S.W.

Nov. 26, 1892.

P.S.—There is one good clause in the Act—namely, that the Secretary of State may call for an account of the "Results" of the experiments, but that unfortunately is precisely what has never been done. Our demands for such results are always evaded.

“COME OVER AND HELP US”—A VOICE FROM  
WESTERN AUSTRALIA.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—There is a splendid opening for a good homeopathic practitioner in Fremantle, the chief port of this rapidly rising colony. The population of the town itself is at present about 7,000, but is increasing weekly in consequence of the wonderfully rich discoveries of gold which have recently taken place a little way inland. With the gold-seekers are naturally coming immense numbers of tradespeople from the other colonies over which a severe wave of depression is passing at the present time.

The climate here is one of the finest in the world, but, for want of a sanitary system, enteric fever is rather prevalent.

I have just opened in Fremantle as a homeopathic chemist, and, as I anticipated, I find that there are a good many homeopaths here, and their cry is for a “Homeopathic Doctor.” There is not one in the whole district, and I feel sure that a good practice could soon be established here.—I am, Sir, yours truly,  
G. PARRY.

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ACTION OF MEDICINES.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—In your translation of Dr. Gallavardin’s interesting article, it is stated that the late Dr. L. L. Lambert demonstrated that homeopathic medicines from the fourth centesimal dilution no longer produce chemical reactions. But it is instructive to notice, a few pages farther on, the following remarks by Hahnemann, which virtually contradict that statement: “Homeopathic dynamisations are real awakenings of the medicinal properties that lie dormant in natural bodies during their crude state; . . . such a mode of preparation develops almost all the properties that lie hid in the essential nature of the medicinal substances.” It would require a good deal of “demonstrating” to convince me that, whilst dynamisation develops almost all the other properties of a medicinal substance, it at the same time annihilates its chemical properties.

Kingzett speaks of “the chemical decompositions which are for ever occurring in the living body.” Are we to believe, from Dr. Lambert’s demonstrations, that homeopathic medicines from the fourth centesimal dilution upwards take no part in such chemical decompositions? Highly attenuated medicines probably are in a “radiant” state; but, seeing that in various ways they affect the chemical decompositions occurring in the

living body, my contention is that they must and do act *chemically*, in spite of the fact that such chemical reaction cannot be demonstrated by means of test-glasses and other paraphernalia.—Sir, yours very respectfully,

FERRUM.

## VARIETIES.

TREATMENT OF OXALURIA BY PERMANGANATE OF POTASH.—Dr. H. J. Norris writes in the *Mass. Med. Jour.*: When we consider the fact that uric acid may disappear entirely from the urine, and that oxalic acid is not normally present, is it not fair to conclude that the uric acid must, in the normal condition of things, undergo decomposition in the body? We find that by adding an excess of permanganate of potassa to uric acid out of the body, it is directly converted into urea and carbonic acid; and that when the oxidation is less complete, it passes into the form of urea, oxalic acid, and carbonic acid. If, therefore, we would prevent the formation of uric acid and oxalic acid, we must supply the equivalents of oxygen and of water. This is most conveniently done in the form of permanganate of potassa:

- R. Permanganate of potassa..... grs. viij.  
Water ..... F ʒ ij.  
M. Sig.—One teaspoonful to be given three times a day.

It should not be given except on an empty stomach; for in contact with organic matter it is decomposed, yielding its oxygen to any element, simple or compound, that will receive it. Dr. Norris has repeatedly directed, during the past four years, the permanganate to be given as above in oxaluria, with the most happy results.—*New York Medical Times*.

MEDICAL PROPERTIES OF VEGETABLES.—Spinach has a direct effect upon the kidneys.

The common dandelion, used as greens, is excellent for the same trouble.

Asparagus purges the blood.

Celery acts admirably upon the nervous system, and is a cure for rheumatism and neuralgia.

Tomatoes act upon the liver.

Beets and turnips are excellent appetisers.

Lettuce and cucumbers are cooling in their effects upon the system.

Onions, garlic, leeks, olives, and shallots, all of which are similar, possess medicinal virtues of a marked character, stimulating the circulatory system, and the consequent increase of the saliva and the gastric juice, promoting digestion.

Red onions are an excellent diuretic, and the white ones are recommended to be eaten raw as a remedy for insomnia. They are tonic and nutritious.

A soup made from onions is regarded by the French as an excellent restorative in debility of the digestive organs.—*American Homeopathist*.

THE DANGERS OF ANTISEPTICS: PROVING OF *Merc. Cor.*—At a recent meeting of the Vienna Medical Society Professor Albert gave an account of an interesting observation made on himself. For two years he had suffered from dyspeptic troubles, the cause of which he could not at first discover. At the same time he observed that his finger-nails became softer, and that two apparently healthy teeth were falling out spontaneously. He recently came to the conclusion that these symptoms might be due to poisoning by corrosive sublimate which he as a surgeon had to use daily. Further investigation proved that this view was correct.—*Echo*, Dec. 27.

## LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

HOURS OF ATTENDANCE:—Medical, Daily, 2.30; Surgical, Mondays and Thursdays, 2.30; Diseases of Women, Tuesdays and Fridays, 2.30; Diseases of Skin, Thursdays, 2.30; Diseases of the Eye, Thursdays, 2.30; Diseases of the Ear, Saturdays, 2.30; Diseases of the Throat, Thursdays, 2.30; Operations, Mondays, 2.

## MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Black (G.).** Everyday Ailments and Accidents, and their Treatment at Home: Exhibiting a Brief but Clear and Exhaustive Synopsis, set forth in Plain and Simple Language, of the various Disorders and Casualties, Mental and Bodily, to which Mankind is subject, the Causes from which they Spring, the Symptoms by which they are Indicated, and the Treatment necessary both in Sickness and Convalescence. Cr. 8vo, pp. 426. (Ward, Lock, Bowden and Co. 2s. 6d.)
- The Family Health Book. Describing in Plain, Simple and Intelligible Terms, suited to the Comprehension of Non-Scientific Readers, all that is necessary to Know respecting the Framework and Organs, External and Internal, of the Human Form, the Vital Actions and Functions of these Organs, the Mutual Relations of Body and Mind, etc. (Ward, Lock, Bowden and Co. 3s. 6d.)
- Blaisdell (A. F.).** Our Bodies, and How we Live and Keep Well; or, How to Know Ourselves: Being a Popular and Hygienic Account of the Human System and its Healthful Workings. With Glossary of Physiological Terms and Meanings. 8vo, pp. 188. (Glasgow: T. D. Morison; Simpkin. 8s. 6d.)
- Bousfield (E. C.).** Guide to the Science of Photo-Micrography. 2nd ed., entirely Rewritten and much Enlarged. 8vo, pp. 154. (Churchill. 6s.)
- Dulles (Charles W.).** Accidents and Emergencies: A Manual of the Treatment of Surgical and Medical Emergencies in the Absence of a Physician. 4th ed., thoroughly Revised and Enlarged, with New Illustrations. Cr. 8vo, pp. xi—154. (Philadelphia: Blakiston. 5s.)
- Good Health by Careful Living; or, How to Cure and How to Prevent our Everyday Ailments, Dyspepsia, Diarrhea, Biliousness, Weakness, Headache, Neuralgia, Constipation, &c. 8vo, pp. 264. (Glasgow: T. D. Morison; Simpkin. 3s. 6d.)
- Hammond (W. A.).** Sleep, Sleeplessness and the Derangements of Sleep; or, The Hygiene of the Night. 8vo, pp. 242. (Glasgow: T. D. Morison; Simpkin. 3s. 6d.)
- Pharmacopœia of the Royal Infirmary, Edinburgh.** Compiled by Charles Arthur. 82mo, pp. 142. (Edinburgh: Thin; Simpkin. 8s. 6d.)
- Transactions of the Clinical Society of London.** Vol. 25. 8vo. (Longmans. 15s.)
- of the Edinburgh Obstetrical Society. Vol. 17. 8vo, pp. 294. (Edinburgh: Oliver and Boyd. Simpkin. 8s. 6d.)

## TO CONTRIBUTORS AND CORRESPONDENTS.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 30, *Clarges Street, W.*

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

LITERARY matter and correspondence should be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct the same and return to the *Editor* as early as possible.

### CORRESPONDENTS.

Communications received from Messrs. Gross and Delbridge, Chicago; Mr. S. J. Capper, Liverpool; Mr. J. Meredith, Lydney; Mr. Ernest Bell, London; Dr. Clifton, Northampton; Dr. H. C. Allen, Chicago; Dr. T. C. Duncan, Chicago; Mr. Mahony, Liverpool; "Ferrum"; Mr. E. Parry, Freemantle, Western Australia; Secretary of Sickness and Accident Assurance Association,

Limited; Dr. Cooper, London; Dr. Burford, London; Dr. Burnett, London; Mrs. R. D. Phillips, Yonkers, N.Y., U.S.A.; Mr. Potage, Edinburgh.

### BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Chemist and Druggist.—Homeopathic Review.—Allg. Hom. Zeit.—North American Journal of Homeopathy.—Minneapolis Homeopathic Magazine.—Hom. Maandblad.—Medical Argus.—New Remedies.—Childhood.—Homeopathic Recorder.—L'Omiopatia en Italia.—Homeopathic News.—Medical Advance.—Medical Visitor.—California Homeopath.—Vaccination Inquirer.—Southern Journal of Homeopathy.—Revue Hom. Belge.—Hom. Journal of Obstetrics.—Archiv. f. Hom., Nos. 9 and 10.—Preliminary Address of Committee of World's Congress Auxiliary on a Medico-Climatological Congress.—Clement's Weather Almanack.—Medical Century Prospectus.—New Eng. Med. Gaz.

THE  
HOMEOPATHIC WORLD.

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FEBRUARY 1, 1893.

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THE FAITH-CURE.

IN the January number of the *New Review* is an article by Prof. CHARCOT, of Paris, the eminent specialist in nervous diseases, dealing with the faith-cure, and especially with the manifestations of it that have occurred at Lourdes. CHARCOT frankly accepts the cures (or, at least, some of them) as genuine, though he denies that there is anything miraculous in them: they are merely examples of hysterical affections cured by the action of the mind on the body. But this in itself is a very considerable admission. Formerly all cures of the kind were pronounced by the faculty to be impossible, and *therefore* frauds. Now they are no longer frauds, but they admit of explanation, without calling in the hypothesis of miracle. "Hysteria" is a wide term and a very useful one to the faculty. Nobody understands exactly what it is, and for that reason it is all the more convenient for explaining conditions and phenomena that are incomprehensible. The mere pronunciation of the word "hysteria" is felt to be final and sufficient. According to M. CHARCOT, hysteria is capable of accounting for not merely paralysis, but inflammations, tumours, and even gangrene; and these same conditions are curable if the mind can only be got to act on the body in the right way instead of the wrong.

Without going into the question itself further than to point out the unsatisfactoriness, from a scientific standpoint, of appealing to hysteria to explain anything, we

wish to draw attention to the significance of M. CHARCOT'S admissions, which is probably greater than he himself realises. He says:—

“To sum up, I believe that the faith-cure demands special subjects and special complaints—those, namely, which are amenable to the influence of the mind over the body—if it is to find ground to work upon.”

In this sentence CHARCOT announces his belief that mind and body are two distinct things; that the mind can act on the body, and that the mind is (at least in certain circumstances) superior to the body. But, we may ask, is the pathology of hysteria different from the pathology of all other diseases? Because the power of mind over body is self-evident in disorders generally known as hysterical, does it follow that the power is non-existent in all other conditions of the animal organism? And if not, does it not seem that the latest ideas on pathology in the old school are approaching the pathology of HAHNEMANN, who maintained that all diseases (except the results of injuries) existed first in the “vital force” (and that they were therefore “dynamic,” “spiritual,” or “spirit-like”) before showing themselves in outward signs and sensations? By “vital force” HAHNEMANN meant, as we suppose, the same thing as CHARCOT means by “mind.” CHARCOT at present only admits hysterical affections as coming within the sphere of this pathology; but we should not be surprised to see the range of “hysteria” gradually increasing as new points arise which need accounting for, until the whole range of diseases comes in the end to be classed as hysterical.

Before taking leave of M. CHARCOT, we wish to call attention to one or two notable utterances which occur in the course of his article. He says:—

“The question [of the faith-cure] is one about which I cannot pretend indifference. It must be a subject of interest to every doctor, seeing that the essential aim of medicine is the healing of the sick by the most effective curative measures, of whatever kind they be.”

This ought to be the aim of medicine; but, so far as



medicine is represented by the majority of doctors, it is not. A less open-minded body it would be hard to find. They are taught in the schools that healing or "curing" the sick is not to be thought of, but only *treating* them; and any one who would presume to teach a method of *cure* is ostracised by his professional brethren as a pretender without trial.

Here is another bold passage:—

"One cannot hope to settle this question of the faith-cure, which, I say again, is entirely of a scientific order—one in which facts, long and faithfully noted and grouped in logical order, are the only admissible arguments—by unproved assertions or groundless negation.

This passage and the next to be quoted we commend to the earnest consideration of all our numerous opponents who condemn HAHNEMANN and his system unheard: CHARCOT tells them they are unscientific:—

"In every case [Science] is a foe to systematic negation, which the morrow may cause to melt away in the light of its new triumphs."

Hitherto negation (often backed by persecution) is the only argument that the enemies of homeopathy have dared to bring against it.

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## NEWS AND NOTES.

SAMUEL BROWN.

THE following note, which appeared in *The Chemist and Druggist* of Jan. 21st, under the heading, "A Forgotten Chemist," will be read with interest by all who are acquainted with the early history of homeopathy in this country. Though not a doctor of medicine, Samuel Brown was a scientific and philosophical supporter of Hahnemann's system, and in this respect, also, was far ahead of the generality of the scientists of his time.

"Emerson in his *English Traits* mentions that, 'through the kindness of Dr. Samuel Brown,' he made the acquaintance of Lord Jeffrey and other great writers then living in Edinburgh. It may be known to few that this Dr. Brown—Samuel Morrison Brown—was a brilliant chemist, who, in his short life of forty years, gave evidence

of masterly genius. He was a cousin to the present President of the Chemical Society, and was known in his day—he died in 1856—as ‘the Alchemist.’ His life was devoted to research, mainly directed to the proof of certain bold chemical theories which were propounded a generation ahead of knowledge. He was a most popular lecturer, and in the forties attracted fascinated audiences by his lectures on such subjects as ‘The Atomic Theory of Nature,’ ‘The Law of Polarity and Mesmerism,’ and ‘The Idea of Magnetism.’ A man of profound religious belief, as all the Haddington Browns (to whom he was kin) have been, his speculations were not confined to physical science; and his fine poetic nature and fascinating personality secured him the friendship of the leading thinkers and writers of the day. In many respects Dr. Crum Brown is not unlike him, but through more enlightened modern methods the living man has been enabled to carry to happier conclusions research such as the dead cousin dreamed of.”

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#### THE DISCOVERER OF THE TUBERCLE BACILLUS.

THE researches of Koch on tubercle have so far overshadowed those of other observers that he has come to be regarded as the discoverer of the tubercle bacillus. This is not the case, and the French are taking care to make known the claims of their own countryman to the honour, as the following note from *The British Medical Journal*, January 14th, will show:—

#### “POSTHUMOUS HONOURS TO VILLEMEN.

“At the annual public meeting of the Paris Académie des Sciences the Leconte Prize of the value of 50,000 francs (£2,000) was awarded to the representatives of the late Professor Villemin for his researches on the infectious nature of tuberculosis which M. Pasteur, in announcing the award, described as the most epoch-making work of our time. The award was announced as ‘the first homage of posterity.’”

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#### THE EFFECTS OF QUININE ON SUCKLINGS: HOW ALLOPATHS REASON ABOUT DRUGS.

HERE is a sample of the way in which the old school studies the action of drugs:—

#### “SUCKLING AND QUININE.

“Oui (*Arch. de Toxicologie et de Gynéc.*, December, 1892) finds that when the mother or nurse takes quinine it has no ill effect on the child. The drug is certainly excreted with the milk, but in very small quantities. The quininated milk has absolutely no influence on the child. After a series of careful weighing and measurement it was found that

the average was the same in children suckled for a given time by nurses who had taken quinine as in children whose nurses had not taken that drug. Hence a nurse or mother may safely take quinine. Burdel's theory that quinine is noxious to the child is incorrect, and the precautions which he recommends are therefore unnecessary.—*Brit. Med. Jour.*, Jan. 14th."

Because the babies observed by Oui did not lose weight when their nurses were dosed with quinine, *therefore* (according to the old school reasoning) the drug had no effect at all on the babies (who could not describe their sensations); and *therefore* quinine has no effect at all on any infants whatever when their nurses take it. *Therefore*, again, Burdel's babies could not have been affected, though he thought they were.—Could any train of reasoning be more fatuous than this? Babies differ as much as doctors; and so do their nurses. Some might be affected obviously, and others not at all; just as some grown-up people are affected by the smallest dose, whilst others may take large doses without showing any ill effect.

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#### HOMEOPATHIC PROPAGANDA IN FRANCE.

THE following is from the Paris Letter in *The Chemist and Druggist* of Jan. 14th :—

"HOMEOPATHY IN FRANCE.—The French Society for the Propagation of Homeopathy has organised a series of public conferences on the subject. They are to be free, and will be held at the Town Hall of the 9th Arrondissement of Paris every Friday evening at 9 p.m. until further notice."

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#### "ARBORIVITAL MEDICINE."

UNDER the above title Dr. Cooper contributes to *The Hahnemannian Monthly* of January the first of a series of papers, the subject of which he has touched upon in his articles in our last and present numbers. We have received various expressions of opinion—approving and the opposite—as to Dr. Cooper's views, which, as he is well aware, are open to criticism on many points. We shall reserve our own comments until Dr. Cooper has completed his case.

## DR. WILKS AND HOMEOPATHY.

DR. T. REGINALD JONES, of Birkenhead, draws our attention to a paper on the "VALUE OF DRUGS" contributed by Dr. Samuel Wilks to *The Practitioner* of January. In this article Dr. Wilks airs his well-known "views" (extremely distorted ones) of homeopathy, and his equally well-known scepticism as to the value of drugs of any sort. Here is a nice sample of "medical ethics":—"Like others," says Dr. Wilks (p. 8), "I prescribe medicines for all my patients, for I found that if I did not, I failed to receive my fees." Here is a delightful extract:—

"There are members of our profession who do not find sufficient drugs in the *Pharmacopœia*, but administer every new medicine which the chemist recommends to them. This method of practising medicine is as easily acquired as the homeopathic; that is, you turn to the list of diseases, or symptoms, and give the remedy therein attached."

Comment would spoil this. We trust Dr. Wilks will return to the subject at an early date.

## ORIGINAL COMMUNICATIONS.

## DR. SEVERIN WIELOBYCKI.

ON Sunday, January 8th, Dr. Severin Wielobycki completed the hundredth year of his life. As the venerable doctor has been a life-long abstainer from alcohol, the Society for the Study of Inebriety—of which Dr. Norman Kerr is president—thought it would be a fitting occasion to give him a congratulatory address. As Dr. Wielobycki was a well-known homeopathic practitioner for many years in London, his brother homeopaths wished to share in the demonstration. Permission to do this was refused by Dr. Kerr.

Upon this several letters were written to the Press, of which the following by Dr. Dudgeon, which appeared in the *Daily Chronicle* of January 12th, is one:—

"It may interest many of your readers to know that the centenarian doctor who received the congratulations of the temperance societies yesterday was a practitioner of the homeopathic system of medicine. He was a member of the British Homeopathic Society, and at one time was on the staff of the London Homeopathic Hospital. Those conversant with homeopathy may well think that homeopathy de-

serves some of the credit of Dr. Wielobycki's preservation in health and strength for so many years. The circumstance that the meeting was called by the advocates of temperance, many of whom are physicians opposed to homeopathy, sufficiently accounts for the omission to allude to the fact that Dr. Wielobycki belonged to the homeopathic school, and that he practised homeopathy until his retirement from practice in 1874. His colleagues in the British Homeopathic Society and on the staff of the London Homeopathic Hospital were desirous of joining the temperance advocates in the public congratulations yesterday, but were refused permission to do so by the managers of the ceremony."

To this Dr. Kerr sent the following reply, which appeared in the *Morning Post*, also in the *Echo* :—

"THE MEDICAL CENTENARIAN.

"To the Editor of the MORNING POST,

"SIR,—With reference to a letter in to-day's issue, I beg to state that the medical centenarian, Dr. Wielobycki, is not a homeopathist, whatever he has been. During the many years in which I have been his medical attendant he has—as I am neither of that creed nor practice—had no homeopathic preparations, as all who know me will at once understand. I can also vouch for one-half of his professional career, passed in Nova Scotia, alongside as strong an opponent of homeopathy as myself, his co-graduate in 1841, Dr. Fitch. The hypnotists might as fairly claim me to be a 'new mesmerist,' on the ground that in my first months of professional life I was practically carried away by the noblest and most brilliant of them all, the late Professor Gregory, an episode I have long since looked back upon but as 'youthful folly' or 'medical wild oats.'—Yours, &c.,

"NORMAN KERR, M.D.

"42, Grove Road, Regent's Park, Jan. 12th."

Dr. Dudgeon replied in the *Echo* as follows :—

"DR. WIELOBYCKI.

"To the Editor of the ECHO.

"SIR,—'*Litera scripta manet.*' In the *Homeopathic Directory* for 1853, Dr. Wielobycki's name appears coupled with the following, among other appointments—'Physician-Accoucheur to the Hahnemann Institution, Physician to the London Homeopathic Hospital, Member of the British Homeopathic and Hahnemann Medical Societies.' His name still appears as a practitioner of homeopathy in the *Homeopathic Directory* for 1874, after which, being then 81 years of age, he retired from active practice. Thus, during his medical career in London, he professed and practised homeopathy. Dr. Kerr's comparison of Dr. Wielobycki's practice of homeopathy with his own connection with mesmerism 'while sowing his medical wild oats' is not very apt, for at the age of 81, and for many years short of that age, one has generally ceased to sow wild oats, medical or other. How many 'the

many years' Dr. Kerr says he has been Dr. Wielobycki's medical attendant may be I cannot, of course, tell, but I know that it is only a very few years since he had Dr. Wilkinson, the eminent homeopathic practitioner of St. John's Wood, as the medical attendant of his wife and himself. I, too, graduated in Edinburgh the same year as Dr. Wielobycki, and I believe I have known him for a much longer time than Dr. Kerr. That 'the Inebriety Society' contains no homeopaths I can well believe, for many of us are total abstainers, and the rest are very moderate men.—Yours, &c.,

“ R. E. DUDGEON, M.D.

“ 53, Montague Square, Jan. 18th.”

Dr. Clarke replied in the *Morning Post* :—

“ DR. WIELOBYCKI AND HOMEOPATHY.

“ To the Editor of the MORNING POST.

“ SIR,—In the *Homeopathic Directory* for 1853 (the first year in which that work was published), occurs the following :—

“ ‘ Wielobycki, S., 22, Connaught Terrace, Hyde Park, M.D. and L.R.C.S., Physician-Accoucher to the Hahnemannian Institution, Welbeck Street, and Physician to the London Homeopathic Hospital, formerly member of the Botanical, Hunterian, Medical, and Royal Physical Societies, Edinburgh, now member of the British Homeopathic and Hahnemann Medical Societies.’

“ Dr. Wielobycki's name continued to appear in the *Homeopathic Directory* up till the year 1874, when he retired from practice, being then 81 years of age. It is not customary for allopathic medical men to insert their names in that work, or to hold posts on the staff of Homeopathic Institutions, and, as a matter of fact, for the second two-thirds of his medical career Dr. Wielobycki was a professed and recognised homeopath. If there was any 'wild oats' period (to use your correspondent's complimentary phrase) it must have been the first 10 years of his practice in Nova Scotia.—Yours, &c.,

“ JOHN H. CLARKE, M.D.

“ 30, Clarges Street, Jan. 18th.”

To these letters Dr. Norman Kerr found it convenient not to reply, for the best of all reasons that there was no reply to make.

A CASE OF INFANTILE CONVULSIONS TREATED  
WITH HYDROCYANIC ACID.

By ALEX. H. CROUCHER, M.D., and C.M. Edin.

LEONARD M., aged 3½ years, came under treatment for convulsions on October 6, 1891.

The first attack occurred six months ago.

Patient's father's sister died in convulsions; she was

subject to fits, during which she used to bite her tongue. Patient's brothers and sisters are all well, one is younger and three others are older. Before having these fits he could walk quite well, but now is quite unable to do so. The fits generally occurred at intervals of about three weeks, and he remained in them, or rather had a succession of them which lasted about five minutes each, for two or three days. During the intervals he generally used to scream.

On October 7th it was noted that the patient slept much during the day.

October 12th. This morning, on awaking, patient cried out, and then convulsions occurred, the body and limbs were convulsed, the eyelids twitched, but remained open, the eyeballs were turned up and to the right; he appeared quite unconscious. The attack lasted only about two minutes.

*Treatment.*—When first seen, *Acidum Hydrocyanicum* 2x mj was given three times a day, and this was given till October 12th, when the dose was increased to mj. ss. t.d. After a fortnight's treatment I lost sight of the patient.

Six months later I heard that the patient had had no recurrence of convulsions, but that about three months after I saw him last he had developed a rash all over him, from the description, probably of an eczematous character.

Eastbourne.

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## THOUGHTS FROM THE ORGANON.

POPULAR PAPERS.

By EDWARD MAHONY, M.R.C.S., L.S.A.

(Résumé.)

HAVING completed the above papers, I will now endeavour to gather up the main thoughts and conclusions, giving them in a summarised form, as a series of propositions containing facts, as I believe, proved such by the quotations from the *Organon* which have passed in review before us, and so shall endeavour to give some conception in a brief way of what homeopathy proposes and establishes, of what, in a word, constitutes typical, or *beau idéal*, homeopathy, as announced, taught, and practised by its originator. The propositions shall be first of all enumerated in the briefest possible sentences and expres-

sions, to assist the memory and condense the subject before the mind as far as may be consistent with profit, and justice to the subject itself. The following propositions, then, may be stated as essential to the nature and practice of true homeopathy, and as so taught in the *Organon* :—

1. All diseases are included.
2. The law of similars is absolute in the therapeutic (healing) sphere of the healing art.
3. The essential nature of life is dynamic, or vital force.
4. The essential nature of disease is disordered dynamic or vital force.
5. The healing property of medicines is a dynamic, or immaterial power.
6. Dynamism is a pillar of homeopathic science, and claimed by Hahnemann as his discovery.
7. Miasm, acute or chronic, is the source from without of disease, apart from the injurious effects of excess, want, changes in temperature, and other things which may be spoken of as natural things perverted.
8. Surgical *diseases* come under the same law and nature, and are distinct from injuries.
9. One medicine only should be administered at a time, because from the very nature of the thing it commands possession of the entire body.
10. There are three essentials to a homeopathic prescription : namely, the law of similars, one medicine, the minimum dose.
11. Homeopathy avails itself of everything in the known world.
12. Recognises and uses all cognate sciences.
13. Is the only *science* in the art of healing.
14. Considers the individual first, the disease second.
15. Demands constant observation and study.
16. Never treats names, but always observed phenomena, and therefore facts.
17. Knows no local diseases.
18. Collateral proofs are : unintentional professional cures under other names, amateur cures.

In order further to establish our ground on the sure foundation of truth, we may recall some, at least, of the objections brought forward by Hahnemann against the then and still prevailing methods of practice of the dominant school.



1. Fruitless endeavours to discover the essence of the disease.

2. The assumption that disease is a peculiar and distinct something residing in man.

3. Administering remedies which produce symptoms that bear no reference whatever to those of the disease itself, being neither similar nor contrary, but heterogeneous (allopathic).

4. The observed fact that the presence of one disease prevents the accession of a second *dissimilar* one, provided the former be of sufficient intensity.

5. Under the above circumstances the second disease, if more intense, suspends the first, but never cures it.

6. The new disease may join the old one, forming a complication.

7. The principle of *contraria* prescribes against a single symptom only.

8. *Contraria* produces the ill of requiring ever-increasing doses, hence causing the cumulative effects of the medicine in the system.

9. *Contrary* sensations cannot neutralise each other in the sensorium of man, *e.g.*, he says: "The tears of the mourner may cease for a moment when there is some merry spectacle before his eyes, but soon the mirth is forgotten, and the tears begin to flow again more freely than ever." Assuming therefore that the truth of the above-named propositions has been established by experiment, discovery, and repeated clinical evidence, what have we, as proposed by homeopathy, and what are the limitations, if any exist?

1. A law of cure for *all* disease.

2. The only law of *cure*.

Before considering these I will refer to the three principal difficulties which, as far as my observation and reading go, the public have in connection with homeopathic treatment (the small dose and dynamisation have been in the papers themselves I hope sufficiently referred to), namely, *a.* Cognate sciences; *b.* Surgical diseases; *c.* Local diseases.

*a.* It may be repeated once for all that homeopathy denies no *truth* claimed by the dominant school, no proved fact, whether pathological, chemical, physiological, bacteriological, bacillariological, or any other fact whatever; on the contrary, its adherents value them all, but keep

them to their sphere—for *healing* purposes they claim that only the similarity between present and past symptoms and those produced by the remedy administered will suffice, and that this similarity must be characteristic, *i.e.*, inherent in the complaint and inherent in the medicine, a part of its very nature; *e.g.*, time of increase or decrease of symptoms must be *marked* in the disease, and so in the medicine. The individuality also of the person has the strongest recognition.

b. In homeopathy the strongest possible distinction is maintained between the manipulations required by the occurrence of injuries such as dislocations and fractures, where necessarily as to apposition of parts, apparatus for ensuring rest, and all merely mechanical appliances the old school and the new have nothing to controvert about, and surgical, so-called, diseases, such as tumours, of whatever kind, on the skin, enlargements from *disease* of bones, joints, or other structures, or even misplacements from *disease* of parts; all these latter call for, in the first instance, the most careful individualisation and consequent selection of the appropriate remedy; a diligent search in this direction will sometimes be rewarded by the happiest results, and even astonishing cures, and its neglect, on the other hand, may prove a source of useless, however sincere, regret. I will illustrate the first point by a small case which nevertheless had a certain value, and the second by a case which carries its own teaching. My attention was one morning called to a young servant in the hospital in whose knee had been detected what is familiarly spoken of as a loose cartilage, and the necessity of an operative procedure suggested. On examination it was easy to confirm the diagnosis, but then the thought occurred, is there no medicine which acts homeopathically in such conditions? The little known but invaluable *Symphytum* occurred to my mind, and was given with the result that within a week that girl was up and out, all trace of displacement and pain in the joint having entirely disappeared. The other was a patient seen occasionally for trifling ailments during some years, who one day said she had a small swelling in the breast about which she was uneasy as it had been there twenty years. A very brief examination sufficed to justify me in telling her without reserve that her disease was what is called stone cancer. Unknown to me they consulted an eminent allopathic surgeon, who

at once confirmed my diagnosis, and advised operation, which was performed in my presence, and I can only say that everything was done in first-class style, the recovery was all that could be wished, and the conduct of the surgeon himself in every sense that of professional *esprit de corps* in the highest sense, but within twelve months that patient had a *mass* of cancerous growths on the opposite breast and shoulder, and within a few weeks was gone. The same principle applies to all *morbid* growths—eradication, enucleation, excision, never *cures*.

c. The difficulty in minds here is the belief that disease can exist on the surface without any inward affection preceding. However it will be found by a sufficiently careful inquiry that before the local manifestation, whether on skin or mucous membrane, there was something inwardly working. Take the familiar illustration of a chilblain; no one suffers from these whose *circulation* is thoroughly good. So of the serious and even mortal disease known as gangrene of the fingers or toes; there must have been first entire general enfeeblement of the body in the sphere of the circulation, and the same thing could be shown of all so-called local diseases.

This is not denying that a local part may be inherently weak and requires, and should get, extra care and attention; but this is not healing. These three difficulties being disposed of, we return to our summary that the art and science of homeopathy proposes. 1. A law of cure for all disease. 2. The *only* law of cure.

By a law is to be understood a truth, established and proved, and to be always relied upon as being as infallible in its sphere as any other law in its sphere; as certain, provided the necessary conditions be present, as that two and two make four, as that the rays of the sun convey both light and heat, as that a chemical compound is different in nature from a mere mechanical mixture, or any other proved truth whatever, and consequently, and here lies the importance of the practical acceptance of the fact, that this law can't be disregarded, still less defied with impunity, or another law substituted in its place, any more than an arithmetician could hold the opinion that two and two made five, the analytical chemist that a chemical combination was a mechanical mixture, and so on through the whole domain of natural truth, without the most serious and disastrous consequences. There is no room for

private opinion in a law; it commands, and the only path of true wisdom and safety is to obey. He who would disregard, for example, the laws of explosives, and yet was engaged in the manufacture of gunpowder, would be a person rightly regarded as most dangerous both to himself and others. Admitting, then, the gravity of disobedience to law, and on the other hand the value of obedience, the next point in our first proposition is that this wonderful law embraces *all* diseases. Let, then, the disease be what it may, where it may, how long lasting it may; let the age of the person be what it may; even the surrounding conditions as unfavourable as they only too often are; the first thought in the mind of the physician intent on truth is, there is a law suitable to meet this person, this individual case of disease, for just as all varieties of disease are but different illustrations of the one great factor, disease, so are the different medicines different illustrations of the correspondingly great factor, healing power by similarity. The power to cure corresponds to, and is co-equal with, the extent of the breach caused by disease. There is no disease but what has its corresponding and sufficient curative.

Having, then, a law all-sufficient for all possible cases, howsoever urgent, severe, acute, or chronic, the only remaining question is: Is this the *only* law of cure? and here our second proposition unhesitatingly affirms, *Yes*. We must then say that in every case of disease the first and most vital question in the mind, when healing is the point at issue, is, What is the only curative here? What is the application in detail of the law of similars to this individual case of disease? It will follow, if this be perceived to be the *only law of cure*, that there will be no desire, no temptation to try anything else, as necessarily such would be not only useless but positively harmful, even dangerous. I must again affirm that we are speaking strictly of cure, not partial amelioration of particular sufferings and removal of particular symptoms, which may be obtained under the greatest possible variety of treatment, from eating fat pork chops to prevent sea-sickness to excising portions of a nerve for the cure of neuralgia, but reaching the whole of the roots of the disease in the system, and removing the whole *en masse*, so to speak, removing, in other words the *whole* of the symptoms by which the disordered vital force had unequivocally expressed its sufferings and needs.

What then, if any, are the limitations of the law of similars? In itself, none any more than of any other law; in actual fact, unhappily, only too many. The late D. Lardner (if memory serve me) used to demonstrate that a railway accident could not occur oftener than once in some ninety years, yet we are only too familiar with the frequency of their occurrence. The causes, however, are very many of them quite remediable, and so of the law of similars, the causes of failure in practice with those who hold to it tenaciously and unswervingly diminish daily, and correspondingly the power of applying it increases daily. It would be tedious to seek to enumerate all the known causes of failure, but if the remediable ones be disposed of the irremediable will steadily diminish.

What, then, may be stated as the *beau ideal*, the goal, the Ultima Thule of homeopathy, *pur et simple*? I believe the *extinction of disease*. As I apprehend Hahnemann's teachings, he carefully distinguishes between life or vital power and the introduction into this of disease, and that the latter can be, and has been, repeatedly removed, with the result that health is restored, in other words, vital power resumes its healthful sway. Now we don't need Hahnemann to tell us that men are mortal, but the practical point is, is it necessary to die of disease, or may not the vital power simply reach its limit and so the person simply drop lifeless? In other words, are there not two ways of dying, namely, of disease, or of exhausted vitality? (of course accidents also, but these don't affect the general proposition). The dominant school, I believe, teach that however aged a person may be he or she must have disease to carry them off at last, but this teaching is a result of believing that in all disease, however excellent the recovery, the affected parts remain in a measure damaged, the tissues concerned, whether mucous membrane, fibrous membrane, artery, vein, nerve, &c., never quite regain their original form or shape. Under homeopathy, however, it is quite the rule for the person after recovery to *feel*, not only as well as before the illness, but better, and it is difficult, under these circumstances, to believe that tissue has been permanently injured; that injury to any part whatever should be accompanied by increased mental and physical capacity of the entire powers of the individual. Here, indeed, as in all other directions, we may say that homeopathy is opposite in its teachings to all other recog-

nised systems of medicine ; as opposite as light to darkness, and as superior.

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### ONE DOSE—ONE VALUE.

By ROBERT T. COOPER, M.A., M.D.

OUR editor has handed me a letter from Dr. Hayward, in which he takes exception to certain remarks of mine in my last article in *THE WORLD*.

Anticipating criticism of a hostile nature from this article, I did not intend to make any reply until the prefatory papers which are at present appearing in the *Hahnemannian Monthly* of Philadelphia were completed. Dr. Hayward, in the goodness of his heart and in his zeal for homeopathy, is apparently alarmed at what he considers a digression from the scientific principles that from time to time have been considered as part and parcel of our system.

It would be quite enough for me to reply by asking him to wait until time had shown the necessity for the slight departure of which I am guilty. Dr. Hayward's chief objection is centered upon my method of selecting remedies ; and certainly at first sight it would appear to be open to the gravest objections.

But Dr. Hayward, as well as all your readers, ought to consider what are the necessities of the case. Let it be borne in mind that my remarks apply to one class of diseases—the diseases of the ear. These are affections which have from time immemorial proved most rebellious to treatment. No system of medicine has hitherto made much progress in the treatment of them. Dr. Hayward is at present, I believe, preparing a repertory of the symptoms that medicines have produced in connection with the ears, and that his repertory may be of use in the treatment of these most obstinate and chronic affections is my hearty wish ; but if Dr. Hayward's experience is the same as mine, I cannot look upon his undertaking as likely to prove very successful from a practical point of view. For, in the first place, the symptom that we most commonly meet with in connection with ear disease is that of deafness ; and how irksome it is to treat case after case where the hearing is imperfect by the aid of a repertory, no one that has not tried it can have any conception. The fact is, that in order to use the repertory properly, communi-

cation between patient and physician ought to be perfectly easy; in fact, we ought to cure them before resorting to the repertory! And in the second place, ear patients are proverbially reticent in regard to their symptoms; the one complaint that occupies their minds, to the exclusion of everything else, is their deafness; hence the difficulty of putting in force the principle of similars in a way such as has been advocated in other diseases is almost impossible. If there is any class of diseases more than another that requires some departure from the beaten rules that have been laid down for the selection of our remedies, it is the diseases of the ear; and if I temporarily digress from the beaten track, Dr. Hayward need have no fear whatever of any ultimate departure from the scientific standpoint of homeopathy. He and I stand upon precisely the same platform. We both wish to render the treatment of disease more exact and more scientific; and my reason for wishing to answer his letter on the present occasion at some length is simply because of the kindness and heartiness of his criticism. We have so often been betrayed in homeopathy—and this, too, by men from whom we might have least expected it—that it is not to be wondered at that Dr. Hayward should feel suspicious.

The doctrine of similars was not, I need hardly say, the only introduction of homeopathy. Hahnemann insisted, during the whole of his life, upon the necessity for giving one dose at a time and allowing it to act; and it is a remarkable fact that those of his followers who have since succeeded him, and who have made their stamp in the world as undoubted curers of disease, were men, almost without exception, who were in the habit of employing but one dose of a remedy at a time.

Now I look upon homeopathy as such an undoubted advance in medicine, that, armed with homeopathic principles, any practitioner ought to be able to go into the midst of any form of chronic disease and cure a far larger proportion of cases than would be possible with any other system of medicine. But more than this, I believe that the practitioner ought also to be able to go amongst any variety of plants, or any variety of medicinal agents, and determine their action as weapons for the dispersion of disease in a manner undreamt of by any code of rules enunciated previously to homeopathy. This is my ideal—an ideal that I hope I shall ever endeavour to

work up to. But it is evident that if one does not allow oneself some latitude, and if one adheres to the doctrine that all medicine is contained in the repertory, it is utterly impossible to make much advance. What I am endeavouring to do, and what I would ask all practitioners to do, is to look well around and see if improvement cannot be effected by returning to the methods which, in the early days of homeopathy, Hahnemann undoubtedly employed in order to add to the number of our remedial agents. These, above all, were remarkable for a dependence upon the action of the solitary dose of substances, and this solitary dose was, I have no doubt whatever, employed more in chronic diseases than in acute. And I hold that ear disease is now as much as possible in the position in which the general mass of disease may be supposed to have been at the time when Hahnemann first introduced homeopathy. We require remedies for the diseases of the ear which can be applied with a far greater certainty than is possible by the aid of any repertory we at present possess or are likely to have for many years to come.

And when I say that I take advantage of all kinds of indications—such as occur to me from the habits of the plant, their appearances, and apparently unimportant features—I do so, not alone from the want of anything better, but with a view to being led into more scientific indications thereby. For, supposing that we rely upon a single solitary and uninfluenced dose in such an affection as chronic deafness, we shall find that one of three results will follow. Either nothing whatever will occur from that dose, which I hold to be exceptional; or aggravation will take place; or the dose will be succeeded by improvement of the symptoms and ultimate cure of the patient. Now if aggravation takes place, the fact of having given but one dose is in every way conducive to the welfare of the patient; for we know that a remedy which aggravates in the first instance is very often found to be an ultimate curative. And, besides, holding as we do that aggravation often takes place when the curative remedy is administered, it ought to be our endeavour to act in such a way that this aggravation be changed from being pernicious into being curative. While if the dose be followed straight away by a curative result from this medicine, nothing more agreeable can be wished for. But whether the case be aggravated or whether it go on to a cure, indications will be afforded



in the future on the principle of similars for the prescription of that remedy. In every way, therefore, we gain in the treatment of chronic disease by the prescription of the single dose at a time, and it is only for those who consider that a single dose is not all sufficient for the dispersal of chronic disease to make objection. That it is sufficient, quite sufficient for the purpose, has been abundantly shown by Hahnemann and his warmest disciples. If, therefore, I would impress one thing more than another upon all those who wish to add to our *materia medica*, it is to rely much more upon prescription of a single and solitary dose.

Of course Dr. Hayward will object that observations of the action of remedies taken from persons in disease are unreliable; and there is force in the objection, but the force appears to be greater than it is in reality.

In chronic ear disease, the amount of disease that is present in the system is often not more than has been present in the bodies of the healthiest of our provers.

The whole matter is one which admits of endless discussion, and, as I said before, any departure that I may be guilty of from the beaten tracks is to be judged of simply and solely by result. And if Dr. Hayward and your readers will have sufficient patience, I undertake to present them with facts that will render indisputable the methods of procedure I adopt.

I hold in my hand a letter in which the following passage occurs from the pen of a good old homeopathic practitioner: "There was a time, when," says the writer, "I was much younger, that the public went out of its way daily to foster the growth of homeopathy; but the great yearning displayed among members of our profession to unite with orthodox practice has done much to damp the zeal for homeopathy that once existed, and until a mighty revulsion takes place—which it will probably take years to effect—things will continue in the same languid, indifferent state that they now are." The fact, indeed, is, we require much more openness of thought, much more freedom of discussion, and much more zeal for the true scientific principles enunciated under the name of homeopathy in order to convince the public scientific mind that our method is a progressive one and that our success is undoubted; and if in this attempt I change the venue, and relegate discussion from the regions of the dilutions to the calm and settled territory of the single, solitary, uninfluenced, unin-

terfered-with dose, the result, I have not the slightest doubt, will be one of improvement all round, and a gain in every way to the science of homeopathy.

When, therefore, I read this paper "One Dose—One Value," it is with a view of centering discussion upon an idea of the utmost importance in practical therapeutics—namely, that in one dose of a remedy rests its curative power in a completed condition, and that this power does not exhaust its influence within a short time of being taken, and ought, therefore, to be allowed to continue acting till all manifestation of its operation has ceased—until, in fact, the one and the entire value of this dose has been secured.

### SNAKE-VENOM FOR SNAKE-BITES.

INOCULATION with prepared snake-venom against the effects of future snake-bites, and taking by the mouth "the venom of the snake that has bitten you," are surely homeopathic proceedings; the preparation the venom undergoes in the one case, and the difference of action of venom taken by the mouth from that injected by the tooth in the other, making the difference necessary to convert the method from "isopathy" (or "same curing same") into homeopathy, or "like curing like." The following, taken from *L'Art Médical* of December, shows how far behind the savages are our most celebrated savants. Without the use of hypodermic injection-syringes, tephines, rabbits, guinea-pigs, microscopes, culture-tubes, and drying bottles for spinal cords, the untutored savage can produce a "vaccin" that appears to have a threefold advantage over Pasteur's productions: that (1) it does not kill, but (2) it actually cures, and (3) it successfully prevents future poisonings taking effect. We translate the passage:—

"We have already related in the *Art Médical* that the African natives, when bitten by a serpent, kill the animal, extirpate the poison glands, and suck up a few drops of it. We take from the *Journal d'Hygiène* (October 20, 1892) the analogous methods made use of by the savages of Guiana." [A traveller is speaking]:—

"Cocoyango took out of a bottle, which contained several of them, a tooth of an extremely venomous serpent (*grage*), and this he used to make in me three incisions about three centimeters long, near the ankle. He let the wound bleed

a minute. I felt then a sort of faintness, large drops of sweat fell from my forehead. The wound was then dressed with a blackish powder. I have since learned that it was composed of the liver and gall of the animal, dried in the sun, and pounded with the poison bags. The blood immediately ceased to flow.

“The Indian chewed some leaves of trees with this powder, and, applying his lips to the wound, he injected into it saliva as much as he could, making an effort as if to fill a balloon. The operation was finished.

“I have since been bitten seven times by different serpents, all very dangerous, *grage*, coral-snake, &c., and I have not even had an attack of fever.”

“The Galibi, Boni, Emérillon Indians, the Bosses negroes, and all the natives of Guiana, generally proceed in the same fashion. They even allege that this sort of vaccination is capable of transmission to children, and that the immunity is hereditary for several generations.”

An interesting account of the Mueller treatment of snake-bites by injections of large doses of strychnine will be found in the HOMEOPATHIC WORLD for May, 1892, p. 224. This is an excellent example of the successful application of the principle of *enantiopathy*—or cure by opposites.

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## DIPHTHERIA : IS HOMEOPATHY IN ENGLAND A “DO NOTHING”?

By AGRICOLA.

DURING the Christmas week my housekeeper being in Lydney, a messenger hailed her with an urgent request to call upon an old friend of hers who was in sore trouble; this proved to be that his right-hand assistant, his favourite daughter (24), had been for two days very ill in bed with a so-called sore throat.

The family, having some commonplace knowledge of homeopathy, had, so far, relied upon the hitherto-unfailing *Belladonna*, but the symptoms having steadily become more marked, confidence gave way to panic; while the dearly-bought past allopathic experience of paterfamilias told him that it was more prudent to trust solely to the healing power of Nature than to incur the deadly cross fire of *disease-plus-physic*.

Upon entering the bedroom the significant odour alone

proclaimed "*Diphtheria*." Diagnosis pronounced it a very serious case. As chance would have it, my faithful house-keeper had *Mercuric cyanide* 8x in her reticule. Of this she dissolved the size of a horse-bean in a pint of water, directed that the teaspoon doses be given every fifteen minutes until improvement commenced, then every hour only, until convalescence was established. Within four days the girl was downstairs.

Now the "stock" *Merc. cy.* 8x from which the said 8x was made, was purchased close on twenty years ago. *Ex uno disce multa.*

N.B.—Eight cases of malignant diphtheria have occurred in my own household; if any man living has cause to uphold the Grand Art Therapeutic, it is myself.

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## TYPHOID FEVER.

By T. REGINALD JONES, M.R.C.S. London, &c.

THE fashionable disease in Liverpool and Birkenhead at the present time is typhoid. On every hand one hears of its ravages, especially amongst young men. So far, women have been singularly exempt. The cause or origin of the epidemic seems to be involved in mystery. The sanitary condition of many of the Liverpool offices is said to be thoroughly bad, and may have a great deal to do with it. Of this, however, I cannot personally give any opinion, but of the Birkenhead sewers I can speak, and in no complimentary terms. They are simply disgraceful. I know this to my cost. Twice I have been poisoned by the horrible effluvia issuing from them, the last time but a few weeks ago, and from the effects of which I still suffer. And no wonder. Here we have charcoal baskets (not baskets of charcoal) placed in the mouths of the sewer ventilators, and which are supposed to act as neutralisers of the sewer gases. They are frauds. Then diminutive posts, like small lamp-posts, are placed up and down the roads. These are connected with the sewers, and are intended to act as ventilators. They do so, and pour the sewer gases upon the heads of the unsuspecting pedestrians as they pass them; and these unfortunates go home, and sicken, and the doctor is sent for, and pronounces the illness to be typhoid, and he

informs the patient and friends that "medicine is of no use, the disease must run its course." Then he calls two or three times a day, takes the temperature and gives orders about the diet. The patient gradually gets worse and worse, delirium sets in, then hemorrhage, and then "the silver cord is loosed, and the golden bowl is broken, and the wheel is broken at the cistern, and the man goes to his long home, and the mourners go about the streets." Well, it is horrible; young men cut off in the very prime of life, with scarcely a hand stretched out to save them, because "typhoid must run its course." Run its course! Yes, with a section of the medical school, who, having ears to hear, hear not, and eyes to see, see not; but not so with those who understand the better way of treatment; and I, as one who has given up allopathy, say distinctly and boldly, and speaking from experience, that typhoid need *not* run its course, and that it *can* be cured, that its dangers can be lessened, and its mortality very greatly reduced. I do not for a moment say that all typhoid cases can be cured; but I do say that the supineness of some medical men, who deliberately watch the struggle between the fever and the victim without *doing* something to assist in the fight for life, is disgraceful. Of course, when the diarrhea becomes excessive, or hemorrhage sets in, they bestir themselves and throw in tannic acid, or lead and opium, or morphia suppositories, or injections of ergot; or if the fever goes up high, cold baths are resorted to, in which the patient is placed and left for a half-hour or more, until the temperature is reduced or shivering comes on—two to eight baths being administered daily (personally, I should prefer to die quietly rather than be killed by this barbarous treatment, but some folks like to die *secundum artem*). Many patients suffering from typhoid have been killed by "graduated baths," and Dr. Bristow says "that, according to his experience, the persistent use of the graduated bath is attended with considerable risk, and especially that it is liable to induce fatal collapse and congestion of the lungs." But why not begin at the beginning and fight the fever? Waiting for symptoms before anything is done, is like watching a murderous attack by some ruffian upon a weak, delicate woman. Wait until he sticks his knife into her, and then step forward and offer a piece of plaster to cover the wound, or a handkerchief to staunch the blood. It is just here

that we homeopaths "win in a canter." We try to knock the ruffian on the head and lay him out before he does mischief, and in very many cases we succeed. The plain fact is that a belief has taken possession of the minds of many of the leaders of the allopathic school that medicine is useless in this or any other disease. Just as the French nation, sickened by the wickedness and hypocrisy practised in the name of religion, went in for infidelity, so the men of "light and leading," sickened by the pernicious effects of the massive doses of drugs administered in that school, became infidels in medicine, and tabooed it all as useless. The cry was, "Disease must have its way—a storm cannot be quelled, but the ship may be navigated safely through it." But many a good ship goes down in the storm.

Now, we homeopaths believe that the storm of disease can be quelled, and we do not, and will not, stand idly by without using every means within our power. To save our patient, we will fight as long as life lasts, and the results are seen in a greatly diminished death-rate, a shorter illness, and very much less weakness during convalescence. Compare our death-rate in typhoid with that of the allopathic school. Ours is about 7 per cent., theirs about 17 per cent., and our average length of treatment about one-third of theirs (see the Melbourne statistics, HOMEOPATHIC WORLD, July, 1889, page 289).

A few words about the fuss made by local authorities as to disinfection after typhoid. The disease is neither contagious or infectious, and in the hospitals, typhoid cases are treated in the *same wards* as bronchitic and pneumonic cases, and disinfection is not considered necessary. So, my readers, "possess your souls in peace," if you happen to have a typhoid case in your houses. But look to your milk supply, your water supply, your sewers, and the food you eat. Here the danger lurks, not in infection or contagion.

I do not intend to take up time or space in discussing the treatment: it is known to every homeopathic practitioner. Suffice it to say, that people had better recognise the fact that the treatment of typhoid is not easy, and is better left to those who have been trained in the theory and practice of medicine. If it takes a man five or six years' hard work in the dissecting room and hospital wards to learn how to diagnose and treat the ill

to which flesh is heir, then, with all due respect to those outside the profession, the idea entertained by many, that they are quite able to do all that is necessary in the treatment of even common ailments, had better be got rid of. I speak generally, not individually, because I admit that there are very many really clever amateurs who do very good, indeed, even brilliant, work. But I write as I do by way of warning, because I have, upon certainly four occasions, been called in to domestically-treated cases when all hope had fled.

I remember one in particular—that of a lady. She was taken ill with vomiting, not much. She refused to see a doctor, and resorted to *Ipec.*, *Puls.*, *Iris*, *Arsenic*, *Kreos*, &c., for four days, but without any success. Then I was sent for, and discovered that a strangulated hernia was the cause of the trouble. It must have existed for five days at least. I gave no hope to the friends, but we operated as the only chance. The bowel was found to be gangrenous, and the patient died. *Only a little vomiting, that was all.*

In another case, I was just in time to prevent a mother giving her son a powerful purgative. He had colic, *so she said*, and “it (the purgative) would soon cure him.” But it was *not* colic, but enteritis, and bad—very like colic to an unpractised eye.

Now, to return to my assertion that typhoid need not run its course, let me very briefly give three cases, which, for my purpose, are as good as thirty.

Mr. W. Duration of fever, sixteen days, then a rise for three days, due to a slight attack of basic pneumonia. Spots came out on the ninth day. Patient downstairs on the twenty-fifth day.

Master W. B., aged 14. Duration of fever, fourteen days. Spots on tenth day. Complete recovery.

Master A. F., aged 11. Duration of fever, twelve days. No spots. Complete recovery.

What about the twenty-one days' course of typhoid after these cases?

The last two cases had a curious history. These two children, together with the sister of the latter, aged thirteen, went for a walk into the country. The day being very hot, they became thirsty, and drank out of a pit which contained, as it turned out, dead dogs and other abominations. They all sickened with typhoid. The girl was placed by the grandfather (she was his pet) under an

allopathic practitioner, because "he did not believe in homeopathy." This gentleman pronounced the case to be typhoid. So far we were agreed as to the diagnosis. She died. I do not say that she would have lived under homeopathy. I only mention the fact, and the grandfather from that day went in for our system. Typhoid can be cut short in its course, but to do it the glorious system introduced by Hahnemann must be had resort to. Allopathy is not in it.

Birkenhead, Nov. 14, 1892.

### CLINICAL CASES.

By E. W. BERRIDGE, M.D.

(Member and Corresponding Secretary of International Hahnemannian Association.)

CASE XXIV.—*Phosph., Puls., Sulph., Graph., Bar.-c., Natr.-m., Nicol., Coloc.* Oct. 20, 1881.—Miss H. J., *æt.* 36, consulted me. This was the only time I saw her, the remainder of the treatment being carried on by correspondence. Her history was as follows:—At the age of 2 or 3 she fell, and the right side of occiput came in contact with a file; shortly afterwards the hair of the head completely fell off, and a scab formed all over the head. For this she was treated by the late Dr. G. N. Epps. The sight soon began to fail, and the eyes became inflamed. From the age of 3 to 8 she had great pain and inflammation of eyes, and though the wound on head healed, the scabs remained. One day she felt a severe pain in left eye, and heard a loud report in left side of forehead; after this, the left eye began to waste, while the sight of right eye improved. Since then she has had no pain in left eye. Eight or nine years ago, a local allopathic oculist diagnosed cataract of right eye, with granular lids; he applied caustic to lids, causing much pain; since then the sight has been weaker. In May, 1880, she consulted a London allopathic oculist, who said she was going blind, and removed the left eye. Then she consulted another London allopathic oculist, who diagnosed cataract, and prescribed medicines and ointment; but the eye became worse. She has had sixteen brothers and sisters, of whom twelve have died, almost all from phthisis.



*Present symptoms.*—Cataract of right eye, with slight film on right cornea. Right eye at times feels large, as if the lid would not cover it, with heat and pricking in eye; this enlarged feeling is generally worse when bodily tired, not apparently affected by using the eye. Short sight. Sees best in twilight, or when wearing dark glasses. With the attacks of pain has photophobia. For the last six months has had piles, generally internal, causing bearing-down pain in back. Constipation; bowels only act twice weekly, with constant ineffectual urging; during stool, much pain from straining; after stool, prostration. Menses used to be regular; but since the piles have appeared they have become irregular, at intervals of from two to six weeks. During menses has severe pain, which a low potency of *Puls.* relieves at once, but stops the flow. Menses have just ceased, having occurred after an interval of two weeks. Hair falls off.

*Diagnosis of the remedy.*—Vision better in dusk. *Bell., Bothr., Calc.-c., Nux.-m., Phosph., Silic., Stram., Sulph.*

Swelling of right eye.—*Ananth., Apis., Arg.-n., Arn., Eleis., Gland., Kali.-c., Phosph., Syph., Vesp.-cr.*

This reduces the list to *Phosph.* This remedy has also heat and shooting in eyes, though not specifically in right eye. A more recent clinical symptom is "sensation as if eye were swollen and pushed out of orbit." The remaining symptoms are fairly covered by *Phosph.*, as well as by many other remedies.

*Phosphorus* cm (F.C.), a few dry pellets every alternate morning for a fortnight.

Nov. 7th.—Piles and bearing-down in back have quite ceased; they departed at the same time. Feels altogether much better in general health and spirits. Constipation gone. Eye feels cooler and clearer, though she has used it more than usual.

*No medicine.*

Nov. 28th.—No further change in eye; sometimes it aches a good deal; when it is bad, it feels too large for the socket, and full of dust, with photophobia. Menses returned on Nov. 9th, after the disappearance of the piles, with dreadful pain in hypogastrium, as if there were something inside her "as hard, large, heavy, and cold as a mile-stone"; also pain in back, and right away down to knees; this intense pain lasted five or six hours, then gradually went off; the flow was very scanty. Took no *Puls.* for it this time.

*Diagnosis of the remedy.*—*Cocculus* and *Pulsat.* have abdominal pain during menses, as from a stone. The *Cocc.* symptom is (296) "as if the inner parts were suffering from the sharp pressure of a stone." The *Puls.* symptom (*Guiding Symptoms*, viii., 609) is "heaviness in abdomen, as from a stone; heavy pressure low down, also in small of back; drawing in thighs." (*Aloes* has sensation of a stone in abdomen when lying thereon; *Ant.-tart.* has abdomen feels full of stones after long sitting; *Coloc.* and *Staph.* have abdomen feels squeezed between stones; but none of these are in connection with menses.) As the patient's symptom was heaviness and not cutting, *Pulsatilla* was the *simillimum*. I gave *Pulsat.* cm (F.C.), a few dry pellets every morning for a week.

Dec. 12th.—No return of piles or constipation. Menses appeared Dec. 8th, regular almost to the day; very little pain, and that chiefly in back—not a shadow of what she suffered last month. Menses scanty, lasting two days only. During menses has a good deal of headache—a sort of fullness, as of a rush of blood to head and face; it is worse the first day of menses, gradually ceasing by end of second day. Sight has been "very fair since last medicine"; a more natural feeling about the eyes. She did not know what she had been taking, but writes, "the last medicine seems to have the effect of the *Pulsatilla*."

*No medicine.*

Jan. 9, 1882.—For more than a week has been able to bear gaslight; all last winter could not look up in church, but had to close eyes all the time: this is not so now. On December 29, 1881, caught a terrible catarrh, chiefly affecting chest, causing burning of eyes, and making her feel ill all over. For these symptoms she took, on her own account, low potencies of *Bry.*, *Hepar.*, and *Phosph.*, all of them in alternation with *Acon.* They did very little good, as might have been expected from such empirical treatment; and she experienced more relief from a wet compress than from all these medicines. The catarrh has now very nearly gone, having passed into its second stage of cough. She has had a bad cough for the last twelve days; it is worse at night, when lying down, keeping her awake for hours; it is a hard, dry cough, tearing the chest and shaking the whole body. She pants for breath at the least exertion. Last menses came and went with scarcely any discomfort, but more scanty than ever before, and there

was the same fulness of the head. Formerly she would sometimes have epistaxis during menses; but this symptom has not returned since she has been under my treatment.

*Diagnosis of the remedy.*—Bleeding of nose during menses.—*Bry., Lach., Natr.-s., Sep., Sulph., Verat.*

Congestion of head during menses.—*Bry., Sulph., Verat.* (and many others which have not the first symptom).

All three remedies have cough on lying down, cough at night, dry cough, and shaking cough; neither of them have tearing in chest from cough, or panting from the least exertion: *Sep.* and *Sulph.* alone of the three have scanty menses. Of these two I selected *Sulph.*, as it has vision better in twilight, and gave a few dry pellets of *Sulph. dm* (F.C.) every morning for seven days.

*Feb. 6th.*—After taking the first dose the cough ceased “as by magic”; she only took one dose, as she felt she did not require any more. Slept well all next night, which was “quite a treat.” Has had no return of cough at all, and altogether feels perfectly well, except that the eye aches very often. Last menses more natural, with less headache and more backache.

*No medicine.*

*Feb. 10th.*—Feels perfectly well, except that the eye has been weaker for the last few weeks; a sort of dazzled feeling as though she had tried to look at the sun, and, while it lasts, a sick feeling in stomach, which is a new symptom. Sight very short. On left half of scalp the hair falls off, and there is a thick coating, not sore except when removed; the remainder of scalp is natural. This symptom is constant, but gets worse at times; it accumulates again in a week or so after it has been removed; the left side of head never feels so natural as the other. Often has a numb feeling in the whole left half of her. Has a good deal of nerve, and so pays less attention to little things; but sometimes has dreadful collapses, and then recruits herself by a thorough good cry all to herself, and so goes on; crying is her safety-valve, only it hurts her eyes.

*Diagnosis of the remedy.*—Relief from weeping.—*Aster., Dig., Graph., Ignat., Lyc., Merc.-sol., Phosph., Plat.*

Hair falling off.—*Graph., Ignat., Lyc., Merc., Phosph.* (and many others which have not the former symptom).

Scabs or scales on head.—*Graph., Lyc., Merc., Phosph.*

Of these four remedies, *Graph.* has pre-eminently left-

sided numbness (see Hering's *Guiding Symptoms*). I prescribed a few dry pellets of *Graphites* mm 680 m (Finckè) alternate mornings for fourteen days.

*Feb. 28th.*—Feels perfectly well, except that she has had that strange feeling several times; no pain, only a sort of sick feeling after it has passed off. It comes on with a strange feeling passing over brain, especially on left side; then a dazed feeling before the eyes, and it passes all down left side of body, down to toes; it comes on any time during day, and she just drops down on the nearest seat, and it passes off. If she can have a good cry, she gets over it so much the sooner; if she cannot cry, this sick feeling continues for an hour or two. Sight and head much the same. Last menses were more comfortable and natural than she can ever remember.

*No medicine.*

*March 23rd.*—Eye often aches, especially when tired or worried. Menses returned last week, but only for one day, with much pain in body and down knees.

*Diagnosis of the remedy.*—Menses lasting only one day.—*Bar.-c.* (scanty), *Mercurial*.

I selected the former remedy, not only because it has scanty menses in the same symptom, but also on account of its antispasmodic nature; and prescribed a few dry pellets of *Baryt.-carb.* cm (F.C.) alternate mornings for fourteen days.

Subsequently (date omitted in my Case-book) reports eye unchanged, but otherwise feels well.

*Nov. 12th.*—Has been ill for over two weeks; gets a little better for an hour or two, then worse again. Thinks she has taken cold. Frequent chills, even in bed. First she had pains in most of the joints, and particularly in the lower part of back. She took a low potency of *Rhus.*, and is now comparatively free from these pains; but for the last four days the pain has been in the entire head and back of neck, sometimes almost unbearable; she has to hold head as tightly as possible, especially when coughing. Short, dry cough on lying down. Head feels as if it would burst; cannot bear even to walk, it shakes the head so. Very thirsty. Has to press head with hand when writing. Eyes feel like fire-balls, even the remains of the left one, which had been enucleated. Has taken *Acon.*, and for the last few days *Bry.*, in low potencies, but they did no good.

*Diagnosis of the remedy.*—Pain in head from coughing

relieved by pressure.—*Natr.-mur.*, *Nicc.*, *Nux.*, *Sulph.*  
Pain in head by writing.—*Natr.-mur.* (and others which  
have not the former symptom), which also corresponds  
well to the remaining symptoms.

*Natr.-mur.* cm (F.C.), a few pellets dissolved in water,  
and a spoonful of the solution thrice daily for six days.

Nov. 17th.—Commenced medicine evening of 13th. To-  
day has been able to work all day, “and proper work  
too”: all last week it was about half an hour’s easy work,  
then an hour’s rest. She is quite surprised how well she  
feels. She felt the good effect of the medicine in about an  
hour’s time after the first dose; the pain gradually began  
to go from the back of neck right over head, but it lasted  
longest in eyes and temples. Cough very much better.

*No medicine.*

Nov. 20th.—Much better; head feels quite free from  
pain. Has a bad dry cough, deeper and harder than  
before; it prevents her from sleeping long at a time, and  
is much worse at night. Nevertheless, she feels much  
better generally. Twice last week lost a good deal of blood  
from nose, after which she felt better and lighter altogether;  
this occurred at time of menses, when she had much pain;  
and instead of taking its natural course, the blood seemed  
to rush to head: she has not had any similar trouble for a  
very long time. Eye feels comfortable again. *Pulsatilla*  
cm (F.C.), a few pellets dissolved in water, and a spoonful  
of the solution thrice daily for six days.

Nov. 29th.—Cough does not wake her at night, other-  
wise it is about the same; it is very bad on lying down,  
quite exhausting. The old sleeplessness has returned, and  
she cannot sleep after 4 a.m. *Pulsatilla* mm (Finckè), a  
few pellets dissolved in water, and a spoonful of the solution  
thrice daily for six days.

Dec. 9th.—Cough about the same, in paroxysms during  
day, and always on lying down by day or by night. Menses  
have returned without the slightest pain, which never  
happened before. In other respects feels quite well and  
strong.

*Diagnosis of the remedy* (from the past symptoms, the  
present not being characteristic). Pains in head from  
coughing, relieved by pressure.—*Natr.-m.*, *Nicc.*, *Nux.*, *Sulph.*

The *Materia Medica* gives:—

*Natr.-mur.* (254).—“Headache from sneezing and cough-  
ing, immediately disappearing on external compression.”

*Niccolum*.—"Violent cough, must sit erect and hold head with both hands" (Lee's *Cough Repertory*).

*Nux.-Vom.*—"Splitting headache, child holds its head, whooping-cough, with vomiting, worse mornings" (ditto).

*Sulphur* (384).—"Stitches from within outward at the forehead, so that he must hold it with the hand on coughing." (386 is very similar.)

Of these remedies, *Natr.-mur.* was ruled out, as it had recently been prescribed, and had done its work; *Nux.* was counter-indicated, because the symptom was connected with whooping-cough and vomiting, which did not exist in the patient; while the *Sulphur* symptom was stitching, and confined to the forehead.

*Niccolum* 200 (Leipzig), a few pellets dissolved in water, and a spoonful of the solution thrice daily for six days.

Jan. 12, 1893.—Reports that the last medicine quited cured the cough, and she feels perfectly well and strong.

June 18th.—Eye has been as bad as ever for the last five or six weeks; on waking in morning it feels rough and hard, like stone, just as if she had lain with it open all night and the wind had blown into it; she must keep it closed by holding the lid down; over-exertion brings on the pain, especially anything that strains the shoulders and neck.

*Diagnosis of the remedy.*—Eyes feel hard.—*Cannab.-ind., Coloc.*

Both symptoms in the provings belong to the right eye. The *Cann.-ind.* symptom (124) was ruled out, because it is but a part of a condition of catalepsy with hallucinations, and moreover the sensation of hardness affected nearly the entire brain, as well as the right eye. The *Coloc.* symptom is (143) "Aching in upper and outer portions of right eyeball in evening, aggravated by rubbing it with finger; it feels harder than usual there; this aching lasted some days."

*Coloc. cm* (Finckè), a few pellets dissolved in water, and a spoonful of the solution twice daily for six days.

June 30th.—Eye began to feel much more natural after second dose; cooler and softer on waking in morning, and sooner getting comfortable; it has improved so much that, with the exception of one morning, she has been able to get up directly on waking, whereas formerly she had to keep in bed an hour or two. Now the eye feels very weak, but no other symptom; the bright weather seems too

strong for it. All other symptoms gone. Feels perfectly well in health, and has done so for a long time.

*No medicine.*

Aug. 6th she wrote: "My sight is so good that I do not think I require any more medicine. I have waited to see if any of the old symptoms returned, but they have not. I am sure my sight is far beyond what my most sanguine hopes ever reached."

June 16, 1884.—Writes that she is quite well, and the sight very good. I saw a piece of fine lace which she had recently worked, and it was a triumph of needlework.

*Comments.*—(1) The first point to be noticed is the complete and permanent cure of cataract by homeopathic treatment alone, after allopathy had failed. The allopaths, when they find themselves confronted by a remarkable homeopathic cure, usually fall back upon the stale resource of doubting our accuracy in diagnosis. But in this case no such plea can be urged against the cure, seeing that some of their leading specialists had agreed on the diagnosis. For this reason, I am always pleased to have an allopathic-diagnosis of a severe or difficult case; it places the subsequent triumph beyond all cavil.

(2) A very favourite allopathic resort is the enucleation of a useless eye "in order to save the other." It is quite possible that a damaged eye may sympathetically affect the other one, and that the latter may be temporarily improved by removing mechanically the exciting cause of the trouble; but the operation is entirely unnecessary, and very often utterly fails, as in the present case. Homeopathy will cure the diseased eye, if a cure is possible; and if not, will prevent the disease from attacking the sound eye.

(3) The folly of specialism in medicine, except for purposes of diagnosis in obscure cases, is here shown. Almost all that the allopaths could do was to resort to local treatment, and all to no purpose. Whereas this patient's symptoms were pre-eminently constitutional, as was shown by the phthisical family history; and remedies selected according to the totality of the symptoms from time to time restored her to health.

(4) On Nov. 9, 1881, the menses returned after the disappearance of the piles. This shows that the piles had been cured by the homeopathic remedy, and not merely recovered naturally through the menses relieving congestions.

tion. The rule in similar cases is that if after the administration of the remedy the pain is removed before a discharge occurs, it is a cure; if the pain ceases only after a discharge, it is a recovery.

(5) It should be noticed, especially by those who doubt the power of the highest potencies, that the patient recognised that she was taking *Pulsatilla*, by the curative effects which the cm (F.C.) potency had on her. It should also be observed that a low potency of *Puls.* had always relieved the menstrual pain, but stopped the flow, and did not regulate the menses; a very high potency, however, relieved the pain more completely and permanently, did not stop the flow, made the menses regular almost to the day, and also improved the condition of the eye.

(6) The comparative uselessness of routine treatment is also shown. On the first occasion, *Bry.*, *Hep.*, and *Phosph.*, all alternated unscientifically with *Acon.*, were given, when *Sulph.* was the remedy; on the second occasion, *Acon.* followed by *Bry.* were given, instead of *Natr.-mur.* As might have been expected, they did very little good.

(7) The report of Jan. 9, 1882, shows how the catarrh, under the action of four homeopathic remedies, merely advanced to its second stage of a severe cough. The invariable rule for catarrh is this: If the disease proceeds from the head to the chest, it shows that it is getting worse, and that the medicines have been wrongly selected. Conversely, if relief from the chest symptoms are followed by a return of the nasal catarrh, or by a temporary increase of the same, it is a sign of real amelioration, and the remedy should be allowed to act without interference. Patients, if not properly instructed, often in such an event imagine that they have "caught a fresh cold," and take some remedy on their own account, thereby hindering the cure, and sometimes driving the catarrh back to the chest.

(8) The *Sulphur* was selected on Jan. 9, 1882, partly on a former symptom which had now ceased for some time. The record of past symptoms, or *anamnesis*, as Bönninghausen called it, is often of immense value in the selection of the remedy, and is, indeed, the essence of Hahnemann's doctrine of the treatment of chronic diseases. The more recent symptoms are, *cæteris paribus*, of more value than the earlier; but these must on no account be ignored: it sometimes even happens that the only characteristic symptom of a case is one that has already passed away.



(9) The peculiar coating on left side of scalp was removed by the treatment, as seen by the final report; but I regret that I did not ascertain to what remedy this was due. The patient did not mention its disappearance till she had received several remedies, and she could not recollect for how long she had been free from it.

(10) We learn not only from our successes, but from our failures; and I hold it to be the duty of every homeopathic physician to show beginners how to avoid the pitfalls into which he may have fallen. I am not at all sure whether the prescription of *Bar.-c.* on March 23, 1882, was advisable. The remedy certainly agreed with the few symptoms reported; but I think now it would have been better to have allowed the *Graph.* to act for a longer time. But I have no doubt now that the prescription of *Puls.* on Nov. 20 and 29, 1882, was an error. As the patient "felt much better generally," the *Natr.-mur.* should have been allowed to act so long as the general improvement lasted. Neither was *Puls.* the true *simillimum*, as is evident from the comparatively slight improvement effected by it. It was only a *simile*, and the *simillimum* which cured the cough completely was *Niccolum*.

(11) The hard feeling of the eye produced and cured by *Coloc.*, suggests a study of this remedy in glaucoma.

(12) The record shows that on two occasions there was decided improvement after the first, and on a third occasion after the second, dose; the last time the symptoms so quickly relieved were those of the eye. The repetition of the dose was, therefore, in these instances unnecessary, though it did no harm. The late Dr. David Wilson used to say that he found ophthalmic cases required a more prolonged repetition of the dose, probably because of the impossibility of completely resting the eyes. But at the time he held this opinion, he seldom used any other potency than the 200th. There are many cases of ophthalmic disease reported as cured by the highest potencies without such frequent repetition.

48, Sussex Gardens, Hyde Park, W.

## MATERIA MEDICA.

## TARRY DISTILLATE OF HARD GREEN WOOD.

## A SOURCE OF CREOSOTE.

By AGRICOLA.

“Do the men employed at the Charcoal [and its distillates, Reichenbach’s process] Works find their health suffer in any way?” I asked of my maid, whose home was near to one of the numerous so-called Chemical Works of the Forest of Dean. “Law, no, sir!” she replied, in evident astonishment. “*People go there to get cured!!!*” This was a few months ago only, and yet, although these particular works, where a dozen men are employed, are situated only some three miles distant across the hills, I had allowed some ten years to pass without availing myself of the study of the process and products of these said industries dotted here and there amidst the wilds of the forest still as virgin as in the days of its occupation by the Roman Legions.

Hooping-cough—Short-breath—Asthma—Bronchitis—Cough threatening consumption—*Bad eyes*: these were what then occurred to her memory as being reputed to get benefit by inhaling the vapours which arise for a short time from the incandescent, or rather the high-temperated carbonised wood as it is removed from the ovens, or retorts, in order to become cool in the open air.

The first volume of *La Pathogénésie Symptomatique* (published about 1835, I conclude, by Baillière) contains a long article on *Creosote*, the first pages being devoted to a description of its discovery, &c., by C. Reichenbach, M.D., and of his application of *Creosote* as a therapeutic agent.

Upon its perusal I at once sent for a specimen of the heavy first distillate of these Charcoal Works; made solutions and triturations up to 6x, and at once commenced “a proving” on my poor self with the 4th decimal solution, a deep sherry-brown colour, having a *strong* pyroxylic taste and odour.

I am satisfied as to its being a powerful *causative* agent, and I hope to find it equally a curative one in those cases, coming under my hands, for which it seems to me indicated.

A glance at any one of the standard works on Chemistry and on the materia medica of allopathy will show what a

complex body this carbonaceous liquid is; analogy will also suggest its therapeutic power having a probable extensive area. I give an epitome of my sensations, &c., during my five days' use of it brought to a close by a threatening nasal catarrh—a thing I dread, and which may be due to the fog and rime of the present intense frost.

Great thirst in evening; hunger; sharp sciatic pain vagrant in hips never felt before. Enormous dinner Christmas Day (roast beef, plum pudding, no dyspepsia followed; felt jolly; no wine nor alcohol). Stabbings here and there. Eyes feel as if in a woody smoke. Six sneezings in succession, hard; when in bed eyelids inner edges feel as when I had been in a dense smoke of green wood. Same next morning. 11 a.m. eyes suffused. Some head confusion. I miss my usual power of propulsion in walking. Splenetic pain. Eyes as before. Nasal *pus*; angina pharyngeal (*Apis acet* prompt). During my 7 a.m. cup of tea when sat up in bed pain and stiffness across hips, sacrum, &c.; a hearty roast beef breakfast after an enormous supper last night. Back continues stiff. *Prostrate and bladder irritation*, I have to rise often during night and pass a very little urine, which comes away like spray.

*I cease the drug.*

Constipation, the result of a few doses of *Bry.* 3x had, during the ten or twelve days preceding my above-described proving, been positively distressing. Under this pyroxylic carbonaceous medicament fecal action became stimulated most remarkably; two stools daily, quite normal in character, being a result most encouraging to me to prosecute my investigations and with persistent care.

P.S.—An interval of fifteen days has elapsed, during which *malaise* in the prostate sphere has been so evident as to suggest this—well, call it *Carbo pyroligneous*—as a probable remedy in various disordered functions of the sexual organs, male and female.

Gastier's experience of *Creosote* as a cure in chronic *enuresis* (see *Bibliothèque Homeopathique*, Vol. VIII., 1841) is worth perusal.

Fecal action has been rather diarrhetic, hence some rectal congestion, &c.; but prostate-urethral sympathy could not account for that sphere's *malaise*.

With the above action of *Carbo pyroligneous* compare

the following from *Archives de la Médecine Homeopathique*, 1895 :—

*CREOSOTE.*

Scald Head.

Toothaches diverse. Hollow Teeth.

Spongy swelling, ulceration, scorbutic state of the gums, which bleed easily.

Hemorrhages, from nose and mouth.

Ulcers, chancreous, in the throat.

Stools dysenteric, bloody-diarrhea.

Erections, frequent and violent. Leucorrhœa inveterate.

Suppuration of the lungs.

Pain in the breasts. Cancer of breast.

*Characteristics.*—Emaciation. Eruptions, cutaneous.

Humid tetter. Excoriations.

Ulcers, ancient, malignant, putrid, gangrenous.

Hemorrhages from various organs. Suppuration.

Ulcers, cancerous. Caries of bones.

HYDROCYANIC ACID: VIOLET COLORATION.

THE following two cases of poisoning by prussic acid bring out the peculiar coloration imparted to the integuments by the drugs. This would probably be an indication for its use if met with *ante-mortem* in disease. The cases are taken from *The British Medical Journal* of Nov. 26th and Dec. 17th respectively :—

“The following account of the after-death appearances in a recent case of suicide by prussic acid may interest your readers as showing some variation from the descriptions given in textbooks on poisons.

“The body was first seen by me about five or six hours after death. It was that of a short stout man, aged 54, lying on his back in bed with the bedclothes drawn up to his chin. The face was pale and composed as in sleep, with the eyelids closed. On these being raised the eyes looked bright, and the pupils were only moderately dilated, giving the appearance of life. The lips were closed, with no froth about them; the jaws were firmly clenched, and the gums were remarkably white. On the bedclothes being turned down, the arms were seen lying close to the sides, and one leg crossed easily over the other. The trunk was quite warm, and there was no rigidity of the limbs. There were already many livid spots on the neck and arms; and the fingers, which were not flexed, and the nails were of a deep violet colour,

as were also the more dependent parts of the body. There was no perceptible odour of prussic acid anywhere, but a small empty phial labelled "Hydrocyanic Acid," and with the cork in it, was found on a chest of drawers in the room, and in one corner nearest the foot of the bed lay the fragments of a broken tumbler, one of which still held a few drops of a clear colourless liquid smelling of the poison. The necropsy was made some hours later, and when the chest and abdomen were opened these cavities exhaled a vapour smelling strongly of prussic acid. There were no unusual appearances, except some venous congestion, in the organs examined. The stomach was removed for the purpose of an analysis of its contents, and when laid open showed but slight vascularity. It contained only a few ounces of a thickish dark-brown liquid, which furnished abundant proof of the presence of prussic acid on the application of the ordinary tests.

"HENRY TAYLOR.

"Guildford."

"Dr. William O'Neill (Lincoln) writes, with reference to Mr. H. Taylor's case of poisoning by prussic acid, to recall that twelve years ago he published in *The British Medical Journal* a case of poisoning by the same acid. In this case a handsome, fair-skinned young man, in a fit of temporary insanity, drank an ounce of hydrocyanic acid. Dr. O'Neill saw him a few minutes after lying dead on his bed. The first thing that attracted attention was the brilliant violet colour the whole skin presented. Several hours afterwards the violet colour had considerably faded. He thinks it probable that this peculiar violet colour of the skin is only well marked when the quantity of the poison taken has been great, and that it is more or less transient."

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STRANGE IDIOSYNCRASIES.—A writer in the *Medical News* knows a family of which the female members for several generations have been unable to eat strawberries without genuine and decided symptoms of poisoning ensuing. The male members of the family eat them as others do, but a single berry, given by a disobedient nurse, in a few hours killed a little daughter of two years. Dejean says that the celebrated Hachu was thrown into convulsions whenever he dared to eat strawberries.

Probably the most remarkable case of idiosyncrasy on record is that of David Waller, described in detail by Dr. Overton in the *Southern Journal of the Medical and Physical Sciences*, vol. iii., 1855. In all other respects Waller was a healthy, normal man, born of healthy parents. Seven brothers and sisters were free from his idiosyncrasy, and his own seven children were also free from it. But to this poor man life became almost unendurable because for him wheat flour was poison. Unbelieving friends would deceive him, and put a pinch of flour into his food. Trusting them, he would eat, but the violent toxic symptoms never failed to follow.—*New York Medical Times*.

## THE JOURNALS.

JOURNAL OF THE BRITISH HOMEOPATHIC  
SOCIETY, VOL. I. No. 1.

THE *Annals and Transactions of the British Homeopathic Society and of the London Homeopathic Hospital* will no longer appear in its old shape. The new *London Homeopathic Hospital Reports* having relieved the Society of the obligation to publish the clinical work of the Hospital, it is free to devote itself entirely to its own transactions, and the first number of the new journal, under the editorship of Dr. Hughes is now before us. It is published by John Bale and Sons, Great Titchfield Street, W. In his preface Dr. Hughes thus describes the scope of the new quarterly:—

“In the first place, we propose to give, in addition to the papers read before, and the discussions held by the Society, a summary of the pharmacodynamics and the therapeutics of each quarter's journalism. . . . And then, secondly, we want to indicate the fact that in substance as well as in form we are making a new departure; that the present series of the Society's publications is the fruit of a renewed life and energy on its part, which it trusts will be felt by its members far and wide.

“We have, accordingly, assumed the title of *The Journal of the British Homeopathic Society*, following thereby more than one well-known precedent. But we would have it distinctly understood that we in no way seek to rival *The Monthly Homeopathic Review* and *The Homeopathic World*. We occupy different ground from these our contemporaries; we give no news (save of the Society itself), review no books, take no part in medical politics or controversies. We aim only at providing the members of the Society with a record of its work and a series of excerpts from the journals which lie on its table. If we can perform this task to their satisfaction, our aim will be attained.”

The volume opens with Dr. Dudgeon's paper on “The Stammering Heart.” The proceedings of the branches of the Society are also recorded. The summary of pharmacodynamics and therapeutics is not the least interesting portion of the volume.

A list of the members of the Society is issued in a separate cover. It comprises some 180 names. We believe it is intended by some to regard this as a substitute for the old *Homeopathic Directory*, but this is a place it can never properly fill. There will always be a number of homeopaths who are not members of the Society, and of course

there can be no list of homeopathic chemists included, and this is a most useful and necessary part of *The Homeopathic Directory*.

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LONDON HOMEOPATHIC HOSPITAL REPORTS,  
VOL. II.

THE second volume of *The London Homeopathic Hospital Reports*, edited by Dr. Burford and Mr. Knox-Shaw, has now appeared, and contains much interesting matter. We are glad to see that a fair proportion of its space is devoted to materia medica. Dr. Pope contributes a paper on "The Therapeutic Sphere of *Arnica* in the Practice of Surgery," Dr. Dyce Brown "A Study of *Ranunculus Bulbosus*," and Dr. Burford "A Preliminary Communication on the Therapeutic Value of the *Hydrastis* Alkaloids" (*Hydrastin* and *Hydrastinin*).

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THE MEDICAL CENTURY.

TRUE to their promise, Messrs. Gross and Delbridge of 48, Madison Street, Chicago, have issued the first number of their new journal, *The Medical Century*, with the opening of the year. The appearance and contents of the number are both excellent and promise well for the future. The editors quite properly take in the whole range of medical sciences including surgery and the specialties. Dr. Cowperthwaite will take charge of the Materia Medica department.

Among the articles may be mentioned one by Dr. I. T. Talbot, of Boston, on "*Conium* in Cataract," which we hope to reproduce shortly. An article on "*Loco*, or Crazy-weed (*Astragalus Mollissimus*)" is contributed by Dr. Amos J. Givens. The *Astragalus* is a herb that cattle take a liking for and then refuse all other food, becoming emaciated and insane.

"The actions of a locoed animal are pitiful. The animal becomes lean and thin and loses all control over its movements; becomes subject to frequent fits, during which he lies on the ground groaning and foaming at the mouth. He throws himself about without reason; rears up and turns around in small circles when an attempt is made to mount him; his eyes turn dull and stupid, and in fact he is bereft of his senses. He will spring wildly into the air, drink imaginary water out of imaginary brooks, and jump imaginary ditches."

The term "Loco" is the Mexican name for the plant (*Herba Loco*) and means "crazy." Dr. Givens has tried it on insane patients, but without any effect, beneficial or other. He therefore concludes that its action on man and animals is different. Perhaps if it were thoroughly proved the sphere of the drug might be more accurately defined.

### THE MEDICAL ADVANCE.

THE December number contains, among other interesting matter, a remarkable paper entitled, "Two Decades in Medicine," by Dr. T. H. Hudson, who in a most graphic and forcible manner relates the story of his conversion from "regular" medicine to Homeopathy.

## INSTITUTIONS.

### PROPOSED CHILDREN'S SANATORIUM, HARROGATE.

At a meeting, specially convened, and held at the house of Mr. James Backhouse, Victoria Avenue, Harrogate, it was decided to commence a Sanatorium for Children. A Committee to carry out this desirable object was appointed, and their names are given below. That Harrogate is a suitable place for a Sanatorium is shown by the fact of the increasing number of visitors who come to recruit their health every summer, and many are now making it a winter residence.

The Committee will be very glad to receive promises of Annual Subscriptions and also of Donations towards a Building. It is proposed in the first place to commence with a few beds—the number to be determined by the amount of annual subscriptions promised—and to allow the scheme to develop itself. The Committee will be prepared to provide a greater number of beds as the demand increases and the annual subscriptions are forthcoming. Children will be received into the Sanatorium on payment of 6s. per week, which must be guaranteed by the subscriber recommending the child. All children will have to produce a Medical Certificate that they have been free from infectious diseases for six weeks. No child will be taken for a shorter period than three weeks, but they may remain longer if the subscriber desires it.

*Hon. Sec. pro tem:* Mr. JAMES BACKHOUSE.

*Hon. Treasurer pro tem:* Mr. HORATIO WOOD.



*Committee pro tem*: MR. JOHN NAUGHTON, MRS. BACKHOUSE,  
MRS. PICKARD, MISS ELIZABETH SHEWELL.

Dr. RAMSBOTHAM of Leeds is to be the Hon. Consulting  
Physician, and Dr. Arthur Roberts the Hon. Physician.

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## NOTICES.

### ROYAL ACADEMY OF SCIENCES OF TURIN.

#### THE NINTH BRESSA PRIZE.

THE Royal Academy of Sciences of Turin, in accordance with the last will and testament of Dr. Cesare Alessandro Bressa, and in conformity with the Programme published December 7, 1876, announces that the term for competition for scientific works and discoveries made in the four previous years 1889-92, to which only Italian Authors and Inventors were entitled, was closed on December 31, 1892.

The Academy now gives notice that from the 1st of January, 1891, of the new term for competition for the ninth Bressa Prize has begun, to which, according to the testator's will, scientific men and inventors of all nations will be admitted. A prize will therefore be given to the scientific Author or Inventor, whatever be his nationality, who, during the years 1891-94 "according to the judgment of the Royal Academy of Sciences of Turin, shall have made the most important and useful discovery, or published the most valuable work on physical and experimental Science, Natural History, Mathematics, Chemistry, Physiology and Pathology, as well as Geology, History, Geography and Statistic."

The term will be closed at the end of December, 1894.

The sum fixed for the prize, deducting the income tax, will be of 10,416 francs (ten thousand four hundred and sixteen francs).

The person who intends to concur at the competition must declare it, within the time above mentioned, by means of a letter addressed to the President of the Academy, and send the work with which he concurs. The work must be printed, manuscripts are considered as nothing. The works of the concurrents, which do not obtain the prize, will be returned to them, when asked for within six months from the adjudication of the prize.

None of the national members, resident or not resident, of the Turin Academy can obtain the prize.

*The Academy gives the prize to the scientific man considered most worthy of it; even if he has not presented himself at the course.*

Turin, January, 1, 1893.

*The President of the Academy, M. LESSONA; the Secretary of the Commission, A. NACCARI.*

### LECTURES AT THE LONDON HOMEOPATHIC HOSPITAL.

#### C A L E N D A R.

Dr. Dyce Brown having delivered the first two lectures of the course there remain the following:—

1893.  
 Feb. 10.—POST-GRADUATE LECTURE. Mr. Dudley Wright.  
 Lecture-Demonstration "On the commoner Affections of  
 the Nose and Throat."  
 " 24.—POST-GRADUATE LECTURE. Mr. Knox-Shaw.  
 " "Pit-falls in the Treatment of Eye Diseases."  
 Mar. 10.—POST-GRADUATE LECTURE. Dr. J. H. Clarke.  
 " "On the Therapeutics of the Serpent-Poisons."  
 " 24.—POST-GRADUATE LECTURE. Dr. Roberson Day.  
 " "On the more important Aspects of Children's Diseases."  
 April 7.—BAYES LECTURE I. Dr. Burford.  
 " "On Malignant Lesions of the Abdomen of Pelvic  
 Origin: their Natural History, Differentiation and  
 Therapeutic Management." Illustrated by specimens,  
 charts, and lantern slides.  
 " 21.—BAYES LECTURE II. Dr. Burford.  
 The same (*continued*).  
 May 5.—POST-GRADUATE LECTURE. Dr. Edwin Neatby.  
 Lecture-Demonstration on "Diseases of the Spinal Cord,  
 with Practical Remarks on Treatment."

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## REVIEWS.

### A LABORATORY COURSE IN MEDICAL CHEMISTRY.\*

THIS work is exactly what its title describes—a manual for laboratory use. It consists of fifty pages of practical directions, and is interleaved with blank pages for the addition of notes. By way of preface is a page devoted to "Directions for Laboratory Work," which every student should thoroughly digest before proceeding further. The first part of the book is devoted to inorganic, and the second to organic, chemistry. Our readers will have a better idea of the scope of the work if we give a quotation:—

#### "LESSON XV.

##### "WATER.

*General Remarks.*—Absolutely pure water is found only in the laboratory. Natural water always contains more or less foreign matter. In certain cases animal and vegetable products in various stages of decomposition may be found in it. It is especially organic matter containing nitrogen that is of importance. The spontaneous decomposition of organic matter in water first affords ammonia, then nitrites, and finally nitrates. The presence of nitrites and nitrates is

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\* *A Laboratory Course in Medical Chemistry.* By Eugene H. Porter, A.M., M.D., Professor of Medical Chemistry New York Hom. Medical College, and W. S. Pearsall, Ph.B., M.D., Laboratory Assistant, New York, 1892. Printed by M. T. Rooney, 1320, Broadway. London: Homeopathic Publishing Co.

ooked upon as evidence of former contamination of a water by nitrogenous organic matter. Since nitrates are transition products, their presence in water is usually evidence of exterior fermentative changes. Nitrates are the final point in the oxidation of nitrogenous organic matter. Free ammonia is obtained by distillation; albuminoid ammonia is obtained by adding potassium permanganate to the water, when the organic matter gives up the nitrogen in the form of ammonia.

"Experiment 1. Observe smell of water. Shake it up in flask about one-third full and inhale in on upper part of flask.

"2. Warm slightly and smell again. Heat will often bring out an odour.

"3. Now add a little KOH to the warm water; see if smell follows. If precipitate occurs when KOH is added, equals hardness; if coloured, it is by iron or organic colouring matter. Repeat these tests with cistern water, etc."

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## APPOINTMENTS, VACANCIES, AND REMOVALS.

\*.\* We shall be happy to insert notices of appointments if gentlemen will be good enough to forward them to us, and also of posts vacant and likely to be vacant, on receiving information from secretaries or committees. Under this heading also, we shall mention good openings for homeopathic practitioners and chemists.

DR. GEORGE R. JONES, *Eastbourne*.—Dr. Alexander H. Croucher, of Eastbourne, asks us to announce that Dr. George Reginald Jones (son of Dr. T. Reginald Jones, of Birkenhead) has joined him in practice.

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## GENERAL CORRESPONDENCE.

### THE DRYSDALE MEMORIAL.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—In the January number of THE HOMEOPATHIC WORLD, Dr. J. Compton Burnett has, with great felicity, struck a chord which I feel sure will be hailed with pleasure by "the still living homeopathic practitioners of Great Britain, and of Greater Britain, and the many mighty men of America."

Every word that Dr. Burnett has said, and said so truly and well, in relation to our departed friend and companion-in-arms, I quite agree with. Our colleagues at Liverpool are right in taking the step they have, for a local memorial to the great man who resided in that city so long, and who largely helped forward the cause of homeopathy there, but I contend the greater memorial, and in the form suggested by Dr. Burnett, ought at once to be taken in hand, and carried to completion.

Northampton, January 23, 1898.

A. C. CLIFTON.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—Referring to the protest of Dr. Burnett *apropos* of the suggested memorial to our late colleague Dr. Drysdale, I should like to say that he is not alone in the sentiments he has so vigorously expressed. The suggestions offered have already been the subject of discussion among some of us here.

To endow a bed to perpetuate his memory in the Hospital which, but for his labours in Liverpool for the last half century, would in all probability never have been built, would be like the raising of a monument to Sir Christopher Wren in St. Paul's. "*Si quæris monumentum, circumspecte,*" is as applicable to the one case as to the other.

As a mark of appreciation of his work and worth in Liverpool the endowment of a bed by the homeopathic public would be not inappropriate. But many of us, his *quondam* colleagues in Liverpool and elsewhere, feel that a more vivid and life-like perpetuation of his distinguished personality is what we should endeavour to obtain.

His work remains, embedded in the literature and achievements of Homeopathy, and will constitute a monument to him that will not soon pass away.

It was with cordial approval that I read Dr. Burnett's letter, finding it so thoroughly in harmony with the sentiments entertained by myself and many of my colleagues. It is to be hoped now that the matter has been ventilated through your columns, that a bust or portrait, or both, will be decided upon by those of us who desire to preserve the memory of "the great Achilles whom we knew."—Yours truly,

Birkenhead, January 21, 1893.

P. PROCTOR.

#### DR. COOPER'S "WARNING," OR THE DOCTRINE OF SIGNATURES V. HOMEOPATHY.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—In the early part of his paper in your issue of the 2nd of January, Dr. Cooper professes to advocate homeopathic treatment; towards the end, however, he appears to me to throw homeopathy—root and branch—overboard; for he says that in his practice he "throws aside all provings . . . and relies simply upon . . . indications such as occur to him from the habits of plants, their appearances, and other apparently unimportant features." Now, is it possible to practice homeopathically when "throwing aside all provings"? Certainly not. Therefore Dr. Cooper must be giving up practising homeopathically. If he "relies simply upon indications afforded

by the habits and appearances" of plants—and I suppose the colour, taste, &c., of minerals—he must be falling back upon the ancient and long-exploded "Doctrine of Signatures." Surely Dr. Cooper does not mean what his paper indicates! Surely a man of Dr. Cooper's natural intelligence and professional information cannot intend to advocate, in the nineteenth century, that we should give up the reasonable, certain, scientific, and long-proved truthful doctrines of similars for the fanciful, primitive, childish, and long-exploded doctrine of signatures! I cannot believe he does; and I hope he will assure us to the contrary in your next issue.

Erstwhile practitioners of scientific medicine running after Signatures, Astrology, Matteism, and such like exploded delusions, is surely a spectacle to be wept over by gods and men.

Yours truly,

JOHN W. HAYWARD.

61, Shrewsbury Road, Birkenhead, January 7, 1893.

[Dr. Cooper's answer to Dr. Hayward will be found in a further contribution in another part of our present issue.—ED. H.W.]

#### TEETH SYMPTOMS.

To the Editor of the HOMEOPATHIC WORLD.

SIR,—*Apropos* of your editorial (p. 25) on two peculiar teeth symptoms of *Vipera* and *Tuberculinum Kochii*, the following additions may be interesting:—

"Sensation as if teeth were too large" (which is not the same as "too long") belongs also to *Borax* (149), *Calc.-caust.* (88), *Cinnabar* (my own verified proving, omitted in Allen's *Encyclopedia*), *Nux-mosch.* (204) *Silica* (487) *Spong.* (117); to which now *Vipera* must be added.

The symptom of *Tuberculinum Kochii*, "as if, the teeth were jammed together," &c., is similar to symptom 35 of *Corallia rubra*.

Yours truly,

E. W. BERRIDGE, M.D.

48, Sussex Gardens, Hyde Park, W.

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#### LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

HOURS OF ATTENDANCE:—Medical, Daily, 2.30; Surgical, Mondays and Thursdays, 2.30; Diseases of Women, Tuesdays and Fridays, 2.30; Diseases of Skin, Thursdays, 2.30; Diseases of the Eye, Thursdays, 2.30; Diseases of the Ear, Saturdays, 2.30; Diseases of the Throat, Mondays, 2.30; Operations, Mondays, 2.

## MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Brathwaite (J.).** The Retrospect of Medicine. Vol. 106. Cr. 8vo, pp. 420. (Simpkin. 6s. 6d.)
- Bruce (A.).** Illustrations of the Nerve Tracts in the Mid and Hind Brain, and the Cranial Nerves Arising Therefrom. 4to. (Pentland. Net, 60s.)
- Cross (W. H.).** Notes on the Malarial Fevers met with on the River Niger (West Africa). Cr. 8vo. pp. 104. Simpkin. 5s.)
- Forsbrook (W. H. R.).** A Dissertation on Osteo-Arthritis. 8vo. (H. K. Lewis. 5s.)
- Field (S. D.).** A Manual of Diseases of the Ear. 4th ed., illustrated with coloured Plates and Woodcuts. 8vo, pp. 390. (Baillière, Tindall and Cox.) 12s. 6d.
- Medical Directory for 1893.** 8vo. (Church-hill. 14s.)
- Mills (G. S. V.).** A Manual of Elementary Materia Medica. Cr. 8vo, pp. 280. (Simpkin. 5s.)
- Poole (T. D.).** Vaccination Eruptions: Original Research. 8vo, pp. 120. (Edinburgh: Livingstone. Simpkin. 4s. 6s.)

## TO CONTRIBUTORS AND CORRESPONDENTS.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 30, *Clarges Street, W.*

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

LITERARY matter and correspondence should be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct the same and return to the *Editor* as early as possible.

### CORRESPONDENTS.

Communications received from Dr. E. H. Porter, New York; Mr. Dudley Wright, London; Dr. Lamb, Dunedin, New Zealand; Dr. Roberts, Harrogate; Dr. Berridge, London; Dr. Dudgeon, London; Dr. J. W. Hayward, Birkenhead; Messrs. W. Butcher and Sons, London; Mr. Mahony, Liverpool; Dr. Clifton, Northampton; Signori M. Lessona and A. Naccari, Turin; Dr. A. H. Croucher, Eastbourne; Dr. Giles, Cannes, France; Dr. Proctor, Birkenhead; Dr. Proell, Meran.

### BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Monthly Homeopathic Review.—Allg. Hom. Zeit.—Chemist and Druggist.—Monatsblätter f. h.—The Clinique.—Hahnemannian Monthly.—Homeopatisch Maandblad.—Revue Hom. Belge.—North American Journal of Homeopathy.—Medical Argus.—New York Medical Times.—Homeopathic Physician.—L'Union Médicale.—Maanedskrift f. Hom.—Monthly Magazine of Pharmacy.—Medical Century.—California Homeopath.—Medical Advance.—Homeopathic News.—Journal of British Hom. Society.—De Fontibus Mattiacis, by Dr. F. M. Kranz.—A Laboratory Course in Medical Chemistry, by Eugene H. Porter, M.D., and W. S. Pensett, M.D.—How I Became a Homeopath, Dr. Holcombe.—World's Columbian Exposition.—Circular of Bureau of Hygiene and Sanitation.—Notice Sur le Dispensaire Homoeopathique du Bureau de Bienfaisance d'Anvers, par le Dr. Lambreghts, fils.—Annual Report of the Leaf Cottage Hospital.—Occasional Papers, by Dr. Morrison: No. 1. (2nd issue), Inflammation of the Lungs, &c.; No. 3, Recollections of Gibraltar and Morocco.—Leprosy and Vaccination, W. Tebb.

THE  
HOMEOPATHIC WORLD.

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MARCH 1, 1898.

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MIND AND BODY.

IN an article by Sir W. B. DALBY which appeared in the *Lancet* of Feb. 4th, under the title, "Strange Incidents in Practice," the question of the connection between mind and body is again brought forcibly forward. M. CHARCOT, in his article noticed last month, dealt with the "Faith-cure," which he explained as being due to the action of the mind on the body. Sir W. DALBY relates instances in which bodily disease has been *caused* by impressions on the mind.

Sir WILLIAM DALBY is Consulting Aural Surgeon to St. George's Hospital, hence his special observations have been chiefly in the region of the ear. He thinks the cases in which "shock" has produced a general effect on a patient (*e.g.*, cases in which it is said "It was a terrible shock to him; he has never been the same man since") can be easily understood; but he cannot understand how shock should affect body as well as mind; how it should cause death; and most incomprehensible of all, how it should affect certain senses only. We will give his cases.

CASE I. "Some years ago a lady was standing before her toilet-table, and looking through an open door into her husband's dressing-room saw in a mirror the reflection of her husband in the act of cutting his throat. From that moment she was absolutely deaf to all sound."

CASE II. "A similarly sudden and complete loss of hearing, some years later, happened to a young lady who was suddenly brought face

to face with her dead husband, whom she believed to be quite well, and whom she was going to meet after a long absence."

Sir W. DALBY next refers to the effects of prolonged mental strain, or the reception of bad news, or sudden overwhelming joy, rendering a person deaf. He has also known of cases in which the sense of smell has been lost, or disordered, under like circumstances.

CASE III. "A gentlemen who was quite remarkable for his highly sensitive and accurate taste in the matter of wine, and upon whose opinion vintages were bought, lost his sense of smell, and with this, of course, his sense of taste, but with this addition—viz., that the sense, besides being lost, became disordered in an unnatural manner, so that what he ate and drank left behind it a horrible musty odour which he described as resembling the faint odour of a corpse. The health, both bodily and mental, of this man was excellent, and the change to which I have referred was sudden, and ascribed by him to an emotional influence—in short, to 'shock.'"

It is curious to note how gingerly Sir WILLIAM deals with the most obvious explanation of the phenomena, that, namely, which CHARCOT boldly adopts in the reverse instances of "Faith-cure"—the influence and predominance of the mind over the body.

"If any solution of these incidents is forthcoming, it will come, I imagine, from the physiologist, who will point to the insecure tenure which appertains to the sense of hearing—also to the sense of smell and her twin sister the sense of taste. Towards the solution of these problems we can only as pathologists proceed upon a process of gradual exclusion. Thus, in regard to hearing, we should exclude of course the conducting apparatus of the ear, seeing that this remains throughout healthy, as may be demonstrated by examination. Seeing, also, that the loss of hearing is symmetrical, we should have to exclude the expansion of the auditory nerve in the labyrinth—also all that portion of the brain which includes the auditory tracts until their union, or, more strictly speaking, until their origin. At last we almost imperceptibly approach a point where we seem to helplessly fall back on a *confession of ignorance which acknowledges the triumph of mind over matter.*"

This thought is too terrible for Sir WILLIAM to entertain, though why it should be we fail to see. He prefers the hypothesis of "cerebral congestion" (though he admits it



is far from satisfactory), and supports this by adducing instances in which deafness has disappeared after a loaded intestine has been relieved by a purge; and deafness from sleepless nights restored by a long sleep induced by medicines. "The precise way in which the congestion acts, remains as obscure as before;" but for all that he adheres to it, and is, he thinks, strengthened in so doing by the cases in which deafness occurs after typhus and mumps without there having been any direct inflammatory affection of the ears. The deafness of typhus is sometimes recovered from; that of mumps, never. And here is another case of a different kind.

CASE IV. "How exceedingly subtle must be the process of change which can cause a complete return of good hearing (in the case of a child who was deaf and dumb) after the discharge from the bowels of eighty-seven lumbrici and innumerable oxyurides—and this in a well-known and well-authenticated case."

The next case is of an altogether different kind, and we reproduce it chiefly for the last sentence, in which the all-sufficiency of the word "hysteria" as an explanation for everything is implied.

"A lady, aged about twenty-five, had been subject to a good deal of fatigue and want of rest. After this she was attacked by acute inflammation of the external ear, first in one and then in the other ear. This was accompanied by much swelling and pain, with a purulent discharge in the external canal, but the middle ear had not been involved. On the second or third visit to me (I cannot remember which), on introducing a small-sized speculum into the right ear, the cap of the speculum grated against something. I found this to be a piece of a needle, the pointed end, representing about one-third of the whole needle, embedded in the tissues. This I extracted with a small pair of forceps. On two future occasions I extracted the other pieces, the three pieces thus representing the entire needle. This lady professed to be quite unable to understand the presence of the needle. She was a most sensible person, by no means of the hysterical type, and appeared to me to be as much astonished as I was at the circumstance, which by no means accounted for the inflammation of the right ear, any more than of the left, in which there was nothing unusual. The inflammatory condition of the ear was recovered from, but up to this

hour I have not been able to account for the three pieces of needle. *Had there been a suspicion of hysteria, a possible solution might have been found* [italics ours]; failing this, there was no indication to proceed upon, and the case remains at present among the unexplainable."

We have heard of hysteria performing many wonderful exploits, but Sir W. DALBY is the first we have heard suggest that it is capable of growing needles in the flesh. The next case, one of "pure hysterical deafness," gives him less concern. A young lady, on awakening one morning, "professed to be unable to hear any sound whatever, and conducted herself so appropriately to this condition that it was found impossible to surprise her into any indication of hearing." A year previously the same thing had occurred in reference to the sense of sight. She became suddenly blind, so she said, and acted appropriately, though an ophthalmic surgeon had pronounced the eyes perfectly healthy. This continued many weeks, when she said her sight returned suddenly. Here is Sir WILLIAM'S proposed method of treatment:—

"When I saw her I was certain that she could hear, and proposed (not in her hearing, of course) that she should be led across a room, and that a gun should be unexpectedly fired at some distance behind her. I imagined that she could not fail to manifest some signs of hearing the explosion, and that possibly after that she would declare the hearing to have returned."

This was not permitted, and she remained deaf for six months, when one day she affirmed that the hearing was suddenly restored as the sight had been. In no other class of life "this attempt to excite sympathy," says Sir W. DALBY, "(for this appears to me the nearest to a true explanation that I can fancy) could have been so prolonged as it was."

The next case is again a puzzle, no "hysteria" being apparent. A robust-looking, middle-aged man, intelligent and fairly educated, having perfect hearing, was completely unable to speak, and had to use writing for all communications. The loss of speech had happened in boyhood. About

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a year after the interview the speech suddenly returned, and the patient was no more able to account for its return than he was for its loss. With no "comforting word"—"hysteria"—to sustain him here, Sir W. DALBY exclaims, "I am quite at a loss to offer any explanation."

Leaving out the needle case, which belongs to a different category, the rest of those adduced by Sir W. DALBY go to show that the old idea of the soul existing as a distinct organism, of a subtle nature, within the grosser material body, must be brought back again to explain the phenomena of health and disease. It is not hysterical persons only who possess a "soul"; the difference between them and other people being the instability in their case of the equilibrium between the two. If a profound shock may so dislocate the relations between the two as to cause immediate death, there is no reason why shock may not cause partial dislocation manifested in a suspension or loss of some special sense or function. And if shock can do this, other disturbances may be capable of producing the same result.

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CANTHARIDES IN CANCER (*Lancet*).—More than twenty years ago it was reported that the Russian peasants were in the habit of using some kind of beetle as a remedy for cancer. Since that time some observations have been made which would appear to point to the possibility of cantharides being of some use for this purpose. In 1860 Dr. Wilms excised the left breast for a tumour of the size of a small walnut, which was shown by the microscope to be a reticular carcinoma. It returned, and was again excised a year after the first operation. A mixture of tincture of cantharides and camphorated wine in mucilage was now prescribed, and was continued for three months. The patient, who was a widow at the time, afterwards married again, and gave birth to two children. She is still alive, and there has been no recurrence. Again in 1880, a somewhat extensive cancer of the breast was operated on in the Augusta Hospital, after which the patient was treated with cantharides, and was known to have had no return of the tumour six years later; indeed she is believed to be alive and well at the present time. Once more, in 1879, a stricture of the esophagus, evidently of a carcinomatous nature, developed somewhat rapidly in a female patient; she was treated with cantharides, and a decided improvement took place, so that she was able to swallow small pieces of food, if they were well masticated. She is alive still, but feels, however, some inconvenience from the stricture and at times is obliged to have recourse to the cantharides.—*New York Medical Times*.

## NEWS AND NOTES.

### THE DANGER OF MILK AS AN EXCLUSIVE DIET IN BRIGHT'S DISEASE.

THE Paris Letter of the *Lancet* of January 21st has the following note of warning:—

#### “THE ABUSE OF AN EXCLUSIVE MILK DIET IN BRIGHT'S DISEASE.

“In a thoughtful paper published in the current number of the *Médecine Moderne* MM. Lecorché and Talamon call attention to the dangers attending the limitation of subjects of Bright's disease to a long-continued milk diet. Such a warning is, I am sure, not superfluous, for the routine condemnation of such patients to this monotonous regimen for long periods of time is much too common an occurrence. The idea is widely spread and implicitly believed in that so long as a patient has albumen in his urine so long should he be kept alive exclusively on milk. The above-mentioned physicians point out the danger of inducing what they denominate *anémie lactée*, and they cite several cases in which a resumption of ordinary diet has brought about a marked improvement in the general health of such victims without necessarily causing the diminution or disappearance of the albumen. They reserve the exclusive milk diet for cases of acute nephritis, from whatever cause arising, and for the accidents apt to occur during the course of chronic Bright's disease (*poussées aiguës brightiques*), such as hematuria, uremia, &c. Even here an average of from a week to a fortnight's milk diet gives all the good one can reasonably expect; a gradual return to a normal mixed diet should then be begun. During the intervals between these acute attacks they condemn the exclusive use of milk. It certainly appears that persons suffering from Bright's disease can live for years while passing albumen. I cannot but think that the nitrogenous food should be permanently restricted. I am in the habit of recommending the liberal use of rice cooked in different ways, believing it to be highly nutritious without exacting any undue work from the damaged kidneys.”

#### ARSENICUM IODIDE OR MOUNTAIN AIR?

UNDER the heading, “A Typical Example of the Effect of Mountain Air,” Dr. A. T. Tucker Wise publishes the case of a doctor, aged 31, who was sent by Sir Andrew Clark to be under his care at Davos towards the end of October, 1891, suffering from consumption following influenza. Improvement was marked and rapid, and the patient was able to resume his practice in October the following year. The reason why we allude to the case is the innocent way in which Dr. Wise attributes all the good effect to mountain air and nothing to his medicines. “An irritable condition

of the heart," we learn, "was treated with *Creosote* and *Hydrocyanic Acid*." Then, Dr. Wise tells us, "a tonic system of treatment was adopted"; and first among these "tonics" we find our old friend *Iodide of Arsenic*. Here is an example of the allopathic style of reasoning. Having dubbed *Iodide of Arsenic* "a tonic," it is not possible for it to have anything but a "tonic" action, and all the "curative" action is due to the "mountain air." It is quite as likely, if the doctor had been kept at home and treated in the same way medicinally, the same result would have taken place. *Iodide of Arsenic* was probably the specific medicine for his condition.

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#### IS THIS ALLOPATHY?

UNDER the heading, "A Remarkable Instance of Medical Treatment," the *Medical Press* of December 21st had the following:—

"The current issue of *La Médecine Moderne* makes itself responsible for the record of a remarkable instance of medical treatment which had been brought under its notice. A medical man had under his care a patient suffering from dysentery. Every remedy had been tried which could be suggested for the relief of the patient, but without avail, and for twelve months there had been no improvement. This result was partly due to the obstinacy of the patient, who persisted in ignoring the strict instructions as to diet which had been laid down by his medical man. Convinced, therefore, of the necessity of treating the case by means of strict dieting, the latter prescribed one day for his patient fifteen grains of calomel, and ordered him at the same time to drink as much iced lemonade as possible, and for twenty-four hours to eat nothing but pickles! At the end of this time an urgent summons to see his patient was conveyed to him, when he found that the latter was suffering from acute stomatitis. 'Thus,' says the medical man, 'my patient was rendered incapable for three weeks of taking anything else than liquid food, by which means the dysenteric symptoms rapidly subsided, and a cure resulted.'"

It is only fair to add that the *Medical Press* remarks of the above that no such treatment would be tolerated in this country.

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#### HOMOPATHIC HOSPITAL CHICAGO EXHIBIT.

THE *Morning* of February 10th published the following note, which we have no doubt will interest many of our readers. The exhibit in question, we may add, tied with

another hospital for the first prize in the competition of all the London Hospitals instituted by the Committee of Selection. Only the successful competitors will have their exhibits sent out :—

“The *Nursing Record* gives some particulars of the novel exhibit which the Homeopathic Hospital is sending to the World's Fair at Chicago. Spread out on a table in the well-known building in Bloomsbury is a collection of dolls, upon which evidently much care has been bestowed. One doll, larger than the rest, looks charming in a nurse's uniform of dark blue stuff, with white apron, cuffs, and collar. Other dolls are lying in beds, and are arranged for the purpose of displaying the advantages of certain surgical appliances. One little effigy, supposed to be suffering from a broken thigh, is practically suspended by its heels to the foot of the bed, little more than its head and shoulders resting on the pillows—a position, however, made by no means uncomfortable. Another doll is elaborately fitted with hip-splints. Hard by, distinguished by having white curtains bound with red hung round it, lies a poor little doll, supposed to be a ‘case’ of tracheotomy. Another doll, also having on one of Bryant's splints, has so far progressed towards convalescence that she is allowed to lie on a kind of sofa, robed in a pretty blue gown daintily trimmed with fancy stitching.”

#### FIFTY GUINEAS FOR THE LONDON HOMEOPATHIC HOSPITAL.

THE following paragraph appeared recently in some of our contemporaries :—

“The London Homeopathic Hospital has just received a gift of fifty guineas, the prize awarded by the London Shoe Company, Cheapside, E.C., to Mrs. E. B. Stevenson in a recent competition. Mrs. Stevenson nominated the Homeopathic Hospital, and the amount of fifty guineas sent that old-established general hospital in Great Ormond Street makes a welcome contribution towards meeting its current deficit of £600. This award of a valuable prize to a well-known hospital should prove suggestive to the perplexed holders of the impounded missing word prizes.”

#### DYNAMITE FOR DYNAMITE POISONING.

THE editor of *Science Siftings* seems to have a notion of homeopathy (or isopathy), if we may judge from a sentence at the close of an article on the manufacture of dynamite in the issue of February 4th. He says :—

“The fumes of nitro-glycerine produce intense headache, which can be cured by taking a very small dose of it internally.”

### FATAL TIGHT LACING.

THE *British Medical Journal* of February 11th relates the following case:—

#### “DEATH FROM TIGHT LACING.

“The report of such a case in the person of an unfortunate scullery maid, aged 16, at Shaw House, Newry, will give a fresh impetus to the long standing crusade against this feminine folly. The evidence adduced showed that on Sunday evening the deceased went for a walk, and that on returning to Shaw House she proceeded to her bedroom, where she was seized with a fainting fit, from which she did not recover. She had laced her stays very tightly, and Dr. Douglas, the medical man who was called in, stated that the body of the deceased was bloodless, and the tight lacing no doubt produced syncope, which caused her death. The jury returned a verdict in accordance with the medical evidence.”

### TREATMENT OF MÉNIÈRE'S DISEASE.

It is difficult to see how any one not prejudice-blind can fail to recognise the homeopathic relationship between *Quinine* and the cure of auditory nerve vertigo. The *British Medical Journal* of February 4th contains this:—

#### “MÉNIÈRE'S DISEASE.

“Tsakyrogious, of Smyrna (*Monatsh. f. Ohrenheilk.*, November, 1892), describes several cases from his own practice. He observed primary or idiopathic cases, which included both the classical apoplectiform deafness and certain chronic forms, and, on the other hand, he found many which were merely complications or sequelæ of other ear diseases. He was forced to look upon some slight cases as examples of Ménière's disease, although they did not exhibit all the symptoms. In most cases the cause was cold. Three well-marked ones arose from influenza, one from typhus, and one from mumps. In the treatment of this disease he relies upon *Quinine*—sulphate, valerianate, or hydrobromate—especially in the chronic forms, and usually combined with ergotin in equal dose, namely, from 0.6 to 1 gramme daily. In the apoplectiform cases running an acute course he finds *Quinine* superfluous, but *Iodide of Potassium* of great use. He has tried *Pilocarpin* and *Antipyrin* and found them useless. In the slight cases and in the vertigo arising from ear disease he has generally found *Quinine* quickly curative.”

## ORIGINAL COMMUNICATIONS.

DR. WIELOBYCKI.

## PRESENTATION OF ADDRESS BY THE BRITISH HOMEOPATHIC SOCIETY.

DR. WIELOBYCKI having signified the great pleasure it would give him to receive an address of congratulation from the British Homeopathic Society, to which he formerly belonged, a deputation of the Society, consisting of the President, the Hon. Treasurer, and the Hon. Secretary, with Mr. Cameron, the oldest living member, and others, waited upon him on Monday afternoon, February 13th, at 5 p.m., and Dr. Galley Blackley, the President, read the address, of which the following is the text, with the signatures :—

“DR. SEVERIN WIELOBYCKI,—The British Homeopathic Society desires to congratulate you on the attainment of the great age of 100 years. When, after obtaining your degree of M.D. in Edinburgh and practising for a few years in Canada on the old system, you became a convert to Hahnemann's doctrine, you settled in London as a practitioner of homeopathy, and joined the British Homeopathic Society, of which you became an active member, and to the transactions of which you contributed a valuable article on an obstetrical subject, which is preserved in the 12th vol. of *The British Journal of Homeopathy*.

“Though, owing to your great age and virtual withdrawal from medical practice, you have long ceased to be a member of this Society, we do not forget that you were the associate of some still living members, and we have great pleasure in cordially congratulating you on having attained a length of years seldom accorded to man. Born three years before the promulgation of the homeopathic therapeutic law by Hahnemann, you are doubtless the oldest living representative of homeopathy in the world.

“While warmly congratulating you on the remarkable health and vigour that have hitherto attended you, we trust that your life may yet be long spared to enable you to pursue the philanthropic work of promoting temperance by precept and example, to which you have devoted yourself since retiring from medical practice, and in which, notwithstanding your patriarchal age, you still take a lively practical interest.

(Signed)

“J. G. BLACKLEY, *President*.  
 “R. E. DUDGEON, *Treasurer*.  
 “C. KNOX SHAW, *Secretary*.  
 “HUGH CAMERON.  
 “VICTOR JAGIELSKI.  
 “WASHINGTON EPPS.  
 “JOHN H. CLARKE.

“London, Feb. 13, 1893.”



"The oldest living representative of homeopathy in the world" was in excellent health and spirits, and looked as though he might continue to enjoy his unique dignity for yet many years to come. He received the deputation with great cordiality, and warmly thanked them for the terms of their congratulatory address. He also took pleasure in showing them various letters of congratulation that he had received, and especially one from the Senatus of his university. He has recently had a photograph taken; but it was noticed by those present that he really appears very much younger than his photograph shows. The effect of his fresh colour and unwrinkled face are lost in the photograph.

### CASE OF CURE BY GRAPHITES.

By GUSTAV PROELL, M.D., Meran, Austria.

A GIRL of about 25 years, blue eyes, fair hair, pale-looking, seamstress, has suffered for months from an eruption of numerous pimples and nodules (principally on the covered parts of the body, under the hair and under the dress) which all itch very much. Periods scanty, pale, with colicky pains, obstinate costiveness. All the other organs normal. I gave her *Graphites* 5 trituration, morning and evening a pinch. After the second week she felt less itching in the body, but more in the scalp. After another week she felt also much better in the parts under the hair. The nodules and pimples had almost disappeared. After the fourth week she was entirely cured, and of the costiveness also. In the second week she received the 8th dilution of *Graphites*; in the third, the 15th dilution once a day; in the fourth week only sugar of milk. Now it is two months; she seems radically cured and looks bright. The itching had gone in the third week. Periods normal.

### REMARKS ON THE "CHRONIC DISEASES"

(VOL. I).

By EDWARD MAHONY, M.R.C.S., L.S.A.

THE full title of the above work is: "The Chronic Diseases: their Specific Nature and Homeopathic Treatment. By Dr. Samuel Hahnemann." The work consists

of five volumes, but the last four are occupied with the provings and other instructions as to the nature and actions of the forty-eight medicines entitled by Hahnemann antipsorics, and would therefore be more suitably considered in papers on the *Materia Medica*; but this first volume forms a most suitable study to follow that of the *Organon*, and enlarges and expands our perception of the nature of chronic diseases, and, consequently and inferentially, of their treatment; further, also instructs us in the philosophy of homeopathy, and confirms all we have previously seen of the nature of disease as dynamic in its essence, and consequently demanding—as analogy would confirm—dynamic action in the means used for cure. The author insists on this view as a discovery of his, and essential as the basis of all truly *curative* treatment. The table of contents is:—

1. Of the nature of chronic diseases.
2. Psora.
3. Critical remarks upon the treatment of psora.
4. Cases illustrative of the bad treatment of psora.
5. Mode of formation of the psoric, syphilitic, and sycosic diseases.
6. Symptoms of latent psora.
7. Symptoms characteristic of the secondary diseases of psora.
8. Names by which the secondary diseases of psora are usually designated in treatises on pathology.
9. Treatment of chronic diseases.
10. Description and treatment of sycosis.
11. Description and treatment of syphilis.
12. Treatment of psora.
13. Rules for the use of antipsoric remedies.
14. Accidents by which the cure of chronic diseases may be disturbed.
15. Critical remarks on blood-letting.
16. Preparation of the anti-psoric and other homeopathic remedies.

1. Then, of the nature of chronic diseases. Our author first remarks on the superiority of homeopathic treatment in acute diseases, epidemics, venereal diseases, and sporadic fevers, but, he says, "there remained the chronic diseases . . . the number of which continued to be immensely

large," and in these cases by the existing mode of practice "nothing was done except to modify the forms of the same disease, to increase it by the additional sufferings consequent upon the use of improper and noxious medicines." He then shows that even without a knowledge of the nature of chronic diseases, homeopathic practitioners had done far more good than their neighbours of the old school of medicine by administering "a very small dose of that remedy which had been found capable of producing upon a healthy person the existing series of morbid symptoms," but a very slight cause, such as excesses at table, a cold, damp weather, &c., caused a return of troubles with, often, "a series of new symptoms." These being removed, again there was improvement for a time, but now "the remedy first employed helped again, though less perfectly; and still less so on being given a third time." So, if favourable circumstances and surroundings occurred, causing improvement, this nevertheless was not lasting; in a sentence, "First, the treatment was satisfactory, then it became less favourable, and finally hopeless." This did not alter the truth of the doctrine itself, but it raised vital and searching questions, such as, "What, then, was the reason why the continued homeopathic treatment of the non-venereal chronic diseases should have been so unsuccessful?" "Why should homeopathy have failed in thousands of cases to cure such chronic ailments thoroughly and for ever?" These failures were perhaps owing to "the small number of the homeopathic medicines whose pure action had been ascertained. The followers of homeopathy were satisfied with this excuse. But the founder of homeopathy rejected it as a mere subterfuge." Continuing his inquiries and researches and observations, he at last became convinced that the "ostensible disease was a mere fragment of a much more deep-seated, primitive evil, the great extent of which might be inferred from the new symptoms which continued to appear from time to time"—and further that "this primitive disease evidently owed its existence to some chronic miasm. He observed that correctness of mode of life and diet, vigour of constitution and outward surroundings, however favourable, never cured chronic disease, but "on the contrary, it grew worse from year to year, to the end of life, gradually assuming different and more dangerous symptoms—e.g., Phthisis often passed into frenzy, drying-up ulcers into dropsy or apoplexy,

intermittent fever into asthma," &c. He next found that a previously existing eruption had preceded all the subsequent sufferings. This eruption might have been of the smallest kind, "small pustules or herpes," but by careful inquiry the fact was to be elicited and the further fact that these eruptions having been removed, the host of chronic ailments followed in due order as observed, not only by Hahnemann, but by other physicians "in an infinite number of cases."

Before commenting on these quotations I take—2. Psora.

"This internal enemy," he says, "I shall designate by the general term *psora*." "It is an internal disease—a sort of internal itch—and may exist either with or without an eruption on the skin."

He then remarks that "thousands of tedious ailments . . . enumerated under distinct names, originate, with a few exceptions, in this widely ramified *psora*"—such as, almost all adventitious formations from the common wen up to the largest sarcomatous (flesh-like) tumours, from the deformities of the finger-nails up to *ramollissement* (softening) of the bones . . . frequent epistaxis, varices . . . night-sweats and diarrhea of several years' standing . . . long-continued local pains . . . swoons, vertigo, the so-called diseases of the heart . . . the tedious ailments of both the body and the soul (provided they do not belong to the class of syphilis or sycosis), which differ so much from each other in their principal symptoms as well as in the different patients" . . . and whose innumerable symptoms form but one integral disease, and ought, therefore, to be regarded and treated as parts of one and the same disturbance." He concludes that "all chronic diseases originate and are based upon fixed chronic miasms, which enable their parasitical ramifications to spread through the human organism and to grow without end." He then states that "*psora* forms the basis of the itch," and he considers it "the *oldest, most universal and most pernicious* chronic miasmatic disease," and further as "having become during the last centuries the cause of those thousands of incredibly different, acute as well as chronic, non-venereal diseases, with which the civilised portion of mankind becomes more and more infected upon the whole inhabited globe."

He further regards the varieties of leprosy given by

Moses in the book of Leviticus as "external symptoms of *psora*," as also varieties among the Greeks, Arabs, Europe in the Middle Ages—*e.g.*, St. Anthony's Fire. . . . "*Psora* became therefore the *common* mother of most chronic diseases. It may be said that at least *seven-eighths* of the presently existing chronic maladies originate in the reckless suppression of the chief external symptoms of *psora*, which act as a substitute for the internal disease. The remaining eighth originates in *syphilis* or *sycosis*, or in a complication of both miasms, or, what is very rare, in all three combined." It will be seen from the above quotations (which should have been increased, but one cannot have everything at once) what importance Hahnemann attached to his doctrine of the nature of chronic diseases, both for the understanding of the subject and for treatment, and, which is equally important, for the eschewing, avoiding, and positive hating of wrong treatment, and that to practise homeopathy as he taught and practised it, his doctrine must be received into the mind, and reduced to practice, not as an occasional thing, but as universal and the alone key to true curative treatment. Let us see what we can gather as practical help and understanding in the treatment of non-venereal chronic disease, and even acute, as is evident from some of his remarks. First, then, in the treatment of chronic diseases as ordinarily pursued, the most that was accomplished for good was "to modify the forms of the same disease." Any one who has had in his or her own person an illustration of what chronic disease is, or knows of its history in another, can verify the truth of this remark; *e.g.*, a person will say, "Since I had measles or scarlet fever when a child I have always been troubled with deafness, or a kind of cold at intervals, or a susceptibility to neuralgia," &c., &c., and on further inquiry it comes out that having been treated many times since the acute disease mentioned for various ailments, that some particular symptoms disappeared, but on the other hand fresh ones showed themselves; and so there has been a continual shifting on the part of some symptoms, while others, and these usually the most serious and long lasting, have either obstinately remained or have had their conditions modified, or if they have disappeared something equally unpleasant has been substituted for them; *e.g.*, a chronic diarrhoea has altered its conditions, or a perspiration has changed its locality, or

been succeeded by an equally obdurate dryness of the skin, entirely refusing to be amenable to the most scientifically applied hydropathy; of which I witnessed some years ago the following illustration. A lady, whose means were ample and whose husband was willing to spare no expense, "could not be made to perspire"; everything had been done, many homeopathic medicines (given, however, on what is called the law of pathology) were of no avail. Her surroundings were all that could be desired; she had even the treatment of the Russian bath at a noted hydro; but her obstinate skin hardened instead of softening and becoming moist. While listening to all this it crossed my mind very distinctly that she was a *Veratrum Album* subject, and feeling sure that no routinist would give that drug to produce perspiration, I gave her one dose, and retiring with her husband to another room, in half an hour was sent for, and she displayed, to her own amazement, and that of her husband, commencing perspiration in the hands. This proved a very hard nut for them all to crack, that one dose of a medicine, only tasting of the spirit in which it was dissolved, should have accomplished in half an hour what the cumbrous machinery of the previous treatment had entirely failed to accomplish. Lower down we read of "the series of symptoms," and this is most important as suggesting to us not to treat isolated symptoms on the one hand, and on the other to use every care to ascertain the origin of the present sufferings, and also the order in time of their appearance, those which have lasted longest, *if still present*, calling for the most serious attention, as also the most recent, as these latter will bring before us the present phase of the chameleon-like subtle monster whom we desire to unearth. It may further be observed in passing that this expression, "series of symptoms," suggests one of the causes of failure in homeopathic prescribing, a cause probably often overlooked, and by neophytes at least not understood, namely, how it is that an apparently homeopathic prescription, having the majority and perhaps all of the symptoms present, nevertheless is not successful. A further study of the case and comparison of its symptoms with those of the provings as detailed in the *Materia Medica* will bring to light the fact that *the series* in the one case and the other do not correspond: the symptoms are there, but not in the same order. This also throws light on the question which some have debated of the propriety and

advantage of seeking to curtail the symptoms of the *Materia Medica* and shows the importance of keeping all we have, and adding to it by fresh provings, and further acts as an important means of checking the insertion of untrustworthy symptoms. This is a most important subject, but must not at present engage our attention, so let us pass on to the next point which arrested the thoughtful inquiries of Hahnemann—namely, the unmistakable fact that the same disease recurring could not be treated the second time *quite so satisfactorily* by the same medicine, and at each further recurrence still less so, till finally failure ensued. Let us take in the digestive sphere, constipation; in the respiratory, asthma; in the inflammatory and muscular, rheumatism; and so we might go on, but these will suffice, on account of their frequency and familiarity to all.

