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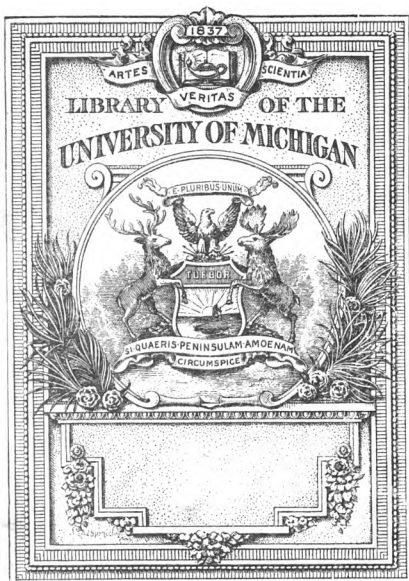
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DR. WILKS ON ALLOPATHY.

In Tract No. 9 of the League Series, "Allopathy judged by its Professors," Dr. SAMUEL WILKS is quoted as denying that there is such a thing as scientific therapeutics. In the course of an address delivered before the Oxford Medical Society on November 9th (*Lancet*, November 24th), he repeated this assertion. The address was entitled "Stray Thoughts on Some Medical Subjects," and we will quote a part of it, italicising one or two passages. Dr. WILKS is defending himself from the charge of being a medical sceptic:

"I have said no more than this, that to sit down in one's chair daily and write on a piece of paper the name of some drug for every ailment without exception which comes under our observation is in the present state of medicine an absurdity, and is simply pandering to human weakness. I do not say that drugs are not useful in a moral sense. I am merely contending that the method is not scientific, as we usually apply this term. I know of no more successful practitioner than the late Sir WILLIAM GULL, and his treatment was rational, but he did not credit any particular drug with the properties ascribed to it by the patient. His prescriptions very often consisted of nothing but coloured water. I was reading a day or two ago in a popular journal of the success of a so-called 'sixpenny doctor' at a cheap dispensary, where he saw on an average seventy patients during one evening. His favourite and almost universal medicine was a mixture composed of sulphate of magnesia, burnt sugar, and infusion of quassia. The merits of this were that it was cheap and produced an appreciable effect, for he went on to say, 'You must always give medicines which produce appreciable effects; then, also, the mixture must taste like

medicine, and if it have a bad smell the patient will be better satisfied.' I do not think this successful method of treatment has yet been taught in the medical schools.

"I am anxiously looking forward to the time when we shall be able to boast of scientific therapeutics, and I accord all praise to the few men who are working at the subject, like BRUNTON, LEECH, FRASER, and others, who have already shown how groups of chemical agents may by their constitution have some analogous action on certain tissues of the body, and have, moreover, proved by direct scientific processes the true operation of medicines. *What I do object to is the attempt to treat cases of disease on principle when we possess no principles; we do not know sufficiently the action of drugs to do this, and we know less of the meaning or significance of symptoms which we treat.* In these circumstances I maintain it is wiser to follow the empirical method and act on experience only. Take any disease you like and observe the consequences of acting on the quasi-scientific method. I take phthisis because it was when consulted in a case of this disease that I was charged with scepticism; and yet the doctor who did this entirely changed his method when he heard of the tubercle bacillus. Surely the sceptical mind is better than the one which is acting on wrong principles. If scientific therapeutics be dependent upon a better knowledge of the meaning of symptoms, surely the former must follow the latter; and therefore it is not wise to say, as is often done, that every branch of medicine is advancing except therapeutics. *It seems to me that it goes on too fast, constantly changing with every fresh view of disease.* If, to recur to phthisis again, the scientific method is by the use of antiseptics, how could this possibly have been suggested before the discovery of the tubercle bacillus? With the man who maintains that tubercle is nothing but carbonaceous matter inhalation of oxygen and various methods of expanding the lungs are for the moment the true scientific method of treatment. With the physician who maintains that tubercle is unassimilated albuminous matter, owing to a deficiency of pancreatic juice, the latter must be administered as the remedy. If tubercle be a parasite, then sulphuretted hydrogen and creasote are medicines warranted to cure it. *It seems to me so obvious that, with an imperfect pathological knowledge and a considerable ignorance of the action of drugs, therapeutics cannot in its largest measure possibly be scientific.* The cases where the *rationale* can be given for the use of any medicine can be numbered on the fingers. I cannot but repeat what I have said before, that in our present state of knowledge I hope we shall not have many more drugs, and am also thankful that many of those which we have, do not possess the attributes commonly assigned to them. I could illustrate what I mean by numerous examples, but will be content to take the one which came last under my notice. A gentleman who had

a feebleness of movement and thickness of speech creeping over him became at last very rapidly hemiplegic. The case was evidently one (and as was afterwards shown to be correct) of softening of the brain. The medical man called in believed it to be apoplexy, from the quick occurrence of the paralysis, and on being asked what medicine he had given replied 'ergot,' as he always gave this in apoplexy. Now, considering that the patient's malady was due to diseased and obstructed bloodvessels, causing malnutrition of the brain, and that a medicine was given with the object of further contracting them, the result would obviously have been to increase the softening. Is it not, therefore, very satisfactory to feel that ergot has not yet been proved to have such a power over the cerebral vessels? And, sceptical as I am about its action, I cannot help thinking that the medical man who prescribed it, and others like him, must be still more sceptical; otherwise I cannot conceive how he could have slept composedly in his bed had he really thought that by a mistake in diagnosis he had assisted in shortening the life of his patient.

"I am anticipating the day when there will be a system of true scientific therapeutics, but until that arrives I think we should rather be guided by our experience in the use of drugs than by any principles of our own concoction. *One of the worst practitioners I have ever known was a man who had a reason for the employment of every medicine he prescribed.* One example will suffice—viz., maltreatment of a case of whooping-cough by giving nothing but *nux vomica*, as he understood it was a nervous complaint. At present every man is a free lance, and treats his case according to his fancy. Should it be a case attended by fever, one medical man gives antipyrin to reduce the fever, and another digitalis to reduce the pulse, and so on."

We are very much obliged to Dr. WILKS for this exceedingly graphic description of allopathic practice. We could not improve on it if we tried.

THE GENERAL MEDICAL COUNCIL AND SECRET REMEDIES.

WE do not suppose that Mr. THEOBALD will be any the worse for the action of his College and the General Medical Council in depriving him of his diploma and his place on the medical register for Matteising; but the proceedings at the recent meeting of the Medical Council are eminently suggestive. We have no sort of respect for Count MATTEI or his methods. Doubtless he has his own reasons for keep-

ing his remedies a secret, and as he enjoys the advantage of not being a registered medical man he is not amenable to medical discipline. But for a medical man to use MATTEI's remedies, or write about them, if he has seen reason to believe in their powers, is a very different thing from his using remedies of his own and keeping *their* nature and preparation a secret, as Dr. KOCH did for a considerable time with his consumption "cure." Of course Dr. KOCH is not amenable to the General Medical Council of this country, but a large number of those who are partook of his professional sin by using his remedy and publishing cures whilst it was still a secret; and yet the General Medical Council found nothing that could be called "infamous conduct in a professional respect" in them. To take another case. One of the best remedies in cases of the intermittent fevers of hot climates is the well-known "*Warburg's Tincture*"; and for many years every sensible person, lay or medical, when travelling in fever districts, has taken a supply with him. For a long time Dr. WARBURG, who invented the formula, manufactured the tincture himself and kept his secret. At last some of the leaders in the profession who recognised its value (although a secret remedy) persuaded the doctor that it would be more professional if he revealed the formula. At last, in a weak moment, he yielded. A grateful profession, relieved from this stigma of secrecy, and feeling its ethical dignity restored, immediately began to purchase its *Warburg's Tincture* at the Stores (where it could be obtained at a slightly cheaper rate), and left Dr. WARBURG and his family to live on charity or starve;—for his *Tincture* was all he had to live upon! But, secret or no secret, nobody was ever removed from the register for using *Warburg's Tincture*, prescribing it, or writing about it.

But in Dr. THEOBOLD's case the superior persons on the General Medical Council had "fortified" themselves with an "analysis" of the MATTEI remedies, and their analyst had found nothing at all in them! Of course, what they and their analyst don't know "isn't knowledge"; and,

therefore, the MATTER remedies are conclusively proved to be devoid of all medicinal properties! On this criterion any homeopath who uses potencies above the 6th centesimal may be adjudged by these great, wise, and eminent ones to be deluding his patients. We wonder how long it will take the General Medical Council to find out that the human organism in certain conditions is an infinitely finer reagent than any test known to chemistry or mechanics?

For the present, however, we are safe from interference, for, as *The Lancet* obligingly remarks—

“It is well known that the Medical Acts amply protect homeopaths in the enjoyment of their peculiar principles, and any other regular practitioner who honestly holds a theory of medicine, however weak or absurd.”

But if Mr. ERNEST HART and the “Parliamentary Bills Committee” of the British Medical Association over which he presides is to have the re-making of the Medical Acts, and the General Medical Council is to administer them, all originality in therapeutics bids fair to be effectually snuffed out. Then the only safety for any one with therapeutic genius will consist in possessing no medical degree and having no place on the register. For, if a man can *cure*, people will flock to him, whatever the professionals may think of him, as they now flock to Father KNEIPP, whose practice embraces all sorts and conditions of men, from the peasant to Baron ROTHSCHILD and from Dr. KOCH to the POPE.

If the Medical Council really wants to purify the profession there is plenty of scope for it in the hospital scandals that keep cropping up. It might usefully trace the delinquencies in these cases to their authors and relieve the register of their names. In the meantime, if they wish to suppress those who use or have used secret remedies, let there be even-handed justice dealt all round.

NEWS AND NOTES.

THE DIPHTHERIA ANTI-TOXIN TREATMENT.

THE latest about the new diphtheria treatment is that nobody knows how it acts or anything about the principle. Dr. Klein assures the profession that Dr. Rouse's methods are all wrong, and the Berlin critics are equally severe on Behring. Here is an extract from the Berlin letter in *The British Medical Journal* of December 15th, giving an account of a discussion at the Berlin Medical Society:—

“After von Bergmann, Virchow rose. He said that treatment by diphtheria anti-toxin was begun last March in the Kaiser and Kaiserin Friedrich Hospital. At that time Dr. Aronsoln had placed his serum at the disposal of the hospital—a present of the value of about 4,000 marks (£200)—for which the hospital owed him sincere thanks. In June and July nearly all diphtheria cases were treated with the serum. The results were as follows:—

In the first week, cured 13; deaths, 1 child			
“ second “	9	“ 1 “	
“ third “	6	“ 2 children	
“ fourth “	12	“ 1 child	
“ fifth “	6	“ 2 children	
“ sixth “	1	“ 1 child	
“ seventh “	3	“ 0 “	
“ eighth “	5	“ 0 “	

Suddenly the supply of serum ceased, as, unfortunately, the very horses from which the serum was taken died. The old methods of diphtheria treatment had again to be resorted to, and the results were:—

In the first week, cured 5; deaths, 7 children			
“ second “	6	“ 8 “	
“ third “	6	“ 6 “	
“ fourth “	8	“ 11 “	
“ fifth “	8	“ 5 “	
“ sixth “	8	“ 12 “	
“ seventh “	13	“ 6 “	

This sad increase in the mortality induced the hospital to return to the serum, which was then procured from Höchst. Immediately there was a change:—

In the first week, cured 3; deaths, 2 children			
“ second “	4	“ 1 child	
“ third “	14	“ 1 “	
“ fourth “	14	“ 2 children	
“ fifth “	17	“ 1 child	
“ sixth “	17	“ 5 children	

The total figures were as follows: In the whole space of time 588 cases were treated—308 with the serum, 280 without. The former had 13·2 deaths; the latter 47·8 deaths. Virchow continued that, in view of these results, he held it to be the duty of every doctor to use the serum in diphtheria. 'All theoretical considerations,' he added, 'must give way to the brute force of these figures.' He continued that even if disagreeable by-effects were proved to occur here and there, they were not sufficient to dissuade him from continuing the treatment. Turning to the theoretical question, he said that he considered the disease artificially produced in animals by means of the Loeffler bacillus had nothing to do—anatomically—with Bretonneau's diphtheria. Nor did he consider the bacillus as the cause of human diphtheria. *A theoretical explanation of the therapeutic action of the anti-toxin serum must be left to the future.*"

It will be interesting to see how long it will take the rest of the scientists to come round to the view of Dr. Roux, that the serum cures because it is homeopathic to the cases.