All must be aware how repeatedly disappointment ensues in the treatment of these and many other familiar disorders, from the experience that what acted perhaps magically the first time did not do much the next, perhaps entirely failed the third. If, on the other hand, we accept what is here taught, namely, the existence "behind the scenes" of an unseen, unfelt, unsuspected, untouchable, yet most malignant foe, to whom our author gives the name of chronic miasm, and instead of limiting our inquiries to the ostensible symptoms present, we go backwards, years it may be, in our researches, we shall find what are hereafter given us as "symptoms of latent psora" were present in each case; we shall find in chronic constipation other dyspeptic symptoms in the form of fancies, cravings, and aversions; ordinary articles of diet disagreeing, and that in various ways; other concomitant symptoms which will complete the picture of chronic dyspepsia, and point in the clear lines of truth to *the one* among the antipsorics which will be the medicine with which to commence the eradicated, eliminative, curative, antipsoric treatment of this particular sufferer; and giving this, in suitable potency and repetition, the *cure* will begin, even if that particular medicine has not got constipation in any marked degree; said constipation being only *one symptom*, and probably a very secondary one, among the combination presented by this case of dyspepsia. So of the other two selected illustrations: asthma very seldom, probably never, commences as asthma, but the paroxysmal sufferings will be found to

have been preceded by others, such as peculiar susceptibility to atmospheric changes and climatic conditions, unnatural sensitiveness to, perhaps, odours, peculiar digestive conditions also, and rapidly alternating febrile conditions, which again are to be found among the antipsorics, and from which again one must be selected as the healing curative agent in this particular case. Chronic rheumatism; again, will be found to have a *previous* history of its own in the habitual presence of slight symptoms, it may be, but which, nevertheless, are to be traced in the histories of the provings, and once again one medicine must be selected as the medicine which alone is curative of the psoric condition which lay concealed among the muscles and nerves of the now, it may be, hopelessly crippled patient, but which condition in the past, though showing itself only by occasional yet recurring pains and twinges and curious sensations, was, nevertheless, as reference to the provings once more shows, an unmistakable evidence that only antipsorics would cure this case. It is refreshing to read that what had satisfied many as an explanation of the defect in the system thus far was "by the founder of homeopathy rejected as a mere subterfuge." One earnestly in pursuit of any truth feels a righteous antagonism and indignation when an attempt is made to slip out of or over a difficulty instead of frankly acknowledging that the difficulty exists (this frank owning of defect is always a mark of a really great mind), and this spirit in our author gives confidence that he would, as he did, persevere, and consequently that when he was satisfied he had attained his goal, we should find our desires attained also. I must merely now call attention to "the different and more dangerous symptoms" which chronic disease may assume, and the important remark that "a previously existing eruption had preceded all the subsequent sufferings," and leave the consideration of *psora* for the next paper.

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## THE DOSE-FREQUENCY LAW.

By ROBERT T. COOPER, M.D.

(Physician, Diseases of the Ear, London Homeopathic Hospital.)

From time to time amongst the homeopathic party no topic of discussion has created greater excitement or given rise to more warmth of feeling, and at the same time



none has led to less result, than the much-vexed question of the dose. It has been expected on all sides that a law would be forthcoming like to that of the law of similars, which would have reference to the dose. And though attempts have been made to formulate that law, these attempts it must be confessed have been very barren of result.

The position I take up, and that I have given expression to in the December number of this journal, under the head of "Calcarea Carbonica: A Warning," is that there does exist a law of the dose, and that this law has reference, not to the quantity of the dose, but to the frequency of its administration. If we wish to formulate that law it will run thus: The true curative principle of a drug when administered requires to be given in single dose, and this dose must be repeated in a measure proportionate to the duration of the disease. This, then, is the platform from which I speak; this is the position that I take up and to which I intend to adhere. In order to ascertain whether this is a genuine rule of practice, and whether it is practically applicable, it would be necessary to see clearly how we stand in regard to the acknowledged and well-established law, that of similars—*Similia similibus curantur*.

This law as laid down by Hahnemann has, without any doubt, been of enormous service in medicine. Whatever dispute there may be between the rival schools of medicine, the time may be said to have arrived when this law, if not acknowledged by all, is at all events made use of by all investigators whether these rank themselves upon the side of homeopathy or of allopathy.

Very loose statements were in the early days of homeopathy made in regard to the law of similars. It was supposed to be applicable, not alone to medicinal force, but to all forces throughout the world.

And Dr. William Sharp, of Rugby, did good service when he pointed out distinctly and definitely that the law of similars must be considered as applying to medicines alone. But even this statement, that the law of similars is applicable to medicines only, is a statement much too indefinite. It is not stating the fact accurately to say that the law of similars is applicable in every respect to medicines; there are many phases of drug action to which this law does not apply.

We get irritating principles, chemical principles, food principles, and other gross principles belonging to the material parts of drugs in relation to which the principle of similars is not applicable. It would be idle to discuss this at length, and unless this be conceded it is useless to go further into the question.

To what, then, does the principle of similars apply? The law of similars, as applicable to drug action, applies wholly and solely to that hidden curative virtue which Hahnemann recognised in all medicinal substances, and which he proved conclusively to be in no way due to the material particles of the drug, but which represented its true curative property. This principle has for long been known amongst his followers as the dynamic force of the remedy. Although not distinctly stated by Hahnemann, or by any of his subsequent disciples, this force, as we have said, has nothing whatever to do with the material particles of the drug. To my mind the whole experience of Hahnemann himself and of the homeopathic school proves this. If this be conceded, and I think it must be, then it will be quite evident how completely wrong we have been in looking for a law of the dose in reference to the material particles of the drug.

The whole aim and object of the homeopathic physician ought to be to study the laws and the behaviour of the true curative principle of drugs quite independently of, and apart from, the action of the gross particles of which the original drug substance consists. Let, then, this be conceded, if only for argument sake, and at once the ground is clear for the prosecution of further research.

If the dose require to be repeated in proportion to the duration of the disease, how is this to be proved? It is evident that we cannot prove it by administering drugs to the healthy; for it is evident that if a single dose can act, or can affect the system, for a long period of time, the difficulties of proving this in the present temper of the profession is almost insurmountable. It is difficult enough to get the scientific inquirer of the present day to recognise that symptoms that have come on immediately after the exhibition of a dose are really the genuine results of medicinal action; and how much more difficult would it be to secure acknowledgment of drug result for symptoms that have come on, it may be, two or three weeks after a

dose has been administered? And yet such symptoms constitute a large portion of our provings.

To establish, therefore, such a fact as that a dose must be repeated in proportion to the duration of the disease, is impossible by provings upon the healthy. To prove the law of *similia similibus curantur*, pathogenesis was in the first instance required, and then came its application for curative purposes; whereas the law of the frequency of the dose requires the cure to precede the proving, the pathogenesis.

It is therefore necessary to fall back upon experiences deduced from acquaintance with disease and its treatment.

It is required before everything to establish the truth of this statement by a lengthy acquaintance with the entire class of chronic diseases.

But here comes in a very considerable difficulty. Chronic diseases are in their nature changing and uncertain—changing in their symptoms, uncertain in their duration.

To prove such a proposition upon the entire class of diseases known as chronic diseases seems, therefore, an almost impossible undertaking. The basis upon which we would argue is a shifting, uncertain, instable basis.

What, therefore, is to be done? Is the work a hopeless one? I think not. It is obvious that if the symptoms of chronic diseases generally are so changing and the duration of their disturbance so uncertain, our only plan in order to establish our proposition will be to select some chronic disease, the symptoms of which are few and the duration of which is fairly uniform.

Moreover, the disease chosen ought to be one in which the symptoms are extremely obstinate and in which the tendency is to become progressively worse as time goes on.

There is one form of affection that more than any other meets these requirements. It is that which some years ago was described by me under the term *Vascular Deafness*,\* and which in fact is that very common form of chronic deafness which is characterised by coming on gradually, and in which the hearing power becomes progressively lessened until it altogether ceases, eventually depriving the patient of all hearing faculty.

Here, then, is a disease, a chronic disease, in which we

\* *Vascular Deafness*. Baillière, Tindall & Cox, London, 1886.

have one prominent and most obstinate symptom, that of deafness, and in which the progress of the disease is such that little variation is observable from time to time, and in which gradual decay of the functional powers of the ear, as an instrument for hearing, takes place, and in which without treatment there is no hope whatever for the patient.

If it can be shown that by regulating the frequency of our doses we can obtain a command over this affection which could not be secured when the dose was not so regulated, then I maintain we have as strong a proof as it is possible to obtain that such regulation of the dose is absolutely required; and there is no reason why such regulation of the dose should not be brought under the domain of law. There will be no difficulty in showing by clinical experience that this affection, this vascular deafness, as it is called, is entirely out of the sphere of medicinal action, and cannot be cured even by the homeopathic remedy unless that remedy be administered in single doses.

In the March number of *The Monthly Homeopathic Review*, 1892, and under the head of "High Dilutions and Ear Disease," I brought forward Carroll Dunham's case of Deafness, which occurred in a young man of seventeen years of age, who had been deaf since four years old, and who was cured by single doses administered at intervals of *Mezereum* 30. This case is in every way a remarkable one: it is a typical case. One must either discredit it altogether, or else acknowledge that it is one completely out of the ordinary run of things. There must have been some one agency at work which led to the accomplishment of this very striking cure. In that paper I inferred, as others had done, that the high dilution was to a large extent accountable for the result.

Subsequent experience has abundantly shown me that the high dilution is not really the important agent in the cure of such cases as this. It is, I am fully assured, the single dose, and the single dose alone, which is the important factor. My experience brings me into connection with a very large number of the most obstinate forms of ear cases at the London Homeopathic Hospital; and I have had ample opportunities for putting in test the single dose, often of an undynamised preparation, within the last year or so, and the result has been so strikingly in favour

of giving the remedy in single dose and at long intervals that I have no hesitation in saying the interval is of more importance to the cure than the dilution. In papers that I am now publishing in *The Hahnemannian Monthly* of Philadelphia, under the head of "Arborivital Medicine," I hope to be able to give many cases of deafness, of true vascular deafness, in which striking improvement took place when drugs were administered at long intervals in single doses. As an example of drug power in a solitary case, let me put forward one that occurred recently in my practice.

A professed cook, a light-haired woman, aged thirty, living in South Kensington, consulted me on 29th of June, 1892, with gradually developing deafness of the left ear, much worse the last five or six weeks; her history being that both ears discharged four years ago, and that as a child she used to cry very much and suffered from otorrhea. The right ear is quite deaf, and has always been so; on the left hears the watch at half an inch, increased to five inches on inflation. Tinnitus very bad, constant singing in the daytime; has much headache both in the occiput and in the forehead, and the scalp feels tender over the seat of pain. The bowels are too free, five or six times a day, and catamenia irregular, every six weeks, with much pain in the back and left side. Both membranes of cicatricial appearance from former ulceration; tuning-fork heard fairly. These symptoms certainly point clearly enough to *Kali Hydriodicum*, as I long ago pointed out at p. 77 in my *Lectures on Diseases of the Ear*,\* the headache with tenderness of the scalp, and the history of what we may suppose to have been meningitic disease of childhood, with, at present, too free action of the bowels, being to my mind especially characteristic. *Kali Hydriodicum* 30 was therefore given in one dose of three or four globules. On the 12th of July she came back to report improvement all round, except in the tinnitus, has not had a headache for the last week, but the noises have been bad at night-time for the last two or three nights for the first time (they came only in the day-time before), but they do not continue for so long. Bowels are acting all right; hearing distance: left, three and a half inches; to have an unmedicated tablet thrice daily of sugar of

\* The Homeopathic Publishing Company. London, 1880.

milk. August 3, 1892, tinnitus almost gone and "scarce anything when it does come," no difficulty in hearing, and can take her orders in the morning without requiring repetition; hearing distance: left, twenty inches. September 12th, writes that she feels well in every way, and thinks it unnecessary to have further treatment. This may appear an impossible case, but it is really on all fours with Carroll Dunham's case just referred to. The indication for the remedy, as in his case, was taken, to a large extent, from a previous affection in childhood, and the remedy was administered in the same dilution and in single dose, the only difference being that in his case a few additional doses were given.

It is open, of course, to the supposition that in both cases the important factor was the high dilution. I am not going at present to absolutely deny this, but confine myself to the statement already made, that recent experience leads me very greatly to exalt the efficacy of the single dose and to lessen my esteem for the high dilution. As to the indications both in this case and in Carroll Dunham's, it is hard to see how a repertory would help in the one case or in the other. In Carroll Dunham's case there had been eczema of the scalp in infancy, which had been suppressed by local applications of nitrate of silver, subsequent to which the deafness came on. And the selection for the remedy was due more to the prescriber's instinct than to any indication that it was possible for a repertory to give. In my case, too, though there were some symptoms present that clearly pointed to *Kali Hydriodicum*, they were ones that I have no doubt would be found equally in the repertory under the head of many other drugs. Do what we can in treating disease; we cannot, and ought never to try, to throw aside our own individuality. I hold that there are certain promptings that lead every earnest curer of disease to the selection of remedies, and while the repertory aids these promptings, good is being done; but while, as I am afraid is too often the case, it paralyses and renders such promptings inoperative, it is undoubtedly doing harm. The cure in both these cases must no doubt be referred to the selection of the indicated remedy, but in neither case would a cure have been effected, would the hearing have been restored, unless this indicated remedy had been given in single dose and at considerable intervals. Both cases were of long

duration, and therefore both required the remedy to be administered at considerable intervals. And surely it is unreasonable to suppose that a suddenly developing inflammation, which threatens to deprive an organ of its functions, requires the same repetition of the remedy as a gradual enfeeblement which has been going on for years, and which does not perceptibly vary from day to day. If we are right in repeating the dose very frequently in the one case, is it not reasonable to suppose that a frequency of repetition proportionate to the chronicity of the complaint ought to be put in force in the other. The disease of the ears that has proved most rebellious and most obstinate is, as before stated, that gradually developing deafness which I have described under the term vascular deafness.

And I hold that this affection is in reality a type of chronic disease in its gradual progressiveness and in its acknowledged obstinacy. Supposing, for example, a specialist has to do with a liver or the kidneys, or even the lungs, troublesome symptoms will every now and then crop up in connection with these or with other organs of the body, and the man who has secured his reputation as a specialist for such an organ will every now and then be required to subdue such symptoms. For example, if he treats the liver, temporary hepatic congestion will require his assistance at intervals, so with the kidneys and with the lungs, coughs and stitches in the side will require looking after; but with the ear there are few of these acute exacerbations to be dealt with, and the man who can only help an earache will find his *clientèle* becoming rapidly less. And were it not that cases of obstructed deafness and of nervous deafness frequently come before the aurist, the opportunities for displaying his skill would be few and far between. The one and the most obstinate affection that he has to deal with is that progressive chronic deafness that I have so often referred to, and these cases are so numerous and so obstinate that it is impossible for him to be mistaken when he discovers a treatment more than ordinarily successful for them. This treatment I maintain can only be had from the prescription of the appropriate homeopathic remedy, and not even from this, unless sufficient interval be allowed for each dose to act; then, and not till then, will he find real improvement to accrue in the treatment of this most obstinate form of impaired hearing.

Take, for example, this case that appears in a paper by Dr. H. Goullon, in the July number (1876) of the *British Journal of Homeopathy* :—

Dr. Schmidt, a regimental surgeon in Königsberg, treated a cabinet-maker, thirty-four years old, with dark hair, well nourished, of short stature, and healthy appearance. Whilst working hard on a summer's day, he was exposed to a draught of air, and has been stone deaf of the right ear in consequence for twelve years; the left ear also lost half its normal sharpness after taking several cold foot-baths in the summer of 1850. He had no pain. Nothing could be detected by the otoscope in the meatus auditorius, nor yet in the cavities of the mouth and nose. He could only hear the tuning-fork slightly in the left ear, and the tick of a watch when it was closely pressed upon the left ear. He has humming and ringing in the left ear, he has never had any noises in the right ear. Dr. Schmidt inferred the seat of the deafness was in the auditory nerves.

August 31, 1850. A dose of a high dilution of *Belladonna*.

On September 8 the patient returned and announced with much glee that he heard again with the right ear.

September 21. His hearing become normal on both sides, after copious bleeding from the nose for several successive mornings. The nose-bleed frequently returned in autumn, and only ceased after a dose of a high dilution of *Mercury*. Since then he has remained quite well.

The modern young aspirant for professional honours has a very convenient way of dealing with such cases as these; he pronounces them impossible. His didactic *non possumus* meets every difficulty. One of these young gentlemen happened to be called in to see a patient of mine in my absence from town, and he thus explained his medical doxy: "You see, madam, I do not call myself a homeopath, but I use all the homeopathic remedies, and the difference between me and Dr. Cooper is simply this: I can cure with my good strong doses in two or three weeks what it would take him so many months to effect!"

This is the modern practitioner; he is not a homeopath, but he uses homeopathic medicines, and when presented with a case that, to use a vulgarism, he would eat before he cured, he scorns even to inquire into it.



This case of Dr. Schmidt can only be explained either by the power of the high dilutions, or that of the solitary dose, and my contention is that superiority is fairly claimable for the oneness of the dose and not for the dilution.

That this necessity for sufficient interval between the doses of the remedy is required in all other chronic diseases as well as in those of the ears, I feel assured. For be it remembered, the man who sees his patients through their congested livers, their acute gouts, their obstinate coughs, has not with his repeated remedies got rid of the original disease to which these temporary ailments owed their origin; and until he has got rid of the basic chronic malady he cannot be said to have demonstrated in any satisfactory way the curative principle of his remedy.

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## MATERIA MEDICA.

### CARBON OINTMENT.

By AGRICOLA.

DURING the Franco-German hostilities of about 1871, many French subjects fled to Southampton; from one of these the writer learnt the use of, and how to prepare, the above medicament, valuable beyond description in anal irritations, hemorrhoidal troubles, &c. It is strictly in accord with the pathogenesis of *Carbo V.*, the action of which caused me, during my first use of it as 3x, amongst other symptoms, much anal irritation.

Stick, say, an iron skewer into a wine cork, plunge it into a clear fire, when all flame has passed off plunge the glowing mass into vaseline, stir it up well with, say, a fork until an amalgam is completed. This is the carbon ointment, a mere film of which applied on and up into the anal mucous membrane acts like magic itself.

Probably I shall be told by the M.D.s and by the operative chemists of homeopathy that "there is nothing new" in this; well, I know that charcoal ointment is alluded to in one of the numbers of *The Homeopathic Times* of about 1850, but where, pray, during the intervening forty years is there any allusion to carbon ointment? Is it a stock commodity in any one of our chemist shops? I think not. And I have ample reason to know that hemorrhoidal

troubles are often a *bête noire* to homeopaths—M.D.s alike as patients. Glycerole of aconite is valuable applied as above with the finger-tip.

### CONIUM IN CATARACT.

By I. T. TALBOT, M.D., Boston, Mass.

(Ex-President American Institute of Homeopathy.)

IN the fall of 1853 the medical world, especially that part belonging to France, was greatly disturbed by the announcement of the cure of Marshal St. Arnaud, one of the most distinguished citizens of France, who had been reported as near death from an incurable disease. His recovery occurred under the care of our *confrère*, Dr. Chargé, of Marseilles. He had been treated by distinguished allopathic physicians for cataract with acute and rapidly advancing glaucoma. Under the administration of *Conium* by Dr. Chargé improvement immediately commenced, and when he was completely restored he did not hesitate to announce the fact and gratefully attribute his restoration to homeopathic treatment.

The pathogenesis of *Conium* is replete with symptoms very similar to those of acute cataract. The following are a few gathered from numerous provings: Vision confused; haziness and dimness of vision; dimness of vision; bright points scintillating or rather quickly moving in the distance; vertigo and sensation of eyes unusually prominent; difficulty in accurately sighting the object; black points and stripes before the eyes; pressure over and into right eye; haziness as if a thin film of transparent vapour were floating between the eye and the object; double vision.

The following case is one among many in which I have used *Conium* with great satisfaction: Miss S. F., school teacher, age 32 years, usually of excellent health, which has lately been impaired by close confinement in teaching, for three months has noticed a gradually increasing haziness of vision, worse in right eye, with inability to distinguish fine print. The dimness rapidly increased until she was unable to read any but large print, and had great difficulty in focussing objects. The family physician thought it a case of cataract, and advised her to visit a distinguished oculist in Boston, who pronounced it a lenticular cataract of both eyes, and said that nothing but an operation could give her any relief. He wished her to return in a month for further observation, and said that it would probably be two months before the right eye would be in condition for the removal of the cataract. On the same day she visited me and

placed herself under my care. She complained of slight vertigo on rising or changing the eyes from one object to another, requiring some seconds to recover the focus after moving her eyes. There was a general feeling of languor and weakness of the limbs on motion; these with other symptoms recalled the provings of *Conium*, which was given in pellets of the third decimal four times daily. At the end of a week she returned and expressed herself as much improved—the weariness of the limbs had almost entirely disappeared, she could distinguish objects more clearly, and had less of the giddiness on moving her eyes. The *Conium* was continued, and at the end of ten weeks the hazy appearance of the right eye had almost entirely passed away, and she was able to read ordinary print readily. Two weeks later she visited the oculist and asked him to examine her cataract. At first, not remembering her case distinctly, upon examination he said: “Why, you have no more cataract than I have,” and upon her recalling what he had told her three months before, he said: “That is impossible, but I have a memorandum of your case at that time.” On referring to this he was astonished, and said, “What have you been doing?” She told him frankly that she had been taking homeopathic medicine. As he was bitterly opposed to homeopathy, he said brusquely to her: “Madame, I have no time to discuss homeopathy with you, but I can tell you this—that homeopathic medicine never could do your eyes any good. Good-bye,” and dismissed her. This occurred in the summer of 1877, and only once since has she had any returning symptoms of this trouble, which was again relieved by a few doses of *Conium*.

Another interesting case worth recording is that of A. G., a mulatto boy, aged 18, who had an older sister who had a cataract removed from each eye, followed by glaucoma, complete loss of vision, and finally enucleation of the eyeballs. Similar symptoms developed with him. The haziness of vision increased to almost blindness, and a skilful oculist told him that in about two months his cataracts could be removed. Before that time, however, the eyeballs became swollen, protruding and painful, and he was able to distinguish but very little light. The case was pronounced hopeless and enucleation recommended, but the administration of *Conium* gave him so much relief that he concluded to postpone the operation. This medicine was continued for nearly a year and a half with continued improvement, excepting at one time when there was ulceration upon the cornea, for which *Mercurius corr.* 8x was administered with prompt relief. He regained his vision so that he was able to read and write, and for the past six years has been in comparatively good health.

Many other cases have occurred in my practice in which I

have seen the most prompt and desirable results from the use of *Conium*, and if this paper may do anything to direct the attention of physicians to the study of this drug in similar conditions of the eye it will have fully served its purpose.—*Medical Century*.

## THE DOSE.

### OBSERVATIONS ON THE DOSE QUESTION.

By DR. LAMB.

IN the HOMEOPATHIC WORLD for October the "Dose question" was opened. I am very glad to notice this. The following is a case of mine. Gentleman, *æt.* about 35, consulted me for "a pressure below left ribs, as if squeezed." Regarding it of hepatic origin, I gave *Lyc.* 3 gr. ij. This relieved. On his return for some reason I changed to *Lyc.* 12 mij. ij. He complained that whereas 3 had done him good, 12 had not relieved him at all. I resumed 3 with satisfactory result.

Another case I recollect occurred three or four years ago. H. F., *æt.* about 60, was suffering from hæmaturia. It was at the time just prior to my public avowal of my belief in homeopathy. I had given him allopathically Gallic Acid, Sulphuric Acid, *Ergot*, and also *Hamamelis* m. xv. doses of allopathic tincture without any effect. The poor man piteously complained to me, "Look here, doctor, I am bleeding like a pig, if you don't stop this soon I shall be dead." Well, I reasoned this way: the blood passed is dark venous, and just the indication for *Hamamelis*. I have given it unsuccessfully in large doses, but as it seems so strongly indicated I will now give it homeopathically in mij doses of 1st cent. dilution. The result was perfect; steadily after each dose improvement set in, and in a few days he was well.

40, High Street, Dunedin, N. Z., November 26, 1892.

[In the *Homeopathic Review* of last July appeared a paper by Dr. Lamb, in which several instances of the comparative action of large and small doses are recorded, among which may be mentioned the following:—

*Arsen.* 3x., 6, 12, and 30. A three months' baby had typical eczema of head and body. *Ars.* 3x markedly aggravated. *Viola tric.*, *Graph.*, and *Merc.-sol.* were then

given without result. *Ars.* 3 was next tried, and this also aggravated somewhat. *Ars.* 6 did not aggravate, but caused only slight improvement, if any. *Ars.* 12 caused decided improvement, but some patches which refused to give way under this cleared off perfectly under *Ars.* 30.

*Arsen.* 30 and 200. Mr. R., 27, ten minutes after every 2-drop dose of *Ars.* 30 had a feeling of most unpleasant prostration and exhaustion, together with a confused feeling in the head 'as if he had knocked his head against a wall.' Also he noticed a moist, clammy state of the left side of scrotum and opposite surface of thigh, where a red ringworm-like patch appeared. This last effect would appear or disappear according as he took two-thirds of a drop of the 30th or left it off. He was much improved by the 30th, but the 200th benefited him still more.

*Bry.* 1x and 30. A case of rheumatic fever not benefited by *Bry.* 1x convalesced rapidly under *Bry.* 30. The same patient, a man, was cured of rheumatic ophthalmia, which he had subsequently, by a few doses of *Bry.* 30.

*Sep.* 30 and 6. A married woman, troubled with sacral pain and leucorrhœa, received *Sep.* 30. After a few days she declined to take more of the medicine or she would 'go mad.' After each dose she had a pain striking her on the nape of the neck, extending up to occiput over vortex forward to forehead, ending by drawing at the muscles of the eyes, leaving them in a condition just as she had experienced after the exertions of a difficult confinement. *Sep.* 6 relieved her of the original troubles without causing any symptoms.

*Puls.*  $\phi$  and 30. A patient who had been benefited by *Puls.* 30 given for piles and nervous symptoms as twitchings after confinement, sent on one occasion for a fresh supply from the chemist, who sent the  $\phi$  tincture, no dilution having been specified. This speedily aggravated, and caused in addition a most disagreeable heartburn after each dose.

*Nux* 30,  $\phi$ , and 1x. A boy of 9 is at once relieved by *Nux* 30 of an abdominal pain arising either before or after eating, whereas the 1x and  $\phi$  have only a partial effect or none at all.

*Bell.* 1x and 3. Convulsions in an infant. *Bell.* 1x failed to make any impression. *Bell.* 3 caused immediate and permanent relief.

## THE EDITOR INTERVIEWED.

THE following appeared in *The Westminster Gazette* of February 23rd :—

## HOMEOPATHISTS AND THEIR HOSPITAL.

## A CHAT WITH ONE OF THE PHYSICIANS.

Homeopathy in London seems to be looking up. Over £30,000 has just been raised by its friends with very little trouble, and a fine new hospital is to take the place of the present building in Great Ormond Street. Very little is known by the general public of what the professional disciples of Hahnemann are doing in the Metropolis, and with the object of throwing some light on this matter, a representative of *The Westminster Gazette* called on one of the physicians of the new school, Dr. John H. Clarke, of Clarges Street, Piccadilly. Dr. Clarke, who is not only one of the chief medical officers of the Homeopathic Hospital, but is also the editor of the HOMEOPATHIC WORLD, kindly complied with our representative's request for information.

To make quite sure of his ground, our representative thought he would begin at the beginning, and he asked Dr. Clarke if people generally understood what the word homeopathy meant?

"Not one in 10,000," said the Doctor. "Owing to the deplorable ignorance of the Greek language which prevails, the real meaning of the word has been lost. By the public it is generally supposed to mean 'infinitesimally small.' But it really means exactly the same thing as the phrase *similia similibus curentur*—"let likes be treated by likes." The Latin equivalent would be *similitudo*, and if Hahnemann had chosen that word instead of *homeopathy*, the art would not have been confounded with the subsidiary question of dosage, as has been the case."

Turning then to the question of the leading local habitation of homeopathy, our representative said he understood the homeopaths had outgrown their hospital requirements in Great Ormond Street?—"Yes," said Dr. Clarke, "that is the case. During the last ten years the work of the hospital has steadily increased. For the last three years the average number of out-patients has been 10,500, and of in-patients 800. The new hospital which is to be built will have a capacity of at least 120 beds. Property adjoining the present hospital has been secured which will give a frontage for the new building in Queen's Square."

"What is the history of the Homeopathic Hospital?"—"The hospital was originally founded by a lay association called the British Homeopathic Association in 1849, and on Hahnemann's

birthday, April 10, 1850, it was opened at No. 32, Golden Square. The number of beds was then only 25. It was during this period of its existence, in the year 1854, that it did such signal service in the cholera epidemic. Being in the centre of a badly infected district, it was cleared for the reception of cholera patients. Sixty-one cases of fully developed cholera were treated with a mortality of 10—that is, 16·4 per cent. The average mortality in the other cholera hospitals under the old treatment was as high as 51·8 per cent.”

“That looks like one for homeopathy; but is the fact capable of proof?”—“Yes, certainly. The cases were attested by Dr. Macloughlan, the inspector under the Government. It was in 1857,” Dr. Clarke proceeded, “that the site of the hospital was transferred to Great Ormond Street. Three large private houses, one of which had for many years been the residence of Zachary Macaulay, were utilised. The hospital at first had capacity for 50 beds, but as requirements grew new beds were added, until at the present time the hospital can make up 90 beds. In addition to the hospital there is a large nursing institution, which brought in last year to the hospital’s funds no less than £2,500 in nurses’ fees.”

“What medical staff have you?”—“We are well equipped. On the consulting staff we have two physicians, one additional physician for diseases of women, and one consulting surgeon. Then we have three ordinary physicians, and five assistant physicians, a surgeon and an assistant surgeon, physicians for diseases of women, for diseases of the skin, and for diseases of the ear; an ophthalmic surgeon, a surgeon for diseases of the throat, an anæsthetist, and a medical registrar. There are two resident medical officers, one of whom attends patients from the hospital at their own homes. We have also an active secretary-superintendent, Mr. Cross.”

“Is there a medical school connected with the hospital?”—“Well, there are educational arrangements which have had periods of varying activity for a number of years past. At present the teaching capacity of the hospital is exercised at the various clinics in the wards and the out-patients’ rooms, and in the delivery of post-graduate lectures. But when the new hospital is completed, we hope to have much better facilities for carrying on teaching work than is possible at present.”

“But what legal status have you?”—“The legal status of homeopaths is exactly the same as that of allopaths. When we have an hospital of 120 beds we shall then have the legal requirement in point of size for qualifying students in hospital practice. But still it will be needful for us to obtain Government recognition. In the United States the homeopathic schools have the same rank and privileges as those of the allopaths. But

here, before a student can study homeopathy, he must pass through an allopathic school to obtain his degree. He must then devote much time and energy to the acquirement of what is practically a new art, and it is not many who have the means or opportunity to do this. There is no reason except such as exists in the intolerance of the ascendant party why in the near future we should not have an independent homeopathic school in this country."

"How do the poor people take to homeopathy?"—"Judged by the attendance at the hospitals and dispensaries throughout the country, the poor take readily to it. They are no judges of fine scientific distinctions, but they are quite qualified to judge results."

"And how about the well-to-do and homeopathy?"—"Homeopathy has always been well supported by those who are qualified by nature and circumstances to judge of its scientific merits. The names of Archbishop Whately, Augustus de Morgan, Sir W. Siemens, John Bright, and J. Russell Lowell may be taken as examples from the list. The Homeopathic Hospital has many generous and wealthy friends. The Duchess of Teck is the patron, and the president is the venerable Lord Ebury, who, as Lord Robert Grosvenor, was instrumental in passing through the Commons Clause 28 of the Medical Act, which secures liberty of conscience to the medical student. Lord Lyndhurst secured the passage of the same clause through the Lords. Before this clause became law, students known to have homeopathic proclivities were refused their diplomas by qualifying bodies, although they had successfully passed their examinations."

"Is the boycott by the allopaths in private practice as pronounced as formerly?"—"Generally speaking, it is; but the more liberal-minded, among surgeons especially, are well disposed towards homeopaths, and now and again the more enlightened of the physicians have expressed their opinion that views of *materia medica* should not be a bar to intercourse between legally qualified medical men. But the *odium medicum* of the main body of the profession has generally proved too strong for the heads of it.

"Still," added Dr. Clarke, as our representative rose to go, "we must not mind that. Like every new truth, homeopathy has a world of ignorance and prejudice to overcome, but sooner or later, and it may be sooner, it is bound to do it."

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## INSTITUTIONS.

### HASTINGS HOMEOPATHIC DISPENSARY.

#### ANNUAL MEETING.

THE annual meeting of the Hastings and St. Leonards Homeopathic Dispensary was held at the Town Hall on Thursday afternoon, February 2, when the Mayor, Dr. Croucher, J.P., presided. Amongst those present were—Bishop Beckles, Captain Berry, Dr. Lough, and Messrs. C. Pemberton Carter, J.P., G. F. Griffin (hon. treasurer), G. Osborn, J.P. (hon. secretary), W. Freeman, J. Tolley, J. D. Murray, Miss Croucher (the Mayoress), and others. Mr. Osborne submitted the annual report, which was as follows:—

“Of the various philanthropic enterprises which characterise the borough of Hastings and St. Leonards, the Committee of the Homeopathic Dispensary claim for their institution an important place, on the ground of the extremely beneficent work and the successful treatment which is accomplished. The committee congratulate the subscribers on the fact that the institution is becoming increasingly useful and popular, it being no unusual thing to have an attendance of from 50 to 60 patients requiring attention in one afternoon, nearly 1,500 patients have been registered during the past year. The sphere of operation is enlarging, patients presenting themselves not only from all parts of the borough, but from the adjacent villages, as also from Bexhill, Rye, Winchelsea, and occasionally from Eastbourne and Lewes. Subjoined are the statistics for the year: Medical and surgical cases, 602; Ophthalmic, 752; dental, 58; patients visited at their own homes, 75; total number of patients, 1,487; total attendances, 5,921.”

Mr. Griffin submitted the financial statement, which showed at the commencement of the year there was a balance in hand of £24 16s. 4d. The total receipts amounted to £320 13s. 4d., and included £113 9s. for subscriptions and donations. The expenses amounted to £285 7s. 11d., leaving a balance in hand of £35 5s. 5d. The income on the preceding year was £250, so they would notice that last year there was a considerable increase in the receipts, which he thought was highly satisfactory. This year, fortunately, they had been able to pay the doctors half the fees received from the patients, which they were entitled to, and which they did not receive in 1891.

The Mayor, in moving the adoption of the report and the balance sheet, said he had great pleasure in doing so, and called attention to the increased number of cases which had been treated during the year. They had increased 10 per cent.; ophthalmic cases had increased 36 per cent. (Cheers). Although, as he had stated, there had been an increase of 10 per cent., the number of attendances had been fewer. It might be difficult to account for it, but he thought he might fairly state that the diagnoses of the cases had been more correct, and they had achieved more successes this year than previously. He heard that many came from a distance,

and one patient came all the way from Whitstable, in Kent, which showed that he had every confidence in homeopathic treatment and doctors. The finances, he was pleased to see, were in a good condition, and the money paid by the patients was in excess of the previous year. He also noticed that there had been an increase in the number of dental cases to the extent of 45 per cent., showing that satisfaction was given by Mr. Heaphy.

The report was adopted. The following were placed upon the Committee: Mr. J. Tolley, Dr. Lough, Councillor Burrell, Captain Beckett, Mr. C. Pemberton Carter, J.P., Dr. Croucher, J.P., the Rev. G. A. Foyster, Mr. G. F. Griffin, Rev. C. R. Howell, Mr. H. A. Jepson, Mr. J. D. Murray, Mr. G. Osborn, J.P., Dr. Shaw, Mr. Knox Shaw, Mr. F. Shaw, and Mr. A. Steele.

The Mayor then read a very interesting sketch of Hahnemann's career, and the rise of the homeopathic art. He concluded by quoting from an article written by Sir J. Forbes, a learned and illustrious old-school medical author, in the 21st volume of the *Medical Review* :—

"Hahnemann was undoubtedly a man of genius and a scholar, a man of indefatigable industry, of undaunted energy. In the history of medicine his name will appear in the same list with those of the greatest systematists and theorists, surpassed by few in the originality and ingenuity of his views; superior to most in having substantiated and carried out his doctrines into actual and most extensive practice."

### ANTWERP HOMEOPATHIC DISPENSARY.

We have received the First Annual Report of the Homeopathic Dispensary,\* established by the municipality of Antwerp in the teeth of most desperate allopathic opposition. Dr. Lambrichts tells in simple language the exciting story of the origin of the dispensary.

The following are the figures of the year's work :—

Consultations at the Dispensary ... ..	2,318
Visits at home ... ..	609
Deaths ... ..	17
Sent into the Hospital ... ..	26
Vaccinations... ..	81

Dr. Lambrichts makes out a strong case in favour of the establishment of a homeopathic hospital under municipal management, in order that the patients treated at the dispensary who require hospital care need not have to change the system of their treatment. The suffering that is caused to patients by this change is well illustrated by one of the cases. A

\* *Notice sur le Dispensaire Homœopathique du Bureau de Bienfaisance d'Anvers*, par le Dr. Lambrichts, fils. Ann 1892. Anvers: Imprimerie L. de la Montagne, Rue de la Vigne, 10.

poor woman in the last stage of phthisis, having exhausted all her resources, Dr. Lambrights gave her an order for admission to hospital. But she had not been there long before she came out again to be under homeopathic treatment. A second time she tried the hospital, but with no better success—she preferred to die at home under homeopathy to having all the nursing and attention to be had in hospital under allopathy.

#### LEAF HOMEOPATHIC COTTAGE HOSPITAL.

We have received the Fifth Annual Report of this Institution, and are glad to find the Committee can give a good account of its usefulness and prosperity. We extract the following :—

The total number of cases treated has been 110, of which 89 occupied beds in the Hospital, and 21 were out-patients; against 116 cases in 1891, of which 93 were in- and 23 out-patients, the latter in both cases being cured without requiring to be taken into the wards.

The Committee have again to thank Dr. Croucher for preparing a summary of the cases treated in the Hospital during 1892, which is attached to this Report. The result being as follows :—

65 Patients cured.

9    "    relieved.

3    "    unimproved.

2    "    have died.

2    "    were discharged or removed.

8    "    remained in the wards on December 31st, 1892.

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89

Nine operations were performed with success during the year.

The average number of patients in the wards at the end of each week has been 5.93, against 5.8 in 1891. Three patients have occupied beds from four to seven months, whilst 13 have done so during 6 weeks to 2 months, all being free of any expense to the patients.

DR. WALTHER is Hon. Consulting Physician, and DR. A. H. CROUCHER, Hon. Physician and Surgeon.

#### SUSSEX COUNTY HOMEOPATHIC DISPENSARY.

THE *Brighton Examiner*, of February 3, gives the following account of this institution :—

The annual meeting of the governors and subscribers of this institution was held at the Dispensary in Richmond Place, Brighton, on Wednesday afternoon, February 1, the chair being taken by Mr. W. A. Hounsom. The Committee of Management reported that during the past year there had been 8,080 consultations at the Dispensary, and 4,407 visits paid to patients at their own homes. Com-

pared with the previous year, this was a decrease of 21 in the Dispensing Department, and an increase of 498 in the Visiting Department. The present mortgage debt on the building amounted to £950, and as the Earl of Dysart had promised to give the last £100, the Committee expressed the hope that the friends of the institution would as soon as possible place them in a position to claim this offer. In moving the adoption of the report, the chairman acknowledged the support given to the institution in the past, and referred with satisfaction to the fact that, through a munificent bequest of £200 given through Dr. Hilbers, they were enabled to close the year with a balance to the good in the general fund of £5 12s. 7d., and to add £67 odd to the building fund. Mr. W. B. Chamberlin seconded, and the motion was carried. Votes of thanks were then passed to the hon. medical staff and other officers; and the Committee of Management having been appointed for the ensuing year, the proceedings closed with the customary vote of thanks to the chairman.

## DEVON AND CORNWALL HOMEOPATHIC HOSPITAL.

### NEW PREMISES.

THE Mayor of Plymouth (Mr. W. Law) presided, Friday, February 3, at the Barristers' Room, Western Law Courts, over the annual meeting of subscribers to the Devon and Cornwall Homeopathic Hospital and Dispensary. Among those present were the Rev. Professor C. Chapman (president of the institution), the Revs. E. W. Bickley, T. S. Macey, and H. F. Johnson, Lieutenant-Colonel Armstrong, Dr. Cash Reed, and Dr. Vawdrey:—

The Rev. W. J. Cuthbertson, hon. secretary, read the annual report, which showed that the institution was progressing well. There had been two or three contributions of an exceptional character, and the Hospital Saturday collections showed a cheering advance. The premises occupied by the institution had been inadequate for some time, and the Committee now reported that their efforts to secure better accommodation had met with success. They had decided to purchase No. 15, Lockyer Street, and the negotiations had been carried to a successful issue by their solicitor, Mr. E. F. Anthony. Some structural alterations and improvements would be necessary, but they hoped in a few months to be occupying premises which would meet their requirements. It would involve them in an unusually large expenditure. One of their friends had promised £100 towards the furnishing. But this would leave them much still to do, and it was hoped that the friends of the institution would keep its claims in mind, and manifest further generosity in gifts to its funds. It had been proposed to establish an endowment fund, and an offer of £50 had been made on condition that nine other like sums were contributed.

Mr. Charles King (the hon. treasurer) read the financial statement, which showed the receipts to have been £400 15s. 4d., and the expenses £401 17s. 7d. They had interest of £27 16s. 6d. from a deposit in the bank, and there was a balance in favour of the institution of £20 17s. 1d.

Dr. Vawdrey read the medical report, which compared favourably with that of any previous year. The popularity of the institution was due to the successful results of its application. The labouring classes were fully alive to the difference between homeopathy and ordinary medical treatment, and the demand for subscribers' tickets exceeded the supply. The useful work of the hospital could be greatly increased with more public support. The dispensary patients treated numbered 4,061. Of those 3,122 were cured or relieved; on 563 cases the results were not ascertained; 219 were not relieved; and 47 died. There were 268 cases of accident. There had been 10,218 attendances of out-patients, and 3,840 visits had been paid by the medical officer to patients at their own homes. The number of hospitals had greatly increased. The report recognised the services of the honorary medical staff, Dr. Cash Reed, Dr. Alexander, and Mr. Hambly.

Dr. Chapman moved—"That this meeting, while rejoicing in the success that has attended the efforts of the Committee to secure a more suitable building, desires in view of the inevitable outlay to urge upon the friends of the institution the importance of contributing liberally to meet the special costs involved, as well as the growing demands of the work." He did not know another institution in that part of the country doing a similar amount of benevolent work for so small a sum. The new house was a good one, and would suit their purpose well. Some alterations would have to be made, but they hoped to make theirs a model hospital. The expense would be about £2,000. He read a letter from Dr. Alexander, who regretted his inability to be present.

Dr. Cash Reed seconded the resolution, and urged the importance of building up an endowment fund. The motion was carried. Thanks to the Mayor were voted on the motion of Mr. Nicol, seconded by the Rev. T. S. Macey.—From the *Western Mercury*, Plymouth, February 3.

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### CROYDON HOMEOPATHIC DISPENSARY.

#### REPORT FOR 1892.

THE Dispensary was open as usual, four mornings in the week. The number of attendances during the year was 5,285 as compared with 4,202 of the previous year.

This shows a steady increase in the usefulness of the Dispensary.

Medical Officers—T. E. Purdom, M.D., C.M.; J. Delepine, M.B., C.M.

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### WIRRAL HOMEOPATHIC DISPENSARY.

THE annual meeting of the subscribers to the Wirral Homeopathic Dispensary was held on Tuesday, Feb. 7, in the Mayor's parlour at the Town Hall, Birkenhead. The council presented their report and accounts for the year, from which it appeared that the total number of patients who attended at the dispensary

during 1892 was 3,968, as against 2,909 in 1891, an increase of 1,059.

The council in order to make the work of the dispensary among the poor more complete and also to extend its sphere of usefulness had arranged for the visiting of patients at their homes. In this way, during the last half of the year, Drs. Jones and Green had made 222 visits, and nearly the whole of these were gratuitous, as the patients were too poor to pay anything. In some few cases they had paid nominal sums of 1s. or less to the funds of the dispensary. The council had not abandoned the hope of establishing a permanent cottage hospital, to which reference had been made in previous reports; but they feel that until the funds at their disposal are very much larger than at present they would not be justified in proceeding with this scheme. A welcome addition to the funds of the dispensary had been received during the year in the shape of a legacy of £200 under the will of the late Miss Burgess. The balance in the hand of the treasurer at the close of the year was £27 8s. 7d. The report and accounts were adopted, after which the council and officers for the present year were elected. Drs. T. Reginald Jones and C. Theodore Green were again appointed honorary physicians and surgeons; and Mr. T. Mansell honorary dental surgeon. Votes of thanks were accorded to them for their services during the past year. Similar votes of thanks having been accorded to the honorary treasurer, Mr. C. T. Gostenhofer, and the honorary secretary, Mr. A. W. Birkett, the proceedings terminated.—*Liverpool Daily Courier*, Feb. 9.

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## REVIEWS.

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### HOW I BECAME A HOMEOPATH.\*

In this deeply interesting pamphlet, Dr. Holcombe tells the story of the desperate struggle between the old prejudices of allopathy and the new light of homeopathy which took place in his own mind, and the final triumph of light over darkness. There is a perennial freshness about all these accounts of conversions to homeopathy from the old school, for the reason that their interest is a human one. They never grow out of date, any more than the love story in the novel or on the stage. They appeal to every one more or less, since the process (a being "born again") is one which every individual must pass through in the process of development in some department of life. Dr. Holcombe has done well to record his experience; and we welcome this re-issue of his pamphlet, which is yet capable of much missionary work in the spread of homeopathic knowledge.

\* *How I Became a Homeopath*. By William H. Holcombe, M.D., of New Orleans. Philadelphia: Boericke and Tafel. London: Homeopathic Publishing Company. 1892.

WIESBADEN.\*

"MATTIACUM" is the name by which Wiesbaden was known to the Romans, and *Fontes Mattiaci* are the Wiesbaden springs. In this pamphlet of sixteen pages Dr. Kranz gives a most interesting account of the history and properties of these healing waters, whither the Romans came to be healed of their wounds after their campaigns, and the ancient Germans before them. In the time of Cæsar, it seems, Mattiacum was known to the Roman ladies, among whom at that period red hair was fashionable, and who used "Mattiacan soap," made from the staglatites of the springs to dye their hair red.

The "Kochbrunnen," the principal of the Wiesbaden springs, has been analysed by Fresenius. It contains 8·7 of solid ingredients to the 1,000 parts, and of these 8·7 chloride of sodium makes 6·8, though there are nineteen others in much smaller proportions. Dr. Kranz shows from the provings of *Nat.-mur.* how closely the effects of *Kochbrunnen*, pathogenetic and curative, correspond with those of that drug, although they are not quite identical. The other ingredients in the springs have their effect in making up the entity of the waters, which is not a mere mixture, but a complex whole. Here is the conclusion of the matter:—

"After this short scrutinising *résumé* of the crucial test of the homeopathic law of specific elective affinity, we are warranted in prescribing Wiesbaden for all chronic anomalies of the digestion, as dyspepsia, catarrh, &c.; abnormal plethora, with or without piles; for gout and rheumatism, above all, with its legion train of complaints; for chronic ulcers, badly healed wounds, fistulae from gunshot wounds, fractures and scars. Liver complaints are also benefited so much, that Wiesbaden has from ancient times been called the hospital for invalids from the tropics: the *German Nizza*, the central refuge in winter time, which season sets in milder and four weeks later, while spring comes in four weeks sooner than in Berlin, Paris, or Vienna. Since the Roman Julius Cæsar, since Otto I., thousands—nay, millions—of gouty, rheumatic, and other patients have here found health and happiness again; and the great age of our late dear old Emperor, who, with the Imperial family and the adored Empress Victoria, took up their residences here every year, may be partly ascribed to Wiesbaden.

We can strongly recommend a perusal of Dr. Kranz's pamphlet to all who wish to know about Wiesbaden and its waters.

\* *De Fontibus Mattiacis. Wiesbaden and the Effects of its Mineral Waters in Gout, &c.* By Fr. M. Kranz, M.D., M.R.C.S. Eng. Second edition. Revised and expanded by the author. Leipzig: Dr. William Schwabe, Homeopathic Publishing House. 1893.

## OCCASIONAL PAPERS, I AND III.\*

THE greater part of No. 1 of the above has already been reviewed in our pages. The essay on *Asiatic Cholera* is a reprint from the HOMEOPATHIC WORLD. The *Cancer Case* is one mentioned in our report of the proceedings of the British Homeopathic Society. The patient was a woman aged 46, who had a tumour of the left breast, diagnosed to be cancer by several medical men, operation being advised. *Hydrastis* had failed to relieve, and Dr. Morriison, guided by the "bruised" character of the breast pains and the supposition that a blow had been its exciting cause, gave *Arnica* 1x, under which improvement immediately set in. *Digitiline* 1x, and *Lycopus Virginicus* 1x were subsequently given, and then *Arsen.* 3, and again *Arnica* 2x, and finally *Arnica* 200. In his concluding remarks Dr. Morriison says:

"Evidence is steadily increasing to show that some cases of absolute cancer are curable by medicines; and the fig treatment is an accessory sometimes very beneficial. And in those distressing cases where the disease is incurable, the relief obtained through properly selected remedies is very great. It is usually preferable to plod on steadily with medicines, rather than to submit to the tortures and uncertainties of the surgeon's knife."

*Gibraltar and Morocco* is a very seasonable paper now the Morocco question has come so prominently before the political world. Dr. Morriison has a very pleasing style, and his description of Tangiers is one that no reader is likely to forget. A too great readiness to indulge in *facetie* is the only fault we have to find with the narration of Dr. Morriison's valuable and interesting "Recollections."

## HYGIENE OF THE EAR.†

THIS little brochure well deserves the popularity it has attained in the country of its origin, and Dr. Erskine has done a good work in introducing it to the English public in the translation before us. The four chapters into which it is divided deal respectively with—(1) The Hygiene of the Ear in Infancy; (2) The Hygiene of the Ear in Childhood; (3) The Hygiene of the Ear in Adult Life; and (4) General Observations.

\* *Occasional Papers*. No. 1. (Second Issue), containing: *Inflammation of the Lungs*. Some notes on *Drosera* (for Hemorrhage). A *Cancer Case* (with Remarks), and *Asiatic Cholera* (an Essay).

No. 3. *Recollections of Gibraltar and Morocco*. By Dr. Morriison. London: E. Gould & Son, 59, Moorgate Street, E.C.

† *The Hygiene of the Ear*. By Dr. Vincenzo Cozzolino. Translated from the 5th Italian Edition by James Erskine, M.A., M.B. Glasgow. London: Baillière, Tindall, & Cox, King William Street, Strand, W.C. 1892.



The author strongly deprecates the practice of punishing children by "boxing their ears," and also such tricks as kissing in the ear, both of these being fruitful sources of deafness. He is not an advocate for the use of cotton-wool as an ear plug, but he makes an exception in the case of workmen exposed to loud sounds, as blasting in mines and reports from artillery.

The following passage will be interesting to homeopaths. Allopathy, by its heavy dosing, has given us many valuable observations on drug effects, which we are able to turn to the benefit of our patients. If the learned author of this treatise had been instructed in homeopathy he would know how to use quinine and the salicylates without running the risk of making his patients permanently deaf, and without troubling himself to find "substitutes" for them. Homeopaths know them as among the very best of their remedies for patients suffering from tinnitus and deafness.

Certain drugs exercise an injurious action on the internal ear, namely, quinine and its preparations, and salicylic acid and the salicylates. These remedies are often indispensable, and substitutes being unsatisfactory, are fraught with positive harm to the organ of hearing. If substitutes are not permissible, the dose should not be excessive, and it should not be repeated at short intervals, except when absolutely necessary. They should not be continued after symptoms of functional disorders of the auditory nerve set in, because these drugs, salicylic acid more than quinine, give rise to hyperemia in the labyrinth and trophic disturbances in the lamina basilaris, which may become persistent, and at length produce alteration of structure, followed by subjective noises and deafness. The author has often observed the recurrence of symptoms of tinnitus and defective hearing in patients under his care, in whom he has suspected previous treatment with quinine, and as a rule his suspicions have been verified. Of all the preparations of quinine, the salicylate is the most injurious to the structures in the internal ear. This specific action of quinine and salicylic acid on the ear explains the beneficial effect of these drugs in aural lesions associated with motor symptoms, namely, in vertigo, agoraphobia and Menière's disease, as advised by Charcot, who holds that quinine anesthetizes the sensory centre. In such cases the salicylate of soda effects a still more decided influence, and often acts in cases in which quinine fails.

Chenopodium (goosefoot), which is used as a vermifuge, especially in the United States of America, produces deafness during its administration, and even for a long time afterwards. (Alfred North, in *Journal of Otology*, 1880.)

Dr. Cozzolino's remark that the specific action of quinine on the ear "explains" its curative action in vertigo, Menière's disease, etc., is rather curious; for in spite of Charcot's recommendation of this use of the drug it is only in the homeopathic law that the "explanation" is to be found. Quinine and salicylic acid cause all the symptoms of Menière's disease and therefore they cure it when given to patients suffering from it.

## NOTICES.

## WORLD'S COLUMBIAN EXPOSITION.

## HYGIENE AND SANITATION.

IN the Department of Liberal Arts, F. W. Brewer, Superintendent of Bureau of Hygiene and Sanitation, has issued a circular (No. 9), of which the following is the introduction:—

“The Bureau of Hygiene and Sanitation of the World's Columbian Exposition has been organised to prepare a collective exhibit illustrative of the present condition of Sanitary Science. A detailed list of the subjects assigned to it will be found hereafter.

“Starting from the standpoint that ‘the common health is the common wealth,’ and that hitherto Sanitation and Sanitary Science have not received that amount of general public support which their importance demands, the Bureau will seek to set before the visitors to the Exposition such a representation of Sanitary Work and Sanitary Aids as will help to lift the general mind to a higher plain in its estimate of the work of sanitation. Not even the most exaggerative optimist would assert that the sanitary arrangements of our chief and best-cared-for cities are perfect, while it is well known that those of smaller towns and villages are of the most reprehensible type. On the other hand the pessimist cannot deny that the last two decades have seen very great and very marked improvements in the theory of Hygiene as a science and in its practice as an art; the ‘vantage ground’ thus gained it is to be hoped will be but a new base from which a more general and complete advance all along the line may be made. That eminent sanitary pioneer, Edwin Chadwick, dared to predict that the realisation of municipal and domestic sanitary reforms would eventually result in the establishment of a death-rate of five to seven per thousand in Hygeian districts; thus every improvement of sanitary measures will be an aid to the fulfilment of Chadwick's vision. The often quoted but never to be forgotten results of sanitation in the city of Munich is an apt illustration of the benefits derivable. When that city was devoid of sewerage and pure water supply the death-rate from typhoid fever—pre-eminently a disease revelling in filth—was 24.20 per ten thousand. The illustrious scientist, Pettenkofer, was consulted, and recommended the establishment of a system of sewerage and the introduction of a water supply from a new source. Upon the inauguration of the new systems the death-rate was reduced to 13.30 per ten thousand; partial progress further reduced it to 9.26, and the completion of the cloacinae caused the rate finally to fall to 1.75 per ten thousand, at which it has approximately remained.

“While much in front of most other countries, the United States, with a death-rate to-day of 18 per thousand, has an arduous advance to make, but it is confidently anticipated that among the many brilliant achievements of the World's Columbian Exposition that of advancing the work of Sanitary Reforms will not be the least.

“The United States has been the pioneer and is still the leader in so many departments of the world's progress that it can scarcely be

too enthusiastic to hope that she may rapidly forge to the front and assert her claim to be the leader in sanitation. Nowhere on the world's face are the enormous piles of masonry so numerous as they are in America, nowhere on the world's face ought the care of public life and health to be so great.

"The aim of the Bureau of Hygiene and Sanitation will be to show as adequately as possible the position in which the theory and practice of Hygiene stand at the present day, and it is hoped that the Universities and Colleges, the Boards of Health, State and Municipal, the Societies having Hygiene and Sanitation as their keynotes, the scientists, the physicians, the manufacturers and the public generally will cordially co-operate in the endeavour to make the exhibition worthy of the science and of our country.

"Such varied sources will naturally produce varied results. Varied results shown in diverse ways will serve to heighten the general interest in the one theme. The theme has but one end in view, the improvement of the 'common health.'"

The following are the rules relating to applications for space:—

"It will be necessary for each exhibitor to make formal application for space to the Director-General, and it is requested that these applications be made as early as possible, in order that the Department of Liberal Arts may be able to prepare an estimate of the amount of room that will be required. On addressing the Department of Liberal Arts at Chicago, a blank form of application will be sent to exhibitors without delay.

"In all cases where foreign countries have appointed Commissioners for the Columbian Exposition, applications for space for exhibits from those countries must be made through such Commissioners.

"The Superintendent of the Bureau of Hygiene and Sanitation invites from experts in any of the branches of the science any suggestions or recommendations that will aid in making the exhibit of the divisions complete and serviceable.

"F. W. BREWER,

*Superintendent Bureau of Hygiene and Sanitation.*

"Approved: SELIM H. PEABODY,

*Chief, Department Liberal Arts.*

"Approved: GEORGE R. DAVIS,

*Director-General."*

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## LONDON HOMEOPATHIC HOSPITAL.

### POST GRADUATE COURSE.

#### CALENDAR FOR MARCH.

Friday, March 10, 8 p.m. Lecture on "The Therapeutics of the Serpent Poisons," by Dr. John H. Clarke.

Friday, March 24, 8 p.m. Lecture on "The More Important Aspects of Children's Diseases," by Dr. Roberson Day.

## GENERAL CORRESPONDENCE.

## THE INDIAN LEPROSY COMMISSION.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—Will any of your readers say what has become of the Report of the Indian Leprosy Commission? Three medical gentlemen were selected three years ago by the College of Physicians, the College of Surgeons, and National Leprosy Fund Committee respectively as a Commission to go out to India and investigate the cause or causes of the increase of leprosy. One of the conditions laid down by the Leprosy Investigation Committee was that the report should be published within a year, and some of the money was subscribed on this understanding. According to the evidence of medical practitioners, as well as the returns from leper hospitals, this loathsome and mutilative malady has been disseminated in an unexampled manner during the past thirty years and is still increasing in many parts of the world. In some countries, as in Hawaii, South Africa, Venezuela, and other South American States, New Caledonia, &c., the increase is giving rise to the greatest anxiety. The public have waited patiently for the publication of this long-expected report of the Indian Leprosy Commission. Is it true that the delay is due to fundamental differences of opinion between the Commissioners and the Leprosy Committee? and if so, in what do these differences consist?

The subscribers are certainly entitled to more consideration at the hands of the General Leprosy Committee than they have yet received.

J. S. BROWN.

Feb. 13, 1893.

## VARIETIES.

MICRO-ORGANISMS IN MINERAL WATERS.—At the last meeting of the Berlin Pharmaceutical Society, Dr. Biedler read a paper on mineral waters, in the course of which he reported on the bacteriological examination of the more popular waters. By means of plate-cultures he obtained the following as the mean figures (representing 1 c.c. of the water), the samples being the ordinary bottles:—Hunyadi János, 6,615 and 4,460; Ems, 5,890 and 7,250; Carlsbad (Mühlbrunn), 27,216 and 3,890; Vichy (Grand Grille), 13,400 and 14,300; and Friedrichshall, 5,795 and 5,600. In regard to a sample of Vichy (Dubölsbrunn), he found that in the natural state 385 was the number of micro-organisms, and twenty-four hours later the number had increased to 44,000. In a year-old water there were 16,000 organisms, and in a

ten-year-old one 220 micro-organisms per c.c. These results are perhaps not surprising, but they are notable.—*The Chemist and Druggist*.

**REMARKABLE TRANSPOSITION OF ORGANS.**—Some days ago there died in Paris, under what appeared to be suspicious circumstances, a gentleman of independent means aged eighty-five. A necropsy was deemed necessary, and Dr. Descouts, the well-known Morgue expert, was entrusted with the task. No abnormal cause of death was discovered; but Molière's famous *Médecin malgré lui*, could he have been present on the occasion, would have been gratified to find his peculiar topographical notions confirmed in a striking manner. The heart, liver, and spleen were completely transposed, the first-named organ being on the right side of the chest, and so on. Commenting on this strange abnormality, Dr. Descouts remarks on its rarity. He further says that he would like to know how many errors of diagnosis have been committed by the different practitioners who were consulted by the defunct during his long life. Asked if it would not be as well to interrogate the deceased's ordinary medical attendant, Dr. Descouts humorously replied that it was most unlikely that he ever had one, and that that was probably the reason he had lived so long! Dr. Descouts has evidently studied Molière to some purpose.—*Lancet*, January 14 (Paris Letter).

**NATURE'S CURE OF PHTHISIS.**—Dr. Henry P. Loomis states (*Med. Rec.*) that he has found quite a number of cases of recovery from phthisis. His summary is as follows:

1. Out of 763 persons dying of a non-tubercular disease seventy-one, or over 9 per cent., at some time in their life had phthisis, from which they had recovered.
2. The new fibrous tissue by which the advance of the disease was apparently checked and the cure effected, developed principally by round-cell infiltration of the interlobular connective tissue, which in some instances had increased to an enormous extent. Some of the new fibrous tissue was formed later by round-cell infiltration in the alveolar walls and around the blood-vessels and bronchi. Pleuritic fibrosis appears to be secondary to tubercular processes in the lung substance. The interlobular connective tissue is the primary and principal source of the fibrosis.
3. Tubercle bacilli were present in the healed areas in three out of twelve of the lungs examined. These healed areas did not differ in their gross or microscopical appearances from those in which they were not found.
4. Thirty-six per cent. of all cases where the lungs were free from disease showed localised or general adhesions of the two surfaces of the pleura.—*New York Medical Times*.

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## LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

**HOURS OF ATTENDANCE:**—Medical, Daily, 2.30; Surgical, Mondays and Thursdays, 2.30; Diseases of Women, Tuesdays and Fridays, 2.30; Diseases of Skin, Thursdays, 2.30; Diseases of the Eye, Thursdays, 2.30; Diseases of the Ear, Saturdays, 2.30; Diseases of the Throat, Mondays, 2.30; Operations, Mondays, 2.

## MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Bastian** (H. C.). Various Forms of Hysterical or Functional Paralysis. 8vo, pp. 210. (H. K. Lewis. 7s. 6d.)
- Gowers** (W. R.). Syphilis and the Nervous System. Being a Revised Reprint of the Lettsomian Lectures for 1890, Delivered before the Medical Society of London. Cr. 8vo, pp. 140. (Churchill. 4s.)
- Griffiths** (A. B.). A Manual of Bacteriology. (Heinemann's Scientific Handbooks.) Cr. 8vo, pp. 362. (Heinemann. 7s. 6d.)
- Quain's Elements of Anatomy.** Edited by Edward A. Schäfer and George Dancer Thane. 3 vols. Vol 3, Part 1: The Spinal Cord and Brain, by Professor Schäfer. 10th ed. Roy. 8vo, pp. 214. (Longmans. 12s. 6d.)
- Sandlands** (J. P.). The New Art of Healing; or, The Relation between the Principles of Voice Production and Health. 12mo, pp. 188. (Marshall Bros. 2s. 6d.)
- Smith** (P. H. Pye). An Introduction to the Study of Diseases of the Skin. Cr. 8vo, pp. 364. (Churchill. 7s. 6d.)
- Tebb** (W.). The Recrudescence of Leprosy and its Causation: A Popular Treatise. With an Appendix. Cr. 8vo, pp. 408. (Swan Sonnenschein. 7s. 6d.)
- Wills** (G. S. V.). A Manual of Elementary Materia Medica. Cr. 8vo, pp. 280. (Simpkin. 6s.)
- Year-book of Treatment for 1898.** Cr. 8vo. (Cassell. 7s. 6d.)

## TO CONTRIBUTORS AND CORRESPONDENTS.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 80, *Clarges Street, W.*

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

LITERARY matter and correspondences should be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct the same and return to the *Editor* as early as possible.

### CORRESPONDENTS.

Communications received from Dr. Cooper, London; Dr. Gallavardin, Lyons; Dr. Croucher, St. Leonards; Dr. Berridge, London; Dr. Purdom, Croydon; Hon. Sec. North of England Children's Sanatorium, Southport; Lieut. Gerald R. Maltby; Mr. J. S. Brown, London; Dr. Kranz, Wiesbaden.

### BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Chemist and Druggist.—Allg. Hom. Zeit.—Monatsblätter f. h.—Monthly Homeopathic Review.—Medical Advance.—Chironian.—Southern Journal of Homeopathy.—Revue Hom. Belge.—Homeopatisch Maandblad.—Monthly Magazine of Pharmacy.—Chemistry and Medicine.—Medical Era.—North American Journal of Homeopathy.—Homeopathic Physician.—Medical Visitor.—L'Art Médical.—La Revue du Foyer.—Vaccination Inquirer.—Minneapolis Hom. Magazine.—Hom. Journal of Obstetrics.—Homeopathic News.—New York Medical Times.—American Homeopathist.—Hastings and St. Leonards Observer.—Clinique.—Hahnemannian Monthly.—Pacific Coast Journal of Homeopathy.—New England Medical Gazette.—A Plea for Homeopathy.—Dr. Barrow.—Croydon Homeopathic Dispensary Report.

THE  
HOMEOPATHIC WORLD.

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APRIL 1, 1893.

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THE "SCIENCE" OF MEDICINE.

ON Wednesday, March 1, the ex-premier paid a visit to Oxford, in his capacity of Chancellor of the University, to preside at a meeting in aid of the building fund of the Radcliffe Infirmary. The principal aim of the promoters of the fund is to enlarge the scope of this hospital so as to make it of sufficient size and importance to afford clinical teaching for the students of the Medical School of Oxford. At present they have to get their learning at Oxford and their experience elsewhere. Called thus as he was (to use his own phrase) to preach a sort of charity sermon, Lord SALISBURY was bound to say something kind and complimentary of the profession on whose behalf he claimed the assistance of the charitable, and we must not therefore be too critical of his terms. But some of the pretty things he said must, we think, have considerably staggered the experienced doctors among his audience, however much they may have pleased the undergraduates and the non-medicals. When, for instance, he gave utterance to this amazing description of medical science as being "the most sober, the most absolute, the most positive of all sciences," the "inner man" of the medical professors in attendance must have smiled an incredulous smile, however professorially grave the outward face may have remained. Flattery has been described as praising people for the very qualities they are most lacking in. We cannot suppose that Lord SALISBURY was consciously flattering the medical profession;

but undoubtedly his description of medical science accurately fills the definition. It reminds us of the description of a crab given to CUVIER, by certain amateurs, as "a little red fish that runs backward." "Yes," said CUVIER, "your description is very good. It isn't little and it isn't red, and it isn't a fish, and it doesn't run backward. But apart from this your description is excellent." So we may say of Lord SALISBURY's description of the science of medicine. It isn't sober (anything but!), and it isn't absolute (there is nothing absolute in it—everything is relative and conditional), and it isn't positive. But apart from these trifling exceptions the description will do very well.

The astonishing part of the matter is that the medical journals, which are constantly publishing statements to the effect that there is no such thing as a science of medicine, swallowed the honeyed words, and pronounced them very good. Take, for example, the *British Medical Journal*. On February 11 it published a very candid leading article headed "The Teachings of Failure," and dealing with an address on the same subject delivered by Dr. MARKHAM SKERRITT at the last anniversary of the British Medical School. Here are a few extracts:—

"The speaker impressed upon his medical brethren that at the present time not only are our studies still full of obscurity and complexity, our doctrines transitory and fallacious, and our craft clumsy and adventurous, but also that we—who study, teach, and practise—make danger and confusion worse by our defective observations and our illogical habits of mind."

On this the *British Medical Journal* comments as follows:

"His strictures are indeed true enough. With our lights, dim as they are, we are no better than we should be; and we may well lay this remonstrance to heart, for they are spoken faithfully, and with an earnestness far removed from mock humility or bravado."

Further:

"Dr. SKERRITT says we are so desperately cocksure: we praise the last new specific as confidently as if tuberculin and eucalyptus had



never betrayed us, and as if the influenza has not defied successfully an endless battery of infallible remedies, including Professor OSCAR LIEBREICH'S apple-water. Where now are the scores—the hundreds—of vaunted specifics of the last ten years? *Où sont les nièges d'autan?* Yet we are still credulous, still 'hasty to generalise,' still forgetful 'that our premisses were wrong,' still 'faulty in our methods.'

Then comes the climax, in which the *British Medical Journal* explains how all this comes about :

"First, it seems to us, we must not expect, or even require medical men to be, in the stricter sense, 'scientific men'; *the day is not near when as a body they will be.*"

Here is a fine exemplification of the "sobriety," "aboluteness," and "positiveness" of the science of medicine! And yet three weeks later this same journal, overcome by the blandishments of the noble earl, gaily publishes the sentences we have quoted in our editorial note, endorsing it all without a murmur, as if Dr. SKERRITT had never opened his mouth!

The only science of healing (and that is what "science of medicine" means if it means anything) is the science of homeopathy, whose laws HAHNEMANN declared. The miserable floundering after some law in therapeutics exemplified in the old school is the natural retribution of their refusal to acknowledge the medical light that has come into the world. Some months ago Dr. LAUDER BRUNTON gave an address to the members of the Royal Medical Society of Edinburgh, entitled "Correlation of Structure, Action, and Thought," in which he dealt mainly with the enthralling topic of the nerve centres that were called into action in the brain of our general mother EVE when she carried out the behests of the tempter. Having settled all this, Dr. BRUNTON found time to say something about Pharmacology, and to suggest that the teaching of *materia medica* could very well be dispensed with. Commenting on this, the *Medical Press* of January 18th last had some very sensible remarks, which Lord SALISBURY

might study with advantage before he again undertakes to deliver a medical charity sermon. Here is what it says :—

“ If the practitioner is to be free from the time-honoured reproach of pouring drugs of which he knows nothing into bodies of which he knows less, it can only be by due attention to the physiological action and therapeutical effects of his remedies. Therapeutics, meaning thereby the cure of disease, is the aim and the object of medicine, and the patient is more concerned in obtaining relief than he is in the condition of the ultimate elements of his suffering organism. This may seem a frivolous way of stating the case, but it is unfortunately a matter of common observation that, though the more recondite branches of knowledge may be powerful aids to differential diagnosis, they produce no very appreciable effect on the therapeutical measures. Treatment based on the administration of drugs is largely symptomatic and empirical, and there are few instances in which strictly physiological data afford much assistance in determining the course to pursue. Moreover, if the whole of *materia medica* were swept away, the subject of pharmacology is now so comprehensive and so replete with facts that it has become difficult for any one man to remember the action even of the more important drugs, and, as Dr. BRUNTON pointed out, the only way of rendering it possible is to have them grouped together, so that one description will do for many drugs of which the action is essentially the same in the main. The hope is held out of further developments in the direction of such a classification. . . . This rough-and-ready method of grouping is far from satisfying the requirements of students and practitioners, because after all it does not furnish what one may call a working hypothesis. In fact, the more one considers the classification the more does one become aware of its extreme intricacy and inconsistency. . . . In the mouth of Dr. LAUDER BRUNTON the subject appears to lose much of its asperity, but as soon as he leaves us to ourselves again the old difficulties resurge. As explained by him, one seems to be just on the point of knowing all about it, only to be conscious of the hallucination on the first attempt to apply the classifications in everyday practice. The time is not yet near when students could reasonably be expected to designate the physiological properties of a given formula, nor to describe how and by what means a narcotic can be converted into a convulsant poison. We have it on the authority of Dr. BRUNTON himself that at present the answer could not be found in any text-book, nor given by any living authority. *Tant pis*, for this would perhaps prove the beginning of a system of rational therapeutics, though we have grave doubts whether, if ever our conception of such a system is realised, the treatment of disease by

medicinal agents would not play but a secondary, and even an inconsiderable, part."

Poor, stupid, blind allopathy !

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## NEWS AND NOTES.

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### THE BEGINNING OF THE END OF THE OLD HOSPITAL BUILDING.

THE *Daily News* of March 22nd thus announces the commencement of the work of demolition :—

"The Governors of the Homeopathic Hospital have just sold the materials of Nos. 52-4-6 on the north side of Great Ormond Street, in preparation for the rebuilding of their premises next adjoining. The hospital was opened on May 12, 1859, in what were then Nos. 50-2, on removal from Golden Square. The governors had acquired the freehold of Nos. 50-2 in 1857, very shortly after the visit to his old home which Lord Macaulay relates in his diary for August of that year. "I sent the carriage home, and walked to the museum. Passing through Great Ormond Street, saw a bill upon No. 50. I knocked, was let in, and went over the house with a strange mixture of feelings. It is more than twenty-six years since I was in it. The dining-room and the adjoining room, in which I once slept, are scarcely changed. . . . My bedroom just what it was. My mother's bedroom—I had never been in it since her death. I went away sad." Zachariah Macaulay removed hither from Cadogan Place, Sloane Square, and here Lord Macaulay wrote some of his early essays, including those upon Milton, Machiavelli, and Hallam, Bunyan, Byron, and Croker's 'Boswell.' The house he describes is at the corner of Powis Place and Great Ormond Street, and, having shared in some exterior alterations that were made in the block of three, will shortly be demolished."

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### HOMEOPATHY IN CLEVELAND.

"It affords me pleasure to present the following authentic reports of the results of our practice in two of the public institutions of Cleveland, and the ratio of deaths of the allopathic and homeopathic schools of medicine for the year 1881 :—

"The Cleveland Orphan Asylum, which was for two years under the medical direction of Dr. F. H. Barr, had three epidemics : scarlet

fever, measles, and diphtheria. Though malignant in character, all recovered.

"For the eleven years I was surgeon-in-charge of the Cleveland Workhouse, 11,789 patients were treated, 25,063 prescriptions dispensed. There were 35 deaths. A comparison with the best mortality reports of other workhouses gives this institution a ratio of mortality 36 per cent. better than the Detroit Workhouse, and 57 per cent. better than the Allegheny, and 450 per cent. better than the Ohio Penitentiary.

"For the year 1881 the ratio of deaths in Cleveland to each allopathic doctor is 16.54, and for each homeopathic doctor 7.48—a percentage of 121.12 better than the allopathic school.

"Of all reported cities, the homeopathic doctors of Cleveland have the smallest ratio of deaths and the largest percentage over the allopaths.

"With kindest regards, believe me,

"Yours very truly,

"Cleveland, Ohio,

"H. F. BIGGAR.

"February, 1890."

#### HOMEOPATHY IN ROCHESTER, N.Y.

DR. E. V. ROSS writes from 279, Jefferson Avenue, Rochester, N.Y. :—

"I send you one of our daily papers, to give you an idea how matters stand here in this fine city. You will observe that homeopathy here is no 'weakling,' but has developed into a strong, vigorous 'body,' while the 'regulars' are past their prime and in their 'dotage.' Out of six city physicians there are two (Hahnemannian) homeopaths, and two more will no doubt receive an appointment the first of April. Dr. Biegler, a Hahnemannian, is President of the Board of Health, and Dr. Graham, another Hahnemannian, is Coroner with a layman holding the same office."

IN the paper Dr. Ross has kindly sent us, the *Rochester Times*, March 6th, a graphic picture is given of the marshalling of the forces of Homeopathy and Allopathy against each other :—

"Rochester has become so evenly divided that upon its voters, directly or indirectly, is to devolve the necessity before long of choosing between the two schools as to which shall guard its municipal health, and as to what method may obtain in the conduct of guarding the citizens as a whole against disease. . . . The fight in Rochester is between the Allopaths, of whom the Pathological Society (sixty-three ordinary and eight honorary members) is exclusively made up, and the Hahnemannian Society (fifty-six members), made up of the exclusive and radical Homeopaths."

*ODIUM MEDICO-LEGALE.*

A CORRESPONDENT sends us the following curiosity :—

“You may feel amused to hear that at a meeting of creditors held in Upper Thames Street a few weeks ago, the solicitor representing the principal creditor said : ‘When I tell you that the debtor is a Homeopath, you may know that he is a man with cranks.’ What a number of London business men thought of such a remark I cannot say; but evidently the *odium medicum* still exists amongst certain members of the legal profession.”

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*THE MEDICAL ADVANCE.*

WITH the January number the *Medical Advance* has strengthened its staff by the addition of Dr. H. W. Pierson as managing editor. The journal is full as ever, if not fuller, of valuable matter, including two of Dr. Kent's masterly materia medica sketches—*Borax* and *Argent.-nit.* The most novel thing in the number is the paging. It is paged separately under four different headings—“Editorial,” “Materia Medica and Therapeutics,” “Theory and Practice of Medicine,” and “Miscellany.” Time will show how this will work out. To our conservative ideas it does not suggest itself as an improvement. The next novelty is by way of stimulating the study of materia medica by giving a number of clinical cases and withholding the name of the remedies until the following month. In the February number is a very important discussion, opened by Dr. Kent, on paragraphs 161-164 of the *Organon*, and treating of prognosis from the effects of homeopathic remedies. We hope to say something about this later on.

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SWALLOWING CHOLERA BACILLUS.—A young doctor of the Vienna Hospital and three anonymous persons have made some experiments with the cholera bacillus. Our Correspondent says that Dr. Hasterlik and his friends began to take bacillus on Dec. 19. The first dose was half-a-drop of the preparation containing them, but that had no effect whatever. Then from a drop they increased the dose gradually until they had each taken one-and-a-half cubic centimetres. At this point two of them, who were pre-disposed to diarrhoea, had slight attacks of it, but on taking soda recovered the next day.—*Daily News*, Feb. 27, 1898.

## ORIGINAL COMMUNICATIONS.

A CASE OF CONSUMPTION CURED MAINLY BY  
*TUBERCULINUM H.*

BY JOHN H. CLARKE, M.D.

[From notes by Dr. Vincent Green, Junior Resident Medical Officer.]

THOMAS K., aged 40, a carman, rather dark, shortish, but of fairly strong build, was admitted to Hahnemann ward of the London Homeopathic Hospital on the 17th of October last, giving the following history. There was no consumption in his family. Three years before admission he had an attack of influenza, which left him with a slight cough. His occupation entailed much exposure, and after Christmas, 1891, he gradually became weaker and weaker, until at last he was hardly able to rise in the morning, and he had not strength enough to lift anything at all heavy. He went to Hastings, but returned worse: he felt the air too bleak. After this he attended the North London Hospital as out-patient for a fortnight; then he was taken in, and discharged at the end of six weeks (in accordance with a rule of that hospital), improved. Whilst he was in the hospital he had two attacks of hemoptysis, spitting almost half a pint of blood on one occasion and a few spoonfuls on the other.

About the end of August he again began to get worse, and steadily lost ground until the time of his admission. For over a year he had suffered from indigestion, a catching or shooting pain from the right mamme to the left shoulder, with a feeling of a lump at the root of the neck.

Physical examination showed that there was consolidation of upper part of right lung with formation of a cavity, with slight indication of the left apex also being affected. The heart and other organs were normal.

The cough was worse on rising in the morning and in the evening. Expectoration scanty, hanging about throat and difficult to get away. An examination showed it to contain tubercle bacilli. The cough caused pain in the right side. The irritation which caused the cough seemed to be in the chest. Movement or any exertion aggravated it. He could not lie on his right side. At times he felt as if he could hardly breathe. Was very weak. Had night perspirations. Appetite fair; bowels regular.

Under *Bry.* 1 the pain in the side improved; under *Nit.-ac.* 12, and afterwards *Ars. Iod.* 3x, there was some improvement. Later he became troubled with constipation, feeling of nausea and mental depression. *Nux.* 3 and *Sulph.* 30 did good in these respects. *Phos.* 6 had no particular effect.

On Nov. 9, as he was still complaining of the weight on the right side of the chest, the cough symptoms continuing, I gave him on his tongue three globules of *Tuberculinum H.* 100. Improvement was noted on the 14th. On the 16th the dose was repeated. He then reported himself as feeling better. He has gained  $1\frac{1}{2}$  lbs. in weight since Oct. 27th. He now complained of a lump at the chest coming on when he had eaten a little, much flatulence, passing downwards, so he was put on *Lyc.* 6, and continued on this for a week, during which time the flatulence and other symptoms of disordered digestion improved much. At the end of the week a sharp attack of diarrhea supervened, stools sudden, watery, light brown, with much wind. *Colocynth* 3 soon put this right.

On the 30th of November another dose of *Tuberc.* was given, and again on the 10th and 17th of December.

Up to the 17th of December there had been steady improvement. On that day the patient was feeling less well. More cough, tickling and wheezing on chest, tongue rather dirty, no appetite. On the 19th a rheumatic attack began to develop, with pains in ankles and wrist. There was fever and heavy night sweats, with night aggravation of the cough. The pain was chiefly in left ankle and across instep, and under left knee. There was also pain in right great toe (which he had had before). Under *Merc.-Sol.* 12 these symptoms passed away by December 30th; but the cough continued to be troublesome, occurring between 12 midnight and 3 a.m., first thing on waking. Sinking sensation on getting up. *Kali Carb.* 12, *Arsen.* 30, and *Bry.* 30 were given in succession without producing any observable affect, and on January 4th *Tuberc.* was repeated. After this he made rapid progress, but the cough still troubled him a good deal. There was a tickling behind the middle of the sternum. The cough came on in the afternoon. He was put on *Lachesis* 12, one drop every two hours, on the 12th of January, and by the 23rd the cough had left him completely, and did not return. He regained the flesh he had lost, and was quite free from all symptoms referable to the chest.

The condition of the right lung on February 2nd was as follows: Tympanitic note on percussion above and below right clavicle; tubular breathing. Expiration prolonged and harsh over the upper lobe anteriorly, and as far down as the sixth rib at the back. No moist sounds.

The patient left the hospital, looking and feeling quite well, on February 3rd. The consumptive process was completely arrested and the patient practically cured. Of course the lung tissue that had already been destroyed could not be restored, hence the physical signs of a cavity remained. But the cavity was a healed cavity, and not an ulcerating one.

Although other remedies were given, I am inclined to give the chief share of the credit of this cure to *Tuberculinum*, for the first marked change for the better took place whilst under its influence. I have never given this remedy in more frequent doses than one a week; and I have never found that it interfered with its action to give intercurrent doses of other remedies that might seem indicated by the symptoms.

P.S.—Since the above was written I have seen the patient again (March 22nd), and found him looking the picture of health. He has returned to his old employment and is able to run up and down stairs more briskly than many of his fellow-workmen.

30, Clarges Street, W.

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## HEREDITY MODIFIED BY EDUCATION.

By J. MURRAY MOORE, M.D., F.R.G.S.

THE numerous fathers and mothers who are readers of the HOMEOPATHIC WORLD may be interested in a few suggestions and reflections upon the extensive subject described by my title. Every child is born with certain hereditary tendencies, some good, some bad, and some, in a physiological but not a moral sense, "indifferent." Now, as the whole object of education *should be* to *educate* from the body and mind of every child all the latent talent, the latent powers and faculties that potentially exist there, to train them into perfectness and usefulness to himself and to his fellow-men, an effort, systematic and judiciously directed, should be made in each individual case to modify



and to suppress any moral or physical deformity, abnormality or superfluity that may appear, whether inherited or acquired, or being a part of the child's individual idiosyncrasy.

First let us take Pre-Natal influences, upon which subject I have written an essay "*On the Effect of Mental Impressions on Fetal Development*," not as yet published. I have shown conclusively that a powerful shock, given by some fright or repulsive object (for example, a beggar maimed in the hand) given to the mother-expectant, will probably mark the baby. Old wives' tales of this kind have a substratum of fact. Now we cannot keep our lady patients who are pregnant indoors all the time, that they may avoid unpleasant sights, but we can assist in clearing the streets of those unfortunate objects of charity who are deformed, by the aid of the police, and by getting them into Institutions specially designed for their benefit, of which our charitable country is full. Englishwomen who are *enceinte*, living in Catholic countries should avoid the neighbourhood of the churches, for their doors are the resort of the "blind, halt and lame," of the *crétins*, idiots, and rickety of the whole city.

But the moral condition of the parents is an important condition of health for the offspring. The child of love on both sides will be "a loving child;" but what is termed, euphemistically, "a love-child" is exactly the reverse. The terrible inheritance of alcoholism and of syphilis are too well known to need but a passing allusion. Of these two transmitted poisons, the former is the more rapidly destructive, but the more quickly eliminated from the family; while the latter is slowly but surely destructive, and persists through two or three generations. Therefore, the cardinal virtues of purity, temperance, and kindness must be exercised by both parents, if they are to have a son or daughter endowed with the same. The husband's one study should be to keep his wife happy and free from worry during her "term" and also during lactation; while she, trusting in a beneficent God, should so regulate her mind and body as to provide healthy *body-cells* (a profound and appropriate term of Weissman's) for her infant.

Now as there is some little value in prognosticating the *sex* of the expected baby, I will give Dr. R. Ross's test, which I have verified in a few instances in my own obstetrical practice. It is easier to ascertain than Dr. Rud-

dock's symptom—the greater or less rapidity of the fetal heart-pulsations.

Dr. Ross says: "If the mother describes the fetal movements [after quickening, of course] as felt chiefly and most distinctly on the *left* side, I confidently predict a male birth; if on the right, I as surely determine the sex to be female."

This is by the way. But, to resume what is more strictly our subject—"How can Education remove Evil Heredity, and develop Good Heredity?" I answer, by the close study of each individual nature from its birth by serious-minded religious and thoughtful parents, and by tutors or schoolmasters who will *train* instead of *cram*. Now take Moral Instinct and Animal Instinct, in a baby. Its first impulse is *Alimentation*: its first prehensile organ is the mouth, and secondly the hands. Gradually *Imitation* arises, and from this point, *the Moral Instinct can be educated*. The loving smile of the mother is imitated by the infant in a few days after birth—the time varying with the brightness of the child. The facial contortion is merely an *imitative act*, but, as the little one sees that its response gives pleasure to the mother, and is followed by a hug (whereby pleasing warmth is imparted), and caressing—though kissing is startling to a baby, and the atrocious habit of kissing on the open mouth ought to be sternly discouraged by all physicians—it smiles, *in time, as an expression of its own happiness*, and you will see it lying in its cradle smiling and crowing to any bright object or beam of light. How different the lot of the "child of shame," or of the child born in a workhouse or a prison! No beaming smiles from its mother's sad, tear-worn face! No bright objects to amuse it as it lies in a warm cosy cot! Can we wonder that, as it cannot learn the most rudimentary idea or feeling of happiness now, it will, if it survives, drift into sullen wretchedness and criminality? I have a theory that bottle-fed infants resemble their mothers less than those who are reared at the breast. But, I have not had the opportunity of a sufficiently long observation of the same individuals in a family to acquire *data* sufficient to prove this.

Next comes the training of the five senses, and here we perceive the incipient development of both Egotism and Altruism. You have, we will say, two children, call them Tom and Ada, aged respectively four and two years of age.

Tom is a bustling, noisy, wilful little fellow, but affectionate, generous, altruistic. Ada is mild, gentle, loving, quiet, but selfish and even crafty in her childish way. How to *educate* what is best in both? By encouraging them both to play *together* at such games as will not hurt the girl, and will give the boy an opportunity of showing gentleness. By making the girl share her presents, even the dolls, with her brother, discouraging her from "telling tales upon him," and encouraging her to romp freely with him, and become interested in his boyish toys—boats, soldiers, railroads, &c. By teaching Tom to give pleasure and enjoyment to Ada, and not to ask her for gifts. Many parents make the mistake of bringing up their boys in a girlish way during their nursery life, in consequence of which their lives are a burden to them during the first years of school; and a few parents bring up their girls in a tom-boy fashion which renders them little amenable to governesses in after life. Above all things, in early training, insist upon truthfulness, and make your punishments heavier when a fault or breakage is denied or concealed from you. And it is not unimportant to remind boys that "pocket-money" is a pure *gift* on your part, to be withheld at any time—for the average boy is thoughtless enough to regard it as a right after a year or two.

Now as to the subjects of School Education. No two children are alike as to mental abilities or even faculties, yet all are in modern schools drilled in the same subjects, in the same sequence, and the same amount of "learning" is expected from all in the same class or form. Memory of a mechanical nature is cultivated at the expense of thought and understanding. Schoolboys learn Euclid "by heart" without the *comprehension* of one single logical deduction or even axiom. History is a string of dry dates (not nearly as succulent as the driest sold in the shops!), without life in its personages or animation in its events. Geography, the most useful of all school studies, in a maritime country like ours, is either ignored or taught out of books twenty years behind the time—the stock having to be cleared off the bookseller's shelves. (Inquisitive parents ask, "Who divides the profits on the sales?")

Science is relegated to an hour a week, and as a rule no "marks" are given for it, so the boys despise the subject.

Well, after this diatribe, what do I suggest? We cannot all afford private tutors, and the discipline of a large day

school is good for either boy or girl. The true course of training is to train the *senses first, then the intellect, lastly specialise* the child's education to fit him out for his special groove in life, keeping all the while his morals and affections warmed and purified by a loving home atmosphere. Just as it is easier to pull up a weed, root and all, when it is young, so it is much easier to extirpate a bad or undesirable habit before it has grown into a part of the temperament. We should remember that in curing a child of thumb-sucking, or of stammering, or of a propensity to steal, we are saving two generations from deformity of the teeth, from defective speech, from a felon's doom. For it has been proved, by many observations, that acquired habit becomes hereditary. A gracious and dignified manner, for instance, becomes the invariable property of a reigning monarch, the founder of whose dynasty may have been a rough and bluff common soldier, like Bernadotte.

(To be continued.)

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## REMARKS ON THE "CHRONIC DISEASES"

(VOL. I.)

By EDWARD MAHONY, M.R.C.S., L.S.A.

PSORA "is an internal disease—a sort of internal itch—and may exist either with or without an eruption upon the skin"; and again, "psora forms the basis of the itch," and "psora became therefore the *common* mother of most chronic diseases—at least *seven-eighths* of the presently existing chronic maladies originate in the reckless suppression of the chief external symptoms of *psora*, which act as a substitute for the internal disease." I may add here the important clinical observation made, that not only may the external eruption be suppressed, but "it often leaves the skin of itself," and this is always an ominous sign.

The above quotations furnish food for a few practical remarks; and, first, as to the ridiculous and empty-headed charge that has been, under the name of Medical Science, sought to be hoisted on to Hahnemann first, and next on to those who seek consistently to carry out his teachings, that he taught that the common itch was the source of all, or nearly all, chronic diseases.

The expression in the first sentence, "with or without an eruption," sufficiently disposes of this, and also that psora forms the basis of the itch and the common mother . . . of seven-eighths, &c. It is difficult to see how any one, reading our author with an unprejudiced mind and ordinary faculties, could make such a blunder. There are one or two points, however, on the positive side of things which it is well to be clear about; and, *first*, it is evident that the whole teaching is based on the understanding that something inwardly is disturbed before there are any outward manifestations; *secondly*, that eruptions cannot be present in disease without inward ailment of some sort preceding; *thirdly*, that psora and the itch are not identical or interchangeable terms, for the first is the basis of the second, and it is difficult to see how the basis of anything can be at the same time the thing itself; *fourthly*, the expression, "the mother of most chronic diseases," implies a common source or root, however varied the branches, and hints in the strongest way at the importance of root or eradicated treatment for cure, and is the synthetic side of the doctrine taught; *fifthly*, the danger of the suppression of external symptoms, they being a substitute for the internal disease is more than clear. One may add, as a corollary to these five propositions, not only the inconsistency, but the positive great danger of endeavouring to mix up the principles of homeopathy with those of other schools, giving, *e.g.*, an antipsoric for a chronic skin eruption (falsely called a skin disease), and at the same time applying locally medicinal ointments or lotions. Another most practical point that inferentially comes plainly forward is the distinctiveness of this teaching from that which so largely prevails in the present, namely, that insect life, whether under the name of the itch, the pedicular disease, or the modern bacilli, ptomaines, bacteriæ, &c., &c., and yet &c., are the causes of the diseases which have been respectively appended under these various headings, and which has resulted in the energy of the formation of special chairs and professorships for the instruction of the rising youth of our colleges in the appearances (microscopic), habits, and mode of life and means of death of the various insects, under the name of germicides. I will take, for illustration, two sufficiently familiar cases in hospital practice, and at the same time sufficiently loathsome, namely, the common itch and the morbus pedicularis (louse disease). It was in my student

days, and is still I cannot doubt, from allopathic reading, considered good and safe practice in the former complaint to envelop the patient in sulphur ointment and *bake* his clothes, under which heroic assaults the skin cleared, and the itch insects present in the vesicles no doubt died; in the latter complaint, the favourite remedy of our clinical instructor was a lotion of sulphurous acid, which quickly again disposed of the offending pediculi (if in large numbers, they were first thinned by the thickest hottest poultices that could be borne), and again an apparent cure took place. The same principle has been carried now into so many classes of cases, that where it will stop no one can say; but I would beg my readers, if they are tempted to "follow my leader" in this matter, to pause and consider how opposite is the principle of all this to what Hahnemann has taught and practised, and since his day how many—may we not say millions—have been treated in all the diseases to which the term germicidal treatment has been applied by a principle *exactly the opposite* to the germicidal, and that so successfully that they regard the germicidal treatment as not only useless, but positively harmful? To put the two propositions before us in a simple way: according to modern medical teaching, eruptions on the skin, or parasites, whether visible, as in the itch or pedicular diseases, or microscopic only, as in cholera, carbuncle, typhus, typhoid, &c., are roots and not fruits; according to Hahnemann, eruptions, or parasites, whether the latter be visible or invisible, are fruits and not roots. I wish to be particularly plain and emphatic on this point, because of the constant tendency to try and mix the two lines of treatment. Take, for example, that most mortal disease, true diphtheria, in which a distinct leathery membrane is formed in some part of the throat. Our germicidal friends assail this membrane "*vi et armis*"—sprays, douches, iodoform vapour, free application of caustic, and the different nature of the various drugs sprayed in or painted on are an illustration of the old saying "*tot homines tot sententia.*" The one great point before the mind is to slay the monster, namely, the membrane, or, in more modern teaching, the invisible and innumerable bacilli embedded in said membrane. Of course, the strength is sought to be kept up besides; but the energy of treatment is directed towards the local manifestation of the disease. One following Hahnemann's teaching says, Supposing I

could kill all the bacilli at one blow, the *cause* of their appearance, the root of the malady, would remain untouched, and the killing work, like the labours of Sisyphus, would have to be renewed interminably. On the other hand, let me get at the cause of the whole thing, and the disordered vital force which preceded the formation of the membrane, and which certain general and local symptoms combined will give me, and *cure that* by internal medication, and both bacteriæ or bacilli and embedding membrane will alike disappear and be replaced by health. Further, local medicinal applications, outside or inside—*i.e.*, to the mucous membrane—instead of helping, will hinder, will choke the action of any part of more healthy surrounding tissue which was seeking to help its feebler and diseased neighbour by increased activity of secretion or excretion, and on the part actually invaded by disease will prevent what might otherwise find exit getting relief; and where can it go but back into the circulation? It is plain, therefore, that the two lines of instruction are as opposite in theory as they necessarily are in practice.

With regard, again, to eruptions, both in acute and chronic diseases, it may be remarked that they are of all sorts, shapes, and sizes, and have corresponding conditions and concomitants, and the medicines have produced corresponding varieties, and herein lies the other, or analytic, side of homeopathic lore; thus the twofold actions of the mind, synthetic and analytic, are kept constantly on the alert, and most needed. To remark a little now on the fifth proposition—of the danger of the suppression of external symptoms, because these act as a substitute for the internal disease. It may be noticed that external symptoms in the sense mentioned here are not confined to eruptions, but include pains (called neuralgic), sensations of paralysis, unnatural feelings on the surface of any sort; and yet how constantly are these suppressed by some local treatment, at the expense of causing the complaint, in the same or in some other form, to appear more internally, under the name of metastasis—*e.g.*, gout transferred by local applications from the toe to the stomach, or even the heart, or from one internal organ even to another more vital—*e.g.*, from the throat to the brain, and so on.

In the critical remarks on the treatment of Psora which follow, we are told that an eruption which had been removed by salves and purgatives may be again brought out

by the vital power. We may notice, then, that purgatives, or any other indirect or, to speak more familiarly, roundabout treatment, may temporarily apparently benefit, but it will not be in a curative way; and these deceptive improvements, by the removal of isolated symptoms, are just the rocks on which so many make shipwreck, and find themselves, slowly, it may be, but surely, on a steady decline in vital power. In a note on sulphur baths, he remarks that "the chronic disease often disappeared for a time, but afterwards returned, either with the same or analogous symptoms." On this point it may be observed that several medicinal springs have in recent years been drunk in various potencies as provings; and when patients appeared having similar symptoms to those caused by these springs administered thus, they received corresponding doses with highly satisfactory results. Here, again, we see the importance of having a law and exact knowledge to guide us, and a simple and exact mode of administration of the remedy, instead of sending *all* rheumatic sufferers to one place, *all* cases of liver affection to another, and so through the list of these classes of ailments.

Some remarks follow on the honest endeavours of the older physicians to cure what they recognised as the internal disease existing in every case of itch, and all credit is awarded to them for these; it also follows that their observations on the evil consequences of suppression are reliable, and then follow a series of cases illustrative of the bad treatment of psora. These are all taken from old school authors, and the translator of the work observes that Hahnemann quotes a great many more which he (the translator) omits for the sake of brevity. Taking those that are given, we find among the consequences of suppression, asthma, pleurisy and inflammation of the chest, hemoptysis and consumption, sacculated bags full of pus in the intestines, degeneration of the brain, sphacelus (gangrene) of the stomach and duodenum, general dropsy, lenticular cataract, deafness, diabetes, erysipelas, cancer of the bones, fever, epilepsy, apoplexy, melancholy, frenzy. These will be seen to include all parts and functions, and will serve to point out the importance of the most careful inquiry in all chronic cases, even such as cancer, consumption, and epilepsy, for previously suppressed disease, whether it received the name of itch, foot-sweat, or anything else. I recall at the moment the case of a young



lady dying of consumption, in which the whole cause was considered hereditary from her father, who had died of the same disease; but, after many inquiries, it at last came out that when about three years old she had itch on her feet, which was promptly cured—*i.e.*, suppressed—by an ointment. On the strength of this, I administered sulphur in a high potency, with the result of producing a slight eruption just above the same place. Her vitality was too far gone, however, for more than temporary relief, and no doubt the hereditary tendency had much to say in the matter; still, had that psoric eruption been cured by internal treatment instead of suppressed by external, there is no saying how far matters might have been changed for the better. The two sisters of my patient are both living, and in very fair health, and neither has tubercular symptoms.

Referring again to the above cases quoted, it may be stated that in 33 out of 100 the suppression was followed by death—a pretty high percentage—and some of these were children, and others apparently strong adults. Commenting on these cases, Hahnemann remarks that they will "convince the intelligent observer that the itch, together with its varieties, tenia capitis, crusta lactea, herpes, &c., are the external vicarious symptoms of an internal disease affecting the whole organism, and that *psora* is the most pernicious of all chronic miasms."

I have reproduced this sentence as a further proof that he did not limit the meaning of the word "itch" to the modern use of that word, but only regarded it as a variety of *psora*—a branch, not the root, or even one of the roots, of chronic diseases.

Next comes the mode of formation of the three miasms—*psora*, syphilis, sycosis.

Three things require special notice:—"1. The period when the infection took place. 2. The period when the whole organism began to be tainted with the miasmatic poison. 3. The manifestation of the external symptoms, by means of which nature indicates the complete development of the miasmatic disease in the internal organism." He believes the infection, both in acute and chronic diseases, takes place in a *moment*, and that consequently ablutions, cauterisations, &c., are worse than useless, and illustrates from inoculation, vaccination, small-pox, measles, &c., in all of which we have proof that several

days pass after known inoculation or infection before external symptoms, as inflammation and eruption, appear; and in such diseases as hydrophobia it is well known that weeks and months may elapse before there are outward proofs of infection, which nevertheless must have existed inwardly.

With regard to *acute* miasmatic diseases, such as measles, scarlatina, small-pox, "they run through their course of about two or three weeks, when a *crisis* ensues, by means of which the fever, together with the eruption, are annihilated in the system. After this period, man either dies of those diseases or else recovers." The mode of infection in chronic miasmatic diseases is *the same* he teaches; but after the internal disease is completed, there is this remarkable difference between it and the acute diseases: that the chronic miasm continues in the organism, and even develops itself from year to year, unless it is extinguished and thoroughly cured by art." As to contagiousness, he regards psora as the most contagious of the three, because the other two (syphilis and sycosis) only infect readily through wounds, and at those parts of the body which are covered with a very thin cuticle and provided with a delicate nervous tissue—such parts are the genital organs. *Psora, on the contrary, taints the system, especially that of children, by simply touching the skin.*

We can easily see from the above how painfully easy is the mode of infection by psora—by a "touch, linen, gloves, the use of a bed or towel"—but, further, "the moment the psoric miasm has touched the hand and has taken effect, it spreads through the system;" nothing is perceptible, however, "until the whole organism has been adapted to the nature of the chronic miasmatic disease;" then only does a local symptom (eruption) appear. The time required for this to take place varies from six to fourteen days. Now come the phenomena proving general infection of the system—namely, "towards evening a more or less considerable chill, and during the subsequent night heat all over the body, terminating in sweat . . . ; then the eruption makes its appearance, first near the spot which has been the original seat of the infection, in the shape of fine vesicles, resembling rash, and increasing in size. They are distinguished by a *voluptuously* and *almost intolerably delightful itch.*" The lymph contained soon changes to pus. "Everything touched by this liquid pro-

pagates the disease." "The 'cutaneous eruption,' the 'ulcers' following it, and 'tenia and those forms of herpes which become moist on rubbing' . . . alone contain the miasm susceptible of communication." The health may remain apparently unimpaired, and constitutional symptoms in a latent condition. If left alone, "the eruption will finally cover the whole surface of the body, in order to calm the internal disease and keep it in a latent condition." The first and important point to thoroughly grasp is that "the *robustest constitution is incapable of annihilating it by its own unaided efforts; and unless it be extinguished by the aid of art, it will last till the end of life.*" Another important point is that in the early stages, and when there are only a few recently formed vesicles, these may be suppressed easily, and without *apparent* harm; and as the dire consequences which are bound to follow do not usually show themselves, especially in the young and vigorous, until long after both infection and suppression, the deception of the unfortunate sufferer is complete. Numerous observations have by degrees, he informs us, made him acquainted with the symptoms of this internal disease in its incipient state of slumber; these cannot all be found on one person—one has more, another less, depending on the constitutions and external circumstances of different individuals. What are next spoken of as symptoms of latent psora must be reserved for future consideration.

KOP'S ALE.—According to a correspondent of the *Daily Chronicle*, who made an examination at the Patent Office, the composition of this preparation is:—1 ounce hops, 1 ounce horehound,  $\frac{1}{2}$  ounce dandelion root,  $\frac{1}{2}$  ounce ginger,  $\frac{1}{2}$  lb. sugar. Boil two hours; when cool add  $\frac{1}{2}$  ounce yeast, and let it work a few hours in shallow pans. Filter, aerate, and bottle.—*Monthly Magazine of Pharmacy.*

A CASE OF LETHARGY.—The Society of Hypnology and Psychology have recently been investigating a curious case of lethargy, the subject being a girl, thirteen years of age, who is stated to have been plunged in a deep sleep for nearly five months past. The attack, for such it must be called, was determined by a violent fright in September last, the result of a practical joke on the part of her schoolfellows. Respiration is carried on through the mouth, which remains widely open. The eyes are fixed and insensible to the touch. There is general anesthesia of the skin, pin-pricks and burns alike exciting no reaction. Alimentation has had to be provided for by means of the esophageal tube. Massage and hydro-therapeutic measures led to a gradual improvement, which, on February 18th, culminated in a complete awakening; but the subject has no recollection of anything subsequent to the beginning of the attack.—*Medical Press.*

## MATERIA MEDICA.

## DULCAMARA—A POISONING.

By Dr. KRANZ, Wiesbaden.

HAHNEMANN'S provings of *Dulcamara* (Bitter-sweet Nightshade, *Solanum Dulcamara*) showed that it affects the mucous surfaces of internal organs as well as of the skin, the mucous tissues of the respiratory organs of the small and large intestinal and of the uro-genital parts. Special effect it shows also upon the glandular system and the organs of circulation.

Though *Dulcamara* and its symptoms are known to homeopathic physicians, yet there are a great many people who do not regard the plant as of any merit; on the other hand it may be overpraised, and consequently abused, as the following case will show.

Mr. F., 51 years of age, of robust frame, who never before had been very ill, having taken cold and cough in a heavy stormflood, was persuaded to take some "bitter-sweet" tea (*Dulcamara*). His wife herself prepared the infusion from about two drachms of stipites *dulcamaræ*—*i.e.*, the stalks of the plant—in sufficient water, and had it boiled down to about half a pint, or a teacupful, of the decoction, and administered it to her husband.

An hour afterwards, by degrees, he began to feel very prostrate, with a good deal of anxiety about himself. His face and neck appeared to be in a state of tension, which prevented him from speaking. Besides heavy respiration, all the muscles of the thorax and of the extremities became twitched and convulsed. His eyes looked peculiarly staring; the pupils of both eyes were equally contracted. Pulse very frequent, and the number of respirations very much increased.

Albumen or sugar could not be found in the urine. Slowly, after some time, first a gentle, later very profuse perspiration broke out, and by next day the patient felt better again, and recovered in a short time.

From this acute intoxication of *Dulcamara* it appears that it is by no means an innocent remedy, and its alkaloids, *Solanin* and *Dulcamarin*, are poisons, very similar to *Nicotin*.

In a letter to the Editor accompanying his paper, Dr. Kranz says of the drug :—

“I might just add that *Dulcamara* holds the foremost place in the treatment of colds and catarrhs at the equinoxes, *i.e.*, spring and autumn, according to my experience. It is of great interest to remember our natural auxiliaries at the present time when the chemical factory-medicines seem to overwhelm everything else.”

### A COMPARISON OF THE THROAT SYMPTOMS OF *LACHESIS* AND *LYCOPODIUM*.

By E. V. Ross, M.D., Rochester, N.Y.

In treating a number of cases of diphtheria during the past winter, my attention was called (in endeavouring to find the simillimum for the case in hand) to the similarity between the throat symptoms of *Lachesis* and *Lycopodium*, and in order to aid me in differentiating between the two, I made the following plan of comparison in my interleaved copy of Oehmé's *Therapeutics of Diphtheritis*, and thinking it might be of some practical value to others, I herewith submit it.

I would also state, by way of parenthesis, that there was a time when I resorted to swabs, gargles, and sprays, but have abandoned this piece of nonsense, and now trust the case to the simillimum *alone*, with quicker recoveries and a lessened mortality as my reward.

<i>Similar.</i>		<i>Remarks.</i>
Chronic enlargement of tonsils.	<i>Lach. Lyc.</i>	
Swelling and suppuration of tonsils.	<i>Lach. Lyc.</i>	<i>Lach.</i> , gangrenous.
Constant desire to swallow.	<i>Lach. Lyc.</i>	Under <i>Lyc.</i> it amounts almost to a spasm.
Choking (constricted) feeling in throat.	<i>Lach. Lyc.</i>	
Violent stinging pains in throat.	<i>Lach. Lyc.</i>	
Much phlegm (mucus) in phanases.	<i>Lach. Lyc.</i>	Under <i>Lach.</i> it excites painful hawking; under <i>Lyc.</i> an inclination to swallow.
Regurgitation of liquids through nose.	<i>Lach. Lyc.</i>	
Fetor Oris.	<i>Lach. Lyc.</i>	
Aggravation from swallowing liquids.	<i>Lach. Lyc.</i>	<i>Lyc.</i> is < by cold liquids (milk), but > by warm.
Aggravation after sleep (even a slight nap).	<i>Lach. Lyc.</i>	<i>Lach.</i> , the patient sleeps <i>into</i> an aggravation; <i>Lyc.</i> is simply aggravated after sleep.

<i>Dissimilar.*</i>		<i>Remarks.</i>
Pain, swelling, and deposit begin on the left side.	<i>Lach.</i>	In the <i>Guiding Symptoms</i> we also find the following as having been repeatedly verified: " <i>Right</i> tonsil first affected, then the left." "Soreness of throat commencing on right side and passing to l., where it becomes fixed."
Pain, swelling, and deposit begin on the right side.	<i>Lyc.</i>	
Sensation as if a lump descended in throat on swallowing, but returns.	<i>Lach.</i>	<i>Lac.-can.</i> has exactly this symptom, but < on the right side.
Sensation as if a lump rose up in throat on swallowing.	<i>Lyc.</i>	Excites choking.
Relief from cold drinks.	<i>Lach.</i>	
Relief from hot drinks.	<i>Lyc.</i>	
Swallows <i>solids</i> more easily than liquids.	<i>Lach.</i>	
Swallows <i>liquids</i> more easily than solids (verified).	<i>Lyc.</i>	Mat. Med. gives: Difficulty in swallowing solids.
Pain out of proportion to the amount of swelling.	<i>Lach.</i>	
Swelling out of proportion to the amount of pain.	<i>Lyc.</i>	
Conditions :		
Asthenic.	<i>Lach.</i>	Under <i>Lach.</i> there may be a suspicious absence of any pyrexia.
Sthenic.	<i>Lyc.</i>	Under <i>Lyc.</i> we may have a high temperature.

*General remarks.*—*Lach.* and *Lyc.* are complementary, especially so in throat troubles. One takes up the work where the other leaves off. If, after you have given *Lachesis*, the membrane goes over to the right side and becomes fixed, *Lycopodium* comes in as a substitute. If the reverse of this condition, give *Lachesis*.

And in my experience the higher potencies (200 to one) act better than the lower.

\* I am aware that this term, as here applied, is somewhat arbitrary, but have adopted it more for convenience' sake. While the symptoms are in some respects similar, they are also in some respects dissimilar.

## THE THERAPEUTICS OF THE SERPENT POISONS.\*

By JOHN H. CLARKE, M.D.

## INTRODUCTION.

ONE of the grandest features of the homeopathic science is the faculty it possesses of pointing out the soul of good in things hitherto deemed entirely evil. From time immemorial the serpent has been looked upon as the very embodiment of the principle of evil; and though the symbolism of the serpent has been adopted of old as the insignia of the Healing art, it is rather, I imagine, taken as representing the evil power the healer contends against, than one of the means he is supposed to employ. It is true that various parts of serpents have been used in compounding the wondrous concoctions which were in favour one or two centuries ago; and savage tribes have used preparations of serpent venom in various ways as a means of affording protection against the effects of serpents' bites; but it was not until the genius of Constantine Hering led him to bring the homeopathic law to bear on the study of the deadly serpent poisons that the world had any rational knowledge of their enormous therapeutic value. And herein is exemplified another glory of homeopathy: like all true sciences, it possesses organic vitality and growth. Hahnemann did not discover the curative properties of the serpent venoms; but the law he enunciated led to the discovery in the hands of his great disciple. Perhaps I should better say "laws" than "law"; for unless the law of dynamisation had been added to the law of similars, the virtues of *Lachesis*, of *Crotalus*, of *Naja* and the rest would have been unknown to the present day.

It was long supposed that the serpent venoms were completely inert when taken by the mouth. That this is not the case the experiments of homeopaths have fully proved. At the same time it is not contested that, in the crude form, their action is a thousandfold more violent when injected directly into the tissues. But in the dynamised form their action is just as marked when taken by the mouth as when injected; and whilst in this form the poisons do not act in so terrific a manner as in the case of bites by the actual serpents, they produce effects in much greater detail; and thus are developed and delineated the scope and sphere of each serpent's poison in the characteristic symptoms they produce.

On July 28, 1828, Hering made the first centesimal trituration and the first centesimal dilution in alcohol of the venom of *Trigonocephalus Lachesis*, the Surukuku snake of South America.

\* A post-graduate lecture delivered in the London Homeopathic Hospital, Friday evening, March 10th.

Hering observed some effects on himself whilst preparing the attenuations, but the first provings of *Lachesis* was made with the 30th centesimal dilution. The first provers were, besides Hering himself, Stapf, Bute, Bauer, Behlert, Detweiler, Gross, Kummer, Reichhelm, Roemig, Wesselhoeft, Kehr, Koth, Matlack, De Young, Helffrich, Schmoele, and Lingen. These all took doses of the 30th potency, and their provings have supplied the basis of our therapeutic knowledge of *Lachesis*, by far the most important of all the serpent venoms. It is for this reason that I say that it is the double law—the law of similiture and the law of dynamisation—that the discovery of the virtues of these agents is due.

One word more about dynamisation. To the chemist these poisons are all very much alike, if they are not impossible to distinguish. To the physiologist and toxicologist there is little to distinguish one snake from another in the symptoms of the fatal cases. The homeopathist, on the other hand, knowing the power of graduated attenuation to develop the latent therapeutic activities of substances supposed to be inert, and to develop the characteristic features of substances that appear from their physical properties to be exactly identical, is possessed of a much more delicate test than either the chemist or the natural philosopher have ever dreamed of. Thanks to this test, we have been able to learn that so far from being identical, the serpent poisons have decided family differences, a knowledge which is of the greatest value in prescribing them as medicines for the sick. How entirely the homeopathic school may lay claim to the serpent poisons, in their capacity of healing agencies, may be judged from a sentence in the excellent chapter devoted to their consideration in Dr. Hughes' *Pharmacodynamics*. "I must repeat," says Dr. Hughes on page 596, "what I said under the head of *Apis*, that it is no longer necessary to apologise for our use of serpent venom as a medicine introduced through the ordinary channel." "Not necessary to apologise!" indeed it is not: their use is one of our proudest possessions. But the very fact of Dr. Hughes writing in this strain shows how completely we have the field to ourselves.

In addition to *Lachesis Trigonocephalus*, the lance-headed viper of Brazil and the rattlesnake *Crotalus Horridus*, both of which were introduced into homeopathic medicine by Constantine Hering; *Crotalus Cascavella*, proved and introduced by Mure in 1839; we have *Naja Tripudians*, the *Cobra di Capello*, or hooded snake of Hindustan, a colubrine snake of the Elapidæ family, introduced by Drs. Rutherford Russell and Adrian Stokes, who made the first provings; *Elaps Corallinus*, the Brazilian coral viper, first proved by Mure and again by Lippe; *Vipera*, the common viper of Germany, Italy and England, otherwise known



as the aspic or adder, the poison of which has not been proved in the ordinary way, the pathogenesis recorded in Allen being made up of the effects observed in bitten persons; *Bothrops Lanceolatus* (*Coluba glaucus*, *Vipera jaune*, *Fer-de-lance*), an Ophidian of the *Crotalidæ* family, found in the Island of Martinique, introduced into homeopathic medicine by Dr. Ch. Ozanam, who used it in cases, guided by Dr. Ruzf' *Enquête sur le serpent de la Martinique*; and finally we have recorded by Dr. Kent, in the November number of the *Medical Advances* of 1890, an excellent proving of *Cenchrus Contortrix*, the copperhead snake of North America. "This snake," says Dr. Kent, quoting from Albert Güntner's article in the *Encyclopedia Britannica*, "is very similar to the *Trigonocephalus* family, but smaller in size, generally found near water-courses, closely related to the *Cenchrus Piscivarus*, which is the water-snake or crater-moccasin. The habitat of this snake is the temperate parts of North America. The list thus consists of eight members—*Lachesis*, *Crotalus horridus*, *Crotalus Cascavella*, *Naja*, *Elaps*, *Vipera*, *Bothrops*, *Cenchrus Contortrix*."

The effect of the serpent poisons in full dose is much the same in all cases, and may be summed up in the following stages:—Shock; swelling; coma; death. The antidotes are—radiant heat to wound; alcohol in excessive doses; large doses of strychnine. The last has been used with very great success by Dr. Mueller in Australia. In the cases in which death has not been immediate; and in those cases where the fatal termination has been escaped; and still more in the cases of provings—differences in the action of the different venoms begin to show themselves.

Hering (*Guiding Symptoms*) thus distinguishes between the different serpents:—

"*Crotalus* is preferable in fluid hemorrhages, yellow skin (hence in yellow fever with black vomit, &c.), epistaxis of diphtheria.

"*Naja* has more nervous phenomena.

"*Lachesis* has skin cold and clammy, rather than cold and dry; hemorrhages with charred-straw sediment; and more marked by ailments of the left side.

"*Elaps* is preferable in otorrhea, and in affections of the right lung.

"The cobra poison coagulates blood into long strings." [This does not appear in the provings of *Naja*. Perhaps Dr. Hering means this as a physical effect of the poison when put into drawn blood.—J.H.C.] "The *Crotalus* poison is acid; the viper neutral. The 'Rottensnake'—Rattlesnake (?)—causes more sloughing than any other."

The homeopathic art is essentially an art of comparisons. The homeopathist is constantly comparing the symptoms of disease

with the symptoms of remedies, and also the symptoms of one remedy with those of others. The necessity for this inter-comparison of drugs constitutes the advantage of studying medicines in groups as we are doing to-day; but I am not sure that in practice it is necessary to keep in mind all the stages through which our knowledge has come. For instance, we hold in our hands, or in our cases, a bottle of tincture, say, bearing the label *Lachesis*. That bottle means to us a certain power over certain groups of symptoms and conditions, and the serpent from which it was originally obtained has practically disappeared from our consciousness. We do not give it to our patients because it is derived from a serpent, but because it has produced such and such symptoms in the provers. It stands now on exactly the same basis as our bottles of *Arsenicum*, *Aconite*, *Belladonna*, and the rest. In the same way, in practice, we do not give *Crotalus*, *Naja*, or *Elaps* because they are related to *Lachesis*, but because of the symptoms they have produced individually; nevertheless it is of great importance to compare them in order that we may distinguish; and by bringing into juxtaposition their resemblances and differences it is easier to carry in the memory a knowledge of them all. For this reason I have grouped them together for the purpose of this lecture.

But before proceeding to the study of the poisons individually, let me briefly summarise. The serpent characteristics are plainly evident in those under the influence of the venom. One of the first features that strikes us is the serpent lethargy. You have seen the creatures at the Zoo lying coiled up upon themselves, or upon one another, and you have difficulty in discerning sometimes whether they are dead or alive. So it is with the provers—they want to do nothing, and be let alone. But let any one disturb them, and they dart out in anger as ready to strike as the serpents themselves. Then look at a serpent coiling itself round an object, tightening itself upon it at every move; and see in this a picture of the contracting, spasmodic, and cramping pains which all the poisons produce, and the feeling they give of a general desire to have everything tight undone. The flash of the serpent's stroke may be taken as typical of the many sharp, darting, lightning-like pains and sensations; and the low passions the poisons awaken may find their symbol in the grovelling nature of the creatures.

These are main features, but there are wide individual differences, as will be shown. I cannot say whether an intimate personal acquaintance with the different serpents, such as charmers possess, would show indications of the individual differences in the poison effects of the different species; but probably this might be the case. However, the provings are the main thing; and in these there is an inexhaustible mine of

wealth, which it is the happy privilege of homeopathic practitioners to work and develop.

(To be continued. A study of *Lachesis* will follow.)

### A PARTIAL PROVING OF BACILLINUM (TUBERCULINUM HEATHII)\*

By R. Boocock, M.D.

AUGUST 2, 1892. A very cloudy day, warm damp wind; feeling very much depressed and worried about business and finance; very bad headache.

Having a patient coming to me of a consumptive diathesis, or troubled with "consumptiveness," I had procured from Boericke & Tafel *Bacillinum* 30th and 200th, but not having any 100th I concluded to make some myself. I took 36 globules of the 30th, and dissolved them in one ounce of diluted alcohol, shaking the vial well until the globules were all dissolved, which took a long time. Getting tired of shaking, I put down the vial and dried my fingers on my tongue. Soon after experienced a flush of heat, some perspiration and a severe headache, deep in, differing from what I felt at first, and this continued until half an hour after. I finished my potentising, and foolishly did the same thing, dried my finger on my tongue. Headache increased all over. Mostly in the temples and occiput. Stinging, stitch-like pain through my piles, hemorrhoids, and a stitching, creeping pain through my left lung, and a tickling cough; I felt very weak. I had no cough before, and yet I now had a tickling in my fauces and must cough; the headaches continued, and weakness and feeling in and under my left breast deep in.

(I have counted 50 drops of this, and have saturated 4 oz. of No. 35 globules, and I am going to call this my 100 c.)

If this dilution, 2 drops or so, can make one in health feel as I did, I am sure there is a power in dynamisation. A very restless feeling, not able to read with profit, so went to bed early; very restless; slept well; when asleep, no dream; had to rise to urinate three times; urine clear, but of a very bad smell; putrid. Awoke at daybreak, and could not sleep, feeling very tired, but went into my garden, digging trenches for celery plants; passed a good deal of flatus, smelling very bad, like the urine. Worked steadily for two hours; it was then time to open office. While preparing my tub for shower bath, felt very sick; upheaval of stomach, but could not vomit. A spasmodic effort which shook me a good bit; before I could finish my dressing, had a hurried feeling to pass stool; loose, very bad smelling, of

\* From *Homeopathic Recorder*, November, 1892.

a dark green character, mixed with mucus; felt very weak and sleepy all that forenoon; . . . feel very drowsy now at 1 a.m.; appetite as good as usual. Some dull headache, but mentally clear; no pain in lung, but have had a sore throat and a good deal of tickling in the pharynx, provoking a cough and enabling me to raise a little phlegm, white and frothy like cotton ball.

Weakness continued all the day; did not want to be disturbed. Sought to be quiet; slept a good part of the day, when not attending to my professional duties; passed a good deal of urine; foul-smelling, of a pale colour, with white sediment; have not tested it yet.

Second night very restless; at night slept well, but full of dreams; in my dream was attending to large numbers of malignant diphtheria cases. Woke many times and slept and dreamed, the same kind of dream; my cases in my dream did not die, but were greatly worse; worried about them.

Awoke at 5 a.m., and after lying awake, wondering what these dreams meant, my thought took this form: Intending me to get ready for an epidemic of diphtheria;—and this thought I cannot get rid of.

August 4, 1892. Feeling too tired to go into my garden; business being very scarce, I have had time to sleep, and slept all the forenoon. Headache not so bad; sweat on the least exertion; very poor appetite; bowels move.

August 5. Slept better, not so restless, but troubled dreams about diphtheria, and yet there is none in the town. [The prover's son, a clergyman, had recently taken it from a malignant case. After he had been with the patient, Dr. Boocock gave him *Apis* to avert any ill effects; but in eight days he had a slight soreness and an enlarged tonsil, right side, and on inspection were found some grey patches, but *Merc. cy.* 3d soon took them away. But this was more than a week previous.] My own throat very dry, but not so sore, and not so much inclination to cough; very weak yet, and sweaty; head not yet clear of pain. Bowels regular; I am passing more urine, very pale, with strong odour. A good bit of backache across my kidneys.

August 6. No change in my feelings, very weak and nervous, full of anxiety as of impending trouble.

August 7. Head clear of pain, no dreams, very cross and full of fault-finding; everything is going wrong.

August 8, 9, 10. Feeling similar, but not quite so continuous; feeling somewhat improved.

I have learned from this partial proving that this is a very powerful drug. That it made me very ill for the first two days, I am very sure, and filled me with some concern as to whether I should not do something to counteract its effects, but I finally concluded not to do so, but watch and wait.

I found that it had power to set up a severe headache, at the time I was suffering from one, but so differing that the new one, from the *Bacillinum*, could be easily felt, in the parts, occipital and frontal.

The throat was inflamed; tickling, phlegmy, cough from tickling that could not be relieved in any other way.

Left lung was irritated and made sore, a creeping, stitch-like feeling passing through from below upwards. A weak feeling in the right lung.

Bowels inflated with gas, and soft, mushy stool of dark, greenish colour, passing easily.

The pain or stitch through my old pile I could not account for, but having felt it as something new, I make record of it.

Some eczema of anus that had given me trouble for some time previous, has since been very much better.

I have had three patients under this, Dr. Burnett's *Bacillinum*, one dose of 30th in eight days.

The cases are too new to report as yet, but all are improving.

This will cure some cases of laryngeal phthisis, diphtheria, and phthisis pul., and be a great aid to us in curing what this learned physician calls consumptiveness. I for one have adopted this name and this remedy.

It seems as if I was learning to be an homeopathic physician, never having had much, if any, faith in the high dilution.

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### PIPER METHYSTICUM OR KAVA KAVA.

A NOTE extracted from the *British Medical Journal* of January 28th brings out the specific effect of *Piper meth.* on the skin. It is mentioned and emphasised in Allen. That part of the note referring to respiratory affections has apparently no reference to the action of *Pip. meth.*

#### EFFECT OF PIPER METHYSTICUM ON THE SKIN.

Lutz (*Monats. f. prakt. Derm.*, No. 8, October 15, 1892) describes the effect on the skin of the use of *Awa* (*Piper methysticum*) amongst the natives of the Sandwich Islands.

By the long use of *Awa*, the skin, particularly that of the extremities, assumes the appearance of well-marked ichthyosis, associated with a certain degree of atrophy, such as is observed in senile skin. There is an absence of inflammatory symptoms.

He also remarks on the frequency of bronchial asthma in the inhabitants of the Sandwich Islands, both whites and natives being affected. The affection appears in such a manner as almost to suggest small epidemics. There is presumably some atmospheric cause for them. The symptoms are those of a suffocating capillary bronchitis, with defective expiration, iodide of potassium giving speedy relief.

## THE JOURNALS.

## THE TONSILS.

IN the *Revue Homœopathique Belge* of December, 1892, Dr. Martiny adduces weighty reasons against excising or even cauterising the tonsils. He quotes from a work (*Études Générales et Pratiques sur la Phthisie*) by Dr. Pidoux which was accorded by the faculty of medicine the prize of 10,000 fr. founded by Dr. Lacaye, and in which facts were adduced to show that in phthisical patients the excision of the tonsils materially increased the predisposition to the disease. Says Pidoux:—

“I act in regard to the follicular angina of phthisis as with hypertrophied tonsils, which I never excise, no more than I do the uvula in phthics or in those who appear to me threatened with becoming such; as also with anal fistula, skin affections, pains, leucorrhœa. &c., &c.”

And further on he says:—

“Now it is quite certain hypertrophy of the tonsils is one of the most benign and most natural expressions of non-degenerated struma (*des strumes non dégénérées*). It is often such with all the other characters of simple and nascent scrofula, in infants and strong adolescents, well formed, of healthy colour, with the aspect a little humid and full of juices. It must be feared, then, that the violent suppression of this primitive affection may be followed, in a predisposed subject, with pulmonary manifestations of catarrhal pus and still more retrogressive ultimates.”

Dr. Martiny adds that the above entirely agrees with his opinion. For a long time he has advised neither removal nor cauterisation of the tonsils; for he has discovered on inquiring into the antecedents of consumptive patients that a large number had formerly submitted to excision of the tonsils. For many years he has not met with a case of enlargement of tonsils that did not improve so much under treatment as to render their removal unnecessary.

Dr. Martiny maintains that though nobody knows exactly what part the tonsils play as glands in the economy, this is no reason for concluding that they are useless; and that “to excise, to lacerate, to cauterise deeply an organ which exists normally in the human species and in a large number of animals,” has always appeared to him the reverse of prudent.

## MORBID SPONTANEITY AND PATHOGENETIC GERMS.

In the January issue of *L'Art Médical* Dr. P. Joussett has an interesting article on the above subject. His opening paragraph runs as follows:—

“It is an absolutely unassailable observation that the human organism, in the normal state, contains a large number of pathogenetic microbes: that these microbes are the *habitual and inoffensive guests* of the visceral cavities; that the toxins which they secrete are eliminated by the urine; and finally that in health the blood does not contain microbes.”

He goes on to say that the air we breathe and the food and drink we take into us are full of microbes, and yet, in spite of provocation from the common causes of disease, cold, privation, excesses, &c., plenty of people do not become ill. Dr. Joussett contends that the laboratory observations of “phagocytism,” or the property the cells of the tissues possess of devouring and digesting microbes, and of the bactericidal property of the blood are not sufficient to explain the facts observed at the bedside of patients. He maintains that the “morbid opportunity” which determines disease “is an act of the living organism.” “It is then,” he says, “the living organism which makes its disease, and when you would explain immunity from disease, or loss of that immunity by the increase or diminution of the phagocytism or of the bactericidal state of the blood, you only affirm anew the sovereignty of the living organism over the development of the disease; for the phagocytism and the bactericidal state of the blood are, as we have seen, properties of the living organism.”

This fact, Dr. Joussett says, must be taken count of in treatment. If the organism makes or determines its own disease, it is the organism which must determine its own cure. This is the *vis medicatrix naturæ* doctrine of Hippocrates. It is also, we may add, the foundation of the specific mediation of Hahnemann. Joussett's “organism” is the same thing as Hahnemann's “vital force,” and the same thing also as Charcot's “mind.”

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## REPETITION AND DIVIDED DOSES.

*The Homeopathic Physician* of October last contained a discussion on a paper by Dr. Arthur G. Allan, on Para-

graph 16 of *The Organon*, read at the last meeting of the International Hahnemannian Association. The discussion disclosed the greatest variety of opinions on the great dose question. Dr. Allan, for instance, advocated giving the highest potencies in acute diseases, and lower (meaning by "lower" about the 200th) in chronic diseases. Dr. Allan thus distinguishes between a repetition and a divided dose:—

"To put some medicine in a glass and give a teaspoonful every half-hour for a few hours until improvement is manifest, is simply a divided dose. To give a patient a bottle of medicine and tell him to take a dose every four hours or three times a day for an indefinite length of time, is repetition."

The general defect of the discussions on this topic is that the speakers give the general impressions gathered from their practice, not the definite facts on which those impressions are formed. Each practitioner adopts a certain line of practice, and he naturally comes to think that it is because of his pursuance of that line that he obtains his results. This may or may not be the case. Here are some of the most important of the speeches:—

"Dr. W. L. REED—I think it is a fatal error to repeat the dose too soon either in acute or chronic cases. If homeopathy is a law, then disease can be cured by one dose of a medicine, and not by repetition. No repetition till the first dose has become exhausted in the organism. Where the remedy is homeopathic to the case, I have the best results from only one dose.

"Dr. T. S. HOYNE—I agree in the main with Dr. Reed, but there is one point he has overlooked. If his single dose does not show an effect in an acute disease—take croup for instance—in half an hour, that dose should be repeated, if he is sure he has selected the right remedy, or, if not, another remedy must be given. I have never seen a case of croup in which improvement was not apparent in half an hour or less if the remedy was correct. To give such a rule as Dr. Reed has laid down is all wrong.

"Last winter we had a considerable number of typhoid fever cases, and the majority of them were characterised by hemorrhage from the bowels. In most cases *Phosphorus* or *Nitric acid* were indicated, and, as a rule, one dose would arrest the hemorrhage at once. I had occasion to see a case in consultation with Dr. Bacon, of Englewood, in which the patient was having stools every few minutes of bright red blood, profuse as if an artery had been cut. Both *Phosphorus* and *Nitric acid* had



been given when I saw the case, and injections of *Hamamelis* and hot compresses had also been used without effect. I found the patient almost pulseless, with slight nausea and great pallor. I gave a dose of *Ipecac.*, and waited half an hour. Now, if I had followed Dr. Reed's advice, the patient, I am sure, would have died. But I gave a dose of *Secale cornutum*, which controlled the hemorrhage almost immediately, and after a long illness the patient recovered. The patient had no evacuations for forty-eight hours afterward; then they were black and tarry. None of the books I consulted gave *Secale* as a remedy for typhoid, except P. P. Wells', and he does not mention hemorrhage as a symptom."

After some other members had spoken, Dr. JOHNSON said:—

"The question that seems to be before us is, 'How long shall we wait before giving the second dose?' whether we call it a broken dose or a number of doses. We find in *The Organon* clearly taught that all sensations and all symptoms of disease are produced by the *vital-force*. Abnormal sensations or symptoms show that the *vital-force* is in an abnormal condition, and the only thing we can do is to right the wrong. If we give the *proper* remedy, then the *vital-force* will correct the symptoms. This is the standard of the true Hahnemannian. If we give a dose of medicine, it is because we see in the symptoms of the patient a picture of the symptoms produced by that drug in the proving on the healthy; and if a change in consequence occurs, it is a proof positive that the *vital-force* is acting. Now, shall we step in and interfere with that curative action? Certainly not. The better thing to do is to wait. How long? Not two hours, not two days; not a week nor a month—no definite time; but wait until we see the returning symptoms, or a step in the curative process. Then, if *indicated*, repeat the *remedy*, whether it is two hours or five months. If we see no reason for giving a remedy, it is a great deal better to give nothing. Let the *vital-force* do the guessing.

"Dr. T. S. HOYNE—Mr. President, Dr. Johnson misses the question entirely. How long are we to wait for a remedy to act?" [*i.e.*, to begin to show that it is acting.—ED. H.W.]. "Suppose a case of croup. He has given a remedy, and no effect is apparent. Now how long is he going to wait on that one dose?"

"Dr. JOHNSON—Homeopathic physicians are not infallible; they do sometimes make mistakes. It is supposed they know the signs of the action of a remedy, and the signs of its failure to act. If we get no curative effects in a reasonable time from

the remedy, we should choose another without delay. Why repeat a remedy that does not act, or wait too long on one that produces no effect?"

Dr. J. B. G. CURTIS put the practical points of the question very forcibly as follows :

"After all, we are practical men, and we meet disease in a practical manner. It would be impossible for most of us to give a dose of medicine and then spend time enough to see it work. Life is too short, and there are other sick people claiming our attention. The repetition of the dose certainly does not depend on whether the disease is acute or chronic. It depends upon the patient's susceptibility to the remedy more than to anything else, and that varies with different people. Hence it won't do to say that you must wait any definite time. You must be guided by circumstances. The success of a homeopathic physician depends on his ability to forget the names of diseases. Our best cures are often made by remedies that we have never before applied to the disease in hand. Whether the disease be eruptive or organic makes no difference at all in the selection of a remedy. The broken dose that Dr. Allan speaks of is certainly a repetition, a number of doses. The quantity has nothing to do with it.

"Another thing: I do not believe we ever set up a new diseased condition; we cure diseases, we do not make new ones. Among every doctor's patients are people of judgment, who can be trusted to make accurate observations; who will say, 'I felt better for a while after the first dose, then the other powder did not seem to help me.' With such people it is safe to give a number of powders of the medicine and tell them to stop when improvement begins. But the majority of patients are not to be trusted in that way. However, it is sometimes impossible for us to see a patient several times in a day or two. In addition to this, I have found in my experience that some people bear repetition better than others, all of which goes to show that this is a question of experience with individual patients and circumstances, and no one should presume to say how others should do or make a hard and fast rule for all to follow."

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COMPLEX ODOURS.—M. Jacques Passy has made the curious observation that proceeding from very small quantities—say, of amyl alcohol—two different perfumes will be perceived to increase and then diminish in succession, finally giving way to an odour which soon becomes disagreeable as it increases in strength. The transition from perfume to unpleasant odour is very general in volatile substances.—*The Chemist and Druggist*.

## INSTITUTIONS.

### NORTH OF ENGLAND CHILDREN'S SANATORIUM, SOUTHPORT.

FROM the thirty-second annual report of the Committee of this important institution we make the following extracts :—

“In presenting their annual report, the Committee have the pleasure of congratulating the governors on the continued success which has attended the working of the institution during the past year, and for which they feel most grateful. The number of children treated during the year being 651, shows an increase of 92; the number of days patients were in the house was 23,186, an increase of 1,969; and the average stay of each child was 36 days.

“In view of the increased expenses which they will of necessity incur by the larger number of children they will be able to receive, the Committee confidently appeal for continued and increased subscriptions, to enable them to carry on their work without incurring any debt. In addition to the ordinary subscriptions and donations, a sum of £2,569 has been generously given to the building and investment fund.

“The new wing is now finished, and was opened by the Countess of Crawford and Balcarres on February 22nd. The increased number of beds will be of the greatest service, more especially during the summer months, as at the same period last year it was impossible to prevent the institution being unpleasantly crowded. The large new playroom can only be appreciated properly by those who saw how inadequate was the former accommodation. The Fielden Ward, entirely built and furnished at the expense of Mrs. Fielden, will give the benefit of a large and sunny room, with every convenience, to the more delicate of the children, who are, particularly during the winter, much confined to the house.

“The Committee are pleased to state that during the year Dr. Henry Blumberg, eldest son of Dr. Blumberg, founder of the institution, has been added to the hon. medical staff. It is with deep regret that the death is recorded of Mr. John Atkinson, J.P., for many years president of the sanatorium, to whose never-failing attention to the interests of the institution very much of its present efficient condition is due.”

#### MEDICAL OFFICERS' REPORT.

Dr. Storrar read the subjoined medical officers' report :—

Your medical officers have much pleasure in presenting their annual report. During the year 1892, 651 children have received the benefits

of this institution, being an increase of 92 upon last year. We are happy to state that the success which has attended our efforts in the past continues to be maintained. Subjoined, in too great detail to be read, is an analysis of the diseases treated here during the year, from which it may be seen that of the 651, 311 are reported on leaving as "quite well," 49 "very much better," 239 "improved," only 17 "no better," while 2 died. The result as regards 33 is not stated, as they were in the house at the beginning of the present year, and under treatment beyond the time to which this report extends. A few too far gone cases have, as usual, been sent us, which accounts for the two deaths we have to record. With the exception of a slight outbreak of measles, which induced us to refuse new patients for three weeks—November 24th to December 15th—we have had no serious epidemic to contend with. All the cases of measles, seven in number, were of a mild type, pursued the ordinary course of the complaint, and made perfect recoveries. Following upon the recent enlargement and general improvement of the sanatorium, we expect this current year to have a much larger influx of patients, and, if possible, next year to improve upon the report we now have the pleasure of laying before you. We desire again to record our grateful appreciation of the cheerful and invaluable assistance we have received from the matron (Mrs. Kyle), the head nurse, and all the nursing staff.

## ANALYSIS OF DISEASES.

General and Nervous Debility ...	157	Paralysis .....	11
Struma or Scrofula .....	25	Scarlatina .....	9
Adenitis-strumous inflammation of glands .....	19	Diseases of the Throat .....	11
Rachitis .....	4	"    "    Kidneys .....	8
Rheumatism .....	24	"    "    Bladder .....	2
Anæmia and Chlorosis .....	25	Diabetes .....	1
Affections of Head and Face ...	7	Disease of the Hip .....	16
Chorea .....	43	"    "    Thigh .....	2
Spinal Curves and Curvature ...	26	"    "    Knee .....	14
Bronchitis .....	33	"    "    Leg .....	10
Asthma .....	3	Ankles (3), Feet (3) .....	6
Pleurisy (11), Empyema (7) .....	18	Arms and Hands .....	7
Phthisis Pulmonalis .....	35	Skin .....	5
Pneumonia and Broncho-pneu- monia .....	26	Abscesses .....	8
Diseases of the Heart .....	20	Ulcers .....	2
Gastric and Dyspeptic affections	10	Burns and Scalds .....	3
Peritonitis .....	4	Diseases of the Eye .....	10
Typhoid Fever convalescent.....	25	"    "    Ear .....	7
Influenza .....	7	Fright .....	1
		Total .....	651

## RESULTS.

Quite well .....	311	Died .....	2
Much better .....	49	Not stated .....	33
Better, or improved .....	239		
No better .....	17	Total .....	651
In the house at end of year .....		33	

## OXFORD HOMEOPATHIC MEDICAL DISPENSARY.

TWENTIETH ANNUAL REPORT, 1892.

“The Committee are glad to be able to report favourably of the work carried on by the homeopathic dispensary. A large number of patients have received the benefits of the institution during the year. The annual meeting of the subscribers to the dispensary was held February 10, 1893, and the same officers and executive committee were re-elected. The Committee are glad to acknowledge the indefatigable services of Dr. Guinness, and at their annual meeting unanimously tendered him a vote of thanks.”

The report of Dr. Guinness, somewhat abbreviated, is as follows:—

### MEDICAL REPORT.

LADIES AND GENTLEMEN,—The number of patients who have applied for medical attendance during the year is 771; the deaths were 6. The number of patients who have been visited at their own homes is 474. Since the opening of the dispensary, some twenty-one years ago, 25,623 patients have received advice and medicine; also 48 children have been vaccinated with pure calf lymph with invariable success. I also beg to inform you that I have frequently visited poor persons who could not procure a ticket, rather than they should be neglected.—I have the honour to remain, ladies and gentlemen, your obedient servant,

ARTHUR GUINNESS.

## BISHOPSTONE HOUSE, BEDFORD.

REPORT TO YEAR ENDING DECEMBER 31, 1892.

A PERIOD of fifteen years having elapsed since this house was licensed to receive a small number of ladies of unsound mind, the opportunity is taken of reviewing the work accomplished and the results obtained.

In the autumn of 1877 a license was granted for four patients; in 1879 this number was increased to six, and subsequently to ten in 1884, when an adjoining house was taken for the medical superintendent and his family.

Forty-five patients have in all been received, representing all forms of mental and nervous disease. Eighteen of these have been discharged “recovered.” Of this number, however, two, being cases of recurrent insanity, were re-admitted, and discharged a second time, thus reducing the actual figures to sixteen. Four have died, three of these from senile decay; six have returned to friends “relieved”; eight have been trans-

ferred to other asylums, from need of change or for motives of economy; while nine remain under care.

It is impossible in the limits of a report to specialise the various causes which have contributed to the success of the treatment. Beyond those purely medicinal, we may mention the homelike character of the house, the individual care, which the small number of patients makes possible, as well as the amount of freedom, consistent with safety, which they enjoy. They walk or drive daily into the country, in charge of attendants, and only during the early stages of excitement are their walks limited to the grounds. They have access to a large public library, and the proximity of a town, which is now regarded as an advantage, affords an opportunity for those who are convalescent to share in its interests and join in its amusements.

Other great factors in promoting recovery are moral discipline and early treatment. It is an impossibility for relatives to exercise the control which is needful in the management of the insane, and early removal to proper care is imperative. Valuable time will, however, continually be lost until insanity is recognised by the public as a disease rather than a family disgrace to be concealed. Under the Lunacy Act of 1890, an attempt has been made to meet this difficulty by permitting the admission into asylums of cases, not sufficiently pronounced for certificates, as voluntary boarders. Such patients usually recover rapidly and so prove the value of early treatment.

A large proportion of admissions, even into licensed houses, is made up of worn-out brains and wrecks of humanity, for whom there is no hope of recovery. These not only seriously reduce the percentage of "recoveries," but make it difficult to prevent the house from becoming an asylum for chronic patients rather than a home hospital for treatment and cure.

## TUNBRIDGE WELLS HOMEOPATHIC HOSPITAL.

### ANNUAL MEETING.

ON Tuesday afternoon, February 21, the Hon. Carteret Hill presided at the annual meeting of the Tunbridge Wells Homeopathic Hospital. In addition to the numerous lady supporters of the Institution, there were also present Dr. Pincott, Dr. Neild, Dr. Capper, Mr. Tinne, Mr. W. H. Roberts, Mr. A. H. Brown, Mr. G. Cheverton, Mr. Langton, Mr. Slatter, Mr. Savage, and others. The Mayor wrote regretting his inability to attend, and remitting a cheque towards the funds of the hospital. The usual formal business having been transacted, Mr. Langton (in

the absence of Mr. Oetzmann, the hon. sec.) read the annual statement, which showed that there were now 281 subscribers and donors, an increase of 75 over the previous year; the subscriptions and donations amounted to £614 6s. 6d., being an increase of £105 4s. 10d.; the in-patients were 52; the out-patients received 4,188 attendances, an increase of nearly 700; the number of visits made to patients who were unable to leave their homes was 1,775, an increase of 725; and the number of dental patients was 536, an increase of 147. The Committee expressed their very best thanks to the medical staff, who had so generously given so much of their valuable time, and had efficiently and satisfactorily carried out the work.

MEDICAL OFFICERS' REPORT.

“Forty-eight patients had been admitted into the hospital, making, with the four under care on January 1, 1892, a total of 52 for the year. Of these 45 went out cured or relieved, one was transferred to the London Homeopathic Hospital, one was discharged incurable, two died, and three were still under care on January 1, 1893. These patients represented a residence in the hospital of 226 weeks, or an average of a little more than four weeks for each patient. Several surgical operations had been performed, and the patients had made good and rapid recovery, with the exception of one case suffering from hip-joint disease, who was still in the hospital, and of whom they have every hope. The Home Visiting was greatly appreciated, and the honorary surgeon had, with the kind assistance of Dr. Capper, made 1,775 visits during the year. There had been 1,396 dispensary out-patients during the year, of whom 1,135 were cured or relieved, 16 not relieved, 99 no report, 11 died, 135 under care January 1, 1893. Five hundred and thirty-six dental cases had been dealt with, as against 389 for 1891. The Chairman said they had all listened to the Reports with great interest. The hospital work had brought light and hope into many homes. He moved the adoption of the Reports as read. This was seconded and carried with acclamation. The Chairman having been thanked, the meeting closed.”—*Sussex Daily News*, February 22.

SUBLIMATE-POISONING.—The over-addiction of German surgeons to the use of corrosive sublimate is beginning to show results in unexpected places. Professor Albert, of Vienna, after suffering acutely for a long time from dyspepsia, for which he could assign no cause, was suddenly struck with the thought that an explanation of his complaint might be sought in the corrosive sublimate which he was in the habit of using freely. This surmise proved to be quite accurate. The urine was found to contain a comparatively large proportion of mercurial salts, and the fact that the professor lost three teeth, previously all perfectly sound, within a short time, added further proof to his suspicion that he was suffering from mercurial poisoning. The death of another prominent German surgeon is attributed to nephritis caused by the habitual application, in the deceased's practice, of the sublimate antiseptic treatment.

## EXTRACTS.

## CONCERNING NARCOTICS.

M. FRANCISQUE SARCEY, lamenting the untimely death of his brother *littérateur* Albert Delpit, took occasion to preach a sermon against narcotics. "I owe my green old age," says the veteran critic, "to entire abstention from stimulants and narcotics. Flee from them—they are poison." Like dynamite, such products of chemical skill as chloral hydrate and morphine are resources of modern civilisation. They are valuable additions to the Pharmacopeia within certain limits, but their potency to assuage pain constitutes their danger. The drug wears the smile of a friend; it casts no shadow before. The victim feels confident that he will make it a servant; he ends by becoming its slave. He repeats the indulgence until he finds the fetters gall him, and when he tries to throw them off it is too late. Opium seduces natures which would turn from the mere animal excitement of alcohol with disgust. It does not stupefy the intellectual faculties, but stimulates while it destroys. De Quincey found in laudanum his *pharmakon nepenthes*, a panacea for all human woes. "Happiness might now be bought for a penny and carried in the waistcoat pocket." Then comes Nemesis. "Conceive," wrote Coleridge in 1814, "whatever is most wretched, helpless, and hopeless, and you will form as tolerable a notion of my state as it is possible for a good man to have." Both Coleridge and De Quincey shook off the destroyer, but laudanum is not morphine, that alkaloid which, in varying but always small proportions is in all forms of opium, and constitutes its most active principle. When once the hypodermic syringe is left in the hands of a patient, it is seldom relinquished until death. Most of us, alas! must have witnessed instances of it within our personal experience. Chloral hydrate, with which Albert Delpit killed himself, is still more treacherous. It has not even the compensating stimulus of opium. It purchases repose by robbing the system of life, which it saps slowly or takes suddenly, for its action is uncertain, and it has this evil, that the dose can never be reduced, for if it is no effect whatever is produced on the craving which it has created. Men of all races have had recourse to narcotics, in all ages.



The nepenthe of Homer was no fable. At the present day opium in one form or another is used from the Bosphorus to the Pacific. Hemp, in the shape of hashchish, churrus, bang, or gunjah, rules over both Asia and Africa. The Malay chews his betel, the native of the Andes his long peppers, the Ostiak of Siberia turns to his intoxicating toadstool. The use of narcotics is no product of advanced civilisation—it is rather a relic of a lower form of it. Tobacco, the dominant, though perhaps the least harmful, form of narcotic, was three centuries ago relegated to barbarians. But the action of none of these is so deadly as that of our more scientific preparations, and that their use is increasing is a patent fact. The slavery of alcohol, brutalising as it may be, is not so hopeless as that of morphine and chloral. True culture undoubtedly points to the elimination of both narcotics and stimulants except as medicines, and the man that is to be will have abandoned them, as he will have done the eating of flesh—a practice at which our descendants will shudder.—*Echo*.

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## ANSWERS TO CORRESPONDENTS, NOTES AND QUERIES.

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∴ In this department we shall be happy to reply to any inquiries relating to homeopathy or to the matter of our magazine that our correspondents may like to address to us. We cannot, of course, undertake to give medical advice in particular cases, which is the business of a medical attendant; but if our medical readers like to put queries to each other regarding points of practice or puzzling cases, we shall be happy to insert queries and replies.

### THE DOSE OF CAMPHOR.

Dr. LAMB, of 40, High Street, Dunedin, N.Z., writes under date January 18, 1898:—"On reading over the November number of THE WORLD, at p. 489, 'Cholera Items,' there is this passage:—'We should like to know where such a dose as ten to fifteen drops, frequently repeated, is recommended in any responsible homeopathic work, as we do not know of any such.' This made me look up your admirable interleaved book, *The Prescriber*, and opposite Cholera Asiatica, on the spare leaf, I find I have made the following note, taken from the *Monthly Homeopathic Review* of 1871, p. 547, by Dr. Bayes: 'Probable Invasion of Cholera,' fifteenth line from top, 'that *Camphor*, given in doses of five drops of the saturated solution (*i.e.*, 2½ grs. of solid *Camphor*) every five minutes, *increased, if need be, to 10, 12, or even 50 drops*, will cure every case of cholera.'

"I made a note of this when I read it, as striking me as being tremendous dosage of so powerful a medicine. I am glad for the opportunity of bringing this before your editorial eye for critical comment."

[We are much obliged to Dr. Lamb for calling our attention to the passage from Dr. Bayes' article. Dr. Bayes was not a man to write at random, but we should be sorry to endorse the directions he gave without knowing the data on which he founded them. If five drops of Rubini's tincture every five minutes did not suffice to produce a reaction we should think of going to some other drug rather than increasing the amount. At the same time it must be borne in mind that cholera is an abnormal state, and it is just possible that there is an unusual tolerance of strong doses of *Camphor* in that condition. That is a point we must leave those who have treated cholera to answer.—Ed. H. W.]

#### TO CORRESPONDENTS.

We beg again to remind our correspondents that no notice can be taken of anonymous communications.

All letters to the editor requiring reply should be accompanied by stamped, directed envelope.

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## APPOINTMENTS, VACANCIES, AND REMOVALS.

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\* \* \* We shall be happy to insert notices of appointments if gentlemen will be good enough to forward them to us, and also of posts vacant and likely to be vacant, on receiving information from secretaries or committees. Under this heading also, we shall mention good openings for homeopathic practitioners and chemists.

#### REMOVALS, ETC.

Dr. ROBERTSON, *Cardiff*.—Dr. R. Ingram Robertson, M.B., and C.M. of Edinburgh, has taken up the Cardiff practice recently left vacant by the death of Dr. Morgan. His residence is 10, Dumfries Place.

#### PRESTON.

Mr. W. S. MITCHELL has opened a Homeopathic Pharmacy at 5, Victoria Buildings, Fishergate, Preston. There is no resident homeopathic practitioner, but the field ought to be a good one.

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## Obituary.

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### DR. C. H. MACKINTOSH.

AFTER a short illness, the well-known homeopathic physician of Torquay, Dr. C. H. Mackintosh, died on the 13th of March, at the advanced age of eighty-five. Though he was not known to homeopaths by any contributions to homeopathic literature, Dr. Mackintosh was much esteemed by his colleagues and patients for his practical skill and kind disposition. He had retired from the active duties of his profession for some years, but continued to reside in Torquay, which was endeared to him by his many years of professional life there, and by his intercourse with a large circle of friends. Some ten or twelve years ago he succeeded to a property in Scotland at the death of a distant relation, and then, for the first time in his life, he visited "Caledonia stern and wild," and as his newly inherited estate was of the same character, he was not much enchanted by his visit to the land of his ancestors. He was a good fellow all round, and his loss will be much felt by those who had the happiness to enjoy his friendship. The following from a local paper will be read with interest:—

"Dr. Mackintosh, of Morden Hall, Torquay, died at his residence on Monday evening, March 13, at the age of eighty-five. The deceased gentleman was one of the oldest residents in Torquay, having lived here for the last fifty years. He was the first to introduce the study of homeopathy in the town. He relinquished his practice ten years ago in favour of Dr. Cash. Dr. Mackintosh took very little interest in public affairs at any period of his life, devoting all his energies to the study of homeopathy. It was through him that the Homeopathic Dispensary was founded, and he remained its consulting physician to the end. He liberally supported various charitable institutions and societies, being always ready to relieve distress and suffering. He was also a great benefactor to the sick poor, giving them counsel and attendance unstintingly without fee or reward. The local committees of the R.S.P.C.A. and the Anti-Vivisection Society claimed him as a member. Deceased, who lost his wife five years ago, leaves three daughters."

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## DR. ADAM LYSCHINSKI.

THE subject of this notice was a Polish refugee, who participated in the great struggle by Poland to shake off the Russian yoke. He came to Edinburgh, and after pursuing his studies at the University, took his degree in 1837, and, like his countryman, Dr. Dionysius Wielobycki (brother of the centenarian doctor), settled down to practice in the Scottish metropolis. He was a man of very retiring character and, we might almost say, aristocratic manners (we believe the Lyschinskis are of princely family), but he was much liked by a large circle of patients. He retired from practice, and came to London a few years ago, where he lived a very retired life, and did not mingle with his colleagues, few of whom knew of his existence. He died on the 12th of March at the ripe age of eighty-six.

## GENERAL CORRESPONDENCE.

## VACCINATION AND THE SPREAD OF LEPROSY.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—Having had occasion to complain of the partial and one-sided treatment of independent inquirers in leading medical journals (particularly when dealing with some of the most important questions affecting the public health), it is only fair to say that the following communication in regard to the mysterious and long-delayed report of the Indian Leprosy Commission appears in the *British Medical Journal* of the 11th inst.

WILLIAM TEBB.

Devonshire Club, St. James's, London.

March 16, 1893.

## THE INDIAN LEPROSY COMMISSION.

*To the Editor of the British Medical Journal.*

SIR,—My attention has been called to a letter by Dr. Kanthack in the *British Medical Journal* of the 4th inst., referring to my recently published work, *The Recrudescence of Leprosy and its Causation*, to which I venture to ask permission to reply.

Your correspondent takes me severely to task for having the hardihood to criticise a document—The Indian Leprosy Commission Report—which he says I had not seen. I frankly

admit that under ordinary circumstances the objection would hold good; a document not examined ought not to be criticised. But here the circumstances are not ordinary. Dr. Kanthack knows perfectly well that the observations throughout chapter xvi. are founded upon a printed *Memorandum on the Report of the Leprosy Commissioners*, and upon citations from that report. This memorandum, the genuineness of which Dr. Kanthack does not call in question, is signed by the most distinguished members of the National Leprosy Fund Committee. The comments relate chiefly to the divergence of opinion between certain members of the Committee, and the views as expressed in the report of the Indian Leprosy Commissioners. Whatever Dr. Kanthack may allege to the contrary, it is obvious that these differences—the *raison d'être* of the memorandum—some of which relate to fundamental points, must at least have been a part if not the main cause of the extraordinary delay complained of in both public and medical journals.

May I observe without egotism that the leading points dealt with in my book have been for several years the subject of much anxious and careful investigation, and are admitted by all students of the public health, and particularly of those interested in the well-being of our unrepresented Crown Colonies, to be of pressing public importance.

Briefly stated, these are—(1) That leprosy has greatly increased during the past thirty years, and is still increasing. (2) That it is a bacterial and inoculable disease. (3) That it is disseminated more or less by vaccination, and has spread *pari passu* with the extension of vaccination. (4) That it is the most loathsome and incurable of all maladies which afflict the human family, is unamenable to therapeutic treatment, and can only be relieved by hygienic and precautionary measures.

Dr. Kanthack does not attempt to contravene any of these fundamental points, nor to question either the evidence or the numerous high authorities by which they are supported.

I am, dear Sir,

Yours faithfully,

WILLIAM TEBB.

Devonshire Club, St. James's, London.

March 16, 1898.

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### LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

HOURS OF ATTENDANCE:—Medical, Daily, 2.30; Surgical, Mondays and Thursdays, 2.30; Diseases of Women, Tuesdays and Fridays, 2.30; Diseases of Skin, Thursdays, 2.30; Diseases of the Eye, Thursdays, 2.30; Diseases of the Ear, Saturdays, 2.30; Diseases of the Throat, Mondays, 2.30; Operations, Mondays, 2.

## MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Beale (L. S.). Our Morality and the Moral Question. Chiefly from the Medical Side. 2nd ed. Cr. 8vo, pp. 258. (Churchill. 8s. 6d.)
- Churchill (J. F.). Letters to a Patient on Consumption and its Cure by Hypophosphites. 2nd ed., with New Preface. 8vo. (Stott. 7s. 6d.)
- Cripps (R. A.). Galenic Pharmacy: A Practical Handbook to the Processes of the British Pharmacopœia. Specially Designed as a Guide for the Student or Apprentice, and Adapted as a Work of Reference for the Pharmacist. With a Glossary of Terms. Illus. by 76 Engravings. 8vo, pp. 318. (Churchill. 8s. 6d.)
- Crocker (H. R.). Diseases of the Skin: Their Description, Pathology, Diagnosis, and Treatment. 2nd ed. With 92 Illus. 8vo, pp. 356. (Churchill. 24s.)
- Densmore (Emmet). How Nature Cures: Comprising a New System of Hygiene; also the Natural Food of Man. A Statement of the Principal Arguments against the Use of Bread, Cereals, Pulses, Potatoes, and all other Starch Foods. 8vo, pp. x-414. (Swan Sonnenschein. 7s. 6d.)
- Fenwick (E. H.). The Cardinal Symptoms of Urinary Disease; Their Diagnostic Significance and Treatment. With 86 Illustrations. 8vo, pp. 860. (Churchill. 8s. 6d.)

## TO CONTRIBUTORS AND CORRESPONDENTS.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 30, *Clarges Street, W.*

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

LITERARY matter and correspondences should be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct the same and return to the *Editor* as early as possible.

### CORRESPONDENTS.

Communications received from Mr. D. McKerchar, Killin; Messrs. Lahiri and Co., Calcutta; Dr. Craig, Bedford; Mr. Pottage, Edinburgh; Dr. Storrar, Southport; Dr. Murray Moore, Liverpool; Dr. Guinness, Oxford; Dr. Kranz, Wiesbaden; Dr. Robertson, Cardiff; Mr. Joseph Collinson, Darlington; Ferrum; Dr. E. V. Ross, Rochester, N.Y.; Mr. Wm. Tebb, London.

### BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Chemist and Druggist.—Allg. Hom. Zeit.—Monthly Hom. Review.—Monatsblätter f. h.—Bromley and District Times.—Tongues of Fire.—Childhood.—Homeopathic Medical Record.—Homeopatisch Maandblad.—Monthly Magazine of Pharmacy.—Oxford Review.—American Homeopathist.—L'Art Médical.—Bath Chronicle.—Homeopathic Recorder.—Hahnemannian Monthly.—Medical Visitor.—Homeopathic News.—Medical Argus.—Minneapolis Hom. Magazine.—Chironian.—Revue Hom. Belge.—Vaccination Inquirer.—Vegetarian.—New England Medical Gazette.—Rochester (N.Y.) Times.—Archiv f. Homeopathie, Jan. and Feb.—Hom. Maandblad.—Homeopathic Envoy.—Clinique.—Southern Journal of Homeopathy.—Fourth Annual Report Phillips' Memorial Homeopathic Hospital and Dispensary.—Schüssler's Tissue Remedies, by Drs. Boericke and Dewey. 3rd edition.—Report of Bishopstone House Asylum, Bedford.—Report Children's Sanatorium, Southport.—Report Oxford Homeopathic Dispensary.—Medical Annual, 1898.

THE  
HOMEOPATHIC WORLD.

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MAY 1, 1898.

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MYXEDEMA AND ITS TREATMENT.

THE poverty of allopathic therapeutics is shown in nothing so much as in the periodic prevalence of "rages" for this, that, or the other kind of treatment, which, for a time, carries all before it, and presently subsides and is heard of no more. At present the rage is for treatment by animal extracts, or by feeding patients with those parts of animals which are diseased or defective in themselves, and the favourite disease for this particular treatment is myxedema.

Myxedema is a condition in which the soft tissues of the body become distended with a mucus-like semi-fluid, giving the patient the appearance of being dropsical. But the swelling is different from dropsy in this, that it does not give way under pressure, and leave a "dent" or "pit" when the pressure is removed, as occurs in ordinary dropsy. The condition may arise from a variety of causes, but generally occurs in connection with some defect of the thyroid gland (or goitre gland), which lies in the front of the windpipe, and which, when increased in size, constitutes the condition known as "Derbyshire neck," "full throat," or "goitre." This connection between the thyroid gland and the mucus swelling of the tissues has led to the "happy thought" of feeding myxedema patients with sheep's thyroids, or else injecting the juice from these into their tissues.

It need hardly be said that all this would not have been

brought about without experiments on animals. Modern therapeutists of the allopathic school could never be sure that the thyroid gland had anything to do with myxedema simply because disease of the gland or congenital absence of it was frequently found associated with the condition. That would be far too great an exertion for the "scientific imagination"; and so, healthy monkeys and donkeys had to have their thyroid glands cut out in order to show whether they would not become myxedematous. And they did become something like it, one donkey lingering in a miserable state for the best part of a year, being at last found dead in its stall one cold morning. Reassured by these observations the modern scientist could safely appeal to his butcher and commence injecting juice from sheep's thyroids into every myxedema patient that could be raised.

Myxedema is quite a rare disease. Most medical men seldom see more than one or two cases in the course of their professional lives. But, to judge from the appearance of the medical journals, one would imagine there was a perfect epidemic. This is all on account of the "rage" in thyroid juice that now prevails. For, be it admitted, the treatment, though it kills a goodly number, and frequently produces "alarming symptoms," does markedly benefit a large proportion; and it is such a rare thing for an allopathist to be able to trace a curative effect from his medicines, that when a disease comes before him which he can so far improve as to show the difference in photographs taken at different times, the demand for cases of that disease runs very high. We happen to know of one case at present, that of a poor woman, who is quite beset by doctors of different institutions each anxious to secure her as a patient that he may cover himself with glory by exhibiting her photograph later on. For this anxiety to treat the patient can hardly be set down to pure philanthropy.

Whether this treatment is in any sense a "cure" is quite another question. By a "cure" we understand a change of the constitution of a patient so that the disease



no longer exists, and treatment is no longer required. With this thyroid treatment it is very different. In all the cases we have seen reported, in spite of the greatly improved appearance and condition of the patient, the thyroid juice administration had to be continued indefinitely or the patient relapsed.

Compare with this the treatment and cure of the disease by homeopathy. In our issue of October last we recorded a case of fully-developed myxedema cured perfectly after eight months' treatment by the remedy homeopathic to the patient's condition. For now nearly three years the patient (a lady, aged 55) has remained perfectly well, has been able to carry out all her occupations just as she did before the illness began, and this without a single further dose of medicine or medical or dietetic treatment of any kind. Thyroid juice or thyroid feeding may have its place; but at best it is only a palliative, by no means free from danger, and can in no way compare with a homeopathic cure.

The medicine which proved curative, and which was prescribed solely in accordance with the symptoms of the patient, was *Arsenicum*; and, singularly enough, in the *British Medical Journal* of April 15th, a case is mentioned as having been brought before the Nottingham Medico-chirurgical Society in which a cure had been effected by the same drug in prethyroid-injecting days.

Thyroid juice is evidently an agent of great power, and when it has been thoroughly proved in the homeopathic way it may find a permanent place in therapeutics. The alarming symptoms it has produced in those who have been treated with it will form a useful nucleus. But thyroid juice is no cure, in the proper sense, of myxedema; and homeopaths, who really possess a system of cure, can always afford to keep their heads cool, however severely their allopathic brethren may be afflicted with some prevailing "rage."

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## NEWS AND NOTES.

## MEASLES AND TUBERCULOSIS.

IN THE HOMEOPATHIC WORLD of April, 1891 (Vol. xxvi., p. 147), we drew attention to two cases of cure of consumption by an attack of small-pox, the cases being vouched for by Dr. Broadbent; and in our September number of the same year (p. 407) Dr. Heath, in an article entitled "Cancer, Consumption, Leprosy, Small-pox, and Vaccination," referred to these cases, and urged other arguments to show that many outwardly dissimilar diseases have an evident likeness and possible identity. This idea is further strengthened by the observations contained in the following note from a recent number of *The British Medical Journal*, which shows a decided relationship between tuberculosis and measles. It is a common experience to find the tuberculous process inaugurated by measles; it now appears that the actual presence of tuberculosis is a preventive against measles.

## "IMMUNITY OF THE TUBERCULOUS TO MEASLES.

"Mr. James Cameron, M.B. (Dunbar), writes: 'Recently I have had the opportunity of observing in the practice of Dr. Macdonald, of Dunbar, two cases of what appear *primâ facie* to be examples of the above.

"During the late epidemic here, measles broke out in the family of a farm labourer (Irish, black Celt type), and four of the six children developed the disease almost simultaneously. The remaining two—girls of twelve and fourteen—had never had measles, and were up to this period apparently in ordinary health, except for slight colds, supposed at the time to be the early symptoms of the prevailing malady. No rash, however, appeared, and at the end of a week the patients, now confined to bed, were found to be suffering from early pulmonary tuberculosis. The latter disease developed rapidly, with high fever and the characteristic bacilli in the sputum, the elder child dying at the end of the second week, the case of the other, up to the present, following a similar course.

"From what one knows of the inhibitory action of one form of microbe over weaker specific forms, one is almost led to conclude that here the tubercle bacillus prevented infection by that of measles, as the chances of the two tuberculous children for measles were similar to those of the others. A brother had died at the age of fourteen, of pulmonary tuberculosis, some years previously."

*DOLICHUS PRURIENS* IN JAUNDICE WITH PRURITUS.

DR. JEAN DE WEE, of Brussels, in the *Révue Homœopathique Belge*, refers to the properties of *Dolichos Pruriens* in con-

trolling the pruritus which accompanies many forms of jaundice. In two of his cases, one a case of tumour of the liver, and one of recurrent jaundice from congestion, due to lithiasis, it did signal service. In the former he gave the  $\phi$  tincture, in the latter the 3x dilution. In a case of catarrhal jaundice *without* pruritus it completely failed to do any good, *Carduus Marianus* proving very effective after its failure.

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### STROPHANTHUS IN PRURITUS.

THE following note, taken from *The British Medical Journal*, shows that in *Strophanthus* may be found another remedy for that frequently very troublesome condition—pruritus. *Strophanthus* is undoubtedly a powerful drug, and well deserves a good proving. At present its chief use among allopaths is as a “substitute” for *Digitalis*. It remains for homeopaths to define its exact sphere. Here is the note:—

“Azúa’ (*Rev. de Med. y Cir. Pract.*, February 22nd) has found tincture of *Strophanthus* useful in pruritus due to stasis of the circulation in the papillary layer of the skin as observed in some cases of cardio-pulmonary disease. He tried it in seven cases of this kind, and in one of itching caused by jaundice. In the latter the treatment had no effect whatever, but in the other cases the pruritus speedily ceased under the administration of *Strophanthus*. Twelve drops of the tincture were given in two doses every day for seven or eight days. As illustrating the effect of the treatment, a case is related in which the patient, a man aged seventy, the subject of emphysema and dilated heart, had suffered for many months from troublesome pruritus. After a week’s administration of *Strophanthus* the itching entirely ceased. The results in the other six cases were equally satisfactory. The effect of the *Strophanthus* was so striking that ‘Azúa’ seems inclined to think that the drug may have some specific action on the nerve endings, which may explain its effect in such cases.”

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### AN AMATEUR CURE OF CHOLERA WITH CAMPHOR IN THE TIME OF THE MARQUIS OF HASTINGS’ ADMINISTRATION.

IN “Reminiscences and Opinions of Sir F. H. Doyle,” pages 394–5, reference is made to his uncle’s going to India with the first Marquis of Hastings as his military secretary. Whilst there, the cholera broke out, and his favourite servant was attacked. The doctors declared recovery impossible, and added that he could not live

through the day. "Then I suppose I may do what I like with him?" was his uncle's query. "Of course," they replied. "Upon this he posted a man as a sort of sentinel to watch over his pulse, and whenever that stopped, or threatened to stop, he poured in a tablespoonful of camphorated spirits of wine. As the man did not die, either of the disease or of the remedy, which is saying a great deal, my uncle was very proud of his irregular medical triumph." From the above it is evident the medical men in India had proof of the efficacy of *Camphor* in cholera cases as far back as the time of the first Marquis of Hastings (1812-1822 A.D.).

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#### MR. LAWSON TAIT AND HOMEOPATHY.

At a meeting of the members of the Birmingham Medical Institute, held a short time ago, Mr. Lawson Tait, the retiring president, expressed himself in characteristically vigorous language on the subject of homeopathy in a speech in reply to a vote of thanks accorded to him for his past services to the Institute, on the motion of Dr. Parkes, seconded by Dr. Simon. Mr. Tait, as reported by a local paper, said in reply:—

"He had endeavoured to repair the injury which, to a large extent, he was the means of doing the Institute at its inception. Many members would recollect the fearful row that took place in 1872. The warfare lasted a couple of years, and was as bitter as any that had ever taken place upon such an absurd subject in a city the size of Birmingham. He regretted the war, but he did not regret the victory. It was a victory of liberty which was achieved in Birmingham and spread all over the country, except in that most conservative of all conservative centres of professional opinion, London. The word homeopathy was hardly heard of now as being antagonistic, and the brotherhood then begun had slowly widened and spread ever since. (Applause.) That row did the Institute a tremendous injury, which he was glad he had lived to in some measure repair."

We fear Mr. Tait takes somewhat too sanguine a view of the present situation outside Birmingham; but the victory of liberty in medical opinion won at the Birmingham Institute, which was largely due to his own share in the fight, is one of which he has every reason to be proud.

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LEAGUE TRACT 45.—TWO DECADES IN MEDICINE.

THE last issued tract of the Homeopathic League consists of an abridgment of an article entitled "Two Decades in Medicine," which appeared originally in *The Medical Advance* of December last, and to which we have already referred. The article is very brightly written, full of cogent argument, and altogether forms one of the most telling tracts of the series.

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THE CHICAGO WORLD'S HOMEOPATHIC CONGRESS.

THE International Congress on Homeopathy in connection with the coming World's Fair at Chicago will commence on Monday, May 29th, and close on Saturday, June 3rd. Among the European contributors of papers are Dr. Villers, of Dresden, who sends a paper on the "Historic Development of Homeopathy in Germany"; Dr. P. Jousset, of Paris, one on "Homeopathy and Prophylaxis"; Dr. Oscar Hansen, of Copenhagen, who writes "Some remarks on the Homeopathic Treatment of Skin and Venereal Diseases, with Cases from Practice" (a paper which Dr. Hansen has kindly promised to send us for publication, with additions); Dr. Hughes, whose subject is "The Further Improvement of our Materia Medica"; Dr. Pope, who has promised a paper on "The Value of Efforts to Enlighten the Public on Homeopathy," and Dr. Clarke, who has sent a paper entitled, "The Curative Action of Homeopathic Remedies in Cases of Organic Disease of the Heart."

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DR. DUDGEON'S NEW TRANSLATION OF *THE ORGANON*.

THOUGH not as yet out of the publisher's hands we have had an opportunity of seeing the new translation of Hahnemann's *Organon* which Dr. Dudgeon has just prepared for the Hahnemann Publishing Society. We shall give our readers a full notice of the new work at an early date, but we promise them beforehand that they have in this volume a great treat in store. About one-third of the volume consists of an Appendix by the translator giving an immense amount of information bearing on Hahnemann's epoch-making work.

### “THE NINE CIRCLES.”

THE revised edition of the now famous “Nine Circles” has just been issued by the Society for the Protection of Animals from Vivisection, 20, Victoria Street, S.W.; and by Swan Sonnenschein & Co., Paternoster Square. In a weighty Introduction by Dr. Berdoe the criticisms on the First Edition of the work are all effectively dwelt with, and as for the body of it, a microscope is almost necessary to discover the difference, so infinitesimal does it seem now the errors are all out. One thing, however, is quite evident: the real offence of the book, which drew from the vivisectionists such an overwhelming flood of choice Billingsgate, was not the errors but the *truth* it contains. If any of our readers have friends who still believe in that vivisectionists treat their victims as they would like to be treated themselves, let them invest a shilling in a copy of “The Nine Circles,” and lend it judiciously. It will not be found pleasant reading; but if we would help to make the world the better for our presence, it will not do to shut our eyes to the unpleasant things that abound in it.

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**CASTOR-OIL PLANT AND MOSQUITOS.**—The castor-oil plant is avoided by mosquitos. In Egypt it is planted about houses to drive them away. A still better plan for towns is to have the young plants in pots, and bring them indoors for a day or two at a time. They must not be kept too long in the shade, as the castor-oil is a sun-loving plant. It is said that the mosquitos are killed by a poison they find on the reverse of the leaf, but if a dozen leaves are placed about a room that swarms with mosquitos, the insects will disappear without leaving any dead lying about.—*Chemist and Druggist*, March 25th.

**SOIL PERCOLATION.**—A scientific experiment has been made to demonstrate from what distance impurities can be carried by percolation through the soil from a distant point upon its surface to a well from which a family's supply of water was obtained. A salt of lithium, which can readily be detected in water, was spread upon a plot of ground 450 feet away. The water was examined, and on the 18th day the presence of lithium was apparent in the water. Now 450 feet—27 rods—is a long distance from a well, and yet in less than three weeks a substance from the surface of the ground had been washed into the soil and had been carried along the sloping, natural drain pipes, and thus found its way into the water supply of a family. If it had been the excrement from a typhoid patient, as happened in another case when the nurse threw the discharges into an open wheat field some hundreds of feet from the spring, we should no doubt have had, as happened in that case, an epidemic of typhoid fever—for this is the way it is often communicated in country districts.—*Science Siftings*.

## ORIGINAL COMMUNICATIONS.

## WHAT TO DO IF CHOLERA COMES.

By JOHN H. CLARKE, M.D.

(Physician to the London Homeopathic Hospital.)

It is now beyond doubt that cholera is once more steadily on the march westward. Russia has never been free from the epidemic since last summer; and now it has invaded Hungary in considerable force. Cases are reported from the environs of Paris, and at the little port of Lorient, on the west coast of France, there is quite a serious epidemic. At present our own shores are free from the disease; but with our enormous shipping communications with other countries there is no saying how soon we may find it in our midst.

To be forewarned is to be forearmed. If there is one thing certain in this world it is that thousands of lives have been saved by homeopathic treatment in cholera epidemics that would infallibly have been lost under allopathy. It is a matter of the first importance to public safety that this fact should be made thoroughly well known wherever cholera may reach. The fact is attested not by homeopaths merely from their experience in every epidemic in which it has been put to the test, but by allopaths themselves who have watched the treatment and its results, many having been converted to homeopathy in consequence. Here is an extract from a letter written by Dr. Macloughlin, the Medical Inspector of Stepney, Poplar, St. Andrews, St. Giles, and St. George's, Bloomsbury, who undertook to watch the practice at the London Homeopathic Hospital during the epidemic of 1854. The letter was addressed to Mr. Hugh Cameron, one of the surgeons to the Hospital at that time. Dr. Macloughlin said:—

“ You are aware that I went into your hospital prepossessed against the homeopathic system; that you had in me, in your camp, an enemy rather than a friend, and that I must therefore have seen some cogent reason there, the first day I went, to come away so favourably disposed as to advise a friend to send a subscription to your charitable fund. And I need not tell you that I have taken some pains to make myself acquainted with the rise, progress, and medical treatment of cholera; and that I claim for myself some right to be able to recognise the disease, and to know something of what the treatment ought to be; and, that there may be therefore no misapprehension about the cases

I saw in your hospital, I will add that all I saw were true cases of cholera in the various stages of the disease; and that I saw several cases which did well under your treatment, *which I have no hesitation in saying would have sunk under any other.*

"In conclusion, I must repeat to you what I have already told you, and what I have told every one with whom I have conversed, that, although an allopath by education, principle, and practice, yet, were it the will of Providence to afflict me with cholera, and to deprive me of the power of prescribing for myself, *I would rather be in the hands of a homeopathic than an allopathic adviser.*" (*British Journal of Homeopathy*, vol. xiii. p. 681).

The efficacy of homeopathic treatment in cholera needs no stronger testimony than this. If more were needed, the experience of the Hamburg epidemic of last year would supply all that was lacking.

### WHAT IS CHOLERA ?

#### HAHNEMANN AND MICROBES.

It will surprise some modern scientists to be told that the microbic theories, which they now advance to explain any and every disease, to the exclusion, almost, of the patients in whose bodies they are found, are by no means of recent date, and that Hahnemann was before them all in claiming for microbes the chief share in the causation of cholera. In a pamphlet published in Leipzig in 1831 \* he vigorously attacked Hufeland who advocated the atmospheric and telluric theory. In the following passage he anticipates modern views of immunity as well as of infection.

"On board ships—in whose confined spaces, filled with mouldy, watery vapours, the cholera miasm finds a favourable element for its multiplication, and grows into an enormously increased brood of those excessively minute, invisible, living creatures, so inimical to human life, of which the contagious matter of the cholera most probably consists—on board these ships, I say, this concentrated aggravated miasm kills several of the crew; the others, however, being frequently exposed to the danger of infection and thus gradually habituated to it, at length become fortified against it and no longer liable to be infected. These individuals, apparently in good health, go ashore, and are received by the inhabitants without hesitation into their cottages, and ere they have time to give an account of those who have died of the pestilence on board the ship, those who have approached nearest to them are suddenly carried off by the cholera. The cause of

\* See *Lesser Writings*, translated by Dudgeon, p. 489.



this is undoubtedly the invisible cloud that hovers closely around the sailors who have remained free from the disease, and which is composed of probably millions of these *miasmatic animated beings*, which at first developed on the broad marshy banks of the tepid Ganges, always searching out in preference the human being to his destruction" [he means, I suppose, having little or no effect on animals—J. H. C.]. "and attaching themselves closely to him, when transferred to distant and colder regions become habituated to these also, without any diminution of their unhappy fertility or of their fatal destructiveness."

With all our microscopes and experiments on living animals (which possess a natural immunity against cholera and are thus peculiarly unfitted for the study of this disease) we have got little further than this. That there is an infective principle there is no doubt, and that it is of an infinitesimal organised nature need not be disputed. Whether it is a comma-shaped bacillus or a straight bacillus, or a variety of bacilli, may safely be left to the microbiologists to fight over. The thing of vital importance to know is, the conditions under which the infection takes place, how infection may be guarded against, and how the disease may be cured when once the infection has "taken." Happily each of these points is pretty fully understood.

#### HABITS OF CHOLERA INFECTION.

Though Hahnemann was doubtless right in attributing cholera to a specific infection, he was perhaps unnecessarily severe on the upholders of the "atmospheric-telluric" theory. In all epidemics there are a number of factors at work; and it is in proportion as these accessory conditions are favourable that the infection spreads. It would be bold to deny that atmospheric and electric conditions have nothing to do with it. Though no quarantine may be observed, one town will escape whilst another is smitten, and that though both may be fed by the same water supply. In India where the disease is endemic, an outbreak in troops may be suddenly determined by the occurrence of a thunderstorm. Or the disease may take one side of a street and spare the other, the fortunate side being the side exposed to the sun. In the outbreak at an asylum of Halle in Germany, the inmates of one wing only were affected, that wing having been built over the site of an old pond. Professor von Pettenkofer's experi-

ments on himself at Munich go to show the same thing. He swallowed an enormous number of bacilli, but remained free from cholera; his contention being that the condition of locality was one of the determining factors, and that in Munich, which had remained free from the disease, although in frequent communication with Hamburg, this condition was wanting.

#### PROTECTION FROM CHOLERA BY HOMEOPATHY: COPPER BELTS.

Recent observations by Professor Charcot, of Paris, and earlier ones by Dr. Burq, have proved the correctness of Hahnemann's observations with respect to the medicinal powers of metallic substances in their insoluble, uncombined state. The mere application of gold, silver, copper, and other metals to the skin in sensitive subjects will produce powerful and characteristic effects; and all persons, whether sensitive or not, who wear these metals next the skin will be brought under the influence of them, although no symptoms may be produced.

In the last volume of the HOMEOPATHIC WORLD,\* I published an extract from one of the medical journals in which a practitioner related a case of copper poisoning which was almost indistinguishable from a case of Asiatic cholera. This property of copper to produce symptoms exceedingly like those of cholera renders it one of the most valuable medicines in the treatment of the disease. But, more than that, it has also proved the very best preventive.

In some of the epidemics it had been noticed, and especially by Burq, that workers in copper mines and in copper foundries were exempt from the disease whilst all around them were being attacked. It was this circumstance which led to the practice of wearing copper plates next the skin, a practice first adopted in Hungary, according to Hahnemann. The custom of wearing rings of copper on the toes by some of the natives of India may have some (conscious or unconscious) connection with its power of affording protection against this disease.

Europeans in India wear round the waist a double band of flannel, which they call a cholera belt; and doubtless the magnetic properties of flannel may increase the bodily resisting power. But these belts have been improved upon, and the protection rendered much more cer-

\* HOMEOPATHIC WORLD, Dec., 1892, p. 536.

tain by the addition to the flannel of a plate of copper, two to four inches in diameter. Such belts are to be procured of all homeopathic chemists; or they may be improvised by procuring pieces of thin copper plate, cutting in them slits at opposite borders, to which straps or tapes may be attached, which may be passed and fastened round the body. The cholera belt should be worn night and day. It may be cleansed from time to time by rubbing with a little vinegar. If copper in this form is objected to, the homeopathic preparation of *Cuprum aceticum* 3 may be taken internally, one drop or two pilules three times a day.

As matters of general precaution it will be well to have drinking-water cisterns and filters cleansed periodically. Care must be taken to avoid all excesses in eating and drinking, and especially fruit that is not perfectly sound and good. Clothing should be sufficient and warm. Especial caution should be observed in leaving off garments in warm weather; and in avoiding getting the feet wet. Those who take these precautions and provide themselves with the protection of copper need have no fear of cholera, however badly it may be about.

#### TREATMENT OF AN ATTACK.

The appalling feature about cholera is the suddenness of its attack and the awful rapidity of its course. If efficient treatment is not put in force at once, the patient may be beyond help before the doctor arrives. In Hahnemann's article published in the *Archiv für Hom. Heilkund*, vol. xi., 1831 (*Lesser Writings*, p. 844), he insists on the necessity of treatment being commenced *immediately* by the friends of the patient, without waiting for a doctor, and the remedy he relies on is *Camphor*. Here are his own directions:—

“When the cholera first appears, it usually comes on in the commencement of the first stage with tonic spasmodic character”—that is, with a *continuous* spasm as opposed to “clonic” or *interrupted* spasms, as shown in jerking movements and cramps of muscles which alternately contract and relax.—“The strength of the patient suddenly sinks, he cannot stand upright, his expression is altered, his eyes sunk in, the face bluish and icy cold, as also the hands, with coldness of the rest of the body; hopeless discouragement and anxiety, with dread of suffocation, is visible in the looks; half stupefied and insensible, he moans or cries in a hollow, hoarse tone of voice, without

making any distinct complaints, except when asked ; burning in the stomach and gullet, and cramp pains in the calves ; on touching the precordial region he cries out ; he has no thirst, no sickness, no vomiting or purging.

“In the first stage *Camphor* gives rapid relief, but the patient's friends must themselves employ it, as this stage soon ends either in death or in the second stage, which is more difficult to be cured, and not with *Camphor*. In the first stage accordingly the patient must get as often as possible (at least every five minutes) a drop of *Spirit of Camphor* (made with one ounce of *Camphor* to twelve of *Alcohol*) on a lump of sugar or in a spoonful of water. Some *Spirit of Camphor* must be taken in the hollow of the hand and rubbed into the skin of the arms, legs, and chest of the patient ; he may also get a clyster of half a pint of warm water, mingled with two full teaspoonfuls of *Spirit of Camphor*, and from time to time some *Camphor* may be allowed to evaporate on a hot iron, so that if the mouth be closed by trismus, and he can swallow nothing, he may draw in enough of camphor vapour with his breath.

“The quicker all this is done at the first onset of the first stage of the disease, the more rapidly and certainly will the patient recover ; often in a couple of hours, warmth, strength, consciousness, rest, and sleep return, and he is saved.”

There is no need to dwell on the resemblance between the symptoms of the first stage of cholera and the symptoms of *Camphor* poisoning. The correspondence is most striking. The violent chill, sudden failure of forces, and spasm of surface blood-vessels are common to both ; hence the appropriateness of *Camphor* to the condition.

The preparation of *Camphor* now most generally used is the concentrated tincture of Dr. Rubini, who discovered the method of preparing it. It must be remembered, however, that *Camphor* in this strength is a poison, and must be used with great care. As *Camphor* in this strength is not soluble in water it is best administered on a small lump of sugar ; two or three drops given in this way every five minutes is the best mode of using the remedy. At the same time friction with *Spirit of Camphor*, as advised by Hahnemann, should be employed, and every means taken to induce the reaction of warmth and perspiration. Hot flannels, hot bottles to feet, legs, and sides will help to restore warmth. The heat of these should be tested by the hand of the attendant, or if the patient is insensible a burn may be caused without his being able to make a sign.

Another important point to be observed is to allow the patient to be perfectly at rest. Many a death has been precipitated by removal to a hospital. When diarrhœa sets in means should be taken, by means of warmed cloths or a draw-sheet, to have the stools taken away without disturbing the patient.

In a large number of cases no other remedy besides *Camphor* will be required; and *Camphor* may be given even in the second stage so long as it continues to do good, if the second stage has come on in spite of its administration in the first. *Camphor* is also the remedy for those modified cases in which there is simply chill, weakness, and pains in the body with or without diarrhœa, the patient not being prostrated with the fully-developed attack.

#### THE SECOND STAGE.

In some cases the first stage is very slightly marked, and in many the second stage has already supervened on the first before anything has been done. To quote Hahnemann once more:—

“There are cases of cholera, especially in northern regions, where the first stage, with its tonic spasmodic character, is hardly observable, and the disease passes instantly into the second stage of a clonic spasmodic character: frequent evacuation of watery fluid, mixed with whitish, yellowish, or reddish flakes, and, along with insatiable thirst and loud rumbling in the belly, violent vomiting of large quantities of the same fluid with increased agitation, groaning and yawning, icy coldness of the whole body, even of the tongue, and marbled blue appearance of the arms, hands, and face, with fixed, sunken eyes, diminution of the senses, slow pulse, excessively painful cramps in the calves and spasms of the limbs.”

In such cases, says Hahnemann, the administration of a drop of *Camphor Spirit* every five minutes must only be continued as long as *decided* benefit is observable. The remedies he advises for the second stage are *Cuprum* (that is the homeopathic preparation of copper) and *Veratrum*. Hahnemann puts copper in the first place; but later experience in routine practice has tended to reverse the order.

One point to be observed is that as soon as *Camphor* is done with as *the* remedy it must be removed, as it acts as

an antidote to copper and the other remedies for the second stage.

When *Camphor* has ceased to do good, or when the case has already entered the second stage before treatment is commenced, observing all the formerly mentioned means of keeping the patient warm and at rest, give *Veratrum Album* 1, two drops in a teaspoonful of hot water every five minutes until decided relief is obtained, and then lengthen the intervals between the doses. In some cases only a very few doses will suffice to remove the patient out of danger.

*Arsenicum alb.* 3, two-drop doses in hot water every five or ten minutes where there is great restlessness, and anguish with burning thirst.

*Cuprum metallicum* 6, two drops in the same way, when the cramps are excessively severe.

With these medicines and measures the death-rate of cholera epidemics need not reach a high figure. The most dangerous feature of the disease is its terrible swiftness; but this must not be allowed to paralyse the bystanders. Treatment must be commenced at once. If there is a homeopathic doctor within reach, he must be sent for; but as doctors, in the rush of an epidemic, cannot always attend at once, precious time may be lost before he can reach the patient. This time must be utilised by the friends, and then he will find his work greatly simplified on his arrival. Under no circumstances must patients be allowed to have opiates, or to have salt solutions injected into their veins. The Hamburg mortality is a sufficient commentary on this class of practice.

In regard to diet, during the first stage, especially if there is sickness, nothing need be given. If there is thirst, hot drinks instead of cold must be given—hot water, milk and water, or thin barley-water. Hot coffee has been found of great use in promoting perspiration.

Among the foods that may be taken during an attack, if prolonged, and during the period of recovery, the various infant's foods are the best, as they are assimilated with the least effort. Mellin's food, Carnrick's, Allen and Hanbury's, are all good, also Horlick's Malted Milk, and Koumiss. Whey Koumiss, of No. 3 strength, will be the most suitable, as it is the lightest, and has astringent properties.

Whatever nourishment is given should only be allowed in small quantities at a time.

To avoid relapse care must be taken not to allow the patient to rise from bed too soon; and the diet must be strictly regulated until the strength of the digestive system is fully restored.

### HOMEOPATHY IN THE CHOLERA EPIDEMIC AT HAMBURG.

It was a matter of surprise to many homeopaths that during the height of the cholera epidemic at Hamburg last summer nothing was heard of the treatment of the disease by the method of Hahnemann. It was felt that some of the representatives of our Art on the spot must have been busily engaged to the public advantage; and it now turns out that such was indeed the case, but the work was done so quietly and unostentatiously that the caterers for the public press passed it by in their eagerness to give full details of the gruesome horrors of the cholera hospitals.

Dr. Hesse, of Hamburg, has communicated his experiences to the *Allgemeine Homœopathische Zeitung*, a translation of which, by Dr. Lambrichts fils, of Antwerp, appears in the February number of the *Revue Homœopathique Belge*.

Dr. Hesse thinks that the greater part of the population of Hamburg was more or less affected. One of the chief features of the epidemic in the milder cases was early morning diarrhœa, which was controlled, as we should expect, by *Sulphur*. In many patients he found a morbid excitability and agitation; they were suffering from *fear* of cholera, diarrhœa, nausea, and borborygmi or rumbling, with terrible restlessness. In these cases *Arsenicum* did very great service. As a prophylactic Dr. Hesse recommended *Sulphur* in the form of flowers-of-sulphur dusted on the inside of the stockings. The "cholera belt" with the copper plate does not seem to have been used. When a patient was seized with the disease, the first thing Dr. Hesse endeavoured to do was to induce sweat. Friction with compresses saturated with spirit of camphor relieved cramp. *Verat.-alb.* was the first medicine given, and if that did not soon produce reaction, *Rubini's Tincture of Camphor* was next given. The medicines employed were

*Ipec.*, *Ars.*, *Cupr.*, *Nicot.*, *Cupr.-ars.*, *Verat.-alb.*, *Camph.*, and *Secale*. *Cupr.-ars.* succeeded in one case where *Verat.* failed.

Dr. Hesse had among fully-developed cases a mortality of 20 per cent., the general mortality of the city being 40 to 45 per cent.

Another experience was taken from the *Homœopathic Envoy* of March :—

“ Mr. A. Paasch, of Hamburg, not a physician, but a layman who is versed in homeopathy, relates an interesting experience with the cholera, in the recent epidemic of that disease in Hamburg. As the epidemic progressed, the number of physicians was unequal to the call for aid, and educated laymen were called upon. He announced himself, and was assigned to a place as assistant to a district physician. *Comphora* was first given, without result. On carefully studying the symptoms, *Arsenicum* was chosen as the epidemic remedy, and the choice proved to be a good one. *Arsenic* was also the epidemic remedy of the visitation of 1837, as Vohsemeyer reports. He began with the remedy in the sixth dilution, but only succeeded in the first stage, when there were pressure in the stomach, anguish, vertigo, great thirst, weariness, &c. ; yet, in the graver cases, the symptoms were those of *Arsenic*—being the above, with the addition of great restlessness, especially worse of nights ; watery vomiting, renewed after drinking the slightest quantity of cold water ; watery stools ; dark bluish rings around the eyes, the eyelids falling away from the eyeballs, and not covering the globe ; cramps in the calves of the legs ; facies hippocratica, and ice-cold and bluish extremities. As he descended to the fourth and third triturations (dec.), he found that he could save the patients when they had reached the second stage. In order to prevent the radiation of heat, which was progressing too rapidly from the disease itself, instead of cold drinks and cold applications, as the allopaths prescribed, he ordered warm and moist applications to the abdomen and chest, hot stones or bottles to the feet, while the patient was covered up to his neck with the bedclothes (for the cholera patient constantly throws his arms out upon the bed coverings in his anguish). The cold limbs are rubbed with a solution of camphor in alcohol. The patient was not allowed to arise from his bed to pass his stool, but passed it in bed into cloths that, when soiled, were simply replaced by warm ones. In order to assist the rapid outbreak of perspiration, a cup of strong coffee was given with the best results. When the patient was in an advanced stage, a very low dose of *Arsenic* would produce a



wonderful change; for example, in cases where there was complete loss of voice, great dyspnea, asphyxia, retention of urine, the extremities icy-cold and blue, terrific cramps in the legs and chest. The writer has snatched a number of such cases from certain death by the administration of a very low dose of *Arsenic*. *Cuprum* was of value when there was abdominal gurgling; the drinks could be heard to gurgle down the esophagus; spasms, beginning in the fingers and toes, opisthotonus, and boring the head into the pillow. *Sulphur* was also indicated in a few cases, together with the *Arsenicum*, when the diarrhea would drive the patient out of bed at five in the morning, or where the patient was of a lymphatic constitution. *Secale* was also administered in connection with *Arsenic*, when there was formication in the fingers and toes, with spasmodic spreading of the fingers, and when ejection of a watery vomit was present, which passed over into bloody vomiting. In none of the cases were the symptoms to be interpreted as indicating any other remedy than *Arsenic*. Only in one case did *Veratrum album* seem indicated, on account of the cold sweat on the forehead, but it produced no improvement and had to yield to *Arsenic*. He found that patients must be very careful not to leave the bed too soon, as it would surely bring on a relapse. Great care had to be used in eating and drinking after an attack.

The most rapidly coursing form was that known as cholera sicca. Here there are neither diarrhea nor vomiting, but merely great anxiety, terrific pain in the chest, and death in from one to three hours. These patients are chiefly found speechless, asphyxiated, and gasping for breath. Two of such cases were saved, by the administration of *Arsenic* in one case, and *Arsenic* and *Carbo vegetabilis* in alternation in the other. All the others under his care died, for no reaction followed the indicated remedy. In one such case he was accused by the allopathic physician of poisoning the patient by *Arsenic*, and being the cause of his death, though the physician himself had said that the case was hopeless before the writer had seen it. From a record of his cases, he deduces a death-rate of 5 per cent. in the cases of the second and third stage, excluding the slight ones.—*Leipziger Populäre Zeitschrift fuer Homœopathie*, Nos. 22 and 24, 1892. Translated by *Hannemannian Monthly*."

## A CASE OF PARAPLEGIA CURED IN THREE DAYS BY ONE REMEDY ONLY.

By Dr. GUSTAV PROELL, Meran.

A GIRL of 11 years, a workman's child, at Meran, was carried on a bath-chair to my house, and brought in the

arms of her mother and another woman to me, because she could neither stand upright nor walk. She suffered twenty days before from influenza, and fourteen days before fell over a staircase on her right hip and knees without causing an open wound, but with pains there. The parents neglected the child, who became paralytic in both legs. On the instance of a friend, who saw her after fourteen days, they resolved to bring the girl to me. Hearing that the room, and principally the wall close to her bed, was very damp, I gave her *Rhus t.* 6, three times a day three globules, because she suffered during the influenza from rheumatic fever, was of mild temper, and often shivering. I found all the organs in order, and both legs of the same length. The next day she could already stand upright for some minutes; the following day walk some paces. The third day I saw her walking slowly through the little room. No more pains. On the seventh day she walked alone, without any help, to the school (fifteen minutes' distance). It is now twelve days since, and she becomes stronger from day to day.

## REMARKS ON THE "CHRONIC DISEASES"

(Vol. I.).

By EDWARD MAHONY, M.R.C.S., L.S.A.

**SYMPTOMS of latent psora.** The word "latent" is specially to be borne in mind as many of the symptoms, as will be seen, are apparently small and of trifling importance, and in many cases have existed so long and their possessors have become so habituated to them as to consider them only a part of their constitution or idiosyncrasy, and as to mentioning them for purposes of treatment and removal such an idea has not crossed the minds of most persons. They are symptoms, nevertheless, which may affect all parts of the body, and it is both instructive and interesting in practice to notice how, often, when questioning has brought out one or two such symptoms, an intelligent person will wake up to the fact that other similarly unimportant trifles as he or she had supposed, had existed for years, more or less, and at uncertain periods, but had never been really absent from the time they were first noticed, even if it were childhood. It is very important too for treatment, for often in this way links can be proved which show that a certain

unnatural condition had existed the whole time, and that though perhaps several illnesses had occurred and been treated, and successfully, nevertheless certain small ailments of ten, twenty, thirty, or it may be fifty, or even more years duration, were still present. Hahnemann mentions sixty such symptoms, but it will suffice to mention one from each sphere or organ so as to give an idea of the kind of sufferings which are so frequently passed by as of no moment, and therefore permitted to slowly wear away the vital powers even to the end of life.

1. Sweat upon the head in the evening after having fallen asleep.
2. Frequent pain on one side of the head, or toothache from even moderate mental emotions.
3. Epistaxis (nose-bleed) in girls and young men often very violent.
4. Paleness of the countenance and deficient tonicity of the muscles.
5. Frequent inflammation of the eyes.
6. Sourish taste in the mouth.
7. The tongue is white, pale—often parched.
8. Insatiable hunger and want of appetite following each other in alternation.
9. Frequent passing of ascarides, lumbricoides and vermiculares (the principal varieties of intestinal worms).
10. Frequent cramps in the muscles of the arms and hands.
11. Frequent or tedious coryza, or dry cold in the head, or impossibility of catching cold, even though the person is much exposed to the causes of cold, and has been constantly affected with it formerly.
12. Frequent inflammation of the throat, frequent hoarseness.
13. Short and light coughing, early in the morning, in quick repetition.
14. Either the whole body, or only the head, neck, breast, abdomen, feet, easily catch cold, especially in a draught of air—then in a note—persons whose organisms are not tainted with the psoric virus, do not catch cold from being exposed to a draught, or damp and cold air, though they may find it disagreeable. This last remark I particularly commend to that large class of persons, in apparently all classes of life, who insist upon closing doors and windows in public conveyances and public buildings, poisoning the air thereby with carbonic acid gas, and in addition often gas, slowly, thereby, poisoning themselves and their neighbours.
15. Straining, which often occurs from the slightest cause.
16. Frequent falling of the hair, dryness of the hair, scales upon the scalp.
17. Inclination to erysipelas on different parts of the body.
18. Interruption of the menstrual functions, irregularities, flow too abundant, too little, &c.
19. Weariness on waking

up in the morning, unrefreshing sleep. 20. Too easy sweating during the day, even with little motion; also, absence of sweat which nothing can bring out. 21. Dark urine. 22. Distended veins of the legs (varices). 23. The corns pain, even when the shoe does not pinch. 24. One or more joints crack during motion. 25. The pains manifest themselves again during rest, they disappear during motion. 26. Uneasy, frightful, or too vivid dreams. 27. Unhealthy skin; every little wound ulcerates; the skin of the hands and the lower lips becomes easily chapped. 28. Frequent boils, frequent paronychias (pus in the fingers). 29. Here and there scaly places upon the skin, causing a voluptuously delightful sort of itching, and a burning after the place has been scratched. 30. Here and there a vesicle characterised by an intolerable but voluptuously delightful itching. At the top it is filled with pus, and there is a burning after it has been scratched; it is often found upon a finger, on the wrist, or elsewhere.

I will only call attention, before passing on, to the variety of these apparently insignificant ailments, and to the fact of the frequency of their occurrence without assignable or at least with very insufficient, cause. "They do not," says Hahnemann, "prevent a person leading a tolerably comfortable existence, provided he is young and robust, is not obliged to fatigue himself, &c., but in all such persons "a trivial cause, an ordinary vexation, a cold, an irregularity in the diet, &c., may, in a more advanced age, *cause a violent though short attack of disease*, a violent colic, inflammation of the chest or throat, erysipelas, fever, and similar diseases, the vehemence of which often is out of proportion with the moderately exciting cause." I beg my readers particularly to weigh the above sentence which is pregnant with instruction in the present day, when so frequently we hear of persons cut off suddenly, when apparently in prime health, by a two or three days' attack, for example, of bronchitis or pneumonia, and many other cases where the now stock phrase of cardiac disease or cardiac failure cannot, however ingenious the effort, be made to cover the case. No, the truth remains that a large majority of the human race dies of undetected life-existing and ancestrally inherited psora, which sudden, slight causes have enabled this unsuspected foe to cut down, in all ranks of life and all stages of growth, and all ages of "the seven ages of man." Why do so many infants die

of convulsions when teething? Why do they have convulsions at all? Why so many deaths from diarrhea, measles, pneumonia? Why, if exposed to the same sources of infection, do some persons so immediately "take" almost any poison, while others equally exposed escape? These, and a thousand other questions which affect in the most forcible manner the statistics both of diseases and death rates, find, I believe, their true solution in this unmistakable fact of *latent psora*. Let such persons, says our author, get their circumstances altered to the very opposite of those above mentioned, or let them have an attack of some acute disease, or "*allopathic remedies which have been improperly given,*" and "some one of the psoric chronic diseases breaks forth" (this of course being the proof of its previous latent existence), the symptoms varying "in different individuals according to constitution, hereditary disposition, education, habit, mode of life, diet, occupation, the tendencies of the mind, morals," &c.

It will be seen from the above remarks how important a matter for the life and well-being, not only of the individual but of untold millions of yet unborn infants, is the detection and careful scientific treatment and cure of this fell chronic miasm while yet latent in the system, and it is very plain also that childhood is a better time for eradication than early adult life, and early life than middle life, and middle life than advancing age; and I cannot forbear here, as it bears directly on the subject, and is a most evident logical deduction from the premises, calling attention to the importance of the treatment of mothers during the whole period of pregnancy, both for their own sakes, then and during parturition, and for the sake of the life that is to be. I have witnessed myself such proofs of the value of this in all these ways, and also in preventing the abortion habit, as it may be termed, that I cannot but thus express myself in the strongest manner possible. We next come to the "symptoms characteristic of the secondary diseases in which the internal psora generally terminates." These he states that he has collected at the bedside of patients (called in these days clinical symptoms), and he observes, "there are many which are opposed to each other." This is an important point to bear in mind, as a similar thing is found in the provings of the medicines, and this helps to confirm the conviction of the value of the only true way of getting reliable information as to the

action of medicines, namely, from their effect on those who have taken them when in health. The list of symptoms given extends over thirty-two pages, so I will endeavour to select in such a manner as to give a proper idea of the *kind* of symptoms which are found, for this is a most important point in practice. Before doing this I will again mention what I believe has been before mentioned in these papers, namely, the four essential points to remember in reporting a case. 1. The actual symptoms, and where they occur, *e.g.*, a pain or other sensation, a swelling or lessening, a discoloration, &c. 2. The kind of symptom, such as the kind of pain, the kind of swelling, hard or soft; and so on. 3. The conditions under which the symptoms occur, of time, position, food, &c., &c. 4. The accompaniments, *e.g.*, giddiness with eructations: pain with feeling of cold or heat—one symptom with improvement of another. Next be it noted that the mental and moral symptoms always lead the way—command the case. Hence the importance of detailing these always as far as known. Coming now to the symptoms we have—1. Vertigo. Remembering our four points, we have (a) the thing itself; (b) the kind of—"attacking him with a jerk in the head"—"she appears to herself either too large or too small, other objects likewise appear either too large or too small"; (c) in walking, closing the eyes, looking down; (d) frequent eructations, nausea. 2. Numbness and giddiness of head; at times deprived of thought; (b) as if absent; (c) in the open air; (d) none mentioned. 3. Headache; (b) dull, pulsating; (c) morning, waking up, afternoon; (d) nausea, vomiting. 4. Scalp: eruptions; (b) scald, malignant scabs; (c) worse in the open air; (d) shooting pain, intolerable itching. 5. Paleness of face; (c) in first sleep; (d) blue circle round eyes. 6. Inflammation of various kinds; (b) meibomian glands inflamed; (c) worse daylight; (d) none. 7. Hearing excessively irritable and sensitive; (c) worse from sounds; (d) swelling of parotid glands. 8. Troublesome sensation of dryness in nose even when the air passes freely. 9. The inside of the lips is set with little ulcers or pustules. 10. Cutaneous eruptions, where the skin is covered with the beard, with itching. 11. Glands swollen, suppurating. 12. Gums bleeding on the slightest touch. Gums disappear, leaving the front teeth bare, even their roots. 13. Toothache of countless kinds from many sorts of exciting causes. It may be

remarked here how more than useless is the frequent tooth extraction which prevails in the present day, as it clearly cannot reach the psoric root or cause, and how frequently is this proved by the fact that when the offending tooth is removed it is found to be perfectly sound, and pain frequently then commences in another tooth. The barbarity which still exists in the dominant school of excising a portion of the nerve for facial or other neuralgia may be referred to here: this is even more senseless and useless.

14. Painful pustules and sore places on the tongue. 15. Flow of blood from the mouth, often in great abundance. Constant flow of saliva, particularly in speaking, especially in the morning. 16. Frequent internal inflammation of the throat, and swelling of the parts which aid in the process of swallowing. 17. Bitter taste in the mouth, especially in the morning. Fœtid and putrid taste in the mouth. 18. Risings from the stomach, empty, loud risings of air merely, uncontrollable, lasting often for whole hours, and frequently in the night. 19. Nausea, early in the morning after rising from bed. Vomiting of blood. 20. Spasms of the œsophagus often prevent swallowing: this sometimes causes a man to die of hunger. (N.B.—Modern surgery would probably suggest excising a portion or even removing the whole of the œsophagus, as it is now customary to remove most of the internal organs.) 21. Violent craving for food, with rumbling and grunting in the belly. Want of appetite: only a gnawing, twisting and writhing in the stomach forces her to eat. Feeling of cold in the pit of the stomach. 22. Thirst: constant thirst, or only in the morning on rising. 23. On eating, sweat breaks out immediately. After a meal, oppression and burning at the stomach; distension of the abdomen; weary and sleepy; feels as if he were intoxicated. 24. Cutting pains in the abdomen; in various places. Pain in the liver, pressure and tension. Stitches, especially on stooping suddenly. 25. Inguinal hernias: they become painful through singing and speaking. 26. Constipation: the stools often delay for several days, though there is frequently an unsuccessful desire for stool. Then follow details of stools of unnatural appearance of various kinds. 27. Diarrhea, lasting for weeks, months, and years. Hemorrhoids of various kinds. 28. Anxiety and loss of strength during micturition. Urine sometimes passes off in too large a quantity: this causes a sudden loss of strength. Painful retention of urine (in

children and old people). 29. Nightly pollutions, once, twice, three times a week, and sometimes every night. Want of sexual desire in both sexes, either frequent or constant. Sterility, impotence without there being any organic defect of the parts of generation. (N.B.—Had this been recognised, and suitable *internal* treatment administered—not local and more than useless applications—probably many a bitter marriage with a *finale* at the divorce court would have had the properly-to-be-anticipated fruitfulness and corresponding domestic happiness.) 30. Disorder of the menstrual functions in quantity, quality, time, &c., also leucorrhœa of all kinds. 31. Premature delivery. During pregnancy there is great lassitude, nausea, frequent vomiting, swoons, painful varices of the veins of the thighs or legs, also sometimes of the labia, hysteric complaints of various kinds, &c. I once more call attention to the important point that there is no need in the nature of things for women to suffer what are accepted as the inevitable accompaniments of the pregnant condition, but for all of which the law of similars, applied as Hahnemann directs, has corresponding remedies.

In this connection (of sexual difficulties) "leucorrhœa of a more malignant kind" is referred to, "frequently followed by hysterical symptoms of every kind, moral and mental derangements, melancholy, alienation of the mind, epilepsy," &c., and the pungent question is asked, "Has cancer of the womb any other origin except *psora*?"

Those who follow in practice Hahnemann's teachings will have no difficulty in all these questions, but an increasing conviction of the truth of what he taught on these points, and will be saved from the misery and positive torture of local applications, whether as lotions, ointments, caustics, setons, hypodermics, or internal tonics, blood purifiers, and all roundabout applications which do everything except touch the root of the whole trouble; and will find, on the other hand, that while much useless suffering is saved, even in the most hopeless cases, what is technically known as euthanasia (easy dying) is much more effectually accomplished than by any other known treatment whatever.

A second long list of symptoms now follows, some of which may advantageously be mentioned and briefly commented on. Permanent hoarseness and aphony (loss of voice), often for years. Cough, of various kinds. Sup-



uration of the lungs. Various pains in the chest. Asthma, on moving his arms, not in walking. Attacks of suffocation, especially after midnight, affected by various positions. Beating of the heart, with anxiety, especially during the night. A hard, enlarging, and indurating gland, with painful stitches in one of the mammæ. These are, of course, all chest and respiratory symptoms; but before going further let it be noted first, that the person is supposed to be more or less what is familiarly spoken of as "subject to" the various above-enumerated troubles, and secondly, that a person accepting this teaching is at once freed from all narrowness of thought and mere consideration of local symptoms, and, as ever, the question prominently presents itself, What is the diseased condition? or, in stricter homeopathic language, What is the disordered vital force which originated the now presenting symptoms? and at once, as a consequence, all that is wrong in the entire economy is sought to be ascertained, and very often, in such investigation, some small apparently remote symptom comes to light and proves the effectual key to unlock, for healing purposes, the hidden recesses of the organism.

Facts, and combinations of facts, not suppositions and names, occupy and interest the mind, and prove of actual value in result. The person and his or her entire troubles engage the attention, and the now recognised dangers of specialism and specialists are entirely avoided, to the mutual satisfaction of both patient and doctor.

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THE METRIC SYSTEM.—The American Association for the Advancement of Science says that the following lines are all that is necessary for the physician to learn in order to prescribe in the metric system: 1,000 milligrams make one gram. 1,000 grams or cubic centimeters make one kilo or liter. 65 milligrams make one grain. 15½ grains make one gram. 21 grams make one ounce, Troy.—*New York Medical Times*.

DEATH FROM AN OVERDOSE OF PODOPHYLLIN.—On March 13th a young married woman named Mrs. Howie, staying at 14, Bankhall-street, Glasgow, died from an overdose of podophyllin. She had been suffering from neuralgia, and a friend advised her to try 2d. worth of antipyrin powder. Unfortunately she forgot the name of the powder, and on the next recurrence of the attack, on Saturday, March 11th, it was podophyllin, instead of antipyrin powder, that was sent for to the shop of Dr. Samuel Clark, 324, Rutherglen-road. Mrs. Howie took 20 grains of the powder, became ill almost immediately, and died within thirty-two hours.—*Chemist and Druggist*, March 25th.

## MATERIA MEDICA.

A STUDY OF *LACHESIS*, WITH SOME COMPARISONS.\*

BY JOHN H. CLARKE, M.D.

FIRST let me sketch for you the picture of *Lachesis*, the first in point of time of proving, as well as in importance, of the entire group. The richness of the pathogenesis of *Lachesis* bears a remarkable proportion to the thoroughness with which it has been proved in the higher dilutions.

Leaving *Lachesis* the serpent let us come to consider *Lachesis* the "dynamis," or force. In the tincture of *Lachesis* 80 there is, as far as chemistry and physics can tell, nothing but a little spirit and water. A jury of experts in physical science would unhesitatingly pronounce such to be the case; and it would be surprising if they did not stigmatise as charlatans all who administered the preparation to patients under the pretence that it contained something more. Yet it is from the effects of this force in *Lachesis* 80—impalpable, invisible, intangible as the current that passes along a telegraph wire, or a nerve—tested on healthy human beings, that the bulk of our knowledge of *Lachesis* the medicine is derived. Given in this attenuation it does not kill, but it has profoundly affected the human organism, producing symptoms in every sphere so marked and characteristic as to constitute it one of the most important instruments of the homeopathist's armamentarium.

The most compact and complete record of the provings of *Lachesis*, the symptoms being given in the order of their occurrence, is to be found in that most valuable work, the *Cyclopædia of Drug Pathogenesis*; but I have not time to-night to do more than refer you to the provings. I must content myself with sketching as briefly as I can a picture of the force we carry in our cases. The completion of the picture of *Lachesis* is largely due to observations gathered during its clinical use. The clinical test is the complement of the provings. It shows how far the symptoms of the provings are genuine drug effects; it brings out in relief those symptoms which are more characteristic of the medicine; and in the new symptoms observed in sensitive persons who are taking it for curative purposes it fills up lacunæ in the symptom-record of the provings. For the full picture of the medicine *Lachesis*, Hering's *Guiding Symptoms* must be consulted.

One of the best methods of obtaining an idea of the action of this or any other drug is to invest it, in imagination, with a kind

\* Post-graduate lecture on the *The Serpent Poisons*, continued from p. 173.

of bi-sexual personality—"the *Lachesis* Patient"—endowed with all the characteristic features and symptoms that appear in persons under the drug's influence.

Drugs are like diseases in this: no drug and no disease produce in one individual all the symptoms that the drug or the disease is capable of producing. To get a full picture of the drug or disease capabilities, a number of provers or patients must be taken, and the effects produced on all combined into one picture to give the drug or disease type. In describing *Lachesis* I shall take the symptoms in the order of the Schema.

GENERAL.—The *Lachesis* patient is a very hyperesthetic person, cannot bear anything tight anywhere, and more especially about the parts affected. If there is any sore throat the neck-band must be loosened; if the heart is disturbed the corset must be taken off; and if there is any uterine or ovarian trouble the patient is continually trying to lift off the clothing so that it shall not touch. (Herein it is the opposite of *Nat. Mur.*, which has > from tight clothing; *Arnica* has general soreness from over-full blood-vessels; *Lach.* sensitiveness of nerve endings). Generally the complexion is dark, dark hair and eyes, but it may be sanguine with red hair. *Lachesis* is a left-sided remedy; pains or symptoms occur on the left side, or begin on the left side and proceed to the right (*Sulph.*, *Thuja.*, *Spig.*, opposite of *Lyc.*).

MORAL.—The temper is by no means pleasant, but on the contrary is irritable to a degree, irascible and even violent (*Ars.*, *Nux.*). If a child, it will fight its nurse. There is a hastiness of speech and action as with *Hepar*. Jealousy is strongly marked, also suspicion, as the fear of being poisoned. *Hyoscyamus* resembles it in both these features. There is dread of disease (*Calc.*, *Nux.*, *Puls.*), especially of heart disease (*Calc.*). Aversion to being caressed (*Cina.*, *Ars.*). Despondency, sadness (*Lyc.*).

MENTAL.—There are many hallucinations. Imagines herself dead, or nearly dead, and wishes some one would help her off. Makes errors in time; does not know morning from afternoon. In a case of apoplexy in an old lady, who always greeted me with "good afternoon," no matter what time of the day or night I paid my visit, the time sense was completely restored by *Lachesis* 30. Very loquacious (*Hyoscy.*, *Stram.*); jumps from one subject to another. These symptoms come out in delirium, either of fever, delirium tremens, or mania. Feels as if under some overwhelming power; has two wills (*Anacard.*, *Bell.*). The intellect is stimulated; feels as if she could study without fatigue.

SENSORIUM.—The sensorium is affected. Faintness and giddiness < on closing the eyes or after sleep.

**SLEEP.**—This brings us to the heading “sleep,” which gives us one of the key-notes of *Lachesis*, < from sleep: the patient sleeps into an aggravation. Whatever the case, should this particular aggravation be marked, *Lachesis* will demand careful study, and will most likely prove to be the remedy. No other drug has it so markedly, though Sulphur and Nat. Mur. have it also, and the other serpent poisons in less degree. Phosphorus is the opposite here, having > from sleep.

The patient is sleepy, but cannot sleep. Great loquacity. In delirium there is low muttering; this condition may lapse into coma. Dreams of serpents; of suffocation.

**HEAD AND EYES.**—*Lachesis* has a great variety of headaches with sharp and throbbing pains, < sitting or lying; over the left eye and at root of nose; although there are right-side headaches as well. Headaches are relieved by the onset of a discharge—as the monthly period or nasal catarrh. *Bryonia* has headache from suppressed coryza, but the discharge is more yellow, and the < by least movement more pronounced.

With the headaches there is partial blindness, dim vision, dark spots, black flickerings.

**EARS.**—Correspondingly there is roaring or singing in the ears, which is relieved by putting the finger into the ear.

**NOSE.**—There are a number of symptoms related to the nose—catarrh and soreness.

**MOUTH, TEETH, AND TONGUE.**—Sore mouth; teeth decay and crumble; glossy tongue, which trembles and catches on the teeth when an attempt is made to protrude it. The glossy red tongue is very characteristic. *Apis* comes next to *Lachesis* here.

**THROAT.**—Any kind of sore throat beginning on the left side, with *difficulty in swallowing liquids, but less difficulty in swallowing solids*. Here you will call to mind the resemblance to hydrophobia with which *Lachesis* corresponds in many other particulars. The excessive hyperesthesia met with in hydrophobia is fully paralleled in the symptoms of *Lachesis*; and *Lachesis* is one of the remedies which is credited with several cures of this fearful disease.

**DIGESTION.**—*Lachesis* is a terrible dyspeptic, nothing, not even the plainest food, agrees. Acids and wine <; fruits >. There is fulness after eating a very little (like *Lycopodium*), and great sensitiveness of liver and abdominal organs. There is jaundice.

One very characteristic symptom of *Lachesis* is a sensation as if a ball were lying loose in the abdomen or in the bladder, rolling about as the body moves.

**STOOLS, RECTUM, ANUS.**—Natural stools are horribly offensive. Chronic diarrhoea, with great debility, < in spring weather. Spasmodic tenesmus (differing from that of *Mercurius*, which is persistent and not spasmodic), the rectum protrudes, and the

anus constricts it; the patient wants to strain, but cannot on account of the pain it produces. Piles are protruded. Piles during the menstrual period. After stool there is a sensation as if little hammers were beating inside the rectum, or as if the anus were being tugged up from within, especially on the left side. In typhoid there is hemorrhage, the blood having the appearance of *charred straw*—a characteristic of the *Lachesis* hemorrhages.

The urine is dark, almost black (*Colch.*, *Carbol.*, *As.*), often containing blood. Foaming urine is characteristic; albuminous.

**GENERATIVE SPHERE.**—*Lachesis* has a large number of symptoms in the generative sphere. The male experiences increased lasciviousness with diminished power, herein showing one of the many points of contact of *Lachesis* with alcoholism. But the female generative organs show the largest array of symptoms. *Lachesis* is pre-eminently a climacteric medicine for the woman; the flushings, hyper-sensitiveness, irritability, spasmodic affections of this period are strongly mirrored in the *Lachesis* provings. A grand characteristic of the drug is SUFFERINGS FROM NON-APPEARANCE OF NATURAL DISCHARGES, WITH RELIEF TO ALL THE SYMPTOMS WHEN THE DISCHARGE COMES ON. Dysmenorrhœa when the symptoms are relieved as soon as the flow comes on (*Sep.* also; *Lyc.* has > of sadness and irritability. *Pulsatilla* is just the opposite: pains come on with and increase with flow). Left ovarian pain is very marked. Great sensitiveness about the lower abdomen; inability to bear the weight of clothing or of bed-clothes.

The menstrual period is scanty, feeble, lumpy, black, very offensive, pains in hips and bearing down on left ovary relieved as soon as the flow comes on. At the climacteric the flow may be profuse (herein resembling *Pulsatilla*), but the ordinary menses of *Lachesis* are scanty.

Another characteristic symptom of *Lachesis* is an open feeling. The patient feels that all the parts are open—the os uteri and the vagina. *Phosphorus* has the same symptom in the anus, and *Sulph.* in both anus and vagina; but it is more pronounced in *Lachesis* than in any other. *Lachesis* has many bearing-down symptoms and sinking sensations like *Sulphur*, *Lilium*, *Sepia*, *Belladonna*, &c. Pain under left breast. There are lancinating pains in the breasts, and herpetic eruptions. Mammary cancer with lancinating pains, when there is purple coloration of the tumour, has been greatly benefited in *Lachesis*.

**RESPIRATORY ORGANS.**—In the respiratory sphere the most characteristic symptom is a tickling, irritating cough, worse after sleep or worse in the afternoon, arousing the patient with pain as if choking: must loosen neck-band. A phthisical patient who was practically cured of the lung affection, after a cold had

a peculiarly irritating, dry, hacking cough, coming on every afternoon. After *Bell.* and *Lycopod.* had failed to make any impression, *Lachesis* cured the cough and completed the cure of the patient in a very short time. The cough ends in expectoration of tough, green, purulent matter, which is gagged or vomited rather than coughed up. A little teasing cough; feels as if a little bit of phlegm to come away; relief when he can get it up. Asthma, worse after sleep; finally coughs up a quantity of watery phlegm with great relief. Cough at menstrual period—when it is going away (*Nux mosch.*, cough of pregnancy). Typhus pneumonia. Threatened paralysis of lungs (*Antim. tart.*, *Dulcamara*) < on arousing from sleep (*Kali-c.*, *Carb.-v.*, *Mosch.*, *Am.-c.*). Touching the larynx causes suffocative spasm. Bending head back, thus putting the skin on the stretch, aggravates.

**HEART AND CIRCULATION.**—The heart and circulation are greatly affected by *Lachesis*. Vertigo and fainting from heart weakness; palpitation and fainting. Trembling. Palpitation with a feeling of constriction as if the heart were tightly held in cords. Sense of oppression, with cold feet; as the feet get warm the oppression is relieved. Flushings, throbbings, cold feet, and chilblains, all tell of disturbed circulation.

In the limbs there are painful tearing and lancinating pains; pains from loins into thighs, with diarrhea; nightly bone pains (which brings it into relation with syphilis), and very characteristic *pain in the tibia*. Dr. W. J. Guernsey pointed out the characteristic nature of this symptom, and I have since verified it. Dr. Guernsey maintains that this symptom often occurs along with sore throat, and then it will be found that the affection of the throat is primarily or only on the left side. A patient, convalescent from his tenth attack (or thereabouts) of acute rheumatism, the valves of his heart having long been badly damaged, and the heart itself greatly hypertrophied, was kept awake by nightly pains in his legs. On inquiry I found these pains were confined to the tibiæ, which were very tender to touch. Having lately read Dr. Guernsey's cases I naturally thought at once of *Lachesis*. I forget whether the throat was affected on the left side, but I rather think it was. At any rate *Lachesis* restored his nights' rest in a very short time. Again, the sciatic symptoms of *Lachesis* are very pronounced. The lancinating, tearing pain is relieved by lying down. Though *Lachesis* is pre-eminently a left-sided medicine, in sciatica its preference is for the right.

**SKIN AND SURFACE.**—Purple or blue coloration is the chief characteristic of its affections of the skin, with the excessive sensitiveness of all the *Lachesis* affections. Purple swelling of limb from poisoned wound; purple blisters; shallow ulcers with purple margins; purple coloration of varicose veins; purple cancers; badly healing flesh like *Hepar.*, which, by the way, is

one of the leading antidotes to *Lachesis*. Erysipelas, purplish; delirium as soon as the eyes are closed; left side affected, or beginning left side and affecting right later, spreading to cerebral membranes; pemphigus. Burning pains accompany the skin affections.

FEVER.—The fever is of the typhoid type; delirium not violent, loquacious; stupor, dropping of lower jaw; scarlet fever, with malignant tendency; drowsy, readily falls into heavy sleep; rash imperfect, purplish; tongue trembles, cannot be protruded beyond teeth; blood oozes from mouth and nose, sweat is offensive. *Lachesis* has an intermittent fever, occurring in spring as the warm weather sets in. The chill occurs from 1 to 2 p.m. It antidotes effects of quinine when the fever has these characteristics. The climacteric flushings may again be recalled here. The characteristic *Lachesis* patient is a dry-skinned person, perspiration being difficult or impossible.

A few words on generalities, and on the conditions of Time, Temperature, Touch, and Motion, and the picture of *Lachesis*, so far as I am able to draw it this evening, will be completed.

GENERALITIES.—Trembling is a feature that runs through a number of *Lachesis* conditions; a weak, debilitated state, such as is found in persons suffering from chronic effects of alcoholism, from blood-poisoning, or from sunstroke. Numbness and tingling is also a leading symptom; numbness of the finger-tips. *Lachesis*, as we have seen, is characteristically left-sided in its effects. Throat affections and erysipelas begin on the left side, and spread to the right. Pains shoot from left to right. In this it is the antithesis of *Lycopodium*. The left ovary is more markedly affected than the right. There is, however, a right-sided headache, also right-sided sciatica; so it will not do to prescribe *Lachesis* simply because an affection occurs on the left side.

CONDITIONS.—Aggravation from closing the eyes and from sleep is also another grand characteristic of *Lachesis* which qualifies most of the conditions in which it is of service. The patient sleeps into an aggravation.

TIME.—In regard to time the *Lachesis* patient is worse in the afternoon and at night; but a sleep in any part of the day will cause an aggravation as well as at night. From 12 midday to 12 midnight is the worst time for *Lachesis*.

TEMPERATURE.—*Lachesis* again is a chilly remedy; as with *Silica*, the *Lachesis* headache compels the patient to wrap up the head. Cold air, change of temperature; wet, windy weather aggravate. And conversely there is relief from warmth, from wrapping up, from being near a fire.

On the other hand, there are the following apparently con-

tradiictory conditions. The sun causes marked aggravation, so much so that *Lachesis* ranks with *Glonoin*, *Nat.-carb.*, and *Bella-donna* in sunstroke. The warmth of bed aggravates; again, warm spring weather aggravates. Intermittent fever coming on in spring, the chill commencing from 1 to 2 p.m.

TOUCH, PRESSURE, MOTION.—Touch the *Lachesis* patient cannot bear, or light pressure. Firm pressure is not so bad. There is < from lying on painful side, < whilst sitting, < on and after rising from bed, < from motion; but some symptoms are > by motion (not, however, the cough). Finally there is the grand characteristic of > from a discharge, whether the menstrual discharge or a catarrh, and < when a discharge fails to appear. In EATING AND DRINKING,—Alcohol aggravates; there is a craving for coffee which agrees, and for milk which disagrees; there is also a strong craving for oysters; > from eating fruit.

You will at once recall numberless conditions of disease in which the features of this *dynamis* are reproduced. Numberless limbs have been saved, and lives also, by the homeopathic action of *Lachesis* in poisoned wounds, such as the one recorded by Dr. Madden in his paper read before the British Homeopathic Society last session. I never read in the old school journals a case of death from dissection or post-mortem wounds, but I think what might have been prevented if only this great medicine had been known to the attendants.

Here is a case of my own of a different kind of blood-poisoning. A very delicate lady, over 60, had, many months before I saw her, been laid up with a fever, resulting from a bad smell in an unsanitary house in which she was staying. Although she recovered she never felt quite well, and was always subject to attacks of "indigestion with fever" as she called them. There was "choking after food, with fever which seems to rise up from the stomach. With the choking there is a hot feeling, flush, and general perspiration, which is somewhat offensive." She was very sensitive to cold air.

I gave her *Lach.* 12, one drop three times a day, and very soon she had an access of fever which ended in *profuse perspiration of the scalp, exceedingly offensive*, leaving her perfectly free from the offensiveness ever afterwards, much less liable to the choking attacks, and much more able to do the mental work she desired. This patient was a blonde of the *Pulsatilla* type and temperament. I mention this to show that though medicines have their special characteristic types, when the symptoms agree they will act just as well in persons of opposite types.

Another patient, a lady aged about 40, mother of several children, brunette, who had all her life been subject to sick



attacks, came to me complaining of great weakness, pain at epigastrium, going through to shoulders after food, and in the night waking her up; acidity, sinking, faint sensation two hours after food, palpitation after exertion, and in the night, felt in the head if she lay on the left side, headache and flushes of heat. But the thing that troubled her most was her terrible temper. She was quite aware of this, and bitterly deplored it, but she could not help herself. *Sulphur* and other remedies removed many of her symptoms; but nothing relieved her irritability of temper so effectually as *Lachesis*, which also did great good to her generally. Dr. Gallavardin finds it one of the most valuable remedies in counteracting alcoholism, in removing the craving and restoring the mental equilibrium of those alcoholics who are given to outbursts of temper.

Here is another case. A gentleman, aged 57, who came of a very delicate family, and had a stoop of the shoulders, or rather of the upper dorsal spine, increasing of late, and almost amounting to the curvature of disease, had had headaches all his life, and for fourteen days before I saw him had had continuous pain in the back of the head, which it was feared might be due to the spinal curve. The characteristics of the pain were these:—

The pain was in the back of the neck, and woke him in the night. It was worse the right side of the neck; there was a dull pain over the head, but it was sharp at times. The scalp was very tender. The pain was worse when warm in bed, and worse after sleep. It was relieved by moving the arms and in the open air. The patient was very low about himself and exceedingly irritable, so much so that his friends were anxious about the state of his brain. He suffered from cold, dry feet. He was given *Lach.* 30. The first night after this he had much pain, the following night very little, and in a few days more it was gone. The temper began to improve from the first.

I could add many more illustrations of the action of this wonderful medicine, but as there are other medicines to be considered I will content myself with naming a few of the leading conditions in which it is frequently called for. Alcoholism and syphilis have been mentioned; hemorrhage and hemorrhagic diathesis (compare *Phosphorus*); malignant types of fever with dusky eruptions; diphtheria; low forms of inflammation, peritonitis, perityphilitis, ulcerations, varicose veins; in climacteric sufferings it has the foremost place; in rheumatism, neuralgia, nervous affections generally, nervous tremblings, which bring it into relation with *Mercury*, to which it is one of the antidotes. It follows *Mercury* when the pus degenerates and becomes of a dark, thin, offensive character. Its own effects are antidoted by *Arsenicum*, *Belladonna*, *Hepar*, *Mercurius*, *Nitric*

*Acid, Nux Vomica, Phosphoric Acid, and Sepia*, these being the drugs to which it is most closely related in its action. *Am.-c., Arnica, Baptisia, Bryonia, Hyoscyamus, Lycopodium, Silica, Phosphorus, Spongia, Stramon.*, and the other serpent poisons should be carefully compared with *Lachesis*.

## THE JOURNALS.

### PROGNOSIS FROM THE OBSERVED EFFECTS OF HOMEOPATHIC REMEDIES.

By DR. J. T. KENT.

(Abstracted from the *Medical Advance* of March.)

At a meeting of the New York Central Homeopathic Medical Society on Sept. 15, 1892, prior to the opening of a discussion by Dr. Kent, paragraphs 161, 162, 163, and 164 of the *Organon* were read as follows:—

161. When I fix the so-called homeopathic aggravation (or rather the primitive action of the homeopathic remedy, which appears in a slight degree to increase the symptoms of the natural disease) to the first hour or the first few hours, this delay applies to acute affections that have recently intervened.\* But when the remedies whose action lasts for a long time have to combat a disease of some duration, or one of very long standing, and consequently the dose ought to continue its action for several days successively, then we may see, during the first six, eight, or ten days, from time to time, some of those apparent aggravations of the original malady which last during one or several hours, while the general amendment develops itself sensibly in the intervals. When these few days are once passed the amelioration produced by the primitive effects of the remedy continues without interruption for some days longer.

162. The number of medicines whose force and precise action is known being moderate (200), it sometimes happens that only a few of the symptoms of the disease that is to be cured are to be found amongst those of the most homeopathic remedy, and, consequently, this imperfect remedy is obliged to be employed for want of another that is less so.

\* Although the effects of remedies whose action is of the longest duration rapidly disappear in acute diseases, they last a considerable time in chronic affections (arising from psora); and thence it occurs that antipsoric remedies do not often produce that slight homeopathic aggravation of the symptoms during the first hours, but bring it on later and at different periods during the first eight or ten days.

163. In this case, a perfect cure, free from all inconveniences on the part of the remedy, ought not to be expected. During its use some symptoms are seen to appear that were not observed before in the disease; these are accessory symptoms resulting from a medicine that is not perfectly homeopathic with the existing case. This does not, however, prevent the remedy from annihilating a great part of the evil—that is to say, the marked symptoms which resemble those of the medicinal disease, and thence arises a tolerable commencement towards a cure.

164. The small number of homeopathic symptoms in a well-selected homeopathic remedy never injures the cure when it is in a great measure composed of the extraordinary symptoms which particularly distinguish and characterise the disease; the cure then follows without further inconvenience to the patient.

After pointing out that we are to-day in a very different position from that occupied by Hahnemann at the time of his writing the above, we having many more proved remedies than were known by him, Dr. Kent went on to read paragraphs 279 and 280 as follows:—

279. It has been fully proved by pure experiments that when a disease does not evidently depend upon the impaired state of an important organ, even though it were of a chronic nature, and complicated, and due care has been taken to remove from the patient all foreign medicinal influence, the dose of the homeopathic remedy can never be sufficiently small so as to be inferior to the power of the natural disease which it can, at least, partially extinguish and cure, provided it be capable of producing only a small increase of symptoms immediately after it is administered.

280. This incontrovertible axiom, founded upon experience, will serve as a rule by which the doses of all homeopathic medicines, without exception, are to be attenuated to such a degree that after being introduced into the body they shall merely produce an almost insensible aggravation of the disease. It is of little import whether the attenuation goes so far as to appear almost impossible to ordinary physicians whose minds feed on no other ideas but what are gross and material. All their arguments and vain assertions will be of little avail when opposed to the dictates of unerring experience.

Dr. Kent proceeded, after some introductory remarks, to set out the subject of prognosis from aggravation in a series of propositions as follows:—

1.—LONG AGGRAVATION WITH FINAL DECLINE. THE CASE  
INCURABLE.

“Where *symptoms* are aggravated we have learned to look upon it as a good indication; but we may have an aggravation of both the symptoms and the *condition* of a patient. In acute diseases an aggravation may come within a few minutes; even as soon as medicine has touched the tongue. In a chronic disease such action would mean superficial action. *Where the aggravation is long with final decline of the patient under the clearly indicated remedy we have an incurable case.* We give the remedy, the next day we find the patient worse; we are pleased, but if it has been a suspicious case we should suspend our hilarity. When the aggravation of the symptoms continues a long time our patient is growing weak, profuse sweats coming on with other indications of deeper depression, we know the case is to be fatal. Hence the necessity for lower potencies, and a place where they may be employed with great advantage to the patient. It is possible to bolster up and palliate with well-selected remedies but we shall not cure. Changing symptoms constitute a sign of the action of the remedy.”

2.—LONG AGGRAVATION AND FINAL SLOW IMPROVEMENT.

“The second proposition is the long aggravation and final slow improvement. This is the condition the youthful prescriber is most likely to spoil; he is sure to prescribe for the aggravation. The condition comes in feeble, weakly patients with feeble vitality. A repetition of the dose in such cases before sufficient time has elapsed will kill the patient. One blow and he is gone. When the carefully-selected homeopathic remedy meets this slow reaction of the vital force, look out. The patient is sensitive to medicines. When after a long period, you must repeat, don't go higher in potency; repeat the same, and when at last it refuses to act, you can go higher. You will find that the repetition of the same potency will cause a shorter reaction each time, until you have need to change to the higher potency.”

3.—VIOLENT AGGRAVATION, LASTING BUT A COMPARATIVELY  
SHORT TIME AND WITH QUICK RELIEF. THE MOST FAVOUR-  
ABLE INDICATION.

“The third proposition is a violent aggravation, lasting

but a comparatively short time, with quick relief. This is the very highest and happiest homeopathic prescribing and gives to both patient and practitioner the greatest satisfaction. When we see short and strong aggravations, these are the best that can happen. When the patient says, 'All the symptoms were worse for a day or two and then they were better,' both may rejoice."

#### 4.—CURE WITHOUT AGGRAVATION.

"The fourth proposition covers those cases in which the quantity and quality of the remedy administered is in exact proportion to the quantity and quality of the sick-making force; when the exact *simillimum* is reached in potency as well as remedy, then do we have a cure without aggravation."

#### 5.—AMELIORATION FOLLOWED SOON BY AGGRAVATION.

When we find an amelioration occurring immediately upon the administration of a remedy soon followed by an aggravation, the case, says Dr. Kent, is an incurable one; that is if the remedy is the *simillimum*. If the remedy is not the right one, the same thing may occur in curable cases.

#### 6.—TOO SHORT AMELIORATION, WITH OR WITHOUT PREVIOUS AGGRAVATION.

A too short amelioration, especially after an antipsoric, generally means an incurable case. If the amelioration follows the remedy the case is incurable; if there is an aggravation first it is probably so. An antipsoric remedy ought to continue its action for a month at least. "To illustrate—administer a dose of sulphur, observe but slight aggravation and a short amelioration; say at the end of two weeks the patient grows worse, and returns to the same condition for which you prescribed. You repeat the same potency, no aggravation; you go higher, get a slight action, you may be sure of the incurability of the case."

#### 7.—FULL TIME OF AMELIORATION OF SYMPTOMS WITHOUT IMPROVEMENT IN THE PATIENT. SUCH ARE INCURABLE.

In old age and with weak, enfeebled vitality, where there is slow action, after the administration of the most similar remedy, there will be a long amelioration, but this is

followed by the appearance of another group of symptoms and the patient is not improved, taken on the whole. A careful selection of remedies will keep such patients alive and in comparative comfort for years, but they cannot be cured.

8.—THE PATIENT PROVES EVERY REMEDY WITHOUT BEING CURED OF THE DISEASE.

Some patients are sensitive and prove everything with which they come in contact. They apparently "take" the remedy just as a child "takes" measles. Give these patients a remedy and they prove it, and very few remedies will prove curative in such cases. They are difficult cases for the inexperienced to treat: Healthy persons are benefited by homeopathic aggravations and by homeopathic provings. This also depends on the proper selection of the person. Improperly selected persons for proving have been made lifelong sufferers. See the sufferings of the wife of Dr. Rubini of Naples in the proving of *Cactus Grandiflorus* and of the *Thuja* provers.

9.—NEW SYMPTOMS APPEAR.

When new symptoms appear the situation is doubtful. According as they are few or many the case may be regarded as favourable or unfavourable. Under these circumstances never repeat the dose.

10.—AGGRAVATION, WITH RETURN OF OLD SYMPTOMS.

"When old symptoms appear you may wait; you need study no more; you have the remedy. When the aggravation is passed there will be slow but sure reaction. No matter how long you wait, don't prescribe; you will spoil the case and render it incurable, and nothing will be gained. You mix things in such a case by repetition."

11.—SYMPTOMS TAKE A WRONG DIRECTION.

In old people of feeble vitality symptoms sometimes take a wrong direction. These cases are incurable. "I have seen an offhand prescription of *Lachesis* for the symptoms of an ulcer upon the leg, heal the ulcer, and be followed by hemorrhage from the uterus. The symptoms took the wrong direction. The reason was that *Lachesis* only

related to the ulcer and not to the whole disease—not to its patient. Rheumatism may be prescribed for, and lesions of the heart appear with laboured action, prostration, breathlessness," &c.

In conclusion, Dr. Kent insisted on the necessity of taking *all* the symptoms (previous as well as present) of a case, and *all* the symptoms of a drug into account in prescribing, and warned his hearers against prescribing on the fragmentary provings of drugs, hastily and partly proved; and he showed how valuable carefully-kept records of all the cases treated become in providing in after years a record of previous symptoms which a patient may have forgotten, and which may be of great importance in deciding the selection of a remedy.

#### THE CONVERSION OF ZLATAROVICH.

*L'Art Médical* of February reports the second of the public lectures on homeopathy which are now being given in Paris. Dr. Gonnard presided on this occasion, and gave a most interesting sketch of the position of Hahnemann as compared with other medical leaders of his time. He described the effect the homeopathic doctrine produced on many of his chief contemporaries, and among others on Zlatarovich, who was Professor of *Materia Medica* at the Josephine University of Vienna. Zlatarovich was converted in public. This is how it happened:—

"I was lecturing," said he, "on Mercury and on the physiological effects of this substance, when all at once I perceived that I was giving a description of the venereal disease" (the very disease for the cure of which it was most effectually used). "This idea crossed my mind like a flash of lightning, struck me so forcibly, and confounded me to such a degree that I was compelled to fold up my notes and break off my lesson abruptly, to the great stupefaction of my audience.

"Retired into my own room, I had every visitor sent away that my mind might not be distracted, and, in a state of lively agitation, I set myself to reflect on the discovery which I had just made. I was only acquainted with homeopathy in a very imperfect manner; and I entertained against it the common prejudices of its adversaries. However, its principle of similars came naturally to my mind, and I eagerly sought in that doctrine the explanation and

general verification of the particular point which had struck me in the effects of mercury. I verified for all medicinal substances the truth of this wonderful law of similars, the general and fundamental law of the healing art. From that moment I adopted without reserve the homeopathic method."

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## PREPARATIONS.

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### KOLA.

To his other well-known preparations of Kola Mr. J. C. Pottage of Edinburgh has added a non-alcoholic effervescing table beverage, "Sparkling Kola," combining all the dietetic properties of Kola with a palatable, refreshing drink. "Sparkling Kola" is prepared in three varieties: "Dry," "Hot," and "Sweet"; the "Dry" being more especially recommended for gouty persons.

The special claim for Kola is that it is dietetic and sustaining without possessing the medicinal properties of coffee, tea, or the Peruvian Coca from which the cocaine preparations are made. The absence of these medicinal qualities (which are *poisonous* when not required), is the great virtue claimed for Kola over and above its competitors.

The other preparations of Kola, which we have before alluded to, are the *Kola Paste*, which makes a chocolate-like beverage; *Kola Elixir* which is a fluid preparation, and from which *Kola Tea* is made; *Kola Jujubes*, a very pleasant sweet, used by public speakers and singers and those who are at times compelled to go long without meals; *Kola Chocolate*, *Kola Chocolate Nuts*, and *Kola Chocolate Creams*, excellent forms of Bon-Bon, and wholesome and sustaining in time of prolonged fasting or fatigue. Mr. Pottage has also succeeded in producing a combination of *Kola and Maltone*. Maltone is a nutritive essence, and at the same time a digestive, preserving all the nourishing ingredients which are lost in the process of fermentation. *Kola and Malt Lozenges* are a dry combination of Kola and Malt, nutritious and palatable. The wholesale London agents for the Kola preparations are Lynch and Co., 192, Aldersgate Street, E.C.; S. Maw, Son, and Thompson, 11 and 12, Aldersgate Street, E.C.; Boulton and Crisp, 14, Charterhouse Buildings, Goswell Road; Allen and Hanbury, Plough Court, E.C.; and F. Newbery and Sons, King Edward Street, E.C. They may be obtained of all chemists and Italian warehousemen.



## REVIEWS.

### LEPROSY AND VACCINATION.\*

It would be impossible to speak too highly of the great service Mr. Tebb has rendered to society by his devoted labours in investigating the results, near and remote, of the gigantic experiment involved in vaccination, and especially compulsory vaccination; and now he may fairly be congratulated on the completion of one department of his investigations, with which he has been very largely occupied for a number of years past. From time to time we have had the pleasure of putting before our readers letters addressed to us by Mr. Tebb from various parts of the world where leprosy abounds, and where he has been engaged in investigating on the spot that terrible disease which has made such ominous advances within recent times.

It is proverbial that outsiders often see more of a game than those actually engaged in it; and in the same way it is often much more easy for non-medical men to grasp the salient points of a medical problem than it is for those actually engaged in medical work. The latter are too close to the question to take a comprehensive view. They see their patient, and what they are immediately engaged in doing for him; but as a rule they are quite unable to grasp any general questions that may be involved. They will vaccinate a patient, for instance, and so long as the vesicle appears and the scab separates at the right times they are perfectly satisfied that everything is as it should be. Mr. Tebb has brought to his work a mind capable of taking a more comprehensive view; and in the book before us he marshals in a most temperate but most damning way the incriminating facts which lay at the door of vaccination a large, if not the largest, share of the blame for the present alarming spread of leprosy.

The points Mr. Tebb establishes beyond the possibility of doubt are the following:—

(1) That leprosy is transmitted in the vast majority of cases by inoculation, that is by the introduction of material from a leprosy person into the tissues of another person.

(2) That in a very considerable number of definitely ascertained instances the inoculation with leprosy has been brought about by means of vaccination, the vaccine matter having been taken, knowingly or unknowingly, from a leprosy source and containing the virus of both diseases.

\* *The Recrudescence of Leprosy and its Causation.* A popular treatise. By William Tebb. With an appendix. London: Swan Sonnenschein & Co., Paternoster Square. 1893.

(3) That particular outbreaks of leprosy have followed unusual activity in vaccinating in the face of small-pox scares.

One of the most remarkable instances in which vaccination was proved to have been the means of spreading leprosy was communicated to the *British Medical Journal* of June 11, 1887, by Professor W. T. Gairdner, of Glasgow. Briefly the facts are these: Some years previously a young boy was brought to Dr. Gairdner suffering from leprosy. This boy had been vaccinated by a medical man of Barbadoes from the arm of the doctor's own son. The doctor's son was vaccinated from a native infant belonging to a leprosy family, the infant (so Dr. Gairdner understood, though it was not positively stated) having become leprosy after vaccination. Both the doctor's son and the child vaccinated from him became lepers.

This case is eminently instructive in many ways. Although it was clear as daylight how the calamity arose, Dr. Gairdner waited six or seven years before making it public, out of deference to professional feeling and reverence for the sacred rite of vaccination. And when he did publish it he prefaced it with an elaborate apology for doing so. From this we see how difficult it is to get medical men to admit any fact bearing against the doctrines which have been drilled into them at their schools, and which they in their turns have been busily engaged in drilling into others. It shows, further, the difficulty in getting at the facts. If the doctor (since deceased) who performed the vaccinations had not been unusually candid the case might have remained unravelled to this day.

When Mr. Tebb visited Barbadoes, in January, 1889, he became acquainted with Mr. E. Racker, of Bridgetown, who was able to put a finishing touch to Dr. Gairdner's narrative. Writing to Mr. Tebb, on May 2, 1890, he says:—

"I knew all about the case reported in the *British Medical Journal* by Dr. W. T. Gairdner. I am one of the executors to the will of Dr. J. C. [the doctor who performed the vaccination], but I had no idea that the boy [the doctor's son] was suffering from leprosy until I got a letter from the headmaster of Dollar [where the boy had been sent to school], enclosing a letter from Dr. Gairdner.

"I think I told you how I once consented to have my children vaccinated, and how at the last moment I changed my mind, and would not allow them to be operated on. Well, that boy, Dr. J. C.'s son, was the one from whom they were to be vaccinated."

Well may Mr. Racker exclaim, "What a narrow escape I had!"

When we consider that leprosy is a disease which has an exceedingly long and peculiarly indefinite incubation period,

during which it is impossible to say whether a person is or is not a leper, we can understand the risk that exists in arm-to-arm vaccination in leprous countries.

We have not time to follow Mr. Tebb through more of this painfully interesting volume; suffice it to say, in conclusion, that it emphasises in a most powerful way this fact: that vaccination lymph contains the germ of the cow-pox disease (which is in itself no trifling affair, and which may have lifelong effects), and it *may* contain nobody knows what else. The child, or animal, from which it is taken may have diseases or disease tendencies which no one can detect, and which may be, and often are, transmitted to those vaccinated from that source. This fact is persistently kept by the profession from the public. In all candour it should be fully stated, and parents, guardians, and patients given the option of choosing between the risks of vaccination and the risks of small-pox infection. When a person catches small-pox, it is small-pox he gets and nothing else; when he is vaccinated, nobody can tell what he won't get.

#### THE MEDICAL ANNUAL.\*

WE welcome the eleventh issue of this excellent compendium, giving as it does, in exceedingly convenient and get-at-able form, a record of the year's doings in the old school. There is not much, it is true, for a homeopathist to learn in the matter of medical treatment; but, for all that, there is a great amount of valuable and interesting information on other matters relating to practice. It is always interesting, if not very edifying, to trace the changes in pathological theories from year to year, as it shows the wisdom of Hahnemann in refusing to base any system of treatment on such a sandy foundation.

Dr. Armand Ruffer, we see, under the section of "New Treatment," deals with the pathology of tubercle, and, very naturally after recent occurrences, makes that subject a text for preaching the gospel of vivisection. But not with much success. (We may mention, by the way, that the "treatment" part of his paper, though it appears in the "New Treatment" section of the work, is conspicuous by its absence.) In dealing with the subject of the heredity of phthisis, he shows that Landouzy and Martin have found the tubercle bacillus in a six months' fetus born of a phthisical woman, and that veterinary surgeons have found newly-born calves suffering from tuberculosis. To persons

\* *The Medical Annual and Practitioners' Index: A Work of Reference for Medical Practitioners.* Eleventh year, 1898. Bristol: John Wright & Co., Stour Bridge. London: Simpkin, Marshall, Hamilton, Kent & Co., Limited.

of ordinary intelligence this would be sufficient to prove the point; to the medical biologist, not at all. Numbers of artificial tuberculising of pregnant animals are required to prop up this evidence. The microbists cannot believe that two and two make four without experiments on animals to prove it; and then, as often as not, they prove by their exertions that five or seven is the real result.

## APPOINTMENTS, VACANCIES, AND REMOVALS.

\* \* We shall be happy to insert notices of appointments if gentlemen will be good enough to forward them to us, and also of posts vacant and likely to be vacant, on receiving information from secretaries or committees. Under this heading also, we shall mention good openings for homeopathic practitioners and chemists.

### REMOVALS.

DR. OSCAR HANSEN, *Copenhagen*.—Dr. Hansen has removed from Halmtorver to HELMERHÜS, *vis-a-vis* the DAGMAR HOTEL, COPENHAGEN.

MR. SPENCER COX, M.R.C.S., has removed from Camden Hill Road to 12, SHEFFIELD GARDENS, CAMPDEN HILL, W.

## GENERAL CORRESPONDENCE.

### "ROTTENSNAKE," &C.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—In your quotation from Hering's *Guiding Symptoms* (HOMEOPATHIC WORLD, p. 171, line 4 from bottom) you suggest that "Rottensnake" is a synonym for "Rattlesnake." The "Rottensnake" is popularly called "Birri." After its bite "large masses of flesh rot and drop off, and this continues till the bone is laid completely bare and a large vein is reached, when death ensues immediately. This fact originates the name of Podredora, or Rotter, it has in some places" (Higgins's *Ophidians*, p. 99). Dr. Higgins quotes a case of sloughing from the bite, which was cured by the gall of *Acrochordon Chocoe*, another snake, the effect of whose bite is similar.

In addition to those you mention, there are in Allen's *Encyclopaedia* provings of the Copperhead snake under the name of *Aglistrodon Contortrix*; the *Toxicophis pugnax*, or Mocassin snake;

*Amphisbæna vermicularis* (proved by Mure); and a fragmentary proving of my own of the *Lachesis Bufocephalus* (erroneously given as *Vipera Lachesis*).—Yours truly,

E. W. BERRIDGE, M.D.

48, Sussex Gardens, Hyde Park, W.

### IDIOSYNCRASY.

To the Editor of the HOMEOPATHIC WORLD.

SIR,—The remarkable case described under this head in a late number of the HOMEOPATHIC WORLD had a parallel in the case of a gentleman residing in Wirksworth some years ago; but in his case it was not food with wheaten flour in it that produced mischievous effects, but rice. If he ate anything with rice in it distressing effects followed—difficult breathing, almost amounting to asphyxia. Such cases surely point to the uncertainty of trusting to the results of the proving of any substance by one person only.—Yours faithfully,

F. H. B.

### LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

HOURS OF ATTENDANCE:—Medical, Daily, 2.30; Surgical, Mondays and Thursdays, 2.30; Diseases of Women, Tuesdays and Fridays, 2.30; Diseases of Skin, Thursdays, 2.30; Diseases of the Eye, Thursdays, 2.30; Diseases of the Ear, Saturdays, 2.30; Diseases of the Throat, Mondays, 2.30; Operations, Mondays, 2.

### MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Bennett (W. H.). Clinical Lectures on Abdominal Hernia. 8vo: (Longmans. 8s. 6d.)

Berry (G. A.). Diseases of the Eye. 2nd ed., Revised and Enlarged. With Coloured Illusts. from Original Drawings. 8vo, pp. 788. (Pentland. 25s.)

Brain: A Journal of Neurology. Vol. 15. 8vo. (Macmillan. 15s.)

Caird (Francis M.) and Cathcart (Charles W.). A Surgical Handbook. 5th ed., Revised. 12mo, pp. 292. (C. Griffin and Co. 8s. 6d.)

Cheiro's Book of the Hand. 12mo, pp. 104. (Record Press. 1s. 6d.)

Cholera: What to Do Till the Doctor Comes. Cr. 8vo. Leaflet. (Griffith, Farran, and Co. 1d.)

Field (G. P.). On the Pathology and Treatment of Suppurative Diseases of the Ear. The Harveian Lectures, 1892-3. 12mo. 10s. (Baillière, Tindall, and Cox. 2s. 6d.)

From Hospital Ward to Consulting Room. With Notes by the Way. A Medical Autobiography by a Graduate of the London University. Cr. 8vo. (H. K. Lewis. 8s. 6d.)

Darmatt (Alice). How to Become a Hospital Nurse, Probationer Nurse, Sister, &c. With Appendix. 12mo, pp. 140. (Record Press. 1s. 6d.)

Galabin (A. L.). Diseases of Women. 5th ed. (Student's Guide Series.) 12mo, pp. 526. (Churchill. 8s. 6d.)

Gibson (G. A.). Cheyne-Stokes Respiration. 8vo, pp. 180. (Edinburgh: Oliver and Boyd. Simpkin. 5s.)

Gibson (G. A.) and Russell (W.). Physical Diagnosis: A Guide to Methods of Clinical Investigation. 2nd ed., Revised and Enlarged. With 109 Illusts. Cr. 8vo, pp. 338. (Pentland. 10s. 6d.)

How to Improve the Physique. By "Medicus." Cr. 8vo, pp. 51. (Elliot Stock. 2s. 6d.)

Medical Annual (The) and Practitioner's Index: A Work of Reference for Medical Practitioners. 8vo, pp. ix. — 644. (Bristol: F. Wright. Simpkins. 7s. 6d.)  
 Medical Register, 1893. Roy. 8vo. (Spottiswoode. 6s.)  
 Medico-Chirurgical Transactions. Vol. 75. 8vo. (Longmans. 28s.)  
 Morten (H.). How to Become a Nurse and How to Succeed. New ed. 8vo, pp. 188. (Scientific Press. 2s. 6d.)  
 Muskett (P. E.). Prescribing and Treatment in the Diseases of Infants and Children. 2nd ed., Revised and Enlarged. 18mo, pp. 330. (Pentland. 6s. 6d.)  
 Ruddock (E. H.). The Homeopathic Vade Mecum of Modern Medicine and Surgery. New ed. Cr. 8vo, pp. 882. (Homeopathic Publishing Company. 5s.)

Stark (A. C.). Practical Pharmacy for Medical Students. Specially adapted for the Examination in Practical Pharmacy of the Conjoint Board. 12mo, pp. 214. (Bailliere, Tindall, and Cox. 3s. 6d.)

Stephenson (J. B.). Notes on Medicinal Remedies. 12mo, pp. 82. (Bailliere, Tindall, and Cox. 1s. 6d.)

Treatise on Human Anatomy. By Various Authors. Edited by Henry Morris. Illust. by 791 Woodcuts (many of them in several Colours) from Drawings made expressly for this work by Messrs. Berjean, Balcomb, Collings, Griffin, Lewin, Mannix, Parker, Smit, Tonks, and Wesley. Roy. 8vo, pp. 1,330. (Churchill. 40s.)

Waller (H.). Health Hints for Central Africa. With remarks on "Fever." 5th ed. 12mo, pd. (Murray. 1s.)

## TO CONTRIBUTORS AND CORRESPONDENTS.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 30, *Clarges Street, W.*

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

LITERARY matter and correspondences should be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct the same and return to the *Editor* as early as possible.

### CORRESPONDENTS.

Communications received from Dr. Proell, Meran; Dr. Clifton, Northampton; Dr. Hansen, Copenhagen; Dr. Hayward, Birkenhead; Dr. Berridge, London; Dr. Mahoney, Liverpool; Dr. Wilde, Bath; Gen. Warren Walker, Bath; Dr. A. Hemming, St. Petersburg; Mr. Spencer Cox, London; the Rev. F. H. Brett, Carsington.

### BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Chemist and Druggist.—Monthly Homeopathic

Review.—Medical Century (Mar.).—Allg. Hom. Zeit.—Archiv f. Hom.—Monatsblätter f. H.—Chironian.—Hom. Recorder.—Pacific Coast Journ. of Homeopathy.—N. A. Journ. of Homeopathy.—Revue Hom. Belge.—Medical Advance.—Medical Argus.—N. Y. Medical Times.—Bath Chronicle (April 6).—Maanedskrift f. Hom.—Journal of Climatology.—Vaccination Inquirer.—Clinique.—Homeopathic Medical Record.—Archiv für Homöopathie, Nos. 11 and 12 of year I., and 3 of year II.—Minneapolis Hom. Magazine.—Medical Visitor.—Monthly Magazine of Pharmacy.—American Homeopathist.—Journal of British Homeopathic Society.—New England Medical Gazette.—Special Diagnosis and Homeopathic Treatment for Popular Use, by Dr. Verdi.—Fortieth Annual Report Free Public Library, Museum, and Walker Art Gallery, Liverpool.—Aus der 25 jährigen Geschichte der Hahnemannia, Stuttgart.—Weather Prediction, No. 2, by Hugh Clements.—A Compendium of Materia Medica, Therapeutics, and Repertory of the Digestive System, by Arkell Roger McMichael, M.D.

THE  
HOMEOPATHIC WORLD.

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JUNE 1, 1893.

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HOMEOPATHY AND ANTISEPTICS.

THE interesting letter by Dr. MURRAY MOORE, which we publish in our present issue, opens up the question of the relation of homeopathy to antiseptics and to the germ theory in general. Dr. MOORE'S contention is that in the case of *Mercurius Biniodatus*, given in low potencies for diphtheria, the drug acts as a germicide and not as a specific. But it does not follow that the one action necessarily excludes the other. *Santonine* is a specific germicide for certain intestinal parasites, and yet *Cina* (the source of *Santonine*) in high potencies is often a more effective vermifuge than "worm powders" containing *Santonine* in mass. A drug may be at once inimical to the life of a certain micro-organism and specific to the condition which favours the growth of that parasite in the human body. In our opinion any good effect that has been produced by antiseptics, over and above the good of simple cleanliness, has been brought about in this way—by acting specifically on the organism of the patient rather than by killing germs.