PSORA.

PROPOS of the article on the case of Napoleon I. in our issue of October last, a septuagenarian contributor sends us the following items from his own friends' history. He is himself the eldest of the family: the initials refer to his three sisters, all long since dead:—

"When we were children, M. A., L., and E., were confined to the house with the itch. Our mother and father regarded it as something very disreputable; some patent ointment was sent for, said to be a certain cure, by some neighbour; the children were stripped in a warm room, and rubbed all over with the ointment, which smelt very strongly of brimstone. How long this lasted I cannot remember, nor the number of times it was applied; but in years after M. A. died in a rapid consumption; L. had a running sore on one of her cheeks, and died of either cancer or consumption; and E. died of cancer, having had one of her breasts amputated. These seem to me to be the natural sequels to the free use of itch ointment as it was made sixty years ago."

DR. HERON WATSON ON THE RIGHTS OF HOMEOPATHY.

In the course of the arguments before the General Medical Council in the case of Dr. Theobald, Mr. Acland, Mr. Theobald's counsel, in the course of his very able speech,

referred to the conscience clause in the Medical Act, and the following colloquy took place:—

Mr. ACLAND: The statute to which this Council owed its existence made it perfectly clear that a name could not be erased on the ground of the person having adopted any theory of medicine.

Dr. HERON WATSON: Theory.

Mr. ACLAND: And practice.

Dr. HERON WATSON: No, no.

Mr. ACLAND: I submit respectfully that theory is nothing at all unless it is to go into practice. If that held good then you might strike off every man who practises homeopathy.

Mr. HERON WATSON: Hear, hear.

This is from the report in *The Lancet* of Dec. 3rd. If that "Hear, hear," means anything it means that in the opinion of at least one of the members of the Medical Council that body could, if it liked, strike off the register every man who practises homeopathy. There is nothing that we should like better than to see them attempt to do it!

"THE PROFESSIONALLY MORAL."

A CORRESPONDENT of *The British Medical Journal* (Dec. 15th) who craves for some definite instruction in "Medical Ethics" in all the schools has invented a delicious phrase which it would be a pity to let die. He says:—

"Now, there is no proper guide, and I cannot help thinking that many a young man takes a wrong step through ignorance, and regrets it for the rest of his life. He is received with open arms by others who are practising unprofessionally, and his admission to the ranks of those who are *professionally moral* is hopeless."

"Professionally moral" is good. It admits the whole case: morality is one thing and "professional morality" quite another. A man's sense of what is fitting and honourable may be trusted to guide him through all ordinary relations in life, but in the profession of medicine it is different—he needs a special course of lectures to guide him through this maze.

"PINEAPPLE FOR DIPHTHERIA."

We take the following letter, which appeared under the

above heading, from *The Birmingham Weekly Mercury*, of Dec. 8, 1894:—

"SIR,—It may interest your readers to know that the juice of the pineapple is a good thing for diphtheria. Some time ago *The Herald of Health* (London) announced the curative properties of pineapple juice in cases of sore throat, or even of diphtheria. Since then *The Humanitarian* has had a paragraph on the subject, and *The Western Morning News* has called attention to the fact that the negroes in many of the Southern States of America have had long experience of healing by pineapple juice. A ripe pineapple is taken, the juice is squeezed out and given to the patient, the diphtheric mucus in the throat is cut, and recovery is possible. 'Too much publicity,' adds this valuable health monthly, 'cannot be given to Nature's simple ways of cure,' with which, as a practical advocate of clean, sweet, and healthy living, I, of course, heartily agree.

"Dec. 5th.

"NORTHERN LIGHT."

We have already commented on this treatment on p. 248, of Vol. xxix. (June, 1890) comparing it with the treatment of the same disease with Papain, and Yeast. See also HOMEOPATHIC WORLD of Feb., 1892.

LITERARY NOTES.

DR. BURNETT has in the press a work on *Gout*. It will be published in America and will appear immediately. The edition of Dr. Clarke's *Iodide of Arsenic in Organic Disease of the Heart* is exhausted and will not be reproduced in the original form. The material of it has been incorporated by Dr. Clarke in a larger work on *Diseases of the Heart and Arteries* which is now passing through the press. It will be published by Messrs. E. Gould and Son, of Moorgate Street.

DR. J. P. DAKE.

WE greatly regret to learn of the death of Dr. J. P. Dake, of Nashville, Tennessee. Dr. Dake was seized with paralysis on Thursday night, October 23rd, and died early on the following Sunday morning, October 28th. Dr. Dake was one of the best known of American homeopaths. He was a staunch defender of the rights of homeopaths and did much for raising the status of medical education in the United States. Though long in delicate health he was

an untiring worker and a successful practitioner. His loss will be keenly felt, and not the least in the American Institute, in whose councils he was always a potent force.

ORIGINAL COMMUNICATIONS.

MURIATIC ACID IN DISEASES OF THE TONGUE.

By ROBERT T. COOPER, A.M., M.D., Physician, Diseases of the Ear,
London Homeopathic Hospital.

In *The Monthly Homeopathic Review*, p. 436, for 1866, just twenty-eight years ago, I narrated the case of a girl of 13, who had had a "hard lump, the size of a large marble, which had been for two or three months on the upper surface of the tongue, about half an inch from the tip and to the right of the median line," where *Muriatic Acid* 12., half a drop three times a day, cured in a fortnight.

From that time till last week I had not seen a similar appearance upon the tongue.

Last week, a gentleman, aged about 54, showed me a spot on his tongue exactly similar in appearance and in position to the above, but smaller than it, which had shown itself two or three days previously, preceded by shooting pains, and accompanied by a feeling of heaviness in the tongue, causing impediment to movement. This, in the midst of a good deal of mental worry, caused him much uneasiness. The spot was hard to the feel, but not accompanied by visible swelling of the tongue, or of the submaxillary glands.

Muriatic Acid was given in tablets of the 12th cent. dil., two every fourth hour.

When seen three days after, the patient from being haggard and distressed, appeared cheerful and happy,—all the unpleasant sensations in the tongue had gone, and the swelling had decreased to one-half; in ten days a slightly smoothed surface alone remained.

The action of *Muriatic Acid* in the case could hardly be questioned.

I have brief notes of two other cases, simulating cancer of the tongue, which I cured with *Muriatic Acid* in the same dilution, many years ago, and of which the original entries are lost.

A man of 52, whose sister died of cancer, developed a hard, deep, warty ulcer, about the size of a small bean, on the left side of the under surface of the tongue, with a good deal of surrounding hardness but without visible discharge. There was no defective tooth which could have caused it by scratching the tongue. This yielded to *Muriatic Acid*; as did also the following:—

The tongue is swollen and makes him talk thick; it is very much ulcerated, especially on the right side; it is hard, and there is a swelling which afterwards put on a lupoid appearance on the corresponding side, of *ala nasi*; it had been going on for ten months. *Muriatic Acid* removes threatening-looking nodules and fissures, but fails with unmistakable cancer.

Flitwick Water I believe to be a tongue-remedy.

A middle-aged, plethoric-looking man, who considered the Flitwick meat and drink to him, and who used to take it by the tumblerful, one fine morning found his tongue getting too large for his mouth, it swelled out till it nearly choked him, and the swelling ended in the formation of a large abscess in the substance of the tongue, which kept on for some weeks discharging a lot of black-looking pus, presumably "the Flitwick coming out," and then healed up, leaving an extensive cicatrix behind.

80A, George Street, Hanover Square, W.

CASES FROM PRACTICE.

By R. S. STEPHENSON, M.B. Edin.

CASE I. GASTRIC ULCER: *Argent.-nit.*

Miss E., a young lady of blonde complexion, in January, 1893, complained of very marked tenderness of the epigastrium, with acute pains after eating. She was very nervous about herself, and afraid to take food of any description, even a glass of milk. She had been suffering in this way for about six months—five months ago she vomited two basinsful of blood, and also passed blood from the bowels. Has been more or less on milk diet ever since, and under allopathic treatment. During the last seven days she has been worse than ever, and she has been living on whey and nutrient enemata. She is very anemic, but fairly stout. The abdomen is much distended, and very sensitive

over the epigastric region. She complains much of a trembling throbbing in stomach and of violent eructations of wind.

She received *Argent.-nit.* 6x every three hours—a diet of milk and water with a few drops of Murdoch's Food. Next day, in spite of this liberal (!) diet, she was better and able to enjoy some Benger's Food and maizena. The medicine was continued, and she made an uneventful recovery. In a week's time she was discharged, feeling perfectly well and able to eat fish, poultry, &c. She was very grateful and very much concerned that she had put up with so much pain and expense before trying homeopathic treatment.

CASE II. GASTRIC IRRITATION AND WEAKNESS OF LEGS:
Argent.-nit.

Mrs. P., August, 1894, has been ailing for seven years with symptoms resembling the above. She states that she has always been very bilious, and has at times vomited quarts of bile. Latterly she has been unable to keep down any food, and has even vomited all her medicines (allopathic). She is of a very dark, swarthy colour, and says her skin has got much darker the last few years. Great weakness of legs—unable to walk about.

℞ *Argent.-nit.* 6x every 4 hours. She returned in a week's time to report that the medicine had relieved all her acute symptoms. She continued to attend the hospital for a week or two, and then was lost sight of.

CASE III. ECZEMA: *Sulph., Psorin.*

The patient in this case was a young man who came to me on the 3rd of June, 1894, suffering from as severe an eczema as I ever expect to see. His head was covered with scabs. His hair had mostly come out, what remained was thin and brittle. The skin of the face and neck is red, hard, and brawny. Running across the neck and forehead are wide cracks, from which oozes a clear serous fluid, and sometimes bleeding, especially in cold weather. Eyelids at times very sore and inflamed. Ears are stiff, cracked, and oozing serum, which forms yellow scabs. The skin of the whole body is in an irritable condition, blotches and pimples abound, especially in bend of knees and elbows.

There is terrible itching when he goes to bed and gets warm, and the discharge runs like water from neck and head. He is constipated. Always has an empty, hungry feeling at 10 a.m.

He has been like this over a year, and most of the time has been under quack treatment. Altogether he presented a most pitiable appearance, and was in very low spirits. He had given up his employment, as printer, and spent most of his time moping over a fire. *Graphite* 30 was given first without result, then *Sulphur* 30x *ter die*, which was continued for four days and followed by a placebo. Improvement began at once, and continued about a fortnight. On the 28th of June it was necessary to repeat the *Sulphur* 30x.

During July he was given *Hepar Sulph.* in different dilutions (from 12x to 3x) and one prescription of *Merc.-sol.* 12x. The improvement continued with occasional relapses. *Hepar Sulph.* relieved the itching and removed the excessive sensitiveness to cold.

At the beginning of August he was given *Psorinum* 30x. This benefited him very much—the skin of the face, neck, and head became quite soft and healthy, only the back between the shoulders was bad—probably owing to difficulty of properly cleansing this part.

He was then kept for weeks on a placebo with *Psorinum* at intervals, and received his last dose of medicine, *Sulphur* 200, on September 24th.

The treatment was begun five months since. He has now been back at his work for two or more months, his skin is perfectly healthy, and he now has a very fair crop of hair. The only local treatment was the removal of all crusts and scabs with olive oil. No water to be used to the head, and warm water only to face and hands. *Calendula cerate* was applied to the fissures in the skin when they were bad. I found in this case that while *Hepar Sulph.* and *Sulphur* could be continued without ill-effect three or four times a day for a week or two at a time, if *Psorinum* were continued more than four days it brought on a marked aggravation, especially of the discharge, which he stated became of a very offensive odour. He was also very hungry during these aggravations. In other cases I have found that *Hepar Sulph.* requires frequent repetition.

A patient for whom I had ordered *Merc.-sol.* 30x the other day told me he had to leave it off, because his teeth

all felt loose, as if they would drop out after a few doses. He had had the same symptom when under allopathic treatment.

St. Kilda, Melbourne.
October, 1894.

REMARKS ON THE "MATERIA MEDICA."

CHAMOMILLA—CINCHONA.

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

CHAMOMILLA. Remarks—note the importance of mental and moral symptoms in such different complaints as infantile constipation, and asthma; the general conditions described so different, yet the same medicine *might* be called for, so following through with vertigo, headache, and the marked eye and ear symptoms, "accompanied by inclination to find fault and getting angry about trifles"—"an anxious cry" accompanies the stomach pain, and anxiety the abdominal symptoms; so in the menstrual symptoms "quarrelling." The chest symptoms recall vividly to my mind a case of bronchial catarrh in a gentleman of about 35, in which the marked mental and moral condition was an irritability evidently with the greatest difficulty suppressed to maintain civility, and in which, after several apparently indicated medicines had entirely failed, *Chamomilla* 200 in repeated doses produced in a few hours the most striking relief to everything, and in two or three days a cure. "The *scirrhus* hardness of the mammary glands" in these days of alarming increase of cancer is not to be overlooked, and again let it be reiterated that not only the saving of intense suffering, but the difference between life or death, may be brought about by adhering to a known truth and considering facts, and not names and hypothetical conjectures on the abstract nature of cancer cells or micro-organisms: *all these are material* however minute; the *disordered vital force* which preceded and gave rise to them is *immaterial*. The conditions of pains in the limbs are always of first importance, both for diagnosis of remedy, and because patients much more readily notice these, or can recall them when questioned, than describe the nature of the pain.

We come now to *Cinchona*, more commonly called *Quinine*, of which so much has been said that need not be here repeated, but this remark may be safely made, that Hahnemann having reached the knowledge he possessed of this drug in the peculiar way in which it is so well known he did reach it, and having proved it on himself as well as so many others, his observations on this drug have more than their usual interest. The first observation is that, next to *Opium*, there is no medicine which has been more abused to the detriment of mankind than *Cinchona*. It has not only been considered as harmless, but it has been employed as a specific against weakness, and has frequently been given for months, in large doses, several of which were taken every day.

If this were true when these words were written, how painfully has it been more than confirmed since, not only in malaria of all kinds and weakness of all kinds, as here mentioned (as though weakness were always of one sort), but how terribly in that scourge of modern days, "the influenza" *par excellence*; and in how many cases of attempted suicide since the prevalence of this epidemic has it not come out that the unfortunates had had that complaint previously, and had been treated *secundum artem*, that is, with most material doses, frequently repeated, of *Quinine*? I add here from the moral symptoms—intolerable anxiety, he jumps out of bed and wants to kill himself, and nevertheless dreads to approach the window or the knife, with heat of the body, no thirst. Distressing moaning and screaming. Anger increasing to the most violent wrath, he could have stabbed one. He prefers being left alone.

The opening remarks, it will not be surprising to hear, occupy about nine pages, and first comes the vital one that the generality of physicians have omitted to perceive that medicine is, by its object and nature, a science derived from and based upon experience, and they have substituted delusive conjectures, theoretic dogmatism and accidental opinions in the place of impartial observations, pure experiments, and the wisdom acquired by practice. His own first experiment with it, as a proving, he informs us was in the year 1790, and by this and other means; experiments and reasonings from facts, not speculations. Note, he "refuted the erroneous notion . . . of the harmlessness, innocent mildness, and universality of the curative powers of *Cinchona*." Then follow three propositions:—

1. *Cinchona* is one of the most powerful vegetable drugs (this, note, in opposition to harmlessness, what is known as a "pick-me-up" nowadays); one drop of the 12th potency is sufficient to cure the disease perfectly. He was led to this by experiment.

2. A small dose acts only a short while, scarcely a few days; a large dose for several weeks, unless the organism frees itself from the drug by vomiting, diarrhea, &c. This shows how foolish it is to take several large doses a day, as is the case in common practice. I would call the reader's attention to this second proposition, as it throws a flood of light on that most difficult question of distinguishing between drug symptoms and those of natural disease. Any drug frequently repeated, and especially in material doses, will soon produce its own symptoms, and thus complicate the inquiry as to which are medicinal and which disease symptoms; and it is plain that the fewer there are of the former the simpler will be the decision as to whether to pause, repeat, or change; so that on every ground it is wise to give as little as possible, inasmuch too as that the worst that can happen is that not so much good was done as might have been accomplished: there is no possibility in this course of actual harm.

3. If the homeopathic law be . . . a truth founded in nature that diseases can only be safely and permanently cured by remedies the pathogenetic symptoms of which are similar to those of the disease, we shall find in looking over the symptoms of *Cinchona* that this drug will cure only a *small number* (italics mine) of diseases. He then points out that almost all typical diseases and also all intermittent fevers may be suppressed by powerful doses of *Cinchona*, and proceeds to point out the vast and, for the sufferer, melancholy difference between suppression and cure, and further that this frequent repetition produces a chronic *Cinchona-cachexia*. Then in detail and his usual vigorous style he attacks the absurd practice of giving it for every form of weakness, and observes that, where indicated, it strengthens by removing the disease, for strength, he observes, cannot be infused as so much matter by a decoction of *Cinchona* or by wine; the forms calling for it being those kinds of weakness arising from loss of humours, hemorrhage, excessive blood-letting, excessive galactorrhœa, pyalism, loss of semen, excessive suppuration, and frequent diarrhea, in all of which he remarks,

the other symptoms generally correspond to the symptoms of *Cinchona*. Of course *adjuvantia* non-medicinal, as nourishing diet, free air, cheering social intercourse, &c., are also mentioned. Further uses are as follows. The primary effect is to open the bowels, hence it will cure certain kinds of diarrhea, provided the other symptoms correspond. In cases of humid gangrene on the outer parts, the frequent and morbid excitement of the sexual organs, resulting in an involuntary emission of semen—pain excited by merely moving the affected part, and which gradually rises to the most fearful height—some cases of suppuration of the lungs, especially when characterised by stitches in the chest increased or excited by pressure from without—certain forms of jaundice—certain forms of intermittent fever. One very practical observation is that bark will scarcely ever be found useful except when the nightly rest of the patient is disturbed similarly to the disturbance which characterises *Cinchona*. Next he strongly inveighs against the practice of substituting drugs in place of *Cinchona*, and reminds us in this connection that *Cinchona* differs from other medicinal substances not only by its bitter and astringent taste, and by its so-called aroma, but there resides in its whole inmost nature an invisible dynamic agent, which can never be separated as a material something from the body of the substance, and which distinguishes that substance from all others as respects their influence upon the human organism.

In a note occurs here the forcible remark, scarcely any physician, except Hippocrates, took down the symptoms of a disease, unmixed with the symptoms of drugs. Most other physicians, in their descriptions of cases, mix up natural and artificial symptoms. He further remarks, with quiet sarcasm, we might leave the fact of iron being in a great many prescriptions, and the patient being made to swallow a preparation looking very much like ink, unnoticed; but it behoves us to tell physicians that such a preparation possesses neither the virtue of *Cinchona* nor *Iron*. For the cachectic state produced by *Cinchona*, *Ipec.*, *Arn.*, and *Bell.* are advised, and for coldness of the body, with cold sweats, *Veratrum*.

Coming now to the detailed symptoms, besides those previously mentioned: he tosses about in the bed, beside himself and in despair; obstinate silence; *disobedience*, *want of docility*; *dissatisfaction*, *he thinks himself unhappy*

and imagines he is tormented and teased by everybody; excessive and anxious cautiousness; mood gloomy, has no desire to live; great anguish, death (brought on by Cinchona administered during the cold stage); not disposed to mental labour, drowsy. Vertigo, as from dancing; absorbed in thought, as if his ideas were arrested; slowness of thought; mistakes in writing and talking; headache, as if the brain were being pressed together from both sides and out of the forehead; vertigo, the head inclining to fall backwards; aching in the forehead, felt in both temples in an increased degree on bending the head backwards; pressing headache, increased in the open air; violently darting tearing in several parts of the head, increased when moving the head or walking about, decreased when lying down; contractive external pain in the left side of the occiput, sensation as if the skin were being drawn together at one point, is not increased by touching the parts; stitching pressure in the right frontal eminence, more violent when touching the parts. Eyes: smarting as from salt; black points hover before the sight; gum, painless pressure as from weariness and privation of sleep; dilatation of the pupils; amaurosis. Ears: redness of the cheeks and lobules; eruption in the concha; noise like the tick of a distant watch; tearing in the cartilage of the ear and the meatus auditorius externus. Nose: redness and heat; tearing in dorsum; imagines he smells a corpse; epistaxis between 6 and 7 a.m. several mornings in succession. Mouth, jaws, teeth: shrivelled skin of lips; lower lip cracks; vacillating teeth, only painful during mastication; jerking tearing in the upper and posterior molares of the left side; burning stitches on the surface of the tongue; coated yellow. Pharynx and esophagus: stinging in the right side of the throat, only when swallowing; stitches in the throat between the acts of deglutition, from a slight draught of air; stinging in the throat during an inspiration; painless swelling of the velum pendulum palati and of the uvula. Taste and appetite: taste bitter; all food tastes uncommonly salt and afterwards bitter; great desire for sour cherries; gastric eructation; sensation as if some of the food reached as high as the throat; when sitting down after a walk following a moderate meal, anguish and nausea as though overloaded with food, nevertheless hungry; weariness and laziness after a meal. Stomach: hard, long, lasting pressure after eating, whatsoever it be; sharp stitches in front under