In our April number, p. 177, we referred to recent articles in *L'Art Médical*, by Dr. P. JOUSSET, bearing on the question of microbes. Dr. JOUSSET shows, pretty conclusively, we think, that it is the organism which determines the innocency or malignancy of the microbes. The microbes may be present and do no harm until the organism becomes in some way depressed or altered, when the character of the microbe alters, and the symptoms of the disease come on.

As homeopaths, our business is to look to the organism, and by our specific remedies to guard it against becoming disordered and productive of morbid developments, and to restore it promptly by the same specific treatment when it has become disordered.

Regarding the question of diphtheria, whatever may be the case with *Mercurius Biniodatus*, it cannot be contended that *Mercurius Cyanatus* acts purely as a destroyer of germs—and in our experience the latter is much more frequently indicated than the *Biniodide* in diphtheria cases, and much more marked in its action—for Dr. VILLARS has shown, and our experience confirms it, that the *Cyanide* is more effectual when the higher potencies are used. Its action must therefore be dynamic and constitutional, and not merely germicidal.

One word for these much maligned germs. Our philosophers are beginning to find out that we should get on very badly without them. Medical science has all these years been concentrating its energies in efforts to get rid of microbes, and all the while microbes are, and have always been, among the most potent and necessary members of the community. They are the humble instruments of the transformation of filth into purity.

“Take a filter-bed of coke-breeze,” said Mr. DIBDIN, the chemist of the London County Council, to a representative of *The Chemist and Druggist*, “pass the effluent (of the London sewage) through it, and you soon have the coke alive with bacteria—nitrifying bacteria—which in their myriads convert the foul matter into harmless substances. We give the filter-bed a rest-time to aerate, and use it again, and have carried the process to such fineness that not only can fish live in the filtrate, but you would not hesitate to use it with your whiskey if I were to put a carafe of it before you.”

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## NEWS AND NOTES.

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### THE NEW HOMEOPATHIC MEDICAL DIRECTORY.

THE following letter from the publishers of that most useful work, the *Homeopathic Directory, British, Colonial and Continental*, speaks for itself, and we trust all homeopathic medical men and chemists who have not done so will at once subscribe to the work, and send all necessary information to MESSRS. Keene and Ashwell, 74, New Bond Street, London, W. :—

“THE HOMEOPATHIC MEDICAL DIRECTORY.’

“To the Editor of THE HOMEOPATHIC WORLD.

“SIR,—We are going to press with a new edition of the above, and shall be much obliged if you will give publicity to this letter. We find it a difficult task to get a correct list, and we would take this opportunity of asking all those interested in homeopathy to send us any information they may have that will further the work now in hand, as we have every desire to make the Directory as correct as possible.

“We are, sir,

“Your obedient servants,

“KEENE & ASHWELL.

“P.S.—We are anxious also to give a correct list of homeopathic chemists.”

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### CHARBON INFECTION: SAD FATALITY.

A CORRESPONDENT of the *Nazione*, published at Florence, records the following pathogenetic fact:—

“Yesterday, May 12, took place the funeral of Carlo Arcangeli, student of ‘the applied sciences,’ and son of the illustrious professor of botany. A few days ago, his inseparable friend and fellow-student, Matteucci, was also buried. It appears that some little time ago they both took a walk together outside the city, Pisa. Feeling thirsty they drank some water, in the vicinity of which the carcasses of animals that had died of carbuncle had been buried, to which terrible disease both the young students succumbed.”

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## AKINESIA ALGERA: A CHANCE FOR BRYONIA.

THE following, from the *Lancet* of March 25, strongly emphasises the difference between the homeopathic and the allopathic way of looking at things. No homeopath can read this without thinking of a remedy—*Bryonia*—which will probably be of extreme use should he be called upon to treat a case. An allopath sees in the description nothing more than an array of symptoms very “interesting” to his “scientific mind,” but not of the slightest practical use in guiding him to help the patient:—

## “AKINESIA ALGERA.”

“Under this term Möbius describes an affection of the nervous system characterised by extreme pain upon motion, so that the patient is unable to make any movement whatever. The exact pathological condition which is the cause of this symptom is as yet unknown. It appears only to occur in neurotic individuals, especially in those who are in a bad state of health generally, and who are unable to fight against the weakness. The pain is sometimes directly associated with motion, but in other instances follows it, and is experienced not only in the parts of the body which have been moved, but also in other parts, and may finally lead to almost complete loss of motive power, so that the patient is practically paralysed. In addition to this pain, which is the most prominent symptom, other phenomena, characteristic of neurasthenia, may develop, but hysterical outbursts have not been observed. Möbius considers that this disturbance may be attributed to inherited degeneration of the nervous system; that, as a rule, it follows upon mental strain in patients prone to neurasthenia; and that it must be regarded as a psychical affection. The condition must, however, be considered as more allied to hysteria than to hypochondriasis.”

## LOSS OF SPEECH FROM FRIGHT.

THE following from the *Westminster Gazette* of May 19 is a melancholy addition to the list of “Strange Incidents” published by Sir W. Dalby in the *Lancet* of Feb. 4, and commented upon in our March editorial:—

## “A TERRIFIED GIRL’S LOSS OF SPEECH.

“During the hearing of a charge of theft against a woman at Blackburn yesterday, it was stated that when the summons was served on the defendant, her young daughter was so horrified at the idea of her mother going to the police-court that she lost her power of speech, and, although this was a week ago, is still dumb. It is feared she will not regain her power of speech.”

“HOMŒOPATHY” IN THE NEW TESTAMENT.

AMONG the great store of information collected by Dr. Dudgeon as bearing on Hahnemann's *Organon*, and appearing in the Appendix of his new translation of that work, the following item is not the least interesting :—

“The combination of Greek words used by Hahnemann to denote his system, ‘homœopathy,’ is found in the adjective form, though with a different meaning, in the New Testament, thus, *καὶ ἡμεῖς ὁμοιοπαθεῖς ἐσμεν ὑμῖν ἄνθρωποι* (Acts xiv. 15); and again: *Ἡλιας ἄνθρωπος ἦν ὁμοιοπαθὴς ἡμῖν* (James v. 17).”

“Of like passions,” “subject to like passions,” is the rendering in the Authorised Version. “Passions” and “suffering” are expressed in the same word, “*παθος*,” in Greek; hence a word combining the two ideas of “suffering” and “like” (*ὁμοιος*) exactly fulfilled Hahnemann's requirements.

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NEW LITERATURE.

DR. GALLAVARDIN, who contributes an interesting article to our present issue, has sent a paper on “Psychic Medicine and Plastic Medicine” to the Chicago Congress. In this paper he gives the results of his very remarkable experience in remedying with homeopathic medicines mental and physical defects and deformities. He maintains we need not wait till patients are actually insane before treating their mental condition. Vile tempers and vicious habits are equally within the realm of medication. Dr. Gallavardin has overcome in numbers of instances, by means of psychic homeopathic treatment, inaptitude for different kinds of study in youths who were by circumstances designed for them. Dr. Burnett has issued his further work on *Tumours*, promised long ago when his book on *Tumours of the Breast* came out. We shall give a full account of it shortly, but we may say here, that Dr. Burnett is doing excellent work in proving how much may be done by steady homeopathic medication to counteract the encroachments of modern surgery upon the physician's domains.

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## ORIGINAL COMMUNICATIONS.

## THE MEDICAL TREATMENT OF ALCOHOLISM.

By Dr. GALLAVARDIN, of Lyons.

Translated by Dr. J. H. CLARKE.

In the 420,000 cafés, taverns, and other drink-shops of France there are spent annually two milliards of francs. The loss of this sum, taken away as it is from the family, from the mothers and children, reduces them more or less to misery. Besides, the abuse of alcoholic drinks leads to misery. Those who take them to commit crimes and misdemeanours: thus 72 out of every 100 persons accused before the tribunals are alcoholics. There are, at the very least, two drunkards to every tavern, making 840,000 in France, which recruits from this source three-fourths of its criminals.

In the public bars of England, the number of which I do not know, there is spent on liquor three milliards of francs, taken annually, as in France, from mothers and children, who are thus reduced to misery. And I presume that here also, as in France, alcoholics constitute three-fourths of those who are charged before the courts.

To contend with alcoholism, English medical men founded, on the 25th of February, 1884, a "Society for the Study and Treatment of Alcoholism." They publish the results of their researches on this subject in a Review, "The Proceedings of the Society for the Study and Cure of Inebriety," of which 19 numbers of 16 pages each appeared between July, 1884, and February, 1889.

This society is composed of 168 doctors, ordinary members, and a large number of associate members, among the latter being many knights, baronets, lords, magistrates, clergymen, bishops, and archbishops.

The above-mentioned *Review* has published interesting articles on the etiology, pathology, and pathological anatomy of alcoholism. It insists particularly on the heredity of alcoholism, which appears to be a much more frequent predisposing cause in England than in France. Thus one member of this society was able to say: "Who is there amongst us who has not an inebriate among his ancestors?"

The treatment of alcoholics is almost *nil*, and confines itself to the reclamation of them by seclusion in a sana-

torium. This sanatorium, which appears to be reserved for the rich, during the year 1885 received only twenty-nine patients, of whom three were magistrates; four, financiers; four, medical men; five, merchants; and six, gentlemen without occupation.

Without counting the patients who have come to my consulting-rooms for alcoholics, I have treated during seven years about 500 indigent alcoholics at my Tuesday morning dispensary (*polyclinique*). I have there been able to gather a definite experience in their treatment. I was desirous of putting this experience at the service of the society, and, in writing to its secretary, I invited its members to report on the results of my treatment at my dispensary. I received no reply from the secretary and no visit from any of the 168 doctors, or of the associate members. I have come to the conclusion that they are a set of Pharisees, *making a great deal of noise about nothing*. I consider them worse than Pharisees, in that they only occupy themselves with rich alcoholics, and not with the poor, who are twenty times more numerous and have much more need of charitable assistance.

But let us leave on one side this society, these Pharisees of science and of charity, and let us give our attention to the homeopathic treatment of alcoholics, which has shown itself the most efficacious up to the present.

From the 5th of February, 1886, up till the 12th of May, 1893, I have given, with medicines, 4,440 consultations at my Tuesday dispensary alone. I have been able, I repeat, to acquire a certain experience as to the differential indications of the remedies and their mode of administration, and also as to the chances of curability of the alcoholics; but in those whom I do not cure completely, I at least succeed almost always in dissipating their other passions, and faults of character and intelligence—to such an extent that they are not disagreeable to their families, and do not contribute to the increase of those accused of crimes and derelictions before the courts.

Alcoholism is only curable 50 or 60 times out of 100, whilst other passions and faults of character (libertinism, jealousy, envy, anger, passion for gambling, antipathy, indocility, impertinence, &c., &c.) are curable generally 80 times in 100. It is so because alcoholism is composed, so to speak, of two diseases: 1st, a natural malady—the impulse to drink; and 2nd, a medicinal disease—alcoholic

intoxication. The latter brings on the former, an impulse to drink almost irresistible. These considerations have brought me, little by little, to modify the mode of administration of the remedies.

During the first years of my polyclinic I gave the women who came to consult me for their drunken father, husband, or son, a medicine which they were to administer, unknown to them, at one single time in their foods and drinks. And I allowed that single dose to act during 6 or 9 weeks, and that often with success. I recall one case that struck my attention, and in which Petroleum 200 did not produce an unmistakable curative action until the 42nd day, that is to say, six weeks after having been administered.

With the view of curing alcoholics more frequently, and above all more rapidly, I have for the last two years tried having a dose administered to them every 21 days, to others every 10 days, 7, 5, 4, 3, or 2 days, and that when giving the remedy in the 200th, 300th, 600th dilution, rarely in the 10,000th dilution.

In order to recognise subjects who are very sensitive to the action of remedies, and with whom they might produce aggravations, it is prudent to give to alcoholics at first only every 20 or 10 days, and later on every 7, 5, 3, or 2 days.

The repetition of the remedy every 5, 3, or 2 days has seemed to me more advantageous in those subjects who get drunk deeply, or frequently, or for a long time, and are then a prey to an intense alcoholic intoxication.

I will not recall here the differential indications of the medicines I give for drunkenness and intoxication, for they may be found in the French and English editions of my work on *The Medical Treatment of Alcoholism*.

To medical men desirous of studying experimentally the treatment of alcoholism, I advise the founding of a polyclinic—a gratuitous dispensary. It is only in such an institution that one can instruct oneself, in the same way that we can only gain practical instruction in medicine by following clinical lessons in a hospital. Beyond the advantage of instruction in establishing such a polyclinic, there will be that of doing a charity to families reduced to misery by alcoholics spending their fortune or their daily wages.

For seven or eight years, for at least two hours every Tuesday morning, I give consultations and medicines for a

score of drunkards. In curing them little by little of their passion, I bring them to spend less and less. Thus, such an alcoholic spending hitherto ten francs a week, does not spend more than seven, five, or three; another one spending twenty francs a week, to-day spends no more than one franc; a third who spent forty-two francs a week, spends now no more than three to four. I estimate that each of twenty alcoholics treated every week or cured spends on the average five francs less a week. In this way I give indirectly one hundred francs a week to their wives and children; that is, 5,000 francs a year, and 35,000 francs during the seven years that the polyclinic has existed.

In directing a polyclinic for the treatment of alcoholics, a doctor can, by himself alone, give to wretched families more than important works of charity can do. May this consideration determine some of our confrères to found alcoholic polyclinics, which will besides contribute to the spread of homeopathy.

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## REMARKS ON THE "CHRONIC DISEASES," VOL. I.

By EDWARD MAHONY, M.R.C.S., L.S.A.

WE continue the record, and we find Pains of various kinds, as drawing, tearing, lancinating, stitching, and in various parts, as the back, limbs, feet, joints—these latter may be "easily strained," or "creak on being moved." This "susceptibility to straining a joint" may be accompanied by "swoons, hysteric complaints of all degrees, fevers, hemoptysis," &c. Then, advancing to the deeper tissues, we have, "Mollities ossium (softening of the bones), curvature of the spine, of the long bones in the thighs or legs." Note here how different would be the way in which a consistent follower of Hahnemann would regard and seek to treat all such cases and conditions from that of the mere material support of bandages, splints, and surgical apparatus of all kinds, which constitute the core and essence of treatment of all such conditions in the present day. As regards general hygiene and dietetics, the advantage of fresh air and suitably arranged exercise (and here there is plenty of field for the exercise of inge-

nuity and method), there is common ground between all recognised schools of teaching; but the vital point here, as everywhere, presses itself on the attention, that *not one* of these various appliances touches the root of the disorder: the mechanical appliances at best support enfeebled parts, and the diet but enables the weakened digestive powers to assimilate the more easily assimilable forms of nutriment. What is wanted for cure is that the diseased processes should be arrested—*e.g.*, there should be no more caries (decay) of the bones of the spine, and that the weakened ligaments of the joints and the too easily strained muscular tissues should recover a natural tonicity. This alone is a true cure, and Hahnemann's doctrine of Chronic Miasm or Psora alone points out the way. I reiterate this because of the difficulty so many seem to feel in understanding that such materially small things as homeopathic medicinal potencies can act curatively upon such material and foundation structures as the vertebræ of the spinal column or the large bones of the limbs. On this point I may here refer again to Bönninghausen, whose capacity and success stands unrivalled among the pioneers of the homeopathic art. His language is concise, a veritable *multum in parvo*, and directly to the point. He says: "In referring to what I have said upon this subject [the quantity of the doses and their repetition] in the new Homeopathic Archives, I cannot forbear affirming that my experience leads me to be in favour of high attenuations, that it is opposed to frequent repetitions, and to the employment of intermediate medicaments. Even in affections of the bones—for example, in curvature of the spine—I have seen the high attenuations effect a complete cure in much less time than the low. Relying upon a lengthened experience, I can but confirm what has been said by many physicians of the highest eminence, and during two years that I have administered the highest attenuations, almost without exception, I am much more pleased with the results than I was before, although the greatest number of my patients are those who seek us after having been under treatment by allopathists."

We come now to a series of symptoms of an entirely opposite kind, namely, *sensuous*, *i.e.*, of disordered sensations. Such are painful sensitiveness of the skin, of the muscles, and of the periosteum (a skin covering the bones, and on which blood-vessels ramify), on pressing



moderately. Insufferable pain in the skin, or in the muscles or the periosteum of one part of the body, coming on in consequence of slightly moving this part or a part more remote, as in writing, &c.; numbness of skin or muscles; insensibility of particular fingers; crawling in various parts; painful coldness in some parts; burning pain in some parts; frequent flushes of heat, especially in the face. Warm air in the room or in church makes her feel uneasy, causes her to move to and fro—orgasm; also a sensation of pulsating in all the arteries. Most persons in reading these will be reminded of having felt one or more of such sensations, and that without assignable cause, and moreover, now and again, as a kind of habit; also they will not be satisfied with being told it is only a sensation, or imagination, or hysteria. It will be noted, too, that what is comfort to one is misery to another, and that in this, as in the digestive sphere, the homely proverb, "one man's meat is another man's poison," is strictly true. But then the question arises, Should it be so?

Why should one person in health be able to sit down and enjoy, both in food and drink, what another can hardly look at, far less venture to partake of?

Again it will be noticed how different are the sensations above referred to. They are varieties of the one sensation, such as sensitiveness and insufferable pain, or the opposite of these, namely, numbness and insensibility. Again there are the opposites of coldness and heat, and these again may be subjective or objective, or both; also they may be general or local, or there may be coldness in one part at the same time as heat in another, or one may follow the other. There are again the conditions and the accompaniments, so that the whole can be worked out as distinctly, in both comparison and contrast, as the natural orders, species, and genera of either plants, fishes, birds, or animals, when in health. There is in this sense a natural history of disease, and, mercifully, a corresponding natural history of medicinal agents which can be applied curatively, now that the law is known.

Next are mentioned varices, erysipelas, paronychia, chilblains, corns with burning and lancinating pain even when there is no external pressure, boils, ulcers, and many more eruptions. Of the above, I note varices and ulcers as two of the class of cases in which material support is the first and prime thought in most persons' minds.

How often in the former is the thought of the psoric cause allowed a due and the prominent place? And in the latter also the disordered health, which will on inquiry be sure to be found as having preceded the external manifestation.

I have at the present time under treatment a patient over 60 years of age, who came to me in July last with a long history of many previous and very severe illnesses, which need not be enumerated here, but simply to say that, pathologically speaking, the diagnosis would have been, "Weak and irritable heart, consequent on many and severe losses of blood." She had for some years worn an elastic stocking for the ordinary varicose veins of the calf. I advised her gradually to leave this off, and administered internally—because her symptoms called for them—*Pulsatilla* and afterwards *Sulphur*, each of the 200th potency, and with due intermissions. She has steadily improved in all respects, can walk quite an average distance for a person of her years, and "can go for several days without wearing the stocking."

Another important symptom of latent psora is that pains in parts formerly injured but now cured "become again very acute at the approach of an important change of the weather, intense cold, storm, atmosphere pregnant with electricity"; then, among symptoms of the nervous system, "attacks of sudden heaviness in the arms or legs, also attacks of paralytic weakness of one arm, hand, leg." Then comes one which many would think singular: "While sitting the person feels insufferably tired; walking diminishes this feeling." Various kinds of wakefulness are also found, and somnambulism, which latter, one may remark, if a little inquired into, will be found to be connected with disorder in the digestive sphere. Then he is distinct that "epidemic intermittents never attack people free from *psora*."

Now comes a remark most properly put in italics: "*All sorts of moral and mental disturbances.*" In a note he adds: "Neither in my practice nor in a lunatic asylum have I ever met with a patient attacked with melancholy, madness, or frenzy, in whom these diseases were not based upon *psora*, sometimes complicated with *sypilis*." Personally, I would endorse this observation in the strongest possible manner. In my allopathic days I had the opportunity of seeing a fair amount of these most unhappy cases, first in a private asylum, and afterwards in a very large public institution, where we had as many as one hundred on an average under

treatment, including cases of epilepsy; and looking back in memory, I easily and painfully recall how faithfully has Hahnemann traced the bodily condition of disease found in all such cases, and how well would the discriminating observations of the homeopathic materia medica have enabled one who knew them to distinguish the various forms of hallucination, and the various degrees of mania, from the slightest perturbation to the wildest frenzy, as well as all shades of melancholy, not omitting either the wildest ravings and violence of delirium tremens, of which I have had the satisfaction of witnessing the most distinct and prompt effects under homeopathic treatment, as well as saving others from the pain and humiliation of the lunatic asylum. Other mental conditions mentioned are, "Attacks of fear; attacks of a species of angriness; sudden change of humour."

"These," he says, "are some of the principal symptoms of latent psora which I have had occasion to observe." I would call attention once more to the word "observe," the motto of the profession; for from beginning to end Hahnemann insists upon it that his knowledge is founded upon the most careful and laborious and continuous observation, and over and over again states that he has discovered not only what he did not know before, but what he could not even have believed had it not been proved to him by irrefragable evidence. Again he reminds us that these symptoms are the "elements which constitute the innumerable secondary complaints arising from the psoric reaction in persons unfavourably situated, and assuming all sorts of forms in proportion as a person's constitution, education, habits, occupation, external circumstances, and the physical or moral impressions to which he is subject, differ." Then in a note: "I admit that my doctrine—'all non-venereal chronic diseases, that can neither be cured by regular diet nor favourable circumstances, which, on the contrary, increase in the course of time, originate in *psora*'—is too comprehensive and even overwhelming for all who have not maturely reflected upon my arguments, or for narrow intellects. But my doctrine is not the less true. But because the patient is not able to recollect having had a few itch-vesicles between the time of his birth and the present moment, or because he is ashamed of confessing having had the itch on account of its being considered a shameful disease, is this a reason why such a chronic disease

should not be considered psoric?" I notice here the expression "such a chronic disease" as proving again that Hahnemann did not teach on the one hand that the common itch was the source of chronic diseases, and on the other hand that he did teach that the itch *was a chronic disease*, and not merely an eruption caused by the presence of the *acarus scabiei*: that, in other words, the common itch has its source, as have all other chronic diseases, in chronic miasm, and consequently to be cured, the suitable antimiasmatic or antipsoric must be selected from among the antipsorics; the mere killing of the *acarus* will not cure. He further remarks, "The antipsorics are therefore not necessary to prove the chronic nature of these maladies in case the infection by the itch-virus should be denied; the salutary action of the antipsorics only serves in the same sense as the counterproof of an accurately-solved arithmetical problem. Since it is proved that other medicines, even when chosen strictly homeopathically, do not heal the above-mentioned chronic diseases as thoroughly and permanently as the so-called *antipsorics*, because the latter cover the whole extent of the progressively appearing symptoms of the psoric disturbance, I do not see why these should not be called *antipsorics* in preference to all other remedies. I sometimes consider certain acute diseases, such as inflammation of the throat, of the chest, &c., results of an excited *psora*." "This, too, cannot be denied, as it is done, under the pretence that these inflammations may be controlled by the antiphlogistic remedies, *Aconite*, *Belladonna*, *Mercury*, &c. The proof that they originate in latent *psora* is this: that their frequent return can only be prevented by the *antipsorics*."

One more sentence, and then with a few remarks this important part of the subject will be closed. "Without a knowledge of that threefold origin and these homeopathic remedies, the successful treatment of chronic diseases is absolutely impossible." Let us consider a little these concluding sentences, which are found in a note, for it is a way with erudite authors to give gems of truth in a trite and easily assimilable form just at the end sometimes of a long course of reasoning, illustration, &c. First, it is plain he attaches the greatest possible importance to the proper knowledge and use of both "the threefold origin" of disease and the antipsorics; of the latter he affirms their salutary action serves as the counterproof of an arithmetical

problem—they cover the whole extent of the progressively appearing symptoms of the psoric disturbance; and lastly, the frequent return of acute diseases can only be prevented by their administration. These three statements are surely a very emphatic way of saying they are absolutely essential to the treatment of chronic diseases, first, indirectly as counterproof, and thereby giving mental fixity and consequent confidence to the prescriber, and directly by (1) covering the whole extent of the psoric disturbance. I would especially call attention to this remark, especially in its connection, namely, that other, *i.e.*, non-antipsoric medicines, though chosen strictly homeopathically, do not answer the same purpose, because it proves the deeply acting character of the former, and which, therefore, fit them for curing the correspondingly deeply acting phenomena of chronic disease—*e.g.*, caries of bones, ulceration of internal organs, as lungs or stomach. I remember, in my early homeopathic days, treating by correspondence a case of scirrhus cancer; and as this doctrine of Hahnemann's opened up before my mind, I found to my surprise that all unconsciously, through simply selecting according to the symptoms, nevertheless the medicines given had been principally antipsorics; and I am confident that any one treating chronic disease carefully as Hahnemann directs will find that antipsorics come in for the lion's share, and this being so here is another counterproof of the accuracy of this instruction. It is like Monsieur Jourdain, who found to his surprise that he had been speaking prose all his life without knowing it. The last remark, that antipsorics alone prevent the frequent return of acute diseases, is of the greatest value in practice. The emphasis here is on the words "frequent return," or, as it is commonly spoken of, "subject to." I knew a gentleman who had been subject to attacks of inflammation, under the name of gout, for thirty years, and the whole of that time treated by homeopathic remedies, but with no reference to psora—a strong man too. He was then treated antipsorically, and the paroxysms gradually diminished in frequency and severity until at the end of two years he ceased to have any at all. "The threefold origin" of chronic disease, be it remembered, is declared also to be that without which successful treatment is absolutely impossible. Here, then, ends the instruction as to the nature of non-venereal chronic diseases; there yet remains their treatment, and a

short account of the other two chronic miasms. We must bear in mind that he reckons *psora* as the source of *seven-eighths* of existing chronic diseases—hence the importance of having a clear conception of what it really is.

### A CASE OF ANEMIA CURED BY GRAPHITES.

By JOHN H. CLARKE, M.D.

THE interesting case of cure by *Graphites*, communicated by Dr. Proell in our March issue, recalls to my mind a similar case treated by me some years ago.

In November, 1888, I was asked to see Miss D., aged 20, who presented about as striking a picture of anemia as could well be. She was of soft fibre, inclined to be stout, and had red hair. She looked at this time absolutely bloodless. Her feet were swollen. For fourteen months she had had no monthly period. The family had had much trouble, and the girl had been in a situation which was too heavy for her. There was also this point in her history which indicated the remedy (*Graphites*), which eventually restored her: when her monthly periods first came on, she had an extensive *open running sore at the back of the head*, which lasted for some time before it eventually healed. But the immediate symptoms for which my attendance was requisite, was a constant pain in the temples as from knives, and pains in the back of the head, vomiting, and a constant feeling of sickness. There were loud murmurs all over the cardiac area. The urine contained phosphates, but no albumen. The bowels were constipated. She was very chilly and sensitive to cold.

The medicine indicated by the most urgent symptoms—vomiting, nausea, pains in the head—was *Petroleum*, which also has a very definite relation to the anemia and is, besides, allied to *Graphites*, being one of the carbon group. *Petrol.*, given in the 3rd attenuation, acted very promptly. The pains in the head ceased, the sickness vanished, and the following morning she had an appetite. She was kept on *Petrol.* in infrequent doses until December 1st, on which day the report was: "Keeping better; no more sickness; giddy on rising; headache does not go." I now put her on *Graph.* 1m. (Boericke and Tafel), two drops in three ounces of water, of this two teaspoonfuls three times a day.

I did not repeat this dose till December 20th, during which time she had steadily improved in all respects, except that she was troubled with toothache, which was generally controlled by *Kreas*. 3. It was worse after any exposure, or after over-exertion.

On December 20th I gave *Graph*. 1m. again as before. This was followed by another spurt of improvement—as to the headache, toothache, appetite, and sleep. Before this she had been troubled with starting on falling off to sleep.

By January 5th she had again become stationary, and *Graph*. was again repeated. This was the last dose required. She became practically well, and looked quite a different person. The menstrual period was not yet re-established, but her mother reported her quite well when I saw her more than a year subsequently.

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## CLINICAL CASES.

By E. W. BERRIDGE, M.D.

(Member and Corresponding Secretary of the International Hahnemannian Association.)

CASE XXV.—*Carb.-veg.* September 1, 1869. Mrs. M. caught cold fourteen days ago; for the last week has had a cough, which allopathy has failed to relieve. The cough is worse by day, in open air, and during supper; it is continuous, hard, and dry. Soreness of chest and heat of body when coughing. Feeling of mucus in throat at night, choking her when she coughs; the choking is relieved when sitting up or moving. Itching internally from throat down centre of chest, worse when coughing.

*Diagnosis of the remedy.*—Itching in chest. *Agar.*, *Ambr.*, *Arsen.*, *Carb.-veg.*, *Con.*, *Iod.*, *Kali.-c.*, *Meny.*, *Mezer.*, *Natr.-ars.*, *Phosph.*, *Phos.-ac.*, *Puls.*, *Sep.*, *Spig.*, *Stann.*

Choking with cough. *Acon.*, *Ant.-cr.*, *Arsen.*, *Bry.*, *Carb.-veg.*, *Cina*, *Dros.*, *Hep.*, *Ipec.*, *Kali.-bi.*, *Kali.-c.*, *Lach.*, *Led.*, *Magnet.*, *Magnet.-arct.*, *Merc.*, *Natr.-ars.*, *Natr.-m.*, *Oleand.*, *Puls.*, *Rhus.*, *Ruta*, *Sep.*, *Spong.*, *Tarent.*

Cough from eating. *Amm.-m.*, *Anac.*, *Ant.-t.*, *Arsen.*, *Bar.-c.*, *Bell.*, *Bry.*, *Calc.*, *Caust.*, *Carb.-veg.*, *Cham.*, *Cinchon.*, *Cocc.*, *Coral-r.*, *Cupr.*, *Dig.*, *Ferr.*, *Hep.*, *Hyos.*, *Ipec.*, *Kali.-bichr.*, *Kali.-c.*, *Laur.*, *Lyc.*, *Magn.-c.*, *Magn.-m.*, *Mezer.*

*Mosch., Nux., Op., Phosph., Puls., Rhus., Ruta, Sep., Silic., Staph., Sulph., Verat., Thuj., Zinc.*

Cough in open air. *Acon., All.-sat., Alum., Ang., Arsen., Bar.-c., Bry., Calc., Carb.-v., Cham., Cina, Cocc., Coff., Dig., Ferr., Ipec., Kali.-bichr., Kali.-c., Phosph., Puls., Rhus., and Sep.,* which have three each. Both *Arsen.* and *Carb.-veg.* have heat of body when coughing; but only *Carb.-veg.* has itching in chest worse by coughing, and it corresponds well with the remaining symptoms. I gave one dose of *Carb.-veg.* 3m. (Jenichen).

This reduces the list to *Arsen.* and *Carb.-veg.*, which have each four of the above symptoms; the next in rank being *Bry., Ipec., Kali.-bichr., Kali.-c., Phosph., Puls., Rhus.,* and *Sep.*, which have three each. Both *Arsen.* and *Carb.-veg.* have heat of body when coughing; but only *Carb.-veg.* has itching in chest worse by coughing, and it corresponds well with the remaining symptoms. I gave one dose of *Carb.-veg.* 3m. (Jenichen).

September 18th.—Reports that improvement commenced in a few hours; mucus looser the same night; next day almost gone. Her husband says that she has not been so well for seven years. There was no change of weather to account for this improvement, nor had I made any change of diet or regimen.

*Comments.*—(1) This was not a severe case, nevertheless it had resisted allopathy for a week, whereas a single dose of the *simillimum* in high potency removed it almost at once.

(2) Jenichen's potencies have been stated to be merely low dilutions which had received an enormous number of successions, every ten successions being reckoned as a higher degree of potency. This hypothesis, which seems to have been suggested by those who did not believe in infinitesimals, yet could not deny the efficacy of his preparations, is refuted by Jenichen's own published letters. Each degree of potency in his notation represents an additional degree of attenuation by dilution.

(3) After the cure of the cough, the patient was reported "better than she had been for seven years." This is a frequent result of the cure of an acute illness by an antip-soric. I have no record of the past history of the patient's constitutional state, but it is evident from this remark that she had not been in good health.

(4) It does not always happen that the remedy which corresponds best to the acute attack equally suits the chronic dyscrasia. When this happens, we must treat the recent



symptoms first, even if the remedy be not antipsoric, though the case will later require antipsoric treatment according to the remaining chronic symptoms, otherwise there will be a relapse (*Organon*, sections 221-3, 243). But if, as happens more and more frequently with our constantly increasing *armamentarium*, we can find an antipsoric which suits the chronic as well as the acute attack, we not only cure the latter, but eradicate the former also.

48, Sussex Gardens, Hyde Park, W.

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## MATERIA MEDICA.

### *BETONICA AQUATICA* : A SHORT PROVING.

By JOHN M'LACHLAN, M.D., F.R.C.S.

IN the March number of the *Medical Advance* for 1892 a note appeared by Dr. Berridge relative to the proving of Mattei's remedies. Wishing to do what I could I wrote to him, and he sent me an unknown medicine to prove—unknown both as to name and potency. What I have done seems to me so small and insignificant that I hardly like to publish it at all, were it not for the hope that it may be the means of stimulating others to come forward and prove it better than I have done. It is the peculiar privilege, the prerogative, of homeopathy to annex everything that is of use in the whole domain of therapeutics, to mark out the particular field covered by any given agent, and show scientifically *why* it cures, how it should be used, and when it may be expected to heal the sick. In this way everything that is good can be rescued from the realms of quackery, and the clutches of the charlatan—qualified and otherwise. If "Mattei's" remedies are of any real value, then whatever is good in them belongs to homeopathy (though the *practice* of "Matteism" has far more in common with allopathy than homeopathy). A medicine is not necessarily homeopathic because its name is found in a list of homeopathic remedies, or because it is purchased at a homeopathic pharmacy; whether or not it is homeopathic depends entirely on *how* it is used, not upon what it is called, nor where it is purchased. Judged by this standard "Matteism" has absolutely nothing in common with homeopathy.

In the provings one point stands out very prominently, and I think may be regarded as a characteristic of the drug, viz., *its effect on memory*. In the first proving it took me altogether by surprise, in the second proving I was on the watch for it, but in spite of that I was often caught napping. This effect has not yet passed off; the complete oblivion (as to things that I ought to do, and have even been thinking about but a short time before) that seems to envelop me at times, in spite of my best efforts to the contrary, is still most marked.

#### FIRST PROVING.

Medicine.—*Betonica Aquatica*.

Potency.—Dmm (Swan).

Dose.—A dessert-spoonful of a solution of three globules in half a tumblerful of water, every hour, for 4 hours.

Proving began at 6 p.m. on April 4, 1892.

*First hour*.—Short, sudden stitches first in the left breast and then in the right; in right malar region and under right eye; in the region of the great end of the stomach, or anterior end of the spleen—from the seventh to the eleventh ribs.

Ill-defined desire to go to stool, but did not, and the desire passed off.

*Second hour*.—Stitches in left iliac region, and in the small of back.

Aching in back of neck, most on right side.

*Third hour*.—Several sudden, short pains in left iliac region, a little internal to the anterior superior iliac spine, extending partly across the belly to the other side.

Pain near the region of the left sacro-iliac synchondrosis, or posterior third of iliac crest.

Sudden pain a little to the left and below the left breast, or rather perhaps over the anterior end of the spleen.

*Fourth hour*.—Several stounds of pain in the cleft between great and second toe (anterior tibial nerve). I forget which side, but I think it was the right.

Slight pains in left temple, > pressure.

Pain in upper part of right eyeball.

Pain in the region of the anterior end of the spleen.

(No more medicine taken after this.)

Went to bed about 11 p.m. and slept well for a long time (it seemed to me), but then had to rise and make

water ; it was made freely, and there was a feeling of great relief after. Felt some pains in the lower zone of the abdomen, especially on the left side.

Went back to bed, but could not sleep for pains in abdomen, like sharp stones, < by cold (one hand was outside bedclothes). Pressure (lying on belly) did not > ; like better to lie on side curled up. Had to get up and go to the closet (though I had been before I went to bed), and then saw it was only 2 a.m.

Rectum felt as if the stool would drop out ; stool not very fluid. Anus sore and smarting as if the stool was acrid and hot : odour seemed to resemble stable manure. (The whole stool, odour, consistence, colour, &c., reminded me very much of that used, in my old school days, to follow a laxative dose of *aloes*.) Sleep after this not refreshing, wakened often, and had but little desire to sleep again, and so off and on all through the night. Grumbling pains in iliac regions, especially left side, off and on all night.

*Second day* (5th April).—Hungrier than usual for breakfast (about 9 a.m.) ; sensations as if I would have to go to stool again soon ; pains in iliac regions, especially left. Stool again at 10 a.m., much the same as at 2 a.m. ; anus smarting and burns.

Had a little backache this morning, as if I had over-stretched it during the night.

Head seems dull and cloudy, and am not able to study as well as usual ; slight headache on right side especially, though both sides are affected. Require considerable effort to follow any special train of thought.

Pain on a level with the upper part of the liver (below the right nipple), with desire to stretch back my shoulders to ease it.

Pain in frontal protuberances, dull and aching ; eyeballs ache and are sore to pressure on the upper surface in ciliary region, more especially the left.

At dinner to-day (about 1 p.m.) a most extraordinary thing happened : I seemed to be so absent-minded and forgetful that I forgot to take any potatoes till I was almost finished : I am *very fond* of potatoes, and do not consider that I have got a proper dinner without them. It seems as if the numb feeling in the front part of the brain was the cause, and for the same reason I seem to be unable to pursue any special train of thought, or give my mind to the subject read, or "take my cases" so well as usual. I

feel more as if in a dream, or as if I was doing things automatically; head confused and cloudy as after a strong opiate.

A short, sudden shoot of pain at lower third of outer side of right leg; several stitches on outer side of right big toe.

Tongue is coated yellow, with red dots at posterior part, in the middle as far as the anterior third. Anterior third has a thin white coat as if from a thin coat of white paint.

4 p.m.—Head seems a little clearer, but pain in the back is worse, also pain in the abdomen as before diarrhea.

*Third day* (6th April).—Late last night I, very stupidly, in a fit of abstraction, took several globules of *Lachesis* 200, and am therefore afraid to record more symptoms at present, lest they might be faulty.

After this I did not note symptoms very specially: the chief points seemed to be pains in the wrist and elbow, ankles, metatarsal and metacarpal bones, especially on the *left* side. So far as this proving has gone it would seem as if the remedy was more a *left-sided* one, but of this I am not sure. From the fact of the pains being so often in the iliac regions, and under the left breast, I have often thought that a woman might make a more valuable prover.

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### COLCHICUM.

By AGRICOLA.

On October 12th, having met with, in the wild forest, a floral oasis of autumnal crocus, I gathered a quantity of the bulbs, most of which were an inch in diameter. Upon my arrival home at 1.30 p.m., I removed the outer scales and fibrous roots, bisected the bulbs, put about a pint into a jug and covered them with glycerine, then in an hour transferred them and the glycerine, which had now become as fluid as water, into a quart pickle bottle, which I filled up with alcohol. During this process, some of the glycerole having got on my hands, I, in a fit of abstraction, mechanically spread it over their whole surface, well rubbing my hands together. Suddenly it flashed across my mind what would probably follow, *i.e.*, absorption into the circulation of a dangerous cathartic, &c. I therefore at once immersed my hands in water, and then dismissed the subject from my thoughts. During my five o'clock tea much abdominal flatus, compelling me to take a promenade, reminded me

of my morning *contretemps*. At 6 p.m. : Heat agreeable of face and whole body. 7 p.m. : Sensation under liver, &c., whereby I knew sharp purgative action was in progress. (7.30 to 8.30 : *Camphor* tincture by finger tip every five minutes.) 7.40 : Feel cathartic action in rectum. I feel rather tremulous. 8.20 : Feet feel cold. 8.40 : I take some ale. *Camphor* has perverted taste; the ale is actually nauseating. I did not regain my usual relish for it and for food for at least a week.

During night and early morning occasional abdominal disturbance, flatus, *pelvic tenesmus*, &c. ; much less urination than usual.

Oct. 13th : Fecal action as usual, excepting that there is much anal constriction.

Oct. 14th : Persistent flatus per anum. No fecal action, nor yet on 15th nor 16th; very hard and costive on 17th. (*Calendula* puts my fecal action normal.)

I myself have had numerous other instances proving the power of *Camphor* in promptly arresting the pathogenetic action of drugs, but the present is, I think, the most instructive. The symptoms of the impending disturbance were so energetic as to render it prudent for me to give to those around me instructions as to what should be done in case of danger to life arising.

I believe medical literature possesses no other record of an instance where *Colchicum* has been brought into the system otherwise than through the stomach, therefore I had no guide nor precedent for my prognosis nor for ultimate remedial and antidotal treatment.

I wonder what an Old School practitioner would have done, if he had been summoned to such a case ?

## THE SERPENT POISONS.

By JOHN H. CLARKE.

(Continued from p. 228.)

### *CROTALUS HORRIDUS*.\*

THIS medicine has had a very extensive proving. It was not so fully proved by Hering as *Lachesis*, which is peculiarly his

\* Dr. Hayward writes to me (though he does not give me his authority) that many of Hering's *Crotalus* symptoms are taken from the effects of *Crotalus durissus*; and he therefore suggests that the medicine should be named "Crotalus" simply. But as there is another distinct *Crotalus* (*Crotalus Cascavella*), with a separate proving, I think it best to keep to the usual designation to prevent confusion.—J. H. C.

own ; but in the very complete monograph by Dr. Hayward in the *Materia Medica, Physiological and Applied* will be found a full account of its effects as observed hitherto.

*Crotalus* resembles *Lachesis* closely in many particulars, but yet the differences are sufficient to distinguish between them. *Crotalus* causes all the symptoms of prostration and shock produced by *Lachesis* : it disturbs the moral and intellectual faculties ; produces hemorrhage from all the orifices and into the skin ; disorders digestion ; the urinary and sexual functions, the respiratory organs, the heart ; causes fever ; produces inflammations, ulcerations, and gangrene ; all kinds of nervous sensations. The symptoms are aggravated after sleep, and there is intolerance of tight clothing round the waist. But yet *Crotalus* is not *Lachesis*. There is a difference in the degree of characteristicity of these last conditions. *Crotalus* has not the intense sensitiveness of *Lachesis* entering into all conditions. For instance, in throat affections, the *Crotalus* patient lies with head stretched back, which would be intolerable to the *Lachesis* patient. And the aggravation after sleep is not nearly so marked as with *Lachesis*.

**MIND.**—The mind symptoms of the two are much alike. There is irritability and loquacity in both, but *Crotalus* is rather snappish than malicious. There is more obtuseness and stupidity with *Crotalus* ; yet, is excessively sensitive emotionally, easily moved to tears as by a story. *Lachesis* does not know what time of day it is ; *Crotalus* does not know where he is in the street and is in danger of being run over. *Crotalus* has suspicion, but is not so jealous as *Lachesis*.

In a case of senile dementia Dr. Hayward relieved the following symptoms with *Crotalus* : Mistakes in keeping accounts and writing letters ; forgetfulness of figures, names, and places ; awaking in the night, struggling with imaginary foes ; imagining himself surrounded with enemies or hideous animals ; taking antipathies to members of his family.

Finally : *Crotalus* is a markedly right-sided medicine, *Lachesis* is markedly left-sided. Thus *Crotalus* has a much more predominating action on the liver than *Lachesis*—hence its greater appropriateness in yellow fever and some conditions of jaundice.

**HEAD.**—*Crotalus* has terrible headache, frontal, over eyes, and occipital ; feeling as if a blow had been struck on the occiput—symptoms which have led to its successful use in cerebro-spinal meningitis.

**EYES.**—In the eye we have impaired vision as well as all the various tearing pain around the eyes ; bleeding from the eyes ; burning in the eyes ; suggesting ciliary neuralgia, keratitis, and kerato-iritis.

**JAUNDICE AND YELLOW FEVER.**—But the most characteristic

feature of the *Crotalus* action manifested in the eyes does not relate to them specially—I mean the yellow coloration. This is one characteristic distinction between *Crotalus* and *Lachesis*. The greatest triumphs of *Crotalus* have been won in the treatment and prevention of yellow fever. *Lachesis* has jaundice, but not nearly so markedly as *Crotalus*. In 1854 Drs. Humbolt and Manzini inoculated many persons with the *Crotalus* venom as a prophylactic against yellow fever, and they succeeded in producing in those inoculated all the symptoms of the onset of an attack. “Nothing was wanting—expression of countenance, pain in loins, headache, the symptoms of the gums.

**HEMORRHAGE.**—Bleeding, which is one of the leading symptoms of yellow fever, is more marked in *Crotalus* than in *Lachesis*. There is flow of fluid blood from all orifices and surfaces. So much is this the case, that it has been successfully used in the hemorrhagic diathesis.

**EARS.**—Oozing of blood from ears. Feeling of fulness in ears, especially right, with sensation as if hot wax were trickling down eustachian tubes into mouth. Sensitive to noises; deafness; illusions; vertigo. Here again the right-sidedness of *Crotalus* is manifested; it is the right ear that is more particularly affected. I have recently used *Crotalus h. 5* with much benefit in a rather chronic case of deafness with feeling of stoppage in the right ear.

**NOSE, STOMACH, AND THROAT.**—Bloody mucous discharge from the nose is a leading indication in diphtheria; in which the sloughy character of the ulceration of the throat and the absence of any particular left-sidedness distinguishes it from *Lachesis*. Bleeding sore gums; tongue swollen and protruded (*Lachesis* cannot protrude tongue); terrible grinding of teeth indicate *Crotalus*.

**STOMACH AND ABDOMEN.**—Bilious vomiting brought on by lying on right side; sticking pain in epigastrium; inability to bear tight clothing; pains in the liver; black coffee-ground offensive stools; (*Lachesis*, blood like charred straw). Bleeding from the kidney after scarlet fever.

**GENERATIVE ORGANS.**—Menstruation is prolonged, preceded by pain in the head, and accompanied by pains in abdomen and back. *Crotalus* has relieved hemorrhage at the climacteric, with great sinking faintness at the epigastrium, and great prostration. Blood dark, offensive; such discharge associated with malignant disease.

**RESPIRATION.**—There is, as with *Lachesis*, a tickling, irritating cough. Raw tickling pain in larynx, left side, as if in small dry spot. Nervous dry cough < by dry cold air, > by pressure, bloody expectoration. Dyspnea, prostration, asthma.

**HEART.**—The most characteristic heart symptom is palpitation, with a sensation as if the heart tumbled about, or tumbled over and over like a tumbler pigeon.

A patient of mine, who has very extensive organic heart disease, was permanently relieved of this symptom by *Crotalus*, and I know of several other like cases.

**SKIN.**—Yellow colour of the skin; hemorrhages into the skin; inflammations threatening to become gangrenous pustular eruptions about the wrists; chilblains where gangrene threatens; erysipelas after vaccination; gangrenous inflammation of skin and cellular and glandular tissues; dissection wound where there is sloughing; unhealthy abscesses, pustules, boils.

**FEVERS.**—Malignant putrescent fevers; scarlatina maligna; yellow fever; hemorrhagic measles and small-pox; malignant remittents;—all these conditions are likely to need *Crotalus*. Besides these there are thousands of cases of less serious nature and degree which may be cured by *Crotalus* when the peculiar symptoms of the drug and the case correspond. Examples will be found in Dr. Hayward's monograph.

Before leaving the *Crotalidæ*, I may mention Mure's proving of *Crotalus Cascavella*. The symptoms bear a strong family resemblance to those of the other snake poisons, but yet have distinctive characters of their own; but as I cannot refer to any clinical experience with this, I pass on to *Naja*.

#### NAJA.

With the Cobra poison the spasmodic constrictive conditions develop one characteristic peculiarity. The patient feels as if distant parts (as the heart and the ovary), were screwed together.

**MIND.**—In the mental sphere there is great depression and melancholy; suicidal insanity, brooding over imaginary troubles. Talkativeness enters into the delirium of *Naja* as well as of the others. Effects of great grief; precordial anxiety and dragging, and smarting pains in back.

**HEAD.**—The characteristic headache of *Naja* is a pain in region of left orbit, extending back to occiput; preceded and followed by nausea and vomiting. Dr. Skinner has cured with *Naja* cases of intermittent headache having these characters; one occurring every second or fourth day, in which relief had been experienced from *Lyc.*, and still more from *Nux.-V.*; but the cure was finally made with *Naja*. Headache at menopause, headache < on waking. Headache with spinal pain; dull shoots up occiput; hard feeling in cervical and dorsal vertebræ, with peculiar burning of exhaustion.

**THROAT.**—Diphtheria with impending paralysis of heart; patient blue; awakens from sleep gasping; pulse intermittent



and thready. Grasping at throat with sense of choking. Sharp pain in swollen right tonsil as from needles.

**RESPIRATORY ORGANS AND HEART.**—The heart gives the most characteristic indication for *Naja*. Almost every other affection is accompanied with heart disturbance. In diphtheria the heart is threatened. There are crampy pains in the ovary, especially the left, and they are accompanied by severe palpitation. Symptoms produced by grief are felt in precordia and back. There is dyspnea, which is of cardiac origin. There is constriction of larynx, causing cough; a sensation as if a hair were in larynx; rawness of larynx and trachea, constant tickling cough and hoarseness, short hoarse cough, finally expectoration of tenacious mucus. There is invasion of larynx by diphtheria, and threatened paralysis of heart. And there is an irritating sympathetic cough, attending organic disease of the heart.

In the heart itself the following symptoms are noted. Depression and lowness about heart. Sensation as though a hot iron had been run into heart, and a hundredweight put upon it. Inability to speak, with choking, nervous, chronic palpitation. Severe pains in left temple, cardiac and left ovarian regions; great mental depression; aversion to talking; sensation as if heart and ovary were drawn up together. Angina, pains extending from heart to nape of neck, left shoulder and arm, with anxiety and fear of death. Aggravation at night, and from lying on left side.

**CLINICAL.**—It is in cardiac cases more than any others that *Naja* has found employment. It is even said that valvular disease has been modified, if not cured, by its use. The symptoms are very striking, and when we meet them in our patients, no matter what the condition, *Naja* will not fail to help. Dr. Russell recorded a case in which "Dragging and anxiety in the precordia, occurring in great grief," was removed by the drug.

#### ELAPS.

The Coral Snake venom, like the others, causes hemorrhage; but the bleeding of *Elaps* is distinguished from the rest by being the blackest of all. There is profuse flow of dark blood at menses and between menses. The menses recur frequently every two or three weeks. Here is a great distinction from *Lachesis*. Another is in aggravation from eating fruits (which relieve *Lachesis*). Fruits and cold drinks lie like ice at the stomach. *Elaps* has great sensitiveness to cold like *Lachesis*, and also < from warmth of bed; but there is a horror of rain; < from wet weather, from putting hands in cold water, or from drinking it, which is not caused by *Lachesis* to the same extent. Cold water > the headache of *Lachesis*; but washing < the *Lachesis* sore throat.

The sphere in which *Elaps* has found its greatest usefulness is that of the ear, nose, and throat.

There are illusions of hearing, buzzing, crackling, deafness, otalgia of right ear, a discharge which leaves a green stain on linen. Catarrh with black wax; tinnitus, otorrhea, offensive, yellow, green, liquid and bloody. Intolerable itching in ears.

The nostrils are plugged with lumps of dry mucus; sleeps with mouth open. Offensive discharge; posterior wall of throat covered with dry greenish yellow scab, wrinkled and fissured, extending up to nose; nose-bleed, and pains from root of nose to ears on scabbing, loss of sense of smell. Discharge smelling like putric herring-pickle, coryza from least draught of air. Black blood flows in steady stream; arterial blood gushes from ears and nose.

There is hemoptysis of black blood after violent cough. There is a taste as of blood before hemoptysis.

SKIN.—I recently gave *Elaps* 200 to an unmarried woman, aged 30, who for several years had been troubled with abscesses under the axillæ, coming on at times. After the last attack the glands remained somewhat large, and, besides, there was a very irritable rash. Under *Elaps*, given on the indication "itching eruption in axilla," the lumps disappeared and the irritation rapidly subsided; but for two days after commencing the medicine she had a feeling of sickness, which was very unusual with her. It came on after the second dose.

#### VIPERA.

In his *Primer of Materia Medica*, Allen gives as characteristic of *Vipera* a sensation of heaviness, as if the limb would drop off. "It is particularly indicated in inflammation of the veins, not only great swelling, sensitiveness to touch, but particularly with a sensation as if it would burst from the distention of the veins, greatly < by letting the limb hang down. In one case following a diarrhea, there were violent pains in the liver, involving the right shoulder and hip, and enlargement of the liver, quickly cured." There are numerous symptoms of *Vipera* recorded, but the clinical experience is small. One observer notes that persons bitten by a viper "become prematurely old," and that "the development of children is arrested." I put on record in THE HOMEOPATHIC WORLD the following, taken from a contemporary report of a viper bite: "Feels as if teeth were all jammed together, and too many for his head." For want of provings with potencies, and of clinical experience, *Vipera* has not obtained the place in our *Materia Medica* that its evident power deserves.

## INSTITUTIONS.

### BIRMINGHAM AND MIDLAND HOMEOPATHIC HOSPITAL.

THE annual general meeting of governors of the Birmingham and Midland Homeopathic Hospital was held, Thursday, March 9, at the Council House. The Hon. A. C. G. Calthorpe occupied the chair, and was supported by Lieutenant-General Phelps, Dr. Gibbs Blake, Dr. Wynne Thomas, Dr. Craig, Dr. Wingfield, Messrs. R. L. Impey, Tyndall, Bragg, Harris, Corfield, Solly, and P. W. Walker (secretary); Mrs. Arnold Harris, Miss S. Martineau, Miss J. Martineau, Miss Scarnell, Mrs. Philips Walker, Miss Andrewes, and Mrs. Huxley. Mr. R. L. Chance wrote regretting inability to attend.

“The Committee’s report, which was read by Mr. P. W. Walker (secretary), stated that there had been a falling off in the number of in-patients, but a satisfactory increase in the attendances at the dispensary, and also in the number of home-patients. Although the in-patients were mainly drawn from suitable cases presented for treatment among the out and home-patients, they also included, as usual, cases from the surrounding districts, viz., Erdington, Darlaston, Smethwick, Tipton, &c. Nine deaths occurred during the year, of which three were cases of cancer of the internal organs, two were due to consumption, and another was caused by advanced degeneration of important organs of the body. The number of in-patients during the year had been 137, as against 159 in the previous year. The out-patients numbered 2,354, against 2,083; and home patients 582, against 551. A comparison with the previous year shows that under each of the three heads of expenditure there had been a saving, viz., maintenance, £37 16s. 9d.; house management, £11 17s. 4d.; sundries, £17 14s. 4d., making together a decrease of £67 8s. 5d. On the contra side of the account there had been a falling off in the principal sources of income, viz., annual subscriptions, £10 9s. 6d.; paying patients, £36 16s. 5d.; and Hospital Saturday Fund, £13 7s. 10d. The accounts showed a deficiency of £8 17s. 11d., which, added to the adverse balance at the end of 1891, brought the total to £876 6s. 10d. In September Dr. John R. Guy was appointed house surgeon to fill the vacancy caused by the retirement of Dr. Strange.

“The Chairman moved the adoption of the Report. He said that the hospital had run its usual career of usefulness during the past year. There was one satisfactory feature of small hospitals worth mentioning. The patients felt more at home than they did in the wards of the very large hospitals; and, possibly, a more sympathetic feeling existed between the medical officers and the patients, because the number of cases needing attention was smaller. The falling off in the number of in-patients might be partly accounted for by the fact that for something like two months the hospital was without a house surgeon. The Wardrobe and Relief Committee, under the careful and sympathetic guidance of Miss Martineau, had done essentially good work in follow-

ing up, by gifts of milk, meat, and soup, the efforts of the medical men (hear, hear).

“ Mr. Impey seconded the motion, and mentioned that the receipts had increased by £24, whilst the expenses had decreased by £67.

“ The Report was adopted.

“ On the motion of the Chairman, Lord Windsor was re-elected president; Mr. Impey was reappointed treasurer, and the committees were reconstituted, thanks being in all cases accorded for past services.

“ A vote of thanks to the Chairman closed the proceedings.”—*Birmingham Daily Gazette*, March 10.

## PHILLIPS MEMORIAL HOSPITAL.

### ANNUAL MEETING.

THE fourth annual meeting of the donors and subscribers to the Phillips Memorial Homeopathic Hospital and Dispensary was held at the hospital premises, situated at the junction of Widmore and Park Roads, Bromley, on Saturday evening, Feb. 18. In the unavoidable absence of the president (Mr. R. W. Perks, M.P., of Chislehurst), the Rev. R. H. Lovell was voted to the chair, and there were also present: Messrs. E. F. Duncanson (Bickley), W. R. Hay, C. H. Aylwin (treasurer), J. M. Wyborn (secretary), G. F. W. Brock, D. Avis, S. Soan, and Hose; Dr. Madden (honorary medical officer), Dr. H. Wynne Thomas (resident medical officer), Miss Hyde (matron), &c.

The minutes of the last meeting having been read and confirmed,

The Secretary presented the fourth annual report, from which we extract as follows :

“ In presenting to the governors, donors and subscribers their fourth annual report, the Committee are able to congratulate them on the results arising from the increased facilities for the reception of in-patients afforded by the recent enlargement of the hospital, during a full year. The number of patients treated in the wards in the year ended December, 1892, has amounted to 71, as against 59 in the previous year, and of these 50 were discharged cured, and 12 more or less improved. Owing to the subsidence, early in the year, of the influenza epidemic, which raged during a long period in 1891, the number of visits to patients at their homes materially diminished, but the figures show a considerable increase over those of 1890, when 1,006 visits were paid as against 1,252 in the past year. The Committee therefore believe that this unique function of the institution is still as much appreciated as ever. Notwithstanding the fact that the year under review has proved a comparatively healthy sequel to a period, during which much sickness had been prevalent, the number of attendances at the dispensary has reached 1,664. Twenty-eight operations were performed, while only one fatal case occurred to mar the perfection of the otherwise gratifying record. The Committee are

again under obligation to Dr. Burford, of the London Homeopathic Hospital, for his skillful assistance in this branch of the work.

"The annual subscriptions have amounted to £295, while the current expenditure has been £490 14s. 5d., showing an excess over the former of £195 14s. 5d. It is therefore evident that the Committee cannot rely entirely on this source of regular income to meet their current expenditure, and a need still exists for renewed efforts to increase the number of subscribers in order to place the institution on a more satisfactory basis, and to compensate for the losses it has suffered by removals."

The Chairman, in proposing the adoption of the Report, said he had great pleasure in testifying to the general popularity and favour with which that hospital was held in the town; and to the large number of persons who appreciated the kindness and skill of the medical officers. He thought they must all have seen that its growth was a feature of the town's life and history, evidently meeting a very considerable want. The working people of the town certainly were finding it to be just the thing they need; and he was sure they all saw, as he had said, that the institution was one which was appealing to a very great want, and meeting a very deep need. (Hear, hear.)

Mr. Brock briefly seconded the proposition, which was then put, and carried *nem. con.*—From the *Bromley and District Times*, February 27.

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## REVIEWS.

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### ORGANON OF MEDICINE.\*

THE first edition of Dr. Dudgeon's translation of Hahnemann's *Organon* appeared so long ago as 1849. This, which has hitherto been the standard translation, without a rival, has long been out of print, and only to be procured at second-hand book-shops. In the volume now before us Dr. Dudgeon has still further put the English-speaking and English-reading homeopathic and scientific world under a debt of gratitude in bringing within their reach, in as perfect a form as it is possible for a translation to be, the greatest medical work of the century just drawing to a close. This is not a mere second edition of the translation of 1849. Dr. Dudgeon has "thoroughly revised the text in order to make it a still more exact reproduction of the original." We

\* *Organon of Medicine*. By Samuel Hahnemann. Translated from the Fifth Edition, with an Appendix, by R. E. Dudgeon, M.D. Hahnemann Publishing Society. Birkenhead: The Hon. Sec., 61, Shrewsbury Road. London: E. Gould and Son, 59, Moorgate Street, E.C. New York and Philadelphia: Boericke and Tafel. 1893. Price 7s. 6d. To members, 5s.

cannot give a better idea of the work Dr. Dudgeon has put into the present edition than by quoting from his preface :—

“In the appendix I have given all the more important variations of the former edition. I have also indicated the corresponding views as set forth in the *Essay on a New Principle* and the *Medicine of Experience*, both of which essays may be regarded as the precursors of the *Organon*. I have added Hahnemann’s later opinions on several subjects treated of in this work.”

Dr. Dudgeon goes on to summarise the differences in the different edition, all of which he has noted in his appendix, and he goes on to say :—

“Thus while the body of the work contains the *Organon* precisely as it appeared in the last edition, the appendix gives a detailed history of the origin, growth, and progress of the homeopathic system of medicine in the mind of its author.”

Dr. Dudgeon has also given a translation of each of Hahnemann’s prefaces to the various editions that appeared in his lifetime. He has not offered any criticism of the views or statements of the author ; he has simply *edited* him.

A comparison of the text of the two editions of Dr. Dudgeon’s translation, or perhaps we had better say two translations, is all in favour of the later so far as precision of ideas is concerned : every page bears testimony to the care with which the revision has been done.

We hope now Dr. Dudgeon has done his share, English-reading homeopaths will do theirs—procure the work and study it, until they pretty well know it by heart.

#### McMICHAEL’S COMPENDIUM : DIGESTIVE SYSTEM.\*

It is not easy to give a clear idea of this magnificent quarto to those who have not seen it ; but perhaps a quotation from the preface will help to make its aim plain. Dr. McMichael styles his work, “A Compendium of *Materia Medica*, Therapeutics, and Repertory of the Digestive System,” and in his preface he says :

“The combination of *Materia Medica*, Therapeutics, and Repertory in a section of the human anatomy will no doubt suggest itself to the busy physician as a decided improvement over the former method of referring to three separate works before deciding on the remedy. Not only has this objection

\* *A Compendium of Materia Medica, Therapeutics, and Repertory of the Digestive System.* By Arkell Roger McMichael, M.D. Philadelphia : Boericke & Tafel. London : Homeopathic Publishing Company. 1892. Price 30s.

been overcome, but its simple arrangement will appeal to the student as well as to the mature physician; and instead of spending hours in studying one case, a few moments is all that is required (for even the student) to make his choice.

"It was not intended at first to include therapeutics or clinical suggestions in this work, but while comparing different works on materia medica, it was found that many symptoms had been inserted as characteristic of certain drugs which had never been found in the pathogenesis; and inasmuch as many of these symptoms were of undoubted value, their relation to the drug demanded recognition, but secondary to symptoms which have appeared as the result of toxic influence."

Without stopping to discuss the relative value of "clinical" and "pathogenetic" symptoms, if any difference exists, which, in spite of what Dr. McMichael says, we are very much disposed to question, we will try to describe the form of the work.

For the purposes of the work the digestive system is divided into two parts. The first part includes: (1) "Stomach," (2) "Appetite and Throat," (3) "Taste and Tongue," (4) "Concomitants," (5) "Mouth and Teeth," (6) "Nausea and Vomiting," (7) "Eructations and Flatulence," and, finally, "Clinical Directions." Each of these appears at the head of a column, the two pages of the book as it opens being thus divided into eight columns. In a margin to the left of the first of the columns appear the names of the medicines whose symptoms are described. Running the eye across the page, it can be seen at a glance under which of the headings the characteristic symptoms appear; and on each pair of pages five or six remedies are given. Under "Concomitants" the more characteristic general symptoms of the remedy are to be found, and under "Clinical" the conditions most commonly calling for the remedy are named, and symptoms which have been found clinically to indicate the medicine. Thicker type indicates the more characteristic of the symptoms.

In the second part the medicines are dealt with under the following headings: (1) "Stool," (2) "Rectum," (3) "Anus," (4) "Concomitants," (5) "Abdomen," (6) "Hypochondria," (7) "Umbilicus and Hypigastrium," (8) "Clinical."

Each part has a repertory to itself. This portion of the work has been carried out in a most complete fashion. The arrangement is alphabetical, and each symptom is to be found indexed under every word under which it is at all likely to be looked for. The importance of the symptom is indicated by the same type as in the text, and when it is a clinical symptom this is also noted. Naturally the Repertories occupy the greater part of the book.

So far as it goes, Dr. McMichael's work is the most complete, compact, and accessible materia medica concordance that has

yet been published. There is nothing with which it can be compared, as it is quite unique in design. Further, it is solid as to the quality of its contents; everything set down is reliable, having stood the test of practice. Its defects are necessarily the defects of its qualities. The author, having limited himself in the selection of his materials to those symptoms only which he regarded as true effects of the drug, with the addition (under apology) of a certain number of clinical symptoms, it naturally follows that a good number of symptoms, of the value of which other observers have no doubt, are not entered; and some remedies of the very first rank, in our estimation, fail to find a place at all. Among the latter we may mention *Aurum*, *Kali Iodidum*, *Raphanus*, and *Stannum*, medicines which in the practice of the present writer are very frequently indicated in disorders of the digestive system.

This is the only criticism we feel disposed to make on this wonderful volume, on which author, publishers, and printer have spent most laudable pains, producing a result which is a triumph of the book-maker's art and a pleasure to read and use. All found set down in its pages is sound and to be relied upon; the only thing to be remembered is that if what is looked for is not found, it may still exist, and other works of reference must be consulted before the search is given up.

#### THE HOMEOPATHIC MEDICAL RECORD (CALCUTTA).\*

We have received the first (January) number of this journal, which supplies its readers, as its title implies, with gleanings from the general homeopathic journalistic literature. The selection of articles is made with great judgment, and we have no doubt the *Homeopathic Medical Record* will powerfully assist the progress of our art in the great Indian peninsula.

#### PACIFIC COAST JOURNAL.†

In a new cover, with a new title and a new editor, our old friend the *California Homeopath* is scarcely recognisable. It is larger, moreover, than its predecessor, and as its name implies it aspires to unite and represent the homeopaths not of California only but of the whole Pacific Coast. In form and matter the new journal compares not unfavourably with the old, and we wish every success to this new development of journalistic activity in the far West.

\* *The Homeopathic Medical Record*, a Review of the progress of Homeopathic Medicine, Surgery, Obstetrics, and Allied Sciences. Edited by Dr. J. C. Lahiri. Calcutta: Lahiri and Co., 101, College Street, and 1, Old Court House Corner.

† *Pacific Coast Journal*. Vol. I. No. 1. Edited by H. R. Arndt, M.D., San Francisco: Boericke and Runyon, 234, Sutter Street.



## A PLEA FOR HOMEOPATHY.\*

IN this little pamphlet Dr. Barrow, of Clifton, Bristol, answers the question how he became a homeopath, and why he prefers it to the old system which he practised for several years before his conversion.

## THE TISSUE REMEDIES.†

THERE is no need to review this work at length, since we have so fully described the former editions and the small work of Schüssler himself on which it is founded. Guided by Bunge's tables of analyses of the blood cells and blood plasma, Schüssler was led to use the twelve leading constituents as medicinal agents, preparing them in the Hahnemannian way of graduated attenuation. In this way he has brought into use a number of drugs not previously included in the homeopathic materia medica, and others already well proved. Schüssler, however, does not acknowledge the homeopathic explanation of drug action, and for that reason he does not look with much favour on Drs. Boericke and Dewey for endeavouring to show that the uses of his remedies are really homeopathic. Be that as it may, most of the tissue remedies have now been fully proved, and thus duly incorporated into homeopathy. Their value no homeopathist is at all disposed to question, and their ready acceptance by the homeopathic body is shown by the exhaustion of a large number of editions of Schüssler's own work and by the appearance of the third of this before us. We can cordially recommend it to all who wish to know all about these valuable medicines, whether from Schüssler's side or from the homeopathic.

In their preface to the present (third) edition, the authors say:

"The generous reception and treatment accorded by the profession to the previous editions of this work rendered the preparation of a new edition a pleasant task. The whole work has practically been re-written and considerably enlarged. Everything that Dr. Schüssler himself has written up to the publication of his latest, the eighteenth edition of his *Abgekürzte Therapie*, is included, together with much clinical experience by the homeopathic profession, accounts of which are scattered throughout our journals and society transactions. The work is thus as complete as it can be at the present time regarding

\* *A Plea for Homeopathy*. By R. W. Barrow, M.D., M.R.C.S. Bristol: Edward Everard, Tailors' Court, Broad Street. 1893.

† *The Twelve Tissue Remedies of Schüssler*. By Dr. Wm. Boericke and Willis A. Dewey. Third edition. Re-written and enlarged. Philadelphia: Boericke & Tafel. London: Homeopathic Publishing Company, 1893. Price 12s. 6d.

everything pertaining to the Biochemical treatment of disease and its relation to homeopathy."

Drs. Boericke and Dewey deserve the cordial thanks of the profession for bringing in so practical a way the uses of these remedies within the reach of all.

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## EXTRACTS.

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### LONDON SEWAGE AND WHAT BECOMES OF IT.

EXTRACT from an interview with Mr. W. J. Dibdin, chemist to the London County Council, in *The Chemist and Druggist*, May 20th:—

I cannot do more than outline the interesting narrative which Mr. Dibdin gave me of that greatest of all sanitary problems (with him an accomplished fact), the disposal of London sewage. Go back ten years, and the Thames was filthy—grossly filthy. London was threatened in the heat of summer with the plague of its own effeteness. A Royal Commission sat. This great sanitarian and that propounded their schemes of carrying the sewer-contents to the sea, or pumping in a style unheard of. Men came forward with plans of utilisation, which in many cases meant "patents to sell." Some wanted miles of land where there was none; others would make no land into choice building lots with the sewage *débris*. Altogether expenditures up to £10,000,000 with respectable million-fractions annual output faced the Commission. The result was that the Commission authorised the Metropolitan Board's own scheme, formulated by Mr. Dibdin, tentatively. That was estimated to cost London £200,000 a year. Its *rationale* may be briefly put. Carry down the northern sewage to Barking, and the southern to Crossness; let it settle there, and hasten decomposition by the addition of lime in solution and ferrous sulphate; if necessary, further purify the liquid portion or effluent with permanganate, and turn it into the river, and carry the sludge far out to sea. The scientific world laughed at the proposal; utilitarians were horrified at the bare idea of the waste of valuable manure; and ratepayers, who knew nothing of science, sighed. Now all that is forgotten—Mr. Dibdin's scheme is an accomplished fact; he has saved London hundreds of thousands annually, and can afford to forget the hard things that were said of him.

Although the contractors have still a few workmen at Barking and Crossness, the scheme is practically complete, and at both works there are staffs of chemists who are daily and hourly

analysing the sewage as it is received, as well as periodically in the precipitating-tanks, and also the effluent. The object of the analyses is, of course, to ascertain if any modification of the prescribed quantities of lime and iron is necessary when the process of precipitation is complete, and the extent to which the effluent contains putrescible matter. The power of lime to precipitate organic matter is no new fact, but it is to Mr. Dibdin that we owe the suggestion to use it only in solution. On adding 3.7 grains of dissolved lime and 1.0 grain of ferrous sulphate, the matter in suspension is rapidly thrown down. The effluent was for a long time a source of considerable trouble to the chemists, because of the small quantity of putrescible matter left in solution. Manganate of soda *plus* sulphuric acid was used to sweeten it, as permanganic acid has the peculiar power of stopping immediate putrescent decomposition, and the river quickly did the rest. That day is past, however, for another of Mr. Dibdin's prophecies, which were pooh-poohed seven or eight years ago, has been fulfilled—viz., that nature, in the shape of bacteria, could be used to eat up the last traces of effete matter.

"I should like to know how you do that."

"Simply enough," replied Mr. Dibdin. "Take a filter-bed of coke-breeze, pass the effluent through it, and you soon have the coke alive with bacteria—nitrifying bacteria—which in their myriads convert the foul matter into harmless substances. We give the filter-bed a rest-time to aerate, and use it again, and have carried the process to such fineness that not only can fish live in the filtrate, but you would not hesitate to use it with your whisky if I put a carafe of it beside you."

"Have you this filtration process at work on a large scale?"

"No, but we are now laying a bed of an acre area. We have had splendid results with one of a two-hundredth of an acre, and I see no reason why we should not succeed with the whole acre. If I had had my way at first the thing would have been done years ago; now bacteriologists have proved my case."

"What becomes of this sewage precipitate?"

"That we call sludge. It is taken down the river from ten to twenty miles east of the Nore. See, in this map of the basin of the Thames, the lines of navigation are close to the north and south shores. Between these are two sandbanks six or seven miles long, and between these a deep gulley, called the Barrow Deep, a mile wide. There is no navigation there, and there we take the sludge down in steamers and drop it, one thousand tons being spread over a run of ten miles, and the sweep of the outgoing tide washes it clean out to sea."

"How much do you carry down, and what is the cost of your scheme?"

"We disposed of one and a half million tons of sludge last

year. The cost of the scheme is £120,000 a year (£80,000 under the estimate)—that is, interest on outlay, and all working expenses whatsoever. Yes, including steamers and down to the last book of litmus-paper.”

“All that means a great deal to London, of course, and helps to keep the Thames pure.”

“It does. Frankly, I don't think what I have done in this matter is appreciated, but we'll let that pass. As to the river, if the Thames Conservancy did their duty as well as we do, what a different river it would be! There are some samples of the stuff that they allow to go in it. You see what the big chemical works down the river do for it, but you must not tell what I tell you about that—only that the County Council has its eye on the Conservancy. London will benefit from the rivalry.”

#### A NEW ARTICLE OF DIET.

At the last meeting of the Medical Society Hr. Fürbringer brought before its notice pea-nut or earth-nut flour as a useful and economical article of food. Earth-nuts were chiefly grown in Central Africa, the East Indies, or the Southern States of North America. The plant, called *arachis hypogea*, a papilionaceous plant, had the peculiarity of ripening its fruit underground. The taste of the uncooked nut reminded one of raw beans, that of the roasted of almonds and nuts. The preparation itself was known as “earth-nut meal,” and was prepared by Dr. Nördlinger, of Borckenheim. Its constituent albumen was greater than that of the leguminose (23 to 26 per cent.), and amounted to 47 per cent.; besides this the meal contained 19 per cent. of fat and non-nitrogenous substances. The retail price was 40 pf. per kilogramme; a little over 4d. According to Dr. Nördlinger it was the most nutritious and cheapest article of food we possess. These considerations led to a trial of it in the Friedrichshain Hospital. The dry material showed itself unsuited for a food. As a coarse meal, and beaten up in soup it resembled oatmeal soup. Twenty-five to forty-five grammes to a plate of soup corresponded nearly to sixteen grammes of albumen, or nearly one hundred grammes of fresh meat, two eggs, or twelve oz. of milk, and costs from half a farthing to a farthing. The speaker had given such a quantity of the meal to 128 men, women, and children. Half of these had taken the soup readily, and it agreed well with them, for weeks together, even when they were suffering from dyspeptic and intestinal troubles. The other half found the soup disagreeable, but only a small number evinced an

unconquerable aversion to it. The soup had no influence on the alvine evacuations.

We had, Dr. Fürbringer remarked, been in possession of a similar preparation for years, that had been used for forced fattening of animals—earth-nut cake. This possessed 49·3 per cent. of albumen, or 53·8 per cent. of raw protein. The price was 9 marks per 100 lb. When the meal was given dry the albumen was found in the stools, showing that it was not taken up into the system, but when it was given cooked the stools contained little, if any, albumen. The speaker then showed some specimens of food prepared from earth-nut flour, such as cakes, macaroni, and earth-nut coffee (?). He did not look upon earth-nut as a delicacy, but as a valuable and suitable food for hospitals, prisons, volksküchen, and similar institutions. Its usefulness as a food in diabetes would have to be considered. Some of the members present thought the article prepared had an agreeable aromatic odour.—Berlin Letter, *Medical Press*, March 1st.

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## PREPARATIONS.

### ROSBACH WATER.

STEADILY and deservedly growing in favour among table waters is that from the Rosbach spring near Hamburg. The water is of high organic purity and issues from the well highly charged with carbonic acid gas. It contains, according to Dr. Chas. A. Cameron's analysis, 120·90 grains of solids to the imperial gallon (70,000 grains), as follows:—

Carbonate of Calcium	...	...	...	24·99	Grains
Carbonate of Magnesia	...	...	...	18·00	"
Chloride of Magnesium	...	...	...	0·55	"
Chloride of Sodium	...	...	...	82·36	"
Sulphates of Calcium, Oxides of Iron, Silica, &c.				<i>traces.</i>	

Total Mineral Solids ... 120·90

It is thus a slightly alkaline water. It is brilliant, sparkling, and highly palatable. The Rosbach Water Company (4, Sussex Place, Leadenhall Street) supply it unaltered, as it comes from the well. It is bottled on the spot, and special care is taken to retain the carbonic acid with which it is naturally charged.

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### MOSQUERA BEEF PRODUCTS.

We have received from Messrs. Parke, Davis & Co., of 48 and 44, Holborn Viaduct, E.C., samples of the preparations of the Mosquera-Julia Food Co., of Detroit, U.S.A., namely,

“beef-meal,” “beef-cacao,” and “beef-jelly.” “Beef-meal,” as the name implies, is a dry preparation in powder form. This is of itself a great advantage. Beef contains  $77\frac{1}{2}$  per cent. of moisture, and in getting rid of this a great reduction in bulk is effected without any reduction of nutrient properties. But this is not the only advantage possessed by beef-meal. The digestive ferment contained in pine-apple juice is made use of in the process, and the beef-meal is thus already pre-digested and ready for assimilation in whatever form it may be served up, the pine-apple flavour rendering it eminently palatable—a great advantage over ordinary peptonised foods. We append Dr. John Attfield’s analysis.

### CHEMICAL ANALYSES OF MOSQUERA BEEF PRODUCTS.

#### MOSQUERA’S BEEF-MEAL.\*

This beef-meal contains:—

	In 100 parts.
Stimulating and flesh-forming nitrogenous matter (nitrogen, 10·89) .....	68·97
Ordinary sweet normal fat.....	17·83
Normal mineral matter, chiefly phosphates .....	3·94
Natural moisture.....	9·26
	100·00

Ordinary beef contains  $77\frac{1}{2}$  per cent. of moisture, Mosquera’s beef-meal under 10 per cent. ; therefore 1 lb. of this dried and powdered beef represents, in mere weight, 4 lb. of the original beef.

Beef simply dried by heat and then ground to a meal, contains no soluble, flesh-forming material, and very little soluble, stimulating, nitrogenous material. But Mosquera’s beef-meal, made by myself by the Mosquera-Julia method, that is to say, by peptonising beef, not with the ordinary animal pepsin of the pig but with the newly-discovered pepsin-like ferment of fresh pine-apple juice, and drying and powdering to a meal, contained no less than  $41\frac{1}{2}$  (actually, 41·64 ; nitrogen, 6·575) per cent. of non-coagulable albuminoid material soluble in water. Only 0·3 of this albuminoid material was derivable from the pine-apple juice, therefore more than 41 per cent. of my Mosquera-Julia beef-meal was “beef-peptone.” Moreover, the product was quite palatable, not bitter like pepsin-peptone, indeed quite appetising. With animal pepsin I have never succeeded in obtaining anything approaching so remarkably good a result.

Obviously, Mosquera’s beef-meal is most unusually highly peptonised. The proportion of the soluble solids of the beef has gone up from 2 or 3 to over 40 per cent., the digestibility and general value of the beef to invalids and weakly persons being increased to a corresponding extent.

Mosquera’s beef-meal also contains a fair and useful proportion of

\* By Dr. John Attfield, Professor of Practical Chemistry, author of *Manual of Chemistry*, Food Juror and author of the *Water and Water Supplies*, Official Handbook at the Health Exhibition, &c.

warmth-giving material in the form of fat, which, by the way, appears to have no tendency to become rancid. There also is present a proper proportion of bone-forming material or phosphates.

In all cases where it is important to supply nutriment of high sustaining value, with the least tax on the digestive functions, Mosquera beef-meal will be found exceedingly useful. The "beef-cacao" is a mixture in equal parts of beef-meal and powdered Dutch chocolate and sugar, which, upon being added to hot milk, make a beverage at once palatable and nourishing and free from meaty flavour. The beef-jelly is soluble in either hot or cold water, and makes excellent beef-tea. On account of its great solubility which favours rapid absorption, it is preferable to the beef-meal preparations in rectal alimentation.

A great variety of excellent soups and dishes may be made from the Mosquera preparations. Owing to the dry state of the beef-meal, its lightness, and, we may add, its very reasonable price, we should strongly recommend travellers and explorers to provide themselves with a good supply when they start on their expeditions.

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COINCIDENT ATTACKS OF DISTINCT FEVERS.—Dr. H. N. Joint states (*Practitioner*) that while diphtheria aggravates scarlatina in the acute stage, scarlatina modifies and attenuates subsequent diphtheritic symptoms. Roetheln, after scarlatina, assumes often a malignant type. Measles is intensified after scarlatina, and so is scarlatina after measles. Erysipelas is mild when complicated by scarlatina. Vaccinia is severe in scarlatinal convalescents.—*New York Medical Times*.

THE REMEDIAL USE OF APPLES.—Chemically the apple is composed of vegetable fibre, albumin, sugar, gum chlorophyl, malic acid, gallic acid, lime, and much water. Furthermore, the German analysts say that the apple contains a larger percentage of phosphorus than any other fruit or vegetable. The phosphorus is admirably adapted for renewing the essential nervous matter, lecithin of the brain and spinal cord. It is, perhaps, for the same reason, rudely understood, that old Scandinavian traditions represent the apple as the food of the gods, who, when they felt themselves to be growing feeble and infirm, resorted to this fruit, renewing their powers of mind and body. Also, the acids of the apple are of singular use for men of sedentary habits, whose livers are sluggish in action, those acids serving to eliminate from the body noxious matters, which, if retained, would make the brain heavy and dull, or bring about jaundice or skin eruptions and other allied troubles. Some such experience must have led to our custom of taking apple-sauce with roast pork, rich goose, and like dishes. The malic acid of ripe apples, either raw or cooked, will neutralise any excess of chalky matter engendered by eating too much meat. It is also the fact that such rich fruits as the apple, the pear, and the plum, when taken ripe and without sugar, diminish acidity in the stomach, rather than provoke it. Their vegetable sauces and juices are converted into alkaline carbonates, which tend to counteract acidity. (*North American Practitioner*).—*New York Medical Times*.

## GENERAL CORRESPONDENCE.

A SUGGESTED EXPLANATION OF THE ACTION OF  
MERCURIUS BINIODATUS IN DIPHTHERIA.

To the Editor of the HOMEOPATHIC WORLD.

SIR,—The curative action of the red Binioidide of Mercury in true diphtheria is familiar to me for the last twenty-five years, as to most other homeopaths. It is only in some cases of malignant form that it is surpassed by the Cyanide of Mercury. But it is only just within the last few days that I have obtained so satisfactory a *rationale* of its medicinal action in the true membranous disease that I now lay it before the readers of the WORLD. It is now generally recognised by the profession that true diphtheria—that form of the disease characterised by the formation of ash-coloured membrane, with a dynamic pyrexia, and very rapid, weak pulse—is invariably accompanied, if not caused by a *micrococcus* of an oval shape forming dumb-bells, or chains, or clumps, upon the mucous membrane and underneath it. They penetrate and destroy the submucous connective and muscular tissues, and so alter the fluids of these tissues as to produce the fœtor, which, in the opinion of many, is pathognomonic of diphtheria. These micrococci are extremely minute, varying from one-thousandth to three-ten thousandths of a millimetre in diameter (Klein); they multiply with enormous rapidity, flow along the veins and lymphatic vessels, and are even found after death blocking up the capillaries of the glomeruli and uriniferous tubules of the kidneys. Rod-shaped bacteria are also found in the diphtheritic membrane, but these are in the opinion of Klein and Klebs only accessory, and not essential elements of the disease.

Now the allopathic treatment of true diphtheria is primarily based upon the foregoing pathology, viz., to destroy the micrococci and bacteria as they come to the surface, and to keep up the patient's strength by concentrated nutriments, and sufficient alcohol to maintain the heart's action, and to resist the progressive "tendency to death" shown by the severe cases of this disease. Undoubtedly many cases recover under this treatment, but our percentage of recoveries is much larger, because, as I think, while not neglecting antiseptic or germicidal gargles and local applications to the tonsils, we *primarily* treat with internal remedies the whole morbid state. Personally I have seldom found *Merc. Binioid.* 3x., or in very bad cases even 1st centes. trit. dissolved in water (sometimes with a grain of *Kali Hydriod.* to increase its solubility) fail to start the curative action. Sometimes when there is, distinctly, albumen in the urine, *Cantharis* 8 aids me in alternation with the *Merc. Binioid.* However, as



the ulcerations of the throat produced by pure pathogenetic effects of Mercurial salts bear no close resemblance to the continuous or interrupted patches of diphtheria, I could not satisfy my mind that it was *strictly homeopathic* to this disease. And indeed our learned colleague, Dr. R. Hughes (*Manual of Therapeutics*, 2nd ed., vol. i. p. 120), has "failed to see any decisive benefit from their action."

But I have now come to understand that the action of the *Merc. Biniodatus*, in the lower triturations, where it arrests the disease, is *that of a germicide*. It actually follows up the micrococcus and kills it. Mons. Miguel has discovered that in the power to prevent the growth and multiplication of microbes in sterilised broth, both the iodide of silver and the biniodide of mercury are more powerful than the bichloride of mercury. A solution of a one-forty thousandth strength has the same effect in rendering life impossible to any form of microbe as a solution of one-fourteen thousandth strength of the bichloride (corrosive sublimate). Those surgeons who are now taking alarm at corrosive sublimate injections and sprays for antiseptics should make a note of these results, for the tissues of the patient would run much less risk of inflammation or irritation from an antiseptic as powerful *quoad* germicide, only *one-third* the strength in solution of the dangerous bichloride.

A dose of our third decimal, say one grain, contain one-thousandth of a grain of the pure biniodide. This is a substantial enough quantity, according to Miguel's experiments, to act as a germicide. Each dose is rapidly absorbed, and, as I think, by attacking and destroying the nearest agglomeration of microbes, initiates the action of nature in ejecting the destroyer *per vias naturales*. It is not a bad suggestion to make from Miguel's statements that we should think of applying locally the iodide of silver to the tonsils, uvula, &c. I knew a homeopath in San Francisco who used this as a routine treatment, and he had unusual success with his diphtheria cases. If we give the *Merc. Biniod.* in grain doses of the first centesimal we give a powerful germicide indeed, and possibly it may be too lowering to the patient. Each case of diphtheria must be studied on its own merits, and the choice, both of the homeopathic remedy and its dilution, must be carefully made. In our impatience to "make a hit" quickly, we are too apt nowadays to give too low dilutions and too frequent doses.

It is not unsatisfactory, however, to have our clinical experience confirmed and explained by scientific facts.

Yours faithfully,

J. MURRAY MOORE, M.D.

51, Canning Street, Liverpool,  
April 28, 1893.

## A PLEA FOR THE PROVING OF OUR NATIVE WILD PLANTS.

To the Editor of the HOMEOPATHIC WORLD.

SIR,—The old herbalists—Culpepper, Gerrard, and others—were no doubt on the right tack, in their search for remedies for the ills that flesh is heir to, as far as concerns the *materia medica* they adopted; but they had not the key wherewith to unlock its hidden stores. This key the homeopath holds in his hands, and I somewhat marvel that more zealous and extensive use is not made of it in the way of discovering new remedies. I have no doubt numberless healing virtues lie hidden in the wild plants growing in our hedgerows, fields, woods, on our hills and mountains, waiting to be discovered and made known, only there is a lack of zeal in the work of discovery, a lack of interest in such common things of every-day occurrence; whereas their very commonness, their continual forcing themselves upon our notice, should rather quicken our interest in them. Such thoughts have often occurred to me, but they have been revived and stimulated of late by the discovery of an important healing property in one of our commonest weeds, which perhaps no one would be disposed to credit with any useful healing property, and to regard as provided only as food for small birds—I mean the common chickweed (*stellaria media*) of our gardens. My wife, coming of a gouty stock, has long suffered from enlarged finger joints, at times very painful and inflamed, and seldom heretofore at rest. Having heard a rumour that chickweed poultices were good for this ailment, I gave her some tincture of this plant, which I had made years ago, by filling a bottle with portions of the plant and then pouring in spirit of wine, in which condition it has stood ever since. I gave her this, requesting her to rub it on the inflamed joints at night with the tips of her fingers. After two or three nights' use of the tincture the painfulness of the joints was quite relieved, and she has hardly had occasion to use the tincture again, though it is several months since she first used it. I myself also have found benefit from it. For a long time I experienced a painful aching in my great toes at night, often keeping me awake for an hour or more. This gave rise to visions of gout, although I am by no means of a gouty diathesis, I determined, however, to give the tincture a trial; and the first application brought relief, and I have used it only once since. From these instances I think we may conclude that we have in this common weed a remedy capable of alleviating the pains of gout by outward application, and probably those of rheumatism and of other articular affections. It is at least worth a trial. And an internal proving may possibly bring to light other valuable properties of this lightly esteemed weed. F. H. B.

## THE LEPROSY COMMISSION REPORT.

To the Editor of the HOMEOPATHIC WORLD.

SIR,—The analysis of the long expected report of the Indian Leprosy Commission published in the *British Medical Journal* of April 15th (in which my name is incidentally mentioned) and commented on in the columns of the HOMEOPATHIC WORLD calls for observation. After explaining the nature of the preliminary measures undertaken by the Commissioners to carry out the instructions of the Committee of the National Leprosy Fund, the *British Medical Journal* proceeds to deal with the question of the increase of leprosy as revealed by the last two census returns. In my recent volume on the *Recrudescence of Leprosy and its Causation* I have given the figures of these returns as supplied by Mr. Baines, the Census Commissioner for India, with an analysis, and have shown that the conditions under which the last return was made were such as to preclude accuracy and to minimise the result. On examining the forms used in the last census, 1890-1, I find in Rule 14 that leucoderma or white leprosy is especially excluded. Now white leprosy in India is a very common form of disease, the victims being numbered by thousands. Mr. Jonathan Hutchinson says this disease "occurs in all climates," but is "especially conspicuous in dark races," and that "there is no doubt that in Indian statistics it has often counted as such." Nor is this the only reason for impugning the reliability of these returns. The census form used in the last return contains the following unusual instruction:—"You are to make all entries as the person himself, or his guardian, states, and not to dispute his statement." Coupling this direction with the fact that since June 17, 1889, when the first meeting of a Leprosy Committee was held at Marlborough House, reports as to the intended compulsory segregation of lepers have been widely circulated, and it is probable that thousands were secreted to escape the threatened incarceration. There is also the fact, of which we have abundant evidence, that none but the afflicted members of the lowest classes will admit that they are lepers, and you have all the conditions for a very inadequate and misleading official return. Referring to the census of 1880-1, the Government of India, in a resolution dated Simla, 26th of September, 1888, observes that these figures do not "afford a true measure of the extent of the disease." Ten years later the difficulties of obtaining accurate results were intensified. Moreover leprosy is allowed by all authorities to be difficult of diagnosis. Mr. Jonathan Hutchinson says, "It is by no means always easy . . . even to the well skilled." Mr. H. A. Ackworth, Municipal Commissioner, Bom-

bay, in a communication to me, dated 29th of July, 1891, says, "I have plenty of lepers in my hospital here who could not be identified as such unless they were completely stripped and examined by a trained eye." How, then, could unskilled enumerators report such cases? Sir Andrew Clark, at a dinner given at the Hotel Métropole, January, 1890, at which the Prince of Wales presided, said that "the evidence was conclusive not only that leprosy did exist in larger measure in recent years, but that new germ centres were springing up in various quarters, and the old centres were widening." The evidence collected by me for the first time from all parts of the world, as exhibited in nearly one hundred pages of my book, show that Sir Andrew Clark's explicit statement is by no means exaggerated. One of the chief causes of this remarkable increase, which forms the *raison d'être* of my volume, is the "State provided remedy" of vaccination. I have shown that leprosy in various countries has followed *pari passu* with the introduction and extension of this practice. "The Leprosy Commissioners," says the *British Medical Journal*, "in this analysis, declare that they never heard of any native who traced the development of his affection to this source." This only shows that the Commissioners have very much restricted their inquiries. In my volume I have furnished particulars of cases of invaccinated leprosy in natives, Eurasians, and whites in India, also of cases in the West Indies, British Guiana, South Africa, and other countries, and have documentary evidence of many other similar cases. But in such an important inquiry as this my object has been as far as possible to weigh rather than count the cases. Among the witnesses adduced in support of this part of my treatise, I may mention Sir Erasmus Wilson (sometimes called the father of dermatologists), Dr. John D. Hellis, Dr. Liveing, Sir Ronald Martin, Professor W. T. Gairdner, Dr. Tilbury Fox, Dr. Gavin Milroy, Dr. R. Hall Bakewell, formerly Physician to the Leper Asylum, Trinidad; Dr. A. S. Black, of Trinidad; Dr. Edward Arning, Dr. Walter M. Gibson, late President of the Honolulu Board of Health; Professor H. G. Piffard, of New York; Dr. A. M. Brown, London; Dr. George Hoggan, Dr. Blanc, Professor of Dermatology, University of New Orleans; Dr. Bechtinger, of Rio; Professor Montgomery, of California; Dr. Sidney Bourne Swift, late Medical Director Leper Settlement, Molokai, Hawaii; Dr. P. Hellat, St. Petersburg; Professor Henri Leloir, Lille; Dr. Mouritz, Surgeon Brunt, who has given evidence before the Royal Commission on Vaccination; Dr. John Freeland, Government Medical Officer, Antigua; Dr. S. P. Impey, Superintendent Leper Asylum, Robbin Island, Cape Colony, and many others.

If these witnesses had merely expressed a theoretic opinion that, given the right conditions, leprosy could be inoculated into

healthy persons by means of vaccination, their names and position would entitle them to respectful attention, but in a considerable number of instances their opinions are supported by particulars of medically certified invaccinated cases.

Yours faithfully,

WILLIAM TEBB.

Devonshire Club, St. James's, S.W.

April 29, 1898.

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## VARIETIES.

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**A COCAINE-RAVAGED CITY.**—The city of Jackson, Michigan, is reported to be "in a fever of excitement" owing to disclosures which have been made, showing that the cocaine habit has taken hold of many of the most prominent citizens. The ravages of the drug, so the local papers say, have been frightful, and, as a consequence, the whole community is agitated to its very foundations. All the trouble appears to have arisen from the fact that a local physician, himself a confirmed taker of cocaine, has brought many of his patients under its influence. Many of "the best class of citizens" are now addicted to the habit, and the local press publishes a list of hundreds. Whisky-drinking follows the ravages of cocaine upon its victims, and they pour down a dozen drinks of liquor in an hour sometimes. A majority of the victims became addicted to cocaine before knowing what they were taking, it having been administered for sore-throat, hay-fever, and many minor ills.—*Chemist and Druggist*, April 8th.

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## LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

**HOURS OF ATTENDANCE:**—Medical, Daily, 2.30; Surgical, Mondays and Thursdays, 2.30; Diseases of Women, Tuesdays and Fridays, 2.30; Diseases of Skin, Thursdays, 2.30; Diseases of the Eye, Thursdays, 2.30; Diseases of the Ear, Saturdays, 2.30; Diseases of the Throat, Mondays, 2.30; Operations, Mondays, 2.

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## MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Ballantyne (J. W.) and Williams (J. D.)**. The Structures in the Mesosalpinx. Their Normal and Pathological Anatomy. 8vo, pp. 52. (Edinburgh: Oliver and Boyd; Simpkin. 2s. 6d.)
- Boericke (William) and Dewey (Willis A.)**. The Twelve Tissue Remedies of Schüssler: Comprising the Theory, Therapeutical Application, Materia Medica, and a Complete Repertory of these Remedies, Homeopathically and Bio-Chemically Considered. 3rd ed., re-written and enlarged. 8vo, pp. 384. (Homeopathic Publishing Company. 12s. 6d.)
- Burnett (J. Compton, M.D.)**. Curability of Tumours by Medicines. 12mo, pp. 332. (Homeopathic Publishing Co. 8s. 6d.)
- Cotterell (E.)**. The Pocket Gray; or, Anatomist's Vade Mecum. Compiled Especially for Students. New ed. 18mo, pp. 260. (Baillière, Tindall, and Cox. 3s. 6d.)
- Dalby (Sir W. B.)**. Diseases and Injuries of the Ear. 4th ed. Cr. 8vo, pp. 290. (Churchill. 10s. 6d.)

- Bulles (W.). Accidents and Emergencies. 4th ed., revised and enlarged. Cr. 8vo. (H. K. Lewis. Net, 8s.)
- Juler (H. E.). A Handbook of Ophthalmic Science and Practice. With Illustrs. 2nd ed. 8vo, pp. 546. (Smith and Elder. 21s.)
- Kenwood (H. B.). Public Health Laboratory Work, including Methods Employed in Bacteriological Research, with Special Reference to the Examination of Air, Water and Food. With Illustrs. Cr. 8vo, pp. 482. (H. K. Lewis. 10s. 6d.)
- Kneipp (S.). Plant Atlas to "My Water Cure." Containing 69 Pictorial Representations of all the Medicinal Plants Mentioned, as well as some others in General Use among the People. With 41 Coloured Plates. Cr. 8vo. (Grevel. 12s. 6d.)
- Marshall (A. Milnes). Vertebrate Embryology. A Text-Book for Students and Practitioners. 8vo, pp. 624. (Smith, Elder and Co. 21s.)
- McMichael (A. R.). A Compendium of Materia Medica, Therapeutics and Repertory of the Digestive Organs. Large 4to, pp. 399. (Homeopathic Publishing Company. 80s.)
- Ruddock (E. H.). The Homeopathic Vademecum of Modern Medicine and Surgery, with Clinical Directory of New Edition. Cr. 8vo, pp. 990. (10s. 6d.) Cheaper edition; post 8vo, pp. 891 (without Clinical Directory). (8s.) (Homeopathic Publishing Company.)
- Williams (J. W.). Aids to Biology. Specially Prepared to meet the Requirements of Students Reading for the First Examination of the Conjoint Board. 12mo, pp. 136. (Baillière, Tindall and Cox. 2s.)

## TO CONTRIBUTORS AND CORRESPONDENTS.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 80, *Clarges Street, W.*

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

LITERARY matter and correspondences should be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct the same and return to the *Editor* as early as possible.

### CORRESPONDENTS.

Communications received from Dr. McLachlan, Oxford; Mr. Spencer, Oldham; Mr. J. S. Hurdall, London; the Manager of *The Hospital*; Dr. D. A. Foote, Omaha, Nebraska, U.S.A.; Dr. J. S. Mitchell, Chicago; Mr. W. Tebb, Burstow; Dr. Gallavardin, Lyons; the Rev. F. H. Brett, Carsington; Dr. Oscar Hansen, Copenhagen; Mr. J. Meredith, Lydney; Dr. Holmes, Omaha.

### BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Chemist and Druggist.—Allg. Hom. Zeit.—Monatsblätter f. Hom.—Monthly Homeopathic Review.—American Homeopathist—Climates and Resorts.—Homeopathic Journal of Obstetrics.—Homeopathic News.—Medical Century (April and May).—Southern Journal of Homeopathy.—Chironian.—The Hospital.—New York Medical Times.—Homeopatisch Maandblad.—Vaccination Inquirer.—Clinique.—Archiv f. Hom.—Medical Argus.—Pacific Coast Journ. of Homeopathy.—Homeopathic Recorder.—Homeopathy Medical Record.—Minneapolis Hom. Magazine.—Hahnemannian Monthly.—Journ. of Official Surgery.—Rev. Hom. Belge.—Childhood.—Medical Visitor.—Monthly Magazine of Pharmacy.—North American Journ. of Homeopathy.—Homeopathic Envoy.—Medical Advance.—Organon of Medicine, by Samuel Hahnemann. Translated from the 5th edition, with an appendix by Dr. Dudgeon.—Curability of Tumours by Medicines, by J. Compton Burnett, M.D.

# THE HOMEOPATHIC WORLD.

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JULY 1, 1898.

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## THE CHICAGO CONGRESS.

THE International Homeopathic Congress held in connection with the World's Columbian Exposition at Chicago has come and gone, and it will ever remain in the history of medicine as a landmark in the progress of our art. Nearly twelve hundred practitioners who acknowledge the law of similars for their guide met in conference, and discussed the bearings of HAHNEMANN'S discovery on all the branches of medical practice. In due time the transactions of the Congress will appear in print, affording a permanent embodiment of the great week's doings, and of this we shall hope to give some account to our readers. In the meantime we publish a letter from an English colleague who kindly undertook to act as our correspondent, and also a first-fruit of the Congress papers in that communicated by Dr. OSCAR HANSEN, of Copenhagen.

And we must not omit to mention another instance of journalistic enterprise, the publication of a daily edition of *The Medical Century* during the sitting of the Congress. In this excellent publication we have reproduced in full the leading addresses of the general meetings, together with the proceedings of the Congress, and the programme of the sections. We will conclude this article by quoting from the Address of the President of the Congress, Dr. J. S. MITCHELL, of Chicago, a passage in which he exemplifies and explains the lead which the United States of America have gained on all the rest of the world in advancing the

beneficent doctrines of HAHNEMANN. The American colleges explain it all. May Europe soon copy! Here are Dr. MITCHELL's words, quoted from *The Daily Medical Century* of Tuesday, May 30th :

“ Since the firm establishment of Homeopathy in America its progress has been in an ever-increasing ratio.

“ In 1876 the first World's Convention was held in Philadelphia at the time of the Centennial Exposition. In his inaugural address, the President stated that there were then 5,000 physicians in the United States. Hardly two decades after, at this assembling, we are able to assert that there are 12,000 in this country. This makes an army whose presence is not to be despised. In many other countries the growth of Homeopathy has been remarkable, but it should be noted that in this land where freedom of thought and political action is most pronounced, its adherents are most numerous. It sometimes looks as though this country would profoundly influence the spread of Homeopathy throughout the world. Even now the isles of the seas contain our physicians educated in this country. The papers to be read at this Congress from Australia and the Sandwich Islands are by graduates of American Colleges. We do not undervalue the labours of our colleagues in other lands than our own, but the existence of our twenty colleges gives us a mighty power.”

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THE HEAVIEST THING IN THE WORLD is the metal osmium, the bluish-white metal with violet lustre, which Smithson Tennant discovered ninety years ago in the residue from dissolved platinum ores. This metal has a specific gravity of 22.477, that of gold being 19.265, lead 11.367, iron 7.79, and lithium, the lightest, only 0.594. The French chemist, M. Joly, has just placed it beyond question that osmium is likewise the most infusible of metals. It could never be made to yield to the oxyhydrogen flame, which makes platinum and iridium run like water. But M. Joly has been subjecting osmium to the excessively high temperature of the electric arc, which M. Moissan has of late employed successfully in the manufacture of diamonds. Under this fierce heat the rare metal, ruthenium, which used to be deemed all but infusible, readily melts. But osmium remains refractory, there being apparent only the faintest traces of fusion. On this account osmium cannot be prepared in sufficient quantity to make it very useful in the arts. But its alloy with iridium, which defies the acids, is of some value, nothing better having been found wherewith to tip gold pens. Being unoxidisable and non-magnetic, its employment for the bearings of the mariner's compass has been advocated.—*Monthly Magazine of Pharmacy.*



## NEWS AND NOTES.

### THE NEW HOSPITAL—LAYING THE FOUNDATION STONE.

FRIDAY, June 23rd, was a notable day at the Homeopathic Hospital. The following report of the commencement of the building operations, taken from *The Times* of Saturday, June 24th, gives a succinct account of the ceremony.

“THE LONDON HOMEOPATHIC HOSPITAL.—The Duchess of Teck yesterday afternoon laid the foundation-stone of the London Homeopathic Hospital, Great Ormond Street, in the presence of a large gathering. The Princess May was prevented from attending by a temporary indisposition. Those present included Lord Ebury (the president of the hospital), Lady Caird, Lady Victoria Grosvenor, the Hon. Miss Frances Grosvenor, the Hon. Miss Wellesley Grosvenor, the Hon. Mrs. Algernon Grosvenor, the Hon. Mrs. Norman Grosvenor, Lady Newton, the Hon. Miss Leigh, General Thomson, General Beynon, &c. The Duchess of Teck was received by a guard of honour of one hundred men of the Post Office Volunteers (of which corps the Duke of Teck is the honorary colonel), under Captain St. John. Mr. Alan E. Chambre, chairman of the building committee, presented an address to the Duchess of Teck, in which he stated that the hospital was inaugurated nearly half a century ago through the generous impulses of the late Dr. Frederick Foster Quin and his Royal and personal friends to succour the sick poor under medical principles not only sanctioned by true science, but possessed in practice of many special advantages. It had ever since been the earnest effort of the medical council and staff of the hospital to foster and assist the progress of medical science by demonstrating those proved and widely accepted principles, and also to promote that true and free union of the medical profession, without which progress in knowledge was seldom possible. An unwavering adherence to those principles had been followed by the readiest and most generous support from the charitable public, while the efficient training of a large number of nurses had elicited the warmest recognition from every section of the medical profession. The board of management, whose counsels had been guided for forty years by Lord Ebury, felt pride in a record of 300,000 patients, with a yearly register of 800 in-patients and 10,000 out-patients. They now had to look forward to a new building of large capacity—involving an expenditure of £40,000, of which the sum of £30,000 had already been provided—which would possess all these modern

accessories to the effective care of the sick and suffering which the latest advancements of medical science had suggested. After hymns and prayer, the foundation-stone was raised, copies of *The Times* and of the forty-second annual report of the institution being placed beneath. The slab having been fixed, the Duchess spread the mortar, and, after the lowering of the stone, declared it to be 'well and truly laid.' The Bishop of Bedford pronounced the Benediction."

PROPOSAL TO REPRINT THE *CHRONIC DISEASES* OF  
HAHNEMANN.

Now that the English edition of the *Organon* has been given to the world in revised form, it is only fitting that the translation of the *Chronic Diseases*, now long out of print, should be again put within reach of the homeopathic public. The following circular which we have received from Messrs. Boericke & Tafel, of Philadelphia, will show that a movement to this end is on foot. We could have wished that Hempel's translation should be submitted to some thoroughly competent German scholar, who is also a homeopathist, for revision, and that it should be edited in the same able fashion as the last edition of Dr. Dudgeon's *Organon*. However, we believe Hempel's translation to be a thoroughly sound one, and it is far better to republish it untouched if it cannot be revised by a master. Here is the text of the circular:—

"Some one ought to reprint Hahnemann's *Chronic Diseases*.' So say many practitioners. But to bring out such a work involves the expenditure of a goodly sum of money—a risky expense, that few publishers care to assume. Messrs. Boericke & Tafel have, however, determined to make the attempt to reprint this grand old work. Estimates have been obtained, the cost figured out, and now it only remains for the gentlemen of the homeopathic medical profession to indicate their wishes. If a sufficient number will subscribe to the undertaking to enable the publishers to see their way towards paying for paper and type-setting, the old book will again be obtainable; otherwise it will remain out of print.

"The only English edition of the *Chronic Diseases* ever published was issued in five small volumes, in 1845, and has been long since out of print. The proposal is to reprint that edition in one volume of a size uniform with the *Materia Medica Pura*—pages  $9\frac{1}{2} \times 6\frac{1}{4}$ —on fine paper, and bound in half morocco. So printed it will make a solid volume of about 1,200 pages. The price, delivered to subscribers, will be \$8.00 net.

"The first period of Dr. Hering's preface to the *Chronic Diseases* will give those unfamiliar with the work an insight into its nature:

'Hahnemann's work on chronic diseases may be considered a continuation of his *Organon*; the medicines which follow the present volume may therefore be considered a continuation of his *Materia Medica Pura*.' The first volume of the five is devoted to the following subjects: 'Of the Nature of Chronic Diseases,' and the 'Treatment of Chronic Diseases'; this latter embracing papers on 'Sycosis,' 'Syphilis,' and 'Psora.' The remaining volumes are taken up with Hahnemann's provings and comments on the 'Anti-Psoric Remedies,' about forty-seven, embracing many of the most important remedies in homeopathy, such as *Arsenicum*, *Lycopodium*, *Sulphur*, *Silicia*, *Phosphorus*, &c. No mightier monument to the memory of Hahnemann will ever be raised than his own books, not the least important of which is his *Chronic Diseases*.

"Subscribe through your regular pharmacist, or book dealer, or direct to the publishers, Boericke & Tafel, 1,011, Arch Street, Philadelphia, Pa."

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#### ROSBACH WATER: A CORRECTION.

MESSRS. HERTZ AND COLLINGWOOD, of 4, Sussex Place, Leadenhall Street, E.C., write to point out a very regrettable misprint in our account of Rosbach Water last month. There is only the difference of a letter in the spelling of "Hamburg" and "Homburg," but the two cities are three hundred miles apart, and are poles asunder in respect of cleanliness and its opposite. The Rosbach spring, then, be it clearly understood, is situated near *Homburg*, and has nothing whatever to do with Hamburg. Another exception taken by Messrs. Hertz and Collingwood to our account, is in our placing it under the heading "Preparations." Excluding the bottling, the only "preparation" Rosbach Water undergoes is in the laboratory of nature. This, however, was made plain in our article. We much regret that we should have unintentionally cast a suspicion on what we believe to be the purest and most pleasant of all the natural table waters now in the market.

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#### CHOLERA.

THE article published in our pages entitled, "What to do if Cholera Comes," is now being reprinted with amplification and additions, and will very shortly be issued in a small volume.

## ORIGINAL COMMUNICATIONS.

CHICAGO AND THE WORLD'S HOMEOPATHIC  
CONGRESS.

(From our Congress Correspondent.)

DEAR COLLEAGUE,—I beg to send you for publication in the HOMEOPATHIC WORLD, a brief report on the "World's Congress of Homeopathic Physicians and Surgeons" which has just been brought to a most successful termination.

Your correspondent arrived in Chicago less than eight days after leaving by the Cunard Company's steamer, thanks to the *Campania* and the Pennsylvanian Limited Express, the latter of which conveyed him from New York to Chicago in twenty-four hours. Another line accomplishes the distance—about a thousand miles—in twenty hours.

My first duty was to call on Dr. Ludlam, who directed me to Dr. A. K. Crawford, whose genial relatives in his absence speedily arranged for my comfort. Shortly after arriving at Dr. Crawford's, Dr. J. S. Mitchell, the President, called, and as it was he who had been kind enough to invite me, I was soon made to feel that I had come amongst friends. How I spent the rest of the Sunday need not be stated, but it may be remarked that a highly salaried quartette assisted at the service I attended. It is no part of my duty to refer to Chicago, whose vast population, enormous buildings—some of them fifteen stories high—its beautiful avenues, with their well-grown trees, built as it is on land reclaimed, so to speak, from the ill-drained prairie, entitle it to the designation of the eighth wonder of the world. Michigan Avenue is said to be ten miles long. The streets are arranged on the decimal plan, so that the merest tyro can soon see "where he is at." Trams, elevated railways, tally-ho coaches, steamboats, buggies, and hansoms, carry the traveller in all directions. Beautiful parks and delightful suburban residences allure the city man away from the chink of the almighty dollar. More than three hundred homeopathic physicians minister to the wants of the community, and offer their gentle services in order to keep going the overtaxed cerebral convolutions of their restless *clientèle*.

Those who strive to minimise the sufferings incident to the brute creation will be glad to hear that Armour and Company, who kill 3,500,000 animals per annum, use the utmost care,

and pay their experts fees rather than mere wages. A pig, which gives no sign after a few seconds of fatal hemorrhage, is hanging up in the ice-room as sides, &c., of pork within six minutes of the skilful thrust. Eleven thousand men are employed in the stock-yard of this firm.

As to the Exhibition being unfinished, it may be stated that that need not deter an intending visitor; he will give out long before the novelties that cross his path will. Living is reasonable, especially in boarding-houses, and city travelling is cheap.

#### THE CONGRESS.

The Forty-sixth Annual Session of the American Institute of Homeopathy commenced on Monday, May 29th, at 10 a.m., under the chairmanship of Dr. J. H. McClelland, who briefly addressed the meeting. Ex-presidents and foreign delegates were invited to seats on the platform. Amongst other subjects it was decided to alter the Institute seal, the bust of Hahnemann, taken from life by P. J. David in 1837, being adopted for that purpose. The Necrologist referred to the deaths of members, including that of Dr. Drysdale. Foreign delegates were then introduced. No one would wish to deny that the presence of the venerable Dr. C. Bojanus, of Russia, and his accomplished wife, and the visit of Dr. P. C. Majumdar, Calcutta, caused the utmost enthusiasm. Dr. Molson, of London; Dr. C. S. Fischer, of Sydney; Dr. Vernon, of Ontario; Drs. Logan, Henderson, Robinson, of Toronto; Dr. E. Adams, and your correspondent, were received with equal cordiality. At a later meeting all of these, with Dr. Oscar Hansen, Copenhagen, were, on the motion of Dr. J. S. Mitchell, elected Corresponding Members of the American Institute of Homeopathy, with the exception of Dr. Bojanus, who had already received the honour.

In the evening a public meeting was held in the Washington Hall under the presidency of the Hon. C. C. Bonney, when the spacious hall was well filled. Dr. McClelland complained that while the names of Hippocrates, Galen, Versalius, Harvey, and Hunter were inscribed on the walls of the Exhibition, the name of Hahnemann was wanting. He alluded to the proposed statue of Hahnemann at Washington, subscriptions towards which were rapidly coming in. The foreign delegates then addressed the meeting, and the vast audience accorded them a cordial reception.

Afterwards Dr. J. S. Mitchell read his inaugural address. He referred to the proposed statue of Hahnemann at Washington. He alluded to the good that would result from the Congress long after the building known as the "White City" (Exhibition Buildings) had ceased to exist. He alluded to the Congress of 1876, when 5,000 homeopathic physicians were said to exist in the United States, and remarked that they now numbered 12,000. He next remarked upon the recognition on the part of the Government, and referred to their exhibits at the Fair and the existence there of a well-equipped Homeopathic Hospital. In eloquent terms Dr. Mitchell contrasted the permanence of the work of Hahnemann with the comparative failure, as to survival, of that of Cromwell. He classed Hahnemann with Shakespeare, Milton, and Laennec, in regard to the permanence of his influence.

In the afternoon many attended the opening of the temporary Homeopathic Hospital in the Exhibition grounds. The addresses of Drs. Ludlam and Dake, and the delightful rendering by a quartette of "The Life Boat," and Newman's "Lead Kindly Light," were the chief features of the ceremony.

Having thus referred to the initial meetings of the Congress, I shall in a subsequent letter discuss the various papers which were presented to the different sections.—I am, yours faithfully,

X.

Chicago, June 3, 1893.

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## THE DOSE.

### COMPARATIVE OBSERVATIONS ON DIFFERENT ATTENUATIONS OF THE SAME DRUG.

By Dr. WM. LAMB, Dunedin, N.Z.

L. M., a young man, aged 19, was attacked with a copious hemorrhage from the left lung while out. I was called to see him, and gave *Acon.* 1, but this having no effect, I followed it up with the following, extending over a long period of weeks, viz., *Millefol.* 1x, *Ac.-sulph.* 3x, *Acaliph.-ind.* 3, *Phos.* 3. 12, *Bry.* 3. 6, *Led.* 3x, *Ham.* 1x, *Ipec.* 1, *Ac.-gallie* 1x, *Dig.*  $\phi$ . The hemoptysis was recurrent and copious, varying from *Oss.* to *Oiss.* at a time. After going through above list, I was near my wits' end;

and the hemorrhages continuing in spite of everything, I injected *Ergotin*, but without success. About this time he took so severe a turn that I was asked to bring another doctor in consultation, who recommended *Atropin* injections gr.  $\frac{1}{32}$ ,  $\frac{1}{32}$ ,  $\frac{1}{32}$ . These were just as futile as previous treatment. Then I looked up Dr. Clarke's *Prescriber*, and on fly-leaf opposite "Bleeding under Consumption," my attention was arrested by a note I had taken to this effect:

"*Millefol.* 3. 6 (Burnett never failed in 30 cases.—*H. W.*, 1873, p. 58).

So I gave *Millefol.* 3 mij. 2hs, and from that time there has been no further hemoptysis. My patient had been two months in bed on his back. I have sent him away a fortnight since to a farm life in one of our dry localities. The allopathic doctor thought so badly of his case that he sent his clergyman to him that same evening. He has gained weight, and is looking better than ever he did. My curative medicines for the lung were first, *Psorin.* 30 mj. at bedtime, indicated by symptom of "feeling under sternum of ulceration," and latterly *Bacillinum* 200. As regards *Bacill.* 200, I might add that he took mij. every eighth day, but always noticed on the following morning "pain in abdomen followed by relaxed stool," and a general feeling of not being well. I have reduced the dose to mj., and even a fraction of a drop, and still he feels the same subsequent symptoms, though in a much less degree.

In this case, while *Millefol.* 1x signally failed, the 3c triumphantly succeeded. I was encouraged to try the higher potency from my previous experience in the hematuria case reported in the March number of this journal, where *Ham.*  $\phi$  failed but *Ham.* 1c succeeded. I do not for one moment believe the result in either case was accidental, because in the hematuria patient, while everything hitherto had been tried in vain, and the patient's state was as bad as could be, he immediately and steadily improved after each dose of the medicine. And as if to make assurance doubly sure, the man, on finding his urine clear of blood after two days' use of *Ham.* 1, of his own accord stopped it on the Saturday, but finding the blood had returned on Sunday, he resumed the medicine, and when I saw him on Monday his water was perfectly normal. Then in the hemoptysis case nothing seemed to have the slightest effect in keeping away the awful hemorrhages which would come

at their own sweet will, do what you might. But after *Millefol.* 3 there were no more of these, but slowly and steadily the sputa cleared of blood.

### SOME REMARKS CONCERNING THE HOMEOPATHIC TREATMENT OF SKIN AND SEXUAL DISEASES, WITH CASES FROM MY PRACTICE.

By OSCAR HANSEN, M.D., Copenhagen.

WHEN I commenced practice, about seventeen years ago, I had often under my treatment cases of skin and sexual diseases which a few years later formed a considerable part of my practice, and the consequence was, that I specially busied myself with these diseases. During the last six or seven years these diseases have become my speciality, and I have for a long time desired to impart my views about how the homeopathic treatment stands in these matters.

It is a well-known fact, that in the old school it was H. Hebra who first classified the skin diseases, while Hunter, Ricord, Swediaur, and others first brought light into the venereal diseases. In regard to the skin diseases, Hebra considered them as perfectly local affections, while Bazin and, later on, Hardy, from the French school, positively consider many, even the greater part, constitutional sufferings, Erasmus Wilson also leaning towards this conviction.

These remarks are only put forth in regard to the pathology, but as far as the therapeutics are concerned, excellent remedies are available in homeopathy, if these are only made use of in the proper way. When considering the therapeutics, an external treatment can in some diseases of the skin not be left out, while it in many cases is of the greatest importance; but, on the other hand, many skin diseases can be cured by internal remedies alone or by a combination of internal and external remedies, this latter procedure generally producing a quicker improvement and result. Professor Piffard has, in his *Materia Medica and Therapeutics of the Skin*, shown his results of experiments with remedies as well externally on the non-affected skin as internally. As authorities, he quotes authors among the homeopaths.

In regard to the dilutions, I consider the low and middle



dilutions ( $\phi$  1-6 C.) the best ones; a few authors, however, mention higher dilutions, up to the 30th, as effectual. I have during earlier years made considerable use of dilutions in 30th decimal and centesimal, but the improvement was either very slow or there was no result whatever.

The case becomes quite different in local venereal affections, and especially in syphilis. In treating this disease, Bähr, Kafka, Yeldham, Franklin, Jousset, Trites (in Arndt's *System of Medicine*), and others, all use low dilutions and triturations, Yeldham being one of those who give the largest doses. If the low triturations and dilutions are without result, Franklin advises to go over to the middlemost ones (Jousset gives the same advice when treating syphilis with *Iodine*), a course which, no doubt, it is hardly necessary to take. In his *Lehrbuch der homoeopathischen Therapie* (vol. ii. p. 643), Kafka says: "Since we have arrived at the conclusion, that the minimum doses of the best selected homeopathic remedies do not suffice for the cure of syphilis, and that surer results are obtained with more substantial medicines," &c., which assertion I can fully endorse, and I shall now mention the circumstances which have brought me to this conclusion.

Having during several years seen but slow and unreliable results after using higher dilutions, a tailor came, in 1880, to me suffering from secondary symptoms of syphilis, namely, papulous syphilides and maculous papulæ in fauces. He stated that he had been treated with a great number of ointments (inunctions) and *Iodide of Potassium*, however, with but little result, and swore that even if the homeopathic treatment should last several years he would remain under the treatment. I treated him with carefully selected homeopathic remedies in 30th dilution, but more than two years passed now and then with a slight improvement, but these were always followed by considerable increases of the disease, so that he began getting tired of the treatment. I then made a change, commencing to treat him with *Merc.-bijodat*. 1 cent. trituration, and later on with *Kali Hydrojodicum Kafka*, increasing the number of drops. After a few months the syphilides had disappeared. Several other preparations of *Mercury* in low triturations were prescribed for the maculous papulæ in fauces. These had decreased considerably, although only disappearing altogether after using the prescription of E. M. Hale: *Iodide of Potassium* grammes 4, *Merc.-bijodat*.

centigrammes 5, and *aqua distillata* grammes 125—1 teaspoonful 3 times daily. The cure lasted nine months, the patient having one year and a half later a recurrence in fauces, which, however, soon got cured by using Hale's prescription. I have since then seen him several times, he being continually well.

In homeopathy we have—what the allopathists do not have—good specimens of *Mercury* in its different forms, and Dr. J. H. McClelland has given excellent indications for the use of the different preparations. These indications are found in Arndt's *System of Medicine*, 3rd part, in the article on syphilis by W. B. Trites, M.D. Philadelphia, Pa. The majority of homeopaths use *Mercury* in low triturations or dilutions, even Jahr used *Mercury* in low trituration for syphilis. Hahnemann generally used the higher dilutions, although also lower ones, yet it must be remembered that it is only far into this century that important discoveries have been made in regard to the venereal diseases and the pathology of syphilis. Besides *Mercury*, there is the other great remedy for syphilis, *Iodine* and its preparations, especially *Iodide of Potassium*, which, in 1831, was used for the first time by Dr. Robert Williams, while Paracelsus was the discoverer of *Mercury* as a remedy for syphilis. Some physicians are of the opinion that the use of *Iodide of Potassium* in cases of syphilis is specific, not homeopathic. Hughes does not consider this remedy homeopathic, the doses being much larger than the homeopathic doses generally. T. F. Allen says in his *Materia Medica* that the effects of *Iodine* and *Iodide of Potassium* are decidedly homeopathic in some stages of syphilis. Besides *Mercury*, *Iodine*, and *Iodide of Potassium*, many other homeopathic medicines are used in treating syphilis and local venereal affections, thus *Nitric Acid*, *Aurum*, *Kali-bichrom.*, *Asafoetida*, *Corydalis Formosa*, *Hepar*, *Mezereum*, *Lachesis*, *Stillingia*, and many others.

Kafka's recommendation of *Kali Hydrojodicum* after his formula for initial sclerosis and his praise of *Hepar-sulph.* and *Chin.-arsenic.* for decreasing appetite, sluggishness, anemia during syphilis, I have often found asserted. As long as these remedies are prescribed, however, all use of *Mercury* or *Iodide of Potassium* must be discontinued.

In treating gonorrhoea I must generally, when the first painful stadium has been passed, use injections besides the remedy for internal use, and this combined treatment

generally gives better and quicker results than by using internal medicine alone.

I have now selected seventeen cases from my practice :

### I.

Workman O. I.'s widow, 50 years old, living in Herstedoester by Glostrup (Sealand), came under my treatment on December 20, 1889. Has had four children and the disease has lasted twenty years. Has been treated by many doctors. The lower part of the nose is drawn in, caused by part of the cartilage having been eaten away by the disease. Lupus protuberances as large as small peas on the nose and nearest parts of the cheeks. The skin is red and thickening throughout the affected parts. Some of the protuberances are covered with small scales, others being transformed into ulcers with thick crusts. Otherwise the patient feels well. It was in vain that *Thuja* 1c dilution, *Hydrocotyle*, *Iodothykal* (according to Schweikert's recipe) were used. But from the moment I commenced with *Arsen.-album*, dilution 3rd decimal, namely, on October 6, 1890, an improvement showed itself by a few of the protuberances vanishing. The improvement not increasing, I gave her on January 9, 1891, *Arsen.-album*, 2nd decimal dilution, 3 drops 3 times daily, and on July 23rd there were several scars after ulcerated protuberances, while other protuberances had disappeared without leaving scars. The reddening and thickening of the skin had also disappeared. Thus the improvement went continuously on until January 29, 1892, when protuberances again appeared, some of them ulcerating. I then discontinued with the *Arsen.-album*, and prescribed *Kali-hydrojod.*  $\phi$ , 5 drops 3 times daily, simultaneously ordering a mixture of *Iodine* and *Glycerine* for external use, namely, one part *Iodine* to nine parts *Glycerine*, to be applied every evening.

Already in the end of March all the protuberances had disappeared, the patient being well, and the recovery has lasted ever since. (Journal vi. 5,195.)

Kippax states in his *Handbook of Skin Diseases and their Homeopathic Treatment*, that the main remedies are *Arsenicum* and *Hydrocotyle Asiat.* In those cases of lupus which I have treated in my clinic, I have always found that *Arsenicum* is generally the remedy which produces an

improvement. I have never seen any good derived from *Thuja*, but in nearly all the cases where a good result has been obtained, I have had to let it be succeeded by *Kali-hydrojod.* in original dilution, whenever *Arsenicum* did not suffice.

At present another woman is under treatment, and in her case a splendid result has solely been obtained with *Kali-hydrojod.* 1c dilution, and she had the disease in a very high degree.

## II.

J. A., carpenter, 34 years old, Copenhagen.

Three years ago he had a chancre with hardness at the base and spots on the body. For this he was treated with thirty-one inunctions in the Municipal Hospital in Copenhagen, whereafter he was well, until three months ago, when he got a reddening in the fauces accompanied with difficulties in swallowing, and was then treated with pills and *Iodide of Potassium*. The infection of the throat ceased, but then the present disease appeared. He came under treatment on January 7, 1890, then complaining of strong spasms in the muscles of the forehead and the face, but this only when he was indoors. Once awhile heaviness in the head combined with faintness. Dark red discolouring of the arches of the palate and the tonsils. No pain when swallowing, and no hoarseness. Otherwise feeling well. I prescribed *Kali Hydrojodicum Kafka*  $\phi$ , 5 drops 3 times daily, increasing with one drop every third day, but on January 31st the spasms were worse than formerly. I therefore gave him *Merc.-bijodat.* 1c trituration, to be alternated with Kafka's *Kali Hydrojodicum* dilution every second day of 3 times daily, but when he called, February 13th, the spasms had increased considerably: I then ordered a remedy, which in many cases of secondary and tertiary syphilis has given excellent results, namely, the combination of the Chicago homeopath, E. M. Hale (*Iodide of Potassium* grammes 5, *Merc.-bijodat.* centigrammes 5, *aqua distillata* grammes 125), of which he got 1 teaspoonful 3 times daily, and was perfectly well in the course of a fortnight. The patient returned, however, on March 7, 1892, having felt perfectly well until a fortnight ago. The place, where the hardness had been, had again hardened, the skin being pushed off. At the same time he complained of piercing pains in the vertex

and the temples, especially during the night, when in bed, and the above-mentioned spasms were very bad, especially from the nape of the neck and towards the right ear. Otherwise the general condition was good. I again ordered Hale's composition, with the result that the headache and spasms had passed away by April 9th, and the hardness had completely disappeared on June 4th. (Journal vi. 5,202.)

(To be continued.)

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## REMARKS ON THE CHRONIC DISEASES, VOL. I.

By EDWARD MAHONY, M.R.C.S., L.S.A.

### SYCOSIS.

THIS "chronic miasm," we are informed, "has only prevailed from time to time, and has given origin to the smallest number of chronic diseases." Expressed briefly, but sufficiently for the practical purposes of recognition and treatment, the symptoms consist of a contaminating mucous discharge from the urinary passages of either sex, and a species of warts, either "dry, or more frequently soft, spongy, emitting a fetid fluid . . . bleeding readily and having the form of a coxcomb or a cauliflower," in and around the organs of generation. The main point against which he warns is the confusing it with Syphilis, and hence giving internally preparations of *Mercury*, and externally *suppressing* the local growths by "cauterisation, burning, cutting, or ligatures." The evil consequences of such maltreatment are manifold; and, on the other hand, those who will here as everywhere honestly apply the law of similars, and administer the carefully selected medicine internally, will reap a due reward. Hahnemann admits the local application "in the most inveterate and most difficult cases" of one of the two medicines he specially advises for internal administration. It will be observed how different a matter is this to giving one medicine internally, and at the same time applying another in the form of a lotion externally, which is of quite a different nature: in other words, bringing two totally distinct kinds of medicinal action to bear at the same time on the same disease. If the one be curative in its action, tending to relieve the oppressed vital force, what must the other be but a hindrance, and *vice versa*?

Another important point to bear in mind during the progress of treatment is, as he reminds us, that one of the other two chronic miasms (syphilis and psora) may from latency become manifest, and accordingly we may find at different times symptoms pointing to one or other of the three miasms, and we must be prepared to act accordingly. "In this case," we are advised, "the order of treatment is the following. First, we annihilate the psoric miasm by the subsequently indicated antipsorics, then we use the remedies indicated for sycosis, and lastly, the best mercurial preparation against syphilis. These different orders of remedies are alternately employed, if necessary, until the cure is completed. Leave to each medicine the necessary time to complete its action." I would call particular attention to these remarks as they explain a great deal and throw much light on the somewhat obscure question in the minds of many, of the subject of alternation. What, then, do these sentences teach us? First, be it carefully noted, he is dealing with the condition of *chronic* disease, not acute: hence we must not infer without proof from the author's writings that such a course is applicable to acute diseases. Next, and this is most vital in treatment, there is not the shadow of justification from these remarks for keeping the patient's system under the action of two or even more medicines *at the same time*: notice the cautious expression, "leave to each medicine the necessary time to complete its action." We must always bear in mind that one of the leading truths of homeopathy is that every medicine given on that law commands for the time the entire person, acts on the whole vitality, on both the spiritual and physiological functions of the entire body, and is interfered with in its curing work by the introduction of any other individual agent whatever; even such a simple thing as a glass of soda-water, or the use of a medicinal soap, may do untold mischief. How different is such treatment to that which is so frequently adopted even under the name of homeopathy, and in chronic diseases of giving two different medicines, and perhaps each more than once, on the same day, needs only to be mentioned to be evident to any one.

That the above-mentioned complications, even with such plain landmarks, are by no means easy to treat, I think all homeopathic doctors will freely admit; but what must be the hopeless confusion and prolonged failure in treat-

ment where such advice is flagrantly disregarded, and on the other hand, how important a matter is it for patients always to mention all previous local treatment, of what kind or on what part soever of the body the outrage has been perpetrated. For example, how many persons who have consulted laryngologists and throat specialists have escaped, if undergoing their treatment, with unimpaired larynx and uninjured tonsils? It can only too often be proved that symptoms working inwardly and affecting more vital organs have occurred *without other assignable cause* not long after the inhalation of some powerful drug, or the manipulation by "cauterisation, burning, or cutting" of tonsils, which had done their duty by duly admonishing their owner at every fresh "cold" that he or she, not the tonsil as an isolated thing, had an undue susceptibility to external influences of weather, climate, exposures of various kinds, and which susceptibility remained, and indeed became intensified, after the removal of the faithful guardian.

This ends the section on Sycosis, and next we come to—

#### SYPHILIS.

Its activity has been known "for the last four centuries." Those who are acquainted only with the treatment of this miasm as it is practised in the dominant school will be astonished to read, "The treatment of syphilis is only difficult when there is a complication with the psoric miasm, after it has broken forth from its latent condition." This disease also is found usually on the organs of generation, and the symptoms consist mainly of a sore called chancre and a swelling of the glands in one or both groins called bubo. In treatment he tells us three conditions may occur. 1. The uncomplicated disease (sore and glandular swellings). 2. Complication from removal, that is, suppression, by local means of either of the above-named external symptoms. 3. Complication with one of the other chronic miasms. Again, there have to be repeated warnings, and by evidence too advanced from no less an authority in the old school than the celebrated John Hunter, that the removal of external symptoms, even by excision, however carefully and promptly applied, "was *always* followed by an outbreak of the internal syphilitic disease" (this quoted from John Hunter). From France,

by another most celebrated surgeon named Petit, the same warning comes.

Hahnemann then asserts, "In my practice of fifty years duration I have never seen syphilis breaking out in the system, whenever the chancre was cured by internal remedies, without having been mismanaged by external treatment; it mattered not whether the chancre had been left standing for years, increasing all the while, as every vicarious symptom of any other chronic miasm will do, for the simple reason that the internal disease is progressing all the time, and induces a consequent development of the external symptom." He says again lower down, "There is no chronic miasm, nor a disease produced by a chronic miasm, which is more easily cured than syphilis." These statements are strong, but as far as I have had the opportunity of testing their accuracy, I believe them to be strictly true. We must bear in mind in this connection, that *Mercury* is one of the principal remedies in the treatment of uncomplicated syphilis, and that Hahnemann, whose fame as a scientific chemist was of the first magnitude, and established as such before he knew anything of homeopathy, had introduced to the profession a special preparation of *Mercury* of his own discovery, and which to the present hour is one of the most used and valued, not only by the homeopathic body, but the profession generally, although of course in the latter case, the source either not acknowledged or the author vilified; well do I remember our Professor of Chemistry, usually a most cautious and courteous person, in mentioning Hahnemann's name in connection with his chemical discoveries introducing his remarks with the expression, "a quack named Hahnemann."

To pass on. The treatment even in the second stage—that is, where there has been suppression of external symptoms—is "comparatively easy," unless the third stage, namely, complication with psora, also exists. In this case the principle referred to, and called by him alternation, necessarily comes in, and he here reminds us of the importance of "removing all hurtful external influences and putting him on an easily and vigorously nourishing diet, and regulating his general mode of life"; and in speaking of the purely medicinal treatment he again emphasizes that each remedy must be allowed to complete its action, "being permitted to act three, five, or seven weeks, as long as it is capable



of exercising a curative influence." He now returns to further explanations about and instruction on the treatment of psora, premising some general remarks, of which the first is, "The infection by means of one of the three known miasms is generally the work of a moment, but the complete development of the disease consequent upon such an infection, throughout the whole organism, requires more time. . . . Not until some days does it ultimate in some local symptom. . . . As long as the eruption is yet existing upon the skin, the psoric disease exhibits itself in its simple and most natural integrity, and may be cured in the easiest, quickest, and safest manner." Then comes the important and serious fact that if this psoric eruption has been suppressed and secondary symptoms have consequently occurred, "the internal psora cannot be brought back into its former simple and natural condition by the mere reappearance of the eruption upon the skin"; it is, on the contrary, "so changeable that the slightest cause drives it back again in a couple of days." All this shows the importance of not suppressing the *first* eruption that shows itself in disease, especially chronic disease, as by such a course the whole case is thrown into confusion and treatment too often rendered complicated, tedious, and unsatisfactory. As our author, however, remarks with painfully correct exactitude, "the homeopathic physician, in his private practice, seldom is called to a patient at the time when the eruption first shows itself." He is speaking principally here of the variety of psoric disease known as the itch, and he remarks "*Sulphur* was never given internally, for the simple reason that neither the older nor the modern physicians understand that *the itch is chiefly an internal disease*" (italics mine). As this question of treating the true itch is one that is frequently occurring, and as the itching is so troublesome that a certain amount of moral courage is called for in both patient and doctor to avoid the temporary relief of local applications, I may be permitted to refer to the case of a young man, an athlete, who lately came to me with this complaint, modified in appearance by the use of *Sulphur* tabloids and *Cascara*. He received first *Sepia* in the 30th potency, night and morning, partly to antidote the mixed treatment, and also on account of a characteristic symptom of *Sepia*, namely, wakefulness the first hour or two after going to bed. He came back in ten days, and a general appearance of

scabies was manifesting itself. He now got *Sulph.* 30, in eight doses, one night and morning, and in a week returned improved on the whole. No further medicine, and in another eleven days the note reads very great improvement; in fact, the eruption nearly gone: *return of an old neuralgia across the eyes.* Languor on rising. For these symptoms he received a dose of *Calc.-carb.* 200, and has not again returned, which there is no doubt he would have done had there been need, as he expressed himself in every way satisfied, and had been told in plain words the nature of his complaint. In a word then, and once more, the common itch, like every other disease, has not one particular medicine for every case of it, but each one must be taken on its own merits and treated accordingly.

To return. Another important point alluded to is the frequent internal administration of *Sulphur* in material doses of ten, twenty, thirty grains purging the patient: this, it need hardly be said, is *not* homeopathic treatment, even though "*homeopathic Sulphur*" be administered. I am reminded here of a patient whose symptoms so strongly said *Sulphur*, that she received it in the 12th potency; on my visit I found considerable benefit, and this time came to light the astonishing fact that this same patient having some time previously applied to a gentleman practising homeopathically for something for constipation, was told to take *Sulphur*, lowest trituration (probably 1x), daily, and had accordingly been doing this for twelve months! The 12th potency had evidently in measure antidoted the above.

Reference is then made to the abuses of *Sulphur* baths, and the evident fact that their repeated use "positively aggravates the sufferings of the patient." He then remarks, "The psoric miasm, having pervaded millions of organisms for thousands of years, has gradually developed out of itself an endless number of symptoms, varied according to differences of constitution, climate, residence, education, habits, occupation, mode of life, diet, and various other bodily and spiritual influences." Hence, the need of not one but "several antipsorics for a complete and radical removal of the psoric miasm."

How far, *in principle*, the above sentence has anticipated modern discoveries as to what has been termed zymotic or fermenting diseases, and the capacity of endless reproduction of spores, bacteria, &c., in numberless cases, I will leave to the judgment of my readers, and pass on now to

the treatment of psora. First, with regard to *diet* and *mode of life*, he will only give general directions. It is then pointed out that "strict diet is not the curative agent in the treatment of chronic diseases" as has been asserted by its opponents.

The first general remark is that the individual continues, in moderation, his usual occupations, as the artisan, farmer, housekeeper, with certain precautions and reasonable alterations, such as improved aëration of rooms, open-air exercise, recreations, but "they must never play cards," and restrictions must be put upon horseback or carriage-riding, or whatever is unduly exciting either in amusements or reading. Then follow cautions against "the arbitrary use of domestic remedies, or of intermediate medicines of any kind—perfumes, scented water, tooth-powder," &c.; and as the cure progresses, and the weather becomes warmer, cotton and finally linen are to be substituted for wool next to the skin. Ablutions are to be substituted for baths.

As to diet, "if the abdomen is not the chief seat of the chronic disease, all severe restrictions may be dispensed with." The regulation of drinks, however, he admits (and this is certainly equally true to-day), is the most difficult part of the treatment.

Coffee he strongly condemns, as also Chinese tea. With regard to wine, he cautions against depriving old persons suddenly and completely of their accustomed beverage, and would diminish the amount gradually and steadily. Brandy, however, "chronic patients must absolutely abstain from." Beer and ale are principally objected to on account of the liability of adulteration in them. Acetic and citric acid are forbidden. Sour or unripe fruit must be used only in very small quantities. Young veal must be avoided by dyspeptics. Where the generative functions are weakened, chickens or eggs must be taken only in moderation, and vanilla, truffles, caviare, avoided. Dyspeptics must beware of cinnamon, cloves, ammonium, ginger, and bitters, and flatuous vegetables. He considers beef, wheat- and rye-bread, cow's milk, and fresh butter as the most natural and harmless food. Other articles are mentioned with various degrees of commendation and caution. Tobacco must have restrictions imposed "when the intellectual functions are affected, when the patient does not sleep well, is dyspeptic and constipated." Snuff also should be interdicted.

Next come other *obstacles* to the cure of chronic diseases, such as—1. An unhappy marriage or a gnawing conscience. 2. Permanent grief and vexation. 3. Mineral baths in repeated doses. 4. The enervation of the system consequent upon excesses. 5. Suppression repeatedly of the cutaneous eruption by external applications. These are the principal enumerated *obstacles* to a cure which tend alike to complicate and cause delay in the process of cure; and it will be observed that they are of two special kinds, namely, medicinal injury and mental and moral suffering, and these two things, consistently with what we have seen all along, are the two greatest difficulties in treatment. He then returns to some further warnings as to the care needed in administering the remedies, but this had better be left for the next paper.

## MATERIA MEDICA.

### *BETONICA AQUATICA*—SECOND PROVING.

By JOHN M'LACHLAN, M.D., F.R.C.S.

PROVING began on February 8, 1893.

(Transient aching stitches in right temple.)

(Pain in right wrist.)

I seem to be less able to concentrate my attention, as if memory was failing; if I want to do anything have to stop and think what it was I intended doing.

Transient pains in belly, in the region of the tranverse colon, and in right and left inguinal regions.

Pain at the inner side of right knee joint.

*9th February.*

At 1 p.m. to-day, my usual dinner time, was not hungry as I generally am, but feel as if there was something stuck at the lower end of the œsophagus, with a slight feeling of nausea, and "heartburn."

(Scalp seems more tender when brushed than it usually is.)

5 p.m.—Similar feeling in the œsophagus, before tea, though I am usually hungry at this time.

Slight frontal headache.

Shooting pain in frequent throbs, or stounds (though not

very severe), in the back of the left wrist joint, or end of the radius and radio-ulnar joint. It comes every two or three seconds, and causes a weak paralytic or helpless feeling in the wrist joint and hand. Similar pains were also felt at the following places:—In left buttock in the region of exit of the great sciatic nerve; round the side of left chest just under breast; in left tibia about a hand's-breadth below the knee towards outer side, either in the tibia itself, or in the muscles between it and the fibula; left side of nose over the bone; in metacarpo-phalangeal joint of right big toe. One feels a desire to press these parts hard and this seems to >, seems to stop the sudden throb. This pain, however, was most constant and marked on the back (apparently) of the *left* wrist joint—the weak, helpless, or paralytic feeling, with a marked inclination to grasp this part hard, and support it with the other hand. The heat, the pressure, or the support thus given seems to > it.

A transient pain over the hepatic region.

Later well-marked stitches in a circumscribed area, a little below the anterior fold of the axilla, on the right side, on a level with and external to the nipple. The part was sore to the touch and pressure as long as the stitching pains lasted.

Pain in right wrist, similar to that in the left wrist at an earlier part of the day.

*10th February.*

Pressing pain in left half of forehead, and left temple.

Pressing pain in, and just above the inner condyle of right femur.

(Pain in joint between the second and third phalanges of right ring finger.)

Pain in top of right shoulder, near anterior insertion of trapezius; and in middle of left humerus.

Some discomfort in the lower part of the belly, with a feeling as of fermentation, especially in right inguinal and hypogastric regions, > leaning forward.

Pain in and under right breast.

Aching in spermatic cords, especially the right, with aching in right testicle, and weakness across small of back, with pain on stooping.

During the night pain especially over the hepatic region, and in the spot already mentioned, about two inches in

diameter, external to the right breast, and just below the anterior fold of the axilla. This pain is < by sudden movements, as twisting or turning. Did not keep me from sleep, though it seemed to half wake me several times.

*11th February.*

Aching, tired pain in lumbar region, especially on left side.

Pain in front of shoulder joint (side not noted)—dull throbs or shoots every few seconds.

Backache > leaning forward, with a slight colicky pain in belly, especially in sigmoid flexure and lower zone of the abdomen, as if diarrhea was about to come on.

A sharp pain and then a duller pain in the region of the gall bladder—ninth right costal cartilage—and below the right breast.

Pain in front of left humerus on a level with the insertion of the deltoid.

Pain in third and fourth metacarpal bones of right hand, and in right elbow joint.

Sharp shootings in the right inguinal region.

Pain below left breast, < movement and touch.

Pain in metacarpo-phalangeal joint of right index finger.

Sleep this night less sound than usual; frequent waking with a tight feeling in the forehead.

*12th February.*

Pain in right wrist joint and end of radius and ulna; the parts are sore to touch, especially in the region of the joint between the radius and the ulna. In this case much of the pain seemed to be towards the front part of the joint, or rather perhaps the layers of tendons covering it.

Pain in left hypochondrium.

Pain at inner side of the lower end of the left femur, and about the middle of the shaft as well.

(At bedtime—11 p.m.—a slight feeling of nausea.)

*13th February.*

Pain at the lower and inner sides of both femora—just above the condyles.

Sharp stitches in left groin, and which also pass straight up nearly as high as the apex beat.

Pain at the outer side of the right thigh, at junction of middle and upper thirds; it is sore to external pressure

and feels like a boil ; pain also in right groin and inguinal region, and in left breast.

Weary, aching pain first in the right then in the left knee joints ; also in metacarpo-phalangeal joint of left index finger.

Much more wide awake than usual at bedtime and during the night ; seems as if I did not require so much sleep as usual.

*15th February.*

Sharp shooting pains, several times in right popliteal space down leg to heel ; leg almost gives way at these times.

Pain in both lumbar regions anteriorly, especially the left, where it is also felt at the back, just above the iliac crest, and immediately external to the erector spinæ.

Pain in left nasal bone.

*16th February.*

Pain again in right popliteal space—sudden shoots down the leg ; the leg feels as if paralysed and as if it would give way at the knee ; in fact it did give way several times, doubled up limp, as it were, though I did not fall.

*18th February.*

Pain in metacarpal bone of right thumb ; also under left breast.

*4th March.*

Similar pains as above, also in lower third of right leg, right thigh, and right forearm.

*23rd March.*

Well-marked pain between the heads of the second and third metacarpal bones of left hand.

Stitches in right chest from the region of right breast, through to back, interfering with breathing, and other movements of the chest wall.

*25th March.*

Same pain again in left hand, in the evening between six and seven o'clock ; and pain also over the hepatic region.

*Remarks :—*

(1) The dosage was the same as in the first proving (p. 259).

(2) Doubtful symptoms are enclosed within brackets.

(3) The effect on "memory" has already been sufficiently dwelt upon in the first proving. I do not think that even yet I have altogether recovered from that effect.

(4) In regard to the pains caused by this proving, I would point out—(a) The frequency with which they occurred near joints, especially the wrist joints, first left, then right. (b) Its peculiar *paralytic* character, and its > from firm support or pressure. The "paralytic" character was specially marked all through the proving, and in cases where no other description is attached to the various pains recorded above, they are to be regarded as of this peculiar character. When the pain was located in the wrist, for example, the hand seemed to become almost powerless, the wrist "dropped," and the fingers hung down limp; or if anything happened to be in the hand at such times one felt an inclination to let it drop. It was the same when individual fingers were affected, though more especially noticeable in the *index* fingers. So also in regard to the right knee joint (or popliteal space), the leg seemed to become powerless, the knee to give way, and let one down when walking. This happened to me on several different occasions, and at such times I instinctively thought of popliteal aneurism, as the pain did not seem to be in the joint but rather in the popliteal space—the thought seemed to flash through my brain automatically, though its value has yet to be proved.

## THE SERPENT POISONS.

By JOHN H. CLARKE.

(Concluded from p. 268.)

### BOTHROPS.

A WORD or two on *Bothrops Lanceolatus*, for which we are indebted to the celebrated Dr. Ozanam, who died only recently.

The eye seems to be the most important sphere of this poison. "Amaurosis (sometimes immediately after the bite). Persistent amaurosis—amaurosis without perceptible dilatation of the pupil. Hemeralopic amaurosis; can scarcely see her way, especially after sunrise." Day blindness, and blindness from hemorrhage into the retina should find a notable remedy in *Bothrops*. Hemorrhages are general, the blood being black or rusty-looking,



and very fluid. Very fluid blood in jets flows at the least movement.

Inability to articulate, without any affection of the tongue. Thirst. Vomiting. Paralysis of fingers of opposite hand to the one bitten. Intolerable pain in right great toe (having been bitten on left thumb).

#### CENCHRIS CONTORTRIX.

And now I come to the Copperhead snake of North America. It was proved on men and women in the 6th, 30th, and higher potencies. Dr. Berridge has pointed out to me (HOMEOPATHIC WORLD, May, 1893, p. 328) that there is an account of the Copperhead in *Allen's Encyclopedia* under the name of *Aghkistrodon contortrix*. It occurs on p. 281 of vol. x., and refers to three cases of bite by the snake. Among the symptoms there recorded are the following: Coma, semi-consciousness, insensibility of cornea, pupils sluggish, indistinct vision, wild look, face livid and swollen, vomiting, breathing and pulse slow, pulse large and weak, paralysis of limbs, stiffness of legs, pains in finger, great swelling of arm bitten, of greyish black colour, faintness. A strong family resemblance to *Lachesis* is apparent in the symptoms. I will now summarise the symptoms of the provings communicated by Dr. Kent.

MORAL AND MENTAL.—There is the loss of memory, lethargy, melancholy, suspicion, and proneness to anger common to all. *Lachesis* thinks she is dead; *Cenchrus* "with anxiety" has a feeling that she will die suddenly. There is a marked alternation of moods (*Crocus*). One symptom reminds us more of *Crotalus*, which has loss of sense of position and direction, "dreamy, absent-minded, took the wrong car without realising where she was going." Another prover "when riding in the car, rode by the place she intended to get off at." The dreams of *Cenchrus* are especially marked, vivid and horrible; the prover could not throw them off during waking hours. Very frequently they were of a lascivious nature.

HEAD.—There is a great variety of headaches, but this seems the most peculiar,—"Hard aching pain commencing on left frontal eminence, spreading down left side to teeth, then to right frontal eminence, then to teeth on right side."

EYES.—Among the eye symptoms there is aching and itching, and dimness of vision, redness of the margins and twitching; the left eye waters; this is produced by a concussive cough.

NOSE.—There are many symptoms of nasal catarrh, scabs, and obstruction.

FACE.—The facial expression is bloated and besotted, and there is the characteristic *Kali-carb.* symptom, "Swelling above

eyes below brow like an overhanging bag of water." Red pimples in clusters in same situation. Burning face. Sallow. Blue circles round eyes

**MOUTH AND THROAT.**—There are many throat symptoms—pain, accumulation of mucus, glossy, thick, tough; difficult empty swallowing, but easy swallowing of solids and liquids. (*Lachesis* can swallow solids but not liquids.) Warm drinks are grateful.

**STOMACH, ABDOMEN, AND STOOL.**—There is nausea which is relieved by ice and aggravated by water, which causes vomiting. There is the same intolerance of tight bands as appears in *Lachesis*. Many symptoms of diarrhea, early in the morning on waking; gushing, frequent, watery, at first without pain; after several hours, great pain before the motions. Involuntary stool when passing flatus. A case is recorded of a man aged 60, cured of diarrhea with a dose or two of the 30th. The indications were, "Pain before stool; stool papaceous. Cold but not chilly."

**URINARY ORGAN.**—The cough produces flow of urine.

**GENERATIVE ORGANS.**—In the male there is violent sexual desire. In the female this is also marked. Yellow leucorrhœa; pain in *right* ovary. (*Lachesis* pre-eminently affects the *left*.) Herpetic eruption on labia. The menstrual flow (here differing from *Lachesis*) is very profuse; it is light and with dark clots.

**HEART AND CHEST.**—There are many heart symptoms in this drug. They are worse in the evening on lying down. She feels as if the heart were distended, or swelled to fill the whole chest. There is strong consciousness of the heart. Throbbing or fluttering under left scapula. Hard aching and sudden sharp stitching in the heart.

The following is something like the "tumbling about" of the heart of *Crotalus*: "At 3 p.m. sensation of fluttering of heart, followed by feeling that heart fell down into abdomen; then pulse became feeble, with heat lasting until after midnight." There is a hard, dry, tickling cough < 3 p.m. (like *Lachesis*), even causing escape of urine.

**FEVER AND GENERALITIES.**—Chill or fever beginning in the afternoon; afternoon aggravation predominates. Restlessness. Aggravated on lying down. Sense of suffocation; sinking; palpitation; sensation of dying. Must lie with head drawn back, she chokes so. All tight clothing is unbearable.

Among the characteristic sensations of the drug is a feeling as if the whole body were enlarged to bursting. This sensation is particularly manifested in the region of the heart.

Another sensation: "Awoke with throbbing in vulva and anus, followed by a dull aching in sacral region, relieved by walking about, reminds us of the sensation of little hammers beating in the rectum noted in *Lachesis*."

The symptoms are < in the evening and all night; and < when lying down.

RELATIONSHIP.—*Cench.* antidotes *Puls.*; *Cham.* antidotes uterine hemorrhage of *Cench.* and *Am.-c.* > general symptoms.

CLINICAL.—Two cases are recorded by Dr. Kent, in addition to the one of diarrhea, as cured by *Cenchris*. One was that of a married woman aged 52. Blond hair; blue eyes; full habit. A month previously to the date of treatment, May 28, 1889, she had a chill with sore throat, for which she took *Quin. Sulph.* Since the afternoon of the day before (May 27th), she had had—

Soreness of right ovary and aching inside as if gathered in a knot; she can move and walk, but with much pain.

Had a chill 27th, 3 p.m., shivering all over, could not get warm all night. Pulse small and frequent. Any little motion produces perspiration. Retching after supper.

She had taken *Quinine*, which gave her a headache and bad taste. *Cenchris* 45m. was given, six powders, one every night, dry. June 5th. No better for the first two days, then *she was well*.

The next case was that of a tall, frail young married woman, who had severe right ovarian pain, which had been relieved by *Apis* and *Sepia*, but had returned. This time *Cenchris* removed it permanently.

From this brief sketch of *Cenchris* I think it will be seen that we have in it a valuable addition to our Serpent Group.

In addition to the venoms mentioned above I may refer to Dr. Berridge's fragmentary proving of *Lachesis bufcephelus* to be found in *Allen's Encyclopedia* under the name *Vipera Lachesis*.

Also I have received from Dr. Heath a preparation of the venom of the Puff Adder, *Clotho Arietans*, the largest and most poisonous of the African vipers. Its bite is often fatal to human beings, though it is not so dangerous to dogs. The gentleman who sent Dr. Heath the specimens told him that dogs were trained to kill the viper; and on one occasion several of his own dogs attacked one that was ensconced under a stone. They failed to dislodge it, but were all badly bitten, and became enormously swollen, and their owner feared he would lose them. The treatment he adopted was to bathe the bitten parts with lime-water and to give them lime-water to drink, and in a few days they recovered.

*Clotho* deserves a thorough proving. It should have a great sphere of usefulness in many conditions where excessive swelling is a leading feature.

## THE JOURNALS.

## GERMANY.

FROM THE SUMMARY OF THE "JOURNAL OF B. H. SOCIETY."

## SEPIA IN POLYARTHRITIC RHEUMATISM.

Mr. S. was seized on October 28th with acute articular rheumatism. The pains were chiefly in ankles and wrists. Temp., 38.2° to 38.9°. Copious perspiration of intense sour smell. Pains aggravated at night, especially before midnight; constant desire to change position. *Rhus* 3 every three hours. After three days no improvement. The pains are in almost every joint, change their seat frequently, and extend into the body; are aggravated by cold and wet weather, and by the slightest draught of air. Urine dark. October 31st.—*Sepia* 6 every three hours. November 2nd.—Patient out of bed and greatly pleased that he is so much better. *Sepia* continued less frequently. After eight days he was free from pain. A slight stiffness only remained, which went off without further medicine.—Wazily, *Allg. hom. Ztg.*, cxxvi. 56.

## SULPHUR IN PULMONARY CATARRH.

A governess, aged 27, sought advice on July 10th for a lung affection of long duration. Frequently suffers from cough; last winter had moderate hemoptysis. Now coughs much day and night, with yellow expectoration, great dyspnea, anorexia, looks very ill, has some fever, menses regular, no hereditary taint. Dulness on percussion at apex of right lung; peculiar respiration and bronchophony before and behind; at apex of left lung posteriorly small râles, leather-creaking sounds on respiring in left scapular region and dry rhonchi extensively heard on both lungs. *Sulph.* 30 every three hours. July 15th.—Much better in subjective symptoms, cough and dyspnea; the catarrh of apex of left lung, the rhonchi and leather-creaking sound gone. She now got *Bry.* 3 for a little time, and was soon able to return to her work.—Amberg. *Allg. hom. Ztg.*, September 29, 1892.

## VINCA MINOR IN DIPHTHERIA.

The widow of an apothecary in Munich enjoyed a great reputation for the cure of diphtheria by means of a secret remedy, which she wished to sell for the modest sum of 100,000 marks (£5,000). A sample of this wonderful remedy was obtained, and on examination proved to be *Vinca Minor*. Of this the astute widow prepared for each case a fresh decoction, which she

administered to the diphtheria patients by tablespoonfuls. The remarkable success of this remedy in many undoubted cases of severe diphtheria was certainly to be attributed to its homeopathicity to the disease, for we read in its proving by Dr. Rosenberg that among other symptoms it caused sore throat when swallowing, hoarseness, ulcers in the nose, with obstruction of the nasal passages, flat ulcers on the buccal mucous membrane. Hitherto this drug has been but little used by homeopathic practitioners, and its usefulness has been almost confined to the cure of a case of *plica polonica*. It might be worth while to give it a trial in cases of diphtheria, which is not always so amenable to the ordinary homeopathic treatment as we could desire. Moeser in *Allg. hom. Ztg.*, cxxvi. 56.

### ECZEMA.

1. S. P., a blonde lady, aged 27, suffered for half a year from eczema of palm and between fingers; the eruption on the hand was dry, that between the fingers was vesicular. Aggravation from washing. Leucorrhœa after menses. She got, December 8th, *Sepia 30*, one dose once a week. After four weeks the eruption was much improved.—Hesse, *Archiv. f. Hom.*, i. No. 8.

2. F., a governess, had suffered for three months from dry eczema on both hands. Complained of heat of hands and flushings of face. *Sepia 30*, once a week. Reported on December 5th that she had only used three powders, which cured the eruption.—Hesse, *Ibid.*

3. A custom-house officer, aged 30, had long suffered from itching eruption on backs of hands. Six years ago was treated homeopathically for a scabious eruption on the body. On April 7, 1891, he got *Sepia 30*, once a week. Nov. 18th.—Came under treatment for an acute affection which was cured by *Puls*. The eruption was then quite gone. April 11, 1892.—Slight gonorrhœa for a week. He got *Sepia 30*, five powders, one every night. May 7th.—Gonorrhœa gone, but the eruption on hands returned. No medicine.—Hesse, *Ibid.*

4. S., a retired railway luggage guard, aged 67, sought advice for a cutaneous disease of long standing. In his early youth he had always suffered from papular and pustular affections. When serving in the army he had eczema of the thighs, which the army surgeon soon removed by a zinc ointment. It returned, however, after some years, and was nearly limited to the thighs. It was worst when he was about 34 years old. He had a great deal of medical treatment of all sorts. It was at length cured, or disappeared for sixteen years, he knew not by what remedy. In March, 1889, the disease broke out again with increased intensity. It was again treated with a variety of remedies, without any good result. Seen December 1, 1891, he presented the

following appearance:—His face and head (which had lost all its hair) were inflamed and red, with moisture constantly exuding from them, that had to be continually mopped up. His extremities were in the same state, but only a few spots over the body. If any spot became dry for a short time, a white glittering scaly skin was formed on it, under which the moisture still formed. The patient was in despair. *Lycop.* 3x every evening was prescribed. December 14th.—No change. Prescribed *Graph.*, 6 trit., every evening. January 18th.—Still no change. *Sulph.* 30, 1 dose. February 1st.—Same state. The prescription now was *Natr.-Mur.* 3x, to be taken every morning fasting, in a cupful of hot water. This treatment was continued till April 10th, when a considerable improvement was observable. The *Natr.-Mur.*, in hot water, was continued till June 24th, by which time the patient was quite free from his eczema, and the hair had again grown on his head, not white, as it had been before he lost it, but dark brown.—Bilig, *Allg. hom. Ztg.*, October 27th.

#### METRORRHAGIA.

Mrs. O., aged 44. The catamenia, which she had not had for eight months, came on and had now lasted fourteen days. She felt particularly well to-day, and had walked out when a violent flooding came on. She was taken home in a carriage, and now lay in bed. Dark blood with large clots poured from her, especially at every movement; no pain. Yesterday had much flatulent distress. She got *Lycop.* 30, two globs. on tongue. After this one large clot came away, but nothing more. The following day she was much better, and rapidly recovered.—Waszily, *Archiv. f. Hom.*, i. No. 8.

#### NEPHRITIS.

Ernst Müller, farm labourer, aged 38, had been seriously ill for ten weeks under allopathic treatment. When seen on May 10th his whole body was edematous and swollen to such a degree that he could not move an inch in bed without assistance. He got *Arsen.* 30 every two hours. This was continued for ten days. The urine contained albumen to one-fourth of its volume. May 20th.—No perceptible alteration. *Arsen.* 5x. every two hours. May 23rd.—Legs more swollen, but body and arms less so. Continue medicine. May 25th.—Marked improvement of all symptoms. Albumen in urine now one-eighth of its volume. Swollen much less. Patient was able to walk about, and his appetite much improved. May 28th.—Only slight swelling at ankles, greatest towards evening. The urine only showed a slight turbidity on June 17th; the swelling had quite dis-

appeared. June 26th.—Urine quite free from albumen. Appetite normal. His body appeared well nourished, only some weakness remained. In another fortnight he was again at his work in the fields.—Paul Lutze, *Allg. hom. Ztg.*, November 2nd.

### PNEUMONIA WITH LUMBRICI.

A girl, aged 7, of robust frame, but with swollen, pasty, pale, face. She had been treated for pneumonia for a week by a practitioner who gave *Acon.*, *Bry.* and *Phos.* But so far from improving, her malady had assumed a typhoid character. March 8rd.—She lies in a state of sopor with occasionally bland delirium. Wakes up now and then with a piteous cry and begins to cough. She then replies to questions in a low voice, plays with her doll for a few moments, then falls again into her soporose state and lies with half-shut eyes. When awake she picks constantly at her nose and lips, which are dry, rough and red. Complains of right frontal headache. Percussion shows dulness in right lung superiorly; auscultation reveals infiltration and fine râles. Temperature 40° at night; 38-9° morning. Complete anorexia, great dislike to sweets, tongue red. Stools pea-coloured and thin, several times a day, sometimes passed unconsciously. With the cough a little viscid, rust-coloured expectoration. Pulse small, quick. Urine turbid, frequently passed. *Rhus.* 30 every two hours. Warm compresses to chest, cold compresses to head. Next night slight perspiration, which continued during the day. *Cont.-Rhus.* March 14th.—Cough seldomer, sleep quieter, skin moist, diarrhea several times a day. passed a lumbricus. Picking at nose and lips continues. She got *Cina* 30x and acid *Phos.* 30 alternately every two hours. Passed about twenty lumbrici. The resolution of the pneumonia went on steadily. Cough seldom, with a little sputum coctum. Has left off boring in nose, but still picks lips. Diarrhea ceased. She sits up in bed and plays. Temperature steadily declined. She got *Sulph* 30. March 19th.—Was nearly quite well. All the functions normal.—Mossa, *Archiv. f. Hom.*, i. No. 8.

### SCIATICA.

Mr. B., aged 45, robust and otherwise healthy, has suffered for some weeks from a pain extending from sacrum down through right lower extremity, following the course of the anterior branches of the sciatic nerve. *Rhus.* 6, one drop every three hours, produced marked improvement in two days. The medicine was continued four times a day. Three days later the pain was only felt on moving. *Caustic.* 6, four times a day. After two days more no pain, only some weakness and difficulty of moving the leg. After a few days of *Caustic.* 30 the affection was quite cured. Amberg, *Allg. hom. Ztg.*, September 29th.

## INSTITUTIONS.

## HAHNEMANN FREE DISPENSARY, BATH.

THE annual meeting of this institution was held at St. Paul's Parish Hall, on Tuesday, May 30th. The chair was taken by the Rev. Angus Clerk, and amongst those present were the Rev. E. P. Jones, Dr. Mackechnie, Messrs. G. Cruickshank, G. Norman, and J. D. Taylor, and a number of ladies. Letters were read from Rev. P. W. G. Filleul and General Walker, expressing their regret at not being able to attend the meeting, and wishing success to the Dispensary.

Mr. Norman read the report and statement of accounts. The former stated that although the Dispensary was established in 1888 no annual report was issued till last year, and this was their first annual meeting. Since the opening of the Dispensary no fewer than 36,000 attendances have been registered. The Dispensary is entirely free, neither tickets nor money being demanded, and although people who could afford to pay avail themselves of its services, it is on the whole largely used by the very poor for whom it is intended. The greater part of the money needed has been collected by ladies, the following being the amounts collected:—Miss C. Everett, £18 0s. 6d.; Miss Young, £7 6s. 6d.; Miss White, £6 4s. 6d.; Miss O'Halloran, £5 6s.; Mrs. Adams, £3 12s.; Miss G. F. Andrews and Miss Rogerson, £2 7s.; Miss Edmonds, £1 16s. 6d.; Miss Winckworth, £1 10s. The amount contributed by the patients themselves showed an increase of nearly £2, the total this year being £6 17s. 6d., chiefly made up of pence and halfpence. The annual expenses are only about £100, and as the Dispensary becomes better known there should be no difficulty in obtaining the funds. The Secretary would be glad of the services of several lady collectors. The balance sheet showed a balance of £1 17s. 3d. due to the Treasurer. The subscriptions and donations amounted to £75 19s. 6d.

Dr. Mackechnie read the medical report, which stated that patients had been treated from Radstock, Camerton, Glastonbury, Devizes, Trowbridge, Chippenham, and Bristol. The cases treated are of the same average character; there is still a large preponderance of children, while a larger number of men presented themselves. The return of attendances from Nov. 1888 to May this year is 36,180; during 1892-3 6,931, besides 1,500 home visits.

The Chairman, in moving the adoption of the reports and accounts, said he had an especial sympathy with this Dispensary, as by its means benefit was rendered to many of his poor



parishioners, who not only obtained advice and medicine free of cost, but were also visited gratuitously at their own homes when too ill to get out. He thought the work was carried on in a very unostentatious manner, and that its claims on the public support should be made more widely known.

This was seconded by Rev. E. P. Jones and carried unanimously.—*Bath Chronicle*, June 1.

## FOLKESTONE HOMEOPATHIC DISPENSARY, 7, GRACE HILL.

### THIRD ANNUAL REPORT.

THE Provisional Committee of the Folkestone Homeopathic Dispensary in presenting their Third Annual Report, do so with a growing feeling that the objects for which the Dispensary exists are perhaps slowly, but surely being realised.

On reference to the subjoined statement, it will be seen that there is an increase of 88 patients upon the previous year, showing an extension of our area amongst the poor, where prejudice in favour of old medicine is deeply rooted, and while little confidence is at first shown in medicine which, as a rule, neither tastes, smells, nor looks, like that to which they have been accustomed, their recovery convinces them of its effectiveness, and their incredulity gives place to belief and gratitude.

Reference to the subscription list also shows a certain growth of confidence in our method.

The total number of patients under treatment, 432.

Thirty-eight of these were attended in their own homes, to whom a total of 160 visits were paid, the remaining 394 attended at the Dispensary, showing consultations amounting to 1,958.

There has been only one death during the year. There was, however, also a case of cancer of the liver which, on becoming worse, had to seek admission to a hospital, where he died.

This illustrates the need which the Committee has always felt of having a bed, or beds, for the reception of such cases, and they hope that at some time not far distant a Cottage Hospital may be added to the Dispensary, and although the expenditure would thereby be considerably increased, they think that in a place like Folkestone the difficulty ought not to be unsurmountable.

The following are the Committee and Officers:—F. D. Lewin, Esq. (President), Rev. R. Foster Jeffrey, Rev. J. W. Merry, Mr. C. Payer, Mr. J. Walker; Mr. J. Maxted (Hon. Secretary); Mrs. Jenner (Hon. Collector); Dr. Murray (Hon. Medical Officer and Treasurer).

## ANSWERS TO CORRESPONDENTS, NOTES AND QUERIES.

\* \* In this department we shall be happy to reply to any inquiries relating to homeopathy or to the matter of our magazine that our correspondents may like to address to us. We cannot, of course, undertake to give medical advice in particular cases, which is the business of a medical attendant; but if our medical readers like to put queries to each other regarding points of practice or puzzling cases, we shall be happy to insert queries and replies.

### PSORINUM.

W. L. *Psorinum*, or *Psoricum*, is a nosode made by attenuating some active manifestation of psora in skin affections. The scabies vesicle in a psoric individual and the scales of psoriasis have both been taken as sources. The nosode has been extensively proved by Hahnemann and others, and well tested clinically. The best accounts of its action are to be found in Allen's *Encyclopedia* and in Hering's *Guiding Symptoms*. Burnett says *Psorinum* is the chronic of *Tuberculinum*.

Mr. A. E. WHITING. We are much obliged to you for your letter and communication. We regret we cannot find space in our pages for the latter.

Mr. A. M. HART, Sydney, N.S.W. The interesting *avena* case will appear in our next issue.

## APPOINTMENTS, VACANCIES, AND REMOVALS.

\* \* We shall be happy to insert notices of appointments if gentlemen will be good enough to forward them to us, and also of posts vacant and likely to be vacant, on receiving information from secretaries or committees. Under this heading also, we shall mention good openings for homeopathic practitioners and chemists.

### REMOVAL.

DR. FALLON.—Dr. Robert H. Fallon has left Bristol and is going out to the Shire Highlands as a medical missionary in connection with the Zambesi Industrial Mission, whose headquarters is St. Martin's Home, 1, Gresham Street, E.C. He is succeeded in practice by Dr. Barrow.

DIET IN ULCER OF THE STOMACH.—Dr. Roux states (*Journal d'Hygiene*) that we should choose foods which are digested in the intestines—milk, eggs, starches, fruits and green vegetables. Farinaceous substances and eggs should constitute the chief diet. The meal of lentils is preferable to potatoes and beans. Among green vegetables salads are excellent; green peas, turnips and carrots should be mashed before eating. Light puddings are easily digested, especially if they contain eggs.—*New York Medical Times*.

## Obituary.

### DR. HENRY BLUMBERG, J.P.

THOSE who were at Southport last September attending the Annual Congress of Homeopathic Practitioners, and who saw Dr. Blumberg active, enthusiastic, and diligent in making the visit of his colleagues interesting and pleasant, will be grieved to learn that he died on the 5th of June after a long and painful illness.

He was born at Kaschau, in Hungary, in 1829. His father was professor of Oriental languages in the college of that town, where Henry was educated. He went to Vienna to study medicine, but was prevented taking his medical degree there owing to the outbreak of the Hungarian struggle for independence in 1848, in which he joined his countrymen, and at the age of nineteen was appointed captain of a reserved force under General Bem. After the defeat of the Hungarians by the combined armies of Russia and Austria he was ordered to leave the country, but was detained at the frontier to act as physician during a cholera epidemic, and received a testimonial from the Government for his services. In 1855 he took his degree at the university of Prague, and shortly afterwards he came to England and acted for a short while as *locum tenens* for the late Mr. Decimus Hands, a homeopathic practitioner in London. Thence he went to Macclesfield, where he practised for a short time, and then he settled in Southport in 1856 as a homeopath. In 1858 he became an extra licentiate of the London College of Physicians. He endeavoured to induce the governors of the Stranger's Charity (now the Convalescent Hospital) of Southport to set apart a few wards for the homeopathic treatment of children. Failing in this he took a cottage in order to carry out his idea. From this humble beginning, under his fostering care, there gradually arose the North of England Children's Sanitorium, which is the first and still the finest institution of the kind in the country, and only last year was enlarged to nearly double its former size. It receives patients from all parts of the country, and has been of immense value to hundreds of sick children who have been restored to health by the homeopathic treatment and skilful nursing they have received there. Dr. Blumberg did not remain continuously at Southport. In 1862 he exchanged practices with Dr. Stokes at Liverpool, but his health failing he accepted the post of travelling physician to Prince Sangusko Czartoriski. Returning to England he stayed for about a year at Bournemouth, and then

again went abroad with a patient. He next resided successively at Ventnor, Southampton, Bournemouth, and Cheltenham, in which last town he remained for three years. After this he again went abroad, first to Bonn for three years, then to Kreuznach for several years, and he did much to make this health resort known to the British public. In 1877 he purchased Dr. Stokes's practice in Southport, where he resided till his death. He was married in 1866 and leaves a widow and three sons and two daughters to deplore his loss. His eldest son is a medical man and assisted his father for some time before his death. Dr. Blumberg was highly esteemed by his fellow townsmen of Southport, and in 1880 was placed on the Commission of the Peace. He was at one time President of the Literary and Philosophical Society, before which he read papers occasionally. The last of these entitled, "Is life worth living?" is before us and seems to answer the question rather negatively. He was deeply imbued with the philosophy of Schopenhauer, and would, therefore, naturally take a pessimistic view of life. Dr. Blumberg was a poet of no mean power. We have a book of poems from his pen in English and German which contains many extremely graceful compositions. He was an ardent antivivisectionist and an opponent of compulsory vaccination. He was an extremely skilful chess-player, and was repeatedly selected as one of the Lancashire team in their annual contests with Yorkshire.\* He was an excellent linguist, and could converse fluently in six languages. He was a member of the British Homeopathic Society and delivered the Hahnemann Oration one year in London. To sum up, Dr. Blumberg was a philosopher, a philanthropist, and poet. He was a skilful medical practitioner and much beloved by a large *clientèle* of patients. His loss will be deeply felt by all who enjoyed his friendship. Homeopathy, in him, has lost one of its brightest ornaments, and one of its most efficient apostles, if not by his writings, at all events by his practical work, especially in connection with the Children's Sanatorium, which we trust will continue its career of usefulness, though its founder is now no more.

We cannot better conclude this brief notice of our departed friend's career than by giving one of his short poems, written from a bed of sickness many years ago. It shows that even

\* The following notice, which appeared in the chess column of *The Field* of June 17, shows his reputation as a player of this fascinating game:— "The death is announced of the well-known amateur, Dr. Henry Blumberg, J.P., of Southport, at the age of sixty-four years. Dr. Blumberg was well known in the metropolis as one of the leading members of the late Westminster Chess Club. He was a brilliant player himself, and a frequent contributor to the *Westminster Papers*. For many years Dr. Blumberg belonged to the leading players of the Liverpool Chess Club, and of Southport, where he resided. He was also a country member of the British Chess Club."

then he felt that small attachment to life which he has in late years so frequently expressed to us.

“ From a thorny couch of sorrow,  
O Lord ! I call to Thee ;  
O give my life no morrow  
Of earthly misery !  
Send gentle death to take me,  
And angels bright to wake me  
In Thy eternity.

The world grows dim and dimmer,  
I long to leave it soon,  
And change this even's glimmer  
For heaven's eternal noon ;  
Where kneels Thy chosen nation  
In blessed adoration  
Before Thy mighty throne.

O add me to their number,  
O Lord, all-good, all-wise ;  
Send soon the transient slumber  
Which leads to Paradise.  
Grant me my Saviour's earning,  
My soul, my soul, is yearning  
For pure eternal skies.”

ALDERMAN JOHN POTTS, M.R.C.S. Eng., L.S.A., J.P.

We much regret to announce the loss of another veteran homeopathist, Alderman John Potts, of Sunderland, who died at his residence, 1, Park Terrace, Sunderland, on Thursday, June 8th, in the 80th year of his age. Up till ten weeks before he had continued to practise his profession when he was attacked with inflammation of the kidneys to which he ultimately succumbed. Dr. Potts was an extremely able practitioner, and the following sketch from the *Sunderland Daily Echo*, of Thursday, June 8th, will show in how great esteem he was held by his fellow-citizens :—

“ BIOGRAPHICAL SKETCH.

“Dr. Potts was born in November, 1813, and came of a family who had been shipbuilders on the Wear for more than a century. The family has also been traced as descending direct from the Barons of Hylton. The father of the late alderman, having the means at his disposal, gave his son a suitable education, and in due time apprenticed him to the late Dr. Charles Ferguson. Subsequently he proceeded to Edinburgh, and continued his studies at the medical school of Dr. Knox, who had acquired considerable repute as an anatomical demonstrator. Dr. Potts qualified in London in 1836, and began his professional career at Darlington, where he practised for seven years, thence removing

to Sunderland. In the year 1850 the deceased, who had previously tried mesmerism with considerable success, became convinced that the homeopathic treatment of disease was the best. This method he adopted and continued to practise up to his death. When the Crimean War broke out in 1854 he offered his services in the defence of his country, and joined the 1st Durham Regiment of Militia, under Col. the Duke of Cleveland. After the disbandment of the militia he returned to his practice in Sunderland, but continued to attend the yearly drill of the regiment up to the early part of 1876, when he resigned his commission. He was elected a member of the Sunderland Town Council in 1854, and in 1870 was appointed a justice of the peace. Four years later he was elevated to the Aldermanic Bench for the West Ward. On the 9th November, 1874, he was elected Mayor of Sunderland, in succession to Ald. McKenzie. During his Mayoralty he unveiled the statue of the late Mr. John Candlish, M.P., in the Mowbray Park. He had long been a prominent member of the Masonic craft, and had the distinguished honour, during the period he held the office of Mayor, of being present at the installation of H.R.H. the Prince of Wales as Grand Master of the Masons of England. We may mention that Ald. Potts was a member and Past Master of the Phoenix Lodge and one of the founders of the Londonderry Lodge. He also formerly occupied the office of Grand Junior Warden in the Provincial Grand Lodge of Durham. During his long illness the members of the lodge sent an address of sympathy and condolence to Mrs. Potts. Deceased was a strict Churchman and a staunch Conservative, but this did not prevent him aiding all parties, creeds, and denominations to such an extent as to command the respect and esteem of all with whom he came in contact. He held numerous prominent offices in addition to those enumerated above, and, besides being an alderman of the Council, he was a member of the Bridge and Ferries, Park, and Markets and Baths Committees. A great lover of animals, he took an active interest in and was one of the vice-presidents of the local branch of the National Society for the Prevention of Cruelty to Animals. Indeed, he and Mrs. Potts were mainly responsible for the formation of the branch some eighteen years ago. He was also the President of the North of England Permanent Building Society and a principal of the Sunderland Orphan Asylum."

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BANANA JUICE AS INK.—A correspondent of the *Confectioners' Journal* says that banana juice makes a first-class indelible ink. A spot on a white shirt from a dead-ripe banana is marked for ever, and the juice from bananas thoroughly decayed is of a bright, clear carmine colour.—*New York Medical Times*.

## GENERAL CORRESPONDENCE.

### MERCURIUS BINIODATUS AS A GERMICIDE.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—*Apropos* of my former communication, for your editorial comment on which I thank you, I have heard from my friend Dr. Proctor that a new antiseptic and germicidal soap has been prepared by Mr. John Thomson containing a definite proportion of *Biniodide of Mercury*. From his pamphlet, *A New Antiseptic Soap*, which is a reprint from the *Journal of the Society of Chemical Industry*, No. 8. vol. vii., I gather that solutions of this soap in the proportions of 1 in 4,000 and 1 in 2,000 of the drug in question effectually prevented the germination of several microbes—such as the *Bacillus of Scarlatina*, *Bacterium termo*, *Orange Sarcina*, *Micrococcus of pus*, and others; while the ordinary antiseptic soaps, in similar proportions, failed in most instances to prevent the growth of these organisms. The details of the test-experiments are most interesting. This *Biniodide* soap has been successfully used in parasitic skin diseases, such as *favus*, ringworm, and certain forms of *eczema*. I suggest it as a substitute for carbolic soap in the washing of scarlet fever, measles, and smallpox patients, during the period of desquamation.

Perhaps our colleague, Dr. Proctor, who has given this subject much attention, may favour us with his experience in this line of antiseptic hygiene.

Yours faithfully,  
 J. MURRAY MOORE, M.D.

51, Canning Street, Liverpool,  
 June 13, 1898.

### A SUGGESTION FOR THE TREATMENT OF CONSUMPTION.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—It is, I suppose, a well-established fact that consumption is due to the presence of microbes in the lungs. If, then, some means could be devised for destroying these microbes, and so freeing the lungs from their ravages, the patient would be cured of the disease. I have read somewhere that oil of cinnamon is a deadly poison to microbes, that they cannot exist in its presence. I would suggest, therefore, that this substance should be introduced into the lungs of consumptive patients by inhalation. This could be easily done by the simplest of all inhalers, viz., one that I devised for the inhaling of *Hamamelis*

for internal hemorrhage. It consists simply of a bit of soft sponge, large enough to close one of the nostrils; on this, lightly moistened with water, a few drops of the substance to be inhaled are poured, and the sponge then placed in one of the nostrils, so as to close the aperture; and the other nostril and the mouth are closed, so that the person breathes through the sponge alone, which is easily done. I would advise a dilution of the oil of cinnamon, about eight or ten drops to an ounce of spirits; but the most effective strength must of course be arrived at by practice. I think the inhaling should be frequently repeated, so as to give the microbes the less chance of reviving.

Other applications of this oil will readily suggest themselves, so many ailments are now traced to the work of microbes. Is not cancer one of them?

F. H. B.

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### PROGRESS OF HOMEOPATHY IN SYDNEY, N.S.W.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—No doubt you will be pleased to receive a little news of the progress of homeopathy on this side of the globe. You are aware, I think, that we have a homeopathic dispensary here, which is fairly well supported, and is the means of distributing homeopathic medicines to the poor free of charge. Mr. J. Maffey is the hon. secretary, and takes a very active part in the work; likewise Dr. H. Payne Scott, who is very indefatigable for its success. These gentlemen are the leading homeopathic doctors of Sydney, of which there are about eight. In time, I feel certain, the efforts of the above will result in a hospital in the near future. The WORLD is read by a few here at present, but I am now pushing it, and by next mail I hope to be able to increase Messrs. Fisher and Co.'s order. I must say there is some excellent and interesting matter to be found in its columns. Wishing you all success,

Yours sincerely,

A. M. HART.

Sydney, May 15, 1898.

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### LEPROSY AND VACCINATION.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—As a supplement to the excellent notice of my recently published volume, *The Recrudescence of Leprosy and its Causation*, in the HOMEOPATHIC WORLD, I shall be glad if you



will kindly afford me space for a summary of my conclusions, the result of personal investigation in many countries where this terrible plague is endemic. I can prefer this request with the more urgency from the fact that many of the sufferers from leprous vaccination, are absolutely friendless, while most of them are without political representation, and are unable to plead their own cause. In the pursuit of my investigations I have been repeatedly entreated to bring their grievances before the English-speaking public through the Press, with a view of reaching the ears of Parliament and other legislative bodies.

These conclusions are as follows :—

(1) That leprosy has greatly increased during the last half-century, and that it is prevalent in many places where it was formerly unknown.

(2) That whilst the opinion of medical authorities and experts varies considerably on the subject of the contagiousness of leprosy, the preponderance of authority is in favour of the theory that it is not contagious in the ordinary sense of the term, but is communicable by means of a cut, sore, or abraded surface; and this view is confirmed by my own personal investigations.

(3) The other alleged factors such as malaria, a fish diet, syphilitic cachexia, heredity, and insanitation are admittedly unequal to explain the rapid growth of the disease in certain of our Crown colonies and dependencies, as well as in other countries.

(4) That on one point there is much agreement, and hardly any dissent, namely, the inoculability of leprosy; and that the view of leprosy as an inoculable disease, while it is most clear to those who take the malady to be due to a bacillus, is older than the bacteriological evidence, and is not dependent thereon.

(5) That the most frequent opportunities of inoculating the virus of leprosy are afforded in the practice of vaccine inoculation, which is the only inoculation that is habitual and imposed by law; and that the evidence here adduced is calculated to show that vaccination is a true cause of the diffusion of leprosy.

(6) That the official information, collected by interrogatories and otherwise, has not been hitherto of a kind to show how far vaccination has determined the amount of leprosy in recent times; and that any interrogatories that may be sent out in future should not be limited to ascertaining the effects as regards leprosy, of hypothetically "pure lymph." When on very rare occasions interrogatories have been submitted, they have been framed to ascertain the results of a purely hypothetical system of vaccination, which is not anywhere discoverable in practice (*i.e.*, with pure lymph, and free from hereditary taint), and the replies are therefore futile and misleading.

(7) That with the exception of two groups of cases—those adduced by Dr. Roger S. Chew, of Calcutta, and Dr. S. P. Impey, of Robben Island—those reported in this volume have not been the result of special investigations, but have cropped up accidentally in the course of medical practice, and in some instances have been published by practitioners with apologies to the profession for presenting such unwelcome disclosures.

(8) That the increase of leprosy in the Sandwich Islands, the West Indies, the United States of Columbia, British Colombia, British Guiana, South Africa, and New Caledonia, has followed *pari passu* with the introduction and extension of vaccination, which in nearly all the places, without previous inquiry or demand from the inhabitants, has been made compulsory.

(9) That as leprosy is a disease of slow incubation, often taking years to declare itself, and in its incipient stages can be detected only by practitioners of large experience, it follows that, in countries where leprosy exists, there is great danger of extending the disease by arm-to-arm vaccination.

(10) Leprosy being one of the most loathsome diseases to which the human race is subject, and being practically incurable, it behoves all interested in the public well-being to do their best to *prevent* its diffusion, and as a means thereto, to discourage the practice of vaccination on that ground, if on no other.—Yours faithfully,

WILLIAM TEBB.

Devonshire Club, St. James's, S.W., May 22, 1893.

### THE CONVICT KEANU.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—I have just finished reading the brief though interesting review of *The Recrudescence of Leprosy and its Causation*, by Mr. William Tebb, in your issue of May 1, 1893. Though I have derived much pleasure and satisfaction from its perusal in so far as the connection of leprosy with arm-to-arm vaccination is concerned, I am nevertheless sorry you make no remarks on the peculiar vivisectional experiment of inoculating the convict named Keanu by the Hawaiian Government (some years ago), which substituted inoculation with leprous virus for the death sentence passed upon this individual, who, prior to the experiment, was perfectly sound and healthy. Mr. Tebb devotes several pages to this case, from which the following is an extract:—

“ . . . Dr. D. W. Montgomery, Professor of Pathology, California University, microscopically examined a piece of Keanu's skin, and discovered the *bacillus lepræ* both singly and

in groups. This bacillus has been found, according to the *Lancet*, by competent observers in the tuberculated form of leprosy in all parts of the world, and has never been found in any other disease or condition. Keanu has since been sent to the lazaretto, Molokai, a confirmed and incurable leper—a punishment ten times more severe than the death penalty, and, in my judgment, utterly unjustifiable.”

In a letter on leprosy in the *British Medical Journal*, September 24, 1887, Dr. William Jelly observes:—“ I daresay the poor Kanaka convict, had he known what leprosy is, would, without hesitation, have preferred the guillotine, the garotte, or the hangman’s rope.”—Yours faithfully,

JOSEPH COLLINSON.

Wolsingham, Co. Durham, May 22, 1893.

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## VARIETIES.

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SWALLOWING A WATCH.—THE freaks of lunatics are sometimes extraordinary, and one of the most remarkable which has been placed on record recently is that which Dr. Vallow has published in the current issue of a French contemporary. A man, *æt.* 37, was confined in an asylum suffering from hallucinations, and one day, his wife having come to visit him, he was permitted to see her. When the allotted time of the interview, according to the rules of the institution, had come to an end, his wife intimated that she would have to take her departure, whereupon the patient, judging that she wanted to leave him before the time had expired, flew into a violent passion and accused her of deceiving him. To prove, however, the truth of her statements, she drew out her watch and showed him the time, but as soon as the patient saw the watch, he suddenly seized it in his hand, tore the chain from it, and, putting it in his mouth, swallowed it. The medical officer of the asylum was summoned at once, but the patient in no way appeared to have suffered from his curious freak. On examination of the stomach nothing could be felt, and it was at first believed that after all the watch might not have been swallowed. However, all due precautions were taken, and on the sixteenth day the watch arrived *per naturalem viam*. It was a silver watch measuring about two inches and a half in diameter, exclusive of the ring, and about half an inch in thickness.—*Medical Press*.

INFLUENZA AMONG THE ANCIENTS.—Prof. Puschmann, who apparently had been examining the history of medicine, brought this interesting subject before the College of Surgeons of Vienna. It is evident from the writings of Hippocrates that the epidemics of influenza have been associated with many fatal cases of pulmonary inflammations and spinal affections. Inflammations of the laryngeal and pharyngeal passages succeeded by paralysis and eye affections have also been common. The throat diseases are described as occurring more frequently among those who used their voice, most while the eye troubles affected children. The disease affected men more frequently

than women and fell heaviest among the Selaves. The disease is described as continuing the whole summer, but when the cough continued through the winter into spring phthisis was the invariable result. Alternating paralysis was observed among the early attacks associated with ear diseases. In a second epidemic described by Hippocrates there was extreme coma and delirium, the spleen in no way enlarged, and the crisis occurring about the fourteenth day; diarrhea, which was treated by cold applications, appears to have been common. The temperature, which is described as being high, cannot be relied on with any accuracy as it was measured by the application of the physician's hand to the skin of the patient. Besides the non-enlargement of the spleen the symptoms resembled typhoid in the second epidemic; but whether these two epidemics described occurred in close succession or at wide intervals the context does not inform us; it occurred in or before the year 412 B.C., at Rome. Livius described an influenza epidemic which seems to coincide with the above, but he tells us that there were not so many deaths, but the numbers attacked were so numerous that farm labour was at a standstill for want of operatives.—*Medical Press*.

**BLACK TONGUE.**—The condition in which the dorsum of the tongue is more or less covered by a black patch is not very uncommon, but its etiology is somewhat obscure. It has been called "hyperkeratosis" with the idea that the superficial layer of epithelium becomes hypertrophied, undergoing horny degeneration, with atrophy of some of the cells and a development of black pigment. Drs. Ciaglinski and Hewelke, writing in the *Kronika Lekarska*, describe a case in which they were able to find a mould in the black patch somewhat resembling *mucor rhizopodiformis*, which contained black pigment. The case was that of a woman who a fortnight previously had had some kind of feverish attack—most probably influenza. The tongue looked as if it had been covered with blacking, the discoloration extending as far back as the circumvallate papillæ. By means of borax washes the tongue became clean in a couple of days. Examination showed a black mould which could be well cultivated on bread or on potatoes at the temperature of the room, but which did not grow at 37° C. It was apparently of a harmless character, for it was injected into the veins of rabbits without effect. Drs. Ciaglinski and Hewelke distinguish two kinds of black tongue—the chronic, due to anatomical changes in the epithelial layer, and the acute, which depends upon the presence of a mould. This is harmless apparently to internal organs, as it does not develop at the temperature of the body.—*Lancet*, March 25.

**CURIOUS CASE OF POISONING.**—At a German hygienic institute three persons have been poisoned under the following extraordinary circumstances. We relate the case in a very few words, and shall mention no names. A sample of milk was sent to the institute to be analysed. The professor appears to have intimated that it was unadulterated—and so it was. Thereupon three of the assistants drank between them a bottle of this milk. In a short time they were all three attacked, on the same day, by the same disease—namely hemorrhagic enteritis. They all three had the same symptoms, more or less intense in each case. The intestinal hemorrhage supervened on the eleventh day of the fever in the first case, and the fever fell on the twelfth, the patient's

temperature being normal on the nineteenth. The two others had drunk less of the milk; the second case was cured in a fortnight, and the third was only ill about four days. But great weakness persisted in all the cases for a long time. The cow from which the milk was taken was suffering from hemorrhagic enteritis, but she still gave a little milk, and the owner, wishing to know whether it was wholesome or not, sent it to the institute to be examined. The dejections of the animal were liquid, and a certain quantity got daily into the milk. Bacterium cultures made with the dejections of the three patients, and with those of the cow, produced the same results—namely, the development of a microbe of small dimensions and rapid movements, particularly virulent to mice and guinea-pigs, not unlike the *bacterium coli commune*, but endowed with more active motion, and more virulent when inoculated.—*Monthly Magazine of Pharmacy.*

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## MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Aitchison (R. S.). A Medical Handbook: For the Use of Practitioners and Students. With numerous Illustrations. 12mo, pp. 362. (C. Griffin & Co. 8s. 6d.).
- Berdoe (E.). The Origin and Growth of the Healing Art. Illustrated. 8vo, pp. xii. —509. (Swan Sonnenschein. 12s. 6d.).
- Burckhardt (E.) and Fenwick (E. H.). Atlas of Electric Cystoscopy. With 34 Coloured Plates. Royal 8vo, pp. 70. (Churchill. 21s.).
- Dalby (Sir W. B.). Diseases and Injuries of the Ear. 4th ed. Cr. 8vo, pp. 279. (Churchill. 10s. 6d.).
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- Lewers (A. H. N.). A Practical Text-Book of the Diseases of Women. 4th ed., with 144 Illusts. Cr. 8vo, pp. 486. (Lewis. 10s. 6d.).
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- Naphey's Modern Therapeutics, Medical and Surgical, Including the Diseases of Women and Children. 9th ed., Revised and Enlarged. Vol. II., General Surgery, Gynecology and Obstetrics. By Allen J. Smith and J. Aubrey Davis. 8vo, pp. 1,110. (Baillière, Tindall and Cox. 80s.).
- Phillips (J.). Outlines of the Diseases of Women. With 120 Illustrations. Cr. 8vo, pp. 290. (C. Griffin & Co. 7s. 6d.).
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- Russell (William J.).** Domestic Medicine and Hygiene: Being a Short Account of the More Common Diseases, Their Causes and Treatment. Written in Plain Language. 3rd ed., Revised to the Latest Medical Practice. 32mo, pp. xiii—484. (W. H. Everett & Son. 2s.)
- Schweinitz (G. E. de.).** Diseases of the Eye: A Handbook of Ophthalmic Practice for Students and Practitioners. Illustrations. 8vo, pp. 641. (Churchill. 18s.)
- Snow (H.).** A Treatise, Practical and Theoretic, on Cancers and the Cancer Process. 8vo, pp. 894. (Churchill. 15s.)
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- Ziemssen (O.).** The Treatment of Constitutional Syphilis. 8vo. (H. K. Lewis. 3s. 6d.)

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ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 30, *Clarges Street, W.*

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

LITERARY matter and correspondence should be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct the same and return to the *Editor* as early as possible.

### CORRESPONDENTS.

Communications received from the Rev. F. H. Brett, *Wirkworth*; Dr. Lamb, *Dunedin, N.Z.*; Dr. John McLachlan, *Oxford*; Mr. Collinson, *Walsingham*; Dr. Mahony, *Liverpool*; Mr. Whiting, *Ealing*; Dr. Murray Moore, *Liverpool*; Dr. Dudgeon, *London*; Mr. A. M. Hart, *Sydney*; Mr. J. Meredith, *Lydney*; Dr. H. C. Allen, *Chicago*; Messrs. Boericke and Tafel, *Philadelphia*.

### BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Chemist and Druggist.—Homeopathic Review.—Allg. Hom. Zeit.—Monatsblätter f. Hom.—Archiv f. Hom.—Journ. of Orificial Surgery.—Chironian.—Homeopathic Recorder.—Homeopathic News.—Pacific Coast Journ. of Homeopathy.—American Homeopathist.—Medical Argus.—Bath Chronicle.—Medical Visitor.—Minneapolis Hom. Magazine.—Revue Hom. Belge.—Clinique.—North American Journ. of Homeopathy.—L'Art Medical.—New England Medical Gazette.—New York Medical Times.—Sunderland Daily Echo.—Homeopathic Physician.—Monthly Magazine of Pharmacy.—Homeopatisch Maandblad.—Daily Medical Century (complete week).—Medical Advance.—Hahnemannian Monthly.—Harrogate Mineral Waters and Homeopathy, by Dr. Arthur Roberts.—Fifth Reason for Being a Homeopathist, by J. Compton Burnett, M.D.

THE  
HOMEOPATHIC WORLD.

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AUGUST 1, 1893.

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THE HOMEOPATHIC DIRECTORY.

For many years past the Homeopathic medical body of Great Britain have possessed a means of intercommunication in the directory issued until recently by Messrs. THOMPSON and CAPPER, of Liverpool, every year, and latterly by Messrs. KEENE and ASHWELL, who have increased the value of the work by adding lists of Colonial and Continental homeopaths. The directory has also contained a list of the Homeopathic Chemists established in Great Britain. There are few professional homeopaths who have not found the directory of very great service, and the desirability of keeping it properly corrected and up to date must be patent to every one.

It may not be known to every one that the existence of this innocent little volume has been seized upon by the allopathic fraternity as an excuse (for want of a better) for their refusal to extend to homeopaths the ordinary civilities of professional life. The excuse is a palpably dishonest one, for they boycott homeopaths whose names do not appear in its pages just as readily as they do those whose names are in.

But, strange as it may appear, there have been some homeopaths who have thought the opinion of allopaths on this matter worthy of notice, and in deference to it have kept their names out of the directory. Some, indeed, have felt themselves not sufficiently strong in homeopathy to warrant their names appearing, and have kept out of it for that reason, which is a perfectly valid one. But that

is not the reason which has led to the movement we are now about to mention. Some of those who have kept out their names for other reasons than acknowledged shakiness in the homeopathic faith, and some who have sympathised with them have successfully urged on the British Homeopathic Society the desirability of publishing a list of its members, which shall be, they say, an actual homeopathic directory without the name. Having done this, they have persuaded a number of homeopaths to write to Messrs. KEENE and ASHWELL instructing them to omit their names from the revised list they were just about to publish. The result has been that so many have withdrawn that Messrs. KEENE and ASHWELL do not see their way to go on with the publication.

This we think a great pity. The British Homeopathic Society list is not a complete list of professing homeopaths. It contains no list of chemists. It tells nothing of Colonial or Continental homeopaths, and is altogether inferior to the directory it seeks to replace.

The movers in this matter have sought to put their action on the ground of "ethics." It is much better to use plain language. If they were to say that the old homeopathic directory was immoral we could understand them; but "unethical" means nothing at all. And if the old directory was immoral, does the new directory become moral simply because it does not bear the name? This is perilously like the morality of the allopaths, who object to those homeopaths who acknowledge their belief and principles, but have no objection to those who keep them quiet and practice homeopathy *sub rosa*. We wish to point this out to those who have been, as we think, misled by the movers of this business into supposing they were doing something very fine and superior in withdrawing their names from the directory. We hereby invite them to reconsider their action; to decide in favour of the old and better directory; to rescind their withdrawal, and send Messrs. KEENE AND ASHWELL the form they have issued properly filled in, with an order for a copy of the work.



## NEWS AND NOTES.

## "HAHNEMANN ON CHOLERA."—TRACT 46.

THE last issued tract of the Homeopathic League bears the title at the head of this note. It consists of a reproduction of Hahnemann's writings on cholera, and shows in a wonderful way the supreme value of homeopathy in showing how to deal with diseases of great virulence even when there has been no previous experience in the treatment of them. There have now been issued two volumes of eighteen tracts each, the present tract constituting No. 10 of the third volume. These tracts should be in the hands of every homeopathist, medical and lay. The annual subscription to the League is from half a crown upwards, entitling the member to receive all publications from the time of joining. The Hon. Sec., E. H. Laurie, Esq., of 16, Blandford Square, N.W., will be happy to receive the names of any who wish to become members, or to give any information concerning the League. The average price of the tracts is 1d.; the price of the bound volumes of 1s. 6d. in paper covers, and 2s. 6d. in cloth boards.

## KOCH ON THE TREATMENT OF CHOLERA.

It is instructive to compare with Hahnemann's position of mastery in the therapeutics of cholera the helplessness of our modern scientific men. Koch has just been giving a series of lectures on cholera at the Institute of Infectious Diseases at Berlin. The *Medical Press* of July 19 reports in brief the final lecture on *The Treatment and Prophylaxis of Cholera*. "On the subject of therapeutics," said Koch, "there was on the whole but little pleasing to be said. There was scarcely a drug that had not been recommended and that had not later on fallen into disuse." He explained the apparent success of some drugs by saying that at the beginning of an epidemic the cases were more severe, and towards the end were lighter. The only cases that were amenable to treatment were the lighter ones, and these "might possibly get well without treatment." He condemned *Opium* one of the favourite allopathic remedies, because when given to guinea-pigs, which were not naturally

susceptible to cholera, it made them so. *Calomel* he approved of, both in slight and severe cases, though in the latter he did not expect any benefit from it. Injections of hot salt solutions into the tissues he mentioned as temporarily beneficial; injections into the veins he thought had no advantage over these. "All the various remedies had failed." Such is a fair picture of the old-school treatment of cholera. No wonder, as Dr. Majumdar told the writer, the cholera patients of India give the homeopaths plenty to do. They have found out who can help them.

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#### ARSENIC *v.* CHOLERA.

It appears, from the *Review of Reviews* of July, that an allopath has been discovering homeoprophylaxis over again. Here is the passage—

#### "HOW TO CURE CHOLERA.

"Dr. R. B. Leach has a remarkable article entitled '*Arsenic versus Cholera.*' He maintains that 90 per cent. of all cholera patients can be cured by dosing them with *Arsenic*. The originator of the theory is very anxious to be sent at once to a hotbed of infection, in order to satisfactorily demonstrate that where any person is under the physiological effect of *Arsenic* he cannot take cholera. Arsenical poisoning is a disease which occupies the same place and space as cholera. If you occupy the body with *Arsenic*, there is not room for cholera; all that is necessary is a small appreciation to secure the trial of the method on an adequate scale.

We wonder what "little bird" suggested this bit of homeopathy to Dr. Leach. It is a pity when the allopaths discover homeopathy they cannot discover it as a whole, and not in fragments. But perhaps their very delicate mental digestions are only capable of assimilating it in "mince."

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#### NITRITES *v.* CHOLERA.

THE very latest thing in cholera pathology is the discovery by Emmerich and Jiro Isuboi ("*Münsch. med. Woch.*," 26 and 27, 1893—*British Medical Journal*, July 15) that it is all a matter of nitrites. It appears that the

comma vibrio is a "nitrifying bacterium," producing nitrites in large quantities. The idea occurred to these *savants* that it must be the nitrites that caused the symptoms, and they thereupon administered nitrite of sodium to guinea-pigs, with the effect of producing symptoms which they could not distinguish from those of cholera. It will be interesting to see how long this theory will live.

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BELLADONNA v. CHOLERA.

ONE of the cases of cholera that occurred in this country last year came under the care of Dr. Laudor Brunton, who treated the patient with *Atropine*, and the patient recovered. He mentioned the case at a recent meeting of one of the societies, and claimed his discovery of this remedy for cholera as a pure deduction from experiments on animals. Poor Dr. Brunton! it seems he cannot be left to keep even this poor little crumb of a result of all his vivisections in peace. Witness this extract from a letter by Dr. C. R. Illingworth in the *Medical Press* of July 19:

"I notice in your editorial on June 28th, that injections of *Atropine* have recently been advised by Dr. Brunton for cholera collapse."

"Permit me to point out that I advocated the use of *Belladonna* in this disorder in the *British Medical Journal* on and before December 13, 1884, with the same object in view. Also that I had a long argument in the *Lancet* with several members of the profession, against the use of opium in cholera, in August, 1885, the views I then expressed being since amply confirmed in their validity by Dr. Pavlovsky, of Kieff, during the recent cholera epidemic."

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"A LITTLE BOX OF HOMEOPATHICS."

At one of the Mildmay Conferences on Medical Missionaries, Dr. Harry G. Guinness, though not himself a homeopath, in the course of a speech gave very strong testimony to the value of homeopathy in the hands of missionaries. He said:—

"Now I maintain there is no reason why a person should go to Africa without knowing how to treat fevers; and, what is more, I maintain a layman who will spend six months at medical work ought to know how to treat fevers. My own sister, who is at home from China, told me an interesting little thing. She was presented when she went to China with a little box of homeopathics. *I am not*

a homeopathist, but I must say this : she has found that little box very useful. I said to her, 'What will you sell me that little case for? You are going back to China. You say you found it useful. Will you take £50 for it?' 'No,' she said, 'I want my chest.' I said, 'Will you take £100?' 'No,' said she, 'I would sooner have the chest than £100; in fact, sooner than £500.' She did not know much about medicine; she had to treat hundreds of cases; and if you are going to be a missionary you will have to treat them, whether you know how or not. And it is much better that you should know how before you go out. After all, much medical knowledge is very simple, and within the acquisition of everybody here."—*Christian Herald*, July 6.

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#### DR. MAJUMDAR : THE PENALTY OF TRAVEL.

The following paragraph from the *Christian Herald* of July 6, tells what some people have to suffer for leaving their native land. We had the pleasure of entertaining Dr. Majumdar when passing through London on his homeward journey. He has written many homeopathic works in Hindustani, and in this way has brought a knowledge of homeopathy to numbers of his fellow-countrymen, who had no opportunity of becoming acquainted with it before:—

#### "AN OSTRACISED PHYSICIAN.

"Among the distinguished visitors to Chicago last month was Dr. P. C. Majumdar, of Calcutta, who came to attend the World's Medical Congress. He read a paper on the practice of medicine among the ancient Hindus, in which he showed that the principles now known as homeopathy were accepted and practised by them, as was proved by the ancient records. In the course of a conversation, after his lecture, the doctor said that his position in his native land would be greatly damaged by his journey. The penalty of crossing the sea, as he had done, was the loss of caste. Although his old patients would call him in professionally, as before, he cannot break bread or sleep in the house of a former associate. Any one who might receive him socially would suffer with him the same penalty of exclusion. This ostracism is much dreaded by the high caste people. A gentleman who had promised to come with him to America yielded at the last moment to the entreaties of his friends, and remained behind. Dr. Majumdar did not appear to dread the penalty. He said that he should be quite as happy, as he would be welcome among those who had already lost caste by travel and in other ways, and he had more in common with them than with those who had maintained their caste. He will have congenial associates, who are drawn all the closer together by the common ban upon them."

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FREETHOUGHT IN DRUGS.

In an editorial note on the case of Mr. Allinson recently before the courts, the *Lancet* committed itself to this sentiment: "*There is nothing to prevent a medical man from holding any views he likes about either vaccination or drugs.*" This is news to us. We only hope the *Lancet* and its fellow journals of the old school will in future act accordingly.

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ANNUAL HOMEOPATHIC CONGRESS.

The Annual Congress of Homeopathic Practitioners will be held this year at Northampton at the Guildhall, on Thursday, September 28th, at 10 o'clock. Dr. A. E. Hawker, of Liverpool, is the President of the year.

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A HOMEOPATHIC HOSPITAL FOR ST. PETERSBURG.

The *British Medical Journal* of July 15th contains the following announcement:

"The foundation stone of the first homeopathic hospital in Russia was laid at St. Petersburg on June 24th. It is estimated to cost £20,000."

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THE DRYSDALE MEMORIAL.

The amount already subscribed to the Drysdale Memorial is £894 2s. 6d. The Hon. Sec. Hahnemann Hospital, Liverpool, will be happy to receive contributions towards the completion of the sum required for the endowment of the bed, viz., £1,000. We are sorry Dr. Burnett's suggestion of the bust was not taken up.

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**DANGER FROM BANANAS.**—The *Australian Medical Gazette* reports a case of intestinal obstruction of considerable severity which was caused by eating bananas. The patient had eaten two bananas, and shortly afterwards had drunk a couple of glasses of whisky. The symptoms showed themselves first during the following day, and the patient was not seen until another day later. After four days' treatment he was relieved. It is the common belief in Australia that it is very dangerous to drink spirits immediately after eating bananas.—*Chemist and Druggist.*

## ORIGINAL COMMUNICATIONS.

A FACIAL ERUPTION TREATED WITH *SEPIA*.

By ALEXANDER H. CROUCHER, M.D. AND C.M. EDIN.

Miss B., æt. 24, consulted me on April 4, 1893, for an eruption on the face—chiefly forehead and chin—which had troubled her for about three years.

The rash was composed of papules, red and irritable; sometimes the papules would become pustules, but more frequently they became scaly, before disappearing to be followed by others. Sympathising friends often asked the patient whether she was suffering from measles, or some worse complaint, and their remarks became annoying.

Patient was of fair complexion, sanguine temperament, and somewhat inclined to embonpoint.

The rash was aggravated when hot, first thing in morning, and on coming indoors after being in open air; and when aggravated from these causes itched and burned.

The eruption was also worse at the time of the menstrual period.

In other respects the patient enjoyed good health, and led a very active life.

In 1891, while staying at the South of France, the rash was distinctly worse.

I learned, after I had prescribed, that the eruption was first noticed when in Spain, and after partaking of what was very repugnant to Miss B., namely, boiled cuttle-fish.

I may mention that in December, 1890, I was consulted about this matter, and prescribed *Thuja* 3x with no good result. On April 4th, after consulting Boeninghausen's *Therapeutic Pocket-book*, *Sepia* appeared to me to be the drug indicated. Twenty globules of *Sepia Succus* 200 were dissolved in half a pint of distilled water, and one dessert-spoonful was taken night and morning.

The result was pleasing both to the patient and myself; the papules, pustules, and scaliness disappeared, and the skin of the face resumed a healthy appearance.

Two days ago the mother of my patient informed me that there had been no return of the annoying disfiguration on her daughter's face.

The cause of the complaint was not satisfactorily made out, unless the ingested cuttle-fish had anything to do with

it; at any rate it is a curious coincidence that the remedy was a preparation from the same kind of animal, and reminds one of the old adage of taking a hair of the dog that has bitten you.

Eastbourne.

### SOME REMARKS CONCERNING THE HOMEOPATHIC TREATMENT OF SKIN AND SEXUAL DISEASES, WITH CASES FROM MY PRACTICE.

By OSCAR HANSEN, M.D., Copenhagen.

(Continued from page 303).

#### III.

A. P., lady-teacher, 21 years old, Als per Hadsund.

The disease has now, at the beginning of the treatment, the 4th of May, 1890, lasted one year, and has been treated by a doctor without any improvement. Eruptions appear spread on the chest, back, and neck, consisting of papulæ (protuberances), in many places spotted with blood from scratching. When the eruption disappears it leaves brown spots. The eruption is attended with great itching, while it peels but little, and that only in very fine scales. The itching is worst in the evening when she has gone to bed, and the scratching of the eruption alleviates it. Menses very scanty. The stool hard and tough, frequently covered with slime and a little dark-coloured blood. Palpitations of the heart and languor. The patient has formerly had chlorosis and the mucous membranes are somewhat pale. By using *Sulphur* 2 dil., 5 drops 3 times daily, together with an ointment consisting of *Sulphur* sublimate, grammes 5, and *Axungia porci lota* (refined lard), grammes 50, for external use, to be applied every evening, she had perfectly recovered the 10th of June same year. (Journal vi. 5,271.)

#### IV.

H. F. B., teacher, 26 years old, Fredericia (Jutland).

Commenced homeopathic treatment the 10th of July, 1890. Had been ailing one year and a half, but maintains that he never had syphilis. Four years ago he had a slight soft chancre, which was treated with *Iodoform* and dilution of *Borax*. He has been treated with alum-water

and dilution of *Borax* by a specialist here, and by a doctor in Fredericia, who at first prescribed tincture amyris and *Potas.-iod.*, but afterwards sending him to Aix-la-Chapelle for six weeks, where he daily got warm baths, thirty-six inunctions with *Mercury* ointment, and rinsing of the mouth with a dilution of *Borax*. All in vain. Eruptions on the inner side of the left cheek, on the lower side of the tongue, and spread about on the gums. The eruption consists of small vesicles (herpes) on a red and slightly inflamed base, frequently burning. These dry up, whereupon new ones appear shortly after. It was in vain that *Merc.-solub.* 3 trit., *Graphites* 6c dil. and *Calc.-sulph.* 3c trit. were prescribed; but during the use of *Graphites* the eruption also began to appear on the præputium. An improvement not occurring and the burning pain increasing, especially after midnight, and the sickness growing worse by his scratching the eruption, on the 3rd of December, 1890, I prescribed *Arsen.-alb.* 3c dil. 5 drops 3 times daily, and in the course of three weeks the eruption diminished and the burning pain passed away. Thus the malady improved continuously, the eruption disappearing and not returning as before, and by the 14th of May, 1891, he was completely restored. Afterwards no further sign of the disease.

What I consider very strange in this case is, that a doctor sends a patient to a bathing-place, where, the baths not taking effect, inunctions are used. The fresh red base whereon the vesicles were situated, the frequent appearances of the disease on the præputium, and the strong burning pain indicate a skin disease not associated with syphilis, so much the more as the patient has never had any hardness on the genital organ. (Journal vi. 5,336.)

## V.

W. H., sergeant-major, 44 years old, Odense (Island of Funen).

Has had the same disease several times, and it has only partly been cured. Now very bad during the last three months. Came under treatment the 2nd of September, 1890, and denies ever to have had syphilis. On the scalp, where the hair-growth is thin, is a dry, very itching, red, maculous eruption, which peels off in fine scales. The itching is frequently followed by a burning, the itching increasing, when he scratches the eruption. General con-



dition is good. *Arsen.-alb.* 2c dil. 5 drops 3 times daily. Already on the 13th of November he reported an improvement in regard to the itching and the burning sensation. The same remedy was prescribed, but this time dilution in 3rd dec. to be taken in the same manner. The improvement increased quickly and steadily, the itching nearly disappearing, the peeling-off ceasing, and the eruption paling away until the 14th of March, 1891, when the disease began to increase, the peeling-off augmenting and the eruption beginning to secrete a yellow, thick fluid. I still continued with the same prescription; but on the 18th of April he called personally, and the whole scalp was then very red, infiltrated, swollen, and covered with a honey-yellow crust. Strong, burning itching and secretion of a yellow, thick fluid. *Tartarus emeticus*, trit. 1c as large as a pea, in 1 tablespoonful of water 3 times daily. The redness, swelling, and infiltration had nearly disappeared by the 2nd of June. The itching and burning had ceased. The secretion had stopped, but the peeling-off continued in a high degree. I let him go on with the powder, but gave him, for external use and to be applied every evening, an ointment consisting of *Merc-precipit. ruber*, gramme 1, and *Axungia porci lota*, grammes 30. After using this the patient had perfectly recovered on the 15th of July.

It follows of itself that washings with normal soap and tepid water for cleansing the eruption were frequently used. When the peeling-off was very dry a pencilling with glycerine was now and then applied every second evening. (Journal vi. 5,371.)

## VI.

S., widow, 56 years old, Thisted (Jutland).

The treatment commenced on the 8th of September, 1890, the patient having at that time had the disease for several years. She has been using some homeopathic remedies, however, with no improvement occurring. Acne pustules and a few papulæ, mostly on the nose, a few on the forehead and on the chin. There is a stinging sensation in the eruption, but no itching. The skin is red and thickening on the attacked parts. Menses still appearing, but with long intervals. For the rest her condition is good. Although there was perhaps in this case an indication for *Antim.-crud.* or *Tartaric*, I commenced the treatment with *Sulphur* in

original dilution, 3 drops 3 times daily. For external use I prescribed *Sulphur* precipitate 1 part mixed with 3 parts powdered rice-starch, wherewith to powder the inflamed parts every evening, the powder to be washed off in the morning with tepid water. Spices, coffee, fat and sour things were interdicted. By the 23rd of October she had improved considerably. On the 3rd of January she reported that she had been perfectly well during one month, but that a few papulæ had reappeared on the nose, she having, however, paused with the prescriptions since the beginning of December, 1890. I prescribed the same remedies, and she had perfectly recovered by the beginning of April. Since then no recurrence. (Journal vi. 5,373.)

## VII.

H. J. N., stonecutter, 42 years old, Horsens (Jutland).

Twenty years ago he had gonorrhœa with condylomata, and eleven years ago he was treated by me for, and cured of, mucus papulæ in fauces, at anus and between the toes, also of maculous syphilides on the chest and back with *Merc.-solub. Hahn.* trit. 1c. Has now, at the commencement of the treatment, the 14th of October, 1890, been sick for three months. On both shoulders and on the chest, below claviculæ, are spread papulous, scaling syphilides, red-brown in colour and without itching. On the scalp the eruption is very close-set, maculous and peeling off in small fine scales. On the right side of the neck a gummous tumour as large as a hazel-nut. An increasing falling-off of hair. Outside of this nothing noteworthy was found, and the general condition was good. *Merc.-solub. Hahn.* in 1c trit. as large as a pea, morning and evening, was prescribed. As no sign of improvement showed itself, I, on the 15th of January, 1891, determined to give him *Merc.-solub. Hahn.* trit. dec. 1, as much as could lie on the point of a penknife, morning and evening. Already by the 28th of February, the gummous lump had disappeared. The eruption on the body had paled, the peeling-off on the scalp having decreased, while the falling-off of the hair was but trifling. The medicine was continued with for eight days, then pausing eight days, and so on alternating, until the 3rd of June, when only the eruption on the shoulders and the chest was unchanged. I then gave him *Cinnabaris* 1c trit., morning and evening.

Already on the 13th of July, I received a letter, stating that he was perfectly well and that the eruption had completely disappeared. He has since then felt perfectly well. (Journal vi. 5,402.)

I must in this case add that in later years, during which skin and venereal diseases have become my speciality, I have always used lower dilutions and triturations. Before we lost our liberty to dispense, I often, ten, twelve, fifteen years ago, treated these diseases with higher dilutions, but generally either no improvement occurred or the improvement was so exceedingly slow that the patients left the treatment. It was first, when I constantly used lower dilutions and triturations that I had my eyes opened to how much homeopathy does in these cases and how much superior it is to allopathy.

(To be continued.)

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## REMARKS ON THE "CHRONIC DISEASES," VOL. I.

By EDWARD MAHONY, M.R.C.S., L.S.A.

THERE are three mistakes to be carefully avoided—

1. To suppose the doses indicated are too small.
2. The improper use of a remedy.
3. Not letting the remedy act a sufficient length of time.
  1. "*The doses can scarcely be too much reduced, provided the effects of the remedy are not disturbed by improper food. . . . The advantage of giving the smallest doses is this, that it is an easy matter to neutralise their effects in case the medicine should not have been chosen with the necessary exactitude.*"

Those who have followed the previous papers on the *Organon*, and the explanation there of the law of dynamisation, will have no difficulty in understanding the above remarks. I would only remark here that a medicine in proportion as it is unhomeopathic, must act in some other way, whether palliatively, as a stimulant, depressant, or otherwise, and must complicate the case correspondingly whether by suppressing symptoms, altering their ratio of importance by intensifying some at the expense of others, or by inducing physiological changes as powerful perspirations, heats, chills, purgations, &c., or driving sensations to more important organs, whereas a

remedy strictly homeopathic must act equally on all the parts affected *similarly* to the way in which the disease is acting on them, and while perhaps temporarily *apparently* increasing the trouble, still cannot complicate by introducing fresh elements into the case. As regards "neutralisation," also here again the law comes in, and a remedy selected according to its correspondence to that already given, though not judiciously, especially taking the correspondence according to the part affected, sensations and general resemblance will be found speedily to correct the previous lack, and soothe the disquieted vital force.

2. To avoid this mistake we are cautioned to remember the advice given in the *Organon*, as to how to examine a patient, taking into account his "whole condition," "the cause of the disease, mode of life, nature of his mind, tone and character of his sentiments, his physical constitution, and especially the symptoms of the disease." Then to find out the medicine, Repertories must be used, and the *Materia Medica*. One cannot here go into detail as to this, but can only say that the experience of all who follow this advice is that both means are absolutely essential in practice; as regards Repertories, all have their uses, and as regards the *Materia Medica*, even the most trivial differences in expression and detail often have inestimable value in treatment, and give confidence in selecting between one medicine and another. At this point, too, our author warns us against the choice of remedies "by the directions which are found recorded at the head of each medicine." This has so often been referred to in another form already—namely, that we must not treat names of diseases, but persons—that it might seem superfluous again to refer to it, but unfortunately this is not so, owing to the inherent tendency, in most persons at least, to prefer names to thoughts. It is so much easier to say I want something for headache, toothache, a cold, &c., than to say just where the pain is felt, what it is like, to notice what affects it for better or worse, that a constant reminder has to be given in this direction.

3. On this point the danger of mistake is still greater, owing to several causes such as the similarity of suffering induced by the medicine touching all the sensitive places in its action; its evoking old symptoms which have long lain dormant owing to favourable circumstances having rendered the disease latent, or still more likely because previous

medication had repressed them, or again the medicine may be causing some of its own symptoms to appear, and unless there be a practical knowledge of the *Materia Medica*, these are sure to be mistaken for fresh symptoms of disease requiring a change of treatment. These and other causes, such as the remarkable length of time during which even one dose, and especially of a very high potency, will work and develop results, are fruitful sources of error against which we do well to take heed, and which, rightly appreciated, will lead to the greatest care in either altering the treatment or repeating what has been already given. We must still carefully remember that we are dealing with *chronic* disease, not acute, and note that "if the medicine produces a good effect in the first 8 or 10 days, this is a sure sign that the medicine is strictly homeopathic. If, under these circumstances, an aggravation should occur, the patient need not feel uneasy about it: the desired result will be ultimately obtained, though it may take 24 or 30 days. It takes 40 and even 50 days before the medicine has completed its action." Consequently it follows that no rigid law can be laid down, but the time and frequency of repetition must be left to the judgment of the physician, and will vary simply remarkably. General principles only in the present state of knowledge can be advanced, and it is as unscientific to deny, without advancing corresponding proof to the contrary, that a medicine can act in the system weeks, months, or even years, as it would be to deny that disease can. As a mere matter of reasoning, analogy would teach that if disease has, natural to it, exacerbations and remissions, and even intermissions, of days, hours, years, as also seasons and various climatic conditions, so must medicines have, if they are to *cure* correspondingly by producing corresponding effects, and in the case of medicines acting as slow poisons from over dosing, or where given by accident or malice, such consequences are well known to occur, then why should they not when given medicinally, —*i. e.*, curatively—in suitable doses, and with special care to suit the periodicity and known duration of the various diseases for which they are administered? Here, as everywhere, the answer is, Try.

Our author mentions a case in which he "gave *Sepia* against a chronic headache which came on at intervals. The attacks became both less frequent and less violent. Another dose stopped the headache for the period of 100

days, from which I infer that the remedy acted during all that time. At the end of 100 days another slight attack came on. A third dose of *Sepia* was given, and it is now seven years since the headache has completely disappeared." He now makes a remark, in the other direction, also of great importance, namely, that long-acting remedies as *Bell.*, *Sulph.*, *Ars.*, have the duration of their action diminished in proportion as the disease is acute and runs speedily through its course. It will be seen here, again, that analogy is recognised, and observation. Then in a note he makes the honest and important statement, with respect to this duration of medicinal action—"No one is bound either to comprehend or believe that proposition; *I do not comprehend it* [italics mine], but the facts speak for themselves. The truth of my proposition is demonstrated by experience, in which I have more faith than in my intelligence" !!!

"The *fundamental rule*, therefore, in treating chronic diseases is to let the carefully selected homeopathic antipsoric act as long as it is capable of exercising a curative influence and there is a visible improvement going on in the system." We have now a very important warning—"Even if a remedy should produce a sudden great improvement in the condition of the patient, there is danger that the remedy may have acted as a mere palliative; in this case it should never be exhibited a second time, not even after other intermediate remedies." This again illustrates the delusive nature of immediate, even though brilliant, results in chronic cases, and further intimates how patience is called for in these cases of long duration. He also speaks of giving the medicine, when repeating the dose, in a lower potency, adding, "these lower degrees are chosen when the chronic disease has assumed an acute character." All this shows what a matter of observation and experience this question of repetition is, and what study and reflection are called for; how unlike the mechanical daily and hourly routine of allopathic practice. In certain cases where the system is peculiarly irritated against the action of remedies, he refers to the soothing effect of an occasional mesmeric pass; also to the value of the inhalation of medicines by olfaction. This he states will affect the system as powerfully and efficaciously as if swallowed, and the power of the medicine can be proportionately increased by increasing the number of inspirations. Another form of deceptive palliation which may occur is where "the most troublesome

symptoms of a chronic disease, such as old, constant, acute pains, spasms, or cramps, &c., disappear speedily and entirely, as if by magic, to such a degree as to make the patient suppose that he is entirely free from pain, and has almost recovered. . . . This deceptive success shows that the medicine has acted enantiopathically, as a mere contrarium or palliative, and that a considerable exacerbation of the original disease will shortly show itself." I should like to call the attention very particularly of all whom it may concern to this observation. Nothing is more difficult often, even impossible sometimes, than to meet the pressing demand for immediate and prompt relief to or removal of one or two troublesome and disagreeable symptoms such as pain, eruptions in visible places, or peculiarly irritating in their character, or some discharge offensive or otherwise objectionable, and which it is urgently asserted must be promptly got rid of, particularly if some friend or relative had something similar, or supposed to be so, and the doctor consulted gave him something which took it away at once. The only answer, if the case were of the nature mentioned above by Hahnemann, is that the thing cannot be done without seriously imperilling the prospects of cure, and in any case prolonging the treatment and complicating it in every way. There is a certain order in the removal of the symptoms just as there was a certain order in their appearance, and this has to be strictly considered and followed as much as anything else. For the comfort and encouragement of sufferers, however, it may be remarked that the nearer the remedy approaches the typical simillimum, the sooner will the patient be conscious of acquired strength and capacity to bear the still remaining sufferings, and also that the *ensemble* of his sufferings is steadily, even if slowly, diminishing, and unwonted health taking the place of disease.

Next is brought before us a most practical point—namely, "some of the accidents by which the cure of chronic diseases may be temporarily disturbed"; among them immoderate eating, various derangements of the stomach from unsuited food or spirituous drink; fright, other mental and moral emotions; cold; straining; wounds; burning of the skin; weakness from loss of blood or other humours. As to this last, I just refer to the common expression that such a discharge is so weakening, which is, in simple language, putting the cart before the

horse, as I find it most difficult for many persons to understand that it is because they are weak that they are liable to these various discharges or unusual susceptibilities of whatever kind. All of the above-mentioned "accidents" require treatment, not by names, but according to the symptoms present at the time, often by non-antipsorics; and while this is going on there must be a suspension of the treatment for the chronic condition, until what has intervened has been successfully combated. Other diseases are such as arise from "malaria or meteoric influences." "By these diseases the antipsoric treatment is not only disturbed, but positively *interrupted*." Here, again, intercurrent treatment must be adopted. Now as to the order of cure we read, "The symptoms which have been recently developed by the inherent action of the psoric miasm . . . are the first to yield to the action of the antipsorics; the older symptoms which have permanently existed disappear the last. *Of this number are the local affections*" (italics mine). The above is a good guide to indicate whether *curative* progress is really being made, and shows the importance of ascertaining if possible the order in time in which the symptoms made their appearance, and also the importance in studying the *Materia Medica*, of noticing the time, hours, days, weeks, months, when any particular symptom showed itself after the commencement of the proving.

Then as to the duration of the treatment—"a short duration is made impossible by the nature of the malady"; on the other hand, "a great chronic disease may be cured in the space of one or two years, *provided it has not been mismanaged by allopathic treatment to the extent of having become incurable.*"

The times recommended for taking the medicines are before breakfast, and half an hour or an hour should elapse before eating or drinking. In the case of troublesome constipation, before the medicine has had time to act curatively, he advises injections of pure tepid water, repeated every quarter hour; by the time a third has been given it will certainly act. He advises in clothing the gradual substitution of woollen fabrics by cotton, and finally by linen, and forbids the use of "medicinal tea, mint, pastry, aniseed, bitters, liquors, lichen, spices of any kind, spiced chocolate, electuaries, tooth tinctures, tooth powders, and the various other fashionable compounds."



" Warm or hot baths cannot be permitted . . . the body may be kept clean by washing it quickly with soap-water that has the temperature of the body."

We now reach the final chapter of this invaluable work under the title of—

#### THE REMEDIES.

The pertinent question is here advanced, " By what signs may an antipsoric remedy be recognised beforehand? There are no such external visible signs." Here, again, comes out the pioneer, inventive, intuitive, determinedly industrious genius and reflective inductive power of our author. He inferred certain medicines to be antipsorics, some from their already known curative powers, as *Lycopodium*, from its use in trichiasis (a troublesome skin affection of the hairy scalp); table salt, *Natr.-mur.*, from its popular use in the arrest of hemorrhages—the similarity of action existing between *Sulphur*, *Phosphorus*, and other combustible substances from the vegetable and mineral kingdom, led to including these with *Sulphur*, the principal antipsoric. " Generally, however," he says, " only such remedies have been arrayed under the head of antipsorics as have developed in the healthy organism symptoms analogous to those which were known to emanate from repelled itch." Here we see once more how differently Hahnemann used the word "itch" to the way in which some of his modern scientific (?) detractors understand it, and therefore seek, it would appear, to put their meaning into his mind. The antipsorics, as previously remarked, are forty-eight in number, and cause " symptoms which were known to emanate from repelled itch." These symptoms amount in all to many thousands, and cover the field of chronic diseases; and yet we are to believe, say these scientists, that Hahnemann considered the common itch insect, the *acarus scabiei*, the source of the majority of these! He further adds, " In proportion as our knowledge . . . increases we may find it necessary to add a few more remedies to the antipsorics which are now known." Again, we are on the firm ground of law and principle, and not iron rules fixing how many of any particular kinds of medicines there must be, and at the same time the increase is to be distinctly by "knowledge," not imagination, surmise, or any other uncertainty or hypothesis. Respecting the mode of preparation of the remedies it "enables us to

develop the medicinal virtues of a drug into a series of degrees of potency, and by this means to adapt the remedial influence of the drug with great precision to the nature of the disease." This observation contains one of the kernels of truth with regard to this important matter of dynamisation. It will be noticed on the surface what accuracy is suggested here, what adaptation of means to end, "a series of degrees," to suit the various phases and phenomena of diseases. Later on we shall learn something of the actual preparation, but meanwhile it may be stated that the various potencies have produced most various *degrees* of the same symptom, as well as some symptoms in some potencies which have not yet been known to be caused by some others. All this, it is not difficult to see, has a direct and practical application in the treatment of the various shades of even the same disease, and this being so, how short sighted is the policy which would, at the judgment of even a whole galaxy of physicians, shear the *Materia Medica* of much of its wealth, because some *sarants* do not believe that medicines above a certain potency can cause symptoms—a belief or opinion not even attempted to be sustained by experiment, whether in proving of medicines or treatment of patients.

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### KEY-NOTES—PRACTICAL ONES.

By AGRICOLA.

Early in 1877 I met in Holborn an old friend engaged on the Press whom I had not seen for some years. As he approached me I noticed he held his hand over his right eye, while his attitude told me there was much physical depression. "Poor fellow!" I exclaimed, as I greeted him; "what's the matter?" "Oh, inflammation of the eye, for which my usual M.D. referred me a month ago to the Royal Ophthalmic Institution, Moorfields, where the prognosis is bad. I am in awful pain, and get no sleep."

I met him by appointment eight days afterwards, when he replied to my inquiry, "No better." "Well," I said, "if you think my humble services worthy of your consideration, I'll try *my* hand. Write down in your pocket-book *Potassic iodide*; get a drachm at any chemist's shop, and take, dry on your tongue, where it will dissolve, the

equivalent to a grain of mustard seed three or four times a day."

When I next saw him he declared that the second dose relieved the pain, and that on the third day he was practically well.

Ever since that memorable experience *Iodine* in its varied forms has never yet failed me, be the case the infant or child born of (probably) immaculate parents or the old *rouè* of most questionable habits and antecedents.

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## MATERIA MEDICA.

### *NITRIC ACID* 30.—AN INVOLUNTARY PROVING.

Communicated by DR. CLARKE.

A PATIENT of mine sends me the following cutting, to which she appends an interesting experience of her own with the medicine in question—*Nitric Acid*. To the letter I attach much more importance than to the learned experiments on "guinea-pigs, rabbits, and dogs."

"A most important discovery, says the *Daily News* Berlin correspondent, appears to have been made by Professor Rudolf Emmerich at Munich and Dr. Ziro Tsuboi, a Japanese colleague living there. They state in the medical papers that they have found cholera Asiatica to be a *nitric acid* poisoning caused by the Koch comma bacillus. The doctors, by making experiments on guinea-pigs, rabbits, and dogs, found that poisoning with *nitric acid* took the same course with these animals, and showed the same symptoms as inoculated cholera with guinea-pigs. They further point out that the symptoms exhibited by persons poisoned with *nitric acid* are exactly the same as those attending cholera. Should the above observations stand the scientific tests, cholera investigations will now enter quite a new path."

"Apropos of the above, it seems possible that you may like to know that—except in the attenuation in which you gave it to me (I think) in 1891—*Nitric Acid* produces in me a bilious attack. I have tested this with No. 30 trit. over and over again, and now I never touch it. The symptoms were severe pain in the stomach, of the cramp sort, rather violent sickness, and shuddering cold, and moderate diarrhoea of the spasmodic sort, which afforded no relief. Also

a heavy headache, entirely unlike my usual headaches in all respects, and great thirst. I took the medicine for a tickling cough, and none of the above symptoms were present till some hours after the first dose. The acid poisons me, I suppose, in No. 30."

### AVENA SATIVA IN SLEEPLESSNESS.

By MR. A. M. HART.

I SHOULD like to bring under the notice of homeopaths a case which has lately come under my care, which, owing to the peculiarity of the symptoms, caused me to consider ere I undertook to prescribe.

A lady, aged 54, called at the Homeopathic Pharmacy of Fisher and Co. (of which I am manager), and asked me if I could recommend her any homeopathic remedy for sleeplessness. I asked her if she knew any cause for it, and she replied in the negative, and at the same time added that she had everything the heart desired with the exception of sleep. I tried to fathom the cause, and informed her I would try to relieve her. I thereupon gave her the following: *Avena Sativa*  $\phi$  gtt. x in half an ounce of water, to be taken two hours before retiring, and to place a wet bandage round each wrist. The result that she slept from 11 p.m. to 7 a.m., and had a most refreshing sleep. She called next day to thank me, and said it was the first night's comfort she had had for three weeks. As this is an exceptional case, I trust you will think it worth publishing, and that it may be of interest to your readers.

337, George Street, Sydney, N.S.W.

## WORLD'S HOMEOPATHIC CONGRESS.

### SECOND LETTER FROM OUR CONGRESS CORRESPONDENT.

DEATH OF DR. CARL FISCHER.

WILL you permit me to slightly amend a remark or two of mine in my communication of June 3rd? It would be much nearer the truth to state that Michigan Avenue is sixteen miles long, and that buildings exist in Chicago

twenty-one stories high. How long a time will elapse before this statement will need amending I do not know, but a delegate who stated that he preferred Washington to Chicago was with due gravity informed that if he would wait a little he could reside in both, as Washington would soon be annexed as a suburb.

I cannot proceed until I have expressed my deep regret at the death of Dr. Carl Fischer. A German by birth, an English colonist by adoption, he was a most agreeable companion at the Exhibition, and it was difficult for the writer to judge as to whether the Fatherland or his adopted country held first place in his thoughts, as we rapidly scanned together the products of both. He related with much enthusiasm incidents in his professional career, and waxed particularly eloquent over homeopathic triumphs which had rewarded his skill. He was much helped by the kindness of Hering, who seems to have caused a homeopathic degree to be conferred upon him, although he possessed several good qualifications, but these points will doubtless be touched upon by some one more conversant with the facts of the case. His genial manner, his linguistic proficiency, his almost faithful enthusiasm, together with his sound professional acumen, rendered him an equally valuable companion, and trusty medical adviser. A local newspaper, as is its wont, exhibited him with his pockets full of bottles, and a kangaroo in the background, a caricature devoid of ridicule, so to speak. Thus glides from our view one more of our stalwart soldiery. May his sorrowing relatives be consoled among other considerations by thoughts of the brave fight he made, and may the comrade be soon forthcoming who shall take his place.

Permit me to conclude this letter by referring, in a word or two, to certain points emphasised in the papers presented. No one would be able to gather from the reports that have reached this country, the eagerness with which Dr. Richard Hughes's paper was looked forward to, or the disappointment the large gathering manifested when it came to be known that he and other well-known and much-talked-of British contributors could not be present in person. The "vigorously attacked" of a contemporary (*North American Journal of Homeopathy*, p. 472) might be expanded to the effect that the paper was attentively listened to, its points energetically discussed, and a protest

made against the exclusion of drugs whose clinical use had outrun their pathogenetic suggestions.

In the Gynecological Section, much was said about the paramount importance of at once stitching up any laceration, wherever situated, after labour. On your correspondent remarking that a too close adherence to such a rule might lead to unjust criticism, a well-known surgeon remarked that American patients are educated up to that point.

Dr. J. M. Schley pleaded very earnestly for earlier operative interference in the effusions of pleurisy; and on its being alleged that homeopathy was sufficient in most cases, retorted that it was in cases that had been treated by the best-known homeopathic medicines he had often had to resort to paracentesis, &c. He warned his audience against what might prove fatal delay when medicines had had a fair trial.

X.

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### MATERIA MEDICA SECTION OF THE WORLD'S FAIR CONGRESS OF HOMEOPATHIC PHY- SICIANS AND SURGEONS, JUNE 1, 1893.

(From the *American Homeopathist*, July 1st.)

#### PRESENT CONDITION OF HOMEOPATHIC MATERIA MEDICA.

At a few minutes after three o'clock, the chairman, Dr. A. C. Cowperthwaite, called the section to order, and, after briefly outlining the work of the section, proceeded to read his address, entitled, "The Present Condition of the Homeopathic Materia Medica."

In this essay Dr. Cowperthwaite reviewed the present standing of the homeopathic profession from the point of view that it is materia medica which constitutes us essentially different from the other schools of medicine. This granted, he assumed that it was and is a blunder to attempt to belittle the materia medica by accusing it of being untrustworthy and calling for revision and changes, when all the good that has accrued to the homeopathic school in all these years since the utterance of Hahnemann's materia medica have been necessarily based on the alleged incorrect materia medica. He counselled a closer study of the genius of this work, a true-hearted effort to understand what the founder of homeopathy meant when

he issued his immortal books ; it is no longer necessary, he said, to take every word as it is written, as was at one time taught, but a proper interpretation of the spirit of the text will save the practitioner from falling into the extreme of bare symptomatology. He said that the effort to throw out all but frequently verified symptoms would leave the books simply a physiological record of the effect of drugs upon well people, and utterly negative the thousands upon thousands of valuable symptoms which had but a bare foothold in the books, and yet had been efficacious in saving many human lives. He did not decry the careful expunging of many heterogenous symptoms, but he pleaded for less of rancour in the mutilation of the records ; saying, in conclusion, that there are many established facts, not only of medicine but in the general universe, which cannot be reduced to a scientific rule, or squared with any known law, but which will ultimately take their place with the more exact sciences as our knowledge grows.

#### SEPIA.

DR. A. LEIGHT MONROE, of Louisville, was the first essayist of the section, and presented a paper on "A Study of Sepia—Pathologically, Clinically, and Comparatively."

In this paper, which was rather too brief to do the noble *Sepia* much justice, the essayist made some very valuable suggestions by way of comparisons with other known remedies, and pointing out an easy way of learning this or any other remedy, which consisted in associating the new remedy in some one of its important parts with a similar part or parts of some known remedy.

DR. H. C. ALLEN, Chicago, in opening the discussion, said that he only desired to emphasize a few points made by Dr. Monroe, or rather to call more particular attention thereto and to enlarge upon them. Of the first of these was the indication for *Sepia*, which came to the surface during the menstrual and parturient periods, *i.e.*, the constipation which is scarcely equalled by that of any other remedy in the *materia medica* ; another peculiarity is the aggravation from stormy weather, which brings it in line with *Phosphorous*, *Psorinum*, *Rhus*, and other remedies ; though it differs from these materially, the *Phos.* patient feels the changes hours and days before the actual change takes place ; but the *Sepia* patient feels the weather changes

mostly in the springtime, while *Phos.* feels it any time. Again, the peculiar weather to which *Sepia* is applicable is snow weather, especially those snows falling in March or April. If you have a scrofulous child of tender years playing out in a snowfall, if it is a psoric child, this exposure brings on a cough, a laryngeal cough, hacking, tickling, growing gradually worse, until it reaches the croupy stage; *Aconite* or *Hepar* would, likely enough, be given, but with only slight relief; here is *Sepia's* great field. This child, or this grown person, is so apt to take cold whenever it snows. Don't, however, give it in the second decimal potency. My experience with *Sepia* and all of its congeners, *Moschus*, *Apis*, *Lachesis*, and *Pulsatilla*, is that they are antagonistic; and those who alternate must not expect to have good results if they give *Sepia* with any other of the remedies mentioned. *Sepia* has a local perspiration. We have many remedies with cold, damp, sweaty feet; *Silicea* is one of the chiefest; but in *Sepia* you will find both hands and feet sweaty. Again, *Silicea* has its sweat confined mostly to the feet; while *Sepia* has local sweats in spots, as one may say, while all other parts of the body may be dry.

DR. LIZZIE GRAY GUTHERZ, St. Louis, said that she only wished to add her voice to the effectiveness with which this valuable remedy served the painstaking physician. I don't think, she said, that *Sepia* will replace a displaced uterus, but I do think it will do wonderfully good work in keeping it in its place, after you have used your mechanical means for, as the essayist says, reducing the congested condition of the uterus and its appendages, and it is certainly very valuable in all neurotic conditions in urinary troubles; in the latter trouble it takes its place with *Lycopodium*; in its uterine symptoms it has many of the characteristic symptoms of *Belladonna* and of *Lilium tig.*, especially as they refer to the bearing-down condition. As Dr. Monroe says, the relaxations of the tissues has a great deal to do with this condition of the uterus, and that tends without a doubt toward this horrible constipation of which Dr. Allen has just spoken; and, therefore, *Sepia* is a corrective of that, because it has a wonderful influence on the portal circulation.

DR. T. F. ALLEN, New York: In relation to the comparisons which have been made here, I have been very much interested. I have made in the last two years some



study into the relationships of sepia, and in order to do that intelligently I find it necessary to inquire into the nature of sepia; this, as you all know, is an animal product; so is lachesis, so is moschus, but sepia is not a poison like lachesis; it is simply an animal product which the mollusk throws out in order to baffle its pursuing enemy; it casts off this black ink, darkening the water, and under this cover of darkness makes its escape. It is a simple carbon, absolute insoluble, inert, as far as its crude condition will go. Hahnemann, to be sure, supposed that the artists who used the sepia India ink suffered from the effects; but I have found that comparisons of sepia with lachesis and with apis fall to the ground in my hands. I wouldn't think of comparing sepia with an animal poison. I compare it with the carbon products. I have been very much interested lately in the chemical history of lycopodium, and it has made a great impression upon me so far as the comparisons are concerned. Lycopodium is the only vegetable known in the world which takes up alumina from the soil, and there is a wonderful similarity between the provings of alumina and lycopodium.

Dr. MONROE: In regard to my comparisons of sepia with the other animal poisons, of course Dr. Allen and the rest of you understand that I haven't attempted to make any such comparisons upon any toxicological basis, but simply upon the clinical basis. I don't care how slowly the *Sepia* is taken, how long it takes to produce these effects, nor how mild they are in some of the provers, still it gets there just the same eventually; I brought these comparisons in not so much to show the similarity, but to suggest the differences; the paper was intended to be suggestive, that is all; had I followed the different avenues that suggested themselves to my mind as I went along I would have been reading until to-morrow morning. As to *Psorinum*, I always think of that as an exaggerated sulphur; I cannot see any marked differences, except in the abject, despairing, uncompromising melancholy that we find in no other drug in the materia medica, with the increased tendency to chronic troubles, to chronic diarrheas, to skin troubles, and the tendency to tardy convalescence.

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ADDRESS ON THE HISTORY OF HOMEOPATHY  
IN INDIA.\*

By P. C. MAJUMDAR, M.D., Calcutta, India.

LADIES AND GENTLEMEN,—Before going into the details of the progress of homeopathy in India, I take this opportunity of speaking a few words about the state of the medical profession generally in that country before the advent of the Europeans. I purposely take this responsibility, as it has some bearing upon the progress of homeopathy in India. You are all aware, doubtless, that India is a very ancient and magnificent country. It had attained its highest state of civilisation long prior to all civilised countries of the world at the present day. It is, therefore, natural to infer that laws governing health and disease must have received a due share of attention in the hands of its people.

It was believed that Mohadeva, the great Hindu deity, was the promulgator of the science of medicine. He was dealing with the dead bodies and handling all sorts of deadliest poisons. The truth is, he was busy with examining the human frame and searching after medical virtues of all substances. From him Dhannantori got his inspiration of medical science and practised it for the preservation of the human race. There is a story in our books that on one occasion all the minor gods and goddesses were eager to become immortal, and for this purpose they were agitating the ocean to get *Amrita*, the principle of immortality. But instead of getting that they procured *Garal*, the deadliest of poisons. Nobody ventured to accept it, when Mohadeva came to their help, and turned that substance into *Amrita* by swallowing the poison, and becoming immortal. We homeopaths can find out a great deal of truth in it. Mohadeva took the poison into his healthy body—"proved" it, as we call it, and reduced it into life-giving principles of medicine. We presume, however crude and unreliable this story may be, that the law of homeopathy, which immortal Hahnemann discovered so recently, was known to our ancient sages in India. This very principle of *similia similibus* was also embodied in one of our ancient medical works in the following passage that "Poison is the cure for poison." How far my contention

\* From the *Medical Century*, June.

may be sustained I am not prepared to argue, but I am so far confident that one medical authority of ancient times had some idea of the homeopathic law of cure. Even at the present time our native system of medicine is far better and far more efficacious in curing all varieties of chronic diseases than that of our allopathic physicians.

Our native physicians, moreover, use very minute doses, and are more successful than our brethren of the allopathic school, with all their vaunted knowledge of science. Our medical science suffered a good deal of loss during the Mohomedan invasion in India. These turbulent people destroyed many of our valuable books, in order to introduce their system of medicine. But it proved an utter failure.

Later on, our European physicians brought their own medical science with them. We are thankful to the modern spirit of investigation. By their surgical skill and appliance our allopathic physicians made a good name and extended reputation; but their therapeutic measures are an utter failure. They, by the aid of the English Government, established medical colleges, hospitals and charitable dispensaries throughout the length and breadth of the country, and are doing some good to the people, but not to the entire satisfaction of the Indian community.

At this moment the homeopathic system of treatment engages the attention of our people. People are convinced of the superiority of homeopathic methods of cure in India through the exertion of lay medical practitioners. No qualified medical man at an early date deemed it worth while to study and practice it. It was a significant fact in the history of homeopathy in India that one Dr. Honigberger, a German gentleman, came here to treat one of the princes of this country who was declared hopeless by his physicians. I understand Honigberger gave the juice of *dulcamara* to the prince, and he was much improved. This is the first drop of homeopathic medicine administered to our countrymen. However, since the departure of this physician there was no stir about homeopathy till the year 1851, when Dr. Tonnerre, a French physician, who proved *Acalypha indica* the valuable medicine for phthisis pulmonalis, came to Calcutta and began practicing homeopathy. He was a favourite of the officials in India, so, by the help of the Governor of Bengal, he established a homeopathic hospital and charitable institution in Calcutta. Our

wealthy and generous townsman, Babeu Rajendra Dutt, dissatisfied with the allopathic treatment of cases, began studying homeopathy. By his energy, and the judicious prescriptions of Dr. Tonnerre, many cures have been effected up to this time; and we are told that some of the most fatal cases given up by the allopathic physicians were beautifully managed by these gentlemen. This is the first planting of homeopathy in this country. No regular physician of our country thought it necessary to inquire about the new system of cure.

Babeu Rajendra Dutt was a neighbour of Dr. Mahendra Lal Sircar, who was then a rising allopathic physician. It was a curious fact that many of the given-up cases of Dr. Sircar were readily ameliorated and cured by Rajendra Dutt. This attracted the attention of Dr. Sircar, who, after studying for some time, was moved by the genuine superiority of homeopathic methods of cure, and openly declared his conviction in 1867. Dr. Sircar's allopathic friends and associates were much incensed at his conversion to homeopathy, and he was ostracised from the allopathic medical associations.

About the year 1865 Dr. Berigny, an eminent French homeopath, came to Calcutta to practice Hahnemann's system of medicine. He was very successful in his profession, but was not long to enjoy that reputation. A homeopathic pharmacy was established at this time for dispensing medicine. In conjunction with Dr. Mahendra Lal Sircar and Babeu Rajendra Dutt, Dr. Berigny has done much towards the propagation of homeopathy in India.

At this time Dr. Behari Lal Bhaduri, a graduate of the Calcutta Medical College, came to the field. He was a studious and intelligent physician, and it was, I believe, through the exertion of this gentleman that homeopathy has gained a firm footing in India. I regret very much to say that we lost him at a comparatively early age of fifty years, in March, 1891.

After observing some marvellous cures from homeopathic medicines by Dr. Bhaduri, I came to study this method of cure. I graduated in the year 1878, and after studying homeopathy under Dr. Bhaduri, have been practising it since the year 1880. My good friend, Dr. Brajendra Nath Banrg, who graduated in the same year with me, commenced practising in Allahabad, a town about five hundred miles from Calcutta. He practised a few years as an allo-

pathic physician, and subsequently took to homeopathy and came down to Calcutta. He is an intelligent and energetic physician.

About this time many of our class friends were converted to homeopathy. Among them I may mention the names of Drs. C. S. Kali, B. V. Maitra, P. N. Chatterji, and A. K. Datta. They are all very enthusiastic followers of Hahnemann.

Our good friend Dr. Giris Chandra Dutta has done much to introduce homeopathy among some of the rich people in Calcutta. He is an old graduate and, I believe, a class friend of Dr. Bhaduri. Homeopathy was so widely known at this time, namely from the year 1880, that one of our countrymen, Dr. D. N. Ray, came to study homeopathy at New York. He became a graduate of the New York Homeopathic Medical College, and began practising at Bombay. He is subsequently removed to Calcutta, and is doing good work there.

I forgot to mention the name of Dr. M. M. Bose, who came before Dr. Ray, and graduated also from the New York Homeopathic Medical College. He is also a homeopathic physician at Calcutta.

In Calcutta we have now about fourteen homeopathic physicians, and our works are extensive. But there is still great difficulty in getting homeopathic help in other parts of the country. There are some laymen practising among the people there. In order to get rid of this difficulty I tried my best to educate some of our countrymen to homeopathy, and thus in the year 1833 I succeeded, through the help of my friends, Dr. M. M. Bose and Babeu S. B. Mukerji, in establishing our Calcutta School of Homeopathy. Though this school is still in an elementary condition, yet much good has been accomplished by it in spreading our system of medicine. The students in the roll last year amounted to about one hundred. The students are required to study for three years here, and after passing an examination are supplied with certificates to practice. There are eight teachers in the school. Dr. D. N. Ray is the president, and myself the secretary of the school.

I am glad to bring to the notice of our friends of the World's Homeopathic Congress here that homeopathy has gained a somewhat strong hold among our people at the present time. In proof of this, I may call your attention to the fact that within a year or two we have some public

institutions. I mean two dispensaries, and a hospital where poor patients get medical help. Bhaduri's charitable homeopathic dispensary was established as a memorial for that gentleman after his death. Dr. Banerjee is the secretary of that institution. Since its establishment in June, 1892, up to February, 1893, eight thousand patients have received medical help and medicine. This dispensary has a branch in the crowded part of the city under the supervision of Dr. B. V. Maitra, and I am glad to say greater numbers of patients were treated here. Dr. Maitra, moreover, deserves our best thanks, for here he used to supply all medicines himself. The dispensary is useful in other ways than giving medical help to the poor; the students of the Calcutta School of Homeopathy have the opportunity of attending here by classes, and of learning how to prescribe and take up cases.

Subsequent to the establishment of this institution, a very rich and respectable gentleman, Sir Rajah Sourindra, Mohan, Tagore, established, under the direct supervision of Dr. P. C. Majumdar, a homeopathic dispensary in name and honour of his mother. There are two paid medical officers, who prescribe and distribute medicines for the poor people gathered round them every morning. Deploing the neglect shown to homeopathy by our rich class of people in India, the medical officer says that all our best thanks are due to the generous Rajah (prince, as he is styled by our Government), as he is the pioneer of giving public help to our cause. The dispensary was established in July of 1891, and during this short period it was in a very prospering state. During the year they treated ten thousand cases; the number of cures was very great. The Rajah bears all the expenses, which amount to about one hundred and fifty rupees a month, Dr. Majumdar being an honorary superintendent. Here some of our students get access to learn clinical medicine.

The 15th of June, 1892, is especially memorable to us homeopaths in India, as in that day we established our Calcutta Homeopathic Hospital. This is altogether a new feature in our country. This is entirely a charitable institution; all the patients are treated gratis. There are available spaces for forty patients in the house where it is located now; besides, a ward is set apart for receiving cholera patients. It is under the charge of Dr. B. V. Chatterji. There is a managing committee consisting of

all the teachers of our homeopathic school and many homeopathic physicians in the city; the secretary is Dr. P. C. Majumdar. In this hospital, though in its infancy, depends in a great measure the public recognition of homeopathy in our country. It is, up to date, supported by subscription among the homeopathic physicians of Calcutta. Our students get their clinical lectures here by the teachers. There are about twenty homeopathic pharmacies in Calcutta for preparing and selling medicines, and I am happy to say they are in a prosperous condition.

There are very few books published in India in English, but many in our own language. I give below the names of the authors and their books.

Dr. Sircar.—*Treatment of Cholera; Materia Medica in English.*

Dr. Salzer.—*Lectures on Cholera; Periodicity of Drugs; Cirrhosis of Liver.*

Dr. Bhaduri.—*Translation of Baehr's Science of Therapeutics, 2 vols. (Bengali); Treatment of Cholera (Bengali); Materia Medica (Bengali).*

Dr. Majumdar.—*Practice of Medicine, 2 vols.; Materia Medica (Bengali); Translation of Bell's Therapeutics of Diarrhea, Dysentery, &c. (Bengali); Treatment of Cholera (Bengali); Hering's Typhoid Fever (English), as an Editor; Epitome of Practice of Medicine (Bengali).*

Dr. Banerjee.—*Theory of Homeopathy (Bengali).*

Dr. Maitra.—*Diseases of Children (Bengali); Treatment of Diarrhea, &c. (Bengali).*

The *Homeopathic Record* is a journal published and edited by Dr. J. C. Labiri regularly every month.

The *Indian Homeopathic Review*, now edited by P. C. Majumdar, is an irregular visitor.

We have a Hahnemann Society in Calcutta, met every year to celebrate the anniversary of Hahnemann's birthday on the 10th of April. Special meeting may be called when required.

Two or three days before my departure from Calcutta, there was a meeting of homeopathic physicians and students of our school to accord to me a farewell address. In that meeting one of our colleagues remarked that "though our country is poor and dependent, and we have nothing brilliant to offer to the members of the World's Homeopathic Congress and to our American colleagues, yet we possess a warm heart, and believe Dr. Majumdar will be able to

convey to them our warm and sincere greetings." Now, ladies and gentlemen, allow me to perform that pleasant duty of greeting you for myself and on behalf of my colleagues in India.

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## THE JOURNALS.

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### GERMANY.

(From the Summary in the Journal of the British Homeopathic Society.)

**ACIDUM FLUORICUM IN THYROID DISEASE.**—A lady, aged about 30, complained of one side of her neck being larger than the other. The left half of the middle lobe of the thyroid contained a cyst the size of a walnut; it felt firm and elastic, and the structure of the gland was everywhere thickened. I thought I would divide the treatment into two parts. First I would bring down the swelling of the gland tissue, and then endeavour to promote the absorption of the cyst. But this unhomeopathic manœuvre did not succeed, for under the action of a daily drop of *Ac. fluor.* [dilution not stated], from Feb. 2nd to the middle of March, by April 19th the swelling of the gland and the cyst had both disappeared.—Villers, *Arch. f. Hom.*, ii. 156.

**KALMIA IN CARDIAC HEADACHE.**—Dr. Pröll relates the case of a boy of 13, who suffered from headache and weak memory to such an extent that he was obliged to leave school. The cause was found in an insufficiency of the cardiac valves, and *Kalmia* 1 was given three times a day. In three days there was slight improvement. The remedy was given twice daily in the 2nd dil. The headache then occurred occasionally only. The 3rd dil. was now substituted, and continued for seven days, when the headaches had wholly disappeared. Seven months after the boy was found to have been studying without interruption.—*Hom. Monatsblätter*, No. 1, 1893.

**PULSATILLA.**—A schoolmistress, aged 30, thin, pale, with scanty hair, complains of restless sleep, accumulation of saliva in mouth, distended abdomen, occasional diarrhœa. She is growing thinner, is always chilly and tired, the eyes are particularly weary. When 17 she had an Italian malarious fever, with rigors coming on at 2 a.m. The influenza of 1890, which attacked her, made her ill. She



was treated for a month without benefit with *Nat.-mur.*, *Sulph.*, *Cham.* and *Nux V.* She was not the least better, and in addition she had bulimia with great yawning, and, in consequence of her weakness, palpitation of the heart on any exertion. From the moment when she began to take *Puls.* 30, a dose every day, she steadily improved, and there remains nothing of her malady except some sensitiveness to open air.—Villers, *Arch. f. Hom.*, ii., 156.

**SPIGELIA.**—A woman, aged 32, of robust frame, suffered from a spasm of the stomach, coming on every evening at 8 o'clock; after great exertion it comes on during the day. It goes off when she goes to bed and falls asleep. She has also a sensation as if the left side of the chest were larger and wider than the right; this she only feels when lying down. Auscultation reveals an obtuse murmur with the diastolic heart's sound. This murmur is strongest under the third rib, near the anterior axillary line, and in the supraclavicular space of the same side. She got for a fortnight daily one drop of the 30th dil. of *Spigelia*. On seeing her two months afterwards she told me that she only had one more attack of spasm of the stomach. Auscultation showed perfectly pure heart's sounds without any murmur.—Villers, *Arch. f. Hom.*, 159.

**ACHILLODYNIA AND GONORRHEA.**—Professor Albut, of Vienna, announced in the *Wiener Med. Presse* of January 8, 1893, that he had lately met with six cases of severe pain in the insertion of the tendo Achillis. These cases were attended by a small swelling at the insertion of the tendon. The pains are very obstinate, and are not alleviated by warm baths, cold compresses, iodine or mercurial ointment applied externally. Professor Albut inquires if others have observed this affection. Dr. A. Welsch, of Augsburg, replies that he has seen three cases of it, and they all occurred in patients who had suffered for a long time from gonorrhœa. A swelling of the point of insertion of the tendon was always present. The pain was not always alike or constant, but increased as the gonorrhœa progressed, and remained long after the discharge had ceased. "These pains," says Dr. Welsch, "may either belong to those reflex phenomena which sometimes occur in remote parts of the organism during catheterisation of the urethra, or they may be referred to the so-called gonorrhœal rheumatism, confirming the opinion of many of the older physicians that gonorrhœa is not merely a local

affection, but a general malady (gonorrhœal dyscrasia). Which of these is the correct view I am unable to decide. In some cases the gonorrhœal infection may be merely a local disease, in others it may become a general malady, owing to the wandering of the *cocci* to distant parts." The remedy employed by Dr. Welsch is the tincture of *Thuja Occidentalis* externally and internally. He applied compresses to the affected part moistened with a lotion made with one part of the tincture to eight parts of water; and he gave internally four to six drops of the tincture three times a day. He prescribed the same treatment in cases of pains in the knee and hip of gonorrhœal origin. "*Thuja*," he says, "acts like *copaiva* balsam specifically on the mucous membrane of the urethra, bladder, ureters and kidneys, but has a much larger sphere of action, as it relieves the accessory symptoms of gonorrhœa, which are chiefly localised in the joints and sheaths of the tendons. Boerhaave and Hufeland saw good effects from *Thuja*. Nowadays its use is almost confined to our homeopathic colleagues, who give it in diluted form. This is almost enough to deter many from the employment of this plant, but my motto is: 'prove all things and employ the best.' The patient seeks relief from the physician, and if the physician cannot help him he goes to Pfarrer Kneipp. *Spienti sat!* The good effects of this tincture when applied to the base of warts are well known; it is also useful in condylomata and *ulcus molle*. Very good results have been observed from its application in erosions and ulcerations of the vaginal portion of the womb. I have seen better and more rapid cures of cases suspiciously like cancer from *Thuja* than from any other remedy." This is a brilliant testimony to the truth of Hahnemann's therapeutics from an adherent of orthodox medicine.—*Arch. f. Hom.*, ii., 150.

DIARRHŒA CHRONICA.—A clergyman, aged 64, had suffered for two years from diarrhœa. It came on after any exertion, after eating bread or cake, and without any ascertainable cause, betwixt 2 and 4 a.m. Urging to stool came on with great intensity, with rumbling in bowels and some pressure towards the right groin. He has great difficulty in resisting the call, particularly when it comes on in the early morning; it streams out, is very liquid, inodorous, and contains a few ragged bits of fœces. He has slight piles, and previous to this malady his digestion was very regular.