the last ribs, uninfluenced either by inspiration or expiration. Abdomen: pressure, with cutting in the region of the spleen, as if the spleen were indurated; splenic stitches even when walking slowly; attacks of pressure in the region of the liver, passing off when bending the body forward, on touch painful as from subcutaneous ulceration; ascites; horrid colic; ulcers in the abdomen; chilliness with pressure in the abdomen; contractive pain disappearing already when rising from the chair, and still more when standing or walking; *dull-stitching pain in the region of the right kidney, more violent when bending the body*; emission of a quantity of flatulence, with drawing in abdomen during hard stool, which goes off with difficulty. *Stool:* knotty yellow, soft, bilious, papescent; diarrhea, stool in single fragments, looking as if mixed with undigested food; constipation, hard stool accumulates in the rectum for a long time; hemorrhage from the hemorrhoidal vein. *Urinary:* urine paler with cloudy sediment, scanty, yellowish-green, light-yellow, dark coloured with brick-dust sediment. *Genital:* copious and involuntary emission of semen at 9 a.m.; suppression of menses. *Cold, catarrh:* a few violent dry sneezings; coryza, nose runs for two hours. *Respiratory and Chest:* sensation of accumulation of mucus in larynx; hoarse, rough voice; asthma; *great oppression of chest in precordial region, as if something were digging it up all over*; arrest of breathing for half an hour; jactitation of muscles here and there; *a few violent stitches, close above the precordial region, when at rest, especially when reading*; sharp stitches in the thoracic cavity from within outward in the region of the sixth and seventh true ribs, uninfluenced by inspiration or expiration; continual desire to hawk up in the morning after rising, as if caused by the vapour of sulphur, not getting anything loose for several mornings. *Back:* stitches in the left side of the spine, when sitting; violent stitching, drawing pains in the middle of the os sacrum, towards the lumber vertebræ; drawing pain in the lower and right side of the neck, at the commencement of the nape, when standing, going off when stooping. *Upper extremities:* paralytic jerking tearing on the top of the shoulder, sensitively painful when touched, and when the pain has passed off it can be excited again by contact, it is excited even by the pressure of the coat upon the shoulder; when thus excited again it frequently becomes horrid and intolerable; paralytic pain

in the right upper arm, commencing at the head of the humerus, and terminating in the hand, in the shape of a fine and weak tearing; the rest of the body, especially the forehead, being warm; stitching lancinating, tearing and stitching drawing, which is sometimes increased to jerking tearing, appear to be characteristic pains of Cinchona. Lower extremities: a sort of stinging and burning simultaneously in different places of the lower limbs; painful drawing along the outer parts of the long bones of the lower limbs; pain in the hip joint, knees, and foot as if they were sprained or cut to pieces; drawing pain in the outer parts of the femora, as if the periosteum were being scraped with a dull knife; jerking tearing in the outer parts of the right and left thigh, towards the anterior and external parts, excited only by contact, not by motion; tearing, extending from the knee-joint into the thigh, accompanied by weakness, which makes walking and standing difficult; hard dark-red swelling on the calf, terminating in suppuration; swelling of the foot; stitching, tingling, extending from the big toe to the dorsum of the foot, as if the part had been frozen, in the evening when sitting, disappearing when walking or standing. General: pulling in the skin in some parts of the abdomen, as if a hair were being pulled at; jerking tearing in different parts of the limbs, especially of the hands and feet, aggravated by contact; stretching, drawing pain in almost all the bones, now in one, now in the other, causing an intense sensitiveness to pain, when lying down it abated for a few moments, but returned afterwards with so much more violence; erratic rheumatism, now in one, now in another part, without swelling or fever, alternately with pains in the internal body (after using the drug for a long time); consumption; cachexia; hectic fevers; dropsy, anasarca; swelling of the limbs; erysipelatous swelling of the whole body; yellowish colour of the skin; jaundice. Weakness-fits: feeling of weakness, especially on rising from a seat, he sometimes falls back unless he stretches the muscles; violent swoon in a robust man from a 16-grain dose; asphyxia, apparent death; now weakness, now feeling of great strength in the joints (alternate effects in a healthy person); tremor in all the limbs, invisible, but perceptible, and accompanied by a sensation of coolness.

THE HOMEOPATHIC MEDICAL SCHOOLS OF THE UNITED STATES.

By ED. ALFRED HEATH, M.D., F.L.S., &c.

THE HERING MEDICAL COLLEGE AND HOSPITAL, CHICAGO.

"If our school ever gives up the strict inductive method of Hahnemann we are lost, and deserve only to be mentioned as a caricature in the history of medicine."—CONSTANTINE HERING.

WHEN I finished my papers in the HOMEOPATHIC WORLD on the Homeopathic Medical Schools of the United States in 1892, "The Hering Medical College" had only just come into existence. The idea of founding a college to teach exclusively the *Homeopathy of Hahnemann* was a grand one, as also was the naming of such a school the "Hering College," in compliment to, and acknowledgment of, the greatest homeopath America has ever seen. Hering stands second only to Hahnemann himself. He taught and practised pure homeopathy, and he has been called the Father of Homeopathy in America. His name is known all over the civilised world, and will live for ever. The success already achieved by the Hering College is a proof that the inductive method of Hahnemann is not likely to be given up.

The Hering College was founded and is conducted by men of the same beliefs, the same desires, the same aims, and the same practice as Hering, for the purpose of teaching and practising absolutely what Hahnemann taught in his *Organon*, the truth of which has been amply proved by experience. If those who sneer at this great work would but read it carefully *through* and practise according to its teaching, they would speedily be convinced of its truth.

The faculty of Hering College is acknowledged by outsiders to be composed of the ablest physicians in the West, men and women of tried and proved skill in their various departments—those who have for many years been foremost in the profession as *healers* of the sick and suffering; some of whom I shall presently mention by name; I should like to mention all, but it would be departing from the plan I have adopted with the other American schools. In my previous papers I have said the American homeopathic schools, taking general subjects only, are as good as our own. The homeopathic schools, besides teaching everything connected with the human frame, teach (thanks to

Hahnemann) *how to cure the sick*: the allopathic schools teach everything about the human frame, the cause and nature of disease, but having no law to guide them *cannot tell their students how to cure the sick*. The consequence is they graduate and go into practice absolutely without a guide, groping in the dark, trying every new thing, and failing so often that it is a common thing to hear them say they give little or no medicine, but *trust to nature*—in fact, doing what they say the homeopath does. Imitation is the sincerest flattery.

If the homeopathy of Hahnemann alone were taught in all its purity and simplicity by all the homeopathic schools as it is by the Hering College, we should soon have such success that the old allopathic system, if we can call such chaos a system, would soon be a thing of the past.

The principles of the Hering College will be found in, as I have already said, the Hahnemann *Organon*; they do not consist in the theory of potency high or low, *but in the manner of selecting the remedy*. Hahnemann made his wonderful record for homeopathy in the treatment of both acute and chronic diseases with remedies varying from drop doses of the tincture to the 30th potency and his true followers do the same. The student, taught how to select the remedy and how to apply it, has no need to alternate or palliate. In this field, so far from being crowded, the Hering Medical College stands alone.

The Hering College is most delightfully situated, being in the very heart of Hyde Park, and close to the grounds of the late "World's Fair"; it is in the immediate neighbourhood of half a million of people, and is of easy access from all parts of Chicago. The school is now in its *third* year of existence, and its success has been wonderful. Last year the students were 69, this year there are ~~75~~. *100. (errata)*

The college admits students of both sexes, and a new feature also in this school is that there are several eminent lady physicians belonging to the faculty, who lecture on gynecology, obstetrics, physiology, anatomy, &c.; this is a good feature in a school where there are lady students.

The course of study embraces, up to the end of the session 1894-95, four years of work, in accordance with the standard laid down by the "American Institute of Homeopathy" and the "International Hahnemannian Association." The first year was allowed to be taken with a *medical* preceptor, a doctor of medicine, during which time the student

was expected to read the following works: The *Organon* of Hahnemann, Dunham's *Science of Therapeutics*, Norris or Gray's *Anatomy*, Kirk's *Physiology*, fourteen chapters, Avery's *Physics*, Huxley and Martin's *Practical Biology*, Hooker's *Chemistry*, Swinton's word analysis, *Latin Grammar and Reader*.

Next year, 1895-96, the college will have a *compulsory course of four years at the school*; this, with the preliminary year required, will bring it up to the standard in force in the English schools, and it is to be hoped that the narrow-mindedness in some quarters, that we have seen so much of in England lately, will disappear. There is one thing that the United States allow that shames us. English doctors are allowed to practise there without opposition, but here everything is done to annoy American physicians if they do so; although the law is not against them, they have rights that they are slow to claim.

The classes in Hering College are known as the Freshmen, the Junior, and the Senior. The *first* year at the school embraces anatomy and dissections, physiology (except brain and nervous system), histology and microscopy, sanitary science and hygiene, chemistry, including medical, general, and toxicological; *materia medica*, and the *Organon*. At the close of the year examinations are held in all subjects, which are final for the ground covered.

The *second* year, or junior class, embraces anatomy with dissections, physiology of the brain and nervous system, and mental physiology, principles of surgery and minor surgery, general pathology, *materia medica* and *Organon*, theory and practice of medicine, obstetrics, medical jurisprudence, and uro-analysis. At the end of the year final examinations will be held for the ground covered except in *Organon*, *materia medica*, and theory and practice.

The *third* year will embrace *materia medica* and the *Organon*, operative surgery and surgical therapeutics, theory and practice, obstetrics, diseases of women, ophthalmology, otology, and laryngology, physical diagnosis and pedology. At the close of this year final examinations will take place in all the subjects not previously passed, and the degree of Doctor of Medicine will be conferred on all successful candidates.

The Hering College is possessed of one of the best hospital buildings in Chicago, erected with special

reference to hospital purposes, complete in every detail; it is in immediate connection with the college. Hering College is also directly connected with the practical work of the National Temperance Hospital under the joint control of the college faculty and the Hospital Board of the National Women's Christian Temperance Union; this management ensures enlarged hospital facilities. The N.W.C.T.U. hospital is one whose management in all that pertains to nursing, hygiene, medicine, and surgery, can challenge the world. Students have free access to all the wards, and in the senior year will have personal experience at the operating table and at the bedside in connection with the surgical work of Professor J. R. Boynton.

To elucidate the principles of the *Organon* and to confirm the student in his faith in the truth of *similia similibus curantur*, the college has established and opened the Hyde Park Free Dispensary, where sick people may receive treatment every day in the year.

This great and growing section of Chicago furnishes an increasing supply of material, and cases illustrating every department of the healing art are abundant.

The dean of this fine medical school is Professor H. C. Allen, M.D., Professor of Materia Medica and the *Organon*. Professor Allen is himself a kind of second Hering, a man of wide knowledge in medicine, a homeopath of the homeopaths, one whose acquaintance with the materia medica is profound. In his "gift" of the application of the "law of similars" has few if any superiors; with him as its head, Hering College holds an unique position as a school of pure Hahnemannian homeopathy. In spite of a large practice, Professor Allen contrives to be the soul of the school.

Professor W. J. Hawkes, M.D., also holds a chair in materia medica. He is a teacher of twenty years' experience, and one of the best prescribers in the school. His little book, *Characteristic Indications of Prominent Remedies*, is one of the most useful and reliable works published. I have often verified conditions therein contained. I once had the pleasure of hearing him lecture to a class in Chicago. He is a delightful lecturer, and the answers of the class shewed how well they were trained.

Professor T. S. Hoyne, M.D., has been Professor of Materia Medica, Skin, and Venereal Diseases for over twenty years. He is the author of Hoyne's *Clinical*

Therapeutics—a volume of 650 pages ; also *Hoyne's Venereal and Urinary Diseases*. He is a man of large experience.

Professor J. B. S. King, M.D., is Professor of Chemistry and Toxicology and Diseases of the Kidneys. He is an able chemist, a brilliant writer, as well as a very successful teacher.

Professor J. A. Tomhagen, M.D., occupies the chair of mental and nervous diseases, and clinical medicine. He is a very able teacher, and one of the best-reputed prescribers and physicians in America. His clinical lectures are always crowded.

Professor J. R. Boynton, M.D., is Professor of Operative Gynecology. He is an able surgeon and a most successful teacher, and one of the best operators in the West. He is a very busy man ; but he writes very little, leaving that for others to do.