*Rhus* 30, one drop twice a day, caused such an alteration in three days that his bowels became quite regular, and remained so for fourteen days, when, after drinking too much white wine, the diarrhœa returned. The same medication for five days cured him completely.—Villers, *Arch. f. Hom.*, ii., 155.

MIGRAINE-NICCOLUM.—Dr. H. Moser has a paper on the treatment of this malady in the *Hom. Monatsblätter*, No. 2 of 1893. His experience is, that one can never hope to cure a case without getting the patient to give up coffee entirely; that *Sanguinaria* and *Iris* are the leading remedies; and that *Niccolum*, when indicated, “will surprise.” Its pain is most severe in the forenoon, from 10 to 11, and may be so intense then that the patient cries out in anguish. It appears first on the left side, then possibly jumps over to the right. In the evening it disappears.

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## INSTITUTIONS.

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### LONDON HOMEOPATHIC HOSPITAL.

THE forty-third annual meeting in connection with this institution was held on Thursday afternoon, July 13, in the board room of that institution, 35, Queen Square, Great Ormond Street, Bloomsbury, W.C. Mr. J. Pakenham Stilwell (chairman of the board of management) presided. The report showed that the practice of visiting patients too ill to attend the hospital had been continued, and up to March 31 the number visited had been 65. Thus 717 in-patients, 10,803 out-patients, and 65 visited patients made a total of 11,585 for the year. It was to be regretted that the year commenced with a deficit of £472, and the expenditure continuing to exceed the income, the board therefore once more found it necessary to reduce the number of patients in order to avoid debt. Notwithstanding that measure, and earnest attention to economies, the ordinary expenditure exceeded the ordinary income by £252, chiefly owing to the very marked decrease in the receipts from private nursing as compared with the exceptionally large amount from that source in the previous year. The total deficit on March 31 was £655. The cur-

rent income had been £5,771; the current expenditure, £6,024. The building fund showed that during the past year £3,500 had been received out of the amount promised, and that £639 had been received in interest. Those sums, added to the amount received up to March 31, 1892, made up a total of £22,910, of which £13,991 was invested, £5,815 had been expended on the site, and the balance, £2,138, remained in hand. Of the amount contributed, about £6,000 had been expended in necessary additions to the site, leaving about £25,000 for the actual construction. It was hoped that that sum would suffice, but it was feared that about £10,000 more would be required. The board, however, felt every confidence that the work being in an advanced state of preparation, the many staunch friends of the hospital and of homeopathy would not let the enterprise languish for want of ready and liberal help. The chairman moved the adoption of the report, which was seconded by General Beynon, and agreed to. The committee and the various officers having been elected for the ensuing year, votes of thanks concluded the proceedings.—*Daily Chronicle*, July 14.

#### A HOMEOPATHIC DISPENSARY FOR LEEDS.

THE following from the *Leeds Mercury* of July 3 will be read with pleasure by the friends of homeopathy everywhere. We congratulate our Leeds colleagues on the new start they have made:—

A valuable addition is being made to the benevolent institutions of this city. To-day the doors of a homeopathic dispensary will be opened for the treatment of the afflicted poor who have faith in the system of medicine introduced by Samuel Hahnemann. The new institution is of modest proportions, but, at the outset, it may be sufficient. It is large enough, with the capable administration it will have, to do much service, and the conditions generally under which it starts on its career of usefulness, at No. 68, Great George Street, near the infirmary, may be regarded as auspicious. It will be news to many of the younger generation of the inhabitants that this is not the first institution of the kind which Leeds has possessed. In the fifties there was a homeopathic dispensary in the town. Founded in 1851, it was carried on under the care of Dr. Irvine until about 1858. It made considerable progress, for not long after

it was established it required and obtained the services of a resident medical officer. This was Dr. Craig, and it was when he resigned that the institution was closed. It was not because of financial difficulties that it ceased to exist; the fact that it had then a balance of £200 in its favour showed that it had been appreciated by the public. This money was invested in Consols, as the nucleus of a fund to be devoted to a similar purpose, in the name of Mr. Thomas Wm. Tottie, a well-known local solicitor, and other trustees, and in the thirty-five years which have since elapsed, the sum has nearly doubled. Though the dispensary was closed, the interests of the sick poor were not forgotten. Dr. J. H. Ramsbotham and Dr. Craig opened private dispensaries at their homes, where at certain hours they gave aid to patients who could afford only a small fee, and often to those who could pay nothing at all; and these dispensaries have been continued by Dr. Clare, Dr. S. H. Ramsbotham, and Dr. Stacey. Unlike the other large towns of the country, and, indeed, many of the smaller ones, Leeds has all these years been without a public homeopathic dispensary. It is felt that the time has now come for making another effort. Recently a meeting of gentlemen interested in the project was held to consider the matter, and an influential committee, with Mr. Z. Yewdall as hon. secretary, was appointed to carry out the wishes of the promoters. Mr. J. B. G. Tottie, Coniston Hall, was elected president of the institution; that gentleman, along with Mr. J. W. Willans and Dr. S. H. Ramsbotham, are the trustees; and Dr. Ramsbotham and Dr. Stacey are the honorary medical officers. The latter gentlemen will at certain fixed hours attend at No. 68, Great George Street, and see patients; and it is intended, as soon as the funds permit, to appoint a resident medical officer, who will when necessary visit patients at their homes, as well as give aid at the dispensary. The project has already received considerable support. There is a respectable list of donations with which to commence the work, and also of annual subscriptions to meet the cost of maintaining the institution. It is intended that the surplus from the old dispensary, together with its accumulations, shall form the nucleus of an endowment fund, and it cannot be doubted that such disinterested efforts will receive the public support they deserve. The appended rules will show the basis on which the institution is to be worked:—A donor of ten guineas or upwards at any one time shall be deemed a life subscriber, and shall be entitled for life to the like powers and privileges as would be conferred by the rules of the institution for the time being in force upon a subscriber of one-twentieth of the amount of his donation. Patients may be admitted to the benefit of the institution either on presentation of a subscriber's ticket or by payment of the fees prescribed

by the rules. A subscriber shall be entitled to five tickets of recommendation for every half-guinea of his subscription. Before issuing a ticket to a patient, the subscriber shall fill in the name of, and date of issue to, the patient (such date not being later than December 31 in the year of the issue of the ticket to the subscriber), and such ticket, on presentation thereof, shall entitle the patient so named to free treatment at the dispensary for four weeks from the date of first presentation, which date must be within four weeks of the date appearing on the ticket. To meet the requirements of a large class of persons able and willing to pay a small fee, and with a view to rendering the dispensary in some degree self-supporting, tickets will be issued at the dispensary at the price of 2s. 6d. each, entitling the person named thereon to the like privileges as would be conferred by a subscriber's ticket of recommendation. No person who shall be in receipt of 35s. per week or upwards, and no member of the family of any such person residing with him, shall be entitled to the benefits of the institution, either by payment or otherwise.

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## REVIEWS.

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### CURABILITY OF TUMOURS BY MEDICINES.\*

If Dr. Burnett had published nothing else, the little volume of some three hundred pages now before us should serve to immortalise him. So deeply are the ideas of allopathic surgery and pathology ingrained into us in our schools, that the better surgery, pathology, and therapeutics of homeopathy are often regarded by professing homeopaths as counsels of perfection to be admired but not to be aimed at. Especially is this the case in the matter of tumours. Here and there, as Dr. Burnett says, homeopaths have cured tumours by medicine; but the idea that tumours are curable by medicine, and that the cure ought in every case to be advised and attempted, just as in a case of intermittent fever, for instance, is still far from being generally accepted by homeopaths.

Very fitly Dr. Burnett quotes John Hunter's definition of a cure, and puts it on his title page. Said Hunter: "WHAT I CALL A CURE IS AN ALTERATION OF THE DISPOSITION AND THE EFFECT OF THAT DISPOSITION, AND NOT THE DESTRUCTION OF THE CANCEROUS PARTS." This is exactly the kind of cure homeopathy

\* *Curability of Tumours by Medicines.* By J. Compton Burnett, M.D. London: Homeopathic Publishing Company, 12, Warwick Lane, E.C. 1893. Pp. 300, price 3s. 6d.

enjoins, and Dr. Burnett has shown how this may be accomplished in the case of tumours of a very large number of kinds.

We shall not forestall Dr. Burnett by quoting any of his numerous cases; for these we must refer our readers to the book itself, and we can promise them plenty of highly interesting, not to say exciting, reading. And more than that: Dr. Burnett is a gleaner in many by-paths of therapeutics, and his books abound with ideas and fruitful suggestions which can be readily put into practical use by the reader.

Dr. Burnett has no complete system of tumour curing, but he has a pretty distinct method of his own, which he has shadowed out in his preface and in various parts of the text. From his preface we quote the following:

“If we are ever to succeed in veritably curing grave disease by medicines, we must proceed from the simple to the complex, from the benign to the malignant; and it is reasonable to begin with the least difficult, and start at the thing in its very earliest stages, for there comes an incurable *stage* in almost every ailment of a progressive nature.

“It is extremely important to carefully differentiate between an incurable disease and the incurable *stage* of a perfectly curable disease. People will say, of course it is; but is it not a fact that new therapeutic measures are commonly tried in the last hopeless stages of disease, and even then often clumsily and unwillingly?

“For instance: is it not an almost daily experience of homeopathic practitioners to find themselves called in at the last incurable stages of maladies in which every conceivable method of cure must in the nature of things necessarily fail?

“This must always be borne in mind in regard to the amenability of tumours, whether benign or cancerous. Nevertheless physicians must be firm, and not allow themselves to be sneered or jeered away from their duty, but always to *try to cure everything*; I do not mean pretend, but *try*. Many a clinical battle have I fought *and won*, although the winning had been previously proved to be impossible.

“Inasmuch as it is not commonly believed that tumours can be cured by medicines, a very important part of my task in this volume should be to prove that it *can be done*. There are some who will say, ‘We need no proof from you that it is possible to cure tumours medicinally; that has been proved over and over again.’ This remark has been hurled at me time and again, but these selfsame men consistently advise their patients suffering from tumour to have the same removed by operation.”

Readers of Dr. Burnett's former works will not need to be told that he does not confine himself strictly to the beaten tracks in the selection of his remedies, though we fully agree with him

that all his medicines may fairly be included under the term homeopathic. Very often the great difficulty about tumour cases is the paucity of symptoms. When there are no distinct symptoms to guide, other indications must be found. A striking feature in many of Dr. Burnett's cases is the use he has made of nosodes in their treatment. However distasteful the idea may be to some, the question of nosodes will have to be faced and worked out. Homeopaths have used them for many years, and have been derided for their pains. But now that Koch and Pasteur have taken to nosodic homeopathy, things are very different. It matters not that these two *savants* by their clumsy methods have killed a large number of persons; this has only served to give the nosodes more vogue. Dr. Burnett might have gone on curing consumptive patients with *Tuberculum* or *Bacillinum*; nobody would have taken any notice of him if the Koch fiasco had not given him a peg to hang his experience on. In the book before us, which we now commend to our readers, much interesting experience with these potent therapeutic agents will be found recorded.

#### CHOLERA, DIARRHEA, AND DYSENTERY.\*

The following extract from the author's Preface will sufficiently explain the intention of this work :

"Like most generalisations, the old saying, 'A little knowledge is a dangerous thing,' contains quite as much of error as it does of truth; and if anything were needed to prove it, the experiences of lay homeopaths in the various cholera epidemics would be amply sufficient. In view of a possible return of cholera, it has seemed desirable to reprint with amplifications an article which appeared in THE HOMEOPATHIC WORLD of May last, entitled 'What to do if Cholera comes,' that the lay public may have within reach all the knowledge that is necessary to enable them to deal with any case of cholera that may occur in their midst in the absence of a medical man. Cholera is a disease that needs treatment at the very first onset, and if the treatment is not forthcoming the patient may die before a doctor can be procured. It is analogous in this respect to cases of drowning or rupture of varicose veins; anybody on the spot who has coolness and intelligence is bound to do what can be done without waiting for a doctor's arrival. It is therefore of supreme importance that all 'First Aid' graduates, and, indeed, all who hold responsible positions as employers or guardians of others,

\* *Cholera, Diarrhea, and Dysentery: Homeopathic Prevention and Cure.* By John H. Clarke., M.D. London: James Epps & Co., 170, Piccadilly, and 48, Threadneedle Street. 1893. Pp. 80, price 1s.



should know what homeopathy has done and can do with such a scourge as cholera, that they may apply it at once should the emergency arise.

“ In issuing this reprint it has seemed to me that I might enhance its value by adding a chapter on English Cholera and ordinary Diarrhea, and another on Dysentery.”

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## EXTRACTS.

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### CHLOROFORM EXPERIMENTS.

It is difficult to retain our respect for physiology and pharmacology as at present practised in view of the disgraceful collapse of the long series of experiments by which it has been sought to discover the source of danger in the use of chloroform. We use the word disgraceful advisedly. It would not be appropriate in respect of an experiment which had simply not succeeded. The disgrace comes in in the repeated attempts of the professors of and apologists for the investigations to bolster up each new and contradictory series, as if all were brilliant triumphs. The facts are very simple. For many years experiments had been conducted on animals in the British licensed laboratories, and from these the deduction had been drawn that one of the principal dangers to guard against when chloroform was administered was its effect on the action of the heart. The same conclusion had been arrived at from clinical observation, but physiologists were bound to make the experiments, and they claimed that it was they who established the fact. In 1889 Surgeon-Major Lawrie at Hyderabad sacrificed a large number of pariah dogs, and believed he had discovered that none of them died by the action of chloroform on the heart. The Nizam of Hyderabad thereupon offered a thousand guineas if an English physiologist would go out there and make a new series of experiments. Dr. Lauder Brunton accepted the commission, and, after experimenting on 490 dogs, horses, monkeys, goats, cats, and rabbits, telegraphed home to say that there was no danger whatever from the heart direct: all came from asphyxia and overdose. This great discovery, it will be remembered, was hailed with rapturous enthusiasm. Those newspaper writers who knew least about the subject told their readers that, thanks to the Nizam of Hyderabad's public-spirited generosity, the danger from anæsthetics was as good as over, and it must have been a great puzzle to them to find that deaths from chloroform went on at least as frequently as ever. Eighteen months later we quoted

from a medical paper the comment that "ever since that ill-fated report of the Hyderabad Commission inspired us with the hope that these catastrophes might be avoided, deaths from this cause have been oppressively numerous." And now comes what ought to be the final condemnation of that monstrous game of science, falsely so-called, which the physiologists and the Nizam played out at Hyderabad in 1889. The *Lancet*, although "fully aware of the immense importance of these reports, and recognising the value of one of the most thorough and painstaking physiological investigations into the action of drugs of modern times, yet felt the justice of the criticism advanced by many, whose experience gave their opinion considerable weight, that no investigation into the behaviour of ether and chloroform would be complete without thorough and exhaustive clinical corroboration," appointed a Commission to ascertain from its own readers and others all over the world facts, figures, and observations gathered clinically from the sources indicated. This clinical Commission flatly contradicts Dr. Lander Brunton's discoveries by his experiments on animals. "In some instances," gently insinuates the editor of the *Lancet*, "deaths from direct cardiac failure, of which the pathology is again uncertain, are said to occur, and our Commissioner, whilst he maintains that very many of the cases assumed by the reporters to be purely syncopal are really respiratory, believes that a considerable number of them are to be found amongst those which we have collected and published." With such evidence before them one would have thought the conductors of the *Lancet* would have had the honesty to declare that the slaughter of the 490 dogs, cats, monkeys, horses, goats, and rabbits had been, from a pharmacological point of view, a mistake and a failure, to put it mildly. Nothing of the kind. "Surgeon-Lieutenant-Colonel Lawrie's work, taken together with the incisive criticism of Dr. Lander Brunton, who represented the *Lancet* on the occasion of the Second Hyderabad Chloroform Commission, must always remain monumental." It must, indeed; but not in the sense intended by the *Lancet*. A great many critical observers have lost their faith in modern methods of physiological research by such glaring failures as the one under review, and the sophisms of the *Lancet* will not tend to revive it.—*Chemist and Druggist*, July 15th.

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ALCOHOL IN MILK.—Very highly diluted alcohol was given at night by F. Kilngemann to some goats, and next morning the milk of the goat contained 0.15 to 0.3 per cent. of alcohol. No alcohol was found in human milk after the consumption of small quantities of spirit, but with increased consumption small amounts were found; so that a child suckled by a drunken mother may be said to be an alcoholic from infancy.—*Magazine of Pharmacy*.

## ANSWERS TO CORRESPONDENTS, NOTES AND QUERIES.

\* \* \* In this department we shall be happy to reply to any inquiries relating to homeopathy or to the matter of our magazine that our correspondents may like to address to us. We cannot, of course, undertake to give medical advice in particular cases, which is the business of a medical attendant; but if our medical readers like to put queries to each other regarding points of practice or puzzling cases, we shall be happy to insert queries and replies.

### MATERIA MEDICA AND REPERTORY.

SIGMA writes :—" I am a subscriber to your journal and a student of homeopathy as well, and I shall be very grateful to you if you can tell me in your next issue—

1. Which is the best Homeopathic Materia Medica ?
2. Which is the best Repertory ?

" I have Hering's *Condensed Materia Medica*, and Cowperthwaites' but they have 'condensed' a good many symptoms out altogether. Dr. Berridge recommended me Lee's *Repertory of Characteristics*, but I can only get two parts in England. Can you tell me if it can be obtained *complete* in America ?

" July 21, 1893."

### REPLY.

Unfortunately, owing to the ill-health of Dr. Lee, only the first two parts have as yet been issued. It is by no means easy to recommend either a *Materia Medica* or a *Repertory*. The best of each is the fullest. Allen's *Encyclopedia* (ten volumes), maintains its place as the best of all, and its *Index* is one of the best of our *Repertories*. Hering's *Guiding Symptoms* is an excellent clinical commentary on Allen's work, but it cannot take its place. Allen's *Handbook* (which is anything but a "handbook" in size) and his *Primer of Materia Medica* are excellent abridgments of the large work, but many useful symptoms are "abridged" out of these. Among the smaller *Materia Medicas*, Curie's *Jahr* is one of the best, and the *Repertory* volume companion to it is the best of its size. Both are out of print, but may be obtained secondhand. Among *Repertories*, Bönninghausen's *Pocket-Book* holds a unique place. Lippe's *Repertory of Characteristics* (on which Lee's is founded) has recently been reprinted (very indifferently, we are sorry to say, as to type, and with all the typographical errors of the first edition reproduced), and may be obtained of Mrs. G. A. Lippe, 301, D Street, N.W., Washington, D.C., U.S.A. The prices have been advertised in recent numbers of the HOMEOPATHIC WORLD. Gentry's *Concordance Repertory* (six large volumes) is exceedingly useful. The *Cypher Repertory* of the Hahnemann Publishing Society is ideal in conception, and if it were completed, brought up to date, and taken out of cypher, it would supersede all others. As far as it goes, it is very valuable even now.

## APPOINTMENTS, VACANCIES, REMOVALS, ETC.

\* \* \* We shall be happy to insert notices of appointments if gentlemen will be good enough to forward them to us, and also of posts vacant and likely to be vacant, on receiving information from secretaries or committees. Under this heading also, we shall mention good openings for homeopathic practitioners and chemists.

### PARTNERSHIP.

CLIFTON AND ROSS, Northampton. Dr. A. C. Clifton, of Northampton, writes that the partnership which has existed for many years between himself and Dr. A. G. Wilkinson terminated on June 30th, and that Dr. Wm. Ross has now become his partner. Dr. Clifton and Ross practice at the same address, 65, ABINGTON STREET, Northampton.

### REMOVALS, ETC.

MESSRS. LEATH AND ROSS. During rebuilding of their Vere Street premises, Messrs. Leath and Ross will carry on their business at 19, HOLLES STREET, OXFORD STREET.

MR. H. RICHARDSON, Harrogate. We are glad to note that Harrogate has now a homeopathic chemist. Mr. H. Richardson has opened a homeopathic pharmacy at 58, STATION PARADE.

## Obituary.

### MR. CHARLES WOOLCOTT.

WE regret to have to record the death of Mr. Charles Woolcott, of the firm of Leath & Woolcott, who was for thirty-five years the only homeopathic chemist in Royal Leamington Spa. He had been in failing health for some time, and will be much missed in the town, where, by his genial manners, he had won the esteem of a large number of friends. Mr. Woolcott was the author of some exceedingly interesting "Clinical Notes" contributed to the HOMEOPATHIC WORLD of March, 1891, under the signature "C. W."

## VARIETIES.

STRYCHNINE IN SNAKE-BITE.—Another instance of the value of strychnine in snake-bite is reported from Echuca, where a professional snake-charmer was recently bitten on the finger by one of his subjects, a five-foot tiger snake. In a few minutes the "professor" was seized with tremors, and "a stiff glass of brandy containing his antidote" was administered without effect. He became insensible to Drs. Ecken and Warren, who injected strychnine into his arm, and he shortly recovered.—*Chemist and Druggist.*

**THE TRANSMISSION OF TYPHOID FEVER BY THE AIR.**—Investigations on this subject have been made by Dr. Licard, of Beziers. His plan of experimenting was to have patients suffering from this disease breathe through tubes into water that had first been sterilised. Specimens of water thus treated were frequently found to yield the bacilli under cultivation. The bacilli were not always found, but this is not a matter of surprise when it is considered that the best bacteriologists frequently fail to find them under conditions strongly suggestive of their presence. Dr. Licard's results were, however, sufficiently uniform to warrant an inference that the expired breath of typhoid patients, like that from those having typhus, may serve as a channel for fever infection. The vast majority of typhoid infections have their origin in a contaminated water supply, but every observer has been puzzled more or less by cases of the disease which have arisen apart from any known inculcation of the drinking water. These cases of obscure origin may originate from two cases whose bacillar contact is atmospheric—not simply by means of the breath of the sick, but also by emanations from sewers, cesspools, and other receptacles of typhoid dejections.—*New York Medical Times.*

## LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

**HOURS OF ATTENDANCE:**—Medical, Daily, 2.30; Surgical, Mondays and Thursdays, 2.30; Diseases of Women, Tuesdays and Fridays, 2.30; Diseases of Skin, Thursdays, 2.30; Diseases of the Eye, Thursdays, 2.30; Diseases of the Ear, Saturdays, 2.30; Diseases of the Throat, Mondays, 2.30; Operations, Mondays, 2.

## MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Braithwaite (J.). Retrospect of Medicine. Vol. 107. 12mo, pp. 460. (Simpkin. 6s. 6d.)
- Clinical Society's Transactions. Supplement to Vol. 25. 8vo. (Longmans. Net 10s.)
- Cohen (S. Solis-) and Eahner (A. A.). Essentials of Diagnosis, Arranged in the Form of Questions and Answers. Prepared Especially for Students in Medicine. With 55 Illustrations, some of which are Coloured, and a Frontispiece. Cr. 8vo, pp. 372. (Kimpton. Net 6s.)
- Cragin (E. B.). Essentials of Gynecology. 3rd ed. (Kimpton's Students' Manuals.) Cr. 8vo. (Kimpton. Net 4s.)
- Deafness: Its Prevention and Cure. By "Lennox." Adapted for Self-Treatment. Cr. 8vo, pp. 110. (Simpkin. 1s. 6d.)
- Disease of Inebriety from Alcohol, Opium, and other Narcotic Drugs: Its Etiology, Pathology, Treatment, and Medico-Legal Relations. 8vo, pp. 404. (Bristol: Wright. Simpkin. 6s.)
- Hoopes (A. S.). Sciatica: A Record of Clinical Observations on the Causes, Nature, and Treatment of 68 Cases. 8vo, pp. 26. (Macmillan. 3s. 6d.)
- Edinburgh Hospital Reports. Ed. by G. A. Gibbon and C. W. Cathcart. Illus. Vol. 1. 8vo. (Pentland. 12s. 6d.)
- Eismarck (K.). First Aid to the Injured: Five Ambulance Lectures. Translated from the German by H.R.H. Princess Christian. 5th ed. 12mo, pp. 116. (Smith, Elder & Co. 2s.)
- Gorham (J.). Tooth Extraction: A Manual on the Proper Mode of Extracting Teeth. 4th ed. 12mo. (H. K. Lewis. 1s. 6d.)
- Gray (L. C.). A Treatise on Nervous and Mental Diseases: for Students and Practitioners of Medicine. Illustrated. 8vo. (H. K. Lewis. 21s.)

- Hill (Alex.). *The Physiologist's Note Book: A Summary of the Present State of Physiological Science, for the Use of Students. With 86 Plates, and Blank Pages for MS. Notes.* Royal 8vo, pp. 200. (C. Griffin. 12s. 6d.)
- Keen (W. W.) and White (J. W.). *Text-Book of Surgery for Practitioners. Profusely Illustrated.* Vol. 1. Two Parts. Royal 8vo, pp. 1,280. (Pentland. Net 30s.)
- Kelysack (T. N.). *Contribution to the Pathology of Vermiform Appendix.* Illustrated. 8vo. (H. K. Lewis. 10s. 6d.)
- Kneipp (S.). *My Water Cure as Tested for More than Thirty Years. With Illustrations.* Translated by A. de F. 2nd ed. With Appendix containing the latest Developments of Pfarrer Kneipp's System and a Preface by E. Gerard. Cr. 8vo, pp. 312. (Blackwood & Son. 3s. 6d.)
- Murrell (W.). *What to do in Cases of Poisoning.* 7th ed. 32mo, pp. 276. (H. K. Lewis. 3s. 6d.)
- Obstetrical Society of London, *Transactions of.* Vol. 84. 8vo. (Longmans. Net 20s.)
- Parke (T. H.). *Guide to Health in Africa. With Notes on the Country and its Inhabitants.* With Preface by H. M. Stanley. Cr. 8vo, pp. 180. (Low. 5s.)
- Powell (H. A.). *The Surgical Aspect of Thaumastic Insanity.* (Clarendon Press. Royal 8vo. (Clarendon Press. 2s. 6d.)
- Strumpell (A.). *A Text Book of Medicine for Students and Practitioners.* 2nd American Edition. Translated by H. F. Vickery and P. C. Knapp. Royal 8vo. (H. K. Lewis. 28s.)
- Thompson (G. J. S.). *The Best Thing to Do: First Aid in Simple Ailments and Accidents for Travellers and Tourists at Home and Abroad.* 2nd ed. 12mo, pp. 50. ("Record" Press. 1s.)

## TO CONTRIBUTORS AND CORRESPONDENTS.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 80, *Clarges Street, W.*

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

LITERARY matter and correspondences should be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct the same and return to the *Editor* as early as possible.

### CORRESPONDENTS.

Communications received from Mr. T. B. Browne, London; *Homeopathic Physician*, Philadelphia; Dr. Clifton, Northampton; Dr. Croucher, Eastbourne; Dr. Mahony, Liverpool; Dr. George Hering, London; Dr.

Hawkes, Liverpool; Signor Crispi, Grasmont; Manager of the Birkbeck Bank.

### BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Chemist and Druggist.—Homeopathic Review.—Monatsblätter f. Hom.—Allg. Hom. Zeit.—Homeop. Recorder.—Homeopathic Physician (May, marked copy).—Pacific Coast Journ. of Homeopathy.—Journal of the British Homeopathic Society.—Vaccination Inquirer.—Medical Century.—Childhood.—Southern Journ. of Homeopathy.—Revue Hom. Belge.—New York Medical Times.—Minneapolis Hom. Magazine.—Medical Visitor.—North American Journal of Homeopathy.—Homeopathic Envoy.—Clinique.—Homeopathic Journal of Obstetrics.—Hahnemannian Monthly.—Monthly Magazine of Pharmacy.—New Eng. Med. Gazette.—American Homeopathist.—Pain Economique, par le Dr. Gallavardin.

# THE HOMEOPATHIC WORLD.

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SEPTEMBER 1, 1893.

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## HOMEOPATHY AND SURGERY.

It has been very wisely remarked that it is essential for the making of a good surgeon that he should also be an accomplished physician. A noteworthy illustration of the truth of this saying occurred in the practice of the late Professor JAMES SPENCE, certainly one of the greatest operators of his generation. An old man in one of his wards was recovering from the effects of an accident, and was to all outward appearance convalescent and ready to be sent home, when the house-surgeon discovered a small fatty tumour on his back. The natural impulse of the modern house-surgeon is to cut off anything and everything that appears to be removable; and it seemed to this enthusiast an unworkmanlike proceeding to turn a patient out of the ward with any lumps (however harmless) about his person that might be smoothed off, not to mention the waste of good clinical material that this would involve. So the house-surgeon suggested to his chief the propriety of relieving the old man of his tumour. The Professor, who was not renowned for the cheerfulness of his expression, smiled a smile of more than ordinary grimness, and asked the young man what was the state of the patient's urine. The house-surgeon having admitted that it was in anything but a satisfactory condition, the proposal to operate was rejected in terms by no means complimentary to the proposer. In a few days the old man died very suddenly. He died a natural death, without the young surgeon's assistance; but if Mr. SPENCE had not been

an expert physician as well as a great surgeon he might have allowed his subordinate to inflict on the poor old patient a perfectly useless operation, which could only have had the effect of hastening his end.

If it is true of the old school that its surgeons should be physicians as well as surgeons, it is much more true of homeopaths. The homeopathic surgeon should be before all things a physician, and an expert in *Materia Medica*. Otherwise he has no *raison d'être* in homeopathy.

Year by year the technique of surgery is developed and improved. The facility for cutting and trimming has been brought to such a pitch, that the surgeon considers nothing as beyond his province. So skilled a handicraftsman has he become that he is apt to have little time left to look at the patient-world from any other point of view. "To cut off the removable" is, in many cases, the surgeon's motto, and the beginning and end of his aims.

Do not let it be supposed we are saying anything in disparagement of surgical skill. No praise can be too high for those proficient in the art who, with masterly dexterity and gentleness, do all that must be done and no more when operation is inevitable. Kept in its proper place the skill of the surgeon is entirely admirable. But it should never be forgotten that at its very best operative surgery is only second best. It can often mend very satisfactorily a limb that is broken, but it would have been better if the limb had never wanted mending; it can cut away morbid tissue, but it would have been better had there been no morbid development of tissue; and it cannot cut out of the organism the tendency to morbid action. Now this is just the very thing that medicine can do and does do every day. In our present issue we publish a case in point. Dr. BURNETT's book on tumours, reviewed in our last issue, is full of instances of the kind.

When our Indian colleague, Dr. MAJUMDAR, was here the other day he told us of an incident in his transatlantic experience which bears closely on this point. He had been



present at an operation by one of the leading surgeons in the United States, and after the operation was over, had congratulated the surgeon on the perfect manner in which it had been carried out. "But," he added, "in our country we should have been obliged to cure that organ with medicines; for our people will not consent to be operated upon as they do here." "Oh yes," replied the surgeon, "it can be done, I know; but it takes a much longer time."

In this reply lies all the fallacy of modern operative surgery. The surgeon is apt to think that cutting off a tumour or a diseased organ is comparable to a cure by medicines. In reality they are totally distinct things. The removal of a tumour is in no sense a cure, though it may be a present relief. The morbid process is not altered; on the contrary, nine chances to one it is rendered incurable by the operation. JOHN HUNTER (as quoted by BURNETT) has defined what a cure is, and HAHNEMANN has not only defined it, but has shown how it may be accomplished. "WHAT I CALL A CURE IS AN ALTERATION OF THE DISPOSITION AND THE EFFECT OF THAT DISPOSITION, AND NOT THE DESTRUCTION OF THE CANCEROUS PARTS." This is nothing more nor less than HAHNEMANN'S dynamic change, to be effected by following the Law of Similars.

Of late years surgery has step by step invaded the physician's province. This is all very natural in the allopathic school, in which physicians are always confessing their helplessness in the face of disease and the uselessness of drugs as understood by them. With Homeopaths it should be very different. The physician should resolutely set himself to narrow the limits of the operator's sphere. The homeopathic surgeon should be the most self-denying man in the world. Being a physician first and a surgeon second, he should make HUNTER'S cure his aim and HAHNEMANN'S art his method. In this way he will daily rob himself of his daily operations, and for brilliant feats of knife and saw will substitute the solid and en-

during (though less glittering and attractive) achievements of homeopathic medication.

### AN EXPERIMENT IN VACCINATION AND SMALL-POX.

DR. S. MANNINGTON CAFFYN, of New South Wales, communicates to *The Lancet* of July 29th an experience he had on a quarantine island many years ago. Small-pox had broken out, and about forty suspects (*i.e.*, people who had been received from infected houses but were not themselves suffering from the disease) were under his care, including a fine healthy child, with a clean skin and of healthy parentage, who had been vaccinated and whose arm was ready to have lymph removed. The whole contingent were vaccinated from this child. The following morning the child showed signs of small-pox, which developed rapidly, became confluent, and of which the child died in six days. After this the whole community expected to take small-pox as well as vaccinia. Of those vaccinated only one failed to "take." In this case (that of a boy aged ten) small-pox developed in eight or ten days.

The moral Dr. CAFFYN draws from this experience is that it is impossible to communicate any other disease than vaccinia by vaccination. But there is quite another reading of the affair possible.

The incubation period of small-pox is thirteen days or less. The child must have caught small-pox just about the same time it was vaccinated, or possibly a little before. The vaccination, at any rate, had no modifying effect on the attack of small-pox. All those vaccinated from the child, and in whom the vaccination "took," had terribly bad arms; which shows that the vaccinous poison was, if anything, intensified by the contamination with variolous poison. In the case of the lad who developed small-pox eight or ten days after being vaccinated, it is quite possible that the variolous infection was conveyed in the lymph, and only this took visible effect, just as the vaccinous

poison alone took visible effect on the others. The thing the experience does *not* show is that it is impossible to "transmit disease tendencies and hereditary taint through the medium of lymph," though Dr. CAFFYN seems to think it does. This has been settled in the affirmative long ago by Mr. HUTCHINSON, Dr. GAIRDNER, and many others.

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## NEWS AND NOTES.

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### THE BRITISH HOMEOPATHIC SOCIETY DIRECTORY.

THE futility of this would-be substitute for the directory hitherto in use is receiving daily illustration. Here is an instance. A homeopathic practitioner wishing to direct a patient to a doctor at a certain sea-side resort, and only having the Society's directory at hand, could not find out where, and on what days and hours, the homeopathist who visits that resort was to be found. This necessitated the expenditure of time, trouble, and postage stamps—the very thing an efficient directory is designed to save. What advantage have our colleagues who plume themselves on being "ethicians" to offer in compensation for this loss?

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### VESPA.

THE late hot weather has been very favourable, it seems, to the production of wasps, and the result has been that a number of involuntary provings have been recorded. One unfortunate woman died ten minutes after being stung on the thumb. She fell dead as she was in the act of applying something to the part stung. Here is a case from the *British Medical Journal* of July 29:—

#### "A CASE OF WASP STING WITH RAPID CONSTITUTIONAL SYMPTOMS.

"Dr. G. Balfour Marshall, M.B., C.M. (Kirkcudbright, N.B.), writes: On July 18th, at 5.30 p.m., I was called to see Mr. A., who, less than an hour previously, had been stung on the nape of the neck by a wasp. To soothe the pain, which was somewhat severe, he applied bicarbonate of soda. Some fifteen minutes later he felt his eyes watering but not painful. Getting worse, he looked at himself in the glass, and found his face somewhat swollen and his eyes bloodshot. He felt his body getting itchy, and taking off his clothes found his chest and

abdomen covered with a red rash. Half an hour after being stung his condition became aggravated, his eyes watered much, his face was so swollen that he could scarcely see, and he noticed cyanosis of the lips and round the eyes. His wife also remarked how swollen and blue his face was, and this caused them to send for medical assistance. When I arrived the following was his condition: On the nape of the neck and to the right side was a white well-elevated wheal, ovoid in shape and about almond size, where the wasp had stung him. The face was flushed and showed slight cyanosis, but almost all traces of the previous swelling had disappeared. The conjunctivæ were markedly congested, and the flow of tears increased, but the pupils were of moderate size and otherwise normal. The neck and whole trunk, back and front, were covered with a deep scarlatinal-like rash, showing a slight mottling, disappearing on pressure but at once returning. The left palm was likewise reddened, but the limbs were otherwise quite free from any rash. All the parts, affected with this rash—trunk and palm of left hand—had been very itchy, but this was now passing off. The left axilla was swollen, but not tender to pressure, and the patient himself remarked that it was curious the left armpit should be swollen and the left palm red when he had been stung on the right side of the neck. The left hand had not been stung and showed no wound. The temperature was 98°F., pulse 60, regular, and of medium tension. The patient, beyond feeling alarmed at his condition, was conscious of no other symptoms. Four hours later the rash began to fade, and next morning he was quite well."

#### HONOURS FOR AN INDIAN HOMEOPATHIC DOCTOR.

THE following from the *Daily News* of August 1st will interest our readers:—

"The French Government has conferred on Dr. D. N. Banerjee, a well-known homeopathic physician, founder and physician of the Calcutta, Arrah, Dinepur, and Nalikul Homeopathic Charitable Dispensaries, and founder of the Cremation Society of Calcutta, the dignity of Commander of the Legion of Honour."

#### "SCIENCE" VERSUS CURE.

UNDER the title of "A Thirty Years' War Against Disease," Professor McKendrick delivered an address to the medical and surgical graduates of Glasgow University on July 27th last (*Lancet*, Aug. 19), and we trust that one part of his address may open the eyes of his hearers to the necessity of something better than "science" (by which term Dr. McKendrick was referring more especially to vivisection) can give them. Said the professor:

"It is true there is ample recognition of the large philanthropy of

the medical profession and of the self-denying, and sometimes heroic, labours of medical men, but occasionally there is a want of appreciation of our efforts as regards the scientific aspect of medicine, whilst *even educated men show a hankering after what they call curing disease*. There is still in the public mind a belief that disease is an entity, something that must be driven out of the body" [what do the modern microbial theories amount to, if they do not teach this?] "or conquered by a specific remedy. The layman has a difficulty in grasping the scientific conception that disease is not a thing but a perverted process" [again, what about the microbes?] "that must be guided back to normal lines by judicious methods founded on a sound knowledge of natural tendencies."

This is all very fine, but the "judicious methods" are so conspicuously unsuccessful as a general rule, and the "sound knowledge" so universally wanting, that the layman, educated or otherwise, is not to be blamed for neglecting "science" and taking to methods making less pretence and having some practical results in the way of genuine cure to offer. The intelligent layman knows pretty well when he is cured, though he may not care much for Dr. McKendrick's explanations. If the allopathic doctors would only bring themselves to look at things from the lay point of view, and set themselves to find specific cures in place of "science," it would be very much the better for their practice. They need not give themselves much trouble either: it is all ready to their hand in homeopathic works.

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#### MORE "MATERIAL" FOR VIVISECTION.

HERE are two dog stories which have recently appeared in the press. Those who could vivisect creatures capable of deeds like these would not be likely to draw the line at dogs:—

##### "A DOG STORY FROM ROME.

"The other day a little girl fell into the Tiber from the Margarita Bridge, and was carried away by the stream, the spectators looking on helplessly from the banks. All at once, a dog leaped into the river, reached the child, dragged her to the shore, and then gave vent to its joy in jumps and loud barking. The child had been accustomed sometimes to caress and give pieces of bread to the dog, which belonged to a neighbour. They had met by accident, for the first time after two months, a few moments before the girl fell into the river while carelessly leaning over the parapet."—*Daily News*, Aug. 1st.

##### "A LONELY VOYAGER'S COMPANION GONE.

"The man who is voyaging here from Nova Scotia in his little boat

the *Flying Dutchman*, only 15 ft. long by 5 ft. broad, has been met again in mid ocean. 'He told us he was starving,' says one of the crew of the steamer *Verajean*, who saw him. 'He had experienced two severe storms, and in the last he had been washed overboard by a heavy sea which broke over his little craft. His sole companion had been a collie dog, which, when it saw its master washed over, jumped into the sea to his rescue, and was drowned. When the captain got aboard his boat again he found his rudder was carried away, and he had lost his compass, his fresh water, and his oil. Our captain gave him a new rudder, a boat-oar, a compass, and some chalk for ballast, as well as a keg of water, some oil, biscuits, soap, matches, and tobacco, and a shift of clothes. He got an old suit of oilskins from the mate, and lots of the men gave him tobacco and clothes. He had been two days in distress, and said he missed his dog awfully, as he had no one to talk to now.'—*Westminster Gazette*.

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#### MEASLES IN NEW ZEALAND—A GOOD ADVERTISEMENT FOR HOMEOPATHY.

It has often been said that there is nothing equal to a severe epidemic for bringing out the value of homeopathy. Dr. Lamb's experience in an epidemic of measles in Dunedin is another illustration of the truth of the saying. He writes:—

"We have been having the most extensive epidemic of measles I have ever witnessed. There has been hardly a house, where there are children, in Dunedin and the suburbs where it has not entered. The public schools have all been closed for the last month or six weeks. Again homeopathy is to the front. Although there have been a number of deaths from it, I have not lost a single case, and I have been called in to my share of broncho-pneumonias. It must be an eye-opener for the people to see no deaths under homeopathic treatment, and not a few under the regulars. In fact, nothing gives homeopathy such a lift as a good epidemic, and the worse it is the better for homeopathy. It has come as a veritable windfall to me, illustrating the old Scotch saying, 'that it is an ill wind that blows naebody ony guid.' My prescribing has been as free, I suppose, as any of the men here, having had patients from a lady of fifty-one to a babe of a fortnight, and all have recovered. A full account of his experience in the epidemic by Dr. Lamb will appear in our next.

## ORIGINAL COMMUNICATIONS.

TUMOUR OF BREAST IN A MAN CURED WITH  
*THUJA*.MEDICINE *versus* KNIFE.—No. II.\*

By JOHN H. CLARKE, M.D.

IN July, 1889, Mr. A., age 38, consulted me about a lump in his right breast. He was a managing clerk in a business, of somewhat delicate appearance, and pale. He had had the swelling for eighteen months. It came at a time of much worry arising from the death of his wife from consumption. His paternal grandmother and one of his aunts had died of cancer, and he had quite made up his mind that he was suffering from the same thing; and when I saw his breast I was not so very sure that he was wrong. But whatever the nature of the lump might be, I told him I thought he could be cured, and strongly dissuaded him from submitting to any operation. He approved of my advice and consented to follow it.

On examining the two breasts, the left was seen to be quite flat, and in all respects a normal male breast; the right, on the contrary, was like that of a girl approaching puberty. On palpation, a hard, not sharply defined tumour was felt to the right of the nipple; and there was also a small lump on the left side of the nipple. This was less well defined than the larger lump. Both were freely movable. The larger one was somewhat tender, and was irritated by the pressure of his brace. The smaller lump was not tender.

Some time ago he had pains in the centre of the sternum; latterly a little fluttering in the epigastrium. Always perspires freely; throws off bed-clothes when asleep. General health good otherwise. Spirits, never very bright, are now low; inclined to be irritable.

The points in his previous history were the following:—He had been twice vaccinated, but on the second occasion the arm did not “rise.” As a small boy his hands were covered with warts. At 8 he had shingles. At 9 had typhus badly. Three years before the present tumour

\* See HOMEOPATHIC WORLD, December, 1892, p. 554.

came there was some kind of a swelling round the right nipple, which went away with the use of a "salve"; but the same salve applied to the present tumour had had no effect whatever.

The first medicine I gave him was *Carbo. anim* 1 m. F.C; two powders, to be dissolved in succession in half a tumbler of water; a dessertspoonful three times a day. I chose *Carbo. anim* out of a group of tumour-causing medicines because of its more especial affinity for the right breast. That was on July 22nd.

On July 29 there was no change, and I gave him four more powders of the same medicine.

*Aug. 15th.*—About the same. Patient thinks the tumour is firmer (an opinion I could not endorse). Once he had had slight pricking in it. General health good.

Taking into account his previous history of warts and his double vaccination, I now decided to put him on *Thuja*.

℞ *Thuja* 10 m. F.C., three powders. A powder to be dissolved in half a tumbler of water; a dessertspoonful night and morning.

*Oct. 21st.*—Tumour certainly no larger: if anything, a little less.

He received four more of the powders to be taken in the same way, only now to leave four days' interval between finishing one and beginning the next.

*Feb. 4th, 1890.*—Very much better. Tumour can only be felt with difficulty. No pain at all.

*Repeat medicine:* four powders as before. This was the last I saw of him as a patient. I afterwards attended one of his children, and then I found him perfectly well.

Here was a case of genuine Hunterian cure, as Dr. Burnett would call it. The patient was cured and the tumour vanished. Supposing he had gone to an allopath, ninety-nine chances to one he would have been advised to submit to removal of the breast. One "brilliant operation" more would have added to the renown of some clever surgeon. The patient would have lost his tumour and his breast, and would have kept his disease in his blood and tissues, ready to break out again later on in some fashion, and in all likelihood much more seriously than before.



CASES OF ECZEMA AND LUPUS.

BY R. S. STEPHENSON, M.B. AND C.M. EDIN.

CASE I.—*Acute Vesicular Eczema*.—June, 1893. Girl, *æt.* 16 years, robust; sanguine temperament. Covering both cheeks is a red, confluent eruption, exuding watery serum.

At its circumference are little vesicles in different stages of development.

There is intense redness and much swelling of face and lips.

*Rhus Tox.* 6x was prescribed, a dose every three hours. When seen a week later the swelling and inflammation had quite subsided, and the only remains of the eczema were dry scales and scurf, which were rapidly peeling off.

CASE II.—*Pustular Eczema of Face*.—May, 1893. Child about five years old, of fair complexion. Has thick brown moist scales covering the chin, the upper lip, and the corners of the mouth. In several places the scabs are rubbed off, leaving a raw, red surface.

Several hard enlarged cervical glands. Frequently subject to sore throats and colds. Catches a croupy cough every time she goes out in the evening. Also has one or two pustules on the leg; raw surface behind one ear; unhealthy looking excoriations on two or three fingers.

The least scratch goes on to suppuration.

*R Hepar Sulphuris* 12x three times a day.

Prompt amelioration of the child's condition ensued. The eczema healed in about two weeks' time.

I learnt afterwards that the child had been given *Hepar Sulph.* 6x for some time before coming to me without effect. Hence this case tends to show the superior value of higher potencies in some cases.

CASE III.—*Lupus Exedens*.—April, 1893. Mr. A., *æt.* 40, spare, dark complexion. He states that about a year ago a pimple appeared on the left side of the nose. After some time this became a small ulcer covered by a scab, and slowly extended over the cheek—healing in one direction and spreading in others.

There is now a white excavated scar about half the size of the palm of the hand, extending over the left side of the face and nose; on the outer side this merges into unhealthy looking yellowish-brown scab with red and indurated edges.

He received *Dulcamara* 6x, a dose three times a day for a week.

There was then marked improvement, and patient received a placebo.

In two weeks' time the scabs had fallen off, leaving a white healthy looking scar; but he complained of severe shooting pains in the left side of the head, a return of an old symptom.

The placebo was continued, and at the end of a month he reported himself as cured.

St. Kilda, Melbourne.

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### SOME REMARKS CONCERNING THE HOMEOPATHIC TREATMENT OF SKIN AND SEXUAL DISEASES, WITH CASES FROM MY PRACTICE.

By OSCAR HANSEN, M.D., Copenhagen.

(Concluded from page 349.)

#### VIII.

A. J., gardener, 28 years old, Copenhagen.

Five weeks after exposure in the beginning of November, 1890, he discovered a small ulcer on the inner side of preputium. Was then treated by an allopathic doctor with cauterisations with *Lunar Caustic*, and later on with *Iodoform*. On the 6th of February, 1891, when he came under my treatment, the ulcer was round, clean at the base, but plainly indurated. Brown-red eruptions, partly as small spots, partly as papulæ, spread on the chest and on the back, as well as on femora, the eruptions having appeared during the last fortnight. The ulcer would not heal under the former treatment. While everything in fauces appeared normal, the patient complained of a pain in the back of the head and from hence to the middle of the forehead, although only during night. Otherwise his condition was good. This case of lues, which, however, from the beginning showed itself as being but a slight one—the maculous as well as the papulous syphilides must generally be considered as slight cases—did only get cured in the course of 1 year. The treatment commenced with *Mercur. bijodat.* 1 cent. trit. the size of a large pea, 3 times daily, mixed up in 1 tablespoonful of water. Whilst taking this the ulcer healed, the eruption and the pains in the head diminishing; but on the 7th of March a brown-red

papulous eruption appeared on the right dorsum manus, and the induration had not changed. *Kali hydrojodic.* Kafka  $\theta$ , 3 drops 3 times daily, increasing 1 drop every 3rd day, was then prescribed. This remedy took good effect on the induration, which had perfectly disappeared by the 12th of May; the eruption had ceased and the pains in the head were over, but the affection of the throat, which first showed itself on the 1st of April, and which consisted of the tonsils becoming enlarged, dark-red, and swollen, while a large white-yellowish infiltration appeared on the right tonsil, was not acted on by the remedy, although the patient took as much as 10 drops at a time. On the 19th of June there was a grey covering on the arches of the palate and on the tonsils, mostly on the right side, but with the exception of the throat-affection and a small mucous papula in rima natium he felt perfectly well. No dysphagy. He now commenced taking E. M. Hales' combination of *Kali hydrojodic.* and *Mercur. bijodat.* (*Kali hydrojodic.*, grammes 5; *Mercur. bijodat.*, centigrammes 5; *aqua destillata*, grammes 125), 1 teaspoonful 3 times daily. After using this for some days a grey covering appeared on uvula, but had again perfectly disappeared on the 16th of July, when all the other coverings had also decreased considerably. Having used Hales' combination for 3 months, until the 15th of September, fauces were quite normal in appearance, and the affection of the throat was but very small towards the end of July. I then paused for 2 weeks with the medicine, after that ordering it again for 2 weeks, and so on, alternating until the end of November, when the patient got an attack of influenza. In the beginning of January, 1892, when he had perfectly recovered from the debility after the influenza, a white covering appeared on uvula, but was quickly removed by the use of Hales' combination. On the 5th of February he was dismissed as cured. (Journal vi. 5,468.)

## IX.

R. C., baker, 55 years old, Soroe (Sealand).

Has had diabetes, and has been treated by a specialist in this disease. There is no longer any sugar in the urine. Large varices on both legs (crura). Has during 4 or 5 years had a skin disease, for which he has been consulting several allopathic doctors. The efflorescence appears on

both legs (crura), consisting of spots, some very small, others the size of half a palm. The efflorescence is papulous, desquamating, in some places ulcerating, and itches, specially in the evening and during night. The itch is followed by a burning sensation, the itch increasing when he scratches the efflorescence. The ulcerating parts secreting a sero-purulent secretion. The skin surrounding the efflorescence somewhat rough and thickening. Treatment by me began on the 25th of May, 1891. *Arsen. alb.* 3 dec. dil., 3 drops 3 times daily.

June 18th.—A little improvement; the itching and secreting still bad. The burning sensation has ceased. Continue with the same prescription.

August 31st.—No change. *Arsen. alb.* 2 dec. dil., 3 drops 3 times daily. Prescribed an ointment of *Merc. precip. ruber*, 1 part to 30 parts *Axungia porci lota*, to be applied every evening, especially on the secreting parts and wherever the skin is thickening, the old ointment to be washed off with warm water every third day before fresh ointment applied.

October 6th.—Secreting stopped. Ulcerating parts healed. The efflorescence very much decreased. The itch nearly over. Desquamation but small. Same prescription.

December 5th.—Cured. (Journal vi. 5,537.)

## X.

F. A., restaurant-keeper, 43 years old, Lyngby (Sealand).

At the beginning of the treatment, the 26th of May, 1891, he had an induration on the surface of glans penis. The induration was round, one-third of an inch long, of the same width, and before the induration appeared a dark pigmental spot had shown itself. Nothing abnormal in fauces, and no efflorescence. The glands in inguina large, hard and sore when pressed. Otherwise the patient feels well. Considers himself infected 4 weeks ago. Prescription: *Mercur. solub. Hahn.* 1c trit. 3 times daily, of the size of a pea.

On the 3rd of June he called again, a round ulcer of the same size as above having then appeared on the indurated spot, with a yellow-greyish thick covering, and hard in the bottom. The edges were whole. Same prescription.

June 10th.—Ulcer granulates well along the edges, the bottom being a little softer. The covering diminishing. On the outer skin of penis a scurfy, brownish, not-itching efflorescence. Same prescription.

Ulcer was healed on the 28th of July, and the efflorescence had disappeared, but the induration in the bottom increasing. I then discontinued with *Merc. solub.*, and ordered Kafka's *Kali. hydrojodicum*, 3 drops 3 times daily, increasing every 3rd day with 1 drop until 10 drops each time. After this a considerable diminishing of the induration had set in by the 5th of September. The improvement stopped then for some time, necessitating an increase to 15 drops each time, after which a considerable improvement had occurred by the 19th of November. By the 17th of February, 1892, the hardness was but very small, and on the 2nd of July he was discharged as cured. (Journal vi. 5,539.)

## XI.

P. H., man-servant, 26 years old, Copenhagen.

At the commencement of the treatment, the 31st of October, 1891, he has had skin disease for a couple of months. The eruption appears on the inner side of both thighs right down to the knee-joints. It is maculous, forming large oval-shaped rings of a red colour, desquamating. The centre of these rings is pale, about the same colour as the non-affected skin. The eruption itches but very little, and the patient denies ever having had syphilis. General condition good. Against this disease, *tinea circinata*, which is contagious and due to a fungus, I prescribed *Mercur. precip. ruber* 1 cent., the size of a pea, 3 times daily, in 1 teaspoonful of water, and for external use every morning and evening an ointment consisting of *Mercur. precip. ruber* 1 part to 20 parts *Axungia porci lota* (refined lard). After using this for 10 days the eruption had paled considerably, the desquamation being but small, and by continuing with the above ordination he had perfectly recovered by the 30th of November.

Kippax, Piffard, and other authors are all pointing out the necessity of "killing the parasite," and the best means to this effect are the preparations of *Mercury*, tincture *Iodine*, and the like; but I consider it of the utmost importance at the same time to use the same remedies internally. The remedies which Kippax enumerates in his

*Handbook of Diseases of the Skin, with their Homeopathic Treatment*, are but few, and he attaches most importance to *Mercur. precip. ruber*. It will hardly do to speak about simile in this case, as the disease is without any symptoms. The insignificant itching does not prevail at any certain time, and if the patients are asked about an improvement or an increase of the disease no satisfactory answer is given.

## XII.

S., wife of a barber, 48 years old, Copenhagen.

The patient had, in November, 1890, a strongly itching secreting eruption on both hands, which I treated with *Rhus tox.* and *Arsen. album.* until it was perfectly cured after a couple of months. She has since then been perfectly well until the beginning of October, 1891, when an eruption, desquamating and itching, appeared all over the body. She was for this treated at the Municipal Hospital with *Arsenic* injections (25), and an ointment consisting of vaseline and lard. These injections not agreeing with her, but producing pains in the stomach and loosening the bowels, she was given *Arsenic* pills, the eruption, however, decreasing so little, that she left the hospital after 4 weeks' treatment.

I commenced to treat her on the 24th of December, 1891, her condition being then as follows: The skin of the face, the ears, the neck, the arms, and the legs is very red, peeling largely off in good-sized scales. It itches but very little, but a certain tightening of the skin appears. Menses stopped altogether 6 months ago. General condition good. For this skin disease, pityriasis rubra, I prescribed *Arsen. alb.* 3 dec. dil., 5 drops 3 times daily, and an ordinary ointment of lanoline, vaseline, and water (lanoline, 50 grammes; American vaseline, 20 grammes; and distilled water, 25 grammes).

When she called again on the 19th of January, 1892, only a slight decrease on the legs was visible, and I then prescribed *Graphites* 3 cent. m. ix. and an ointment of *Graphit.*, 1 gramme to 25 grammes of lard; and although the eruption had almost disappeared towards the end of February, it broke forth again in such a degree that she, on the 14th of March, was just as bad as at the commencement of the treatment. I again prescribed *Arsen.*

*alb.* 2 dec. dil., 5 drops 3 times daily, and for external use an ointment of 1 gramme *Mercur. precip. ruber* and 30 grammes of refined lard, to be applied every evening. Already by the 4th of April the redness and desquamation had decreased considerably, especially on the face and on the neck. I let her go on with the prescription, reducing, however, the *Arsenicum* to twice daily, morning and evening, and on the 5th of May the eruption had disappeared altogether.

I have since then seen her several times—the last time in November—and she has had no relapse.

That she frequently during the treatment took warm baths need hardly be mentioned. (Journal vi. 5,728.)

### XIII.

M. P., workman, 55 years old, Copenhagen.

He has, at the commencement of the treatment, the 3rd of May, 1892, been sick for 4 days. Became infected 8 days ago. In sulcus coronarius, between glans and preputium an oblong ulcer appears, half an inch long, quarter of an inch broad, with a soft bottom, but hard and somewhat steep edges, and with a heavy gangrenous covering. General condition good. Fauces normal. *Arsen. alb.* 2 dec. 5 drops 3 times daily.

May 10th.—Ulcer unchanged, covering increased. The hardness of the edges having increased, I ordered *Kali hydrojodic.* Kafka  $\theta$ , 3 drops 3 times daily, increasing with 1 drop every 3rd day. For external use: *Iodoformium* 1 part to 2 parts *Sacchari lactis*, to be applied every evening.

May 19th.—The covering has disappeared, and the edges of ulcer are not so hard. *Kali hydrojodic.* Kafka. Ointment of *Calceandula cerat*, morning and evening.

After using this the granulation and improvement went steadily on, and he was perfectly cured in the beginning of July. (Journal vi. 5,803.)

### XIV.

P., merchant, 45 years old, Copenhagen, came under my treatment the 19th of May, 1892. He has never had lues, but has been suffering from the present skin disease for some months. On the scalp are small discoloured spots, partly single, partly together, up to the

size of an open hand. The hair normal, and not easy to pull out. No desquamation or itch. The efflorescence is maculous. Otherwise his condition is good. Recipe: *Mercur. sublimat. corros.* 2 cent. dil., 5 drops 3 times daily; externally a dilution of *Sublimate* (1 part to 5,000 parts *aqua destillata*). Nearly all the spots had disappeared in the course of a fortnight. I then ordered *Sulphur* 2 cent. dil., 5 drops morning and evening; and for external use, every evening, an ointment of 1 part *Sulphur precipit.* to 10 parts *Axungia porci lota*. Towards the end of June the scalp was again normal.

It is difficult to give this disease a proper name; I am, however, inclined to believe that it may be classified as a parasitic skin disease (a trichophytosis). The pigmental syphilides cannot be taken into account, the patient denying ever having had lues. *Nevi pigmentosi* are always innate, while *tinea tonsurans* is only to be found with children, the latter, moreover, being not so dark in colour. As far as the treatment is concerned, I consider a preparation of *Mercury*, followed by *Sulphur*, as the most effectual, so much the more as the present case is a parasitic affection.

## XV.

S., dyer, 30 years old, Copenhagen, came under my treatment the 25th of June, 1892. Had then had a gonorrhœa for 13 weeks, and had been treated by a specialist, however without any improvement. Six years ago he had lues, with spots on the body and affection of the throat. A sparing, thick and yellow secretion from urethra, frequent urinations, with a strong, scorching pain at the end of and after each urination. The urinations are especially frequent during the night. No stricture observed, although the stream of urine is often very small. General condition good. Suspensory. *Cantharis* 2 cent. dil., 3 drops every 3rd hour.

June 30th.—The pains somewhat diminished. Continue with the same prescription.

July 2nd.—The pains greatly abated. The secretion being still thick, changing from yellow to green, and *vice versa*. Perspires much during night, but this is not followed by any improvement. On the lower side of penis in corpus cavernosum urethræ, 2 somewhat hard abscesses, not sore, can be felt. *Mercur. sol.* Hahn. 1 cent. trit., the



size of a pea, 3 times daily. Injection of *Mercur. subl. corros. θ* (*Solut. aquosa* 1.50), centigrammes 50; *Aqua destillata*, grammes 250; morning and evening.

July 19th.—One of the hard abscesses has disappeared, the pains when urinating are gone, and the secretion is thinner and of a light-yellow colour. Continue with the prescription.

July 28th.—The secretion has ceased, and the other hard abscess has disappeared. The stream of urine normal. But although we kept on with *Merc. sol.* morning and evening, and with the injections, there appeared on—

August 20th.—A milk-white and thick secretion from urethra, while a burning and stinging pain was felt in fossa navicularis when urinating. Orificæ urethræ sticking together in the morning.

I now prescribed *Petroselinum θ*, 3 drops 3 times daily, with the result that he was perfectly cured in the middle of September. (Journal vi. 5,886.)

## XVI.

Mrs. W., 42 years old, Copenhagen, has at the commencement of the treatment, the 13th of December, 1892, for 18 years—almost during 9 months in every year—suffered from the present skin disease. It is only during summer that she does not suffer. Erythema nodosum, the nodules being of the size of hazel-nuts, dark blue, with acute stinging pain in the limbs. The nodules appear on the arms as well as on the legs, and are solid, hard, and a little sore when pressed. General condition good. When the patient lies down, she is obliged to shift the rest for her arms and legs very often on account of the stinging pain, but she feels relief by continued motion, while the pain increases if she gets up and walks about. Menses normal.

*Rec. Rhus venenata* 3 dec. dil., 5 drops 3 times daily. Already in the course of 8 days the pain had ceased, she having no more occasion for continually shifting the rest for the limbs when lying down. After a fortnight the nodules had partly diminished, partly changed their colour into yellow, while the smallest one had at the same time disappeared altogether. She kept on with the same prescription for a fortnight, then paused for 7 days, and was perfectly cured on the 17th of January, 1893.

My using *Rhus venenata* was due to Kippax's *Hand-book of Diseases of the Skin and their Homeopathic Treatment*, and to the proving of the above-named medicine. (Journal vi. 5,998.)

## XVII

L. H., stone-cutter, 37 years old, Copenhagen.

The treatment commenced on the 31st of December, 1892. The patient has always been of good health until 1 year ago, when he got the present skin disease, which slowly improved, however, without being completely cured. During the last two months there has been a decided change to the worse. On the hind part of both legs, right above tendo achillis, an ulceration of the size of an over-cut small egg is to be found. These ulcers are caused by the bursting of a large blister filled with a milky secretion. Some pain of a burning nature is felt in the ulcers, specially during night. The patient feels a little languid, but the appetite is good and the functions in good order. He is well-proportioned, of a good physique, and denies ever having had lues.

*Rec. Arsenicum album.* 2c dil., 3 drops 3 times daily. The ulcers to be powdered with rice-flour every evening and morning, and to be washed with tepid water every 3rd day.

Having used this for 3 weeks, the pain disappeared, but the ulcers were unchanged. It was evident that the disease was Pemphigus, but as the *Arsenicum* did not produce any effect except alleviating the pain, and as he complained of strong perspiration during night, and salivation, I prescribed *Merc. solub. Hahn. trit.* 1c, as much as could lie on the point of a knife, every morning and evening, and an ointment of *Merc. precip. ruber*, 1 part to 50 parts *Axungia porci lota*. By the 21st of February last he was perfectly cured. (Journal vi. 6,007.)

## REMARKS ON THE "CHRONIC DISEASES."

(Concluded).

By EDWARD MAHONY, M.R.C.S., L.S.A.

NEXT the differences of drugs in their "unprepared form" is noticed, some as having few medicinal properties apparently, while others again as *Arsenic* and *Corrosive*.

*sublimate* have even a destructive action in this state. He again emphasises that the effects produced by triturating or succussing are "*a discovery due to homeopathy*" [italics mine]. Again, chemical properties are removed or altered, of which he instances several cases. Now as to the process itself.

1. For solids. The substance being pulverised, 1 grain is poured into a porcelain mortar and triturated with 33 grains of sugar of milk for about 6 minutes, repeating the process some 3 times, with various stirrings up and scrapings; then another 33 grains of sugar of milk with corresponding triturations, and finally a third same amount of sugar of milk similarly treated; the mass finally is marked 100, indicating the 100th potency. From this further potencies are prepared in the same way. Some cautions are given with regard to particular substances, and one important note on the cleaning of the apparatus before again using it. He says, "Mortar, pestle, and spatula are to be repeatedly immersed in boiling water, being carefully wiped and dried after each immersion. The mortar, pestle, and spatula, may then be exposed to a heat which would make them red-hot." I refer to this as nothing is more common than for patients to suppose that to empty a glass containing a medicine and then rinse it out with *cold* water will be enough preparation for putting into it a fresh medicine. Experience from the best experts in this line of scientific investigation teaches that great heat is the only *known* agent for freeing the vessel which has contained a potentised medicine from its medicinal power, and, in passing, one may remark that it is no uncommon sight to see homeopathic medicines exposed for sale in allopathic chemists' shop windows, exposed to the full blaze of a summer's sun, their owners thereby exposing their ignorance of this vital law. Our author here remarks, "For the sake of establishing a sort of uniformity in preparing homeopathic remedies, and especially the antipsorics, I never carry the process of trituration above the million degree." Apparently this is one of the expressions which has been laid hold of by those who don't (or is it won't?) see with Hahnemann in this direction, for asserting that he objected to others going beyond his own personal practice in this matter, but his reason is sufficiently plain, and no doubt could we have millions of observations of cases and all treated uniformly

with the same potencies there would be a certain advantage in it, but then if potencies have been proved on the healthy, higher than these, and have caused symptoms not yet known to have been produced by lower, and sick persons have had corresponding symptoms, would it be either science or sense or humanity to deprive them of the benefit of these further provings? "Chemistry," he tells us, "is not acquainted with the fact that all substances after having been triturated up to the million degree can be dissolved either in alcohol or water," then in a note—"Homeopathy being based upon a law of nature, it should avoid and exclude all uncertainties." We see again how thoroughly all this part of his subject is regarded by Hahnemann as both a discovery and a science worthy to be put in the same rank as any other science. 2. The solutions are prepared in a similar way by succussion with alcohol instead of trituration with sugar of milk. The first solution is to be composed of one-half water and one-half alcohol, because sugar of milk cannot be dissolved in pure alcohol. These are the main points mentioned with regard to the preparation of the medicines, and form a safe guide in testing whatever may have been presented since as homeopathically prepared medicines. Machinery has been much used since Hahnemann's day, in this as in most departments of science and art, and if the main points inculcated by him are adhered to, namely, due admixture and potency raised in definite proportions—"series" as he terms them—why should such be considered inconsistent with the principles taught by him, and if in practice such answer, why should their use not be accepted and they valued? there is one short remaining paragraph, or rather two, which I shall copy verbatim, as two important points are contained in them.

Referring to the four remaining volumes of the work which contain the provings of the remedies, he says, "In the subsequent list of antipsoric remedies no *isopathic* remedies are mentioned, for the reason that their effects upon the healthy organism have not been sufficiently ascertained. Even the itch miasm (psorin) in its various degrees of potency, comes under this objection. I call psorin a *homeopathic* antipsoric, because if the preparations of psorin did not alter its nature to that of a homeopathic remedy it never could have any effect upon an organism tainted with that same identical virus. The psoric virus,

by undergoing the processes of trituration and shaking, becomes just as much altered in its nature as gold does, the homeopathic preparations of which are not inert substances in the animal economy, but powerfully acting agents." The first thing we may notice here is the insistence of proving of whatever substance is used medicinally, in order that we may on the one hand be preserved from mere conjecture, and on the other may find ourselves on the sure ground of ascertained phenomena. Next comes the question, What are meant by "*isopathic*" remedies? In these days we have had such a drilling in the experimentation of tuberculinum, hydrophobinum, cholera, anthrax, &c., &c., that most persons have a more or less clear idea that the prepared products of disease are and can be used for the cure of those very diseases; but then comes the vitally important remark that the "preparations" of such products are needed in order to alter their use from that of injury to cure. Who, for example, would, in order to obtain relief from the bite of a viper, receive a second bite, *i.e.*, the unprepared poison? Who, on the contrary, that followed this line of instruction, would object to a dose of the prepared venom of, say, the 30th potency?

The proofs of this alteration of "nature" by potentiation in fact are so numerous as to include not only the so-called nosodes, such as tuberculinum and the others above mentioned, as well as the long list that might be added to these, but all medicinal substances whatever, so that on an emergency, if aggravation is being produced by any given substance, the administration of that same substance in a different, preferably a higher, potency, will be found to afford both prompt and satisfactory relief. I am reminded of a case some years since of an elderly lady suffering from subacute hepatic symptoms, causing at times severe paroxysms of pain, and while in one of these, having administered *Aco.* in a high potency, the pain was rather worse than better, I immediately prepared some 2 or 3 potencies higher by Hahnemann's method, and gave it with very satisfactory results. Of course in all cases routine is to be avoided, and hence if any modification of symptoms is observed pointing more strongly to some other medicine than to the one already administered, then such medicine must take the place of the previous one. Lastly, the reference to "gold" in this paragraph brings before the memory the long list of inert substances, such as *Nat.*-

*mur.*, *Carb.-veg.*, *Lycopod.*, *Graphites*, and which, nevertheless, when "prepared," have proved themselves to be antipsorics, and again we are compelled to the conviction that dynamisation is a law. The last paragraph is, "Pсорin is a *simillimum* of the itch virus."

There is no intermediate degree between *idem* and *simillimum*; in other words, the thinking man sees that *simillimum* is the medium between *simile* and *idem*. The only definite meaning which the terms "isopathic and *æquale*" can convey is that of *simillimum*; they are not *idem*, τавтоν. Here note in the first sentence "virus" not insect. Virus, that is, preceded the production of whatever followed. Next the important statement of there being no intermediate degree between *idem* (the same) and *simillimum* (the most similar); in other words, all that can be said is that the same is not the similar, nor yet the most similar, and yet no one can fix the boundary line and say, here, most similar has become same—the importance of this in estimating the difference for practical purposes between shades of meaning in the various symptoms cannot well be over-valued, and on the other hand we must remember that the typical homeopathic cure is where the *simillimum* has been found, although, as our author elsewhere remarks, the symptoms of a medicine cannot be made to fit those of the patient with the exactitude of the different parts of a mathematical triangle. This brings us to the conclusion of the first volume of the "Chronic Diseases," which, together with the *Organon* previously considered, form the proper introduction to the study of the Homeopathic Materia Medica, for the thoughts contained in these two volumes will be found pervading the whole of the remaining four volumes of the "Chronic Diseases," and the four of the Materia Medica pura, and unless these thoughts be in some measure grasped, a practical knowledge of Homeopathic Materia Medica is certainly unattainable.

### SUSCEPTIBILITY TO ARSENIC.

By WM. LAMB, M.B., C.M.

I HAVE been sent a copy of "La Médecine Internationale," No. 3, or April number. In it I notice a bit with heading—"Susceptibilité spéciale à l'arsenic." It runs thus:—

"B. H. Nicholson, in a case of furunculosis tending to become general (*à se généraliser*), administered three drops

of the *Liq. Arsenicalis* to be taken three times a day in water. Two days after, the furuncles had disappeared, giving place to an *Erythematous eruption extending over the entire surface of the body, but less marked on the face and hands.* The rest of the skin presented the aspect of a boiled lobster. The eruption was accompanied with violent itching, diarrhoea, and a certain degree of conjunctivitis. All these phenomena ceased upon stopping the arsenic."

I thought you might like to record this "proving" in "THE WORLD."

40, High Street, Dunedin, N. Z.

### A CASE OF CONSUMPTION : REMARKABLE CLINICAL HISTORY.

A New Zealand correspondent sends the following :—

"A young lady, about twenty-three, daughter of a very intimate friend of mine who is consumptive, went to Nelson and was under the care of an allopath, who said there was no chance of her living many months. Her parents had her home and put her under my charge. She has, with the ordinary homeopathic remedies, improved very much, and has in four months increased in weight  $1\frac{1}{2}$  stones; can walk out, in fine weather, a couple or three miles, and, after a rest, walk back without being fatigued. One of her sisters and she take long drives, and all are well satisfied with her progress. An elder sister married (against my advice) a civil engineer, all whose family in Scotland were consumptive. The doctors there said he would not live to get back here. He did, and for two years after. Soon after his death his wife showed unmistakable signs of consumption, and, unfortunately, died; the symptoms were more like what is known as "galloping consumption." Some months before her sister died I, at her mother's request, was asked to go upstairs and see my present patient, and was surprised to find she was sleeping with her sister. I said she must have a separate room."

The writer hopes, by the aid of *Tuberculinum* (a supply of which he has sent for), to make a complete cure of his patient, having seen in the HOMEOPATHIC WORLD reports of its use.

To illustrate the exigencies and possibilities of colonial life, we may say that the writer is in the seventy-sixth year of his age, is county engineer, justice of the peace, and coroner, and, as he lives at a place which has no doctor within twenty-five miles, is compelled to add the function of amateur medical practitioner to his other numerous duties.

## MATERIA MEDICA.

EXPERIMENTS WITH *GLONOINE*.

By WM. E. LEONARD, M.D.

THE Freshman Class of the Med. Dept. Univ. of Minn. were given each two discs of *Glonoine*, 24 dilution, at the beginning of the lecture hour (10.30 to 11.30 a.m.), March 8, 1892, the dose being repeated in fifteen minutes, if no immediate effects were noticed.

At the end of the hour each (eight students) reported slight throbbing headache and a quickened pulse (from 90 to 100 beats). These immediate head effects were most decided in the following members of the class:—

(1) Mr. B., who four years since suffered a partial sunstroke, and has since then always been sensitive to heat, found that *Glonoine* quickly brought back the headache which he has often experienced as the result of heat.

(2) Mr. S., who was suffering from a "fresh head cold," had all his symptoms aggravated temporarily.

(3) With Mrs. G. the first dose caused sharp pain in the vertex, descending to the mastoid region; later (after second dose) the pain seemed to settle in the occiput, bringing on, in a few minutes, a sensation as of a rod from the occiput to the stomach, and accompanied with nausea, remaining throughout the lecture hour. Mrs. G. had recently experienced a similar headache and nausea during an attack of La Grippe.

(4) Miss H., after the second dose, experienced a slight throbbing in the occiput and pain coming forward into the eyes, but those sensations were quite gone at the end of the hour. However, at one o'clock that afternoon, without any other apparent cause, there began a similar throbbing in the occiput extending up over the head, which increased with the hours of the afternoon; on walking the occiput seemed so heavy that it must fall out, and on sitting down the occiput seemed to be suddenly thrust into place again, and as though it was being pounded to keep it there.

She experienced a throbbing fullness all over the body; her pulse ran up to 104; on lying down she seemed to hear the pulse beat and felt a slight constriction about the heart (lying on the left side). So intense was the pain in the head that she sought relief out-of-doors. After walking a time she was better.

Her eyes had been weakened of late by over-use, which may account for the pain in them in the morning.

These are not unusual effects of the drug, but are placed on



record as being quite complete in at least half the experiments. None knew beforehand what they were taking, nor had they any knowledge of the drug from my lectures before that morning. Few drugs are better fitted to convince the sceptical, even in 1-100 drop doses.—*Minneapolis Hom. Mag.*

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### PASSIFLORA INCARNATA.

Dr. G. C. Buchanan, of Henning, Minn., writes that he "gave Mrs. H. L. V. teaspoonful doses of *Passiflora* for neuralgia, sleeplessness, and nervousness. The patient soon complained that 'her eyes seemed to push out of her head and lie on the bed quilt; her heels seemed to be up in the air; top of her head seemed to lift off.'

"To the observer her eyes appeared to be starting from her head, and later a severe attack of hemorrhoids developed.

"In 30-drop doses it did good work in producing sleep and quiet with no bad effects."—*Minneapolis Hom. Mag.*

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DISCRIMINATING MICE.—Mr. Emmett, of Southampton, writes to the *Standard* suggesting a simple means of testing butter and oleomargarine. If any one is in doubt, he says, let them take a teaspoonful of each and boil it. The butter foams without noise, the oleomargarine splutters and hisses like melted lard, nor does it foam so decidedly. Butter, he avers, which keeps well and solid in a warm room in hot weather should be suspected. Mr. Emmet further says, but does not propose it as a test, that a well-known chemist is of opinion that mice know the difference between butter and its substitute, inasmuch as trial of two biscuits, one spread with butter, and the other with oleomargarine, the former was eaten while the other was sampled and disapproved of.—*Magazine of Pharmacy.*

THE HUSBAND AND THE SURGEONS.—A curious case has occurred in a London hospital. A woman suffered from a swelling in the neck and decided to undergo an operation under chloroform. The nature of the operation was explained to her, and she said she would go through it, whether her husband (who was away from home) was agreeable or not. She, however, wrote to her husband, and he sent a letter to the hospital authorities strongly objecting to the operation, as his wife had a weak heart. When the letter arrived the woman was dead, having succumbed to the effects of the chloroform. At the inquest the Coroner held that the husband's consent was not legally necessary, so long as the wife had consented. Legally necessary, perhaps not. But the circumstance is a curious piece of evidence of the husband's judgment, as compared with the combined wisdom of the hospital surgeons. These gentlemen will do well to respect lay opinion a little more in future.—*Chemist and Druggist.*

## THE JOURNALS.

### A COMPARISON OF THE RESPIRATORY SYMPTOMS OF THE CARBONATES OF AMMONIA, LIME, AND POTASH.\*

By CLARENCE N. PAYNE, M.D., BRIDGEPORT.

(From *The North American Journal of Homeopathy*, May 7th.)

As it is approaching the season of the year when catarrhal troubles become more frequent, I thought it might be profitable to refresh our memory regarding a few remedies valuable in such conditions, and have chosen for consideration the carbonates of ammonia, lime, and potash. There is very little interest or profit, it seems to me, in a paper on *Materia Medica* which simply details symptoms, and so I shall briefly, and in perhaps a rambling way, compare the symptoms of these drugs, especially those of the respiratory tract, not expecting to present anything new, but hoping that my paper may serve as an incentive to discussion.

Some symptoms or conditions are common in different degrees to all three of these drugs, and others to certain two of them.

In the first place, they are all especially valuable in the treatment of subacute or chronic conditions of the respiratory organs and in persons of a lymphatic temperament and *Am.-c.* and *Kali-c.* are particularly useful in the case of old people.

All of them have as a condition, "easily taking cold," and all feel the effects of and are < by draughts of air.

*Calc.-c.* is especially < by dampness.

*Kali-c.* rather more from coldness.

All three have a generally weak and debilitated condition.

Farrington says of *Am.-c.* that "it is indicated in fat, lazy people."

Allen says of *Calc.-c.*, for "fat, fair, and flabby people."

Cowperthwaite gives as a condition for *Kali-c.*, "fat people with lax fibre."

*Kali-c.* partakes of the great characteristic of all the

\* Paper read at Semi-Annual Meeting of Connecticut Homeopathic Medical Society held at Meriden, Oct. 18, 1892.

potashes, including *Caut.*, viz., Anæmia, great weakness and tendency to paralysis of heart, increase in secretion of urine and rapid oxidation of tissues.

*Calc.-c.* has a condition of general malnutrition. resembling tuberculous and rachitic conditions.

*Am.-c.* acts especially on the blood, destroying its corpuscles and causing hemorrhages.

On account of this general weakness and muscular debility all three drugs have shortness of breath on exertion, this symptom being especially prominent in *Am.-c.* and *Calc.-c.*, where the indication of shortness of breath on going upstairs is a very valuable one.

*Calc.-c.* has vertigo on ascending from same cause, viz., general weakness.

Notice the resemblance in the character of the pains of *Calc.-c.* and *Kali.-c.*, both having prominently sharp, cutting pains in the chest, with, or independent of, respiration. *Calc.-c.* has especially great soreness of chest walls to touch, and aching in chest and sharp pains running through from front to back. The pains of *Kali.-c.* are very similar to those of *Bry.*, being < on inspiration.

Notice also the similarity in time of aggravation of the cough of *Am.-c.* and *Kali.-c.*, both having cough < from 2 to 4 a.m.

Of the three drugs the secretions are most profuse in *Calc.-c.*, with its easy perspiration and abundant expectoration. In *Kali.-c.* the secretions are less in quantity and more stringy in character, while in *Am.-c.* there are less still, there being considerable rattling in chest on coughing, with little or no expectoration.

*Am.-c.* and *Kali.-c.* also have two clinical symptoms in common which are peculiar and worth noting. All three drugs have as a symptom "bleeding from the nose," but *Am.-c.* and *Kali.-c.* both have "bleeding from the nose on washing the face." Both also have this symptom, "skin becomes covered with red spots or blotches after taking a bath."

Let us now more in detail compare some of the symptoms of the respiratory tract.

1. *Am.-c.* — Nose stoppage, mostly at night; must breathe through the mouth. Starts up at night from sleep all stopped up, feels as though could not breathe, with rattling or wheezing in chest on breathing or coughing. Nose is dry, or if there is any discharge it is scanty, thin,

hot, and acrid. Cough is dry, very violent, and < 3 to 4 a.m., with a sensation as of a feather in the throat.

2. *Calc.-c.*—Nose dry at night and free discharge during day. Old chronic catarrhs with this characteristic. In fact, a very good indication for *Calc.-c.* is dryness of mucous membranes at night with free perspiration and in the daytime just the opposite condition, viz., dry skin and free discharge from mucous surfaces. The discharge from the nose may be clear and watery or thick, purulent and offensive.

The chest symptoms are very important and show this same characteristic of change of source of secretion day and night.

Cough is dry at night from a tickling in the throat, but in morning cough gets loose with profuse, sweetish, or sourish, or offensive frothy or purulent expectoration in large masses. Cough stays loose all day and at night tightens up again, with perspiration reappearing. The cough is < from dampness and exertion. Chest walls feel sore, and there are cutting pains from front to back under scapula.

3. *Kali-c.*—The symptoms of the nose under *Kali-c.* are less prominent than with either of the preceding, but its action upon the throat is much more marked. You are all familiar with the symptoms of pharyngeal catarrh calling for *Kali-c.*—the tenacious mucus, the hawking and clearing of the throat < in the morning, and the sharp sticking pains in the throat.

In the chest we also find many sharp sticking and cutting pains. "Cutting pains in evening in chest after lying down," "sticking in chest on inspiration," "sore pains in chest (similar to *Calc.-c.*)."

The cough is dry and expectoration difficult on account of adhesive character of secretion; but when it is once detached may fly quickly from the mouth, not adhering all the way out as in *Kali-bi.*

Cough is < 3 to 4 a.m., like *Am.-c.* and is < by lying down and > sitting up. May be spasmodic with gagging and vomiting.

Allow me to partially illustrate the preceding by a few cases:—

CASE I.—A few weeks ago a little girl of ten years of age was brought to me, having the following symptoms of about three weeks' duration:

Nose very much stopped up, < at night, with a very little watery discharge. Does not cough much during day except morning and evening, but suddenly awakens in night about two or three o'clock crying out that she cannot breathe because nose so obstructed and has a severe spell of coughing. During day, while playing, becomes very quickly tired out. She gets short of breath on going upstairs, so that she has to sit down at top of stairs to rest. Temperature is 99° F.

When coughing there is wheezing and rattling and on auscultation coarse râles are heard all over both lungs. Appetite poor, &c.

I was led to give her *Kali-c.* at first, on account of time of aggravation of cough, but without any marked result. *Am.-c.*, however, had a very prompt effect, removing the wheezing and rattling quickly, and restoring her to health in a short time.

CASE II.—Several years ago I had under my care an old gentleman, seventy years of age, whom I relieved greatly of the following condition with *Am.-c.*: For twenty-five years he had been much troubled with a dry catarrh of nose. It was so obstructed nearly all the while that he could not breathe through it. This case I prescribed for, off and on for six months or more, without results, till I finally gave him *Am.-c.* with very prompt and decided effect. I afterward lost sight of him, but as far as I know he was practically cured by this remedy.

CASE III.—Last spring a lady came to me from another town with the following symptoms of several weeks' duration: She had neglected going to any physician until she became alarmed at the persistence of a cough, as two of her sisters had died with phthisis. Her symptoms, as I remember them, were about as follows: Cough at first dry and tight, but after coughing awhile it loosens and she raises light-coloured mucus tasting sweetish or offensive. Has a hard, aching pain deep through chest on right side, also at times quick, sharp pains through chest. Shortness of breath and catching pains on deep inspiration. Perspires very freely and easily. No other symptoms of importance.

I gave her *Calc.-c.* with immediate benefit, all her symptoms yielding to it promptly and they have not returned to this date.

CASE IV.—An old gentleman of seventy-two years, rather stout, came to me complaining of much shortness of breath on any exertion, especially marked on going upstairs. Also of palpitation and vertigo. These were the only marked symptoms. *Calc.-c.* relieved him very decidedly. He said to his wife, "Who would ever have supposed those little pills were so powerful."

In conclusion I wish to say a few words about *Am.-mur.* It has, as perhaps you will all remember, a peculiar

symptom which is very prominent in its symptomatology, viz., "Coldness in the back between the shoulder-blades." In two cases recently I have verified this as a valuable indication for *Am.-mur.*

The first was that of an old lady with asthmatic symptoms. Waking in night with wheezing and rattling and shortness of breath and tight, suffocative cough. Very sensitive to currents of air, and who felt so cold between the shoulders that she always wore, under her dress, folds of paper to keep her back warm. *Am.-mur.* has given her much relief.

The second was the case of a woman, forty-seven years old, who came to me with a very hard, tight cough, which she had had two and a half weeks, only raising a little greenish-yellow expectoration. The only other symptom of importance was this coldness between the shoulder-blades, which was prominent. *Am.-mur.* cured the cough promptly, relief following a few doses.

#### ANTIPYRINE.

SOME unpleasant effects continue to be noticed from the use of *Antipyrine*. Veiel\* describes a peculiar rash as occurring after the use of *Antipyrine*. "At first there was severe itching of the palms of the hands, lips, soles of feet, and glans penis, followed by the formation of bullæ on the lips, hard palate, and between the toes. Urticaria-like spots, with sharp contours, appeared on the soles and palms, but did not form bullæ. The itching lasted three or four days; the bullæ on the lips in from four to five days; the spots desquamated by the tenth day, and in three weeks entirely disappeared.

Dr. R. L. Watkins † (*New York Medical Journal*) reported a case of poisoning in a woman, æt. 30, after a dose of about 20 grains. The after-effects persisted for two months.

M. Cerneuil ‡ (*La Semaine Médicale*) reports the hypodermic use of *Antipyrine* to be followed by gangrene of the extremities.

Sig. Cappelletti (*Riv. Sper. di Freniatria e di Med. leg.*) reports the case of a girl, æt. 23, who acquired an *Antipyrine* habit. Commencing with small doses, which she took for the relief of headache, she gradually increased the dose, and repeated it at shorter intervals until she took two drachms daily. Her headaches increased in severity, and she became hysterical, and

\* "Journal of the Medical Sc.," 1892, vol. v., sec. A.

† *Ut Supra.*

‡ *Ibid.*

during the intervals of the attacks she appeared dazed. *Antipyrine* became a necessity to her, although it had ceased to relieve the headache. Finally her friends placed her in an asylum, where by careful dieting and the administration of *Potassium Bromide* and *Caffeine* she was weaned from the *Antipyrine* habit.

Occasionally small doses produce alarming symptoms. Dr. Salinger (*Am. Journ. Med., &c.*) found laryngismus stridulus, multiple abscesses, and a rash to follow the administration of 5 grains.

M. H. Huchard (*Rev. Gén. de Chir. et de Thér., Jan., 1889*) reports that he administered 15 grains of *Antipyrine* to a woman suffering from violent dysmenorrhea. The dose stopped the menstrual flow suddenly. The patient was seized with violent chill, chattering of teeth, the face became cyanosed, and there were frequent attacks of syncope, the pulse was small and weak, and the patient complained of great headache. The condition was such as to cause great anxiety for nearly an hour, when the effects gradually passed off. M. Huchard observed similar symptoms in two other cases, and he now regards the presence of the catamenial flow as a positive contra-indication to the use of *Antipyrine*.

Besides these cases Dr. Morrow\* reports 65 cases of rash following on the use of the drug.

GEORGE FRY, F.R.C.S., in *Medical Press*.

### PEROXIDE OF HYDROGEN.

At a meeting of the Pediatric Society of America, held in Bolton, Mass., Dr. Jacobi, of New York, read a paper on the injurious effects produced by spraying *Peroxide of Hydrogen* on affections of the throat.

In a man, *æt.* 28, the spray of *Peroxide* inflamed his throat, mouth, and lips. The mucous membrane became covered with a white flaky membrane, which on being peeled off left a raw bleeding surface.

A boy, *æt.* 5, from a five per cent. solution had the inside of his cheeks covered with a whitish, greyish, yellowish membrane.

A healthy adult from the use of the *Peroxide* spray got inflammation, and diphtheritic membrane came out on the mucous surface of his mouth, pharynx, and nares.

A woman, *æt.* 30, had a similar experience with the *Peroxide*.

At the same meeting Dr. Caillé told of a boy, *æt.* 6, inflam-

\* New Sydenham Society. 1893.

mation and the production of a whitish membrane followed by ulceration from the use of *Peroxide* spray.

Dr. Seibert narrated a similar experience from the use of the drug.

Dr. Koplik found, in the case of a boy, æt. 6, inflammation and the production of a membrane following its local application.

Dr. Huber has found it to produce swelling of the lips and erosion of the skin when locally applied.

All active chemical solutions are likely to destroy epithelium, coagulate the albuminoids, and produce ulceration when applied locally. Antiseptics are two-edged tools, more likely to injure than benefit the patient and physician.

GEORGE FRY, F.R.C.S., in *Medical Press*.

A MICROBE-KILLER'S WOES.—About four years ago there appeared in the *Druggists' Circular* an article by Dr. Robert G. Eccles, giving what purported to be an analysis of the "Microbe-killer," and alleging that famous substance to consist substantially of the following ingredients:—

Impure sulphuric acid ... ..	4 drachms
Muriatic acid (impure) ... ..	1 drachm
Red wine, about ... ..	1 oz.
Impure hydrochloric water ... ..	1 gallon.

The cost of this compound, it was pointed out, was not more than 5c. per gallon (exclusive of the jar), and Mr. Radam's sale-price \$3. Mr. Radam subsequently wrote a letter to a St. Paul journal, in which he called Dr. Eccles a quack and a charlatan, and the latter thereupon took proceedings for libel against the microbe-killer. Dr. Eccles was formerly Dean and Professor of Chemistry in the Brooklyn College of Pharmacy, and one of the editors of the *United States Pharmacopœia*, and brought many eminent physicians and others to speak to his character. Mr. Radam, who employed the renowned Colonel Robert G. Ingersoll as his counsel, contended that he had called Dr. Eccles a quack in his capacity of a chemist, and not in that of a physician, and that his analysis of the microbe-killer was proof of his want of chemical knowledge. In cross-examination, says the *Oil, Paint, and Drug Reporter*, Mr. Radam admitted that he did not know the meaning of many of the names of diseases mentioned in his work on "Microbes and the Microbe-killer;" that a part of the book was written by others, and was utterly unintelligible to him, and that he knew comparatively nothing of botany, and nothing whatever of natural history or of medicine. He declared that he did not care to know anything about these subjects. It was also shown that he had testified in a former case that "A microbe is simply impure air. Pure air is oxygen, impure air is nitrogen." A verdict was given for Dr. Eccles, with \$6,000 damages and costs against the defendant. Another suit, in which Mr. Radam claims \$200,000 damages against the *Druggists' Circular* for the insertion of Dr. Eccles' report, is expected to be heard shortly.—*Chemist and Druggist*, March 25th.



## INSTITUTIONS.

### THE HOMEOPATHIC LEAGUE.

SEVENTH ANNUAL REPORT, JULY, 1898.

DURING the past year the following tracts have been added to the list of the League's publications :—

42. The Cholera.
43. Homeopathy in Veterinary Practice.
44. Epochs in Medicine.
45. Two Decades in Medicine.
46. Hahnemann on Cholera.

The alarm generally felt throughout the country lest that fearful epidemic, the cholera, which was raging in various places close to our own shores, but still fortunately separated from us by the sea, might be imported into our island home, led the Committee to publish a full and complete account of the results obtained by homeopathic treatment in various epidemics of this malady at home and abroad, and as one tract did not exhaust the interest felt on this subject the Committee resolved to publish another containing Hahnemann's original directions for the treatment of cholera, which have proved of such inestimable value all over the world.

The application of homeopathy to the treatment of diseases in animals, which cannot be influenced by imagination or suggestion like their superior fellow creatures, is a matter of great importance not only to the animals but to their masters, who are largely dependent on the good health of their domestic animals for their work, their food, and their protection. Accordingly, the Committee secured the willing co-operation of an eminent and scientific veterinary surgeon, Mr. Hurndall, who for many years has been engaged in the homeopathic treatment of animals, and who has contributed a tract on his special subject, which will be found to be one of the most valuable of the series.

The other two tracts (44 and 45) are from the pens of eminent homeopaths on the other side of the Atlantic, and are well worth perusal.

Nothing of particular interest to the homeopathic world has occurred during the past year. For the moment the adversary has ceased from troubling, and we have no controversial articles in the medical periodicals, and no attempts at persecution of homeopaths, to record. As every previous manœuvre of this sort has resulted in an increased impetus to the progress of our cause, no doubt the enemy, taught by experience, has acted wisely in maintaining a discreet silence, thus depriving us of the opportunity of making a triumphant defence.

## ANNUAL HOMEOPATHIC CONGRESS.

The following circular has been issued by the Hon. Sec. :—

29, SEYMOUR STREET, PORTMAN SQUARE, W.

*July, 1898.*

DEAR SIR,—The Annual Congress of Homeopathic Practitioners will be held this year in Northampton, at the Guildhall, on Thursday, September 28th, at 10 o'clock punctually.

Note.—The date of meeting was fixed for Thursday, the 21st of September, but within the last few days it was found that on account of a great public demonstration on that day in Northampton, we could not have the suitable rooms for meeting, nor could many friends in Northampton, who wished to be with us, be present. In fact, our meeting would have been swamped, and on the advice of Dr. Clifton the day had to be altered. The following day (Friday, the 22nd) was found, for various reasons, to be equally unsuitable, and so I have taken the responsibility, with Dr. Clifton's advice, of changing the day of meeting to that of Thursday, the 28th of September, as Thursday is the day in the week which in former years decided to be the best one. I hope that this necessary alteration will not inconvenience any of our colleagues.

The Presidential Address will be delivered and the meetings will be held in the Old Council Chamber at the Guildhall.

The business of the Congress will be opened by an address from the President, Dr. Hawkes, of Liverpool, on "Should Likes be Treated by Likes?"

Any strangers, ladies and gentlemen, who may desire to hear the President's address, will be welcome.

After this a short interval will allow the Hon. Treasurer to receive subscriptions.

A paper will then be read by Dr. Pope, on "The Selection of the Homeopathic Specific." Discussion is invited on this and the other papers.

Should there be time before luncheon, a short paper will then be read by Dr. E. A. Neatby, of London, on "Ouabain in Pertussis."

The Congress will adjourn for luncheon at 1 o'clock. Dr. Clifton, of Northampton, very kindly requests that the members of Congress will consider themselves as his guests at luncheon, which will be laid in the Large Hall of the Guildhall.

At 2 o'clock punctually the Congress will reassemble and receive the report of the Hahnemann Publishing Society, proceed to select the place of meeting for the next year, elect officers, and transact any other business which may be necessary.

A paper will then be read by Dr. W. Cash Reed, of Plymouth, on, "Uterine Deviations, and their Auxiliary Treatment."

After this, and the discussion thereon, Dr. Neatby will read his short paper, should there not have been time for it before luncheon.

The members and their friends, ladies as well as gentlemen, will dine together in the Large Hall of the Guildhall at 7 p.m.

During the interval between the conclusion of business and the dinner, it is expected that there will be good time to visit certain places of great interest in Northampton: (1) Queen Eleanor's Cross; (2) St. Peter's Church, one of the best examples of enriched Norman architecture in the kingdom; (3) The Church of the Holy Sepulchre (St. Sepulchre's Church), one of the most remarkable memories of the Crusades to be found in the kingdom—it is one of the four round churches still existing in England; (4) The extensive boot and shoe manufactory of Messrs. Manfield and Sons, the largest in the kingdom. Dr. Clifton has kindly promised to provide intelligent guides for these places, who can give full information.

The Vice-President of the Congress is Dr. A. C. Clifton, and the Hon. Local Secretary is Mr. A. Wilkinson.

A meeting of the Hahnemann Publishing Society will be held at the Guildhall (the Old Council Chamber) at 9 a.m. on the morning of the 28th.

The subscription to the Congress is ten shillings, which includes the dinner ticket. The dinner ticket alone, for guests, will be 7s. 6d.

Those Members of Congress who can remain over Friday may visit Althorpe House, the seat of Earl Spencer, and the adjoining village, the residence of some of the Washingtons, the family from which the great George Washington came. The Althorpe collection of pictures is reckoned very fine. The famous library is now no longer there. Several residents in Northampton have most generously offered their hospitality to Members of Congress. These kind and hospitable friends will arrange with Dr. Clifton, and he will communicate with such members as may have the good fortune to be invited. For others rooms will be provided at the George Hotel and the Grand Hotel. Members who wish rooms to be retained for them at these hotels will please communicate with Dr. A. C. Clifton, 65, Abington Street, Northampton.

If you know of any colleague who has not received a circular kindly let me know.

The enclosed post card is to be filled up and posted as soon as possible, but not later (if possible) than September 15th.

I am, dear sir, yours faithfully,

D. DYCE BROWN, *Hon. Sec.*

## SYNOPSIS OF PAPERS.

## DR. POPE'S PAPER.

*The Selection of the Homeopathic Specific.*

The method of Hahnemann—The object aimed at by him—Symptoms—State of Physiology and Pathology in 1810—Study of Medicinal Action—Interpretation of Symptoms arising from disease and produced by drugs—Differentiation of similar drug effects—Use of the Repertory.

## DR. CASH REED'S PAPER.

*Uterine Deviations and their Auxiliary Treatment.*

SYLLABUS.—Introduction—Frequency of deviations—at home—in the Tropics—The term "deviation" generalises, hence applicable. The prime factor in deviations—A case of "tight-lacing"—Treatment: Essentially by—(a) Atmospheric pressure. (β) Gravitation. To apply these—The genupectoral position—"Un mouvement de bascule"—The inflating Air Pessary—The Author's ditto, adapted to:—(a) retro-deviation. (β) Purposes of continuous irrigation without removal (with Eguisier's irrigateur). (γ) Introduction with the sound. (δ) Inflating from time to time by patient herself without removal.

## Illustrations and Apparatus.

## DR. E. A. NEATBY'S PAPER.

*Onabüin in Pertussis.*

1. Source of the Drug.
2. Physiological and Toxicological Action.
3. Therapeutic Uses.
4. Clinical Cases.

EXIT THE MOUSE-TYPHOID BACILLUS.—Dr. Löffler's typhoid-bacillus inoculation, the application of which in Greece against the plague of field-mice created quite a sensation a year or two ago, has finally gone into the great limbo of scientific failures. It was practically stigmatised as useless in this country by the Parliamentary Commission on the plague of voles in the Border counties, and now the German papers are regretfully obliged to admit its inefficacy. The remedy was tried on a large scale in Germany this summer in the district of Lehe in Hanover, and in Wurtemberg, without the slightest effect. On the other hand, phosphorus pills, and sweetened and afterwards poisoned decorticated oats, have proved very useful.—*Chemist and Druggist.*

## REVIEWS.

### SPECIAL DIAGNOSIS AND HOMEOPATHIC TREATMENT FOR POPULAR USE.\*

ALREADY the author of several well-known popular medical works, Dr. Verdi thus explains how he came to write the present volume:—

“In answer to the request of the many readers of ‘*Maternity*,’ the author has enlarged the scope of that special work so as to cover all diseases, thus evolving a system of general domestic medicine.

“As in ‘*Maternity*,’ he has in this work always kept in view the fact that his audience, though intelligent, is necessarily untechnical; often a wife or a mother at the bedside of a sick husband or child, needing then and there all possible assistance, and that assistance, to be of any practical value, in the form of a concise description of disease, explanation of symptoms, and positive directions as to how she should proceed to procure relief for the object of her care.

“That is the purpose of this book.

“Knowledge should be the right of the many rather than the privilege of the few; hence the author is more willing to instruct than to command. If in the development of this work he has succeeded in putting this principle into practice, he will need no praise, for in its success he will have found his reward.”

The most original feature of Dr. Verdi’s work is contained in the first part, in which he gives the symptomatology of disease in such a way that intelligent persons may diagnose the disease from the appearance and sufferings of the patient, and may then turn to another part of the book for a description of the treatment. When people are taken ill, they are not labelled with the name of the disease they are suffering from, but they have more or less depression, pains, sensations, or alterations in attitude, movements, and appearance. Dr. Verdi gives an account of these changes and indicates their meaning. In the body of the work the symptomatology of the different diseases is more particularly given.

Dr. Verdi’s directions for treatment and general management are clear and concise; though we do not always agree with his recommendations, as when he advises free lancinations and deep cauterising with hot irons or caustic for poisoned bites. The near application of radiant heat to the wound, but without con-

\* *Special Diagnosis and Homeopathic Treatment for Popular Use*, including such functional disturbances as are peculiar to girls and to maternity. By Talio de Suzzara-Verdi, M.D. Philadelphia: Bourche & Tafel. London: Homeopathic Publishing Co., 12, Warwick Lane, E C. 8vo, pp. 579.

tact and without burning, is much more effective. Dr. Verdi recommends in general the lower potencies in prescribing, though he recommends some medicines in the 30th. We question, however, the desirability of advising the use of ten-drop doses of *Digitalis*  $\phi$  in cardiac dropsy. When *Digitalis* is the right remedy it will do all that is required of it in the attenuations. In spite of these criticisms (to which we may add the want of an improved contents table and index) we have no hesitation in saying that Dr. Verdi has written a very useful and practical work.

#### HARROGATE MINERAL WATERS.\*

IN this sixteen-page pamphlet, which is reprinted from *The Homeopathic Review*, Dr. Roberts gives a great deal of interesting information regarding the famous waters of Harrogate. It is divided into five chapters. The first deals with "A New Analysis"; the second, "The Physiological and Therapeutical Action of Harrogate Mineral Waters"; the third, "Massage in Corpulence and Other Diseases"; the fourth, "Climate of Harrogate"; and the fifth gives an account of "the Baths." Most readers will be surprised to find such a great variety of waters at Harrogate. Harrogate is especially known for its Sulphur springs, but these are not by any means the only class of waters to be found at the Yorkshire Spa.

MADURA FOOT.—Though the clinical interest of the curious affection known as "Madura Foot" is not very great in this country, the study of its pathology presents great attractions to bacteriologists. They cannot be said, so far, to have succeeded in elucidating the exact nature of the organism, for organism there is the presence of which determines the peculiar destructive lesions characteristic of this affection; nor are they yet in a position to affirm the pathological identity of the white and the black variety, in spite of the fact that these both occur apparently under the same etiological conditions. Recent researches have led several observers to suspect that the fungus, if fungus it be, is the same as that discovered in connection with actinomycosis in cattle. Certain it is that the appearances present many features in common with the latter, and the differences do not negative the assumption, seeing that the actinomycotic fungus is remarkably pleomorphic. So marked is this pleomorphism that sections obtained from inoculations of the same culture in different animals, as observed experimentally by Dr. Ruffer, differ so widely in their general and special characteristics that, were it not for the knowledge of their common origin, bacteriologists would experience a difficulty in identifying them as one and the same fungus.—*Medical Press.*

\* *The Harrogate Mineral Waters.* By Arthur Roberts, M.D. London: E. Gould and Son, 59, Moorgate Street, E.C. 1898. 16 pp. Price 6d.

## INVENTIONS, PREPARATIONS, ETC.

### THE "VONDA" VAGINAL SYRINGE.

THE accompanying cut represents a new vaginal syringe called the "Vonda," invented by A. B. Cruikshank and manufactured by J. G. Ingram and Son, of Hackney Wick. It is constructed with double tubes, one for injection and the other for carrying off the waste. The valves in the tubes on one side open in an opposite direction to those on the other side, and the bulb and vaginal tube are each divided into two compartments.

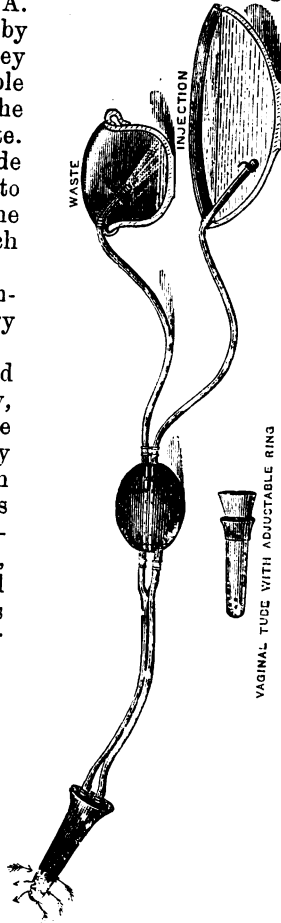
The following are its chief advantages as compared with an ordinary syringe:—

It is double-acting, douche and suction taking place alternately, water being first injected into the vagina and then withdrawn by suction; and this alternate action can be kept up continuously as long as desired, without withdrawing the vaginal tube. The suction, though gentle, removes all morbid secretions and thoroughly cleanses the parts, leaving a clear field for an examination with the speculum.

The widened end of the vaginal tube plugs up the entrance to the vagina, so that an astringent or caustic injection can be held in contact with the walls of the vagina and neck of the womb as long as desired.

It distends evenly and sufficiently the folds of the vagina, so that an injection reaches all the parts, so that they can be thoroughly cleansed and irrigated.

A rubber ring, for use in cases of Prolapsus Uteri, slips over the vaginal tube and can be adjusted to shorten the



tube in proportion to the distance the womb has slipped down.

The many advantages of this syringe over those ordinarily in use are sure to recommend it favourably to both patients and doctors.

### IZAL.

THE latest introduction in the way of disinfectants promises to be an improvement on all its predecessors. If it is necessary to kill microbes (which, however, we do not think to be the beginning and end of the medical art) it is as well to do it without destroying the patient or irritating his tissues. Now the two most famous disinfectants hitherto—Carbolic Acid and Corrosive Sublimate—are eminently distinguished for having brought about these undesirable accidents in a very large number of cases. Izal, it appears, kills microbes without injuring their hosts. Here is the chemist's report upon it:

“THORNCLIFFE COLLIERIES, NEAR SHEFFIELD.

“February 1, 1892.

#### “REPORT ON ‘IZAL.’

##### “THE NEW NON-POISONOUS DISINFECTANT.

“During a research into the nature and uses of a certain unknown oil derived from the Thorncliffe Patent Coke Oven, I extracted a body which evidently possessed high antiseptic power. I estimated this power by observing the length of time the new body would arrest the putrefaction of a putrefying liquid, and then compared it with pure crystallised carbolic acid.

“The results clearly showed that its antiseptic power was considerably greater than that of this well-known antiseptic.

“After undergoing a process of refinement, the new body was found to be a clear deep reddish-brown liquid insoluble in and of greater density than water. Its mean boiling point is considerably higher than that of pure carbolic acid, and it has not the caustic action upon the skin as has that antiseptic; moreover, it is non-poisonous to the higher animal life.

“All these properties are evidently of real importance in arresting putrefactive change or in the destruction of parasitic life, since they insure the antiseptic body remaining upon the part requiring disinfecting after it has once been there deposited. In order, however, to properly effect the latter object an antiseptic body insoluble in water is usually unsuitable, owing to the fact



that water is the general medium of distribution. It is this fact which has caused most of the disinfectants hitherto advocated to be those that were soluble in water, and thus the means for their distribution became also the easy means for their removal from the part requiring disinfecting.

“Upon careful consideration of these facts, I finally succeeded in so finely dividing this new antiseptic that its particles would remain permanently suspended in water, forming a beautiful milk-white emulsion. By this method the two important *desiderata* of a disinfectant were attained, viz., insolubility of the active constituent *in* water, and easy distribution *by* water. Thus “Izal” consists of a powerful antiseptic body which is insoluble in water, but which is made into an emulsion for purposes of distribution.

“The disinfectant itself remains liquid at all temperatures above 32° F., whilst a temperature of 212° F. instead of deteriorating, only tends to concentrate it. At these and all intermediate temperatures it will mix readily and perfectly with water in all proportions.

“With respect to the application of this disinfectant to disinfecting purposes generally, and especially with regard to infectious diseases which are propagated by septic, toxic, or zymotic microbes, the property which above all recommends itself for consideration is that of persistency, which is without doubt due to the fact that the active constituent of the disinfectant has a mean boiling point higher than 400° F.

“It naturally follows from this that, although a spore of a bacillus might not be immediately destroyed, the disinfectant would in all probability remain sufficiently long to destroy the bacillus evolved from that spore, and thus prevent further development. This I have proved to be true in the case of the *acarus ovis*, viz., the species *psoroptis communis* of the genus *psoroptes*. Here the time of egg incubation and larva development is fifteen days, yet one treatment has been found sufficient to effect a complete cure of the disease originated by this *acarus*, proving that not only were the parents destroyed but the antiseptic body remained to destroy also any insects hatched from the eggs which the parents had deposited previous to their death. This seems to be a far more legitimate inference than that the eggs themselves had been destroyed.

“The practical application of ‘Izal’ to the human patient has given most interesting and highly satisfactory results, and these are the more valuable as many of them have been under direct medical observation. As an antiseptic dressing for wounds and bruises, one surgeon reports the result obtained with this disinfectant as most remarkable, and this after the usual antiseptic dressing had failed.

"These facts and considerations enable me to point out the superiority of this new antiseptic body to the following well-known disinfectants, viz., to Corrosive Sublimate with respect to its non-poisonous action on human beings, to Carbolic Acid with respect to its non-poisonous action and higher antiseptic power, and to Potassium Permanganate with respect to its durability. (Signed), J. H. WORRALL, F.C.S., F.I.C."

## EXTRACTS.

### "RUNNING AMUCK."

In the *Journal of Mental Science* Dr. Ellis, the medical superintendent of the Government Asylum, Singapore, gives an interesting account of this curious condition. *Amok* is the actual Malay word, and means a furious assault, whilst its derivatives, *mengamok* and *pengamok*, respectively signify a furious assault and the person who commits the assault. The condition as described by Dr. Ellis seems usually to be preceded by a period of mental depression, sometimes with suspicion, and the patient, when he breaks out, slashes at, stabs, and sometimes mutilates, all who come in his way, irrespectively of his creed or nationality. The weapons used are a short spear, a Malay *kris*, or a chopper, and in the old days—and even now in the uncivilised parts of the peninsula—it was the custom to have long forked sticks, which were used against the man who was running *amok* for the purpose of arresting him in his career and pinning him to the ground. Although now such a man when caught is tried in the usual way and usually sent to an asylum, formerly little mercy was shown him, and he was killed at once as if he were a mad dog and consequently a standing danger to the community. The condition seems to resemble in many particulars the automatic condition which is sometimes left after an epileptic fit. This in some instances, as is well known, takes the form of running—the so-called "procurive epilepsy"; and if we imagine such a patient armed with a knife and imbued with a homicidal impulse, we have practically all the conditions necessary for the pathological development which is peculiarly Malayan. Apparently, too, the Malay who has run *amok* has no recollection of the assaults he has committed—at least, he never acknowledges that he has; although from the cautious way in which Dr. Ellis refers to this point one would almost infer that he thinks there may be some lurking remembrance of the deeds. But it has not been possible, even under circumstances in which there was no inducement to conceal anything, to bring one of these patients to remember anything about the affair. Fear of consequences, if they do remember, can scarcely be the

cause of their reticence, for Dr. Ellis, from his knowledge of the Malayan character, is certain that a Malay would prefer death to lifelong imprisonment. We have referred to the mental depression which sometimes precedes the running *amok*. The Malay is subject to a condition of intense depression—the *sakit-hati*, or heart sickness—in which he broods over his wrongs and cherishes feelings of revenge, and this condition not uncommonly precedes an outbreak. If this is so, Dr. Ellis thinks that they are to a certain extent responsible, for the man who wilfully works himself, or allows himself to drift, into a blind rage and then runs *amok* must at least be as responsible as the man who, of his own free will, makes himself drunk and then commits a crime. It is a difficult question, but it is satisfactory to know that the condition is becoming much less common than it was even a few years ago.—*Lancet*, July 15th.

#### THE PARALDEHYDE HABIT.

NEARLY all the hypnotics which are introduced as substitutes for chloral are said not to have the bad characteristic of becoming the master of the persons who take them. *Paraldehyde* was one of the lot; but it appears from a paper communicated to the *Edinburgh Medical Journal* by Dr. F. A. Elkins that a *Paraldehyde* habit is possible. He had a case in the Edinburgh Asylum: a man of 65, who had taken *Paraldehyde* for two and a half years, and latterly took as much as sixteen ounces per week, "seven teaspoonfuls" giving him only half an hour's sleep. He became very ill, and was admitted to the asylum for treatment. Dr. Elkins noticed that many of the bodily and mental symptoms, with some notable exceptions (such as the extreme emaciation, marked effect upon the heart's action, and abnormally large appetite), were similar to those found in *delirium tremens*; and from the chemical relationship of *Alcohol* and *Paraldehyde*, this is what might be expected.—*Chemist and Druggist*.

#### ANSWERS TO CORRESPONDENTS, NOTES AND QUERIES.

\* \* In this department we shall be happy to reply to any inquiries relating to homeopathy or to the matter of our magazine that our correspondents may like to address to us. We cannot, of course, undertake to give medical advice in particular cases, which is the business of a medical attendant; but if our medical readers like to put queries to each other regarding points of practice or puzzling cases, we shall be happy to insert queries and replies.

Mr. E. J. KENDALL, Toronto.—Your favour with enclosure has been referred to our publishers, who have doubtless carried out your desires.

## Obituary.

### DR. EDWARD WYNNE THOMAS.

It is with great regret that we announce the death of Dr. E. Wynne Thomas, of Birmingham, one of the most eminent of provincial homeopathic practitioners, and the most distinguished surgeon in the homeopathic ranks in this country. Dr. Wynne Thomas was M.D. of London, and M.R.C.S. England. He was gold medallist in anatomy and in medicine at the London University. He had been House Surgeon at University College Hospital, and Demonstrator of Anatomy at University College. Before his conversion to homeopathy he was surgeon to the South Staffordshire General Hospital, and at the time of his death he was Consulting Surgeon to the Josiah Mason Orphanages, Erdington, and Surgeon to the Birmingham Homeopathic Hospital.

Dr. Thomas' skill as an operator did not blind him to the advantages of homeopathy when he was led to make an investigation into it; and his adoption of the new therapeutics in no way spoilt his surgical skill. He never withdrew himself from general medical practice, and he was thus in little danger of becoming narrowed into an operating specialist. How much he was respected in the town in which he laboured, and how much he will be missed, we leave the following extracts to show:—

“The Homeopathic Hospital in Easy Row has lost a valued friend and skilful surgeon by the death of Dr. E. Wynne Thomas, who passed away at his residence, Harborne Road, yesterday, having been a sufferer from Bright's disease. Dr. Thomas was a convert from allopathy. Formerly he practised as an allopathist in Wolverhampton, but in 1862, having closely investigated homeopathy, he was persuaded of its superiority and resolved to practise it. He removed to Birmingham, and in 1865 was elected a member of the honorary medical staff of the Homeopathic Hospital, where he earned the reputation of being a very skilful operator. He leaves a widow, two sons, and three daughters.”—*Birmingham Argus*, July 29.

“BIRMINGHAM AND MIDLAND HOMEOPATHIC HOSPITAL AND DISPENSARY.—At a meeting of the General Committee held at the Hospital yesterday, Mr. R. L. Chance in the chair, it was resolved:—‘That this meeting, having heard of the death of

their valued friend and colleague, Dr. E. Wynne Thomas, desire to express their deep sympathy with Mrs. Wynne Thomas and her family in their sorrow, and at the same time record their sense of the great loss sustained by the Hospital and their appreciation of the distinguished services rendered to the institution and the cause of homeopathy by Dr. Wynne Thomas since he was elected a member of the honorary medical staff in the year 1865.' Prior to 1865 he had resided at Wolverhampton for five years and practised allopathy the greater portion of that time. He was connected with the South Staffordshire General Hospital as house surgeon and subsequently as honorary surgeon, where he performed a large number of very important operations. About three years prior to 1865 he was drawn to homeopathy, and determined to put it to the test of a practical and searching investigation, which resulted in a conviction of its immense advantages and a determination to practise it. He thereupon gave up his practice in Wolverhampton and came to Birmingham, under the advice of Dr. J. Gibbs Blake. Dr. Thomas was a very successful operator, and his medical and surgical practice was a very large one. He leaves a widow and five children, one of his sons being in practice at Bromley, Kent."—*Birmingham Gazette*.

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### LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

HOURS OF ATTENDANCE:—Medical, Daily, 2.30; Surgical, Mondays, 2.30; Diseases of Women, Tuesdays, 2.30; Diseases of Skin, Thursdays, 2.30; Diseases of the Eye, Thursdays, 2.30; Diseases of the Ear, Saturdays, 2.30; Diseases of the Throat, Mondays, 2.30; Operations, Mondays, 2.

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SALT IN BEER.—It seems a somewhat curious thing at this time of day there should be any doubt whether the addition of between 50 and 63 grains of salt to a quart of beer does or does not prejudice the purchaser. Yet such appears to be the state of affairs. A special case was lately heard before the Queen's Bench in which a publican had been proved to have adulterated beer with salt to the amount mentioned. Expert evidence was as usual contradictory as to the possible damage such a beverage might cause to consumers. Their lordships finally remitted the case to the Merthyr magistrates to find whether the beer was of the nature, substance, and quality of the article demanded by the purchaser. It is time that some authoritative decision were made on this important matter. Few frauds are more systematically practised on the working classes than the adulteration of beer.—*Medical Press*.

## MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Browne (L.)**. The Throat and Nose, and Their Diseases. 4th ed., revised and enlarged. Roy. 8vo, pp. 710. (Baillière. 21s.)
- Burdett (H. C.)**. The uniform System of Accounts, Audits, and Tenders for Hospitals and Institutions. With Certain Suggested Checks upon Expenditure, and Tender and other Forms for Securing Economy, and the Index of Classification, Compiled by a Committee of Hospital Secretaries and Adopted by a General Meeting of the same, 18th January, 1892. 8vo, pp. 72. (Scientific Press. 6s.)
- Burnett (J. C.)**. Diseases of the Skin: Their Constitutional Nature and Cure. 2nd ed., revised and enlarged. 12mo, pp. 240. (Homeopathic Publishing Company. 3s.)
- Clarke (John H.)**. Cholera, Diarrhea, and Dysentery: Homeopathic Prevention and Cure. 12mo, pp. 80. (Homeopathic Publishing Company. 1s.)
- Fleury (C. R.)**. Modern Household Medicine. 3rd ed., revised and enlarged. Cr. 8vo, pp. 724. (Gould. 5s.)
- Handbook for Attendants on the Insane.** 2nd ed., revised and enlarged. Cr. 8vo, pp. 130. (Baillière. 2s.)
- Heath's Practical Anatomy: A Manual of Dissections.** 8th ed. Edit. by W. Anderson. Cr. 8vo, pp. 762. (Churchill. 15s.)
- Jacobson (W. H. A.)**. The Diseases of the Male Organs of Generation. 8vo, pp. 781. (Churchill. 22s.)
- Stokes (F. W.)**. Chronic Diseases of the Urethra and Prostate. With Special Reference to Their Treatment by Irrigation. Cr. 8vo, pp. 50. (Kirpton. 1s.)
- Talamon (C. H.)**. Appendicitis and Perityphlitis. Trans. from the French by Richard J. A. Berry. Cr. 8vo, pp. 246. (Chatto and Windus. 6s.)

## TO CONTRIBUTORS AND CORRESPONDENTS.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 30, *Clarges Street, W.*

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

LITERARY matter and correspondence should be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct the same and return to the *Editor* as early as possible.

### CORRESPONDENTS.

Communications received from Dr. Lamb, Dunedin, N.Z.; Dr. Stephenson, Melbourne, Victoria; Dr. Mahony, Liverpool; Mr. G. A. Cross, London; Dr. Clifton, Northampton; Dr. E. J. Kendall, Toronto.

### BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Chemist and Druggist.—Allg. Hom. Zeit.—Monatsblätter f. Hom.—Homeopathic Review.—Archiv. f. Hom.—Homeopathic Journal of Obstetrics.—Pacific Coast Journ. of Homeopathy.—Medical Argus.—Homeop. Recorder.—Southern Journ. of Homeopathy.—Homeopathic Medical Record.—Medical Advance.—Vaccination Inquirer.—Healthy Life.—Minneapolis Hom. Magazine.—Medical Visitor.—Medical Century, Inaugural Address Number.—Mannedskrift f. Hom.—Hastings and St. Leonards Observer.—New York Medical Times.—Monthly Magazine of Pharmacy.—Revue Hom. Belge.—Homeopathic Envoy.—Clinique.—North American Journal of Homeopathy.—Hom. Med. Record.—Journal of Occipital Surgery.—Hahnemannian Monthly.—New England Med. Gazette.

# THE HOMEOPATHIC WORLD.

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OCTOBER 2, 1893.

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## THE LAW AND THE RULE.

THERE has been a good deal of not very fruitful discussion amongst homeopaths as to whether the homeopathic formula should be written, "*Similia Similibus curentur*"; or, "*Similia Similibus curantur*." There is no doubt as to which HAHNEMANN wrote; and there is also no doubt as to which is the correct Latin. In classical Latin "*curo*" means not "I cure," but "I take care of," or "I treat"; a sense preserved in the German "*kur*" of to-day, which means a method of "treatment," and not "a cure" in our sense. HAHNEMANN wrote "*Similia Similibus curentur*," which means, "Let likes be treated by likes"—"*Curentur*" being in the imperative and not the indicative mood. This is the *Rule* of homeopathy: it is not the *Law*, but it is founded on the law, and without the law would be, of course, valueless. It would be of no use to treat likes with likes if likes did not cure likes. The confusion has arisen by reading the Law into the formula of the Rule, and endeavouring to make the formula express the Law rather than the Rule. This has brought about the substitution of the indicative "*Curantur*" for the imperative "*Curentur*," the meaning of the English word "cure" having been imported into it at the same time.

Perhaps the safest way would be to avoid Latin altogether and keep to Anglo-Saxon. There will be no danger of mistakes then. We can express the Law thus: "Likes cure likes"; and the Rule, "Let likes be treated by likes." Or, if our devotion to Latin is not to be overcome, we can

adopt for our motto simply "*Similia Similibus*"—"Likes to likes," or "Likes by likes"—leaving the verb to be understood. In this way both meanings will be included. The Latin words "*Medeo*" and "*Sano*" mean "I cure," or "I heal"; and if we want to express the *Law*, "*Medentur*" or "*Sanantur*" must be mentally supplied; if the *Rule*, "*Curentur*."

After all, the matter is not really worth fighting about, only it is as well to avoid confusion of thought where possible. The important thing is to understand that homeopathy is a law of nature, and not merely a rule formulated by a clever man and to be followed on the strength of his *ipse dixit*. In the conflict that has taken place over "*Curentur*" versus "*Curantur*," defenders of the Rule have sometimes seemed to forget this, and to have imagined that homeopathy consists of an excellent piece of advice merely, which may be followed or not, according to the option of the individual.

Homeopathy is nothing of the kind. It is a genuine system of "cure," in the Anglo-Saxon sense of the word, and it has a Law of Nature for its foundation. Upon this Law of Nature have been built a science and an art of healing. If homeopathy is not a system of cure it is nothing at all. It is just this that makes it so offensive to allopathists. Old school authorities are perpetually giving it out that there is no such thing as a "cure," and, like Professor McKENDRICK the other day, they plaintively lament that even "educated persons" hanker after a "cure," when they might be satisfied with a scientific view of things. It is quite true of allopathy that it has no cures: it only possesses palliatives and scientific explanations, with which it seeks to satisfy the wants of its lay adherents. Hence the anger of the allopaths when homeopathy steps in, and not only professes to cure patients, but does actually cure them, in spite of all the medical eminences of the allopathic school, who have pronounced cure impossible. HAHNEMANN might have preached his doctrines in peace to the end of his days if his doctrines



had been empty of results. It was because his law was true, and led him to cure patients whom his contemporaries could not cure, that he was persecuted by his medical "brethren." And it is for the self-same reason that homeopathy is maligned and persecuted to-day by the established ignorance of the allopathic sect. If homeopathy were a failure it would be looked upon quite amiably by its elder sister. As it is, no stupid slander is too stupid to find admission to the allopathic journals; and only the other day that great luminary in medical ethics the *British Medical Journal*, in a leading article on CHARCOT, went out of its way to describe homeopathy as a "non-entity"!

We do not complain of this. It is no particular grief to us to see our opponents making an exhibition of themselves. We take these little exhibitions of envy and spite as an indication of the annoyance our success gives them. As Dr. DUDGEON has pointed out, they call themselves "regular" and yet they have no "rule," and "orthodox" and yet they have no "doxy." Homeopaths, on the other hand, have a definite Law, and a definite Rule based upon that law. Together these constitute, with the body of observed facts that has been built upon them, the only science of therapeutics worthy of the name that has been given to the world. Brains and application are required for the successful carrying out of the homeopathic Law. There is no royal road to this; and herein lies another, if not the chief, objection allopaths take to homeopathy. It has no cut-and-dried formula for every complaint; but every case that comes to be treated must be considered on its own merits. If homeopathy were as easy as "rolling off a log," as our American cousin would say, much of the allopathic objection to it would disappear.

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DEPLATORY.—Fifty parts sulphide of barium and twenty-five parts each of starch and oxide of zinc, mixed with water sufficient to make a paste, spread on a hairy spot, will in ten minutes when scraped off leave surface perfectly smooth.—*New York Medical Times*.

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## NEWS AND NOTES.

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### MISREPRESENTING HOMEOPATHY.

FROM several quarters we have received copies of the August number of the *Provincial Medical Journal* containing an editorial entitled "Modern Homeopathy." The article is founded on a transatlantic production by a person named Browning. A certain allopathic editor named Gould offered 100 dollars for the most effective misrepresentation of Homeopathy, and Browning is the champion who has carried off the prize. Naturally this organ of a great firm of manufacturing allopathic chemists takes kindly to Browning, though we should have given their editor, Dr. Dolan, credit for more acumen than he has shown in swallowing Browning whole. As we do not care to trouble ourselves with a *réchauffé* of Browning—if we were to undertake to contradict all the lies about homeopathy, first and second hand, we should have no time left in which to cure our patients—we have sent to America for a copy of his effusion, and when it arrives we shall doubtless have something to say about it.

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### PSYCHIC AND PLASTIC MEDICINE.

THE August number of the *Medical Advance*—a journal which should be in the hands of all true homeopathsists—publishes the article contributed to the World's Homeopathic Congress by Dr. Gallavardin, entitled *Psychic and Plastic Medicine*, the article having arrived too late to be included in the Congress proceedings. Dr. Gallavardin opens up a field which, if not exactly new, is at least very rarely trodden, but which deserves the serious attention of medical men. The more civilisation advances the more difficult does it become to distinguish between crime and mental disease. All honour, then, to homeopathy, which has so many means of modifying morbid mental conditions, and to those homeopathsists who are not appalled by the difficulties of the task but set themselves manfully to carry it out.

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## INFLUENZA.

THE *Chemist and Druggist* of September 2nd has a leading article on the report of Drs. Parsons and Klein on Influenza, the former dealing with the clinical features of the disease, and the latter with its bacteriology. The "science" of the disease appears to be about as unsatisfactory as the ordinary treatment; and as for the practical outcome of all the learned research, it inevitably recalls to mind the parturient mountain and the ridiculous mouse. Here is an extract from the article alluded to:—

"It is, perhaps, a pity that the discovery of the microbe is accredited to Pfeiffer, but since 'knowledge is of things we see,' it is fair to say that the Pfeiffer bacillus is the influenza-bacillus, sufficient in itself to account for the initiatory symptoms of the disease, and so destructive of the bronchi as to leave them open to inflammatory and pneumonic attack. Because Dr. Klein has tried to reproduce the disease by inoculation in 30 rabbits and 18 monkeys, and only succeeded in getting one monkey to catch anything like the 'grip,' we are not to conclude that the bacillus is harmless, but that these animals are immune to it. After Dr. Klein had experimented upon the monkeys, he discovered that there had been no influenza amongst the dwellers in the monkey-house at the Zoo. 'It can hardly be supposed that if monkeys were, as a class, susceptible to the infection of human influenza, the creatures living in the monkey-house, frequented by many thousands of people a month, while influenza was abundant in the London population, would have kept free from the complaint. And from the general experience of the Gardens of the Zoological Society, it would appear that few mammalia can share with the human subject a susceptibility to epidemic influenza. At all events, few of them are liable to receive the infection by the method which habitually obtains in man—through the respiratory passages.' Dr. Parsons and Dr. Klein agree that the 'pink-eye' of horses is not the same disease as human influenza.

"The practical conclusions of the inquiry are extremely meagre, and consist chiefly in fresh proof of what has been known before. The bacillus does not live long after exposure to the air, therefore, says the report, free ventilation of apartments should be encouraged before influenza comes into a household. Since the mouth-secretions contain the infective material, they should be disinfected, and it will be advisable for those afflicted to blow their noses with pieces of rag or paper, burning these immediately. Had any other than a Government Department concentrated the results of a scientific inquiry in these pregnant

precautions we might have smiled, but now, as it is, we must look wise and allow the British public to pay for its science."

#### ECONOMIC BREAD.

DR. GALLAVARDIN has sent us a reprint of an article contributed by him to the *Lyon Medical* of July 2, 1893, entitled "Economic Bread, tasty, nourishing, made with white flour kneaded with infusion of bran." The process is as follows: Half a pound of bran is boiled in two quarts of water and then this is passed through a very fine metallic sieve. When the water has become tepid it is used for kneading the bolted flour, the rest of the bread-making process being carried out in the usual way.

\* \* \* As the present issue of the HOMEOPATHIC WORLD has been edited from abroad the indulgence is craved of correspondents whose communications may not have received due recognition.

THE SALIVA OF CATS AND DOGS.—Signor Tiocca has lately published a series of interesting observations on the saliva of cats and dogs. He finds that of the cat swarms with various kinds of microorganisms. Amongst the latter he has discovered a new pathogenic form of very constant occurrence, which kills guinea-pigs and rabbits inoculated with it within twenty-four hours. The same observer found the saliva of the dog charged by an even greater number of bacteria, some of them pathogenic, while there were numerous ova of flukes and intestinal worms. These statements are, to say the least of it, of a suggestive nature. The exact relation of domestic animals to ourselves in the communication of disease offers an interesting and wide field of investigation. Here, at any rate, is scientific chapter and verse to condemn the practice of kissing dogs and cats, or of allowing them to lick one's face or hand.—*Medical Press*, July 26th.

SLOW PULSE.—According to Dr. D. W. Prentiss (*St. Louis Med. and Surg. Journal*) the causes which produce slow pulse may be classified as follows: 1. Diseases or injuries to the nerve centres, producing either irritation of the pneumogastric or paralysis of the sympathetic (accelerator) nerves of the heart. 2. Diseases or injury of the pneumogastric nerve, increasing its irritability. 3. Disease or injury of the sympathetic nerves of the heart, paralyzing them. 4. Disease of the cardiac ganglia, by which the influence of the pneumogastric nerve preponderates. 5. Disease of the heart muscle (degeneration), whereby it fails to respond to the normal stimulus. 6. The action of poisons, as lead or tobacco, either on nerve endings or centres. The poison generated in salt fish. Also the poison of certain febrile diseases, algid pernicious fever. Another possibility is malaria poisoning.—*New York Medical Times*.

## ORIGINAL COMMUNICATIONS.

### A CASE OF PSEUDO-HYPERTROPHIC PARALYSIS.

By M. CAHIS, M.D.

A BOY, R. A., *æt.* 9 years, came to me in August, 1892, complaining of general weakness. He often used to fall and could scarcely go up stairs. His attitude, protruding his belly, and his foolish-looking face struck my attention. On my laying down a coin on the floor and inviting him to pick it up, he did so, but raised himself with much difficulty, having to lean upon his knee. His legs, especially the left, were much swollen and hard, but not inflamed. The skin in this part was marbled, somewhat atrophied, and a little cold. The patellar reflexes had disappeared, and that of the scrotum was somewhat diminished. The muscles of the other regions were a little atrophied, especially those of the arms and back. This (the dorsum) was inclined backwards in cipose, whereas the lumbar vertebræ were in lordose. A plummet hung close to the back passed 2 or 3 centimetres behind the vertical line of the sacrum.

The circumference of the left leg was at this time 30 centimetres, and that of the right 28.

The electric reactions were as follows: the sensibility to the extra-current and the induced was almost normal, the contractibility diminished. Erb's reaction, even with 5 or 6 milliampères, was absolutely nil.

I gave him *Curare* 3 c. trituration, and when he returned the following month, his mother said that the boy did not fall so frequently, was more animated, and wanted to play with his companions.

He went on so till the month of March, 1893, by which time the back was in the same plummet as the sacrum. The circumference of the right leg was 27 centimetres, and that of the left 28.5, but he fell oftener. I gave him *Curare* 2 c. trituration, to be taken every other day.

In May his condition was the same. *Curare* 200 c. from Dr. Willmar Schwabe, of Leipzig, to be taken every other day.

From that time till now he has been much relieved. Has been stronger and brighter, and his schoolmaster is surprised by the improvement in his mind.

The electric reactions are the same as formerly, but the back does not protrude so much, and the measurements of the legs are as follows: the right one 26 centimetres, the left 27.50.

*Curare* has been the only medicine I have prescribed for him; and it seems to me that it was the most indicated, both for its mental condition and for its muscular damage.

Raurich, 17, 1<sup>o</sup>, Barcelona,  
August 9, 1893.

## THE EPIDEMIC OF MEASLES IN DUNEDIN, N.Z.

By WM. LAMB, M.B., C.M.

In a previous communication I referred to the measles epidemic we have just been experiencing in this city. I propose now to send a more detailed account. In passing I might remark that it has spread throughout the entire colony, through both North Island and South Island, city and country.

The first case I was called to see was on the 3rd of April of this year (1893). I did not have another till the 24th of April. (On this date I asked one of our doctors here, who has the largest lodge practice, what experience he was having as to measles. His reply was that he had already seen 250 cases.) From that out they came as thick as leaves in autumn, so that the epidemic was in full force all through the month of May, and has been gradually tapering off during June, so that at present (June 24th) I have only one patient on hand.

Three features arrest attention regarding this epidemic, viz. :—

1. Its widespread character. Hardly a house where there were children escaped.

2. The number of adults attacked.

3. The number of recurrences, many being attacked a second time during this epidemic who had measles in early life.

It began mildly during April and part of May, but assumed a graver aspect from about the middle of May to the middle of June. This I attribute to the change of temperature, the weather getting much colder and wintry. The newspapers told the sad tale day after day, as one child's death after another was chronicled, the usual

cause being "inflammation," *i.e.*, bronchitis, congestion and inflammation of the lung. Again homeopathy shines with its beneficent light, as I have the gratifying statement to make that, as the only homeopathic physician in Dunedin, I did not contribute a single death to the registrar, who allowed me to go through the statistics for May and June.

The mortality, beginning on the 3rd of May, is as follows:—

- May 3. One (male, 8 years).  
,, 4. One (male, 16 months).  
,, 10. One (female, 7 months).  
,, 11. One (female, 2 years).  
,, 14. Two (male, 15 months; male, 1 year).  
,, 18. One (male, 1 year).  
,, 20. One (male, 13 months).  
,, 23. Two (female, 2 years; male, 4 years).  
,, 24. Two (female, 3 years; female, 4 months).  
,, 25. One (male, 2 years).  
,, 26. One (female, 2 years).  
,, 27. Two (female, 16 months; male, 1 year).  
,, 28. Two (female, 10 months; female, 8 months).  
,, 30. Five (male, 2 years; male, 9 months; male, 1 year; male, 3 years; male, 5 years).  
,, 31. Two (female, 16 months; male, 1 year).
- June 1. Three (female, 9 months; male, 14 months; female, 15 months).  
,, 2. Three (female, 2 months; male, 1 year; female, 8 years).  
,, 3. One (female, 14 months).  
,, 5. One (male, 7 months).  
,, 7. One (female, 18 months).  
,, 8. Two (male, 1 year; male, 10 months).  
,, 9. One (male, 2 years).  
,, 11. One (male, 9 months).  
,, 13. Two (male, 7 weeks; male, 2 years).  
,, 14. Two (male, 1 year; male, 17 months).  
,, 16. One (female, 18 months).  
,, 17. One (male, 11 months).  
,, 19. One (male, 6 months).

Of these 45—28 males, 17 females—89 were 2 years and under; the eldest 8 years, the youngest 7 weeks.

If ever there was a heavy indictment against allopathic treatment, I contend that the above record is one, showing its helplessness in the presence of severe acute chest

disease, for nearly every one of the above deaths was from one or other of the following: Acute bronchitis, congestion of lungs, pneumonia, broncho-pneumonia.

The above list, then, gives a record of 45 deaths in the epidemic, which I have no hesitation in saying, under proper homeopathic treatment, would have been reversed. The thought that strikes me on looking over this death-roll is, "What a slaughter of the innocents!" Some deaths are doubtless due to measles which are recorded as diarrhea, enterocolitis, and convulsions. I think that I am within the strict truth in stating the mortality of the entire epidemic in Dunedin to be 50. And I think I am within the margin in affirming that 45 out of the 50 would have been living to-day had proper homeopathic treatment been employed in place of allopathy, 16 doctors contributing the above list.

The difference of treatment, apart from medicine, was very marked. My children, on visiting some of their schoolmates, told them how they enjoyed the little drinks of cold water when they were ill. Their friends exclaimed at this, as their doctor would not allow them to have anything cold to drink. And when my children told them how they enjoyed their warm bath, how it soothed and refreshed them, their playmates were astonished beyond measure, as their doctor would not let them wash their faces for a fortnight. All my patients expressed such satisfaction from the daily warm bath (98° F.).

My experience extended over 150 cases, from an infant of 14 days to adults of 20 and 23, and a lady of 51. Amongst these I reckon 12 pneumonia cases, all of which recovered. One of these in particular has done homeopathy great good. There were three in the family, and all were attacked with measles. The eldest, aged 8, took pneumonia and died under allopathic treatment. Then the youngest, aged 3, took pneumonia, and I was called in, and recovery took place, although I had a hard fight for it. The circumstances were such that a most favourable impression has been made in favour of homeopathy.

One peculiar point I observed in my pneumonia cases was that the part generally attacked was the right base posteriorly.

Another peculiarity I noticed was in connection with the skin, an *urticarious eruption*, in one case preceding the true morbillous rash, in another succeeding it. In the



books you read of eczema, ecthyma, and pustular eruptions, but not *urticaria*.

The enlarged lymphatic glands were very noticeable in connection with the rash.

In some there was ulcerative stomatitis. I was fortunate enough to have no convulsions, but abdominal pain, diarrhœa, otorrhea, epistaxis, offensive odour from body, and itching were prominent symptoms in different patients.

I was greatly struck with the sharp contrast between the condition of the morbillous patient on the night of the third day of the eruption and on the following morning. At night he would be at his worst, like a ship on the top of the fury of a storm, next morning quite easy, as if in a beautiful calm.

*Treatment.*—My main reliance was upon *Acon.* 1x (radix) and *Puls.* 1c, mij. of each on alternate hours. But it is quite erroneous to claim for homeopathy exemption from complications or sequelæ, if these two medicines are taken, as my experience emphatically disproves. One of my worst pneumonia cases was a child, 18 months old, who had been taking the above, and kept warm in one room with a fire continually burning. Again, one of the worst cases I saw was that of a little girl, about 3 years old, who had been taking our homeopathic chemist's mixtures of *Acon.* and *Puls.* for several days when I was summoned hurriedly to see her. I shall not readily forget the nervous agitation, trembling as if she would go into convulsions any moment, the high temperature and quick pulse, with eyes closed and matter oozing out of them. I had a hard tussel with this case, and I was not surprised that it ended with otorrhea.

I found Hale's advice as to *Verat.-vir.* 1x good, and when *Aconite* was not coming off satisfactorily, I fell back upon it with good result.

I was disappointed with *Phos.* 4x 3c, *Bry.* 12c, and *Ant.-tart.* 1c, in the majority of my pneumonias, depending more on *Sang.* 1, but especially of *Iodum* 1x, which I found to be "a prince and a king" in my worst cases, and to it, alternated with *Verat.-vir.* 1x mij. viij., I attribute my uniform success in this epidemic pneumonia. How it happens I don't know, but homeopathy always comes off triumphant in my pneumonias, broncho-pneumonias, and pleuro-pneumonias, whether they be of epidemic morbillous or epidemic influenzal origin. Of all my cases of influenzal

chest disease during the past two or three years I lost none.

*Puls.* 1c 3x usually controlled the diarrhea, but, if not, *Merc.-cor.* 3x gr.j. had the desired effect. The character of the stools was a *greenish slime*.

A curious point as to dosage was the action of *Ipec.* in vomiting. My second daughter (14), during the second day of the eruption, could not keep even cold water down. I gave her *Ipec.* 1x without the slightest effect, but on giving *Ipec.* 12c no vomiting occurred after the first dose. The same thing happened to my youngest, a boy of 18 months. This is another illustration that it is not all in the choice of the remedy, but also sometimes in the potency.

My second son, on the third day of the eruption, was greatly tormented with itching, which was promptly relieved by inunction of *Camphorated Oil*, after the unsuccessful use of *Carbolic Oil* (1.20).

*Euphrasia*  $\phi$  3j.  $\zeta$ vj. acted efficiently as lotion for the eyes.

*Kali.-bichr.* 3x was serviceable for the cough.

*Kali.-mur.* 3x very good for otorrhea with tenacious mucus, and it succeeded in cough where *Kali.-bich.* failed; *sputa tough and clinging*.

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## REMARKS ON THE "MATERIA MEDICA."

By EDWARD MAHONY, M.R.C.S., L.S.A.

I HAVE thus designated the papers purposed now to be commenced, omitting the word homeopathic designedly, for the simple reason which will be apparent at the outset, namely, that Hahnemann proved, before commencing what we now commonly speak of as the *Homeopathic Materia Medica* or the *Hahnemann Materia Medica*, that no such work, in the true sense of the words, previously existed; and it often greatly helps the mind to grasp what really exists, if it has a clear conception of what the subject before it certainly is not. It will also help greatly to enlarge the sense of what humanity owes to homeopathy to know that until the labours of Hahnemann and his colleagues, no true materia medica whatever existed. This way of putting it may strike some minds at the same time as remarkable as undoubtedly numerous works exist, and

in many languages also, proving therefore corresponding nationalities, and these works could easily be shown to be both learned, painstaking, and laborious. Pharmacopeias also can be produced correspondingly numerous, and carefully prepared, to say nothing of the very large number of unofficial books of prescriptions, recipes, and recommendations from recognised and highly esteemed members of the medical profession of all ages, from Hippocrates to our day. To face the whole of these ponderous volumes of learning and hoary antiquity, the whole of these authorities whose pupils and followers were at least the entire civilised human race, and prove clearly and distinctly that no such thing as a *materia medica* existed, was one part of the genius and labour of our author. In this department, therefore, of medical science, he had, as elsewhere, first to demolish the delusion that science existed in this vitally important department of human knowledge, and then to construct a science *de novo*. It will not be necessary to seek to draw a picture of what must have been the condition of suffering humanity up to this point, or since, where this true knowledge is rejected, each can conjecture it for himself and herself; only I should like to ask any who may not have thought of the matter quite from this point before, but may have had the impression that homeopathy took up and improved something previously existing, to ponder a little over this point, and will pass on to give briefly some of the proofs our author brings forward in justification of his certainly startling language. They are taken from another invaluable but little known collection of works of his translated and edited by Dr. Dudgeon under the title, *Lesser Writings*; and which are most instructive and interesting, as he gives in them the gradual opening out of the truth to his own mind.

The papers from which I quote are called sources of the common *materia medica*, and he gives as these *sources* (note well the expression)—

1. Authorities. N.B. These are proved to be authors' names.

2. Arbitrary opinions, ideal and dreamy hypotheses which have been moulded to-day into one form, and on the morrow into a new form, exactly as the dominant medical system for the time being commanded (!). The remedies employed by the ancients, as alexipharmaca (antidotes to poisons), cephalica (acting on the brain),

splenica (spleen), uterina (womb), had afterwards to undertake the office of anti-spasmodic and anti-nervous remedies. When the prevailing system assumed tension and laxity of the fibres as the foundation of disease, the very same medicines which had hitherto performed a different part were forced to be twisted into one of these two directions.

3. *Mere guess-work and fiction* which attempts to set forth the *general therapeutic virtues* of drugs. He quotes Dioscorides seventeen centuries ago as language now repeated, and "*which does not turn out true; the same general assertions, which do not hold good when put to the trial at the sick bed.*"

4. *Their sensible properties* (i.e., of drugs) from which their action may be inferred. Examples of these were found among the *ancient physicians* from their colour and form, and in more modern times from their smell and taste.

5. *Chemical properties*. This, any one may know, largely prevails in the present day, and is peculiarly dangerous and misleading, because it is an illustration of that most dangerous of all dangerous things, truth out of place. I will merely add here what seems to me to lie at the root of half the delusion that exists, quoad chemistry—a sufficiently splendid science in itself—namely, an effort to treat the vital processes of both human beings and animals, as though, *chemically*, there were no difference between these and the corresponding chemical processes in the inorganic kingdom of nature, as though, *e.g.*, because acids and alkalis in definite proportions neutralise one another in the inorganic world, therefore given acidity in the human stomach, an alkali will neutralise it. One other point I may remind my readers of here, namely, Hahnemann's acknowledged reputation as both a practical and scientific chemist, and one, therefore, who knew well the value of chemistry in its own sphere.

6. *Clinical and special therapeutic indications for employment* of medicines, i.e., from their use in diseases. In combating this fallacy we are first reminded that the medicines were never given singly, but always in a mixture; hence it could never be said which had been efficacious. Supposing that happily a good result ensued, therefore, "*nothing at all was learned.*" It is admitted, under this heading, that "chance" cures occurred, such as Cinchona

for a species of intermittent fever, and arnica for the effects of bruises; but it is plain, especially as these and others were discovered for the most part by non-medical persons, that these do not affect the general argument, and that all such cases being, after all, empirical, it remained true that no *science* of materia medica existed.

So much, then, for what materia medica *is not*: now for what it is, or should be. In referring to this subject in the latest edition of the *Organon* recently published by the Hahnemann Publishing Society, our author says, p. 129, "From such a materia medica everything that is conjectural, all that is mere assertion or imaginary, should be strictly excluded; everything should be the pure language of nature carefully and honestly interrogated." This brief but comprehensive statement stands in grand contrast to the opinions, assertions, speculations, &c., which have just been enumerated, and we find that here, as in the *Organon*, the one point insisted upon is that truth itself as distinct from all mere supposition is to be pursued, reached, and then maintained. The important point maintained throughout being that there must be, and is, a basis or foundation, known and proved, before there is any ground on which to reason: a premiss assured before inferences are drawn. This much being clear, and assured, for this part of our subject, and it being also clearly understood that of all the varied ways in which reliable information as to the healing properties of medicinal agents has been obtained none is so certain and satisfactory as that of the proving of medicines on healthy persons of both sexes, we can now pass to the consideration of the materia medica as contained in the four volumes of the *Chronic Diseases*, and the four volumes of the *Materia Medica pura*; and my object here being, as previously in the papers on the *Organon*, to bring into prominence the fact that homeopathy both in its application to disease and to the treatment of disease is a science entirely new, and having nothing in common with previously taught medical therapeutic science (?), but, on the contrary, is as different as light from darkness, clearness from confusion, certainty from uncertainty, order from chaos; my object being to bring this into prominence, I shall take up first the anti-psorics, being increasingly convinced that Hahnemann's doctrines on this subject are sound in practice, whatever the theory may be, and consequently that some knowledge

of these medicines naturally and properly follows the study of the *Organon*. I shall also first of all, as further elucidating this point, look first at the general remarks at the headings of the various medicines, so as to extract, as far as may be in such brief *résumé*, the philosophy of the subject, its genius.

Before passing to this, however, one general remark may be made which, though simple and elementary, is nevertheless for practical purposes of the greatest possible moment, namely, that the more extensive the proving of a medicine has been, the more distinctly does it come out *that it affects every part of the body*.

The consistency of this fact with the fact that it is a *law*, that for healing purposes there must be a correspondence between medicinal action and the condition of the patient, will be evident from a very little reflection, as also the equally important point that a medicine given under this law (of similars) *commands* the entire person, hence another administered alternately, in rotation, can but interfere with the action that is going on. With these preliminary observations let us turn to the medicines themselves, as placed in their alphabetical order. I will first simply enumerate them for the benefit of any who may not have had the opportunity of thus distinguishing them as a class—*Agaricus, Alumina, Ammon.-carbonicum, Ammon.-muriaticum, Anacardium, Antimonium-crudum, Aurum, Aurum-muriaticum, Baryta-carbonica, Borax, Calc.-carbonica, Carbo-animalis, Carbo-vegetabilis, Causticum, Clematis, Coloc., Conium, Cuprum, Digitalis, Dulc., Euphorbium, Graph.-Guaiac., Hep.-sulph., Iodine, Kali.-carbonicum, Mag.-carbonica, Mag.-mur., Mangan., Mezer., Natr.-carbonicum, Natr.-mur., Nitric-ac., Nitrum, Petrol., Phosphorus, Phosphoric acid, Platina, Sassaaparilla, Sepia, Silica, Stannum, Sulphur, Sulphuric-acid, Zinc, Arsenic.* *Agaricus*: the names here are mentioned of those who, besides himself, had tried this remedy, and in a note he adds, "As regards the symptoms of other observers, I have often found it necessary for the convenience of my readers, to abbreviate long-winded accounts and to adopt more intelligible expressions in the place of unknown and unintelligible idioms. I have not knowingly made any essential alterations." These remarks speak for themselves, so we will pass on to *Alumina*, and here occurs the important note. "The affections which I have indicated in the preface to every

remedy are not to be considered as names of diseases, but merely as isolated symptoms, which have either decreased or disappeared by using the remedy under whose head they are mentioned. These affections have not always been indicated with the necessary correctness. They should never be relied upon as indicating the affections which may be cured by this special remedy; they are merely mentioned in order to inform the reader that experience, obtained at the bedside of the patient, has proved certain remedies, which had been chosen agreeably to their pathogenetic symptoms, curative in the diseases for which they had been administered." We see here once more the importance of not thinking of diseases as mere names, and also the proper place of clinical (bedside) information, namely that it supplements, confirms the pathogenetic, or information obtained by provings on the healthy. One may observe here also the remark, "In the following affections, *provided the remedy was otherwise homeopathically indicated* (italics mine), *Alumina* has been found especially useful."

*Ammon.-carb.*: attention is here called to the fact that *Ammonium* is useful against a tendency to gangrene, that cancerous and mortifying tumours evolve a large quantity of *Ammonium*, that *Ammonium* is useful in affections of the female sexual organs, that *Ammonium* is evolved from the skin during menstruation, that *Ammonium* relieves the symptoms of poisoning by fungi, and that *Ammonium* is a characteristic constituent of those growths. *Anacardium*: "The juice is so sharp that moles may be etched away by it. The Indians mark their linen in an indelible manner by it. It was much used by the Arabians." These last two remarks are illustrations of the *honest* appropriation by homeopathy of the labours or discoveries of others. *Aurum*: several instructive remarks are made here. 1. Gold is an instance of a really powerful medicine having been refused by the old pharmacopeists from ignorance of the way in which to extract its medicinal virtues. Ignorance, however, did not prevent the *ex-cathedra* statement, "that it could not be dissolved in the gastric juice, and that it was therefore powerless and useless." These and other equally untenable assertions made our author "doubtful about the medicinal powers of gold." However, one quintillionth in solution obtained a few symptoms, and further research brought to light that the Arabian

physicians had proved its remedial virtues. Others, as Geber, Serapion the younger, Avicenna, Abulkarim, and a Portuguese, Zacutus, further by their observations encouraged him to persevere, and finally he cured several cases of persons who, from melancholy, earnestly thought of killing themselves; then cases of cancer of the palate and nasal bones.

*Baryta-carb.* : note here again, "may be advantageously used in the following affections, provided it be homeopathically indicated."

*Calc.-carb.* "This is one of the most powerful antipsorics, and may be used with especial benefit in the following affections, if otherwise indicated." "Is frequently useful after *Sulph.*, especially when the pupils are prone to become dilated." This is an illustration of the value of observation of apparently trivial symptoms, which is continually recurring in the true materia medica. Another important observation is that in advanced age, *Calcarea*, even after other intermediate remedies, can scarcely be repeated with advantage; given a second time without any previous intermediate remedy, it is almost always prejudicial; in cases of children, however, several doses may be given in succession; the younger the children the more frequently. There is also a kind of mutual harmony between *Calc.* and *Nitric acid*, either following the other if its action, though good, had been in some respects unfavourable. With *Calc.* ends vol. ii., but volume iii. contains a preface presenting some remarks on the best mode of exhibiting drugs in chronic maladies, some points of which may be noted with advantage; and first as to frequency of repetition, he observes on the vast difference among patients as regards irritability (medicinal), age, mental and physical constitution, vital energies, and especially the nature and intensity of disease, whether simple, with complicated symptoms, or, worst of all, with a combination of medicinal and natural symptoms, which calls for a corresponding difference both of treatment of disease and of doses.

With regard to the latter, which concerns us now, he gave as an habitual thing a tablespoonful of medicinal solution every day or every two days. He allows, on account of water soon spoiling, the addition of spirits of wine, or, where this disagrees, hard charcoal. He repeats the warning of the instruction in the *Organon*, that where



medicine is applied externally, it must be on parts most free from pain, and where the skin is healthy and free from cutaneous eruptions. He further states that "our vital forces are not affected with the same benefit by two or more successive doses of the same remedy." To meet this fact practically he advises the due succussion of the medicinal solution and the thorough stirring of the cup containing the same. Here again we observe the importance of altering if possible, however slightly, the condition of the medicine at each administration; the delicacy, in other words, of the shadings in degree between idem (the same) and simillimum. Finally, once more, he refers in this preface to the value of olfaction in cases of "great irritability and extreme weakness" as a means of producing a stronger or weaker impression.

## A LECTURE ON THE *ORGANON*.

By JOHN H. CLARKE, M.D.

### PREFACE.

THE following lecture was originally delivered at the London Homeopathic Hospital as part of a post-graduate series. The text used in compiling the lecture was the first edition of Dr. Dudgeon's translation. Now that the new translation has happily appeared,\* I have availed myself of the latter for making my quotations.

The lecture will be all the more acceptable to readers of the HOMEOPATHIC WORLD, as following the valuable series of articles on Hahnemann's great works by Dr. Mahony. It was delivered before the latter were written, and it follows somewhat different lines.

### I.—HIPPOCRATES AND HAHNEMANN.

There are two books in the literature of medicine, and two only, which stand out in absolute preeminence over all other medical writings, however excellent these may be. With the *Aphorisms* of Hippocrates medical history had its beginning, and with the *Organon* of Hahnemann medical history begins anew. The Father of Medicine sums up in

\* *Organon of Medicine*. By Samuel Hahnemann. Translated from the fifth edition, with an Appendix by R. E. Dudgeon, M.D. Hahnemann Publishing Society. 1893.

eight books of aphorisms, numbering 422 in all (supposing them all to be authentic), the practical wisdom of his day in the art and science of medicine; and so true is his estimate of what he observed, and so sound his judgment, that his descriptions of diseases and their gravity, and his general rules of treatment have scarcely been bettered by writers who have come after. Hahnemann, in his *Organon*, has likewise chosen the aphoristic form as the vehicle for his teaching. In a series of 294 aphorisms he sets forth the whole duty of the medical man. Hippocrates is more the artist of medicine, who saw clearly and described truly what he saw: Hahnemann is philosopher as well as artist. No less practical than Hippocrates he goes down into the reasons of things in a way it was not possible for Hippocrates to do.

Let me quote, almost at random, a few of the sayings of the Father of Medicine, to illustrate my meaning:—

“When the disease exists in all its vigour, it is necessary to use the most sparing diet” (i. 8).

“Old men are best able to bear fasting, middle-aged persons bear it less easily, youths with still less ease, and children least of all. Of the last, those especially who are of a lively and active disposition” (i. 13).

“Those diseases which are undergoing, or have already undergone, the crisis should neither be disturbed nor altered by medicines, or anything else that may cause excitement, but should be suffered to take their course” (i. 20).

“Too much sleep and too much watching are equally injurious” (ii. 8).

“Spontaneous lassitude is the forerunner of disease” (ii. 5).

“Diseases arising from repletion are cured by evacuation; and those which proceed from evacuation are cured by repletion; and so in other cases diseases are removed by means which are exactly contrary to the causes” (ii. 22).

[Here, I may remark, is the genuine sphere of an allopathic principle, which is sound enough provided it is confined to the cases in which it is fairly applicable.]

“Acute diseases come to the crisis in fourteen days” (ii. 23).

“The fourth day is the indicator of the seventh; the eighth is the commencement of the second week. The eleventh day should likewise be attended to, for it is the fourth of the second week; we should also remark the seventeenth day, for it is the

fourth from the fourteenth and the seventh from the eleventh" (ii. 29).

"It is better that a fever should happen after a convulsion than a convulsion after a fever" (ii. 26).

"A convulsion caused by a sorrow is mortal" (v. 2).

These are sufficient to remind you of the character of this monument of antiquity. The celebrated passage in which the homeopathic idea is stated does not occur in the book of Aphorisms, but in another work attributed to Hippocrates—"περὶ τόπων τῶν κατ' ἄνθρωπον"—and, whether really his or not, the book is of undoubted antiquity. Hahnemann quotes it in his *Introduction*. The following is the passage:—

"διὰ τὰ ὅμοια νοῦσος γίνεται, καὶ διὰ τὰ ὅμοια προσφερόμενα ἐκ νοσηντων ὑγιαίνονται,—διὰ το ἕμειν ἔμετος παύεται" ("Through likes disease arises, and through likes being made use of diseases are healed in the sick—through vomiting sickness ceases").

The difference in the tone and the scope of the two works will be apparent if we place side by side the first of the aphorisms of Hippocrates and the first two of those by Hahnemann. There is no more hackneyed quotation in the whole of medical literature than the "Ars longa, vita brevis," which opens the Hippocratic book.

"Life is short; the art is long; the occasion is sudden, experience deceptive, and judgment difficult. Nor is it enough that the physician do his duty; he should also see that the patient and his attendants do theirs, and that external things be well managed."

Compare with this, true enough, but not very inspiring, estimate of the doctor's difficulties and duties the tone and confidence of Hahnemann's exordium:—

"The physician's high and *only* mission is to restore the sick to health—to cure, as it is termed."

This is his first aphorism, and here is his second:—

"The highest ideal of a cure is rapid, gentle and permanent restoration of the health, or removal and annihilation of the disease in its whole extent, in the shortest, safest, most reliable, and most harmless way, on easily comprehensible principles."

Between Hahnemann and Hippocrates there is the

difference between broad daylight and dim twilight. The difficulties of the doctor's position remain much as Hippocrates described them, but Hahnemann has brought the fulness of light to bear upon the difficult places and has shown him a way through some of them. He has brought a new life, hope, and confidence into the practice of the medical art.

To sum up: Hippocrates's *Aphorisms* may be described as a well-ordered collection of excellent tips; Hahnemann's constitute an organic philosophy of medicine. Hippocrates's work reminds us of isolated fragments of some wonderful statue, whilst Hahnemann's is like the living human organism itself.

It is astonishing how little is known by homeopaths generally about the *Organon*. It is seldom the first book that is given to a student. I believe there is a notion that it is chiefly concerned with the *theory* of homeopathics, and everybody is so practical nowadays! Besides, Hahnemann's pathology was so crude and so different from modern pathology! and we know so much more about homeopathy and drug action than he did, that if we take his drug-provings and make use of them we may look upon the rest of his works as entertaining and interesting but scarcely practical and useful.

Now this is as far as possible from the actual truth. If there is one distinguishing feature more than another about the *Organon* it is that it is practical. It contains theory, no doubt; but theory is the most practical of all things—we cannot make progress without it. A theory is "something to see by"; the better and truer the theory the more intelligent the practice. Homeopathy is based on certain theories of disease and drug-action which experience and progress have proved to be sound. But leaving aside all that is theoretical, the bulk of the *Organon* deals with matters of fact and rules of practice.

Before going into details I will just rapidly sketch for you the contents of the volume. My remarks must all be understood to refer to Dr. Dudgeon's translation of Hahnemann's fifth edition, which is the best English translation we have. The fifth edition was published in 1833, Dr. Dudgeon's translation in 1849, the revised translation, from which I quote, in 1893.

## II.—ANALYSIS OF THE “ORGANON.”

The work consists of an *Introduction* of about fifty pages and a text of more than twice that amount.

The Introduction comprises:—

1. A survey of the medical treatment of his time.
2. Examples of homeopathic cures from previous writers.
3. The testimony of physicians of earlier times as to the superiority of the homeopathic principle.

The text may be divided into two parts: the first (comprising the first two aphorisms quoted already) sets forth what the physician ought to *be*, and what he ought to *do*. The remaining 292 deal with what he ought to *know*, and how he ought to set about achieving his object.

But I will summarise it a little more particularly.

### 1. THE DOCTOR'S *RAISON D'ÊTRE* AND THE NATURE OF DISEASE AND MEDICINAL ACTION.

Aphorisms i. and ii. deal with the doctor's aim and mission.

Nos. iii. and iv. tell what he must investigate.

No. v. bespeaks attention to exciting and fundamental causes.

Aphorisms vi.—viii. set forth the importance of the totality of the symptoms in any case as constituting the disease—the thing to be dealt with and done away with. This, in opposition to those who search for the hypothetical hidden cause of disease, and aim at getting rid of that.

Nos. ix.—xv. maintain that disease is of a spirit-like “dynamic” nature, consisting in a derangement of the vital force which can only make itself known through symptoms.

Nos. xvi.—xxi. show that medicines, in order to meet this condition, must be themselves dynamic.

Nos. xxii. and xxiii. discuss the antipathic use of drugs.

Nos. xxiv. and xxv. explain their homeopathic action.

In Nos. xxvi. and xxvii. he enunciates the *law* of homeopathic action; and in the two following (xxviii., xxix.) he attempts to explain the operation of medicines in accordance with the law. As I shall point out presently, Hahnemann, whilst attaching no vital importance to his *explanation* of the law, is perfectly decided as to the law itself.

## 2. SUSCEPTIBILITY OF THE ORGANISM TO DISEASE ACTION AND TO MEDICINAL ACTION.

Hahnemann next (xxx.—xxxiii.) compares the susceptibility of the human body to drug diseases with its susceptibility to natural diseases; and then (xxxiv.—xlx.) he describes the behaviour of different diseases co-existing in the body at the same time, and shows (l.—liii.) that the diseases which cure others are like them—that is, are homeopathic to them. He goes on to show (liv.—lxxi.) that of all methods of using drugs, which he compares elaborately, that as with natural diseases it is only the homeopathic method which really effect cures.

## 3. ACUTE AND CHRONIC DISEASES; HOMEOPATHIC AGGRAVATION; REGIMEN AND DIET; PHARMACY; ANIMAL MAGNETISM.

We now come (lxxii.—lxxxviii.) to a new branch of his subject—a survey of diseases, and his distinction between acute diseases and chronic; then (lxxxiv.—civ.) to the investigation of diseases for which he gives the most precise instructions; then (cv.—cxlvii.) to the investigation of the actions of drugs, rules for proving medicines, and rules for selecting the most like in every case. In cxlviii. he again explains how a cure is probably effected. After an account (cxlix.) of the difference of time required for the cure of acute and chronic diseases, and further rules for selecting and administering the homeopathic remedy (cl.—clvi.), we come to the explanation of the homeopathic aggravation of disease (clvii.—clxi.). Rules for using remedies in various types of diseases take up clxii.—ccli. In cclii.—cclvi. he gives the signs of commencing improvement. The two following (cclvii., cclviii.) utter warning against drug favouritism. Regimen and diet occupy cclix. to cclxxiii. In cclxiv. to cclxxi. he deals with the selection of plants and other substances, and the preparation of medicines therefrom for homeopathic use; in cclxxii.—cclxxiv. he urges the necessity of using *only one simple single* medicine for a patient at one time. The subject of dose and dynamisation is dealt with in cclxxv.—cclxxxvii. The next four (cclxxxviii.—ccxcii.) tell which parts of the body are more or less susceptible to the influence of drugs, with a note on administration by olfaction. Lastly (ccxciii., ccxciv.), he defines the place of animal magnetism.

From this rapid sketch of the contents of the volume you will be able to see that for scope, profundity, originality, and practicability, the world has never seen the like. And I am not going to make any qualification in this estimate and say "compared with all that had gone before;" for it is equally true as compared with all that has come after. There is absolutely nothing to compare with it. The little systems of other men have had their day, and ceased to be: Hahnemann's is built on eternal foundations.

We will now proceed to look more particularly at a few passages. First, we will turn to the Introduction. In a previous lecture I have referred to the essay on a New Principle, which contained, as I endeavoured to show, the germ of the *Organon* and *Materia Medica* both. In this essay Hahnemann formulates the homeopathic principle thus:—

*Every powerful medicinal substance produces in the human body a kind of peculiar disease; the more powerful the medicine the more peculiar, marked, and violent the disease.*

"We should imitate nature, which sometimes cures a chronic disease by superadding another *and employ in the disease we wish to cure that medicine which is able to produce another very similar artificial disease, and the former will be cured, similia similibus.*

We might imagine from this that Hahnemann was a great stickler for the *vis medicatrix nature*, and for blindly following the efforts of the organism to rid itself of diseases. But Hahnemann was no *blind* follower of anything or anybody. He followed nature with his eyes open.

### III.—EXTRACTS FROM THE WORK.

#### THE INTRODUCTION.

I will now read to you a few passages from the Introduction which will show you his estimate of certain doctrines and methods which are not by any means extinct to-day, and also his estimate of the *Vis medicatrix nature*. In these as in all my quotations from Hahnemann I give his own italics, of which he made liberal use.

"A favourite idea of the ordinary school of medicine until recent (would that I could not say the most recent!) times, was that of morbid matters (and acridities) in diseases, excessively subtle though they might be thought to be, which must be expelled

from the blood-vessels and lymphatics through the exhalants, skin, urinary apparatus, or salivary glands, through the tracheal and bronchial glands in the form of expectoration, from the stomach and bowels by vomiting and purging, in order that the body might be freed from the material cause that produced the disease, and a radical causal treatment be thus carried out.

“By cutting holes in the diseased body, which were converted into chronic ulcers kept up for years by the introduction of foreign substances (issues, setons) they sought to draw off the *materia peccans* from the (always only dynamically) diseased body, just as one lets a dirty fluid run out of a barrel through a tap-hole. By means also of perpetual fly-blisters and the application of mezeureum they thought to draw away the bad humours and to cleanse the diseased body from all morbid matters—but they only weakened it, so as generally to render it incurable by all these senseless unnatural processes.

“I admit that it was more convenient for the weakness of humanity to assume that in the diseases they were called on to cure there existed some morbid material of what the mind might form a conception (more particularly as the patients readily lent themselves to such a notion), because in that case the practitioner had nothing further to care about than to procure a good supply of remedies for purifying the blood and the humours, exciting diuresis and diaphoresis, promoting expectoration and scouring out the stomach and bowels. Hence in all the works on *Materia Medica*, from Dioscorides down to the latest books on the subject, there is almost nothing said about the special peculiar action of individual medicines; but besides an account of their supposed utility in various nosological records of diseases, it is merely stated whether they are diuretic, diaphoretic, expectorant, or emmenagogue, and more particularly whether they produce evacuation by the stomach and bowels, upwards or downwards; because all the aspirations of the practitioner have ever been chiefly directed to cause the expulsion of a natural morbid matter, and of sundry (fictitious) acridities, which it was imagined were the cause of diseases” (p. 10, 11).

“But the essential nature of diseases and their cure will not adapt themselves to such fantasies, nor to the convenience of medical men; to humour such stupid, baseless hypotheses, diseases will not cease to be (spiritual) *dynamic derangements of our spirit-like vital principle in sensations and functions, that is to say, immaterial derangements of our state of health*” (p. 11).

“Are, then, the foul, often disgusting, excretions which occur in diseases the actual matter that produces and keeps them up? Are they not rather *always excretory products of the disease itself, that is, of the life, which is only dynamically deranged and disordered*” (p. 14).



“ DERIVATION.”

Further on Hahnemann exposes the doctrine of “ derivation,” which in his day was the favourite excuse for the employment of violent measures.

“ But the more modern adherents of the old school do not wish it to be supposed that in their treatment they aim at the expulsion of material morbid substances. They allege that their multifarious evacuant processes are a mode of treatment by *derivation*, wherein they follow the example of Nature, which, in her efforts to assist the diseased organism, resolves fever by perspiration and diuresis, pleurisy by epistaxis, sweat and mucous expectoration—other diseases by vomiting, diarrhea and bleeding from the anus, articular pains by suppurating ulcers on the legs, cynanche tonsillaris by salivation, &c., or metastases and abscesses which she develops in parts at a distance from the seat of the disease.

“ Hence they thought the best thing was to *imitate* nature by also going to work in the treatment of most diseases in a circuitous manner, like the diseased vital force when left to itself, and thus in an indirect manner, by means of stronger heterogeneous irritants applied to organs remote from the seat of the disease, and totally dissimilar to the affected tissues, they produced evacuations and generally kept them up, in order to *draw*, as it were, the disease thither.

“ *This derivation, as it is called, was, and continues to be, one of the principal modes of treatment of the old school of medicine*” (pp. 16, 17).

On this principle all sorts of severe measures, such as blood-letting, mercurial salivation, counter-irritants, and cauteries of all kinds were employed. Hahnemann goes on to show that mere imitation of nature is not a thing to be aimed at. Nature may be imitated in her method of *cure*; but not the vain efforts of the organism to rid itself of a disease.

“ When the old-school practitioners, thoughtlessly imitating the crude, senseless, automatic vital energy, with their counter-irritant and derivative methods of treatment, attack innocent parts and organs of the body, either inflicting on them excruciating pains, or, as is most frequently done, compelling them to perform evacuations, whereby strength and fluids are wasted, their object is to direct the morbid vital action in the primarily affected parts away to those artificially attacked, and thus to effect the cure of the natural disease indirectly, by the *production*

*of a disease much greater in intensity and of quite a different kind, in the healthy parts of the body, consequently by a circuitous way, at the cost of much loss of strength, and usually of great sufferings to the patient" (p. 21).*

Here is his summary of the whole matter :—

*"No! that exquisite power innate in the human being, designed to direct in the most perfect manner the operations of life, while it is in health, equally present in all parts of the organism, in the fibres of sensibility as well as in those of irritability, the unwearied spring of all the normal, natural functions of the body, was not created for the purpose of affording itself aid in diseases, not for the purpose of exercising a healing art worthy of imitation. No! the true healing art is that reflective work, the attribute of the higher powers of human intellect, of unfettered judgment, and of reason selecting and determining on principle in order to effect an alteration in the instinctive, irrational and unintelligent, but energetic, automatic vital force, when it has been denoted by disease with abnormal action, and by means of a similar affection developed by a homeopathically-chosen remedy, to excite in it a medicinal disease somewhat greater in degree, so that the natural morbid affection can no longer act upon the vital force, which thus; freed from the natural disease, has now only the similar, somewhat stronger, medicinal morbid affection to contend with, against which it now directs its whole energy, and which it soon overpowers, whereby the vital force is liberated and enabled to return to the normal standard of health and to its proper function, 'the maintenance of the life and health of the organism,' without having suffered, during the change, any painful or debilitating attacks. Homeopathy teaches us how to effect this."*

#### ORGANON OF MEDICINE.—1. OPENING PARAGRAPHS.

I will now quote some of the paragraphs of the *Organon* itself, and will begin with the first.

##### § 1.

The physician's high and *only* mission is to restore the sick to health—to cure, as it is termed.

##### § 2.

The highest ideal of a cure is rapid, gentle, and permanent restoration of the health, or removal and annihilation of the disease in its whole extent, in the shortest, most reliable, and most harmless way, on easily comprehensible principles.

§ 3.

If the physician clearly perceives what is to be cured in diseases, that is to say, in every individual case of disease (*knowledge of disease, indication*), if he clearly perceives what is curative in medicines, that is to say, in each individual medicine (*knowledge of medicinal powers*), and if he knows how to adapt, according to clearly defined principles, what is curative in medicines to what he has discovered to be undoubtedly morbid in the patient, so that recovery must ensue—to adapt it, as well in respect to the suitability of the medicine most appropriate according to its mode of action to the case before him (*choice of the remedy, the medicine indicated*), as also in respect to the exact mode of preparation and quantity of it required (*proper dose*), and the proper period for repeating the dose;—if, finally, he knows the obstacles to recovery in each case, and is aware how to remove them, so that the restoration may be permanent: *then he understands how to treat judiciously and rationally, and he is a true practitioner of the healing art.*

§ 4.

He is likewise a preserver of health if he knows the things that damage health and cause disease, and how to remove them from persons in health.

§ 5.

Useful to the physician in assisting him to cure are the particulars of the most probable *exciting cause* of the acute disease, as also the most significant points in the whole history of the chronic disease, to enable him to discover its *fundamental cause*, which is generally due to a chronic miasm. In these investigations, the ascertainable physical constitution of the patient (especially when the disease is chronic), his moral and intellectual character, his occupation, mode of living and habits, his social and domestic relations, his age, sexual function, &c., are to be taken into consideration.

§ 6.

The unprejudiced observer—well aware of the futility of transcendental speculations which can receive no confirmations from experience—be his powers of penetration ever so great, takes note of nothing in every individual disease except the changes in the health of the body and of the mind (*morbid phenomena, accidents, symptoms*) which can be perceived externally by means of the senses; that is to say, he notices only the deviations from the former healthy state of the now diseased individual, which are felt by the patient himself, remarked by

those around him, and observed by the physician. All these perceptible signs represent the disease in its whole extent, that is, together they form the true and only conceivable portrait of the disease.

## § 7.

Now, as in a disease, from which no manifest exciting or maintaining cause (*causa occasionalis*) has to be removed, we can perceive nothing but the morbid symptoms, it must (regard being had to the possibility of a miasm, and attention paid to the accessory circumstances, § 5) be the symptoms alone by which the disease demands and points to the remedy suited to relieve it—and, moreover, the totality of these its symptoms, of *this outwardly reflected picture of the internal essence of the disease, that is, of the affection of the vital force*, must be the principal, or the sole means whereby the disease can make known what remedy it requires—the only thing that can determine the choice of the most appropriate remedy—and thus, in a word, the totality of the symptoms must be the principal, indeed the only, thing the physician has to take note of in every case of disease, and to *remove* by means of his art, in order that it shall be cured and transformed into health.

## THE LAW.

## § 25.

Now, however, in all careful trials, pure experiment, the sole and infallible oracle of the healing art, teaches us that actually that medicine which, in its action on the healthy human body, has demonstrated its power of producing the greatest number of symptoms *similar* to those observable in the case of disease under treatment, does also in doses of suitable potency and attenuation, rapidly, radically, and permanently remove the totality of the symptoms of the morbid state, that is to say, the whole disease present, and change it into health; and that all medicines cure, without exception, those diseases whose symptoms most nearly resemble their own and leave none of them uncured.

## § 26.

This depends on the following homeopathic law of nature which was sometimes, indeed, vaguely surmised but not hitherto fully recognised, and to which is due every real cure that has ever taken place:—

*A weaker dynamic affection is permanently extinguished in the living organism by a stronger one if the latter (whilst differing in kind) is very similar to the former in its manifestations.*

§ 27.

The curative power of medicines, therefore, depends on their symptoms, similar to the disease, but superior to it in strength, so that each individual case of disease is most surely, radically, rapidly and permanently annihilated and removed only by a medicine capable of producing (in the human system) in the most similar and complete manner the totality of its symptoms, which at the same time are stronger than the disease.

ACUTE AND CHRONIC DISEASES.

§ 72.

“ . . . The diseases to which man is liable are either rapid morbid processes of the abnormally deranged vital force, which have a tendency to finish their course more or less quickly, but always in a moderate time—these are termed *acute* diseases ;— or they are diseases of such a character that, with small, often imperceptible beginnings, dynamically derange the living organism, each in its own peculiar manner, and cause it to deviate from the healthy condition in such a way that the automatic life energy, called vital force, whose office it is to preserve the health, only opposes to them at the commencement and during their progress imperfect, unsuitable, useless resistance, but is unable of itself to extinguish them, but must helplessly suffer (them to spread and) itself to be ever more and more abnormally deranged, until at length the organism is destroyed ; these are termed *chronic* diseases. They are caused by infection from a chronic miasm.”

IV.—CONCLUSION.

The above quotations must suffice for the present as examples of the matter and style of this monumental work, though many other points of interest might have been brought out. Hahnemann, for instance, was not among the vulgar crowd who reviled mesmerism when it first came out, and left to their lineal descendants in another generation to accept it under another name. He recognised the good of it, and assigned it its place. And Hahnemann would not have been surprised by the *Tuberculin* treatment of consumption. In a footnote to Aphorism lvi., he says : “ A fourth mode of employing medicines in diseases has been attempted to be created by means of *Isopathy*, as it is called—that is to say, a method of curing a given disease by the same contagious principle that

produces it. But even granting this could be done, which would certainly be a most valuable discovery, yet, after all, seeing that the miasm is given to the patient highly dynamised, and thereby, consequently, to a certain degree in an altered condition the cure is effected only by opposing a *simillimum* to a *simillimum*."

In concluding this brief and necessarily very inadequate account of Hahnemann's wonderful book, I cannot do better than quote the words of its English translator. In the preface to the 1849 edition Dr. Dudgeon thus fitly sums up his estimate of the *Organon*: "Perfect and complete in itself, it leaves no point of doctrine unexplained, no technical detail untouched, no adverse argument unanswered."

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## KEY-NOTES—PRACTICAL ONES.

### No. II.

By AGRICOLA.

ONE evening in 1870 I was sitting at the bottom of a long tea-table, when I was horrified at seeing my only child, a boy of five, who as usual was at the right hand of my mother (*his second mother*—my wife having died on the twelfth day after his birth), become black in the face gasping for breath. The sugar-basin, full of unusually large and rough lumps, had been slyly drawn by him close to his hands. Intuitively I took in the *status quo* and rushed up, seizing him by the feet and held him suspended upside down in the air. All present deemed me crazy. "See what he is doing to my darling," screamed my mother. I dashed aside with herculean force the strong men who had rushed to his aid. "Slap him hard on the back," I yelled in my agony. My youngest sister, another foster-mother of my motherless boy, was the only one who responded to my demand. On the third slap two immense lumps of sugar covered with gore rolled out on the carpet.

It was Brunel who saved my child's life, or rather a similar episode in his life and its perusal by me.

## MATERIA MEDICA.

### PRIMULA OBCONICA.

HERE are two cases of poisoning by *Primula Obconica*. The first was related by E. Burdett Pooley, L.R.C.P. Edin., L.R.C.S. Irel., of Dalton-on-Furness, in *The Lancet* of July 22, as follows :—

“ On Jan. 28th I was sent for to see a man aged seventy-five. He was suffering from erysipelas, slight in character and affecting only the upper part of the face. After the usual treatment this subsided, and in a little while I allowed the patient to go into his greenhouses (he was a market gardener), whereupon the disease immediately reappeared. This having occurred several times, I advised him to remain in the house for a longer period, but even then he had two attacks, the last occurring without his leaving his bedroom. In all, there were six relapses, the parts affected being the forehead, just above the eyebrows, the cheeks and sides of the nose and the fingers of both hands. At first I supposed the fresh attacks to be the result of renewed chill, but in the case of the last two, and especially the last, this cause was precluded. The patient now informed me that on these two occasions he had had flowers brought to him in the house to work into wreaths, and on further investigation I found that previously to each of the six attacks he had been working with the blossoms of the *primula obconica*, a small white or pale lilac *primula*, much used in funeral wreaths. I advised him to avoid this plant, and he did so for about three months; but during the past week he again used it, with the result that the inflammation immediately reappeared in the skin of his fingers. The following points in this case may be of interest. The patient, who had been a gardener most of his life, had never suffered any inconvenience from handling this plant until after the attack of January (which appears undoubtedly to have been erysipelas, as his son, who never touches the flowers, had also a sharp attack of erysipelas of the face). In the secondary attacks the parts affected were those which a man would naturally wipe with his fingers when heated, and with which, therefore, the juice of the plants he was handling would be brought into contact. The attacks occurred always after he had used this particular flower, and only then. The plant is known amongst gardeners to affect certain individuals, but this patient appears to have been rendered susceptible to it by the attack of erysipelas.”

The second was communicated in a letter to the same journal the following week, July 29 :—

“POISONING BY *PRIMULA OBCONICA*.

“To the Editors of THE LANCET.

“Sirs,—A case of the above, differing somewhat from that described by Mr. Pooley in *The Lancet* of this week, may be of interest. About eighteen months ago I was consulted by a lady for repeated attacks of an intensely irritable papular eruption on both hands. The eruption lasted three or four days, and then the skin desquamated. On one occasion the chin was affected. My patient was an enthusiastic gardener and had a considerable knowledge of plants. She suspected the *primula obconica* from having read of its peculiar properties; and, in order to put her suspicions to the test, bared her arm and lightly passed a bunch of its leaves round the middle of the forearm. Nothing happened until the next day, more than twelve hours after the experiment, when a broad band of small papules appeared on a raised base giving rise to almost intolerable itching. She found that it was not necessary for the *juice* of the leaves to be applied to the skin, and also that if the fingers, after handling the plant, touched the face, the eruption was produced there as well. A strange feature was the fact that there was no effect until after the lapse of so many hours. The flowers alone had no evil influence. For several months before the cause of the trouble was discovered this patient's life was almost unendurable from the terrible irritation. After getting rid of all of this particular kind of *primula* there was no further attack.

“I am, Sirs, yours truly,

“C. KINGSLEY ACKLAND, L.R.C.P., Lond.

“Bideford, July 22, 1898.”

*LAPPA OFFICINALIS* IN PROLAPSUS UTERI.

Under this title, Dr. F. W. Morley, of Sandusky, contributes his experiences to the *Hom. Rec.* of recent date. He says: “It is the silent forces of nature that cure; our appropriate remedy only removes the obstacle, and the *vis medicatrix nature* does the rest.” He cites the case of a lady, *æt.* seventy, short, fat, Irish, mother of a large family. Entire uterus extruded; was five inches long and nearly as wide; cervix short, and blended with the body of the uterus. Reduced the organ, and held it in place with a soft ring pessary for three months. After that discovered that pessary was all-sufficient for two months, when it collapsed, giving origin to foul vaginal discharge. Removed the pessary, and under the influence of a chat had with Professor Samuel A. Jones some two years preceding, gave *Lappa*, and kept it up for four months. Since that time made examination, and



found cervix out of reach with the patient standing. Dr. Morley narrates another case where, after operation, with incomplete recovery, he resorted to *Lappa* and cured his patient. It is to be regretted that he has not given us a little more of the morbid conditions upon which he prescribed the drug. As it stands, it gives no clue to the use of *Lappa* except in cases of "prolapsus of the uterus"; and we are confident that such diagnosis is not what Dr. Morley intended for the homeopathic use of *Lappa*. Let us have more indications for the remedy.—*The American Homeopathist*.

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#### THUJA 30TH FOR WARTS.

Dr. Hammond in *So. Journ. of Hom.* recommends the use of *Thuja occidentalis* 30th, a powder every twenty-four hours for two or more weeks, as curative of warts. Gives three cases. One of a lady, a pianist with several large seed warts on her hands. Offered to take them off with internal remedies. Did so with this remedy after four weeks; she noticed one morning that the warts had disappeared during the night. Case II. was a newsboy with hands literally covered. Same treatment with same result. Case III. a middle-aged lady with a smooth wart on her cheek. In addition to internal treatment advised applying twice a day the tincture of *Thuja* directly to the wart for five minutes at a time. With the usual happy result. Says that in forty years of practice has never failed to remove warts with the 30th dil. of *Thuja*, internally, and only in the case last named has he made a local application of any kind.—*The American Homeopathist*.

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#### AGGRAVATIONS OF BARYTA, HEPAR, AND SILICEA.

The *Baryta* patient is worse in a warm and damp atmosphere. Cold and damp are less aggravating, and dryness is the most favourable. The *Hepar* sufferer shuns dry cold, moisture being more agreeable. The *Silicea* case suffers from any exposure to cold, whether dry or moist, and is relieved by warmth of any character.—*The American Homeopathist*.

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#### RATTLESNAKE BITES.

Dr. J. A. Kirkpatrick in *So. Journ. of Homoeo.*, June, 1893, cites an instance of a four-year-old boy being bitten by a rattlesnake having four rattles. Ordered the messenger to apply *Aqua Ammonia* to bite until the doctor's arrival. Doctor reached

case fifteen minutes after first application was made; found hand was bitten in two places, swollen almost to bursting, a tight ligature having been kept around the wrist. Ordered ligature cut. Put twenty-five drops of *Aqua Ammonia* in half glass of water, and gave teaspoonful doses every five minutes. After twenty minutes child became quiet and easy. Continued compress all night, and lengthened intervals of taking medicine to once every hour. Next morning boy walking about the house, hand still swollen, but no pain. In three days boy was well. Had whisky or alcohol been given the swelling would have extended to the child's body with much more suffering and slower recovery.

And here is another sure cure: Dr. U. W. Reed, in *Hom. Recorder*, June, 1893, recommends *Sisyrinchium* (of the *Iris* family), believing that its anti-snake bite properties were known to the early Indians. Case cited: Girl, six years old, playing in a yard, some twelve miles in country, bitten in hand by rattler. Dr. Reed arrived sixteen hours afterward; meantime every known expedient had been resorted to. Hand and arm swollen to bursting, and of bluish-black colour. Skin hot and dry, face flushed, pulse quick and hard. Child unconscious. Saturated a piece of cotton with the tincture; bound it on the wound; also put twelve drops in water, a teaspoonful every hour: compress to be renewed at same times. Returning next day, child better, and made a good recovery. Second case cited: Boy, *æt.* ten, while gathering huckleberries bitten in right ankle. Ran home through hot sun nearly a mile. Doctor was called after twenty-four hours' alcoholic treatment. Same general condition as in other case, except that patient was delirious and would cry if touched. Gave fifteen drops of tincture in water, a teaspoonful every hour, and a saturated cotton to wound. Change for the better noticeable in two hours. Out on the streets again within four days. Dr. Reed recommends that some one make trial of this remedy in other cases, not only of snake bites, but in general blood-poisoning.

There seems, therefore, no longer any need for carrying a jug of liquid bait when going out fishing on the annual summer vacation.—*The American Homeopathist.*

#### HELONIAS DIOICA.

Dr. Silas Griffith read before the Pennsylvania Homeopathic Society—The Hahnemannian—a Clinical Study of *Helonias Dioica*, in which he credits the native Indians as the original custodians of its virtues; but that Dr. E. M. Hale and his coadjutors rescued and developed this "therapeutic diadem."

The essayist said that *H.* is particularly suitable for female systems with feeble constitutions, nervous system run down; for the careworn mother as well as the youthful maiden; in a word, a *restorative*, because it favours nutrition and promotes healthy secretions. In sympathetic *gastric disorders*, dependent on *uterine* or renal diseases it is especially valuable. Perhaps one of its most important fields is in the treatment of atonic uterine hemorrhages; and as well as for cases where there is a tendency to uterine malpositions. It resembles *aletris* in its power of preventing miscarriage when due to local weakness, or when resultant from slightest over-exertion. The opposite condition, *i.e.*, the irritable uterus, with great sensitiveness, calls for *Viburnum* or *Caulophyllum*. The first of a series of cases cited by Dr. Griffith is as follows:—

A lady, *æt.* forty-three, the mother of two children; face pale and puffy, with darkness under the eyes; anæmic; general anasarca; confined to bed; had been under old-school treatment for the past ten years; during this time she had been flooding profusely at each monthly period; was told by her physicians there could not be much done for her. When I first saw her she had a profuse discharge of offensive watery blood, and was so weak that she could scarcely be moved, while the abdomen was distended by ascites; the uterus could be felt above the pubes. There was no indication of an ovarian tumour, nor of cancer, nor of polypi. After three months' treatment, with *Helonias* as the principal remedy, she was discharged cured, and remains in good health.—*The American Homeopathist.*

#### CASE OF *ATROPIA* POISONING.\*

By W. JUSTUS GUNDELACH, M.D., St. Louis, Mo.

For the homeopath a case of poisoning obtains a more than ordinary interest. Aside from the importance which attaches itself to the case, we are interested because presenting a good picture of homeopathic drug proving. Fortunately homeopaths, on account of the nature of the prescriptions, furnish none of these cases, and we are indebted to our allopathic brethren for many a picture, unwittingly given, of toxic drug action. Thus it was that I was presented with a very good picture of *Belladonna* last January.

The case was as follows: Mr. C., aged sixty-five or sixty-eight, was convalescent from an attack of pneumonia, but had a lientery diarrhea as a sequela, for which his allopathic physician prescribed a solution of *Sulpho-carbolate of Zinc* as an internal

\* Read before the Missouri Institute of Homeopathy, 1893.

antiseptic. He was also suffering from an ulcer of the cornea of the right eye, for which an oculist had prescribed—

<i>R. Atropiæ sulphatis</i> .....	grs. v.
<i>Cocaine</i> .....	grs. ii.
<i>Aq.</i> .....	℥ i.

*M. Sig.* To be dropped in the right eye.

Both medicines made a clear solution, and about 3 a.m. the patient's wife gave him a teaspoonful of the *Atropine* sol. by mistake for the *Sulpho.-Carb. Zn.* sol. A teaspoonful containing  $\frac{5}{8}$  of a gr. of *Atropine* with  $\frac{1}{4}$  of a gr. of *Cocaine*—a very small amount of *Cocaine*.

I with another physician was summoned about 4.30 a.m. and found him in a stupor, with enormously dilated pupils; in fact the eye looked as if it were not much else except pupil. Hot, very dry, feverish, flushed skin, but with no eruption. A pulse very feeble, but so rapid as to be countless. Jerkings of the extremities, particularly of the right leg. Wild incoherent delirium at times, then religious, angry, quarrelsome. The legs, unlike the face and arms, were very cold. At short intervals he would try to brush away an imaginary object from in front of the left eye, which was perfectly sound. As the stupor subsided somewhat, he made many attempts to spit and clear his throat, of course unsuccessfully. The respirations were so shallow that it was at times difficult to say whether he was breathing at all. They were generally five or six per minute. He had retention of urine for about twelve hours.

I immediately gave him a very strong emetic of mustard flour and water, but he was unable to swallow it, and I succeeded in getting very little, if any, down. I think there must have been a very strong cesophageal spasm. I hardly think that the small amount of *Cocaine* had any influence over this or any other symptoms. I followed the emetic up by a hypodermic injection of  $\frac{1}{3}$  of a grain of *Apomorphia*, but this also failed to bring about emesis.

The patient was then given a half grain of *Morphia* to retard the action of the *Atropia*, and  $\frac{1}{50}$  gr., a large dose, of the *Sulphate of Physostigmine*, as the physiological antidote. He soon became somewhat more quiet, the jerkings of the extremities ceased, and under the influence of *Physostigmine* the pupil showed a very slight contraction. The extremities were not so cold, and the pulse became countable although exceedingly rapid, 150-165, and somewhat more full and strong. The action of these remedies was aided by the application of external warmth, friction, &c. The respiration was only very slightly influenced, and as he seemed a little later to be sinking, he was given a hypodermic injection of  $1\frac{3}{4}$  m. of a one per cent. solution of

*Nitro-glycerine*. This was of great benefit, and by noon he was out of danger.

I now wish to review and emphasise several points of the case. First as to the dose taken : although recovery is claimed to have followed the ingestion of as large a dose, still it must be admitted that, taking into consideration the fact that the patient was a very feeble old man of sixty-five or sixty-eight, weakened by a lientery diarrhoea following a pneumonia which left the lungs in a very weak condition, and that *Atropine* kills by asphyxia, recovery was, to say the least, unlooked for. *Apomorphia* in several cases of poisoning has disappointed me. I have employed it in poisoning from *Morphine*, *Arsenic*, and *Strychnia*. We cannot expect too much of it in narcotic poisoning, since the nerve centres are obtunded by the narcotic, and the vomiting induced by *Apomorphia* is of centric origin. Some clinicians claim efficacy for it even here, but I have found it absolutely inefficient. The only cases in which I have found it of value were in acute alcoholism. *Nitro-glycerine* proved of great value in this case as a powerful respiratory and cardiac stimulant. I prescribed a one per cent. sol. ; of this 10 drops were added to 2 drams of water and the patient given an injection of 15-20 minims, so that he received about  $1\frac{2}{3}$  or  $1\frac{1}{4}$  drops of a one per cent. sol. Under its influence the pulse sank within about two minutes so as to become almost imperceptible, simply a very weak fluttering. It remained this way one or two minutes, and then gradually became much stronger, fuller, and slower than before the injection. The respiration almost immediately after injection would become much more deep, full, and rapid, gradually rising from 6 or 8 to 12 or 16 per minute. This effect lasted from one to two hours, gradually passing off. He received four injections. After each injection new life seemed inspired, and the effect of each successive injection was better than the preceding. The patient declared after the last injection that he experienced a sense of freedom from oppression of the chest, and general well being, which had been foreign to him since the attack of pneumonia. I lost sight of the patient after the emergency treatment of the case, as he continued under the care of his family physician. I do not know, therefore, what late and minor symptoms of *Belladonna* developed or how long they lasted. They would have been of no importance as far as influencing his recovery, for he was out of danger when I retired from the case, but would have been exceedingly interesting to me as a homeopath. No doubt many symptoms were marked by the remedies given or developed after the effect of these passed off.

## INSTITUTIONS.

## BRISTOL HOMEOPATHIC HOSPITAL AND DISPENSARY.

REPORT FOR 1892.

THE work of the dispensary has been actively carried on during the past year. There have been 1,068 fresh patients at Brunswick Square, and 309 at Queen's Road, making 1,377 in all—an increase of 74 on 1891. The attendances have been 6,554, an increase of 700; and there have been 220 visits paid to patients at their own homes who were too ill to attend at the dispensary. Amongst the latter there were two deaths only, one from cancer, the other from phthisis.

These figures show the increasing appreciation amongst the sick poor of the mild system of medical treatment practised here, and the very small percentage in mortality.

The home visits would be greatly increased if more subscribers were willing to give their tickets to the medical officers at the dispensary. Many poor people would prefer home attendance in serious illness were the notes more accessible. They are often unable to pay the sum necessary for a month's attendance, and frequently subscribers reside too far for the patients to readily obtain them.

The Committee earnestly desire increased subscriptions and contributions to this department. They also remind the friends of the charity that the hospital for in-patients is only waiting a generous gift to commence operations in this direction.

The system of homeopathic treatment, due to the genius of the immortal Hahnemann, is in principle as old as Hippocrates, and it is not too much to say that in all ages the cure of chronic disease has been chiefly effected in accordance with this law, though often the prescription be empirical and the dose a substantial or material one. The small or even infinitesimal dose is found by experience to be more powerful and lasting in its effects, and more in accordance with nature, for as disease is not a material morbid entity, but a dynamic derangement of health, so the remedy is not intended to drive an imaginary enemy out of the body, but so to affect the vital organism that it shall itself react in an opposite direction, and restore the balance of function which is called health.

HOURS OF ATTENDANCE OF PHYSICIANS.—*Brunswick Square*: Dr. Morgan, Wednesday, 10.30; Dr. Bodman, Monday, 4 to 5. For diseases of women (3s. 6d. monthly), Thursday, 10 to 11. Dr. Barrow, Monday, 11 a.m.; Tuesday, 7 p.m.; Friday, 7 p.m. Saturday, 11 a.m. *At 71, Queen's Road*: Dr. Nicholson, Tuesday and Thursday, 10 a.m.

The following are the officers of the institution :—*Trustees* : S. Morgan, M.D., T. D. Nicholson, M.D., and E. G. Crew. *Committee* : F. H. Bodman, M.D., Rev. G. B. Brown, E. G. Crew, H. R. James, S. Morgan, M.D., T. D. Nicholson, M.D., J. Tanner, J.P., and E. Williams, M.D. *Honorary Medical Officers* : F. H. Bodman, M.D., S. Morgan, M.D., and T. D. Nicholson, M.D. *Stipendiary* : R. W. Barrow, M.D., M.R.C.S.E. *Hon. Treasurer* : Josiah Williams. *Hon. Secretary* : E. Wheeler. *Chemist and Dispenser* : E. Wheeler. *Collector* : J. Bateman.

## NORWICH HOMEOPATHIC DISPENSARY.

ANNUAL REPORT, 1892-93.

THE Committee has again to report the continued steady and successful progress of the work of the dispensary. The year has been free from any extensive epidemic, and the health of the city has, on the whole, been unusually good, as shown by unusually low death-rates recorded. Taking this condition of things into consideration, the number of cases treated has been fully maintained. The home visits have been 1,669, while the consultations at the dispensary have been 3,297.

The character of the cases has been as varied as usual. No epidemic of any extent has existed, and few cases of influenza have occurred.

The proportion of provident tickets increases; but there is great difficulty amongst the poor in obtaining subscribers' tickets, and of this many subscribers have had proof by the frequent inquiry for tickets when their supply is exhausted.

During this year again death has removed several of our old supporters, greatly regretted, and who will be greatly missed. An effort is much needed on the part of all to obtain some new subscribers, and, if possible, increase subscriptions. The advantages offered by the dispensary in securing treatment for the sick poor at a very moderate outlay must commend it to all who have had experience of the character of the work done.

The example set by Messrs. J. and J. Colman, as large employers of labour, is worthy of imitation, in supporting a charity which does good and extensive work amongst the labouring classes, and it is hoped that support may be forthcoming from other firms.

The share of the Hospital Sunday Fund is as usual most thankfully acknowledged.

A few friends have kindly placed their tickets at the disposal of the medical officers and secretary; but these have been all too few to meet the needs of those requiring continuance of treatment, but otherwise unable to obtain the needed recommendation.

Thanks are due, and are hereby heartily given, to all the honorary officers of the dispensary, and specially to the medical officers, upon whom the burden of the work falls.

The Committee would draw the attention of subscribers to the fact that the financial year commences on July 1st, and inconvenience naturally arises if payment of subscriptions is deferred to the later part of the year. Early payment will greatly facilitate the working of the dispensary.

The following are the names of the Committee and officers:—

*Committee*: Rev. G. S. Barrett, John Copeman, Esq., H. J. Copeman, Esq., F. Dix, Esq., Rev. R. Govett, Rev. T. Harrison, R. Haselwood, Esq., and Col. Preston. *Treasurer*: B. E. Fletcher, Esq. *Secretary*: Mr. W. T. Livock. *Honorary Medical Officers*: Dr. E. B. Roche and Dr. H. A. Eaton. *Auditor*: H. J. Copeman, Esq. *Dispensing Chemists*: Fuller and Co.

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## REVIEWS.

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### THERAPEUTICS OF CHOLERA.\*

VERY opportune is the appearance of Dr. Majumdar's little treatise on Cholera, now that the disease has obtained a decided foothold in Europe, a number of cases having appeared within our own shores and across the Atlantic.

"These few pages," says Dr. Majumdar's preface, "on the therapeutics of cholera are offered to the profession as the fruit of my continual labours for fourteen years in the so-called 'home of cholera.' The disputed and doubtful questions of various theories as to the etiology of the disease and its pathological speculations are purposely left out of consideration. The practical points on prevention of cholera and the means of combating it when actual invasion takes place are dealt with in full. The symptomatic indications are given at the end of the book.

"The first portion of this book was read at the World's Homeopathic Congress, held at Chicago, in connection with the World's Columbian Expositions, 1893."

Dr. Majumdar's practical experience in the treatment of cholera makes this little work especially valuable, and if the disease should unhappily become epidemic, it will be a necessary addition to the armamentarium of every homeopathic doctor.

Dr. Majumdar attributes to defective sanitation, especially over-crowding and neglect of ventilation, the occurrence of

\* *Therapeutics of Cholera*. By P. C. Majumdar, M.D. Philadelphia: Boericke & Tafel. 1893. London: Homeopathic Publishing Company, 12, Warwick Lane, E.C. 102 pp. Price 2s. 6d.



epidemics of the disease, though it is always more or less endemic in Calcutta. On the other hand, sanitation is not everything, for, we learn: "We have often seen the sudden outbreaks of cholera without any seeming reference to these unsanitary conditions of the place. There are, as it is often said, the miasmatic influences, or general atmospheric changes."

In reference to the prophylactic power of copper it is interesting to learn that its use is not unknown in India. Dr. Majumdar quotes from Dr. Mahendra Lal Sircar as follows: "On the authority of a deputy-inspector of schools, he cited an instance where the head-master of a school, in a district where cholera frequently prevailed, induced a number of people to wear a *piece* (a copper coin), through which a hole was bored and thread inserted to fasten it round the body. During five years two epidemics occurred, and not one person wearing the *piece* was affected." Dr. Majumdar himself takes an inhalation of *Camphor* solution when visiting cholera patients.

One of the most puzzling things about cholera is the different ways in which it is regarded in India and in Europe and the rest of the world. At Calcutta there is always more or less of it. Yet nobody there thinks much about it, and the port is not regarded as infected. Ships go in and come out without any quarantine regulations. Whereas, when the disease appears at one of our European ports, there is no end to the measures that are adopted to arrest the bacillus on its march.

The practical therapeutic part of Dr. Majumdar's book will be found most helpful, and particularly the repertory at the end. In the preliminary stage Dr. Majumdar says the symptoms are very difficult to recognise, and the physician is seldom called in till later.

"If there are malaise, great prostration, pains in various parts of the body, and other uneasy sensations, a few doses of *Aconite* will remove them. If there are digestive derangements—loathing of food, no appetite, thin diarrhetic stools—*Nux Vomica*, *Pulsatilla*, and *Veratrum*, may be useful. In premonitory diarrhea I generally use either *Camphor* or *Veratrum* after each stool, and that is generally sufficient to prevent the further spread of the disease."

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### DISEASES OF THE SKIN.\*

THE "enlargement" of this new edition of Dr. Burnett's work on the skin consists of a second part

\* *Diseases of the Skin: Their Constitutional Nature and Cure.* By J. Compton Burnett, M.D. Second Edition, Revised and Enlarged. London: Homeopathic Publishing Company, 12, Warwick Lane. 1893. 240 pp., price 3s.

considerably larger in volume than the first. It will be found full of clinical experience of an interesting and valuable kind, with many practical suggestions which the sagacious reader will be glad to enter in his commonplace book. Here is a note on *Levico Water* :

“The waters of *Levico* are a very favourite remedy of mine in many skin affections where I need a little tonic, and where it seems of great advantage to give the organism a rest from the effects of high dilutions of the more specifically acting remedies.

“In very difficult and pathologically complicated cases the organism, under the influence of very high dilutions, appears to get excited and into a state of unrest; here progress seems suspended, and one needs, figuratively speaking, a harmless material—something to clean the slate and get a fresh start; this the strong water of *Levico* does beautifully. A capital way to administer it is to pour ten drops in a wineglassful of warm water two or three times a day, by preference immediately after meals.”

Dr. Burnett puts the whole homeopathic community under great obligation to himself by making his experience so pleasantly available for the use of others.

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## EXTRACTS.

### YAWNING AS A REMEDY.

ACCORDING to current ideas, yawning in good society is an improper sign of weariness; according to the teachings of physiology, it is a long drawn forcible inspiration followed by a shorter respiration; according to Dr. Naegeli, it is one of nature's many remedies, the proper application of which depends upon good judgment.

In yawning, not only the muscles which move the lower jaw are used, but also the breathing muscles of the chest, and he who yawns to his heart's content also raises and extends the arms. In the deepest inspiration the chest remains extended for a short time, the eyes are almost or entirely closed, the ears somewhat raised, the nostrils dilated. Inside the mouth, the tongue becomes round and arched, the palate stiffly stretched, and the uvula is raised, almost entirely closing the space between the nose and throat. At the beginning of the inspiration a cracking noise is heard in the ears, a proof that the duct leading to the hearing also succumbs to this stretching.

If the yawning has reached the deepest point, it will require

from one to one and a half seconds for it to become noticeable to the hearing. In order to observe this, let one place himself at a sufficient distance from a clock, so that its ticking will not be easily heard, and yawn deeply. During this deep breathing the sound of the clock is not perceptible to the most careful listening. All this simply goes to show that yawning sets a number of muscles to work, and particularly those which are not directly subject to the will.

Although one yawning does not present a very agreeable appearance, it is very agreeable to himself, for the stretching of the muscles causes a feeling of comfort; it acts like massage, and is the most natural gymnastics of the lungs imaginable. Dr. Naegeli, therefore, advises people not to concern themselves with so-called decency, but every morning and evening, and as often as possible, to exercise the lungs and all the muscles of respiration by yawning and stretching, as many chronic lung troubles may thus be prevented.

Dr. Naegeli orders the patient troubled with too much wax in the ear, accompanied with pain, to yawn often and deeply. He also, in cases of nasal catarrh, inflammation of the palate, sore throat and earache, orders the patient as often as possible during each day to yawn from six to ten times successively, and immediately after to swallow. The result will be surprising. If one looks upon yawning as a natural massage for certain organs, he will reach a satisfactory explanation of its curative properties.—*New York Med. Times.*

[Mrs. Edmund Russell, the "Delsartean" lecturer, has written a little book on "Yawning," in which she shows that the act is an excellent exercise taking in all the muscles of the body in orderly succession.]

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## APPOINTMENTS, VACANCIES, REMOVALS ETC.

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\*.\* We shall be happy to insert notices of appointments if gentlemen will be good enough to forward them to us, and also of posts vacant and likely to be vacant, on receiving information from secretaries or committees. Under this heading also, we shall mention good openings for homeopathic practitioners and chemists.

### TRANSFERENCE OF PHARMACY.

LEATH AND WOOLCOTT.—*Leamington.*—We are given to understand that the homeopathic chemist's business of the late Mr. Charles Woolcott, of Leamington Spa, known as Messrs. Leath and Woolcott, has been transferred to the well-known firm of Messrs. E. MARRIOTT and Co., of Hastings, who will carry on the two concerns.

## Obituary.

JOHN HARMAR SMITH, M.R.C.S., C.S.H., L.R.C.P., EDIN.

WE regret to announce the death of Dr. Harmar Smith, which occurred at Eastbourne on August 7th, in the 83rd year of his age. Dr. Smith received his medical education in Sheffield, and was for a time lecturer on medical jurisprudence at the Sheffield Medical School. He also held an appointment as medical officer under the Poor-Law. When he took up homeopathy in 1858 he was at once bitterly persecuted by the Sheffield medical men, and though the Poor-Law Board refused to remove him from his post, the Board of Guardians, under pressure of the allopathic doctors, did so. The Medical Book Club of the town adopted another device in order to get rid of him: they dissolved themselves, re-formed the club, and then re-elected themselves minus Dr. Harmar Smith.

An interesting letter by Dr. Pope, giving an account of the persecution of Dr. Smith and other similar instances, will be found on p. 439 of vol. xxvii. (1892) of the HOMEOPATHIC WORLD.

Dr. Smith was a copious contributor to the Homeopathic Journals, including our own. His latest writings will be found in our pages, vol. xxv. (1890). On p. 15 he reports "A Case of Ulcer"; p. 56, "*Pyrogen* in Typhoid Fever"; on p. 202 he communicates on "*Gelsemium* in Blindness." All are of a practical nature, and show his clinical acumen unimpaired.

After leaving Sheffield, Dr. Smith practised for many years at Blackheath.

### DR. SEVERIN WIELOBYCKI.

OUR centenarian colleague has not long survived the completion of his hundredth year. His health, which was seriously damaged by two attacks of influenza, did not allow him to take the great amount of exercise he had been accustomed to before his illness, and it likewise interfered with his vegetarian dietetics, for he was obliged to resort to a more animal diet. He, however, to the last remained faithful to his rigid abstinence from alcohol and tobacco. Until four days before his death, which occurred on the 31st of August, he continued to be moderately active, walking out every fine day, and as he was in possession of his mental faculties he amused himself by reading and the converse of friends, though his hardness of hearing was unfavourable to his complete enjoyment of the latter. The beginning of the end was announced by a great feeling of chilliness and a total loss of appetite. He took to his bed four days before his death,

and gradually sank, the vital powers ebbing away without pain or uneasiness. His funeral was attended by a considerable number of representatives of the temperance societies, which had when he became a centenarian paraded him as an illustration of the benefits of total abstinence from alcohol, though the old man was disposed to ascribe his longevity equally to his vegetarian and anti-tobacco proclivities. Probably the vegetarians, the anti-tobaccoists and the homeopaths might, with equal plausibility, have exploited him as a testimonial in their favour. The fact is that centenarians are to be found among all sorts and conditions of men and women, living under all varieties of diet and regimen. The Society for the Study of Inebriety, whose medical members were all allopaths, wished to prove that Dr. Wielobycki was not a homeopathist, but in this they signally failed, as while he was in practice he was not only a member of the British Homeopathic Society, but he was also on the staff of the London Homeopathic Hospital, and we know that within two years of his death he had our excellent homeopathic colleague Dr. Wilkinson as his family medical adviser. Dr. Wielobycki has left a widow, now in her eighty-sixth year, and confined to her bed for the last two years owing to an ununited fracture of the neck of the femur. We are glad to know that she is left in easy circumstances. A memoir of our venerable colleague, on the occasion of his hundredth anniversary, was published in the *Monthly Homeopathic Review* for February last, and several others have appeared in the illustrated papers along with the portrait of the old man, taken when he had attained his hundredth year, so that we need not here enter more into detail on the incidents of his checkered career, but will refer the reader to these publications.

### LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

HOURS OF ATTENDANCE:—Medical, Daily, 2.30; Surgical, Mondays, 2.30; Diseases of Women, Tuesdays, 2.30; Diseases of Skin, Thursdays, 2.30; Diseases of the Eye, Thursdays, 2.30; Diseases of the Ear, Saturdays, 2.30; Diseases of the Throat, Mondays, 2.30; Operations, Mondays, 2.

### MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Brodhurst (B. E.). On the Nature and Treatment of Talipes Equino-Varus, or Club Foot. 8vo. (Churchill. 3s. 6d.)  
Brodie (C. G.). Dissections Illustrated: A

Graphic Handbook for Students of Human Anatomy. With Plates drawn and lithographed by Percy Highley. Part II. The Lower Limb. With 30 coloured

- Plates, two-thirds natural size, and 6 Diagrams. Roy. 8vo. (Whittaker. 10s.)
- Clemow (F.). The Cholera Epidemic of 1892 in the Russian Empire. With Notes upon Treatment. Roy. 8vo. (Longman. 5s.)
- Crisfield (Thos.) The Value of Hypnotism. Cr. 8vo, ed., pp. 39. (Author.)
- Doctor at Home and Nurse's Guide Book. Edit. by G. Black. Illust. Cr. 8vo. (Ward, Lock and Bowden. Red., 5s.)
- Donkin (H. B.). The Diseases of Childhood (Medical). 8vo, pp. 444. (C. Griffin and Co. 16s.)
- Handbook of Local Therapeutics. Edit. by H. Allen. 8vo. (H. K. Lewis. Net, 14s.)
- Hewitt (F. W.). Anæsthetics and their Administration; a Manual for Medical and Dental Practitioners and Students. With Illusts. Cr. 8vo, pp. 366. (C. Griffin and Co. 10s. 6d.)
- Hirt (Ludwig). The Diseases of the Nervous System: A Text-Book for Physicians and Students. Trans. by Augustus Hock, Assisted by Frank E. Smith. With Introduction by William Osier. With 178 Illusts. 8vo, pp. 698. (Kimpton. 21s.)
- Maisch (J. M.). Manual of Organic Materia Medica. 5th ed. With 207 Illusts. Cr. 8vo, pp. 578. (Kimpton. 10s. 6d.)
- Powell (R. Douglas). On Diseases of the Lungs and Pleura, including Consumption. 4th ed. With Illusts. 8vo, pp. 610. (H. K. Lewis. 18s.)
- Simpson (R.). Sclatiæ Neuritis: its Pathology and Treatment. 12mo. pp. 46. (Bristol, Wright; Simpkin. 1s.)
- Small (M.) and Colyer (J. F.). Diseases and Injuries of the Teeth, including Pathology and Treatment. A Manual of Practical Dentistry for Students and Practitioners. 8vo, pp. 428. (Longman. 15s.)
- Taylor (J. C.). The Health Resorts of the Canary Islands in their Climatological and Medical Aspects. 8vo. (Churchill. 8s. 6d.)
- Westminster Hospital Reports. Vol. 8. (Churchill. 6s.)
- Yeo (G. F.). A Manual of Physiology for the use of Junior Students in Medicine. 3rd ed. Cr. 8vo, pp. 696. (Churchill. 14s.)
- Yeo (J. B.). A Manual of Medical Treatment, or Clinical Therapeutics. With Illusts. 2 vols. Cr. 8vo, pp. 1360. (Cassell. 21s.)

## TO CONTRIBUTORS AND CORRESPONDENTS.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 30, *Clarges Street, W.*

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

LITERARY matter and correspondence should be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct the same and return to the *Editor* as early as possible.

### CORRESPONDENTS.

Communications received from Dr. Lamb, Dunedin, N.Z.; Dr. Cahis, Barcelona; Dr. Roche, Norwich; Dr. Hawkes, Liverpool; Messrs. Boericke and Tafel, Philadelphia.

### BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Chemist and Druggist.—Homeopathic Review.—Allg. Hom. Zeit.—Monatsblätter f. Hom.—American Homeopathist.—Homeopathic Physician.—Medical Century.—Hom. Maandblad.—Medical Argus.—Southern Journ. of Homeopathy.—Minneapolis Hom. Magazine.—Medical Visitor.—Colliery Engineer.—The Future.—North American Journal of Homeopathy.—Hahnemannian Monthly.—Maanedskrift f. Hom.—Homeopathic Envoy.—Homeopathic Recorder.—New England Med. Gazette.—L'Art Médical.—Diseases of the Skin. 2nd ed. By Dr. Burnett.—Modern Household Medicine. 3rd ed. By Dr. Henry.—Value of Hypnotism. By Mr. Thos. Crisfield.—Report of Bristol Homeopathic Dispensary.—Chicago Homeopathic Medical College.—Report of Norwich Homeopathic Dispensary.—Therapeutics of Cholera. By Dr. Majumdar.

THE  
HOMEOPATHIC WORLD.

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NOVEMBER 1, 1893.

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THE AMERICAN "M.D."

THE proceedings of the late Annual Congress of Homeopathic Practitioners of Great Britain, an account of which will be found published elsewhere, together with Dr. HEATH'S letter thereupon, bring to the front a question of much importance, and one upon which it is well that British homeopaths should have clear ideas. We do not propose to touch upon the personal question between Dr. HEATH and the Congress. The Congress is a perfectly independent and irresponsible body: it has no definite organisation and no laws; it has only two permanent officials—a treasurer, and the hon. secretary whose duty it is to send out invitations each year, and he has no cut-and-dried list of members to whom he is obliged to send them. If, therefore, he is asked for an invitation, he must use his own judgment whether he shall accede or not, and leave it to the Congress assembled to support him or the contrary.

At the Congress it was decided that membership was only open to practitioners on the British Register. The decision no doubt embodied the prevalent feeling amongst homeopaths in this country, and we believe it is largely due to the fact that the British Homeopathic Society, by its fundamental rules, is only open to registered practitioners. The Congress and the Society are two entirely distinct and independent bodies, but the members of the one are nearly all members of the other, and they are thus very likely to carry their British-Homeopathic-Society consciousness into the Congress.

Now it seems to us that the time has come when this question, as far as we homeopaths are concerned, should be canvassed and settled on its merits, independently of preconceived notions and General Medical Councils.

It is well known that the Homeopathic Medical Schools of the United States have been pioneers in insisting on thorough medical training. In international congresses we receive American graduates on absolutely even terms with ourselves; we elect them to presidential and vice-presidential chairs; and when we visit them we are delighted to receive the same honours at their hands. Nay, more, some of us are proud to receive honorary degrees from American schools to add to the registerable qualifications we already possess. In the face of these facts it seems to us the very essence of priggishness to refuse to recognise those whom these same schools have examined and to whom they have granted their diplomas, as soon as the latter take up their domicile and begin to practice within our shores, simply because the General Medical Council does not see its way to put them on the register.

At any rate the course of the HOMEOPATHIC WORLD is clear; and we think it would be well if all British homeopaths would take up the same line. We are proud of our position in the United States: we are convinced that if it were not for what our American brethren are doing homeopathy might very possibly die out altogether: the works of American homeopaths are the best thumbed of all the books on our shelves, the best aids we possess in the curing of the sick—considering all these things, and many more, we decline to recognise any distinction between the M.D. of New York, of Michigan, of Philadelphia, of any of the accredited homeopathic schools of the States, and the M.D. of London or of Edinburgh.

Nay, more: seeing the great risk there is in sending a youth to one of the British schools that during the five years of tuition now imposed upon him, the bias against homeopathy in the minds of his teachers will be subtly instilled into him, with the result that he comes out a



rabid allopathic M.D., full of scorn and pity for the fond homeopathic father or mother who sent him to college, we are convinced that it would be a much wiser plan to send our youths to one of the homeopathic schools in the States to learn how to heal the sick at the same time that they are acquiring their degrees. Then let them return to this country to practice the art they have learned, and which British schools are not qualified to teach. The homeopathic public would support them; and unless we have greatly mistaken, the professional homeopaths would stand by them as well.

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## NEWS AND NOTES.

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### DRS. GOULD AND BROWNING.

DR. THOMAS N. NEWELL, of 73, Pearl Street, Boston, Mass., U.S.A., has drawn our attention to an able "Open Letter" addressed to Dr. Geo. M. Gould, Philadelphia, which appeared in the *Homeopathic Envoy* of September. We quote the opening and the closing portions:—

#### "AN OPEN LETTER.

"DR. GEORGE M. GOULD, PHILADELPHIA.

"SIR,—Having read the pamphlet, 'Modern Homeopathy,' &c., by Dr. Browning, which won your prize, I take a few moments from a busy life to apprise you how that essay looks from a point of view which I do not find considered therein. I am a homeopathic layman of fifteen years' standing. I did not become one by preference, but by compulsion, and under the disapproval of my friends. I had, however, in New York, London, Baltimore, and other places, from time to time, during a good many years, consulted the very best men of the orthodox school. Their prescriptions had never done me any good, were generally ineffectual, and had more than once been positively injurious to me. I felt that it would be futile to go to them again.

"Therefore, in 1877, after suffering a good deal for some months, I consulted a homeopathic M.D. He gave me the same drug which a very eminent 'regular' had prescribed before without effect, but in the third centesimal potency. In two days, without the intervention of any other agent or any change of hygiene, I was relieved.

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"That is to say, homeopathy is human, which being the case, and you and I being also human, and therefore liable to—to—we know what—do not you think that it would be wiser and more dignified, to say the least of it, if you and Dr. Browning were to quit calling

names and abusing a system of extraordinary practical utility, which you do not in the least understand, and were to use your money and his vigour in the investigation of useful problems.

"Let me suggest two: 1. The active cause of the grippe. 2. The medium which conveyed Mr. W. H. Preece's electrical messages, without any wire or other mechanical means, across three miles of sea to a receiver on an island in the Bristol Channel. When you have discovered these at present mysterious essences, you will, perhaps, be more charitable than you are now, more willing to admit the existence of what you do not understand. I shall not trouble myself about the composition of homeopathic medicines, any more than you do about the elements of ordinary *Ammonia*. It is not wise to inquire into the feeding ground of domestic poultry. It is better to eat them. They are nice. Farewell, Dr. Gould. I cannot transport myself into that past epoch in which you and Dr. Browning are exercising your intellects and refreshing your spirit. But this pamphlet does remind me of one day that is past, the one when a man of the name of Galileo said to the book-learned and the orthodox of his day—or was it in spite of them?—*e pur si muove*.

"R. K. CAUTLEY.

"White Sulphur Springs, W. Va."

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"BUFO" IN *THE DAILY NEWS*.

In its "News of the Day" column *The Daily News* of Oct 9th published the following note:—

"Shakespeare, it seems, was right after all in calling the toad 'venomous' as well as 'ugly,' and the witches in Macbeth, when they added a toad to the ingredients of the poisonous 'hell-broth,' knew what they were about. Dr. Leonard Guthrie has come upon a curious account of a wicked Italian woman, whose husband was dying of dropsy. He took so long about it that his wife became tired of the process, and thought she would help him on. She accordingly caught a toad and put it in his wine, so that he should drink the liquid and die, but instead of doing this, to her astonishment he completely recovered. 'Forty years ago,' says a correspondent of *The Lancet*, 'this story would have been scouted as mythical, but now we know that it is precisely what the woman would have expected if she had only been acquainted with the researches of modern pharmacology.' The skin of the toad, it is explained, secretes a poison, the active principle of which—*Phrynin*—has an action very much resembling that of *Digitalis*, which is the remedy, *par excellence*, for dropsy depending on heart disease. This medical correspondent thinks it quite possible that, some of these days, we may find an enterprising firm advertising essence of toad as of superlative virtue for the cure of dropsy."

On Oct. 10th the following appeared in the same column:—

“Dr. Dudgeon, Montague Square, writes:—*Apropos* of your paragraph about the unintentional cure of a case of dropsy, by the infusion of a toad in wine, it may be mentioned that the toad, or certain preparations of it, long enjoyed a reputation as a remedy for dropsy. In Salmon's *Doron Medicum* (1583), after a description of how the volatile salt is to be obtained by the distillation of the dried animal, the author proceeds to enumerate the diseases in which it has been successfully employed. Among the rest he says: ‘The volatile salt of Toads is said to be a specifick in the Dropsy.’ According to an old French author, J. G. Hoyer, the animal dried and reduced to powder is useful in various kinds of dropsy. A tincture of the poison from the cutaneous glands, obtained by irritating the animal, is used by the homeopaths. Some remarkable cures of epilepsy are recorded as having been obtained by its use by Dr. Saville and Dr. Bojanus.”

On the following day, Oct. 11th, this appeared:—

“Dr. John H. Clarke, 30, Clarges Street, W., writes:—*Apropos* of your interesting note on the toad, in your issue of Monday, permit me to point out that *The Lancet*, or its correspondents, are periodically re-discovering and forgetting that Shakespeare knew what he was writing about when he penned the witches' recipe. On the 19th of September, 1891, *The Lancet* published a note in which, with considerable peramble, it stated in regard to the words—

‘Toad that under cold stone  
Days and nights hath thirty-one  
Sweated venom,’

that, ‘instead of being merely an expression of a mistaken popular idea, they are really a most truthful description of fact.’”

There was an appendage to the letter which *The Daily News* omitted, but which we will reproduce here:—

“To homeopaths who have long known and used the venom of the toad (as well as serpent venoms) as a valued medicine, these periodical rediscoveries of our old friend ‘*Bufo*’ are not a little amusing. But perhaps the most amusing thing of all is that in a prize pamphlet against homeopathy recently published in the United States, the use of the toad venom is held up to scorn as one of the most ridiculous things in the homeopathic system.”

### A PRIZE FOR THE HOMEOPATHIC HOSPITAL EXHIBIT AT CHICAGO.

It will be remembered that out of all the London hospitals which sent exhibits of models of nurses, patients, and appliances to the London committee of selection for the Chicago Exhibition, the Homeopathic Hospital tied for the first place, thanks mainly to the efforts of Sister Marion of the children's ward. Our readers will be pleased to learn that the exhibit has found no less favour in the eyes of the Chicago judges, who have awarded it a medal and a diploma of merit. Here is the announcement from *The Nursing Record* :—

“Institute for Nurses. No. 3, Surgical Models. “For exquisite workmanship and beauty”: Medal and Diploma, Miss Marion Rumball, Registered Nurse, Sister, Homeopathic Hospital, London.”

### “INTERNATIONAL HOMEOPATHIC ANNUAL.”

DR. ALEXANDER VILLERS is now busily engaged in preparing his second series of the *International Homeopathic Annual*, which is to appear early next year. The following extract from Dr. Villers' circular shows the large scope of the work, and we trust all homeopathic medical men and pharmacutists will do their best to help him :—

“At the beginning of March the *International Homeopathic Annual* will appear in a new and more compendious edition than the first. The favourable reception that the first series met with, and its appreciation on the part of our colleagues, apothecaries, societies, and friends of homeopathy, encouraged the editor to work incessantly at his task, in order to bring the book to its present standard of usefulness. The contents of the book are :—

“1. The international address-book of all the homeopathic physicians with mention of their specialities, their exact addresses and their office hours.

“2. The international address-book of all the homeopathic hospitals, with mention of the year of their foundation, their organisation, and the management of the respective managers and physicians.

“3. The international address-book of the homeopathic apothecary's and chemist's shops, &c., with mention of the proprietors.

“4. The international address-book of all the homeopathic unions and societies. The same are in the following countries (and comprise about 15,000 addresses): Germany, Austria, Hungary, Switzerland, Argentine Conf., Belgium, Brazil, Chile, Denmark, Spain, Great Britain and Ireland, Russia, India, Mexico, Netherlands, Peru, France, America, United States, Uruguay, Sweden and Norway.

“5. The index of all the homeopathic periodicals.

- "6. The catalogue of scientific works comprising the years 1890-1893.
- "7. The general synopsis by Dr. Villers of the new indications of remedies already known or newly introduced.
- "8. The compendium of all the homeopathic remedies, referred to in the total international literature of the years 1890-1893 by Dr. Villers and Dr. Ulrich Azerodt and many co-operators.
- "9. Alphabetic register of the physicians belonging to the 'International Address-book of Physicians.'
- "10. Alphabetic register of the authors of the named literature.
- "11. Interesting communications about particular occurrences in the realm of homeopathy.
- "12. Advertisements."

If any homeopathic doctor or chemist has failed to receive Dr. Villers' circular with list of questions to answer, he should send a card addressed to Dr. Alexander Villers, Dresden, Germany, to ask for one. The price is 3 marks in German. The subscription may be sent direct, or the work may be ordered of a publisher. The Homeopathic Publishing Co., 12, Warwick Lane, E.C., will be glad to procure it.

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"CREAM" (of the world's fact, fun and fancy) is the title of a new weekly penny paper, which, under the editorship of Mr. Francis George Heath, will shortly appear.

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RHUS will frequently will be indicated in membranous dysmenorrhœa; but Borax is our foremost drug in this condition.—*Shelton*.—*Chironian*.

BISMUTH AS A LOCAL APPLICATION IN BURNS.—The treatment of extensive burns by bismuth, which is employed by Dr. Bardleben in the Friedrichshain Hospital, Berlin, is stated by Dr. Spigearni of Moscow to have succeeded admirably in the case of a man who was accidentally burnt in a Russian bath by means of a jet of superheated steam. The burn covered the face and the whole surface of the body, with the exception of the feet, the legs, and the lower third of the thighs. When Dr. Spigearni saw him he had been for six days under the care of another surgeon, who had applied iodoform. This was completely caked by the purulent and serous discharges from the blisters, and the temperature was nearly 102° F. After cleansing the surface thoroughly by means of absorbent cotton wool and boracic lotion it was well powdered over with subnitrate of bismuth enveloped in an absorbent cotton wool dressing, the latter being omitted from the face, and quinine and stimulants were ordered. A marked improvement soon began to show itself; the dressing was changed three times in the course of the three weeks during which the man remained under treatment, when he was completely cured. No sign of bismuth poisoning was observed.—*Lancet*, Aug. 19th.

## ORIGINAL COMMUNICATIONS.

## BACILLINUM CASES.

By WM. LAMB, M.B., C.M.

IN the HOMEOPATHIC WORLD of January there is an article by Dr. Young on "*Bacillinum*," which interested me much, owing to the successful use of the 200th potency. After reading Dr. J. C. Burnett's "New Cure of Consumption," I employed *Bacill.* 30 in several cases, but with very indifferent results. In a woman suffering from tubercular phthisis, it had a beneficial effect on the pleurodynia, but had no really controlling influence over the disease itself, which marched steadily on to a fatal issue. Another little patient with tubercular meningitis it made no impression whatever upon, death taking place in about a week. Altogether I was disappointed. But the above-mentioned article with the higher potency with such magnificent results caused me to try *Bacillinum* again, but now in the 200th.

*1st Case.*—I had prescribed for some time for an elderly lady suffering from *Lupus exedens* over the left superior maxilla, with very unsatisfactory progress. I then advised *Bacillinum*, which she had in the 201st potency. One drop of this caused such medicinal aggravation, that she first thought of taking no more; but after a few days (I think 5) she ventured upon half a drop, which agreed, and 2 more doses healed the part up completely. Her general health has improved wonderfully.

*2nd Case.*—Another instance is that of a boy about 11 years old, who was reduced to the last extremity by *tubercular ulceration of intestines*. His disease had resisted three allopathic doctors before I saw him, and he was so very far through that the parents asked for a consultation with another doctor (allopathic), which I assented to. His verdict was to give the boy all the nourishment he could get, but that there was no hope for him. Just then Dr. Young's article came before me, and I decided to give *Bacillin.* 200 mj every eighth day. His recovery took place steadily, and from being skin and bone, with constant abdominal pain and vexatious alvine discharges of blood, faeces, and pus, he has become well-nourished, and has lost his pains, &c., entirely.

*3rd Case.*—A third case was that of a baby 14 months' old, who had been unsuccessfully treated at the Dunedin Hospital. It was emaciated to a degree, and was evidently not long for this world, and was another example of *consumption of the bowels*. I gave *Bacillin*. 200 mj every eighth day, with such perfect success that the father told me afterwards that the child had never been so well since its birth.

In the first case no other medicine was used. But it is only right to add that in both of the bowel cases I gave in addition *Calc.-carb.* 30 mj t.d.s.

But now, in conclusion, I want to make another statement of an opposite kind, and that is, I have given *Bacillinum*, both in the 30th and 200th, in that fell disease of infancy and childhood—I refer to acute tubercular meningitis—but with one result, viz., death. Of course my cases were indubitable specimens of the disease; there could be no manner of doubt about the diagnosis.

40, High Street, Dunedin.

August 12, 1893.

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### A CASE OF FIBROID TUMOUR CAUSING URINARY SYMPTOMS: ACTION OF *HYDRASTININ MUR.*

By JOHN H. CLARKE, M.D.

ON July 16, 1892, I was asked to see Miss —, aged 50, who was suffering from a number of ailments, the chief of which was a sudden stoppage of the urine, to which she had been liable for some time, the first attack having occurred eight years previously. In the lower part of the abdomen I found a hard resistant body, a little towards the right of the middle line. This, I have little doubt, was a fibroid tumour, and she had been aware of its presence before the cessation of the monthly periods. To this I attribute the difficulty she had in passing water, and also her constipation.

She was fair, rather small, and of slight build. She had good spirits as a rule, but they fluctuated with her state of health. She complained of heaviness and weakness at present. She had great desire for fresh air, and yet was exceedingly sensitive to draughts. She could not bear great heat, but extreme cold was even less tolerable. She flushed and perspired readily, but was chilly between the

shoulders. Feet deadly cold and damp. Her worst time was in the morning. She had no skin affection, but a sister had psoriasis rather severely. Sleep poor. All her life she has been subject to liver attacks—bad taste in the mouth, vomiting, constipation. She has also had piles. There is giddiness or swimming in the head. The head feels heavy and weak; aching all over head; deadly cold feet; sinking sensation; head hot, with desire for vinegar cloths to be applied, and yet she likes to have the head warmly covered. Vomiting of all she takes, after which she keeps on retching. Eyes weak, cannot bear the light. Noise in left ear and deafness at times. Tongue dirty; when the attacks are on there is constant clammy, nasty taste in mouth. Ordinarily her appetite is fair.

On examining the abdomen I found both liver and spleen somewhat enlarged, and in the lower part of the body the tumour already mentioned. She complained of weakness in the back. Pulse 84.

The bowels were constipated. Stool dark, hard, like marbles. There was loss of power, difficulty in getting rid of the motion. Full sensation round the waist. Flatulence.

In regard to the urine she had a feeling as if she did not pass sufficient. The passage was slow. Sometimes she would be suddenly seized with desire to pass it and yet be unable to pass any. There was difficulty in commencing, necessitating change of position and pressing. She had been taught to use a catheter, but even this she was at times unable to effect. Urine has a sediment at times.

*Sepia* 30 every three hours.

*July 20th.* No headache; no giddiness; sleep good. Tongue a little brown, not so much bad taste. Soon gets distended. Bowels relieved slightly. Water scanty and difficult to pass. Still feels hot and perspires.

*Lycopod.* 30, one tablet every three hours.

*August 2nd.* Constipation very much relieved. Water better; a little scanty. Twice in the night has had spasms and complete stoppage. Frequent desire to pass water, worse on coughing. Tongue clean; still has thick saliva in mouth on waking. Wakes unrefreshed; no headache. A little tottering or giddy on rising. Still feels hot at times.

Continue *Lycopod.* *Opium* 30 every five minutes if the water stoppage comes on. *Caustic* 30 every two hours if troubled with the cough, causing desire to pass water.



*October 19th.* Two and a half months after last visit she reported herself again, having been away from home in the meantime.

She had been very much better. There had been no difficulty with the water: the quantity of it varied. Now the bowels were again confined. She had a constant feeling as if she had overloaded her stomach. Wretched feeling on waking. Some giddiness. Mouth full of yellowish stringy stuff in morning. Feels miserable between 11 and 12 a.m.

*Natrum Mur.* 30, one tablet every three hours and, if required for constipation, three pilules of *Nux V.* 30 at bedtime, and three of *Sulph.* 30 in the morning.

*December 19th, 1892.* Patient wrote me from Worthing, where she had gone to stay the winter, that she was very well generally; had no headache and no constipation. But two things troubled her.

1. Occasionally, quite suddenly, the head seems to swim; is unable to do anything whilst this lasts. Is almost deaf in left ear, and there is a continual rumbling sound in it.

2. There is frequent recurrence of inability to pass water, quite sudden and irrespective of heat or cold. Difficulty in passing catheter.

I ordered her *Conium* 30, one tablet every three hours, and asked her to send me a few more particulars.

*January 4th, 1893.* No recurrence of giddiness. Retention of urine has recurred frequently—five or six times. In answer to my queries the following particulars were given:

The stoppage comes *from the first*, and quite unexpectedly. Sometimes after having then begun, the patient succeeds in passing a little, and then again the stoppage comes on. She usually succeeds by varying the attitude and pressing different parts.

I now gave her *Hydrastinin mur.* 3x, one tablet four times a day.

On February 1, 1893, I received the following gratifying epistle:

“You will be pleased to hear that there has not been any return of the stoppage since. Your medicine must be very efficacious. The wonder is no doctor ever gave me anything to relieve that distressing complaint, and (at different times and places) I have named it to three or four doctors. For the last week or so I have not been taking the

medicine, thinking it best not, as there was no threatening even of stoppage."

She had a rather severe cold in head and chest, for which I prescribed, and I have heard nothing more of her as a patient, though I have had a letter from her only recently.

The prescription of *Hydrastinin*, it must be owned, was a pathological one, as I have not known it to produce the symptoms removed by it in this patient. In many ways the medicines before given had materially helped the patient; but the urinary difficulty, which her previous medical attendants (allopathic, if I remember rightly) had not even attempted to touch (except with the catheter), still persisted, and I came to the conclusion that this was due to the mechanical effect of the presence of the fibroid tumour.

I was led to the use of *Hydrastinin* by a paper of Dr. Burford's in the second volume of the *Homeopathic Hospital Reports on the Hydrastis Alkaloids*, in which the experiences of several practitioners were given. *Hydrastinin* has been chiefly used to check hemorrhage either associated with endometritis or with fibroids, and Dr. Harper reported a case in which a fibroid tumour had shrunk rapidly under the 3x trit. In one of Dr. Burford's cases, that of a woman aged 40, there was menorrhagia, pelvic pain and difficulty in micturition due to multinodular fibroid. *Hydrastinin* greatly reduced the hemorrhage, but whether the urinary symptoms were affected or not Dr. Burford does not say.

Although there was no hemorrhage in my case I thought the pathological likeness was sufficiently close in other particulars to warrant the prescription, and the result amply justified the choice.

And what about the tumour? As I have not seen the patient since last autumn, I am unable to say what is the condition of this; and, if the truth must be told, I am not very much concerned about it. So long as it has ceased from giving any trouble it matters very little to the patient whether anything remains of it or not. For anything I know it may have disappeared altogether; and whether it has or has not, for all practical purposes the *patient is cured.*

## REMARKS ON THE "MATERIA MEDICA."

By EDWARD MAHONY, M.R.C.S., L.S.A.

VOL. iij. contains the drugs enumerated above from *Carb.-an.* to *Hep.-Sulph.*, and first, *Carb.-an.* This is prepared from leather: it is exhibited in the 30th potency, one or two globules at a dose. *Camphor* is mentioned as an antidote: though many homeopaths are aware that *Camphor* antidotes many medicines, many are not, so I call attention to the danger of allowing *Camphor* in any form near homeopathic medicines. In the general *résumé* of symptoms relieved, "erysipelas in the face" is one not likely to be thought of *à priori*: others noticeable in the digestive sphere are pustules on the gums, bitter taste in the mouth, suppressed eructations attended with pain and griping in the stomach—in the urinary, fetid smell of the urine; in the sexual leucorrhœa, burning and acrid; in the respiratory, obstruction of the nose: in the glandular structures, painful induration of a gland in the chest—in the skin, herpes under the axilla: in the joints, arthritic stiffness of fingers, pain in hips, causing limping—fever (all medicines produce a species of fever), exhausting sweats. Even such a brief condensation as this helps to teach us how wide is the range of this medicine, and how important it is in all cases to trace the connection of symptoms and so bring into sight "the image" of the disease, that we may find a suitably corresponding medicine. For example, how many persons are *liable to* erysipelas of the face, and are satisfied with treatment at the time of the attack, probably *Bella-donna* if the smooth variety, and *Rhus.* if the vesicular variety; but why are they liable to returns of this local inflammation? Because, replies Hahnemann, there is psora in your system, and until you have antipsoric treatment you will continue to be *liable to* the same "explosion of latent psora." Here, however, is an antipsoric which has "most readily relieved" this very complaint. How shall we ascertain whether it will be the antipsoric in this case? Simply by comparing other *chronic* symptoms, which this patient is sure to have, with the chronic symptoms of *Carb.-an.*, and see if there be characteristic similarity between them. Antidotes to *Carb.-an.* are, besides *Camph.*, *Coffea* and *Lachesis*, and then follow analogous remedies: on these two points I do not at present touch, but will

merely say now that most medicines have recognised antidotes and analogues; no doubt all have really.

*Carb.-veg.* This substance, he remarks, "has been considered non-medicinal and powerless by physicians," but that when its chemical properties as an anti-putrefactive became known it was used in this way, locally, to ulcers and in other ways. It "had also removed the fetid odour of the feces in the fall-dysentery." *These odours*, however, *returned in a few hours* (italics mine). "Administered in the form of a crude powder, charcoal can only act chemically." Potentisation was needed to bring out the latent power. This point has been several times referred to in the previous papers, but the above remark, that the value of the *crude* drug as above mentioned, was *chemical*, and therefore for *curative* purposes merely *temporary*, cannot be too strongly insisted upon. Who, for example, would think for a moment that removing the foul odour in a case of dysentery would be part way towards *cure*, or that restoring purity to the air, as far as odour is concerned, in that most sickening of foul smells, gangrene of the lungs, would be curative of the horrible disintegration that is taking place, internally? Yet such is the strange reasoning of the human mind in matters medical, that if the offensiveness be on the skin in the shape of a foul ulcer, there is the greatest possible difficulty in satisfying the mind of the sufferer that for *cure* internal medication will alone suffice: of course sense in rest, position, wise diet and general hygiene must have its place, but all these combined won't *cure*. There follows a much longer list of affections cured, than under the head of the previous medicine. I will only mention those italicised: fear of ghosts at night; heat and pressure in the eyes; stitches below the ribs; stiches in the spleen; evacuations of thin, light-coloured mucus; itching of the anus; varices of the anus; too frequent pollutions; too early menses, too profuse; leucorrhœa; obstruction of the nose; asthma, oppression of the chest; stiffness in the nape of the neck; sweat of the feet; in the morning after rising, the limbs feel bruised; great drowsiness by day; frequent flushes of heat. On only two of the above list shall I remark, and that because I am satisfied a hint on them will be of practical value to patients.

Asthma, oppression of the chest first; since my student days I have been increasingly convinced that by some

means a conviction has been driven into the British mind, with the force of a sledge hammer, that the two fatal chronic diseases of the United Kingdom are consumption (of the lungs principally) and cancer. Now as to the first, I am satisfied that perpetual mistakes are made by confounding it with asthma, and a wonderful comfort it has been many times to be able to assure patients that their trouble is not consumption, but asthma; then as to asthma the importance of recognising the close connection between the paroxysmal attacks of dyspnea, and those of indigestion cannot be too strongly insisted upon; so taking our symptom asthma, oppression of the chest: in chronic cases of asthma, *Carb.-veg.* would occur to the mind, and at once its other symptoms *in the digestive sphere* would be thought of, and inquiry would soon elicit whether such existed in the case under consideration. I well remember seeing some years ago a gentleman who had suffered several years from hay asthma, and was greatly reduced in health and strength—a moderately long inquiry of say three-quarters of an hour elicited *indigestion symptoms similar to those caused by Carb.-veg., which had existed several years previously to the development of asthma and were still present*: he received *Carb.-veg.* 200, and being repeated a little too frequently he experienced during the first night—first relief, then aggravation of his asthmatic sufferings. Great drowsiness by day; I merely hint here that if the hour of drowsiness or other condition can be fixed, it is often very useful in deciding between two or three medicines which have a general similarity to the particular case. Antidotes and analogues again follow, and, “after *Carb.-veg.* are especially suitable, *Ars. Mercurius, Kali*”; this is another very valuable point in the practical application of the materia medica which, however, can at present only be referred to.

*Causticum.* The italicised affections mentioned under this drug are: agglutination of the eyes; fistula dentalis; cramp-like pains in the stomach; involuntary micturition day and night; involuntary emission of urine when coughing, sneezing, or walking; aversion of females to an embrace; delaying menses; leucorrhœa; obstruction of both nostrils; chronic hoarseness; short cough; stitches about the heart; cold feet; swelling of the feet; tremulous weakness. Of the above I notice only involuntary micturition day and night; involuntary emission of urine when coughing, sneezing, or walking. The number of sufferers of all

ages and both sexes from this complaint in some of its forms is truly great, and it is a class of cases most difficult to get at oftentimes because of the few symptoms; therefore to all whom it may concern let me say that this, like all other diseases, is never a purely local trouble, but always connected with other symptoms as concomitants, or with conditions, as in the above symptom. I had a patient who had been troubled with this affection since childhood, and the apparently unconnected symptom of receding of the gums enabled me to give prompt relief to a complaint be it observed of at least fifteen years' duration. Other conditions, most useful, in nocturnal troubles of this kind are the time when it occurs, whether during the first deep sleep, in the small hours of the morning, as also whether entirely unconsciously, whether accompanied by dreams, &c. After mentioning antidotes, he says, *Phosphorus* increases the effects of *Causticum*.

*Clematis*. This is one of the shortest provings among the antipsorics, yet its title to a place of honour as curative of chronic conditions is shown by the fact that it "may be used against a number of affections which have their origin in the abuse of mercury, and are complicated with psora, in dangerous eruptions of the head and skin, several affections of the urinary organs, strictures of the urethra, and various kinds of very troublesome inflammations of the eyes," besides other most serious conditions mentioned including melancholia. The mention of melancholia (always a more or less *chronic* condition) reminds us again how invaluable would the careful discrimination of mental and moral symptoms which is found under homeopathy prove in the treatment of that large number of sufferers at present relegated to lunatic asylums, and years, often a lifetime, of hopeless misery.

*Coloc.*: italicised symptoms, violent colic; various kinds of bad consequences from indignation and great provocation to anger; internal gnawing grief, excited by the unworthy treatment which had either been inflicted upon oneself or upon persons which excite one's compassion: coxalgia (hip-joint neuralgia); it is characteristic of *Coloc.* to excite crampy pains in internal and external parts. The above are good illustrations of the value of moral symptoms: in a case of colic, for example, it may be of far more importance to know what upset the person morally and how, than to know the preceding meal or

half-dozen meals, and the difference between indignation from unworthy treatment and the silent, meek suffering of, e.g., *Pulsatilla*, may just decide the question between these two medicaments, in cases where the *bodily* symptoms were very much alike. One other symptom from the work of Noack and Trinks is both interesting and instructive, namely, frightful pain beginning with itching in the forehead, &c.: the alternation from itching to pain here is remarkable.

*Conium*: the renown of this plant has come down to us from the days of Socrates. Its awful abuse in the past, quantities even up to "a wineglassful of the recent juice, even 6 times a day"!! are energetically denounced, and then comes the important remark, that "in order to act beneficially, it has frequently to be preceded by some other drugs," and then in the enumeration of symptoms we find want of disposition to work; falling off of the hair of the head; roaring in the ears; tingling in the ears; heat in the face; frequent and empty eructations the whole day; constipation, with unsuccessful desire for stool; thick urine; cutting in the urethra when emitting the urine; uterine spasms; itching of the pudendum and inside; cough, especially in scrofulous patients; asthma in the morning; coldness of the feet and hands; physical depression and other symptoms from walking in the open air; a very important observation, again from Noack and Trinks, scirrhus (stone cancer) and carcimoma of the mammae brought on by contusion: it may be remarked here that the action of *Coni.* on the glands generally, and especially of the breasts, is very marked, and in fact in injuries as contusions just as if the muscles were specially involved, one would think at once of *Arnica*, so if the glands were bruised one would think of *Coni.* Going back to "want of disposition to work," it is remarkable how many medicines have this in one form or another, and on looking through the provings a *physical* reason is often to be discovered; no doubt often and often has a child or an adult been harshly blamed and punished when what was needed was the right antipsoric which would have removed the bodily disease which was weighing down the unfortunate delinquent; we see this again in *Coni.* in the physical depression from a walk in the open air.

*Cuprum*.: again abuse in administration has to be referred to in the past use of this drug. In these days

of "extract of thyroid" it is interesting to read (from Voigtel's *Materia Medica*) pain in the thyroid cartilage, and in this connection it will not be out of place to say that in the cases of enlarged thyroid gland (Derbyshire neck), now apparently so frequent in this country, homeopathy has no special extract, but treats every case on its individuality, by ascertaining what symptoms general or local or both are present, and giving the corresponding remedy, and as these symptoms diminish so does the goitre and *vice versa*. A characteristic of copper symptoms is that they usually appear in groups, lasting half an hour or an hour, and recurring from time to time in the same form and combination. The use of copper is therefore so much more homeopathic as the symptoms appear at irregular intervals and in groups, hence its value in partial or general clonic spasms, St. Vitus' dance, epilepsy, whooping cough, cutaneous eruptions, old ulcers and spasmodic affections with too fine and sensitive senses; also Asiatic cholera—we must remember it was one of Hahnemann's four great medicines for cholera.

*Digitalis* (foxglove): here occurs the somewhat pungent remark—a cautious physician can always do without antidotes. We are not favoured with any brief epitome under *Digitalis*, so I pass on to *Dulcamara*: curative in boring and burning in forehead; sensation as of a board in front of forehead. Scrofulous ophthalmia; incipient amaurosis; crusta lactea; cough, with hoarseness; catarrh of the bladder, with difficulty of micturition; a sort of whooping cough consequent upon cold; rending pains in the limbs consequent upon cold; humid, suppurating herpes; herpetic eruption with glandular swellings, &c. In the above we find a *sort* of whooping cough; again we learn how homeopathy individualises: only the other day a patient wrote to me about his three children, all having equally whooping cough, but the "sort" of each was different, as shown by one or more differing symptoms, hence each required a different medicine and with satisfactory results. Again we read our drug is specific in some epidemic fevers.

*Euphorbium*. This plant has but a comparatively short proving, but a very important mental or moral symptom, namely, melancholia, anxiety as if he had swallowed poison. To how many of the unfortunate inmates of our asylums would not this apply? It is no infrequent



occurrence to have to feed a patient with the stomach pump, because he or she has the permanent delusion that all given to them is poison. Would it be of any use to suggest to even the most advanced Professors of mental diseases, to try in all such cases a few doses of *Euphorbium*, of say the 30th potency? Yet it is a fairly proved drug, and has been "successfully employed in" vesicular erysipelas of the face; breaking off of the teeth in little fragments; throbbing, beating toothache, with swollen cheek; cardialgia (heart pain); spasmodic contraction of pit of stomach; retching, with vomiting of mucus and water; pain in small of back; asthma, palpitation; headache; constipation; frequent flushes of heat in alternation with chillness.

*Graphites*. Chemists, scientific and analytic, who are unbelievers in the doctrine of potentisation, ought at least to pause over this substance, for they know that, unlike as blacklead and diamond are in physical properties, they are nevertheless chemically identical. What makes the difference? Altering the conditions in which the substance is. The italicised symptoms in *Graphites* are: anxiousness during work when sitting; falling off of the hair, even on the sides of the head; aching of the eyelids; appearance before the eyes as if wavelets of light were dancing before them; hardness of hearing; flying heat in the face; humid eruptions in the face; excessive hunger; eructations; morning nausea; heaviness in the abdomen; accumulation of flatulence; excessive expulsion of flatus; costiveness; painful varices of the rectum; retarding menses, with violent colic; menses too scanty, too pale; leucorrhœa like water; obstruction of the nose, troublesome dryness of the nose; oppression of the chest; pain in the nape of the neck; coldness of the feet in the evening in bed; parts are easily strained by lifting; liability to catching cold; herpes; sleep full of ravings; anxious, frightful dreams. In above, anxiousness during work when sitting: note the condition here, as conditions and concomitants, always important, are doubly so in mental and moral symptoms.

#### HOMEOPATHY AMONG THE ALLOPATHS.

It is astonishing—or rather it would be astonishing if we had not come to look upon it as the natural result of

deliberate ignorance and stupidity *préense*—how allopaths can practise bits of bare-faced homeopathy without the least acknowledgment to themselves or anybody else of the principle they are making use of. They can give *Ipecacuanha* for nausea and vomiting, the *Mercuries* in dysenteric states, *Belladonna* in scarlet fever and delirium, without wincing once; they can even give *Carbolic-acid* for acute indigestion and *Arsenic* as a “tonic”; but as for seeing in their results the working out of any law of drug action, that is quite beyond them. According to their hap-hazard ideas, it is perfectly natural to gather figs off bramble bushes and thorns. These interesting innocents exhibit a little pleased surprise when a curative result ensues, but their infantine minds are perfectly incapable of taking (or invincibly unwilling to take) the one step further.

A case in point is the use of *Arsenic* in the treatment of epitheliomatous cancer. If anything has been established in drug action, it is that *Arsenic* is capable of causing cancer. Mr. Jonathan Hutchinson has proved that beyond doubt; and he has also proved that *Arsenic* is curative in that disease. Here is an extract from *The British Medical Journal* “Epitome of Current Medical Literature,” of September 9th, giving further evidence of its curative power:—

#### “ARSENIC IN EPITHELIOMA.

“Lassar (Reprint from *Berl. klin. Woch.*, 1893) reports his success with *Arsenic* administered internally in four cases of epithelioma affecting various parts of the face. Case 1 was a man, aged 50, with three large swellings occupying one orbit, the nose and the chin respectively. Microscopic evidence showed epithelial cells, spindle cells, and alveolar structure. Immediately after the administration of *Arsenic*, the three growths gradually diminished by drying up, involution, and cicatrisation, until the youngest growth had disappeared, and the second one cicatrised. The largest and oldest growth, occupying nearly the whole of the orbit, showed little change, and owing to the suggested excision of the eyeball, the patient withdrew from treatment, and is believed to have died subsequently. In a second case, that of a woman of advanced age with a smaller growth on the nose, a great reduction in size took place, and the patient, being satisfied, also ceased to attend. The author now resolved to adopt the same measure with recent growths instead of at once resorting to the knife. The first patient had on one cheek

a growth equal to half a walnut, which had taken six or eight months in developing. Only a slight erosion of the surface was present. The diagnosis was confirmed microscopically, and *Arseniate of Potash* was administered three times daily for two months, when the growth had shrunk and cicatrised. The next patient was a man with a similar growth of three months' standing on the left ala nasi, the condition and proofs being the same. Fowler's solution was given internally, accompanied at first by subcutaneous injections. These being painful were discontinued, and in two months complete disappearance with cicatrization followed. The author admits the small number of cases experimented on, but lays stress on the striking and indisputable results. Illustrations of the patients at various times and of the microscopic sections are given."

The same number of this *Journal*, which gravely pronounced homeopathy to be "a nonentity"—who ever heard of a science or an art being "an entity"?—the previous week, inserts a memorandum on the cure of a case of Menière's disease with *Salicylate of Soda*. "Menière's disease" is the name given to vertigo associated with disorders of hearing. Now the thing to be looked out for in patients who are being dosed with *Salicylate of Soda* for rheumatism is vertigo associated with deafness and noises in the head. But Dr. John Gay, of Putney, and the editorial staff of *The British Medical Journal* would scorn the idea of adding two and two together to make four. Here is the case:—

"A CASE OF MENIERE'S DISEASE CURED BY  
*SALICYLATE OF SODIUM*."

"I think the following case worth recording. The patient, a lady, aged 65, had a weak, probably fatty, heart, and an enlarged liver, having a large nodule near the edge, that has existed some years, but showing no signs of increase nor other symptoms connected with it. She had no evidences of gout, and was certainly not an alcoholic.

"The patient had suffered from indefinite 'giddy attacks,' with sickness, since September, 1889. In April, 1890, she first had definite attacks of Menière's disease, diagnosed by Dr. T. B. Scott, of Bournemouth, who tells me that she gained some advantage from *Gelsemium*, till its physiological action necessitated its discontinuance, and confirmed by Mr. Cumberbatch. She came to live in London, and when I first saw her—in August, 1890—she had distinct attacks, suddenly feeling that the walls of her room were falling in upon her, that she was

rolling over and over, and this was accompanied by increasing deafness in one ear. These attacks were at this time as frequent as eleven or twelve a day. I commenced by giving her three grains of *Salicylate of Soda* three times a day. The effect was marked, at once reducing the frequency of the attacks. She continued to have attacks, though less frequently, about two or three times a week for some months afterwards, though some of the purely 'giddy' attacks may have been due to the heart, or to general weakness. The salicylate was continued steadily.

"By March of 1891 she was much better, but had considerable heart weakness. She went to Bournemouth, where she picked up greatly. In May, 1891, she reported herself as much better, only having an attack once during the month, and once in June. By November, 1891, she considered herself quite cured, having had no attacks for some time, and to the present time she has remained free from any symptoms of her disease beyond the deafness in one ear.

"The treatment has lasted rather more than a year, during the greater part of which time she took the salicylate steadily, though during the last six months she had considerable intervals without it. I think there can be no doubt as to the nature of the disease.

"JOHN GAY, M.R.C.S., L.R.C.P., D.P.H.

"Putney."

## MATERIA MEDICA.

### TOXIC EFFECT OF *GALLIC ACID*.

By THOMAS W. BELL, M.B.C.M. (Edin.), M.D. (N.Z.), Wanganui.

T., AGED 32, male, had been suffering from internal hemorrhoids for two or three years. Latterly there had been venous hemorrhage with each movement of the bowels, &c. He had tried various remedies, such as cold water, &c., and had touched the piles with *Tt. Ferri. Perchlor.* and *Liq. Ferri. Perchlor.* to check the bleeding. He had lost about a dessert spoonful of blood a day for two months or more.

I advised operation, but he wished to give other remedies a trial first, and used *Hazeline*, injected into rectum, and also taken internally by the mouth, for a time with no benefit; also *Chlorate of Potassium*. He then got some *Ung. Gallæ C. Opio*, and one morning applied it freely to the bleeding hemorrhoid just after a motion. The

piles were not painful, and all discomfort ceased when the pile was replaced. There was no bleeding, nor did the pile come down except when the bowels were moved. After using the *Gall.* ointment the first time he had an attack of what appeared to be *hay asthma*—not severe. I did not attribute this in any way to the use of the ointment, but to his probably having inhaled some irritating dust.

Three or four days afterwards he had a *similar asthmatic attack, followed by an eruption of urticaria for three or four hours.* I found that a few minutes before he had smeared the pile again with the *Gall.* ointment, but I did not think of connecting the asthma and urticaria with the use of the ointment.

The hemorrhage from the piles still continuing freely at each motion, I asked him to use a 3-gr. *Tannin* suppository a short time before and after each movement of the bowels.

In the afternoon, feeling quite well, he inserted a suppository. In about four minutes the symptoms of asthma began to show. I watched the case throughout. First, there was pain and a tight feeling under the sternum, and a trouble in breathing; the breathing got quicker and laboured, accompanied with wheezing and an occasional cough—until, in about half an hour from the time when the suppository was introduced, all he could do was to lie on the bed gasping and straining for breath, face flushed, hot and perspiring, râles and rhonchi all over the chest, and pain on coughing. With each cough a little pellet of mucus was expelled. This condition lasted for another half-hour, and then the pain and rapidity of breathing began to subside, but then the attack of urticaria commenced. Starting about the head and neck, it extended all over the body, and became especially marked about the feet. The irritation and itching was intense. Some of the wheals were from two to three inches in diameter. At the end of about four hours the cough had stopped, the breathing had returned to normal, but the irritation of the skin continued in a less degree till next morning.

The patient has never had any asthma, or anything approaching it, before or since, nor have any of his relatives ever had anything of the kind. Nor has he ever had urticaria or any skin eruption whatever.

There can be no doubt but that both these symptoms were caused by the absorption or irritation of the *Tannic* or

*Gallic Acid* applied to the hemorrhoid. None of the other drugs used, such as steel drops, *Hazeline*, *Chloride of Potassium*, &c., caused any symptoms like the above, nor did the symptoms appear except when the *Tannic* or *Gallic Acid* was used, so I can only conclude that in some peculiar way the *Gallic Acid* has had a toxic effect. Both the drugs have been used frequently by the chemist (who made up the ointment and suppositories) for other patients without causing any such symptoms.

*Gallic Acid* is toxic in some cases, I know, but in no literature at my disposal can I find a similar case to the above. I should be glad to hear if others have.

The after history is as follows: The patient agreed to an operation, but first of all went South for a change. Three or four days after leaving here and getting to a cooler and more bracing climate, the bleeding stopped, he felt much better, and ate better. In a fortnight the anemia was gone, and although the piles still remained, yet they were so much improved that he decided not to undergo the operation at present.

The above interesting observation is from the *New Zealand Medical Journal* of July last, kindly sent us by Dr. Lamb. The italics are Dr. Lamb's. We cannot help remarking that in our opinion the patient was very wise in refusing operation. Had the operation been performed he would probably have heard more of his hay asthma.

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### BELLADONNA—A PROVING.

Communicated by Dr. FULLAR.

THE following involuntary proving of *Belladonna* (related by the prover) seems worthy of record as illustrative of the peculiar idiosyncrasy in the action of the drug occasionally met with in practice. "Had a bad boil which was very painful and nearly mature, when three drops mother tincture of *Belladonna* were taken about half-past nine in the evening. Became very thirsty about an hour and a half afterwards. Woke about four a.m., with pulse quick thumping and audible in the head; skin dry and hot. In the morning the skin was red and swollen; urine scanty and high-coloured. The pain of the boil had ceased, though there had been no discharge. Next day the pain returned, and

the discharge soon reappeared, while the other symptoms wore away and had entirely subsided by the fourth day. In a few days the skin of the face began to peel, followed several days later by that of the hands and feet. The body never peeled to any great extent.

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## INSTITUTIONS.