Professor L. A. L. Day, M.D., is Professor of Ophthalmology, Otology, and Laryngology. He is a skilled operator in surgical diseases of the eye, ear, &c., and a notable prescriber. He is a man of large practice, and is the treasurer of the school.

Next I must name Professor C. E. Fisher, M.D., the talented editor of *The Medical Century*—a journal which in the short space of two years has established a reputation all over the world as one of the ablest of our journals. Professor Fisher is also the President-elect of the American Institute of Homeopathy. He is professor of operative surgery, and he is a skilled operator in general surgery as well as in gynecological surgery.

The Registrar of Hering College is Professor C. W. Day, M.D., 3,255, Prairie Avenue. Dr. Day occupies the chair of Hygiene.

CLINICAL CASES.

By HARI DAYAL CHAKRAVARTI.

1. NEPHRITIC COLIC.

A LADY aged 30 had been suffering from severe pain in the kidneys, attended with fever, for seven weeks. She was from the beginning under the treatment of two renowned allopathic doctors of the town. The pain originated in the kidney and shifted up to the splenic region and remained there. The doctors erroneously diagnosed it to be splenic pain, and naturally their efforts to check the fever and to alleviate the pain were useless. The temperature was persistent and so was the pain. The patient was reduced to skin and bone, and the doctors gave up hopes of recovery on the forty-fifth day. One of my friends advised the household to have the case put under me, and, accordingly, I was sent for in the evening. This was on July 21st last. I made a thorough investigation of the patient, and at last came to the conclusion that the source of pain must be the kidney. I at once gave her *Magnes. Phos.* 4x and *Kali Sulph.* 4x, four powders each, to be taken alternately every half-hour. Next morning, to my great satisfaction, the patient was quite free from the pain. I then administered *Ferr. Phos.* 6x and *Kali Sulph.* 6 alternately, every two hours. Next morning she was free from the fever, and she had no other complaint. The household and the neighbours were quite surprised to see the wonderful action of the homeopathic remedies which gave life to the "dead."

2. CASE OF MENORRHAGIA.

A lady aged 35, a mother of five children, had been suffering from menorrhagia since August, 1893. Her periods were prolonged and of too frequent occurrence. She took nothing in the way of medicine till 1894. She had now immoderate flow of blood accompanied with pain in the head, abdomen, and back. Blood was dark and offensive. She was treated by a Kalivraj (ayurvedic physician) for three months without any benefit, then by an allopathic doctor for three months. In July last she had flow so abundant as to cause fears of death, when I was sent for. I saw the patient in a very fearful condition, the discharge was profuse and the poor woman was fainting.

I lost no time in administering *Ham.* 1x and *Crocus* 1x alternately, every ten minutes, and *China* 3 as an intermediate remedy. After an hour I saw the benefit was but partial, when I gave *Crotalus* 5 every ten minutes, and, to the greatest surprise of all attending the patient, the flow stopped in less than half an hour. I am glad to report that the patient was free from such troubles during her August and September periods.

3. CASE OF DYSMENORRHEA.

A young lady aged 24 had been troubled every month since her puberty with severe pains in the uterus, back, and loins, beginning several hours previous and continuing during the first two days of period, and these so severe sometimes that they seemed almost unbearable. On the second day of flow she had hysteric fits. On the third day, when a membrane was discharged, the patient was free from pain and she had a flow for six to seven days every month. Her husband, finding no chance of her bearing children, made up his mind to take a second wife. Her mother-in-law came to me and stated the facts. I reassured her, saying that it was the dysmenorrhea which was the obstruction in the way of conception. As soon as it was removed she was sure to conceive. In December last, when she had this pain, I was sent for. I saw the lady almost mad with pain. I gave her *Magnes. Phos.* 4x every ten minutes, and in an hour the pain ceased and flow began. I gave her five doses of the remedy, to be taken twice a day for three days. Next month I advised her to take medicine three times a day, beginning a day before period, and on the first day of period to take every three hours. She had but very slight pain this time. The same process was repeated the third month, when she had no pain at all, the flow was normal and remained till fourth day, and since she had no return of pains. I am glad to report that she is now pregnant five months. I have relieved three or four cases of dysmenorrhea with *Caulophyllum* and *Borax*, but they were not so prompt in action as *Magnes. Phos.* This is no doubt a grand remedy for all sorts of spasmodic pains.

4. CURE OF PARALYSIS.

A man aged 45, when getting out of his bed one rainy

day in June last had an attack of vertigo. All of a sudden his head turned round and he fell down. Immediately after his limbs began to tremble. All objects around him seemed turning like a wheel. His hands, legs, and left half of his mouth became paralysed. He could not speak a single word without stammering. He was placed under the treatment of a well-reputed ayurvedic physician for upwards a month, during which he got no relief. He was then under allopathic treatment for three weeks without any benefit. I was then sent for. I gave him *Magnes. Phos.* 4x and *Kali Phos.* 4x alternately every two hours for two days. On the third day he was free from the trembling of limbs. I repeated the medicines, and after another few days I saw the case had improved much more. The same medicines repeated, and on the tenth day I was exceedingly glad to hear that the patient could walk slowly with the help of a stick. In three weeks the man was entirely cured. I was at a loss to understand how a paralysis was cured in so short a time. I never heard of such a prompt cure.

12, Kripanath's Lane, Soba Bazar Street, Calcutta.

HERBAL DRUGGING.

By FREDERICK KOPP, Greenwich, N.S.W.

It is usually the custom amongst herbalists to condemn the drugging system of allopathy, and to hold up to ridicule the infinitesimal dose of homeopathy. Both systems they denounce for including mineral drugs in their *materia medica*. Their own system, of course, is *par excellence*, and is the only true and natural way of treating disease, and so they raise the cry for curing every ill under the sun to which the human body is heir with *Nature's remedies*. It is my intention here to briefly dwell on some of the followers of this so-called system of herbal medicine. While doing so I shall dwell mainly on the statements of those who call themselves either herbalists, medical herbists, or botanic physicians.

In the first place, they condemn the use of *mineral* drugs in the practice of medicine, totally forgetting, while doing so, that the human body itself is naturally largely composed of *mineral* constituents; totally oblivious of the fact that in disease these elements often become deficient in either

quantity or quality. "I have never known a mineral drug yet to act better, or even as well as my herb medicines!" remarked a well-known Sydney herbalist to me lately, when I spoke to him of the advisability of using minerals in medicine. His answer may have been true enough, for the simple reason that he never used one, and therefore was ignorant of its result or value. To deny that a drug, because it is mineral, is not beneficial in disease, is to deny also the brilliant cures that we, as homeopaths, have made in the cases of obstinate, and even dangerous diseases, where the life of the patient hung, as it were, in the balance. I would ask the herbalists the following questions:—Can they show such glorious results with their "herb medicine" in periodic neuralgia or influenza as we can with *Arsenicum Album*? or of that drug in the more violent forms of cholera? Can they produce a more effectual and certain remedy in the cure of dysentery than *Murcurius Corrosivus*? Are they blind to, or ignorant of, the beneficial results of *Hepar Sulphuris* in inflammatory affections of the wind-pipe and air-passages, in the treatment of abscesses and tumours, and in scrofulous enlarged glands discharging matter? Have they never known, as I have times without number, of the priceless value of *Antimonium Tartaricum* and *Kali Bichromicum* in the treatment of bronchitis? Is their treatment of cataract as effectual as ours is with *Silicea* and *Calcarea Carbonica*? Are their remedies as efficient as *Sulphur* in the treatment and prevention of boils? In the treatment of aphthæ have they a better remedy than *Borax*? In cramps and convulsive movements than *Cuprum Metallicum* or *Aceticum*? But why go further? These remedies, and many others belonging to the mineral kingdom, have long ago been proved to be priceless and non-injurious in their after effects. Of course I am alluding only to their use in homeopathic practice, in strict accordance with the law of similars. To the allopathic mode of prescribing them I am just as strongly opposed as the most ardent herbalist.

And now, as to the herbalist's condemnation of allopathic drugging. Verily, "those who live in glass houses should not throw stones!" Herbalists seldom give one single remedy at a time, but, like their allopathic brethren, go in for compounding drugs with a vengeance. The following botanic description will more fully illustrate my meaning:—

COMPOSITION (*Powder*).

- 2 lb. Bayberry Root Bark.
- 1 lb. inner bark of Hemlock.
- 1 lb. Ginger.
- 2 ozs. Cayenne.
- 2 ozs. Cloves.

All powdered fine, sifted through a sieve, and *well mixed together*. Dose one teaspoonful.

This preparation is extensively used by them in diarrhea, dysentery, pains in the stomach and bowels, and for all obstructions caused by cold.

Another is :—

- Skunk cabbage ʒjv.
- Horehound ʒji.
- Wake-robin ʒj.
- Lobelia inflata ʒj.
- Cayenne ʒj.
- Bayberry root ʒj.
- Bitter root ʒj.
- Nerve powder (valerian root) ʒj.

All made fine, and *well mixed together*. Dose half a teaspoonful.

This preparation is used in coughs, such as those for which we would prescribe *Bryonia Alba* and *Phosphorus* alternately. This certainly is mixing drugs with a vengeance, and has about it too much of the "many-bullets-one-bound-to-hit" theory, so precious to allopaths, to please us. Such a composition of drugs as the above ought to be enough to make an allopath turn green with envy. The only substances omitted in the above prescriptions are mineral drugs, and, as I have seen many prescriptions of the old school of medicine, in which these were also absent, I, for one, cannot well see, after all is said and done, that there is a very great difference between the allopathic and the herbal systems of treating diseases.

As a Sydney homeopathic physician once remarked to me, "Herbal treatment is *double-allopathy!*" and I do not think he was far out of his latitude when he made use of that expression. Homeopathic medical men have always strongly advised all patients, and more especially those under their treatment, to abstain from all *herb-tea*. The

reason is obvious. The injurious effects of some of these decoctions on the human system, even when made from one herb only, have been witnessed times without number. Even should there be a homeopathic relation between the drug administered and the disease itself, there is, to say the least of it, no need for overdosing; or, on the other side, allopathic-like inducing a drug-disease. Decoctions prepared from *Lobelia inflata*, *Phytolacca decandra*, *Sanguinaria Canadensis*, *Urtica urens*, *Tanacetum vulgare*, and such like, have often been known to produce not only unpleasant, but also dangerous symptoms. In curing a disease there is no need or reason that the patient should also be compelled to prove the drug at the same time. Such a luxury is reserved for the healthy. It is a well-known fact that a goodly number of the drugs now in our materia medica were first brought under our notice by the drug-symptoms produced by them during their administration according to the "heroic" treatment indulged in by both the allopathic and herbal schools. Such a state of things may be very interesting to the student of medicine, but to the patient himself it is truly a case of *aegrescit medendo!*

The same well-known Sydney herbalist to whom I have alluded above was loud in his praise of the *botanic* system of medicine. "The homeopathic system," said he, "is confined to but two or three drugs, such as *Aconitum*, *Belladonna*, *Bryonia*, and *Nux Vomica*; with these they pretend to cure every disease that comes under their notice. If a member of them makes use of some other drug it is at once said, 'Oh, he must be uncommonly clever!'" Now, this herbal friend of mine must either be labouring very much under a delusion, or else be totally ignorant of what he is talking about. Or, on the other hand, he must be guilty of prevarication. We might just as well ourselves assert that the herbist's system of medicine is confined to the use of skunk cabbage, devil's bit, yellow dock, and malic acid. Our remedies are by no means confined to *Aconite*, *Belladonna*, *Bryonia*, and *Nux Vomica*. One glance at our materia medica would most quickly convince him of that. Instead of finding there *two* or *three* solitary remedies, he would be confronted with hundreds—enough, indeed, to paralyse him with astonishment. Then, again, because such remedies as *Aconitum* and *Nux Vomica* are what are commonly termed *polycrests*, or many-

healing, and are medicines possessing curative powers in a large number of diseases, there is no reason whatever why the homeopath should not make use of them as often as he desires, always provided that they are strictly homeopathically related to the symptoms for which they are prescribed. It is also an undisputed fact that a large number of other drugs belonging to the *materia medica* of the homeopathic school are daily made use of in the prescriptions of our physicians throughout the world, so that there is not the slightest truth in the accusation that our treatment of disease is confined to but two or three remedies.