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### · HOMEOPATHIC CONGRESS AT NORTHAMPTON.\*

THE Annual Congress of Homeopathic Practitioners was held at Northampton Town Hall on Thursday, Sept. 28th, when there was a very good attendance of members from all parts of the country. Dr. Alfred E. Hawkes (Liverpool), the president of the Congress, occupied the chair, and amongst those present were Dr. A. C. Clifton (Northampton), vice-president; Dr. Dyce Brown (London), secretary; Dr. Madden (London), treasurer; Dr. Gilbert (Reigate), Dr. Storrar (Southport), Dr. Bennett (London), Dr. Proctor (Birkenhead), Dr. Stopford (Southport), Dr. W. T. P. Wolston (Edinburgh), Dr. C. Wolston (Chislehurst), Dr. T. Roberts (Harrogate), Dr. Rowse (Putney), Dr. Jagielski (London), Dr. Percy Wilde (Bath), Dr. Gibbs Blake (Birmingham), Dr. Powell (London), Dr. A. C. Pope (Grantham), Dr. Nicholson (Clifton), Dr. G. Clifton (Leicester), Dr. Stoneham (Ventnor), Dr. Roberson Day (London), Dr. Burford (London), Dr. Dudgeon (London), Dr. E. A. Neatby (London), Dr. J. W. Hayward (Liverpool), Mr. Knox Shaw (London), Dr. Gerrard Smith (London), Dr. E. J. Hawkes (Ramsgate), Dr. J. Pincott (Wells), Dr. P. Stewart (Liverpool), Dr. Byres Moir (London), Dr. Frank Shaw (Hastings), Dr. Cash Reed (Plymouth), Dr. Hughes (Brighton), Dr. Mackechnie (Bath), Dr. Croucher (Hastings), Dr. C. H. Blackley (Manchester), Dr. Galley Blackley (London), Dr. Murray (Folkestone), Dr. H. Harris (London), Dr. Norman (Bath), Dr. Collins (Leamington), Dr. Mitchell (Stoke-on-Trent), Dr. Washington Epps (London), Mr. Dudley Wright (London), Dr. Ross (Northampton), Dr. A. G. Wilkinson (local hon. secretary, Northampton), Dr. Capper (Liverpool), &c. The visitors attending the Congress included several ladies, Mr. E. Clifton (Ipswich), Mr. F. Clifton (Derby), Mr. G. M. Tebbutt, J.P., Dr. Gander, Mr. W. Westley, Mr. Kirby, Mr. T. H. Merrick, Mr. F. Cowdery (Northampton), &c.—The President, who was warmly applauded on taking his seat, opened the proceedings of the Congress with

\* From *The Northampton Mercury*, Sept. 29th.

an interesting and frequently applauded presidential address, entitled "Should Likes be Treated by Likes?" First welcoming those who had come from a distance to attend the Conference, Dr. Hawkes referred in highly sympathetic terms to Dr. Carl Fischer, Mr. John Potts, and Dr. Henry Blumberg, whose deaths had occurred during the preceding twelve months. He then laid before the Congress some of the reasons that prompted him to desire that homeopathy should be more fully recognised. Homeopaths depended for their therapeutic knowledge upon exact experiments made upon the very class of individuals they had to treat. A number of well-informed observers had striven to gather from the action of drugs on their own bodies and the bodies of others the latent capabilities of medicinal materials, with a view to carrying out the system of therapeutics the Congress had met to advance. To make his argument clear, and to illustrate the homeopathic meaning of the term "similar," Dr. Hawkes drew attention to the medicinal agents homeopaths used—*ailanthus* in scarlet fever, corrosive sublimate in cases of renal mischief, and lead (*plumbum*) in alcoholism. He trusted it would be admitted that if search was duly and carefully made a substance capable of setting up a condition similar to that accompanying most known diseases might be found. The use of such knowledge would depend on the therapeutic principles followed by the practitioner making the search. Whenever a number of symptoms pertaining to a patient were narrated, the listener, if a homeopathic practitioner, almost involuntarily ran over the pathogenesis of the corresponding drug; and it might be fairly alleged that one distinction between homeopaths and their opponents was that others did not have flit through their minds pathogenetic counterparts when eliciting symptomatology in the widest sense of that term. Homeopaths had the utmost confidence in suggesting that those who conscientiously differed from them should put the matter to the test. Let them administer in a suitable dose the drug which most surely produced a similar train of symptoms in the healthy, and conviction, Dr. Hawkes ventured to say, would almost certainly follow. After dealing with the proved efficacy of minute quantities of drugs, the paper went on to speak of the success of homeopathic treatment. It might be asked if homeopathy was sufficient for all medical cases. In the great proportion of cases Dr. Hawkes was abundantly pleased with it. In cholera, yellow fever, and the various forms of septicemia (conditions resulting from blood-poisoning), in the exanthemata (small-pox, scarlet fever, &c.), peritonitis, and other inflammations, it had served its adherents well. Referring to the numerical status of homeopaths, Dr. Hawkes refrained from touching upon matters still



*sub-judice*, but he asked if any one supposed that there were no more medical men who had confidence in homeopathy than those who appeared, or were likely to appear, in separately published lists? In his opinion there did not exist any adequate method of counting those who believed in, and more or less practised, homeopathy. He inferred from observation and information that homeopathy was employed by a very large number indeed of his fellow countrymen. In America there were 20 colleges (16 of which granted degrees) manned by homeopathic professors. There were more practitioners of homeopathy in Chicago or New York than in the British isles. In the United States there were 43 general and 45 special homeopathic hospitals; and last year upwards of 6,000 beds were available for the 40,000 patients, of whom 30,000 were cured and 3.6 per cent. died. Dispensaries dealt with 160,000 patients per annum, and 27 homeopathic journals flourished. Were they to abandon all hope of obtaining by similar methods a status for homeopathy in this country?—On the motion of Dr. G. Blackley, seconded by Dr. Wolston, a cordial vote of thanks was passed to the President for his paper; and Dr. Hawkes, in his brief acknowledgment of the vote, said it was gratifying to receive this testimony of goodwill from the Congress, and given at the initiative of Dr. Blackley and Dr. Wolston, it was doubly acceptable.—Among the letters of apology for non-attendance was one from Dr. Burwood, who wrote that his only son had been taken seriously ill. Dr. Dyce Brown, the secretary of the Conference, stated he had received a telegram that morning stating that Dr. Burwood's son was dead. A vote of condolence and sympathy with Dr. Burwood in his affliction was silently passed.—Dr. A. C. Pope next read a valuable paper on "The Selection of the Homeopathic Specific," exhibiting much special knowledge and research. The paper dealt in succession with the method of Hahnemann; the object aimed at by him; symptoms; the state of physiology and pathology in 1810; the study of medicinal action; the interpretation of symptoms arising from disease and being produced by drugs; the differentiation of similar drug effects; and the use by practitioners of "The Repertory." At the conclusion of Dr. Pope's paper an interesting discussion arose, in which Dr. G. Blackley, Dr. Hayward, Dr. Dudgeon, Dr. W. T. P. Wolston, Dr. Gibbs Blake, and Dr. Hughes took part.—Dr. E. A. Neatby followed with a short paper on "Ouabain," a vegetable extract used by tribes of East Africa for poisoning their arrows. One-sixth of a grain is said to be fatal to man. It is regarded as a specific (not, Dr. Neatby said, that he advanced it as a homeopathic remedy) for whooping-cough, cutting short the attack, reducing the paroxysms, and hastening convalescence. Dr.

Neatby said that the instances of prompt cure of whooping-cough had been too numerous for him to doubt its efficacy.—Dr. Percy Wilde said it was purely on theoretical grounds and his knowledge of homeopathy that led him to prescribe ouabain.—Dr. Gerard Smith said he used ouabain about three years ago, but after trying it he broke the bottle and put it down the drain, thinking it too dangerous a drug to have about.

The Congress then adjourned, the members and visitors, at the invitation of Dr. Clifton, partaking of luncheon, provided in the Old Reading-room. Dr. Clifton presided. After the repast, at the initiative of Dr. Hawkes, the health was drunk of Dr. Clifton. It was an extra inducement to the Congress to come to Northampton that their venerated friend Dr. Clifton was there to make it a success.—Dr. Gibbs Blake (Birmingham) and Mr. T. H. Merrick (on behalf of the veterinary profession in Northampton) cordially endorsed the proposal; and after being heartily cheered Dr. Clifton briefly replied. He said that he had attended all the Congresses save three that had been held since the first at Cheltenham. Northampton, he said, was chosen as the place of meeting for this year more because Dr. Hawkes was a native of Northamptonshire than anything else. ("No, no.") He heartily thanked the members of the Congress and the visitors for attending in such large numbers.

On the Conference reassembling at two o'clock for the transaction of the ordinary business, the report of last year's Congress was received. Dr. Hayward presented the report of the Hahnemann Society, the accounts of which showed receipts amounting to £119 and expenditure £103. On a vote, London was decided as the place of the next annual meeting by 24 votes, as against 17 given for Tunbridge Wells. The President announced that Dr. J. Galley Blackley had been elected president for next year by a decided majority over Dr. Madden, the numbers being—Dr. Blackley, 33; Dr. Madden, 18. Dr. Madden was unanimously chosen vice-president. Dr. Madden was unanimously re-elected hon. treasurer, and Dr. Dyce Brown was similarly re-elected hon. secretary. The date of the next annual Congress was fixed for the last Thursday in June.—The Hon. Secretary mentioned that he had received a letter from Mr. Alfred Heath, possessing a Philadelphian diploma of M.D., asking to be allowed to attend the Congress. He replied to Mr. Heath that it was generally understood that the Congress was open only to those possessing registerable degrees. He desired to ask the Congress whether he had done right. The Congress thoroughly endorsed the Secretary's action without a dissentient voice.—Dr. Cash Reed read an important technical paper on "Uterine Deviations and their Auxiliary Treatment." Dr. Dyce Brown thanked Dr. Cash Reed for his highly practical paper.

In the subsequent discussion valuable remarks were made by Dr. Dyce Brown, Dr. Madden, Dr. Burford, Dr. Stopford, Dr. Jagielski, Dr. Wolston, Dr. Roberts, and the President (Dr. Hawkes).—Dr. Hughes opened a discussion on the "Directory" question, and ultimately a proposition approving of the names of homeopathic practitioners being published in a directory was negated by 20 votes to 17.—This ended the Congress, shortly after five

We should state that Dr. A. C. Clifton, the vice-president for 1898, and Dr. A. Wilkinson, the local secretary, made the excellent arrangements that very largely contributed to make the Conference at Northampton a thorough and pleasant success.

Nearly all the members of the Congress attended a *recherché* dinner, provided in the Old Reading-room in the evening by Mr. G. Nichols. Dr. Hawkes, the outgoing president, occupied the chair, and amongst the visitors were the Mayor of Northampton (Councillor Henry Martin), the Mayor of St. Leonards (Dr. A. R. Croucher), the Rev. J. T. Brown, Mrs. M. P. Manfield, Mrs. Hawkes, Miss Hawkes, Mrs. N. Hawkes, Mrs. Mackenzie, Mrs. A. C. Clifton, Mrs. G. Clifton, Miss Clifton, Miss Pope, Mrs. Cash Reed, Dr. H. Harris, L.C.C., Mrs. Harris, Mr. W. R. D. Adkins, C.C., Mr. and Mrs. H. Butterfield, Miss Butterfield, Mr. H. Henderson, Mr. P. Pope, Mr. G. M. Tebbutt, Mr. F. Clifton (Derby), Mr. E. Clifton (Ipswich), Mr. F. Cowdry, Mr. W. Westley, &c. Mr. Manfield, M.P. was prevented by indisposition from being present; and the Mayor and Mayoress of Grantham (Mr. and Mrs. Gamble) unfortunately lost their train, and were unable to attend.—After the repast, the comprehensive toast, "Her Majesty the Queen, the Prince and Princess of Wales, and the rest of the Royal Family," was felicitously given by the President, and was heartily received. Next, on the proposition of the President, the company drank in solemn silence to the memory of Samuel Hahnemann, who taught them, said Dr. Hawkes, so much of the method and practice they had met together to carry on—one whose name would live as long as medicine was necessary, and whose doctrines would always hold an all-potent place.—Dr. H. Harris proposed "Homeopathic Hospitals and Dispensaries," and in the course of his speech mentioned, amid much applause, that owing to the exertions of Dr. Clifton and his assistant, Dr. Wilkinson, the Northampton Dispensary had on its roll 2,500 members.—Dr. J. D. Hayward, surgeon of the Hahnemann Homeopathic Hospital, Liverpool, replied, expressing the hope that country practitioners would support the hospitals by sending patients.—Dr. Gibbs Blake gave "Homeopathic Literature and our Medical Societies," to which Mr. Knox Shaw, editor of "Homeopathic

Hospital Reports," responded.—Dr. Dudgeon, who was received with musical honours, proposed "Readers of Papers at Conference," and Dr. Cash Reed replied.—The Mayor of St. Leonards (Dr. Croucher) gave "Northampton: its Prosperity." Dr. Clifton, he said, came to Northampton something like forty years ago, and had done the work of twenty men in propagating the principles of homeopathy in the Midlands.—The Mayor of Northampton, who had a flattering reception, said he was pleased that the homeopathic practitioners had honoured Dr. Clifton and Northampton by making the town the meeting-place of their Conference. He spoke of the high appreciation in which Dr. Clifton was held in Northampton—always noted for his kindness to people; and no one in the town, his Worship added, was kinder to animals.—Dr. Dyce Brown gave "The Visitors," to which Mr. W. R. D. Adkins responded.—"The President," proposed by Dr. G. Clifton, and "The Secretary, Treasurer, and Local Officers," proposed by Dr. Hayward, and other toasts, followed. A number of excellent songs were sung, Mr. Walter Ashton being at the piano.

#### NEW HOMEOPATHIC HOSPITAL, PLYMOUTH.\*

##### OPENING CEREMONY.

THE new premises in Lockyer Street, Plymouth, which have lately been acquired and adapted to the purposes of a homeopathic hospital, were formally opened by the Right Hon. the Earl of Morley (in the absence of the Countess), in the presence of a large gathering of friends of the institution, on Tuesday, October 10th. The premises occupied until yesterday in Union Street had been found inadequate to meet the increasing demand for medical help, and the house which had been acquired in Lockyer-street, having undergone structural and other alterations, has been fitted up with the best appliances, and at the rear there is a separate building for dispensary uses. The total outlay for purchase, alterations, and furnishing, is estimated at about £2,000, towards which substantial donations and gifts have already been given. The alterations made include a thorough overhaul from a sanitary point of view, and new floors, strengthened with iron girders and columns. The basement is now devoted to the purposes of kitchen, scullery, pantries, and nurses' dining-room. On the ground floor are committee-room, men's ward for six beds, and nurses' sitting-room. On the first floor are women's ward for six beds, children's ward and bath-room, and above are private wards for paying patients, matron's room, and operating-room, and bed-rooms for nurses and

\* From the *Western Morning News*, October 11th.

servants. The stable buildings at the rear have been partially demolished and converted into a dispensary, approached from Mulgrave Street, having waiting-room, doctor's room, dispensary, and accident and operating rooms. The hospital and dispensary are connected by a glazed corridor. The alterations have been carried out from the plans and under the instructions of the architects, Messrs. King and Lister, of Oxford Place, by Mr. W. H. Lethbridge, contractor, and the painting and decorating has been done by Mr. A. J. Osborne, of York Street.

At the opening ceremony the chair was occupied by the Rev. Professor Chapman, and amongst others present were the Right Hon. the Earl of Morley, Revs. H. Vickers, G. B. Berry, T. H. Howard, W. J. Cuthbertson, Professor T. S. Macey, Drs. Alexander, Vawdrey, Cash Reed, and Cooke, Messrs. Ed. James, J.P., J. P. Brown, J.P., W. Foale (senior and junior), A. Groser, I. Latimer, J.P., H. S. Hill, J. E. Bowden, G. R. Bourne, C. S. Nichol, J. Carkeet, G. Davis (hon. treasurer), H. J. Lister, and a large number of ladies.

The Chairman prefaced the ceremony with a brief sketch of the origin and scope of the undertaking. He said it was in 1858 that the first attempt was made to afford to the poor some of the benefits which were believed to attend the administration of medicine according to the school they represented. A small dispensary was then opened in an upper room in Bank of England Place. The work proceeded in a quiet and modest way until the increase in the number of patients necessitated the removal of the dispensary to Princess Street. This took place in 1881. For a few years the change of locality and better premises met the requirements of the case, but there were frequent instances in which hospital care and attention seemed most important, so that in 1883 it was resolved to seek a house centrally situated that could be converted into a cottage hospital, and at the same time furnish accommodation for dispensary purposes. Through the generous gift, by the late Mr. Tyeth, of £1,000, premises in Union Street were secured. These premises, though adequate just then, were never regarded as ideal, and were purchased because, after long waiting and much inquiry, no other within the reach of their means were obtainable. This provisional settlement more than answered their expectations, as respects the demand for help to the suffering poor. The highest figures of dispensary patients before entering on the Union Street premises give 1,072 for the year. Gradually the numbers rose, till last year there were no less than 4,061 patients, embracing 10,218 attendances, and 3,840 visits by the medical officer to patients at their homes. Meanwhile there was an increasing supply of hospital cases, far in excess of such accommodation and care as were possible in that building. Consequently it

was resolved, even three or four years ago, to look out for more commodious premises; and although for a long time it seemed impossible to find in a central and healthy situation such a building as was required, the present house was at last secured. Under the transforming hand of the architects, Messrs. King and Lister, the place had been converted into what might with all becoming modesty be called a model hospital of its class. No pains had been spared to make it replete with the best and most approved fittings, furniture, and appliances. The sanitary arrangements had especially been conformed to the most recent scientific standards. Also the baths, the private and public wards, the operating room, and the means of communication through the house have been planned with severe regard for the convenience and health of patients, nurses, servants, and medical staff. There were now twenty beds in five wards, two of which were private—models of comfort and cheerfulness. One ward would be set apart for children. The accommodation for nurses and servants was also abundant. In addition to the hospital in Lockyer Street, they had built in the rear, entrance by Mulgrave Street, a commodious dispensary, consisting of five rooms. Those present were cordially invited to inspect the premises for themselves. Of course the outlay for the purchase, transformation, furnishing, and fitting with suitable appliances had been considerable. The committee felt bound, in the interests of the sufferers and also of the public, to do well what they attempted to do. Their confidence was in the generous sympathies of the friends of the poor and needy. In their way, and with the best resources they could command, they sought to comfort the sad and to lighten the sorrows of their less fortunate neighbours. The care and economy of the administration may be seen in this, that last year 10,218 dispensary attendances, 3,840 visits to the homes of the sick poor, 268 cases of accident, and 48 hospital cases were all provided for at the very moderate cost to the public of less than £450—a result due mainly to the large amount of voluntary service rendered by ladies, and also by the medical staff. That the demand for their enlarged effort existed, was apparent from this, that ever since last January to the present week, the number of accidents and sudden emergency cases had risen to 300. That the poor came in such increasing numbers, seeking relief from their sufferings, was evidence that they appreciated the benefits bestowed. It was hoped that the kind hearted would sustain them in their endeavour and allow no burden of debt to hinder their usefulness. While wishing God speed to the work of kindred institutions in South Devon, we had in homeopathy a well-tested means of alleviating pain and sorrow. It is to them a great satisfaction that, in making that new start in our benevolent enterprise, they

were honoured with the sympathy of the Earl and Countess of Morley.

Mr. George Davis (hon. treasurer to the Building Fund) read a list of subscriptions, which showed that about £700 was still required to meet all the charges.

The Chairman having read letters apologising for unavoidable absence from Lord Robartes, Sir Edward Clarke, M.P., Archdeacon Wilkinson, and others, announced that the Countess of Morley, who had promised to open the Hospital, was prevented by indisposition from being present. She had always sympathised with their needs, and had not only sent them a liberal donation, but also an excellent substitute in the Earl of Morley.

The Earl of Morley said he was afraid that he was but a poor substitute for his wife who deeply regretted not being able to be with them owing to an indisposition which prevented her leaving the house. She was, as Dr. Cash Reed would tell them, by education and experience a confirmed homeopathist. For himself, he might say that he had an open mind on the matter—his great object was to keep out of the doctor's hands as far as he could, and he might say that, so far, he had been fairly successful. They must all admit, whatever their views might be, that medicine was not yet an accurate science, that there was a good deal that all the schools had to learn, and that any member of any school of medicine who dogmatised too confidently would at least run the risk of being considered somewhat rash by his friends, and still more so by his opponents. Whatever their views might be, however great their ignorance, they must sympathise with those whose object was, by whatever means, to relieve human suffering, and especially the sufferings of the poorer classes of the community. The statement made by the chairman showed that this institution, which was started on a small scale, and which they were about to open on an enlarged scale, had done a valuable and important work in the town. They had been told that on the moderate income of £450, no less than 10,200 cases had been attended at the dispensary, and that 48 had been received in the hospital. That was, he thought, a very good record of work, and also a good record of economy and care on the part of the treasurer and management of the institution. In those new premises, which he should have pleasure on Lady Morley's behalf in declaring open, he hoped that with larger scope and better appliances the admirable work that had been carried on hitherto would be enlarged; and that the benefits of the institution would be bestowed on a larger number of persons. They were told that £700 was still required to render the hospital free of debt. It seemed to him that that was a comparatively small sum where such a great and important object was to be attained, and he

hoped that it would soon be raised, and the hospital started free from debt and encumbrance to pursue its useful and prosperous career. He urged them to do what they could to further the objects which the promoters of the hospital had in view, and he appealed to the public of Plymouth through the Press to assist in relieving them of the debt which pressed so heavily upon them. He had pleasure in declaring the hospital open, and in expressing the earnest hope that it might have a useful and successful career.

Rev. G. B. Berry said that in those matters of benevolent feeling towards the poor and suffering they rose to a position where their opinions and actions were irrespective of theories. There was not much room for dogmatism, and it was being gradually excluded from all fields of thought and action. Whilst the founders and staff of that institution were vieing with those in others in administering to the wants of the poor and suffering they would always receive the support of the community at large. He moved a vote of thanks to Lord Morley for opening the hospital.

Mr. Edward James, J.P., seconded the motion, which was cordially supported by Dr. Cash Reed and Mr. L. H. Price.

The Chairman, in putting the motion, said it was their intention to have at the new hospital a staff of trained nurses, whose services would be available in private families in times of affliction. He also expressed the debt of gratitude they were under to the Ladies' Furnishing Committee, the Misses Fisher, Pearce, and Blanchard.

The motion was heartily carried, and briefly acknowledged by Earl Morley. The company was then conducted over the various wards of the hospital. An elegant bouquet, prepared by Mr. Hodge, George Street, was presented to the Earl of Morley for the Countess by a daughter of Dr. Cash Reed, escorted by a son of Dr. Alexander.

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THE headache of Capsicum is somewhat similar to that of Bell. and Nat. Mur. It is bursting in character, especially worse on coughing, and often an accompaniment of malarial fever.—*Shelton*.—*Chironian*.

DIARRHEA occurring during menstruation is indicative of Bovista, the menses are generally too profuse and too early, and the patient flows during the night. Frequently there is an acrid leucorrhœa, which is also worse at night.—*Shelton*.—*Chironian*.

PHOS. is indicated when the menses are not profuse but continue a long time, or when a little hemorrhage from the uterus occurs between the menstrual periods after slight exertion. These patients continually feel tired, suffer from backache, and easily become exhausted.—*Allen*.—*Chironian*.



## THE JOURNALS.

(FROM *THE CLINIQUE* OF AUGUST, 1893.)

### CLINICAL HINTS ON NEW REMEDIES.

By CARL F. FISCHER, M.D., of Sydney, New South Wales.

*(The following paper is possessed of a peculiar interest as being the last one written by our lamented friend.—Editor of THE CLINIQUE.)*

KARAKA.—I fortunately came across the report of a very extraordinary pathogenic record of the karaka berry, the kernel of this fruit of a tree in New Zealand, many years ago while practising in Auckland. I have introduced this poison as a remedy in my practice prepared in an alcoholic tincture among several others, and made a proving of it; however, I never produced the extraordinary effects of distortion and stiffening of the limbs—cases of which I have seen among the Maories, the natives of New Zealand. I used it in the third potency in convulsions and fits in children with satisfactory results. Here is the interesting extract, taken from vol. iv. of the *Proceedings of the New Zealand Institute*:—

“The symptoms attending cases of poisoning through eating the raw kernel were violent spasms and convulsions of the whole body, in which paroxysms the arms and legs were stretched violently and rigidly out, accompanied by great flushings of heat, protrusion of the eyes and tongue, and gnashing of the jaws, but unattended by vomiting.

“Unless speedily attended to the poisoning by karaka quickly proves fatal, and even in those few cases in which I have known natives to recover, very likely it was more owing to the small quantity received into the system than to the means used as internal remedies.

“As the sufferers were invariably little children they were more easily dealt with, and to prevent the limbs becoming distorted or stretched and rigid, a pit was quickly dug into which the child was placed in a standing posture, with its arms and legs bound in their natural position, and the mouth gagged with a bit of wood to prevent the sufferer biting its own tongue, and then the child was left buried up to its chin until the crisis had passed by.

“The writer well recollects having seen at Bream Bay, in the years 1836 and 1839, a fine healthy youth of about twelve years of age, who had been recovered from poisoning by karaka kernels. He, however, had not been properly attended to as to the tying of his limbs in their right position while under the influence of the poison, and he was, therefore, now a curious spectacle, reminding one of the instrument called a caltrops, more than anything else. One leg was curved up behind to his loins, and the other bent up in front with the foot outward; one arm inclined behind his shoulder, and the other slightly bent and extended forward, and all as to muscles inflexibly rigid. He could do nothing, not even turn himself as he lay, nor drive off the

sand flies (which were there in legion) from feasting on his naked body, nor scratch himself when itching, nor put food to his mouth.

"He was the only child of his parents, who, fortunately for him, were both alive and took great care of him, turning and shifting his position very often by day and night; as from his body not evenly resting he could not possibly remain long in one position. When not asleep he was laughing (if not eating), and greatly enjoyed his being so placed that he could see the children at play, in which he always encouraged them by his voice, often seeming the merriest of the village. I frequently sat by his side during my visits, to talk with him and to drive away the tormenting sand flies which he would beg me to do. His skin was remarkably fine and ruddy—I might call it pretty—being wholly without eruption, blemish, or scar; his teeth pearly white, and voice and laugh regularly strong, hearty, and ringing. His eyes were very brilliant, and of an intelligent cast, but in conversing with him I always thought his intellect was not so sharp (or developed) as ordinarily that of Maori boys of his age."

TUPAKI, or TUSA, an herb of New Zealand, bearing grape-like scarlet berries, of which the natives partake, but carefully avoiding the kernels, for these are also very poisonous, and as asserted producing lockjaw, also very similar in effect to the karaka. The alkaloid of this fruit or of the kernel has been introduced into the medical pharmacopeia of Great Britain. I have used it frequently also in the third potency for epilepsy for which it is given in the old school.

BRACHYGLOSIN REPENDA.—The leaves and flowers of this tree are a remedy which I recommend warmly for Bright's disease, and albuminuria. It has been for more than twenty years a serviceable remedy in my hands, and of great assistance with other remedies in ameliorating, if not curing, these patients. The proving of this remedy is recorded in Allen's *Cyclopaedia*, and also, with others, in an early number of the *North American Journal*.

THE VERONICA SPECIOSA.—The smallest leaved of this genus, although a native of New Zealand, will be found plentifully cultivated in gardens and plantations in America and Europe. The natives were in the habit of curing diarrhoea and dysentery by eating the young unexposed leaves. By dividing the last leaves on a branch two or several leaflets will be found which have not been exposed to sunlight. These they eat with remarkable good effect. I have been taught this by the Maoris, and now even I am in the habit, if I find the plant, to cure myself in this manner. With a third dilution of these leaves I made a medicine, and used it with gratifying results; but what was remarkable, however, was that it had no effect with children. Other symptoms of bronchitis, or, better, catarrh of the stomach, are among its pathogenetic effects.

DIORNIS GLOBIOSA, the gigantic lily of Australia, I have used

very effectively in supra-orbital neuralgia, and neuralgia of the eyes. I poisoned myself once with the pollen of this flower, and such were the immediate effects that I was led to its application with good results. I think they are also recorded in our literature.

ZAMIA.—The conic fruit of this palm produces violent gastralgia and gastritis, and is much dreaded by the natives of Australia, although it is harmless to eat when boiled. In my hands it rarely failed me in relieving, and even curing, the vomiting of pregnancy, and colic and gastritis with chronic affections of the stomach. It also was used in the 3rd or 6th potency. *Fucalyptus globulosa*, and other varieties of this genus of tree, is well known; but besides its prophylactic effects in malaria, I have used it with excellent results in chronic dysentery when many of our old remedies have failed.

I have been induced to bring these few hints before you knowing how much interest you take, and you may find them of sufficient value to publish them with the view of inducing your enthusiastic homeopaths to subject them to further proving, and so bring some morsels of antipodean remedies into the ranks of *Materia Medica* where America stands so brilliantly with her treasures.

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CARBO VEG. is valuable for falling of the hair, especially after pregnancy, where this condition is produced by a general weakened condition of the system.—*Shelton.—Chironian.*

THE Carbo. Veg. patient faints easily, is worn out and exhausted by debilitating disease, the vital forces are low, and she wants to be fanned constantly, must have fresh air.—*Shelton.—Chironian.*

TOBACCO.—THE USING OF TOBACCO IN INTESTINAL OBSTRUCTION.—The following case illustrates the mode of using tobacco in cases of fecal obstruction, &c., as advocated by Dr. W. D. Jones (*Medical News*). I was called in consultation to see Mary R., a stout, healthy girl of fourteen, suffering from fecal impaction of the large bowel, complicated with an over-loaded stomach, the result of having eaten a large number of rather hard apples. The child was first seen in convulsions, for which she had received the usual course of antispasmodics, with morphine to relieve pain, and apomorphine to relieve emesis, but with no result. I suggested the use of a tobacco enema, made by adding half a dram of good plug chewing tobacco to half a pint of boiling water. Owing to the urgency of the case this was cooled as rapidly as possible, and the entire quantity injected by means of a Davidson syringe with a long rectal tube. The enema was retained for about twenty minutes, when we had the satisfaction of seeing our patient under the pressure of a double evacuation, followed by immediate relief. The patient's recovery was uninterrupted.—*New York Medical Times.*

## EXTRACTS.

### LAY DEFENDERS OF HOMEOPATHY: EARL DYSART AND GENERAL PHELPS.

#### EARL OF DYSART'S FAITH IN HOMEOPATHY.

THE following letter from the Earl of Dysart, published in the *Surrey Comet* of Saturday, Sept. 16th, has caused quite a flutter of excitement in the Richmond district :—

I am anxious to put before the public a matter concerning the Royal Hospital at Richmond. Some years ago I wrote to the secretary to offer to subscribe £100 per annum for the next ten years if homeopathic treatment could be introduced in addition to the old system. In due time I received a reply to the effect that such an idea could not be entertained. I ought to add that I was not given any reason for this decision. A few weeks ago I wrote to renew my offer, as I thought that the time had now come to reconsider that decision, and at the same time I requested that my letter should be published, so that the public might have a chance of discussing the matter. I was informed that my offer was put before the medical council and declined. As far as I am aware, my letter was never published. I think you will agree that (assuming that this institution exists for the benefit of the public) any offer of this kind ought not to be refused without consulting at least the subscribers. The correspondence in *The Times* some years ago on the odium medicum and homeopathy ought to convince any one not blinded by prejudice of the narrowness and bigotry of orthodox medical officialism. I venture to think that the opinion of the public on such a matter is more to be relied upon than that of a council composed of such gentlemen. In writing this I do not wish to be understood to condemn the whole of the orthodox school, but I do contend that my remarks apply in, I regret to think, a very large majority of cases. I am thankful to be acquainted with a few enlightened men, nominally belonging to the old school, who are honestly in search of truth, no matter what system. It is difficult for me, after eighteen years' experience of homeopathy, to believe that those who condemn that system as quackery can have given themselves the trouble to inquire into it. I have sufficient confidence in the common sense of our Anglo-Saxon cousins across the Atlantic not to tolerate 12,000 homeopathic medicine men in their midst if that system is as false as its opponents would have us believe. A famous medicine man of the old school is known to have said that if all the medicines in the world were thrown into the sea it would be so much the better for men and the worse for fish. I doubt if he would have said this of homeopathy. How much longer will

the people consent to take allopathic drugs which have over and over again proved useless, and in many cases have brought about very serious consequences?—*Edinburgh Evening Despatch*, Sept. 19th.

### CHOLERA AND HOMEOPATHY.

To the Editor of THE BIRMINGHAM DAILY GAZETTE.

SIR,—The letter from Dr. Donovan that you publish to day, in reply to my humble recommendation of Rubini's *camphor* in the case of suspicious symptoms arising, quite astonishes me. I see that his mode of "argument" is to call camphor a "silly nostrum"; to suggest that I want people to "tamper" with cholera, and to recommend that I be no more heard. This may be orthodox medicine, but it is not logic. Does not Dr. Donovan remember what took place during the Great London epidemic, I think, in the forties? How Dr. Paris, the Medical Referee of the Privy Council, thinking to squash homeopathy for good and for all, asked the committee of the London Homeopathic Hospital to allow his nominee, Dr. McLoughlin, to see every case treated there? How the doctor accordingly saw every case so treated, and certified that it was real Asiatic cholera; and how he said at the end of the experiment that, though not homeopath, he would, if he should unfortunately be attacked by cholera, prefer to be treated on the homeopathic system?

Does he not further remember how, when the returns of the London hospitals were presented to the House of Commons at the end of the epidemic, the statistics of the Homeopathic Hospital were mysteriously wanting? A nobleman who is still spared to us, Lord Ebury, asked why this was. The answer was something to the effect that by some inexplicable misadventure the fatalities in that hospital were in so much smaller a ratio than those which occurred in the other hospitals (if my memory serves me, 37 per cent of cases as against 70 per cent.), that to publish the figures would bolster up a false system of therapeutics. Allopathic morality, therefore, demanded that these misleading figures should be suppressed. Suppressed they were accordingly, as Dr. Donovan wishes me to be suppressed.

The great saving of life that follows the homeopathic method of treatment of cholera, as compared with the old obsolete system, can be proved by other statistics. So I (with all due deference to Dr. Donovan) strongly urge any one having suspicious symptoms to deal with to give Rubini's *camphor* at once, and send for the nearest homeopathic doctor. Above all, do not yield to panic, or to threats of the loss of "hundreds of lives," which are likely to remain a mere rhetorical bogey.

Edgbaston, Sept. 18th.

A. PHELPS.

## INVENTIONS, PREPARATIONS, ETC.

### CHIMATTO ENAMEL.

We have received from Messrs. Fletcher, Russell and Co., of Warrington, Manchester, and London, the well-known manufacturers of gas-heating appliances, a small gas-stove of a most serviceable pattern, suitable equally for scientific purposes and for cooking, but differing from any hitherto supplied by the firm in that it is prepared with a special enamel, which effectually protects it from rust. This "Chimatto Enamel," as it has been named, promises to have a great future before it. According to the manufacturers it is "unchanged by a red heat continued for any length of time, cannot chip off, and is indestructible.

"The colours and shades are most delicate and artistic in appearance, admitting, at a low cost, of the finest decoration in colours and bright or dead gold, all being absolutely permanent, requiring only dusting or washing like ordinary chinaware, yet having the strength and permanence of cast iron.

"The Chimatto Enamel is perfectly suited for the decoration of gas fires, panels, mantels, and overmantels, and all classes of decorative ironwork.

"The colours and shades are almost endless, and any number of colours, either bright or dead, silver or gold, can be obtained with slight extra cost.

"We have put down special plant and buildings on a large scale, specially for the production of this work, and are now preparing specimens which will shortly be exhibited in our Showrooms.

"It is a new departure in decorative work, and needs only to be seen to be appreciated, as being one of the most important new departures in decorative ironwork."

## REVIEWS.

### PRISMS.\*

"Ophthalmological Prisms are simply wedges of transparent material contained between two plane faces, which are inclined to one another at a moderate angle. The 'strength' of a prism depends on the size of this angle, which varies therefore

\* *The Clinical Use of Prisms, and the Decentering of Lenses.* By Ernest E. Maddox, M.D. Second Edition, Revised and Enlarged. Bristol: John Wright & Co. London: Simpkin, Marshall, Hamilton, Kent & Co., Limited; Hirschfeld Bros., 82, High Holborn. Pp. 170, price 4s. 6d.

in different prisms, and also on the refractive properties of the material from which the prism is made." In the work before us Dr. Maddox explains the rationale of this branch of the oculist's art which has been greatly developed of late years. In the preface to the first edition he said of the book: "Its first object was to communicate a series of aids to precision in the use of prisms, worked out during several years, which it is hoped will be of some service in this difficult by-way of ophthalmic practice. They have, however, been introduced by a sketch of the simplest properties of prisms, and supplemented by a brief account of their chief clinical uses." The call for a second edition is good evidence that Dr. Maddox has succeeded in his aim. The book is clearly written, well printed, and fully illustrated, and it may be confidently recommended to all who wish to gain a comprehensive knowledge of the subject.

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#### SCIATIC NEURITIS.\*

This little lecture gives a very clear account of the pathological changes which go on in the sciatic nerve when attacked by inflammation—of sciatica, in short—and also of the remedial action by rest, massage, and electricity, with the rationale of therapeutic change. These are no doubt frequently successful in the treatment of sciatica; but we should be sorry to exchange for them (though glad to avail ourselves of them as adjuvants) the specific medicines of homeopathy.

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THE WANDERING JEW EXPLAINED.—The strange old legend of the Wandering Jew is another of the myths of our early days which modern science disputes. According to Dr. Meige, of the Salpêtrière Hospital, he or they was or were merely "nervopathe voyageurs." Persons so diseased, he says, are pretty well known at the famous epileptic hospital. They know nothing about *le juif errant*, and are in no way troubled over any particular impiety which they may have committed. They are simply plagued with an irresistible itch for ever moving on. They are invariably Oriental Jews, haggard, weather-beaten wretches, who bear a striking resemblance to the traditional pictures of Cartophilus and other representatives of the Wandering Jew. Like them they speak many languages, and have generally, in common with those personages, applied to "magicians" to remove the spell under which they believe themselves to lie. They never can settle down for any length of time, but always manage to keep a few coins to pay their way when next the wandering fit seizes them. Their disease has usually been produced by some serious nervous shock, and is incurable.—*Chemist and Druggist*.

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\* *Sciatic Neuritis: its Pathology and Treatment*. By Robert Simpson, L.R.C.P., L.R.C.S. Bristol: John Wright & Co. London: Simpkin, Marshall, Hamilton, Kent & Co., Limited, Hirschfeld Bros., 82, High Holborn. 1893. Stiff boards, pp. 46, price 1s.

## APPOINTMENTS, VACANCIES, REMOVALS ETC.

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\* \* We shall be happy to insert notices of appointments if gentlemen will be good enough to forward them to us, and also of posts vacant and likely to be vacant, on receiving information from secretaries or committees. Under this heading also, we shall mention good openings for homeopathic practitioners and chemists.

Dr. LEO ROWSE—*Putney*. We are glad to note that Dr. ROWSE, who was recently resident medical officer to the London Homeopathic Hospital, has taken up his residence at 114, UPPER RICHMOND ROAD, PUTNEY, S.W.

Dr. CHRISTOPHER WOLSTON—*Chislehurst*. Dr. C. WOLSTON, formerly of Croydon, is now settled in practice at SUMMERHILL, CHISLEHURST.

Dr. EDWIN NEATBY—*London*. Dr. EDWIN NEATBY has removed to 178, HAVERSTOCK HILL, HAMPSTEAD, N.W.

Dr. C. W. WITHINSHAW—*Eastbourne*. Dr. WITHINSHAW has moved to CROMARTY HOUSE, LEWES ROAD, EASTBOURNE.

Dr. EATON—*Newcastle*. Dr. H. A. EATON has succeeded Dr. Kennedy in the practice at 2, ELDON SQUARE, NEWCASTLE-ON-TYNE.

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## ANSWERS TO CORRESPONDENTS, NOTES AND QUERIES.

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\* \* In this department we shall be happy to reply to any inquiries relating to homeopathy or to the matter of our magazine that our correspondents may like to address to us. We cannot, of course, undertake to give medical advice in particular cases, which is the business of a medical attendant; but if our medical readers like to put queries to each other regarding points of practice or puzzling cases, we shall be happy to insert queries and replies.

M. DOCETTI WALKER, M.D., *Dundee*. We fail to see the point of your communication, and are therefore unable to give it publication.

J. T., *High Wycombe*. If you will kindly read with care the note above, you will see that your query is not suitable for reply in these pages.

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In Carbo Veg. the teeth are very sensitive when chewing, the gums are retracted and bleed easily.—*Shelton*.—*Chironian*.



## Obituary.

### ALFRED HENRY BUCK, M.D.

WE greatly regret to announce the death of Dr. Alfred Henry Buck, which took place at his residence, 48, Primrose Hill, S.E., on the night of Saturday Oct. 14, after a very short illness, due to blood poisoning contracted in the practice of his profession. Dr. Buck was in his fiftieth year at the time of his death. He was the son of a well-known homeopathic practitioner, the late Dr. Henry Buck, of Kentish Town. Dr. Buck took the M.R.C.S. Eng. in 1867, and the L.R.C.P., and L.M. Edin., 1868. He was prize medallist in the L.M. In 1887 he took the Brussels M.D. He held the posts of House Surgeon and Resident Medical Officer to Charing Cross Hospital, and for many years was on the out-patient staff of the London Homeopathic Hospital. He was also Surgeon to the 17th Middlesex R.V. He contributed several papers to journalistic literature; but he will be best remembered as a hard-working and conscientious general practitioner.

## GENERAL CORRESPONDENCE.

### A THEORY OF HOMEOPATHY.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—May I be allowed to question Hahnemann's theory that the homeopathic remedy cures by causing symptoms similar to, but stronger than, the disease. Such a theory appears to be inconsistent with the homeopathic rule that the dose shall be reduced to such an extent that no fresh symptoms shall be produced by it. I constantly tell persons that they will find no ill effects from the medicines; and, in my amateur experience, am continually hearing remarks to the effect that the medicine has done good without doing harm in any way. I cannot understand how such could generally be the case if the medicine produced in the patient symptoms similar to the disease. Such a theory is surely contradicted by the facts of everyday experience.

My belief is that the action is *chemical*; but, being unable to prove it, I pass on to the *dynamic* theory, though only to dismiss it from consideration until I can learn what is meant by the term. From all that I have seen of the use of the word, it is simply one behind which to shield one's ignorance. If nothing is

known of the way in which the medicines effect a cure, would it not be as well to admit the fact as to say they act *dynamically*?

I suppose every one would admit that the strongest force in the moral and spiritual world is love; in the material world, *affinity*. The theory I wish to advance—without laying claim to any originality—is that the medicines generally (perhaps always) act by *affinity*: that it is simply a question of plus and minus. In various ways the system becomes deficient of some particular element; for instance, excessive brain work has eliminated a large proportion of phosphorus from the brain; *phosphorus*, being the simillimum, is given, and the brain recovers its wonted powers. In suppuration I imagine that the system is deprived of silica. You, sir, could probably tell me if that is the case. *Silica*, the simillimum, is given, and the abnormal discharge soon ceases. Some poison (more or less subtle) is introduced into the system, and there unites with some element for which it has a strong affinity, disease being caused thereby. The simillimum is that which has a stronger affinity for that element than the poison has; the homeopathic law guides the practitioner thereto, he administers it in suitable doses to the patient, and health is the result.

Is not aggravation caused by the difficulty of exactly neutralising the poison, or of accurately adjusting the balance, rather than by setting up another disease in the system?

If the above ideas are erroneous, they can doubtless be easily disproved; but if otherwise, I beg to submit that it would be advantageous if some one more capable than myself would follow up the theory, so as both to elucidate it and make it of some use as a workable theory.—Sir, yours very respectfully,

FERRUM.

[Hahnemann put forth tentatively more than one theory of the essential operation of homeopathic remedies, but he did not attach paramount importance to any. The wave theory of molecular movements were not invented in his day, or he would probably have pressed it into his service as the author of "The Science of Homeopathy" has done (*vide* HOM. WORLD, 1891, pp. 490 and 537; also the reprint. By *dynamic* Hahnemann had a very definite meaning. He saw in drug potencies of the attenuations an intangible spirit-like *dynamis* or force different from the *material* force of the crude poison; and he saw in disease a derangement of the spirit-like *dynamis* underlying all the manifestations of the living organism. Hence he maintained that all attempts to get rid of disease by "evacuation" of morbid products was erroneous; and that the only rational cure

was that of homeopathy, which met a dynamic derangement with an appropriate dynamic agent.—ED. H.W.]

THE NORTHAMPTON CONGRESS AND THE  
AMERICAN M.D.

To the Editor of the HOMEOPATHIC WORLD.

SIR,—No doubt you will, in your November issue, give a summary of the meeting held at Northampton; and probably as my name was introduced by Dr. Dyce Brown in rather an invidious manner, and the subject duly reproduced in the local newspapers, it will also appear in your journal. You will, I hope, allow me to make a few remarks. It is true my name does not at present appear on the British Register of Physicians, but that is [more my misfortune than my fault; I have been a homeopath and pharmacist thirty years. Medical men and others strongly advised me to qualify in medicine, and so put myself in accord with the law, as I had an extensive practice. Consequently some years ago I studied at a London medical school, walked the hospitals, &c., and acting under advice I took my last course of six months in the United States, at one of our oldest established (1848), largest (five times larger than Westminster Medical School), and best homeopathic schools, and duly obtained, by a fair examination, my M.D. (I had previously practised medicine in London more than twenty years), but in order to be registered I must, being a *British subject*, be absent from the country five years before I can claim registration with a foreign degree, no matter what degree it may be. If I was not a British subject no such restriction would apply. The law of England does not prevent my practising unless I do so under false pretences, which do not in my case exist, as I am proud to be a graduate of the "Old Hahnemann" of Philadelphia. It is the *alma mater* of two thousand homeopathic physicians, many of them of world-wide celebrity as surgeons and physicians. Any one who wishes to know what kind of school this is should read my paper respecting it in the August number of the HOMEOPATHIC WORLD, 1892. So much for my position. A short time since I was asked by the editor of one of the principal American homeopathic journals, *The Medical Century*, of Chicago, if I would attend the Congress at Northampton and send him a full report of the meeting, which he thought so important that he would give me a third of an issue for my paper. I happened to mention to a medical friend that I was going, and he said "Have you received an invitation?" I said "No; is one needed?" He then advised me to write to the Hon. Sec., Dr. Brown, which I did, saying I should like to attend the Congress. He replied that the meeting was *supposed* to be

one of registered practitioners only, further saying "your M.D. is not registerable, nor gives qualification to practise," but that if I liked he would bring the matter before the Congress. I replied thanking him, and asking on what authority he made the statement that the meeting was supposed to be one only of registered practitioners, and disclaiming any personal wish to attend, only that I was asked to do so for the purpose I have mentioned, and that in consequence of his reply I should not think of going on sufferance, that I had written to the editor of *The Century*, "I was not eligible to attend, as I held only an American degree." Further, I gave Dr. Brown the law on foreign degrees. He replied, "I shall bring the matter before the Congress." This he did, but the extraordinary part of the matter is this, that whereas this part of the meeting, which must only be for registered physicians, myself not being eligible, is either attended by a newspaper reporter, or else the matter is reported to the press, and so given world-wide publicity.

The fact of a man being registered does not in the least prove that his degree is better than any other; he may have been in practice before 1860, up to which time any degree was registerable, or even if he had practised ten years before the Act of 1886 he could be registered under the Act.

For myself it was a matter of the smallest moment whether I attended the Congress or not; but as the daily papers say, and also Dr. Brown, in his letter to me since, says, "that his action was unanimously endorsed by the Congress," I feel that I ought not to let such a slur on the great homeopathic schools of America pass without a word on my part, who was the innocent cause of it. When one thinks of the splendid and hospitable reception just given by the Congress of American physicians at Chicago to the English homeopathic physicians, it seems to me to be an unwarrantable and needless insult to the American homeopathic schools, and to the men who have just received them with open arms, holding as they do just the same degree as mine. Curiously enough the end of the presidential address was an eulogy on the American schools, their professors, their students, their lofty ideas, their energy and earnestness, their numbers and the size of their schools, their large and numerous hospitals, their influence on the nation, even the question whether some of their men could not be spared for this country, was spoken of, although why they should need to take up the English curriculum as well as their own passes comprehension, and it is too much to expect of any man; if he is fit to practise in the United States he is fit to practise anywhere. My experience of them is that the American schools are, as a rule, as good as the English schools and far more practical, and the length of their curriculum (four years) is the same as the English schools

were, until last year. Why, in the face of this eulogy of the American schools by the President of the Congress at Northampton, they should object to the *simple attendance* of a man holding a degree from one of the best American colleges (the valedictory address of one of the professors of *that same college*, Professor Pemberton Dudley, had excited, he said, his admiration) seems to me extraordinary.

I am,

Yours faithfully,

E. ALFRED HEATH, M.D., F.L.S.

## LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

HOURS OF ATTENDANCE:—Medical, Daily, 2.30; Surgical, Mondays, 2.30; Diseases of Women, Tuesdays, 2.30; Diseases of Skin, Thursdays, 2.30; Diseases of the Eye, Thursdays, 2.30; Diseases of the Ear, Saturdays, 2.30; Diseases of the Throat, Mondays, 2.30; Operations, Mondays, 2.

## MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Bentley (A. F. M.). *Beri-Beri; its Etiology, Symptoms, Treatment, and Pathology.* With an Appendix, containing a detailed Clinical Account of 52 Cases, and the Morbid Appearances seen in 19 Post-mortem Examinations, with characteristic Illustrations of the Disease. Being a thesis submitted for the M.D. degree of the University of Edinburgh in 1889. 8vo, pp. 252. (Pentland. Net, 10s.)
- Cunningham (D. J.). *Manual of Practical Anatomy. Illustrated with Engravings.* Vol. I. Upper Limb, Lower Limb, Abdomen. Cr. 8vo, pp. 676. (Pentland. 12s. 6d.)
- Gray (H.). *Anatomy; Descriptive and Surgical.* 13th edition. Edited by T. Pickering Pick. Roy. 8vo, pp. 1,180. (Longmans. 86s.)
- Harrison (R.). *Lectures on the Surgical Disorders of the Urinary Organs.* 4th edition re-written. 8vo, pp. 578. (Churchill. 6s)
- Hart (D. B.). *Selected Papers in Gynecology and Obstetrics.* 8vo, pp. 220. (Johnston. 10s. 6d.)
- Jenner (Sir W.). *Lectures and Essays on Fevers and Diphtheria, 1849 to 1879.* 8vo, pp. 574. (Rivington, Percival & Co. Net, 21s.)
- Lee (A. B.). *The Microtometist's Vademecum: A Handbook of Microscopic Anatomy.* 3rd edition. 8vo, pp. 512. (Churchill. 14s.)
- Lehmann (K. B.). *Methods of Practical Hygiene.* Translated by W. Crookes. With numerous Illustrations. 2 vols. 8vo, pp. 930. (Clarendon Press. 31s. 6d.)
- Madden (T. M.). *Clinical Gynecology: being a Handbook of Diseases Peculiar to Women.* With 259 Illustrations. 8vo, pp. 560. (Baillière, Tindall & Cox. 12s. 6d.)
- Maddox (E. E.). *The Clinical Use of Prisms and the Decentring of Lenses.* 2nd edition, revised and enlarged. Cr. 8vo, pp. 174. (Wright, Bristol. 4s. 6d.)
- Majumdar (P. C.). *Therapeutics of Cholera (Cholera Asiatica).* 12mo cloth. (Philadelphia: Homeopathic Publishing Co. Net, 2s. 6d.)
- Metchnikoff (E.). *Lectures on the Comparative Pathology of Inflammation, delivered at the Pasteur Institute in 1891.* 8vo. (Paul, Tribner & Co. 12s.)
- Moore (Sir W.). *A Manual of Family Medicine and Hygiene for India.* 6th edition. Cr. 8vo, pp. 770. (Churchill. 12s.)
- Oliver (J.). *Manual of the Diseases peculiar to Women.* 12mo, pp. 196. (Churchill. 8s. 6d.)
- Phillips's Anatomical Model: A Pictorial Representation of the Human Frame and its Organs. With Descriptive Text by Dr. Schmidt. English ed. by William S. Furneaux. Illust. 4to, boards, pp. 16. (Phillip & Son. 2s.)
- Powell (W. M.). *Diseases of Children. Arranged in the form of Questions and Answers.* Cr. 8vo. (Hirschfeld. Net, 4s.)
- Starr (M. A.). *Brain Surgery.* With 60 Illustrations. 8vo, pp. 304. (Baillière, Tindall & Cox. 10s. 6d.)
- Stevenson (T.) and Murphy (S. F.). *A Treatise on Hygiene and Public Health.* 3 vols. Vol. II. Roy. 8vo, pp. 844. (Churchill. 32s.)

Stewart (D. D.) and Lawrence (E. S.).  
Medical Electricity. Cr. 8vo. (Hirschfeld. Net. 4s.)

Students' Handbook of Gynecology,  
specially designed to assist those com-  
mencing the study of Diseases of Women.  
Illustrated with 49 Engravings. Cr. 8vo,  
pp. 178. (Livingston, Edinburgh; Simp-  
kin. 5s.)

Tyrrell (W. and G.). Nervous Exhaustion :

its Causes, &c. 2nd edition. Cr. 8vo.  
(Paul, Trübner & Co. 8s.)

Wade (W. F.). On Gout as a Peripheral  
Neurosis. Cr. 8vo, pp. 60. (Cornish,  
Birmingham; Simpkin. 2s. 6d.)

Wall (A. F.). Asiatic Cholera: its History,  
Pathology, and Modern Treatment. 8vo.  
(H. K. Lewis. 8s.)

Waller (A. D.). An Introduction to Human  
Physiology. 2nd edition. 8vo, pp. 614.  
(Longmans. 18s.)

## TO CONTRIBUTORS AND CORRESPONDENTS.

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30, *Clarges Street, W.*

All advertisements and business  
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LITERARY matter and correspon-  
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### BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Chemist and Drug-  
gist.—Homeopathic Review.—  
Allg. Hom. Zeit.—Monatsblätter  
f. Hom.—Fox Terrier Chronicle.  
—Medical Argus.—Homeopathic  
Envy.—New Eng. Med. Gazette.  
—New York Med. Times.—  
Healthy Life.—Homeopathic  
Physician.—Pacific Coast Jour-  
nal.—Journal Oficial Surgery.  
Archiv. f. Homöopathie.—North  
American Journal of Home-  
opathy.—Homeopathic News.—  
Hom. Maandblad.—Revue Hom.  
Belge.—Hahnemannian Month-  
ly.—Vaccination Inquirer.—  
Southern Journal of Home-  
opathy.—Medical Advance (April  
and August).—Medical Century.—  
Clinique.—Monthly Magazine of  
Pharmacy.—American Homeo-  
pathist.—Maanedskrift f. Hom.  
—Western Daily Mercury.—La  
Homeopalia.—English Illustrated  
Magazine.—Homeopathic Jour-  
nal of Obstetrics.—Medical Visi-  
tor.—Minneapolis Hom. Maga-  
zine.—Homeopathic Envy.—  
Clinical Use of Prisms. By  
Ernest E. Maddox, M.D.—  
Sciatic Neuritis. By Robert  
Simpson, L.R.C.P., L.R.C.S.—  
De Cholera. By Dr. N. A. J.  
Voorheve.—Hysterectomy by a  
New Method. By Dr. E. H.  
Pratt.—Annual Report of Homeo-  
pathic Hospital, Melbourne.

# THE HOMEOPATHIC WORLD.

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DECEMBER 1, 1893.

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## TURVEYDROP IN AMERICA.

AN assembly of American doctors, calling itself the Pan-American Congress, met at Washington in September last. Mr. ERNEST HART, the editor of *The British Medical Journal*, thinking, apparently, that the American doctors were sadly deficient in medical etiquette, went to enlighten them on this particular subject which he has made his own by dint of long study and devotion to it alone, for we are not aware that Mr. HART has hitherto distinguished himself by any contributions to medical science or therapeutic knowledge. Indeed, we do not know for what particular qualifications or qualities he was appointed editor of the organ of the British Medical Association. But there is no doubt of his perfect fitness for the post, for he embodies in its full vigour the spirit of the famous Brighton resolutions of the Association in 1851, especially No. 3: "It is derogatory to the honour of this Association to hold any kind of intercourse with homeopathic practitioners." But we are unable to understand on what plea Mr. HART obtained admission to the Pan-American Congress, for he is certainly not an American doctor. *Que diable allait-il faire dans cette galère?* Perhaps, like the Wandering Jew, he considers himself a cosmopolitan—equally at home in every country. Or perhaps he thought that the subject of the discourse he was anxious to deliver was of such importance that the circumstance that he could by no stretch of fancy be considered a Pan-American was hardly worth considering in comparison. Probably, too, the Pan-Americans thought that their visitor

would hardly have come all the way from England to lecture them unless he had something of very serious importance to communicate to them. Whatever they might have expected it must have been a great shock to them to find that his discourse was mainly a tirade against homeopathy, a wearisome amplification and emphasising of the Brighton resolution aforesaid, the expression of a bigotry and intolerance our American allopathic colleagues have long abandoned, or, at least, have long ceased to give expression to. How the Pan-Americans must have marvelled at the audacity, not to say impudence, of this British editor coming all the way across the ocean to teach them how they should behave to their homeopathic colleagues—how they should boycott them, and call them opprobrious names! The Pan-Americans could hardly have expected that the contribution to their proceedings by this representative of the journalistic wisdom of Great Britain would have panned out so poorly. And the Pan-Americans did not even get the first of this wretched diatribe, for its author had previously let it off at a medical meeting at Milwaukee. The shame and disgust felt by the allopathic medical profession in America at this silly exhibition of ignorant prejudice is expressed in the following passage from a highly respectable allopathic periodical, *The Buffalo Medical and Surgical Journal*: "It seems a pity that the otherwise harmonious proceedings of the Congress should have been disturbed by such an address. However much we may be willing to tolerate a discussion on ethics in our local societies, we have always held that a national or international congress was not the place to deal with this question. It applies entirely and totally to the local societies, and Mr. HART makes a mistake when he comes to America and drags in such questions gratuitously, as he did both in Milwaukee and in Washington. We hope our homeopathic friends will not be disturbed by Mr. HART's dogmatic assertions, or conceive any dislike to the Congress on that account, for we beg to assure them that it was entirely foreign to the purposes of the Congress to



have any such matter interjected into its proceedings. We hope it will be excluded from the transactions."

The non-medical papers which noticed Mr. HART's address severely censured its spirit. Thus the *Chicago Post* says: "Dr. ERNEST HART is a rasping little man. He does not seem to have imbibed the spirit of harmony and good fellowship that has brought together men of various crafts this year. His mission appears to be the spread of the gospel of uncharitableness." And the *Chicago Herald* says: "If Dr. HART represents the so-called 'regular' school of medicine in England, then the allopathic physicians of that country have stood still while the rest of the world has moved. This country has long ago done justice to homeopathy. It is recognised here that whatever progress is being made in medical science is due almost entirely to that school, and not even the bigoted 'regular' denies that the *similia similibus* doctrine has won victories beyond dispute."

Mr. HART is so proud of his performance in America that he reproduces it in his own organ, *The British Medical Journal*, of October 21st, and it even appears in that respectable quarterly *The Forum*, of October, though the anti-homeopathic outburst is there considerably toned down. Though his address may receive the plaudits of the meaner sort of the medical profession of this country to whose ignorant prejudices he panders, it was differently estimated by the more enlightened allopaths of America to whom it was originally addressed. "Here wast thou bayed, brave hart." "Brave" is hardly the proper word to be applied to Mr. HART; "impudent" will better characterise his conduct in going to America to insult the representatives of HAHNEMANN'S system there. Perhaps he did not know that the legally qualified practitioners of homeopathy in the United States number upwards of 14,000, that there are 16 homeopathic colleges turning out an average of over 300 graduates yearly, 87 hospitals where the medical service is homeopathic, 30 state and 84 local homeopathic societies and 31 homeo-

pathic monthly and quarterly periodicals. How our homeopathic colleagues must have laughed to read the archaic abuse of the fussy British editor! It is not likely that he will be again invited to address the Pan-American Congress. They could hardly have anticipated that the editor of a great medical periodical would treat them to a vulgar tirade against homeopathy and its practitioners. But then our American colleagues do not know Mr. ERNEST HART as well as we do. As his prototype, the illustrious Turveydrop, undertook to teach "Deportment," for which his only qualification seems to have been his admiration of the dress and attitudes of "the first gentleman of Europe," his late Majesty King George IV., so Mr. HART's specialty is what he calls "Medical Etiquette," for which his only qualification is his venomous hatred of homeopathy and its practitioners.

The following are some specimens of Mr. HART's notions about "Medical Etiquette" which he travelled some thousands of miles to teach his benighted American colleagues at Milwaukee and Washington:—

He says the Royal College of Physicians of London has a rule which "prescribes that no physician shall himself assume any special designation of therapeutic method, such as homeopath, electropath, hydropath, or countenance those who do so." But the rule of the College is quite different from this. It runs as follows: "While the College has no desire to fetter the opinions of its members in reference to any theories they may see fit to adopt in the practice of medicine, it nevertheless thinks it desirable to express its opinion that the assumption or acceptance by members of the profession of designations implying the adoption of special modes of treatment is opposed to those principles of the freedom and dignity of the profession which should govern the relations of its members to each other and to the public. The College therefore expects that all its Fellows, Members, and Licentiates will uphold these principles by discountenancing those who trade upon such designations." Not a word here about "homeopaths, hydropaths,

or electropaths." The London College of Physicians has no jurisdiction except over its own Fellows, Members, and Licentiates; but even were its power conterminous with the extent of the British Empire, this rule would have no application to us who believe and practise according to the therapeutic rule of HAHNEMANN, for we assume and accept no designations except those conferred on us by the licensing bodies. The only designations we "trade upon," in company with all the members of the medical profession, are those bestowed on us by the various licensing bodies as M.D., M.B., M.R.C.S., L.S.A., &c. The rule of the College applies to us no more specially than it does to oculists, aurists, gynecologists, accoucheurs, alienists, and other specialists. Mr. HART seems to have perceived this—hence his reason for giving a misleading perversion of the rule which he had not the honesty to quote correctly.

He then gives what he calls "the restrictions which operate to forbid a medical practitioner to consult with homeopaths." Here is the first and only relevant one: "We do not believe, and cannot appreciate, the medical capacity or fitness to undertake the treatment of disease of those who hold that drugs which, given internally, will produce certain symptoms of disease, are the appropriate remedies for those maladies." Thus, according to Mr. HART, the following illustrious men were deficient in "medical capacity" and were "unfit to undertake the treatment of disease":—HIPPOCRATES, who says, that "though the general rule of treatment be *contraria contrariis*, the opposite rule also holds good in some cases, viz., *similia similibus curentur*"; CELSUS, who says: "Nam scorpio, sibi ipsi pulcherrimum medicamentum est"; J. AGRICOLA, who, speaking of cancer, lupus, and leprosy, says: "It must be confessed that a concealed poison is at the root of such diseases, and this poison must be of an arsenical character; it must therefore be expelled by means of the same or a similar poison"; BASIL VALENTINE, who says: "Likes must be cured by means of their likes, and not by contraries"; STAHL, who says: "The rule generally acted on

in medicine, to treat by means of oppositely acting remedies (*contraria contrariis*) is quite false and the reverse of what ought to be; I am, on the contrary, convinced that diseases will yield to, and be cured by, remedies that produce a similar affection (*similia similibus*)"; T. CAMPANELLA, who says: "Per contraria igitur curamus ubi extrinsecus est morbus, in venis et solido; ubi vero intrinsecus oportet etiam similia morborum causis adhibere"; HUFELAND, who says: "I am perfectly convinced, not only by the observations of others, but by my own experience, that homeopathy has frequently been successful, sometimes most strikingly so, and that after the fruitless employment of other powerful methods of treatment. It is the cure of the disease itself, effected by means of the simple principle *similia similibus*, the similar disease by the similar remedy, and it cannot be denied that it testifies to a deep insight into organic nature, which HAHNEMANN has attained and which he has pursued and developed to its fullest extent. Highly meritorious are the labours of the homeopaths in ascertaining more completely and establishing more carefully the effects of medicines, in distinguishing the proximate from the remote and the secondary action. We are already indebted to them for many valuable discoveries on these points, and we shall rejoice to obtain still more. . . . From the remotest times physicians have employed for the direct cure medicines whose action was similar to the disease"; GRAVES, who says: "It is well known that some active remedies have a tendency to produce diseases somewhat analogous to those they are known to cure. . . . In fact, it is hard to expect that a remedy will cure a disease affecting a certain tissue or tissues unless it has a specific effect on such tissues; and in this point of view we have an example of the *similia similibus curantur* of the homeopaths"; ESCHENMEYER, who says: "Homeopathy is so thoroughly based on experience, that to deny this betrays utter ignorance, caprice, prejudice, indolence, or fear of the new system"; BROUSSAIS, who says: "Humanity owes HAHNEMANN a debt of gratitude for the conquests his system

will make over those who are strangers to sound reason"; ANDRAL, who says: "Without prejudging the question lately raised by the homeopaths respecting the property of remedies to produce in the organism the diseases which we propose to combat by their means, we believe that this is a view supported by some incontestable facts"; LISTON, who says: "I believe in the homeopathic doctrines to a certain extent"; TROUSSEAU, who says: "Experience has proved that many diseases are cured by therapeutic agents which seem to act in the same manner as the morbid cause to which we oppose them"; J. HUTCHINSON, who says that *Arsenic* can produce cancer in the healthy organism, and who employs it medicinally in that disease; and lastly, LAUDER BRUNTON, who says: "The only difference between homeopaths and rational practitioners lies in the fact that the latter regard the rule (*similia similibus curantur*) as only of partial application." Truly a goodly array of men hitherto considered authorities — and the list might be largely added to—who, according to Mr. HART, were destitute of "medical capacity" and "unfit to undertake the treatment of disease." With such men Mr. HART would refuse to consult, for they hold the pernicious homeopathic doctrine that "drugs which, given internally, will produce certain symptoms of disease are the appropriate remedies for those maladies," which he pronounces *ex cathedra* to be "the negation of reason and the acme of folly." Perhaps it has never occurred to Mr. HART that homeopathic practitioners might not be anxious to consult with him. Indeed, we may answer for our homeopathically thinking colleagues that, if it would give any comfort to Mr. HART's perturbed mind, they will willingly promise never to ask Mr. HART to meet them in consultation on any medical subject whatever, not even on subjects connected with his own specialty—medical etiquette.

If a physician or surgeon were to consent to meet a homeopathic colleague merely for the purpose of "diagnosing the nature, the stage, the complications, or name of the disease," he would, says this self-constituted authority

on medical etiquette, "be infamously wrong, and he is always wrong if he gives the cover of his accepted position, of his recognised ability, and his professional sanction to what becomes, under such circumstances, a dangerous farce or a deliberate fraud." Equally blameworthy would be the surgeon who would perform an operation on the patient of a colleague who practised homeopathy. If he did this, says Mr. HART, he would be "acting as sawbones to a quack." That great surgeon, the late Sir W. FERGUSON, told us that a provincial operating surgeon mentioned to him, as though it were a meritorious action, that he had refused to perform an operation on the patient of a homeopathic practitioner, on which Sir WILLIAM remarked, "That says a great deal for your anti-homeopathic zeal, but very little for your humanity." Mr. HART attempts to fasten on us the epithet of "quacks," and quotes Dr. JOHNSON'S definition of the word: "A boasting pretender to arts which he does not understand." No one could truthfully say that we do not understand the homeopathic art we practise. On the other hand, Mr. HART shows himself to be a boasting pretender to a knowledge of the art of homeopathy which he does not understand. "The great lexicographer," he says, "makes no distinction between those who have degrees and those who have not; neither do I;" nor do we, so for once we are in agreement with Mr. HART. The homeopathic system which Mr. HART insults by vulgar vituperation, as the statistics of its hospitals show, cures a much larger proportion of acute and chronic diseases than the method he champions, and cures them more speedily: it does not torture its patients by blisters, cauteries, drastic purgatives, and other debilitating procedures; it does not stupefy them with narcotics, and it cannot poison them, even by inadvertence. The teachings and practice of HAHNEMANN and his followers have revolutionised the whole practice of medicine. They have caused the old school to abandon its venesections, cuppings, moxas, setons, issues, and mercurialisations, and thereby saved the lives of thousands of patients. Homeopathic remedies and methods have

permeated the practice of the dominant school, and the periodical edited by our reviler teems with examples of homeopathic treatment borrowed, usually without acknowledgment, from the writings of practitioners of our school. For the adherents of a system which can show such a record, which has had an existence of nearly a century, during which it has obtained the adhesion of many thousands of highly educated and intelligent physicians, which has its schools, hospitals, and literature, the editor of the chief allopathic periodical of this country has nothing better to offer in the way of professional courtesy than to scream "quack!" and he is so proud of this illustration of his idea of "medical etiquette" that he travels thousands of miles to make an exhibition of his fatuity before an astonished and disgusted audience of intelligent physicians.

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## NEWS AND NOTES.

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### THE LATE LORD EBURY.

It is with deep regret that we announce to our readers the death of the venerable Lord Ebury, to whose strenuous advocacy and unwavering loyalty homeopathy in Great Britain owes so much. In Lord Ebury's death the London Homeopathic Hospital and the Homeopathic League are deprived of their President, and the cause of homeopathy and of medical liberty loses one of its oldest and best friends. In another part of our issue will be found an obituary notice of the deceased nobleman, with an account of some of the services he has rendered to medical reform during his long career.

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### THYROID EXTRACT FOR PSORIASIS.

DR. BRIEU writes to us from 36, Boulevard de Strasbourg, Toulon, France, drawing our attention to a new application of the homeopathic principle by old school practitioners. Dr. Brieu encloses an extract from a French journal which refers to the use by Dr. Byrom Bramwell of thyroid extract

in cases of psoriasis, and the point lies in the fact that the thyroid extract causes exfoliation of the skin in those who have not psoriasis and cures it in those who have. Here is a translation :—

“Mr. Allison said he had tried these injections against common alopecia, basing his treatment on the fact that in myxedema the hair grows again under the thyroidian injections. The failure was, however, complete.

“It was from acting on an analogous order of ideas that Dr. Byrom Bramwell attempted, this time with success, the injection of (extract of) thyroid bodies against psoriasis. He had, in fact, noticed that the thyroidian injection frequently provoked in the myxedematous an intense desquamation of the skin, and had in consequence decided to try the same treatment in psoriasis. This trial proved highly successful; out of a large number of cases of psoriasis treated in this way, Dr. Byrom Bramwell had only two failures.”

#### THE DRYSDALE MEMORIAL.

THE sum of £1,031 9s. having been raised by the Drysdale Memorial Committee, the formal presentation of the endowed bed to the hospital was recently made, in an interesting ceremony. The Rev. Canon Armour made the presentation on behalf of the subscribers, and the Lord Mayor of Liverpool (Mr. R. D. Holt) received it on behalf of the hospital.

“The Lord Mayor, in accepting the presentation on behalf of the hospital, observed that having for thirty years known the distinguished man they were met to honour, he could from personal knowledge speak of Dr. Drysdale as so genial, kind-hearted, and confidence-inspiring a man, that one had seldom met his equal. He had left a name which had added to the lustre of the medical profession of the city. In handing over the gift to the authorised officers of the society, he felt that in their charge it might safely be left. His lordship then presented to Mr. Bacon a brass plate, bearing this inscription, ‘Dr. Drysdale Memorial Bed. Endowed by public subscription, 1893.’”

Mr. S. S. Bacon, in responding, said on this occasion they were really inaugurating not one, but three beds—one being provided by the noble donor of the hospital and placed in the Tate Ward, and one by the Misses Moore, each being of the value of £1,000.

There yet remains to carry out Dr. Burnett's proposal to commemorate our revered colleague by subscribing for his bust.



### ISOPATHY AMONG THE ALLOPATHS.

The following appeared in the *Daily News* of October 18th :—

“NEW TREATMENT FOR TYPHUS.—Berlin, October 17th.—Two Hamburg doctors are reported to have discovered a new treatment for combatting typhus, consisting of the subcutaneous injection of a preparation made from typhus bacilli. The treatment, it is stated, has already been applied to patients successfully.”

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### MELBOURNE HOMEOPATHIC HOSPITAL.

We have received the report of the above institution for 1898, and are glad to find there has been a steady increase in its usefulness. We hope to give fuller particulars in our next issue, but we may say that during the year 3,786 patients have been treated, 812 in-patients, and 2,974 out-patients; 20,242 prescriptions were dispensed, and a daily average of 104·31 patients attended to.

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### CHOLERA AND HOMEOPATHY—A GENEROUS OFFER.

MESSRS. LAHIRI & Co., of Calcutta, writing in *The Indian Mirror*, refer to the destructive epidemics of cholera raging in certain parts of the Indian peninsula, and offering to supply homeopathic medicines at very reduced rates to any relief committees who will undertake to distribute them. They say :

“It is universally acknowledged that homeopathic treatment is the best treatment for cholera. During the cholera epidemic in the district of Nuddea, year before last, we supplied gratis 500 rupees worth of homeopathic medicines, &c., to the Cholera Relief Committee, appointed at a public meeting, held at Krishnaghur, presided over by Mr. K. G. Gupta, the then magistrate of Nuddea. Babu Nafar Chunder Pal Chowdhry, a patriotic and philanthropic Zemindar of the district, was appointed the chairman, and Babu Chundi Churn Chatterji, now the most energetic and kind-hearted sub-divisional officer of Jammui, the secretary of the committee. The result, achieved by the Nuddea Cholera Relief Committee, was wonderful, and the success of the treatment was simply marvellous. Twenty homeopathic practitioners, well equipped with homeopathic medicines and other accessories, supplied gratis by us, were sent to twenty several centres for relief work.”

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### THE BROWNING ESSAY ON HOMEOPATHY.

ACCORDING to our promise a month or two back, having received from America (kindly forwarded to us by Messrs. Boericke & Tafel) a copy of *Modern Homeopathy*, the Gould prize pamphlet, we this month present our readers with a critical review of the same by a well-known writer.

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### THE EX-MAYOR OF HASTINGS.

DR. CROUCHER, who has just completed his year of office as Mayor of the town of Hastings, goes into municipal retirement carrying with him the regrets of his fellow-citizens and their heartiest applause for the success of his tenure of office. These sentiments found fitting expression at two banquets, one given by Dr. Croucher to the Recorder of Hastings (*Hastings and St. Leonards Observer*, Nov. 4th), and the other given by the borough to the Mayor-elect (*Hastings and St. Leonards Observer*, Nov. 11th).

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### TRACT 47.

"*Allopathic Approaches to Homeopathy*" is the title of the last issued of the Homeopathic League Tracts. It may be regarded as in a way a continuation of Tract 23, "*Homeopathy in the Old School*." It will be found as interesting as any of the series, and shows how frequently allopaths admit the truth of the homeopathic doctrine either explicitly or in their practice, whilst at the same time they and their school do all they can to malign the source from which they "convey" so much of their practice.

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DR BURNETT has in the Press a new edition of his "New Cure of Consumption."

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### A WHOLESOME STRIKE.

THE *Medical Press* of November 1st contains the following:—

"THE LATEST IN STRIKES.—Our Edinburgh correspondent reports the very latest thing in strikes, which occurred in that city last week.

It appears that the patients in one of the wards of a hospital, tired of being examined night after night by several students, came out on strike. They absolutely refused to allow themselves to be further examined, and it must be admitted that their contention was not an unreasonable one; for, although submission to the exigencies of hospital practice is the only way in which patients can materially repay benefits received, to have twenty students, more or less, sounding them at night, is apt to lead to worse things than loss of temper. It is not given to every student, or every practitioner for that matter, to know or understand that a stethoscope can be as efficiently used when used gently as when pressed into the ribs. Hospital patients do not object as a rule without reason, and this is a matter which every teacher of clinical medicine should inculcate, and not only so, but see that his teaching is followed. Before now we have seen blisters caused by the frequent and rough application of a stethoscope to one spot in a hospital patient."

It is high time that hospital patients made a stand against being treated as mere "clinical material," and we sincerely trust that the Edinburgh example will be largely followed in other hospitals with schools attached. We have often seen patients who have been injured for life by cruelly prolonged examinations, and we have no doubt in critical cases a clinical demonstration may make all the difference between recovery and death.

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DR. SAMUEL SWAN.

We greatly regret to note the death of Dr. Samuel Swan, of New York. We must reserve until next month an account of his life and work. He has done more than any one else to develop and define the therapeutic place of nosodes, and whether he was always wise in his method or not he must have the credit of being a pioneer in a great therapeutic development. He used *Tuberculinum* many years before Koch thought of it, and *mis-used* it.

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MERCURIUS CORROSIVUS.—A case of poisoning from the continual handling of disinfectant solutions of this salt is recorded in the *N. Engl. Med. Gazette* of January. The first symptom was the dysenteric diarrhea of the drug, with proctitis; then vomiting and collapse. The use of the drug was discontinued, and the patient became well again. On its resumption, after nausea and slight vomiting, fever ensued, temp. 103°, with severe headache and partial stupor. A very offensive diarrhea set in, with severe pain and much mucous discharge. Then came pain and swelling of joints of hands, which on their inner aspect became red and tender, as though denuded of cuticle.—*Journal of British Homeopathic Society*.

## ORIGINAL COMMUNICATIONS.

## THE BROWNING PAMPHLET.

MODERN HOMEOPATHY, ITS ABSURDITIES AND INCONSISTENCIES, by WILLIAM W. BROWNING, A.B., LL.B., M.D., Lecturer upon and Demonstrator of Anatomy, Long Island College, &c., &c.

"This essay was awarded the prize of \$100, offered by Dr. Gould of Philadelphia, and is designed for distribution by physicians in order to disseminate more enlightened views upon the subject of which it treats."

WE have searched this pamphlet in vain to find the "more enlightened views" it is said to contain. We find it full of "absurdities and inconsistencies," and in addition deliberate misstatements and absolute falsehoods. The author states correctly that homeopathy "means that a drug which will produce in a person who is well certain symptoms, will cure a disease which manifests itself by similar symptoms. We are informed that the doctrine is that likes are cured by likes, and not that the same is cured by the same;" and then, in strange forgetfulness of what he has just stated, he proceeds to say that, "according to the law of similars," a person suffering from an overdose of opium should be treated by having administered to him a smaller dose of opium!

He says: "Instead of supporting his doctrine by an appeal to the results of carefully conducted experiments, Hahnemann resorts to a species of reasoning, plausible in its nature, but founded on the loosest analogies." And this in the face of Hahnemann's reiterated assertion that his system must be judged by the results of experiments carefully conducted; in face of the fact that he introduced his system to the profession as the Medicine of Experience — *Erfahrungsheilkunde*. "Homeopathy," he says, "does not attack disease, but addresses itself to the amelioration or removal of the symptoms attendant upon it. Says Hahnemann: 'When the symptoms are removed the patient is cured.'" Precisely so; and every really "rational" physician would say the same, and would unhesitatingly assert that when all the morbid symptoms, objective and subjective, are removed the patient is cured. A disease without symptoms is absurd.

He alleges that Hahnemann and most of his followers "are outspoken in their denunciation of pathology." Hah-

nemann, indeed, denounced the pathology, so-called, of his day, which consisted almost entirely of crude speculations and hypotheses, but his system is founded on a rational pathology of observation and experiment. It is significant that several of his most distinguished followers were professors of pathology. Arnold of Zurich, Rapp of Tübingen, D'Amador of Montpellier, Zlatarovich of Vienna, and Henderson of Edinburgh, filled with credit the chairs of pathology in these universities.

As regards the proving of medicines on the healthy, Dr. Browning says: "Without doubt, much information, valuable to the physician, may be obtained by carefully observing the effects of drugs upon persons in health." But he omits to state that Hahnemann was the first who led the way in this direction, and that the minute directions he gave for the proper performance of this important operation are the model on which all subsequent provings have been conducted. He likewise omits to state that it is to Hahnemann and his followers that medical science is indebted for almost all the knowledge it possesses of the effects of medicines on the healthy human body.

Dr. Browning attempts to throw ridicule on the pathogenesis of the medicines of our *Materia Medica* on account of the large number of seemingly trivial symptoms they record. "What little there is of value in it," he says, "lies buried under such a mass of trash." No doubt to the allopathic mind our provings must appear "trash," for without the adoption of our therapeutic rule as the guide to practice, they cannot be of the slightest use to the practitioner.

Dr. Browning seems to think it the height of absurdity to employ the poisonous secretions of certain animals such as the viruses of serpents, toads, and bees; but, as Shakespeare says, "in poison there is physic," and no one doubts the virulence of the poison of serpents and bees, and as for that of toads, though some have denied that the secretion of its cutaneous glands has any poisonous qualities, the testimony to its virulence of many observers justifies Shakespeare's words, "the toad, ugly and venomous." Moreover, it has long been used medicinally in the old school as well as the new. The bed-bug, the lady-bird, the cockroach, the oil-beetle and the ant have all been used as medicines from time immemorial, though Dr. Browning does not seem to be aware of this. If the

insect remedies of his school are now limited to cantharis and cochineal that is not because "medicine as practised by regular physicians rests upon the accumulated knowledge of the centuries," as Dr. Browning asserts, but precisely because it *does not*. The therapeutics of his school change from year to year, or at least from decade to decade. The knowledge of drugs obtained at one period is rejected by the physician at the next period, and the therapeutics of the old school are as changeable as the fashions of ladies' bonnets. If, in spite of this *irregularity* and *irrationality*, the school Dr. Browning champions is to be called the *regular* and the *rational*, that is only on the principle of *lucus a non lucendo*.

"There are," says our veracious author, "diseases which tend to a *fatal* termination. Under these circumstances the majority of homeopathic practitioners abandon their theories, discard their dilutions, fall back upon the researches of rational medicine, and administer drugs in full doses." This is absurdly untrue. And if it were as true as it is the reverse, what would be the object of it? To fasten the discredit of the fatal termination of the disease on the therapeutics of "rational medicine"? That would be too utterly silly. Supposing a homeopathic writer were to assert that the majority of "rational" physicians when they find a disease approaching a fatal termination discard their purgatives, narcotics, stimulants and tonics and fall back upon the researches of Hahnemann and his followers, and administer drugs in infinitesimal doses in order to be able to say that homeopathy killed the patient, what would Dr. Browning and his school think of the wisdom of the writer who made such a ridiculous assertion?

Dr. Browning is very much exercised in his mind that a homeopathic physician or surgeon occasionally uses lotions, liniments, and salves, and says that "such applications are contrary to the very essence of his system, and the explicit teaching of his master." Dr. Browning is not so conversant with the writings of the master as he thinks, else he would have known that Hahnemann, while deprecating the employment of external remedies to dry up or choke off chronic cutaneous affections, advises the external use of medicines in certain cases, such as condylomata, and gives minute directions for the employment of the homeopathic remedy as lotions to the skin (*Chr. Krank.*, part iii. preface, p. vii). If we occasionally employ an allopathic

palliative to get over some temporary difficulty such as a purgative for impacted feces, or a narcotic to deaden the pain during the passage of a calculus, we do not thereby show that we abandon our principles, as Dr. Browning professes to think, for we do not consider such expedients as remedies for the disease, but only as means for setting aside an obstructive condition in order to allow of the administration of the homeopathic specific.

This pamphlet does not contain so many of the customary unauthenticated cock-and-bull stories about patients being nearly drugged to death by homeopathic practitioners. We only find one, and that is that somebody—name not given—saw a coloured patient who had just been discharged as cured from an unnamed homeopathic hospital, who was suffering from the worst form of mercurial salivation. *Credat Judæus!*

“Homeopathic doctors,” we are told, “magnify the gravity of their cases and multiply the number of their visits.” We are not aware that they do, but we wonder if such tricks are unknown in the old school. We imagine that Dr. Browning would not contend that all the “rational and regular” doctors scrupulously avoid exaggerating the gravity of their cases and paying more visits than are absolutely necessary. We do not believe that homeopaths enjoy a monopoly of this propensity; in fact, they have less opportunity of multiplying visits, as one of the peculiarities of homeopathic treatment is that it materially shortens the duration of diseases.

“Most intelligent homeopaths,” he goes on to say, “have virtually abandoned the doctrine of *similia* and follow the teachings of rational medicine.” Absurdly untrue, indeed impossible, as the author means it. We would say that by adhering to the doctrine of *similia* we thereby follow the teachings of really rational medicine.

“Homeopathy,” we are told, “has never promulgated a single discovery which has been accepted by the profession at large.” As homeopathy has only promulgated itself, it is a truism to say it has not been accepted by the profession at large. We should like to hear of a single discovery of the “rational” school which has been accepted by the profession at large. There is none! Discoveries of new narcotics and microbes are from time to time announced; but homeopathy regards the first as pernicious, the last as useless in the treatment of disease; and homeopaths as

such, are glad to have had no share in these so-called discoveries.

“Persons converted into a belief in homeopathy frequently return to their former allegiance, and assign as the reason for both changes their observation of the results of treatment.” Oh, what a thumping ——! We beg Dr. Browning in his next edition to give us the names of some of these wonderful creatures who have been converted both ways by the same evidence.

“It is as absurd for the *laity* to institute comparisons in medical matters as for a blind man to judge of colour.” Maybe so; but as the laity indulge in this recreation, and as we doctors are entirely dependent for our livelihood on the result of the judgment arrived at by the laity, we must perforce submit to it with the best grace we may, and, indeed, our first and last appeal must be to the judgment of the laity who are the arbiters of our fate.

“Teachers in medical colleges sometimes advise certain of their candidates for graduation to adopt homeopathy.” If teachers in orthodox medical colleges do this, that only shows that they have no confidence in their own system, which is certainly not to the discredit of homeopathy. But we do not believe that Dr. Browning has any foundation for this incredible statement.

“Homeopaths have never proposed a comparative test, but, on the contrary, have resisted the repeated attempts on the part of the regular profession to secure an impartial investigation of their doctrines, comparative or otherwise.” This is the exact contrary of the truth. Homeopaths have repeatedly proposed a comparative test, and such a test has repeatedly been refused by the “regular” profession. When it has been accepted and the trial has been made, the results have always, when the conditions were fair, shown a great superiority in favour of the homeopathic treatment, as may be seen in the 11th Tract of the Homeopathic League. In this country the offers of Mr. Gurney and Major Vaughan Morgan to pay the whole expenses of such a comparative trial in the London hospitals were scornfully refused, and a similar offer of Lord Dysart to the Richmond Hospital met the same fate.

The bogus trial of homeopathy by Professor Andral is again trotted out by Dr. Browning. The treatment pursued by Andral, which he called homeopathic, had not the faintest resemblance to real homeopathic treatment as has repeatedly been shown.



“The system itself is practically dead.” A curious allegation by an American writer, in whose country homeopathy has 14,000 legally qualified practitioners, and a vast number of colleges, hospitals, medical societies, and periodicals. Evidently the wish is father to the assertion—we can’t say “thought.”

“Homeopathic doctors are sadly deficient in literary as well as scientific qualifications.” All allopathic controversialists are not of this opinion. Sir John Forbes says: “Many among Hahnemann’s followers are sincere, honest, and learned men.” And Dr. Bristowe says: “It is absolutely certain that many men of ability and learning are contained within their ranks.”

“It [*i.e.*, homeopathy] resists attempts to advance the standards of medical education.” We believe that in the United States the homeopathic medical faculty of the Boston University were the first, or among the first, to insist on a four in place of a three years’ course of study before admitting students to examination for their degree—an example which has been followed by some of the “regular” colleges, though not by all.

“In Germany homeopaths are not permitted to practise as physicians”: an utterly untrue assertion. The German homeopathic directory contains the names of upwards of 400 physicians, many of whom enjoy large practices.

“It is not taught nor even mentioned in the medical department of any of the great universities of the Old World.” Incorrect—there is a chair of homeopathy in the great university of Pesth.

“Hahnemann’s disciples have ever avoided a scientific discussion of their doctrines.” On the contrary, they have seized every occasion to get up such a discussion, but their attempts have been rudely repulsed by the medical societies and periodicals. If Dr. Browning can obtain for them a hearing in any “regular” medical society or congress, he will find a host of zealous adherents of homeopathy eager to discuss their doctrines in the strictest scientific manner.

Dr. Browning has gained for his essay the prize of \$100 offered by Dr. Gould, but as a refutation of homeopathy we would be inclined to estimate its value at an infinitesimal fraction of a cent. However, we dare say it will please some of the adherents of “regular” medicine who do not desire a fair discussion of the subject, but can only tolerate

malignant misrepresentations of the system of medicine they detest and fear, antiquated jokes about some of the peculiarities of homeopathic practice, and rash assertions respecting the system and its practitioners destitute alike of sense and truth. All this they can have in Dr. Brown-ing's pamphlet at the moderate cost of 75 cents (3s. 1½d.) a dozen.

### MEDICINE *VERSUS* SURGERY.

By T. REGINALD JONES, M.R.C.S. Lond., &c.

#### CURE OF CATARACT, TUMOUR, AND FISTULA.

On November 30, 1892, a lady called upon me respecting a large tumour in her right breast, that had caused her much pain and given her no end of anxiety. She gave me the following history:—About eight or nine months before seeing me she had consulted a Liverpool surgeon about a "lump" in the left breast. On examination he pronounced it cancer, and arranged to remove the entire breast, which operation he performed a few days later. As the present tumour resembled the one removed so closely (to use her own words, it began the same, felt the same, and the pain was similar), she naturally felt that she was the victim of a second cancer, and *would* be the victim of a second operation.

Her age was 40, married, no children. Sister died of cancer twelve months before. I examined the tumour carefully, and could not pronounce it to be a cancer. Nor do I think that the one removed differed in any way from this one. I am, however, prepared to admit that these mammary tumours may, on slight cause given, degenerate into a cancerous mass, and so they are better removed—*but not with the knife*. I know of two very sad cases in my own neighbourhood where unnecessary operations for tumours in the breast were performed, and in both cases death was the result. No; we have a very much better way of dealing with such cases; and not only with them, but with others (as I shall show further on) deemed by our friends of the allopathic school to be incurable, except by the knife. I trust that a perusal of the following cases will cause those into whose hands this paper may fall to consider whether there is not more in homeopathy than they ever gave it credit for. A little *honest* inquiry would

prove to any one *willing* to learn, that homeopathy is not only a more scientific system, a more certain, a more pleasant and safer way of cure, but—and this is important to most people who intend to pay their doctor—a far cheaper method, owing to shorter illnesses, and a far lower death rate.

Take the case I am now relating. This lady saw me ten times, extending over a period of eight months. The result was a complete cure, an absolute disappearance of every trace of the tumour. The treatment began on November 30, 1892, with *Cicuta Virosa* and *Silic.*

On December 14th she reports an entire absence of pain. The medicine was repeated.

*December 30th.* Tumour softer, no return of pain. Repeat.

*January 26th.* Tumour much smaller; no pain; but—and mark this well—very severe pain in the *left* arm and cicatrix of wound (from which side the breast had been removed). *Sil. 6, Cactus φ.*

*February 10th.* Increase of size in tumour and some slight pain, but that in left arm has gone. Prescribed *Phytol.*

*March 2nd.* Tumour is smaller and pain gone. General health is very much improved. Has not felt so well for a very long time. *Cicuta V. and Sil. 3* hours alt.

*March 27th.* Left arm again very painful; tumour is very much smaller, and there is not any pain in it. *Warneria Can. 3x, 3* hours.

*May 16th.* Almost well. *Cicuta 3 φ.*

*August 9th.* Tumour has entirely disappeared, and she has not the slightest pain in the right breast, but left side is very troublesome, and for this I am now treating her.

The following case is very interesting, as an operation had been arranged for, but fortunately for the patient it never came off. The case was one of fistula in ano, in a gentleman. He consulted me on May 25, 1893, and on inquiry I discovered that it began about three months before the above date, and had caused him great inconvenience and pain. There was a considerable discharge of pus and blood, and the trouble was further complicated by prolapsus ani. Patient is not phthisical. I began the treatment by injections of *Calendula* and five drops 3x *Argent.*, to be taken three times a day. For the first fortnight there was not much result of a satisfactory character, so I

decided to give *Sil.* 6, and continued the injections. Five days later *Iodine* 3x was given in alternation with the *Sil.* until June 30th, when he reported himself as much better. Pain and discharge had ceased. I then ordered *Tuberculinum* 6 (Koch) and *Silica* 3 every four hours alt. On July 11th he reported the fistula to be closing, and that the pain had entirely gone. Also there was not any further trouble with the prolapse, and no discharge. I repeated the medicine.

*August 18th.* Came simply to report himself as entirely cured.

Now, had this gentleman submitted to the operation, consider the risk, the pain, the inconvenience, the anxiety, not to mention the great cost. These considerations are of importance, but how often are they overlooked owing to the tyranny of fashion!

The next case I have to report is a very important one, and in it an operation was arranged for as the only possible means of relief. The patient is a youth aged about 19 years, and had cataract of both eyes. The trouble began when he was four years old, owing to shock occasioned by a very severe burn. After the accident he was delirious for twelve days, and after the delirium had passed away his parents noticed that he could not see as well as formerly. He, however, improved in this respect for a while, but afterwards relapsed, and continued to grow worse until he came to consult me. I may mention here that he had consulted an oculist in Liverpool, and a clever man he is. He advised operation as the only chance of a restoration to sight, and all the arrangements had been made. I strongly recommended the parents to try what medical treatment would do before resorting to the more heroic method. They at once assented, and placed him under my care. I began the treatment with *Ignatia* 6, and during the next four months of treatment I gave him *Cann. Sat.*, *Calc.-carb.*, *Sulphur*, and *Nat.-mur.* The result is that the boy can now see and distinguish faces at one end of a long lecture hall from the other end. The opacity of the lenses has disappeared, and he only needs glasses to correct his myopia.

Now taking these three cases into consideration, think what has been effected. In the first place there has not been any risk to life, and this is a very important point. Notwithstanding the advances made in antiseptic surgery

there is always risk, however carefully an operation may be conducted. I know of one case where the removal of a small tumour from the breast of a lady resulted in death from shock, and another where the patient died from blood-poisoning after an operation for whitlow. I have known cases of total blindness follow the operation for cataract, and surgical interference in cases of fistula in ano is not without danger. I trust that people will not run away with the idea that because we homeopathic practitioners prefer, as a matter of right and humanity, to spare the knife whenever we can, that therefore we do not know how to use it. This is the teaching of many who know better, but whose interest it is to blind the eyes of the public (if indeed it is ever the interest of any one to promulgate falsehood). We number in our ranks some of the most brilliant surgeons in the country, but we will not cause people to run the risk of operation if we can cure by medicine. Another very important point is the great saving of expense. To the rich this may be a secondary consideration; but when incomes are limited it is no easy matter to pay thirty, forty, or fifty guineas for an operation, not including attendant expenses for nurses, &c. It means retrenchment all round, the denial of every luxury, the loss, perhaps, of the well-earned and much-needed summer holiday, and a thousand other denials only known to those who have to put up with them.

Of course it is impossible to cure every case of tumour, every case of cataract, every case of fistula, by medicine; but I trust that the results of the cases I have recorded may induce many to try what homeopathy can do for them before they run the risk of an operation.

Birkenhead, November, 1893.

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## NOTES BY THE WAY.

By DR. USSHER, Wandsworth.

I HAVE not read Dr. Burnett's *Vaccinosis*—that is a pleasure reserved—but I am thankful for the usefulness of *Thuja*. In last month's *Recorder* (October), a doctor has been writing great things of *Thuja high*, yet I follow Dr. Hughes when he says it is useful in all potencies.

Some years ago I had a patient who was making great losses. I had attended her in two confinements. She

suffered immensely from varicose veins, and in the after-birth there were veins of unusual size. Why I gave her *Thuja*, I cannot tell, it is so many years ago; but she passed from the womb a large polypus—larger than any green fig I ever saw—with pedicle, like the after-birth, in structure—as clean cut off as if a knife had severed it. This was from a few doses of the 1x. She was nearing the climaxis. With the 1x I have cured ranula looking like enlarged veins.

A young woman, about 27, had a papular eruption on her face, worse at period, very unsightly. She was florid. Had been vaccinated. *Thuja* 1x at once cleared it, after a week's use. After a lapse it re-appeared, and *Thuja* 30 again removed it. She was a dressmaker, and was alarmed at its possible permanence. Her period was irregular and scanty. *Sepia* 12 did her some good; but *Thuja* 30 every night, and, finally, every third night, she went on to a clearance of her unwelcome lodger, and much improved health at the period.

I have in my mind a case of porrigo, which makes clear to me that *one* dose would not have cured him, an apparently healthy flaxen-haired boy. For months I gave him *Staphis* 12 t.d.s., and whenever I stopped it the head got worse; but by perseverance it removed every patch over scalp and behind the left ear. It smelled of mice dirt. My key-note—and it is a valuable one—I had from Dr. Drury many years ago: dry eruption of scalp, *Hepar.*; moist, *Rhus*; stinking, *Staph.* Again and again it has helped me. How often has it been said to me, "The *second* dose relieved me," notably *Belladonna* 3x in neuralgia.

A woman at the climaxis is the subject of a papular eruption, with fierce itching all over the seat, and the remedy that has most relieved her is *Sepia* 12 t.d.s. She says she cannot do without it; and her last observation is that this medicine has done her more good *than all the rest*. This she has taken for months, except a week of *Sulph.* 12, and the improvement has come late, *after months' use of it*.

And now a word about cats—our tiger a Persian gentleman is of a savage nature. He has had a growth across his right eye, like a membrana nictitans, and, as with his predecessor, who had a like deformity, *Rhatany* 1x cured it. He had two doses, and it made his temper savage. Our tiger is not virtuous; his disregard of *meum* and *tuum* has

brought him into severe conflicts with other cats. He presented himself one morning with a gash across his loins, as if a trap had cut him—hair and skin alike gone. Formed an abscess, looking horribly sore and offensive. A few doses of *Silicea* 6x in his milk healed the sore, but his fur is no longer his covering. There was no approaching him while he was raw, nor for long afterwards. He is so sensitive about his handsome tail that you cannot touch him, but grateful in his way for past attentions.

### REMARKS ON THE "MATERIA MEDICA."

By EDWARD MAHONY, M.R.C.S., L.S.A.

*Guaiacum*.—A short *résumé* states it to be useful in—Attacks of cephalalgia (gouty pains in the head); swelling of the eyes; painful straining in the ears; sensation as if mucus were in the throat, causing a feeling of nausea; repugnance to milk; constipation; stitches in the chest; arthritic lancinations in the limbs, excited by the slightest motion and accompanied by heat in the affected parts, especially when the patient had been injured by mercury; pulmonary consumption with fetid pus. We may notice particularly *gouty* pains in the head, and injury from *Mercury*, the former reminding us once more that gout, like all other diseases with external manifestations, requires for its *cure* the treatment of the internal cause; and this again being an internal miasm—namely, our old acquaintance, psora—an *antipsoric* alone will meet the cause, and the most careful even internal homeopathic treatment, carried out at the time of local manifestations, pain, swelling, inflammatory fever, will *never cure*, but must be followed by antipsoric treatment during the intervals of comparative health, which in this disease correspond to what is known as *apyrexia* (absence of fever symptoms) in intermittent fevers. The latter (effects of *Mercury*) again recall the absolute necessity of antidoting injudicious previous medicinal action, and for which purpose, happily, homeopathy possesses a large and varied armamentarium.

*Hep.-sulph.-calc.*, commonly spoken of as *Hepar* or *Hepar Sulph.*—As the name shows, it is "a mixture of equal portions of finely powdered, clean oyster shells and quite pure flowers of sulphur kept for ten minutes heated to a white heat." Here again we find two substances, one of which

has been usually reckoned inert, medicinally speaking, and the other used only in the crudest way as an aperient, and to "purify the blood," but prepared homeopathically—that is, according to the science of potentisation as proved by Hahnemann—become one of the most valuable antipsorics, and especially useful in boring headache in the root of the nose; ulcerative pain close over the eye; photophobia (dread of light); discharge of fetid pus from the ear; erysipelas in the face with prickling tightness of the skin; rawness of throat with diminished facility of talking but not of swallowing; canine hunger; attacks of nausea with coldness and paleness; incarceration of flatulence; deficient sexual instinct; spasmodic constriction of the chest after talking; scirrhus ulcer in chest with stinging, burning pains in the edges, and fetid smell like that of old cheese; drawing in the back between the scapulæ; fetid sweat of the axillæ; steatoma (tumour containing sebaceous matter) on the olecranon process of the ulna (region of the "funny-bone"); deadness of fingers; drawing pain in limbs, especially early in morning when waking up; tremulous faintness after smoking tobacco; inclination to sweat during the day; flushes of heat with sweat.

Some remarks may be made on some of above; and first, under head, notice the importance of locality. This applies to all cases, as well as directions of pains and other sensations. Next, erysipelas: of this affection I have spoken before, but here is another illustration of avoiding routine treatment, individualising the present case and noting the concomitant of the local inflammation; also that Hepar is an antipsoric. Notice the peculiarity in swallowing, as these peculiarities are sometimes even of vital importance—as, for instance, in cases of diphtheria in its malignant form, the fact of the inflammation commencing on the left side and the difficulty of swallowing liquids being greater than the difficulty of swallowing solids, would most likely call for *Lachesis* in preference to all other medicines, and a right selection of *the one* medicine indicated, and that without undue delay, will most probably almost certainly mean the difference between life and death, or at any rate the difference between prompt recovery, and no bad consequences and lingering recovery and a prolonged period of ill-health. Notice under scirrhus (that is cancerous) ulcer the character and locality of the pain and the smell; here again homeopathy abjures the treatment of



names; and provided the sore has the above-mentioned characteristics, and the general symptoms (of which there are sure to be several in so severe a disease) correspond, then *Hepar* is the medicine whether the name be cancer, scrofula, phagedena, or any other whatsoever. Steatoma: here comes the interesting and practical question once more, Where and when shall the surgeon step in and, with all due skill and expedition, remove the offending growth? Without attempting here a setting forth of the *pros* and *cons* of this oftentimes painfully weighed question, I am satisfied that with safety this much may be advanced—namely, that while to the allopathic mind the first and foremost conclusion is an operation is the only radical remedy, to the trained homeopathic mind the conclusion is exactly the opposite—namely, let operation be the last thing, and then an admission that *cure as such* is impossible. This applies of course to growths the product of disease, and not to injuries. With *Hepar* ends, as before observed, vol. iii., and vol. iv. gives us remedies from *Iodine* to *Nitric Acid*.

*Iodine*, usually spelt "Iodum, or Iodium," in homeopathic works.—The opening remarks state, "*Iodine* is an heroic medicine, even when employed in the highest potencies: its use requires all the discretion of a good homeopathic physician." It has proved useful in (among other things) mercurial ptyalism; bad taste, as of soap; nightly micturition; old morning cough; external swelling of the neck; weakness of the arms early in the morning when in bed; curvature of the bones; dryness of the skin; night sweats. Noting the above caution in the use of this "heroic" remedy, we will only notice in passing the common practice, even to the present day, of *blistering* by means of *Iodine*, not only in goitre and other external swellings, but even over various parts (preferably under the collar-bones) of the emaciated chests of consumptives; and observe that our drug gives another antidote for *Mercury* against the horrible fetor of the ptyalism (salivation) the latter drug produces; also the soapy taste is another instance of the importance of noting small things; then the cough, evidently chronic; the peculiarity of the condition of the weakness of the arms, instancing once again that you cannot safely reason *à priori* in medicine, but must accept the fact, however curious. Lastly, curvature of the bones: here again internal treatment alone affords *cure*, however useful mechanical aid may be and, in its place, is.

*Kali Carbonicum* (carbonate of potash) is another case of a substance in common domestic use, and also crudely, in a medical way, for mild dyspeptic symptoms, but whose latent and great healing powers dynamisation has proved. Two full pages of epitomised symptoms are given, among which are: Tendency to start; the eyes are dazzled by the light; hawking up of mucus; repletion after eating; incarceration of flatulence; itching of the anus; weakness of the body, especially of the eyes, after an embrace; menses too weak, too early; acridity, itching and corrosion about and in the genital organs; dry coryza; nightly cough; purulent expectoration when coughing; asthma when walking a little faster than usual; stiffness of the nape of the neck; nightly tearing in the lower limbs; creeping shuddering over the tibiæ (shins); fetid sweat of the feet; liability to cold; want of perspiration, inability to perspire; night sweats.

Some of the above may seem at first sight not of much use—*e.g.*, the first-mentioned tendency to start; but as a homeopath is always thinking, and if he does not *know* is always mentally asking, what does this mean? why? &c., this leads to looking at the detailed symptoms, where we find: fearfulness in the evening in bed; fearfulness when alone; tendency to start, especially when one touches her; she starts with a loud cry on account of an imaginary vision, such as a bird flying to the window; and now the inward mental and moral condition of the patient becomes evident, and thus too this drug is distinguished from others, such as *Sil.*, which also have tendency to start. This dazzling of eyes from the light at once distinguishes from the few medicines having desire for light; in asthma again the condition becomes important; also *fetid* sweat of the feet; the number of sufferers from this unpleasant complaint is considerable, some even to the extent of being painfully manifest wherever they are, and of course correspondingly endless measures are adopted locally, the effect of each of which is—to adopt the graphic phrase of a homeopathic medical author—"to drive another nail into their coffin," whereas a little careful discrimination between the different medicines having this symptom, taking exact locality, character of perspiration, and the main general symptoms will lead to the discovery of *the* specific or specifics for the cure of that species of psora which caused that particular local symptom. The above-mentioned sexual weakness

also raises the question, Why should the eyes in particular be affected?

In other cases other organs or functions suffer, again proving that the real cause is constitutional—dyscrasia as the dominant school of medicine expresses it, chronic miasm in the language of Hahnemann, and only to be cured by the administration of the corresponding anti-chronic-miasmatic, and this last only to be found by carefully eliminating the entirety of characteristic symptoms of the case before us: no local or general hygienics will accomplish this. The absence of perspiration, which many think nothing of, is, however, an unmistakable psoric symptom, and which may cause the death of the patient on the first attack of acute inflammatory disease, especially if it be of an eruptive nature, of which I can speak positively from actual observation and reliable information. One remark of great clinical value must not be omitted before passing on to the next drug. "Persons suffering with ulceration of the lungs can scarcely get well without this antipsoric." The now well-proven value of *Kali-carb.* in the after-treatment of inflammations of the chest of all kinds sufficiently verifies the truth of this remark; of course there must be no mere routine in this any more than in any other case, but a little study of the chief symptoms of *Kali-carb.*, and a corresponding inquiry as to the symptoms felt and otherwise found to exist in those who are recovering from inflammations of the chest of all kinds (and every ulceration was preceded by an inflammation), will lead to the discovery that persons in this condition have a large number of the symptoms of the drug under consideration.

*Lycopodium Clavatum* (wolf's foot) is once more an article which, until potentised, was thought to be inert medicinally. "A dust-like powder, which is yellowish, smooth to the touch, obtained from the ears of a moss which grows in the forests of Russia and Finland. Potentiation must of course be at first by trituration and succussion."

Symptoms—grief; ill-humour; pressure and smarting of the eyes; inflammation of the eyes with nightly agglutination, and lachrymation in the daytime; dim-sightedness, as if there were feathers before the eyes; hardness of hearing; dryness about and in the mouth, with difficult movement of the tongue; ulcers in the

throat from abuse of *Mercury*; bitterness of the mouth early in the morning with nausea; canine hunger; want of appetite; *globus hystericus*; pressure of the stomach; fulness in the stomach and abdomen; troublesome distension of the abdomen; pinching in the right side of the abdomen; deficient emission of flatulence; gurgling in the abdomen; constipation for several days; urgent desire to urinate; gravel; excessive pollutions; want of sexual desire; impotence of several years' standing; menses too long and too profuse; sadness and melancholy before the menses; leucorrhœa; catarrh of all kinds; dry coryza; drawing pain in the arms; weakness of the arms; stiffness of the knee; contractive pain of the calves when walking; dryness of the skin; boils; varices of pregnancy; internal weakness; restless nights, sleep with frequent waking; fearful anxious dreams; falling asleep late at night; day sweat, from moderate work or little exercise, especially in the face. These will suffice for a few comments out of four pages of selected symptoms. It is plain that we have here an invaluable and very deeply reaching medicine, an antipsoric in the fullest sense. The moral symptoms, as always, are of the first importance—grief; ill-humour. Turning to the detailed symptoms we read; had to weep the whole day, found it impossible to calm herself, without any particular cause; weeping mood, with chilliness (note the concomitant); great apprehensiveness in the pit of the stomach, from vexation; great anxiousness, apparently in the pit of the stomach; internal anguish in the forenoon, and internal chilliness, resembling an internal trembling. These sufficiently indicate to us the kind and cause of both grief and ill-humour and the bodily condition connected with either. Respecting the chilliness, it may be observed that in all chronic complaints the accompanying of feelings by physical conditions is of the greatest importance to note, and of physical conditions none are more easily overlooked than the phenomena known as chill, heat, and sweat, and when these are present their order in time. Only two days ago a patient in strong asthmatic paroxysm received from me *Calad.* 200, because the febrile paroxysm of heat, sweat, chill, and in that order was present, and this was the *only characteristic* of the symptoms present; a second visit was not required. The same patient on a previous occasion received *Coral-*

*lium rubrum* 200 because there was a feeling of hot pressure or burning between the shoulder-blades posteriorly and pressure on coughing in the middle of the chest (mid-sternum, anteriorly through to back, and with the same happy results. *Every case must be treated on its individual merits and characteristic symptoms present.* To return to our drug—the character of dim-sightedness is to be noted in all cases, forms, colours, conditions, and concomitants are alike most varied under the different drugs. The symptom of the tongue reminds me of another most peculiar symptom of the tongue of *Lycopodium*, namely: "the tongue darts involuntarily out of the mouth, and moves between the lips to and fro." This once enabled me, many years ago, rapidly to cure a case of bronchopneumonia, which was threatening to become exceedingly grave, in a young child. *Globus hystericus*: this sadly misunderstood and consequently maltreated disease is found under several medicines in different varieties of its forms and symptoms, and as antipsorics have developed these, the inference is but just that psora is in many cases the hidden culprit, and a due antipsoric treatment will do more for this large class of patients than all the ridicule and pooh-poohing which are frequently freely bestowed. Under constipation it may be noted that *Lycopodium* is one of the few medicines having constipation without desire, another apparently trivial thing, but one that is often of very great value in eliciting the suitable medicine for a case of chronic constipation. Cough after drinking (which has not been noted above) is again a rarely found but most useful symptom. One other observation (though not found here) is of considerable practical value, and that is not to commence the treatment of a chronic disease with *Lycopodium*. Its value again as an anti-mercurial must not be overlooked. It has a large sphere in skin diseases (so called), causing many and varied eruptions as well as the dryness above recorded. The hint, too, of its value in varicose veins is not to be forgotten, only the necessity of continually watching for what characteristically individualises each case, and not prescribing for the name varicose veins must be maintained with the greatest firmness.

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## MATERIA MEDICA.

## STELLARIA MEDIA—A PROVING.

By FREDERICK KOPP, Greenwich, N.S.W.

In the HOMEOPATHIC WORLD of June last there appeared a very interesting letter on the subject of "A Plea for the Proving of our Native Wild Plants," the contents of which I, as a homeopath, do heartily endorse. There is not the least doubt in my mind that in some of our meanest weeds are to be found some of our most valuable remedies, and that they only require proving. I am not in the least surprised at the wondrous effect of *Stellaria media* (chick-weed) in rheumatic gout in the case of your correspondent, and also in that very remarkable one of his wife. The following symptoms, proved by me from the drug in September last, will show at a glance its homeopathic relation to diseases of a rheumatic nature or tendency:—

*Head*.—Pains of a rheumatic character over the right side of the head, especially towards the back; parts sore to the touch. Rheumatic-like pains darting through the whole head, worse on right side. Rheumatic-like pains through left half of forehead, over the eye; sore to the touch. Neuralgic pains right side of face. Right eyeball sore to touch; flushes of heat below right eyelid; dimness of vision. Darting pain in the right eye. Dryness of the nostrils. Slight heat and burning sensation of the lower lip. Persistent taste of the drug for over two hours after taking, with slight acrid feeling; heat and dryness in the mouth, with numbness of lower gums and tip of tongue. Sensation as if the teeth (incisors) were on an edge.

*Throat*.—Numbness and dryness in the throat, followed later on by sharp stitches in left tonsil.

*Chest*.—Tickling in upper part of chest, inducing short cough, intensified by taking a long breath; hawking up of phlegm of a semi-transparent viscid character, having a saltish taste. Constrictive feeling in chest, with dyspnea and oppression; sensation of heat in the chest.

*Stomach and Bowels*.—Slight nausea, with frequent eructations, tasting of the drug. Stomach and bowels sore to the touch; soreness and dragging pains in lower bowels; navel sore to the touch. Wandering pains around the navel, afterwards remaining stationary between the navel

and the liver. Loose dark-brown motions, attended with slight pains.

*Liver.*—Sensation as if the liver were too large for the body; burning pains all over the liver; liver sore to the touch; burning pressure in the region of the liver. General bilious feeling.

*Kidneys.*—Both kidneys sore to the touch.

*Extremities.*—Rheumatic-like pains in the left foot; rheumatic-like pains in the ankles; sharp, darting, rheumatic-like pains in the left knee, gradually extending above along the thigh; similar pains below the right knee-cap; darting pains through various parts of the body, especially down the right arm and the middle and finger next to thumb of the left hand. Stiffness of the joints in general. Rheumatic-like pains in the calves of the legs, which are sensitive to the touch. Rheumatic-like pains in right hip; rheumatic-like pains across small of back, aggravated by bending; stiffness in lumbar region, with soreness. Darting pains through right thigh. Rheumatic-like pains in right groin. Dull pain under right shoulder-blade.

*Generalities.*—Pulse slightly raised, but temperature normal. The pains are worse on motion, and the parts sore to the touch. The first symptoms come on rapidly, often within half-an-hour after taking the drug. Next morning, on rising, a bruised feeling all over the thighs, as if from over-exertion. Felt unrefreshed, although had slept well the night before.

It will be noticed that the rheumatic symptoms take a prominent place throughout the proving, which should at once mark the drug as one of the most valuable and reliable remedies we possess for that often very obstinate disease, rheumatism. In the case of a patient suffering from this complaint—the part affected being just below the right knee—I applied the remedy (*Stellaria media*) locally, giving it internally at the same time. The effect was marvellous. Although the patient could with difficulty walk, owing to the severe pain of placing his right foot on the ground, in less than two hours improvement set in, and the pains completely left within twelve hours, without again returning.

*Stellaria media*, on account of its action on the liver, should prove of great service in hepatic complaints, characterised by congestion and enlargement of that organ.

Given to patients suffering from cardiac disease, *Stellaria*

*media* in large doses (say 30m.  $\phi$ , and sometimes less) appears to increase the intensity of the pains.

In conclusion, I would strongly recommend it to my fellow-homeopaths as a valuable addition to the new remedies of our comprehensive *materia medica*, and well worthy of their notice.

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## REVIEWS.

### KEENE AND ASHWELL'S "PHYSICIANS' DIARY AND CASE BOOK FOR 1894."\*

WE are pleased to notice the appearance of this useful annual, which has come to be an indispensable friend with many practitioners. It maintains its excellence in all particulars, and the information of the almanack part is kept well up to date.

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### WRIGHT'S VISITING LIST.†

THIS is an exceedingly well got up visiting list, contains the usual almanack and interesting information for daily reference, including lists of "drugs and their doses," "poisons and antidotes," "average heights and weights," "temperature of baths," "weights and measures," "metric system," "eruptive fevers," &c. The "visiting list" proper, comprising pp. 14-205, has this unique feature, that by means of a half fly-leaf the record of visits for any patient can be entered on one pair of pages, and the name can be entered once for all. Special lists are made out for consultations (206-221) and obstetric engagements (222-233).

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### SERPENT POISONS.‡

THE lecture on the Serpent Poisons which has already appeared in these pages has been revised and reprinted, and may now be had in a separate form.

\* *The Physicians' Diary and Case Book for 1894.* London: Keene and Ashwell, 74, New Bond Street.

† *Wright's Improved Physicians', Surgeons', and Consultants' Visiting List.* Compiled by Robert Simpson, L.R.C.P., L.R.C.S. 1894. Bristol: John Wright and Co. London: Simpkin, Marshall, Hamilton, Kent and Co., Limited. Hirschfeld Bros., 82, High Holborn. Morocco, price 5s. 6d.

‡ *Therapeutics of the Serpent Poisons.* By John H. Clarke, M.D. London: Homeopathic Publishing Company, 12, Warwick Lane, E.C. 1893. Cloth, 1s.



## A BIRD'S-EYE VIEW OF THE *ORGANON*.\*

THIS is a revised reprint from THE HOMEOPATHIC WORLD of a lecture delivered by the author at the London Homeopathic Hospital.

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## ANSWERS TO CORRESPONDENTS, NOTES AND QUERIES.

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\* \* In this department we shall be happy to reply to any inquiries relating to homeopathy or to the matter of our magazine that our correspondents may like to address to us. We cannot, of course, undertake to give medical advice in particular cases, which is the business of a medical attendant; but if our medical readers like to put queries to each other regarding points of practice or puzzling cases, we shall be happy to insert queries and replies.

MESSE<sup>S</sup>. BOERICKE AND TAFEL, *Philadelphia*, are thanked for their kindness in sending the pamphlet in response to the Editor's request.

DR. PROELL, of Meran, Austria, is thanked for his interesting communication, which will appear in our next issue.

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## APPOINTMENTS, VACANCIES, REMOVALS, ETC.

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\* \* We shall be happy to insert notices of appointments if gentlemen will be good enough to forward them to us, and also of posts vacant and likely to be vacant, on receiving information from secretaries or committees. Under this heading also, we shall mention good openings for homeopathic practitioners and chemists.

MR. DUDLEY WRIGHT, *Wimpole Street*. Mr. Dudley Wright, of 4, Leinster Square, has opened consulting rooms at 32, Wimpole Street, where he attends from 11.30 to 2.

### VACANCY.

PERTH, WESTERN AUSTRALIA.—We beg to call attention once more to the want that exists for a homeopathic practitioner in Western Australia. Messrs. Martin & Co., of Murray Street, Perth, W.A., write under date Oct. 18th :—"Up to the present time there has been no homeopathic medical man in Western Australia, and we feel convinced that any practitioner requiring change of climate would make a very fair practice at once, with a good prospect (owing to the richness of our goldfields) of its becoming a lucrative one. There are two homeopathic pharmacies in Perth, and one in Fremantle—the port, twelve miles away."

\* *A Bird's-eye View of Hahnemann's Organon of Medicine*. By John H. Clarke, M.D. London: Homeopathic Publishing Company, 12, Warwick Lane, E.C. 1893. Stiff paper cover, 6d.

## Obituary.

### LORD EBURY.

By the death of Lord Ebury, which occurred on November 18th, at the age of 92, homeopathy loses one of its most devoted champions. In the whole period of his patriarchal life, during which he suffered from many severe attacks of illness, he never for a moment swerved from his steadfast faith in the system of Hahnemann. He was always rather delicate, and he was accustomed to attribute his longevity, which greatly exceeded that of his more robust brothers, to his steady adhesion to homeopathic treatment. The benefits he experienced in his own person from homeopathy he was always anxious to impart to others—hence he was always ready to join in any scheme for propagating a knowledge of homeopathy among the public, or for extending to the poorer classes the benefits of homeopathic treatment. He took an active part in the English Homeopathic Association, and was President of the Homeopathic League. He was also President of the Hahnemann Hospital in Bloomsbury Square, and on the untimely decease of that institution he became President of the London Homeopathic Hospital. Nor was his presidency merely nominal, for he took an active part in the management of the hospital, and presided at almost every annual meeting of the governors. The last public act of his life was assisting in the ceremony of laying the foundation-stone of the new hospital, and all who were present on that occasion will remember the genial but dignified manner in which he joined with the Duchess of Teck on that interesting occasion. But his services to homeopathy were not limited to presiding over associations, meetings, and hospitals, nor yet to assisting the cause from his purse. His zeal for the cause led him to take an active part in defending homeopathy, at first in the House of Commons, where he upset the scheme of the College of Physicians for burking the returns of the successful treatment of cholera in the London Homeopathic Hospital, and afterwards in the House of Lords, where he was mainly instrumental in adding to the Medical Act clause 23, which gives full protection to candidates for medical diplomas who may be convinced of the truth of homeopathy, and may be considered as a sort of Magna Charta of freedom of opinion in medical matters.

Lord Ebury's interest and active co-operation in all homeopathic work was only a component part of his philanthropic labours, for he was always ready to assist in every good work for the amelioration of the condition of his less fortunate fellow-creatures. But we must leave to others to record his many good deeds in other departments of philanthropy.

All friends of homeopathy in Britain will, we are assured, feel that their cause has lost a most energetic, devoted, influential, and sagacious friend and defender.

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## GENERAL CORRESPONDENCE.

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MR. ERNEST HART FROM A TRANSATLANTIC POINT OF VIEW.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—The echoes of Mr. Ernest Hart's violent and utterly uncalled for attack on the Homeopathic wing of the profession in America are still ringing in our ears and also in our journals. Now I am not a "Homeopath," but I know enough of the American Homeopathic profession to be able to speak in the highest terms of its members, both as scientists and gentlemen, and I would indignantly repudiate the impudent attack on them by Mr. Ernest Hart. It is very galling to us Englishmen in America to have men of Hart's stamp come here and make themselves so exceedingly obnoxious to all well-regulated minds, both professional and lay; and that Mr. Hart has done himself infinite injury in the minds of the great majority of Americans goes without saying. Why even the laity want to know "Who and what is that English bully who is making such an ass of himself?" Even the old school are cursing him for his folly.

Yours, &c.

BRITISH-AMERICAN.

Bethel, Conn., Nov. 6, 1898.

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## TUBERCULINUM HEATHII.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—In the November number of THE HOMEOPATHIC WORLD you publish some cases of tubercular meningitis unsuccessfully treated by Dr. Lamb, of Dunedin, with this remedy. My experience is that many, if not most, cases of tubercular meningitis are caused by vaccination, and that no good whatever can be done until the effects of vaccination have been removed. This is often done with *Thuja* 200, and the case may then yield to *Tuberculin*. A short time since I had a remarkable proof of this, and the little patient, after two or three months' illness, got quite well, and remains so now, with the exception of occasional outbreaks of temper, when she will scream, bite, and

kick every one. This child, until vaccinated, had a most angelic temper. The attacks of temper under *Tuberculinum* 200 are getting less and less.

Yours truly,

ALFRED HEATH, M.D.

114, Ebury Street, Eaton Square, S.W.,

Nov. 8, 1893.

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### HOMEOPATHY IN NORTHAMPTON.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—Dr. Croucher is reported in your excellent journal to have said, at the dinner following the Congress at Northampton, that “Dr. Clifton came to Northampton something like forty years ago, and had done the work of twenty men in propagating the principles of homeopathy in the Midlands.” I feel sure that Dr. Clifton will support me in the statement that the introduction of homeopathy into Northampton and the Midlands was mainly done by my father, the late Dr. Charles T. Pearce who lectured on homeopathy in Northampton and several other Midland towns forty-two years ago; who carried on a newspaper war with opponents (in the columns of *The Northampton Mercury*), aided by Dr. Sharp and other stout defenders of Hahnemann’s system of treatment; and established the first homeopathic dispensary in Northampton. Many of your readers will remember *The Homeopathic Record*, which was published for several years in Northampton, and edited by my father. I beg your permission, sir, to publish these facts in justice to the memory of my father, who was in the forefront of the battle for so many years. I shall have much pleasure in showing two volumes of *The Homeopathic Record*, 1851–52, to any friends of homeopathy who may call on me.

Yours truly,

ALFRED J. PEARCE.

19, Queen’s Road, Twickenham,

Nov. 10, 1893.

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### THE LONDON HOMEOPATHIC HOSPITAL NURSING INSTITUTE.

*To the Editor of the HOMEOPATHIC WORLD.*

SIR,—At the present time, when the building contracts for the new hospital are under consideration and the work of the hospital is being actively carried on in the temporary hospital, at the rate of about 500 in-patients and 10,000 out-patients per year, it is

most essential, both for the income and the reputation of the hospital, that the private nursing work should be fully maintained.

The present staff of nurses is about forty, including nurses for medical, surgical, special surgical, and monthly cases.

Unfortunately the receipts from that source were much less in 1892 than in 1891.

This very important branch of the hospital work can be fully carried on during the rebuilding under existing arrangements, and it is the earnest hope of the Board of Management that it will be well supported by the members of the medical profession, upon whose requisitions for nurses it depends for its success.

Very faithfully yours,

G. A. Cross,

Secretary-Superintendent.

Great Ormond Street, Bloomsbury.

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## LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

HOURS OF ATTENDANCE:—Medical, Daily, 2.30; Surgical, Mondays, 2.30; Diseases of Women, Tuesdays, 2.30; Diseases of Skin, Thursdays, 2.30; Diseases of the Eye, Thursdays, 2.30; Diseases of the Ear, Saturdays, 2.30; Diseases of the Throat, Mondays, 2.30; Operations, Mondays, 2.

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ACORN POISONING.—The acorn crop being exceptionally abundant this season, the Board of Agriculture have issued a circular calling attention to the risk of injurious effects arising from the consumption of large quantities of acorns, which in the present dearth of herbage, owing to the long drought, are certain to be eaten with avidity by cattle and other live stock. "In the years 1868, 1870, and 1884," says the circular, "which were remarkable for a large yield of acorns after a long dry and hot summer, serious losses among young cattle occurred from outbreaks of what is known as the acorn disease, or acorn poisoning. Young cattle up to two years old suffered most severely. Milch cows and cattle over three years old were seldom affected. Sheep and pigs appeared to be unsusceptible to the poisonous action of the seeds. The true acorn disease is distinguished by progressive wasting, entire loss of appetite, diarrhea, discharge of an excessive quantity of pale urine, sore places inside the mouth, discharge from the nostrils and also from the eyes, which are always sunken, giving to the animal a peculiar haggard expression. No fever is present from first to last, but, on the contrary, the temperature is commonly below the normal standard. On *post-mortem* examination it is frequently noticed that all traces of the acorns have disappeared."  
—*Chemist and Druggist.*

## MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Clifford (M.). Circumcision; its Advantages, and How to perform it. Cr. 8vo, pp. 23. (Churchill. 1s.)
- Davidson (A.). Hygiene and Diseases of Warm Climates. Illustrated with Engravings and full page Plates. Roy. 8vo, pp. 1,024. (Pentland. 81s. 6d.)
- Galabin (A. L.). A Manual of Midwifery. Illustrated with 261 Engravings. 3rd edition. Cr. 8vo, pp. 864. (Churchill. 15s.)
- Guy's Hospital Reports. Edited by W. H. White and W. H. A. Jacobson. Vol. 49, being vol. 34 of the 3rd series. 8vo, pp. 505. (Churchill. 10s. 6d.)
- Harrison (B.). Surgical Diseases of the Urinary Organs. New edition. 8vo, pp. 588. (Churchill. 16s.)
- Lee (A. B.). Microtometist's Vade Mecum. New edition. 8vo, pp. 509. (Churchill. 14s.)
- Maccewen (W.). Progenic Infective Diseases of the Brain and Spinal Cord, Meningitis, Abscess of Brain, Infective Sinus, Thrombosis. 8vo, pp. 374. (Macmillan. Net, 18s.)
- Maccewen (W.). Atlas of Head Sections. 53 Plates. 4to. (Macmillan. Net, 70s.)
- McCan (J.). Aids to the Diagnosis and Treatment of Diseases of Children (Medical). 12mo, pp. 174. (Ballière. 3s.)
- Moore (Sir W.). Family Medicine and Hygiene for India. New edition. Cr. 8vo, pp. 764. (Churchill. 12s.)

## TO CONTRIBUTORS AND CORRESPONDENTS.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 80, *Clarges Street, W.*

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

LITERARY matter and correspondences should be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct the same and return to the *Editor* as early as possible.

### CORRESPONDENTS.

Communications received from Mr. S. J. Capper, Liverpool; Mr. H. Pentriell, Liverpool; Dr. Mahoney, Liverpool; Mr. Frederick Kopp, Greenwich, N.S.W.; Dr. Dudgeon, London; Messrs. Boericke and Tafel, Philadelphia, U.S.; Dr. Berridge, London; Dr. Ussher, Wandsworth; Mr. A. J. Pearce, Twickenham; Dr.

Reginald Jones, Birkenhead; Mr. F. C. Ghose, Calcutta; Messrs. Keene and Ashwell, London.

### BOOKS AND JOURNALS RECEIVED.

Hom. Review.—Zoophilist.—Chemist and Druggist.—Medical Argus.—New York Med. Times.—Boletin de Homeopatia.—Medical Advance.—Homeopathic Maandblad.—Archiv. f. Hom.—Pacific Coast Journal of Hom.—La Homeopatia.—Southern Jour. of Hom.—Homeopathic News.—Medical Visitor.—Medical Century.—The Christian.—Hastings and St. Leonards Observer.—To-day.—Hahnemannian Monthly.—Vaccination Inquirer.—N. A. J. of Homeopathy.—Revue Hom. Belge.—Minneapolis Hom. Mag.—Maanedskrift fur. H.—Rheumatism: Causes, Prevention, and Cure. By Percy Wilde, M.D.—Wright's Improved Physicians', Surgeons', and Consultants' Visiting List.—Saunders Questions Compend.: No. 12, Minor Surgery, &c. Dr. Martin.—Keene and Ashwell's Diary and Case Book.

No. 1

# THE HOMEOPATHIC WORLD:

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OF  
*MEDICAL, SOCIAL, AND SANITARY SCIENCE*

Edited by  
**JOHN H. CLARKE, M.D.,**

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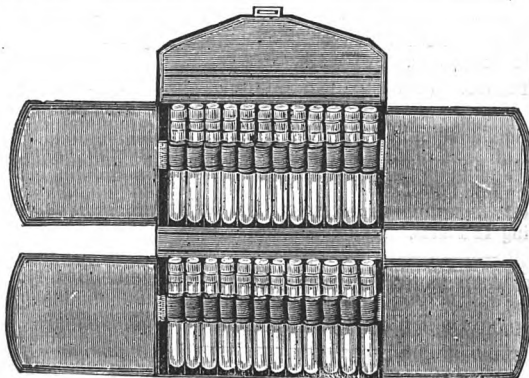
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