"Homeopathic medicine is of too weak a character to be of use in serious diseases!" remarked the herbalist. This very allopathic-like expression we have often heard before from the old school, and is hardly worth while contradicting, as our brilliant results in such *serious diseases* as cholera, pneumonia, enteric and scarlet fevers, small-pox, rheumatic and typhus fevers, cancer, croup, bronchitis, pleurisy, phthisis, hepatitis, infantile convulsions, diphtheria, quinsy, pertussis, &c., &c., with our *weak* remedies are as clear as the noonday sun. But, then, *cæca est invidia*, and therefore such a remark is to be taken for what it is worth.

Now, listen to what followed in this very interesting conversation. After making the above not very flattering remarks as to our system of treatment, I was somewhat surprised that, about five or six minutes afterwards, he should consent to impart to me the following information:—"I sometimes in my practice employ *homeopathic* medicines. At present I have a case in hand of a lady, who is *too weak to take strong drugs*, so I have been forced to use HOMEOPATHIC MEDICINES, and, I am happy to state that *she is getting on nicely!*" *Veritas vincit!* What a remarkable assertion for a herbalist to make, especially after condemning homeopathy! A case has come into his hands where he knows the patient is too weak to stand the strain of "heroic" treatment. What does he do? Does he give her some of his herbal decoctions or compositions of various herbs? No! He falls back on *homeopathic* treatment. Under any other treatment the patient would have succumbed. But what is the result under homeopathy? Using his own words, "*she is getting on nicely!*" So, after all his boasting of botanic treatment, homeopathy alone can accomplish what his whole shopful of herbs is

incapable of doing. The *weak* medicine, it seems, is very handy sometimes to fall back upon, when the strong one either fails, or is too risky. It is also a very peculiar thing that herbalists are in the habit of recommending their patients to get the *homeopathic* tincture of *Arnica* for bruises, and the *homeopathic* tincture of *Cantharides* for scalds and burns, "which may be obtained," they say, "from any *homeopathic* chemist."

As I remarked before, I do not believe in administering to patients strong decoctions of herbs. As a homeopath, I hold that to cure a disease there is no need of introducing drug-symptoms into the human system. As a proof of this assertion, the small dose of our school has often effectually accomplished what strong decoctions have failed to do. It is all very well and good for the prover in drugs to overdose himself, so that he may become familiar with the symptoms developed thereby. But the sick patient is not interested in the proving of the drugs that he is asked to swallow, upon himself, and would prefer some milder way of bringing about his restoration to health. Then, again, the body in disease is more susceptible to drug action than it is in a state of health, and it is an unwise policy to upset the whole system for the sake of attempting to cure one diseased portion of it—a state of things never allowed in homeopathic practice.

The use of pills (often of a purgative nature, or composed of strong or astringent extracts) by herbalists, as well as such purgatives as castor oil, senna tea, colocynth, manna, aloes, &c., &c., is also to be condemned as positively injurious, and savours strongly of the old school of treatment. The injury done by such powerful drugs to the human system is incalculable, and they cause just as much mischief as do the mineral drugs (allopathic) of which herbalists seem to have such a great dread. Strong tinctures and powders also of various drugs, either simple or compounded, taken in half, and even teaspoonful doses (I have heard of herbalists ordering their patients to take teaspoonful doses of cayenne pepper), are far too overpowering, and therefore cannot be beneficial. Even should a drug be homeopathically related, there is no need of using such large doses, when a minute dose would suffice. From the formidable array of strong doses, it is refreshing to turn to the simple and uncomplicated remedies of homeopathy, which are pleasant to take, prompt and effectual in their

action, and, what is a great and most important factor in the treatment of disease, non-injurious, as, there being no drugging, there are, therefore, no after-effects produced by the medicines.

In conclusion, I claim that all cures, by whatever school, are made by the law of *similia*. Every cure made is a homeopathic cure, whether accomplished by a crude drug, or by a high potency of that drug. Herbalists, I admit, have been successful in the cure of disease in some cases—no doubt where the old school treatment has failed. But here again I claim that all such cures could only have been made in such cases where, either by accident or by design, the drug was homeopathically related to the disease for which it was prescribed. The superiority of the homeopathic treatment over every other is self-evident. We, as homeopaths, can show greater results in the curative power of our remedies, and a far lower mortality than that of any other system. Should the question be asked, "Why?" I reply, "Because homeopathy is built on a solid foundation, and, as the only true and scientific system for the treatment of disease is found in the law of similars, that 'likes should be treated by likes,' it but naturally follows that the homeopathic system is the only true one, and, therefore, the most successful." Homeopathy is genuine. It has nothing to conceal, but, on the contrary, invites the fullest and most exhaustive investigation as to the truth of its statements and its power to overcome disease by simple and safe methods, without endangering the life of its patients. It has outlived all the opposition hurled against it for nearly a century; in fact, opposition to its principles has but caused it to become more deeply rooted and to increase its resources. It appeals to facts, to victories won over disease, and to the common sense of the people. It is the one and only natural system for scientifically combating with disease, and, therefore, its ultimate triumph is but a matter of time.

[At the same time there are many herbalists who have an intimate knowledge of the properties of single drugs; and homeopathy is indebted to the "Old Herbals" for many valuable hints. Homeopathic provings have developed and individualised many remedies that were imperfectly known to herbalists before.—ED. H. W.]

MATERIA MEDICA.

CARBOLIC ACID: A POSSIBLE KEY-NOTE.

By ROBERT T. COOPER, A.M., M.D., Phys. Diseases of Ear, London
Homeopathic Hospital.

THE symptoms that arise immediately upon poisoning by large quantities of corrosive substances are of very little use as indications for homeopathic administration, and it is even doubtful how far the resulting dyscrasia can be looked upon as the true picture of the dynamic action of the hurtful substance. Admitting that doubt exists, it is none the less important that such cases should be reported, for the verification of the genuineness of the symptoms must be left to the test of bedside experience.

A woman of 49, whose change of life had taken place sixteen months, came to me at the London Homeopathic Hospital last March with this statement:—Was poisoned by swallowing a *Carbolic Acid* gargle fourteen years ago, and has never been well since; for nine years was treated at a homeopathic dispensary, and subsequently, when her ear became affected, at Westminster Hospital. Four years ago deafness set in on right side with otorrhea; after this became bronchitic and contracted influenza, during which she suffered much from metrorrhagia. The right ear has been paining her very much the last week, after having discharged a good deal; then the discharge ceased, but is evidently coming on again. The right membrane is perforated.

What I look upon as a very important statement of hers is that *any hard exercise, even much walking, brings on abscesses in some part or other, but generally in the right ear.*

Also, if she carries any weight, she gets pains in the bones of the nape of the neck and in the back and round the waist, and is obliged to go to bed and have the parts poulticed. She takes cold on exposure to the slightest draught of air.

Carbolic Acid I have known to affect the ear, and to bring on ear-ache when used as snuff in the 3rd decl. trit., and I have also known it act curatively upon the otorrheas of pale children in both high and low dilution; so that when ear complication is found in a patient who dates her ill-health to *Carbolic Acid* poisoning, it is, to say the least, noteworthy.

Especially ought we to attend to her statement that walking or hard exercises bring on abscesses, for it is very usual, particularly after long railway journeys, for delicate ears to be affected with acute abscess, or to start discharging, if so inclined.

I need hardly add that previously quiescent hepatic abscesses of the liver and other viscera are very liable to start into activity after physical fatigue.

The general state of this patient, it may be interesting to state, was greatly benefited by *Camph. bromid.* 3rd decl. trit., 5 grains to go over a fortnight. This I gave from her having had influenza, as I have found it of great use when influenza leaves behind much debility, with an ever-changing and ever-varying mental and physical condition.

30A, George Street, Hanover Square, W.

REVIEWS.

HAHNEMANN'S THERAPEUTIC HINTS.*

THE appearance of a new work bearing the names of Hahnemann and Dudgeon on its title-page is an event which must command the attention of homeopathsists all over the world. The *Therapeutic Hints* is a compilation from a number of Hahnemann's writings by the writer of all others who is most competent to make it—for one good reason among others, because he has himself translated the greater part of them into English. But Dr. Dudgeon is also a past master in arrangement, and the material will be found without the smallest difficulty, so perfectly and minutely is the Schema arrangement adhered to.

It is very possible that those homeopathsists who object to symptoms which have been observed in patients may not altogether approve of the work; but we have no doubt it will be found to stand the test of experience. We recently had an interesting opportunity of applying a test. On the occasion of his recent stay in London, Dr. Samuel Van den Bergh mentioned to some of his *confrères* a case of his father's. The patient (a boy) had some bladder difficulty

* *Hahnemann's Therapeutic Hints.* Collected and Arranged by R. E. Dudgeon, M.D. London: F. Gould and Son, 57, Moorgate Street, E.C. 1894. pp. 60, price 2s. 6d.

which had not yielded to remedies apparently strongly indicated, when the boy's mother happened to mention the very great difficulty she had in preventing him from eating sugar. He would steal it whenever he could, and always wanted to be eating it. Dr. Van den Berghe, senior, gave *Am. Carb.*, and promptly cured the case.

Looking up in Allen's *Cyclopædia*, the writer failed to find this symptom mentioned. Turning to *Therapeutic Hints*, under the heading APPETITE, we find "*Craving for sugar—Am.-C. Kali C.* It was a clinical observation of Hahnemann's—and a very valuable one—plainly a characteristic one, if not exactly a key-note."

Dr. Dudgeon gives in his Introduction an account of each of the five cases of Hahnemann's that have been put on record.

We can fully endorse the conclusive remarks of the Introduction. Dr. Dudgeon says:—

"I believe the practitioner will find this little work of immense use in helping him to the selection of the appropriate remedy. All the recorded symptoms being derived from the extensive experience of the greatest therapist of this and all other times, cannot indeed be regarded as 'key-notes' to the remedial virtues of the medicines, but certainly as valuable hints to the practitioner in the selection of the remedy."

We are not going to say anything more about the work except just this—that every homeopathic practitioner who makes any pretence to accurate prescribing should purchase a copy without delay.

A HOMEOPATHIC FLORA.*

NEARLY thirty years ago a work purporting to be a "Description of the plants received into the homeopathic pharmacopœia," by Dr. H. Goullon, was published by Baensch. It was reviewed in vol. 25 of *The British Journal of Homeopathy*, and it was shown to be founded on an allopathic work published by the same firm. The original work contained three hundred coloured plates of plants, many of which were quite unknown to homeopathy. Dr. Goullon's task was to utilise all these plates for homeopathic purposes, but as only a small proportion of the

* *Die Pflanzen der Homöopathischen Arzneischatzes*; bearbeitet medicinisch von Dr. A. von Villers; botanisch von F. von Thümen, vol. i., text. Wilhelm Baensch, Dresden.

plants portrayed could be considered as appertaining to the homeopathic materia medica, he could say nothing homeopathic respecting the greater number. On the other hand, many of the best-known plants used in homeopathy were not represented in the plates. The work was accordingly very disappointing, on account both of what it contained and what it omitted.

The present work is a great improvement on that edited by Dr. Goullon, for although there are still a good many plates belonging to the old work which have little or no claim to be included in the homeopathic materia medica, on the other hand many of the plants familiar to homeopathy which were not represented in the first work are to found in the present work. We have not yet received the second part of the work containing the plates, but the first part contains a picture of *Aconite*, which is the same as that in the original work. It is not our *Aconitum napellus*, but the *A. stoerkianum*, which is generally held to be a cultivated variety of the *A. napellus*, and which probably possesses similar medicinal properties; but it would have been more satisfactory to have had a representation of the exact species with which we are familiar, for a good picture of which we must go to the admirable work of our own Hamilton.

That a good many of the plates in the original work have been omitted from this one is evident, as the latter contains only two hundred altogether, against the three hundred of the former. But a good many more might have been excluded without injury to the work. Thus it is rather superfluous to have plates of *Aloe arborescens* and *vulgaris* when *socotrina* is the only one used in homeopathy. The following also, as not proved or not used in homeopathic practice, might have been omitted without detriment to the work: *Artemesia glomerata*, *abrotanum*, *absinthum* and *vulgaris*, *Cacao sativum*, which we use as food, not as a medicine, *Cassia acutifolia*, *lanceolata*, *obtusata* and *ferula*, considering that the only claim one of them has to be included in the work is founded on a slight mention of it in the *Organon*, *Cocculus palmatus*, *Convolvulus scammonia*, *Chenopodium ambrosioides*, *Feniculum officinale*, *Fragaria vesca*, *Rhamnus frangula*, *Githago segetum*, *Gossypium herbaceum*, *Lipusa multiflora*, *Mentha crispata*, *Ocimum basilicum*, *Ononis spinosa*, *Origanum creticum* and *vulgare*, *Oxalis acetosella* (admitted for the singular reason that there is a proving of oxalic acid, and that this plant contains some oxalic acid), *Pimpinella saxifraga*, *Piper longum* and *nigrum*, *Peptopus officinalis*, *Polypodium vulgare*, *Pyrethrum parthenium*, *Rhus coriaria*, *Ricinus communis*, *Rosmarinus officinalis*, *Rumex obtusifolius* (unknown to homeopathy, while *R. crispus* is unrepresented), *Sassafras officinale*, *Smilax medica* and *sylvestris*, *Teucrium scordium*, *Tussilago farfara*, *Ulmus campestris* and *effusa*, *Verbascum phlomoides*,

Vitis vinifera (admitted because various alcoholic liquors are manufactured from it, though alcohol cannot be considered as a homeopathic remedy). There was certainly no need for including the above medicinal plants in a homeopathic work, as they are all either unproved or so imperfectly proved as to be utterly useless to the homeopathic practitioner. The only apparent reason for their admission is that the plates were there, and it was a pity not to employ them, though their presence in such a work is undesirable and confusing. (Besides these there are descriptions, without plates, of many plants quite unknown in homeopathic practice, which only encumber the work.)* But on the other hand, a large number of new plates of much-employed homeopathic remedies have been added, thereby rendering it much more valuable to the homeopathic practitioner than was the previous work by Goullon. Thus we observe that there are pictorial representations of *Baptisia*, *Caladium*, *Cimicifuga*, *Cicuta virosa*, *Staph. agria*, *Grindelia squarrosa*, *Dioscorea*, *Euphrasia*, *Gelsemium*, *Hamamelis*, *Helleborus viridis*, *Hydrastis*, *Ignatia*, *Iris versicolor*, *Kalmia*, *Lilium tigrinum*, *Menyanthes trifol.*, *Mercurialis*, *Phytolacca*, *Podophyllum*, *Ranunculus bulbosus* and *sceleratus*, *Sanguinaria canadensis*, *Spigelia*, *Symphitum*, *Thuja*, *Urtica*, *Veratrum viride*, *Viburnum opulus* and *prunifolium*, none of which are to be found in Goullon's work.

In Goullon's work the plants were arranged in the order of their botanical genera and species. In this work a strictly alphabetical arrangement has been adopted, which we think is the better plan for such a work. But we are not quite satisfied with the nomenclature adopted by the authors. We think the accustomed homeopathic names of the medicines should have been adopted for the alphabetical order, but in place of that the names given to the plants by the latest caprice of botanical pedantry have been preferred, which, unless the reader is familiar with all this new-fangled nomenclature, renders his reference to the work more difficult than it would have been had the well-known homeopathic names been retained. Thus, if he does not know that *Artemesia sieberi* is the name for *Cina*, he may look long ere he finds what he wants, for even the Index will not assist him, as it contains nothing about *Cina*. *Jalap* is not in the Index, and though it is there under thirteen different botanical names, if he does not know one of them he will have to search long ere he finds it. Our *Cactus grandiflorus* is entered here as *Cereus grandiflorus*, *Anacardium* as *Semecarpus a.*, *Mezereum* as *Daphne m.*, *Chamomilla* as *Matricaria c.* (with no

* The otherwise admirable work on *American Medicinal Plants*, by Dr. Millsbaugh, is also overweighted with illustrations and descriptions of plants unknown to homeopathy, and therefore possessing no interest for the homeopathic practitioner.

mention of it by its usual name in the Index), *Caladium* as *Dieffenbachia*, *Carduus marianus* as *Silybum marianum*, *Secale cornutum* as *Claviceps purpurea* (*Secale* is not in the Index), *Iatropa curcas* as *Curcas purgans*, *Ipecacuanha* as *Cephaelis i.*, *Staphisagria* as *Delphinium s.*, *Rhus toxicodendron* and *vernix* as *Toxicodendron vulgare* and *pinnatum*, *Agaricus muscarius* as *Amanita muscaria*, *Belladonna* as *Atropa b.*, *Stramonium* as *Datura s.*, *Nux vomica* as *Strychnos nux vomica*, *Nux moschata* as *Myristica moschata* (no appearance of any of the *Nuces* as such in the Index), *Uva ursi* as *Arctostaphylos*; and many other instances of this change of name occur. Now in an alphabetical arrangement it is desirable that the familiar names should be used. The scientific botanical names may be given in the text, but as many of them are unknown to most practitioners an alphabetical arrangement founded on them will be infinitely perplexing and unsatisfactory in a work of reference like this.

We are not satisfied with the Index. It contains upwards of 1,600 names of plants, every plant being entered by all its botanical synonyms, and the familiar homeopathic name being in many instances conspicuous by its absence, so that as an index it is not so useful as it ought to be.

We have nothing but praise for the botanical descriptions in the text, and the references to the literature of the subject seem to us very complete. Dr. Villers has in most cases given a concise account of the chief homeopathic uses of the various plants, but we think some of these are surpassed in clearness and practical utility by Dr. Goullon's observations in the earlier work.

We have not yet seen the second part of this work which contains the plates described in the text, so we are unable to say if the new plates are equal to the old ones, which were certainly very good, though rather hard and stiff in the drawing and crude in the colouring. In these respects Dr. Hamilton's work is distinctly superior, and though it contains only a selection of the chief homeopathic plants, it is not overweighted like this volume with representations and descriptions of a crowd of plants unproved and unused by homeopathic practitioners.

KEENE AND ASHWELL'S PHYSICIAN'S DIARY AND CASE-BOOK, 1895.*

In drawing attention to this ever-welcome Annual we have only to repeat the praises we have bestowed upon it in former years. Careful case-taking is an absolute necessity in all good

* *The Physician's Diary and Case-book for 1895.* London: Keene and Ashwell, 74, New Bond Street, W.

homeopathic practice, and the *Diary and Case-book* is calculated to be at once a help and an incentive in the path of virtue.

EXTRACTS.

“LES MORTICOLES.”

A LEADING article in *The Chemist and Druggist* of December 15th gives such an excellent account of a new work which has created a stir in Paris, and is destined to make a still greater stir as it becomes more widely known, that we cannot refrain from quoting it here in full. The author of *Les Morticoles* is the son of Alphonse Daudet, the famous creator of Tartarin. Leon Daudet was educated for the medical profession, but medical ethics proved too much for him, and he gave it up in despair. Here is the article from *The Chemist and Druggist* :—

DOCTOR-RIDDEN.

History is full of proofs of the degradation of the calibre of nations which become subject to the tyranny of a priesthood. We in this country have a fair experience of the effect of the predominance of lawyers in our Legislature, and in our public affairs generally, though, perhaps, from this calamity we get off with no worse result than a depletion of our purses. We have not yet had the spectacle of a doctor-ridden nation; though we owe no thanks to the doctors themselves for this exemption. They have done their utmost to establish a reign of terror over us, and to dictate laws which, if carried, would place us all in their power, and we are not sure that they are not increasing their influence to an almost dangerous degree, through their Parliamentary committees, associations, and journals. There is, however, we are glad to believe, a healthy prejudice against the assumptions which at present provide an atmosphere of suspicion around their proposals, which will always, we hope, preserve us from absolute submission to their pretensions.

In a powerfully written romance, published this year in Paris, M. Leon A. Daudet, a near relative, we believe, of the more widely known Alphonse Daudet, has depicted, with an indignation which suggests some personal hatred, the horrors of a reign of terror under a medical hierarchy. *Les Morticoles* is the title of the work, and it designates a people who have subjected themselves first to the sanitary and hygienic control of the medical

faculty, and have subsequently permitted this body to acquire such physical and moral rule over them that in mind, body, and estate the whole population has come under their cruel sway.

Dr. Conan Doyle, in his *Round the Red Lamp*, has thought fit to exercise his powerful imagination with some gruesome enough sketches of medical experiences; but his colours are mere whitewash compared with those with which M. Leon Daudet paints the condition to which the Morticoles have allowed themselves to be reduced by their tyrants.

The story itself is thin enough. It is professedly told by an old man who in his youth sailed on a French merchantship, with about thirty companions, who constituted the crew, for a distant port. Adverse winds drove the vessel to an unknown coast. The crew were running short of provisions, and were hopelessly lost, and, consequently, were glad to accept the aid proffered to them from a sinister sloop bearing a Death's-head flag which visited them from the city of the Morticoles, which, as they afterwards found, they had approached. The conditions made with the crew were hard. They were fumigated by mists of carbolic acid; they were required to throw overboard, or burn, all their clothes and all their possessions for fear of infection. They were supplied with hideous hygienic raiment, provided with double-current air-passages which sterilised the atmosphere before it could reach their bodies. They were inoculated against various diseases, and during a lengthy quarantine were fed with hard biscuits, dusty and brown, which when bitten resolved themselves into a sort of sand, flavoured with liquorice and carbolic acid. The quarantine ended, they were taken on shore, marched through the city and distributed among the various hospitals. A subaltern doctor, who conducted them, showed them with pride the long rows of statues of celebrated physicians and surgeons which adorned the streets. "Here," he explained, "all the powers, all the functions, all the appointments are in the hands of the doctors. The people are all patients. Those whose illness is not dangerous we will allow to go about. The others we keep in the hospitals, asylums, and retreats, and study them at our leisure. This city has been built on plans designed by the famous men whose statues surround you. The police, the government, the university, are all controlled by doctors." "But what about the healthy people?" was asked. "There are none," replied the guide, "except ourselves and our servants. All the rest are ill. Those who refuse to admit it we treat severely, for they constitute a public danger."

Then for some hundreds of pages the author revels in the most ghastly descriptions of hospital life. Horrible diseases are described in lugubrious detail; but these are not so painful to read as the records of the brutalities of the operating surgeons

and the cynical experiments of the physicians on patients for the purpose of demonstrating to students, of establishing theories of their own, or of confuting those of their rivals.

It is one of the curious delusions of this race, says the author, to take labels for explanations. "What is the matter with me?" asks a patient, showing an enormous red tongue. "What is the Greek for tongue?" asks the doctor of his assistant. "Glosse," is the reply. "Ah, you have glossitis," says the doctor.

Types of the famous doctors of the hospitals are sketched. There is Wabanheim, of Jewish origin, with a strongly-marked brow, sunken eyes, brief in speech, eager for riches, honour, pleasure. Every day he invents new drugs, from which he realises considerable profits, in conjunction with Banarrita, the pharmacien, to whom he sends his clients. He recommends his students to buy his works, "an acquaintance with which is indispensable to candidates." These are written for him by young physicians of small means.

There is Tartègre. "He operates but rarely, but always with all the refinements of the science of antisepticism—that is to say, the combat with the microscopic animals which at the time of my visit were regarded as the source of all ills. After a period of dispute these theories became a dogma, and those who reject them are asses and heretics." Tartègre cautions his patients against water, air, wood, linen, paper, stone, and all the metals, as substances where microbes collect. He isolates them in glass cages, and sprays them with acids.

Dr. Fête, instead of making a feature of microbes, trusted to globules. One of these was dissolved in a bucket of water, from which twelve drops were placed in a series of twelve tumblers of orangeade and sipped every hour. "The colleagues of Dr. Fête were atrociously jealous of his rich *clienteles*, which he had secured by his urbanity, his amiable countenance, his fine white beard, and the simplicity of his treatment."

We have no space to tell of the brutes whose portraits are sketched, and we must pass by the stories of Charmide, the beneficent physician, and Dabaisse, the noble-hearted surgeon. Very artistically these are introduced as a contrast to the fiends who form the majority of the characters. A story of a young house-surgeon who heroically sacrifices his life to save that of a workman dying with diphtheria is also skilfully interpolated. But this is followed by the account of a *séance* at the Academy, where Professor Bonze reads a long and wearisome paper "On the Curious Properties of *Vanica rubicans*," and is followed by Professor Bradilin, who exhibits and comments on a case of artificial cancer induced in a boy of fourteen years. Charmide and Dabaisse protest vigorously against this hideous scientific

murder, but Bradilin calmly responds that the claims of science must take precedence over those of individuals. MM. Dabaisse and Charmide, he sneeringly remarks, were honourable practitioners, but they were not physiologists. What would become of progress if it were trammelled by an effete sentimentality and a narrow-minded theory of moral rights?

Banarrita, the pharmacien, was no better than his patrons. He had a magnificent shop, brilliant in the evening with its half-score of coloured bottles. He would invent some compound, submit it to Wabanheim, who would write about it and share the profits.

A physiological laboratory is briefly described. There is a cage of rabbits labelled "Cholera." Guinea-pigs inoculated with a virus bit each other in their fierce agony. Some were artificial epileptics, and screamed with lamentable cries. Dogs deprived of their brains turned round incessantly. And so forth.

Need it be said that the Morticoles are a nation of atheists? They hold a great annual festival to the Glory of Matter, when they make speeches testifying to their marvellous national progress in scientific knowledge. They find the universe fully accounted for by evolution, microbes, and heredity. Sordid, selfish, hopeless, rich and poor are all alike miserable, and homes where the most luxurious methods of suicide are taught and practised are most prosperous enterprises.

SHEEP'S THYROID IN GRAVES'S DISEASE.—J. Voisin (*Sem. Méd.*, October 24th) recently communicated to the Société Médical des Hôpitaux the case of a woman, aged 32, suffering from Graves's disease, to whom he prescribed 6 to 8 grammes of sheep's thyroid to be taken every day in two doses before meals. After a fortnight of this treatment very marked improvement was observed; the heart beats had become regular, and had fallen from 150 to 100 per minute; the edema of the lower limbs had disappeared; the enlargement of the thyroid and the exophthalmos had also appreciably diminished. The patient continued to take daily some fragments of thyroid, taking care to suspend the treatment for ten days every three weeks. The improvement had been maintained, and at the date of report the woman had no symptoms of the disease beyond trifling swelling of the neck and slight exophthalmos. Dreyfus-Brisac said that the thyroid treatment should not be employed in all persons suffering from Graves's disease. In all the cases which had come under his notice that method of treatment had aggravated the symptoms. Bécclère's experience had been similar.—*British Medical Journal*.

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.

REMOVAL.

DR. MACKECHINE, *Bath*.—Dr. Mackechine, of Bath, has removed from his former residence to 2, BRUNSWICK PLACE.

GENERAL CORRESPONDENCE.

VACCINATION FOR ANTHRAX.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—A statement concerning Pasteur's vaccinations for anthrax (said to be based on the official return for 1892), which is distinctly misleading, has just gone the rounds.

First, by the practice, it is alleged that the losses have been limited to 0.94 per cent. among sheep, and 0.84 per cent. among cattle (I have before me a statement of the number of vaccinations which have taken place under the Pasteurian method in the years 1882 to 1893); but there is nothing said as to within what time the said losses were so limited. Now, since the demand of the meat-market would have to be met, in the case of a proportion of both kinds of animals, it could not be very long; the millions of animals dealt with, therefore, if you are to give anything like the facts, must be largely discounted as having had but for a short time existence elsewhere.

Then there is the authority of the great Prof. Colin, of the French Veterinary School, at Alfort, for stating that where any immunity is given to animals against the natural disease by vaccination, with a cultivation of the bacillus anthracis, its duration is very short.

Vaccination as a preventive of anthrax was practised upon 4,564 sheep at Kachouka, in Southern Russia, of which 3,694 died. In New South Wales, Pasteur's representatives inoculated 12,524 sheep, of which 3,174 died. The brothers Pankageff, Russian millionaires, allowed Dr. Bardach, under the superintendence of M. Mezikow, director of the Bacteriological

Institute at Odessa, a doctor of philosophy, to vaccinate their stock, as a result of which proceeding in two days 3,552 sheep died, 1,200 horned cattle likewise perished, and also hundreds of horses. This is called protective vaccination!

Pasteur's treatment has been carefully studied and condemned by a large number of eminent men, many of whom have repeated his experiments. Some of his results have been tested by special investigators, too. His own pupil and agent, the late M. Thiullier (watched by a Government Commission) tested them in Hungary; he also tested them in Germany; Prof. Klein tested them in England; and they were tested by others in France; also, if I mistake not, in Russia. All of these observers agree that Pasteur's vaccinations, though not without scientific interest, are not only without any practical value, but positively dangerous to man and beast.

Yours faithfully,

JOSEPH COLLINSON

Wolsingham, co. Durham.

December 12, 1894.

BUISSON v. PASTEUR.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—Those who have carefully observed the results of the Buisson and Pasteur treatments of hydrophobia know that, whereas the Buisson method has no death-roll, the Pasteur method has a death-roll of 268, some dead with strange, unusual symptoms, some dead though not bitten by a mad dog at all. Also they will remember that in one case at least the Buisson method cured a child already exhibiting the symptoms of the disease which Pasteur openly asserts that he cannot cure. Seeing that the death-rate from hydrophobia has gone up wherever Pasteur Institutes have been established, that this is admitted to be the case in France, and that likewise it is admitted at the *Institut Pasteur* that no one has ever seen the supposed microbe of hydrophobia, it does not appear that we owe anything but 268 deaths to Pasteur,

Yours truly,

A. G.

December 4, 1894.

VARIETIES.

FABISM.—In a communication to the XI. International Medical Congress, Montano described a disease produced by the *vicia faba*, the noxious material being contained in the flowers and fruit. It is conveyed either by the atmosphere impregnated with the exhalation, or by eating the seeds. The disease is not rare, and appears mostly in April or May. There is an individual, or even family, predisposition. One attack does not protect. The symptoms consist in prostration, headache, vertigo, tinnitus, and pain in the abdomen. In severe cases there may be somnolence, or even coma and convulsions, particularly in children. The skin may have a yellow colour. Thirst, anorexia, nausea, and vomiting, is noted in all severe cases. The temperature may even be raised. The urine may contain hemoglobin or albumen. The disease varies in severity, and lasts only a few days. In very grave cases death may follow in one or two days. These cases occur in children. The disease is probably due to some volatile alkaloid or toxin, but the nature of it is unknown. The diagnosis is not difficult if the cause be kept in mind. Avoidance of the cause is most important.—*British Medical Journal*.

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.

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| <p>Black (D. C.). The Urine in Health and Disease and Urinary Analysis, Physiologically and Pathologically Considered. Cr. 8vo, pp. 258. (Baillière. 7s. 6d.)</p> <p>Crawford (W. S.). Ulcers and their Treatment: Intended for the Use of Dressers, and as an Aid to those Preparing for Examinations. 12mo, pp. 50. (Baillière. 1s.)</p> <p>Glaister (J.). Dr. William Smellie and his Contemporaries: A Contribution to the History of Midwifery in the Eighteenth Century. 8vo, pp. 880. (Maclehose, Glasgow; Macmillan. 10s. 6d.)</p> <p>Hart (R. C.). Sanitation and Health: A Lecture Delivered to the Troops at Rani-khet, India. 8vo, ed. (Clowes. 1s. 6d.)</p> <p>Jamieson (W. A.). Diseases of the Skin: A Manual for Practitioners and Students. 4th ed., Revised and Enlarged. 8vo, pp. 676. (Pentland. 21s.)</p> | <p>Jessett (F.). Lectures on Cancer of the Uterus. 8vo. (Baillière. 8s. 6d.)</p> <p>Martindere (W.). Coca and Cocaine: Their History, Medical and Economic Uses, and Medicinal Preparations. 3rd ed. 12mo. (H. K. Lewis. 2s.)</p> <p>Mitchell (P. C.). Outlines of Biology. With 74 Illusts. Cr. 8vo, pp. 306. Methuen. 6s.)</p> <p>Moullin (C. W. M.). Enlargement of the Prostate: Its Treatment and Radical Cure. 8vo. (H. K. Lewis. 6s.)</p> <p>Pepper (A. J.). Elements of Surgical Pathology. Illustrated with 99 Engravings. 4th ed., Re-written and Enlarged. 12mo, pp. 612. (Cassell. 8s. 6d.)</p> <p>Physiology. Part 8. Cr. 8vo, pp. 64. (Livingstone, Edinburgh. Simpkin. Net. 1s.)</p> <p>Riddell (J. S.). A Manual of Ambulance. With numerous Illusts. and Full-page</p> |
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Plates. Cr. 8vo, pp. 222. (C. Griffin and Co. 4s.)

Stevenson (T.) and Murphy (S. F.). A Treatise on Hygiene and Public Health. 3 vols. Vol. 3. Sanitary Law. Royal 8vo, pp. 460. (Churchill. 30s.)

Transactions of the Edinburgh Obstetrical Society. Vol. 19. Session 1893-94. 8vo. pp. 220. (Oliver and Boyd, Edinburgh Simpkin. Net. 8s. 6d.)

Transactions of the Medico-Chirurgical Society of Edinburgh. Vol. 18. New Series. Session 1893-94. 8vo, pp. 302.

(Oliver and Boyd, Edinburgh. Simpkin. Net. 8s. 6d.)

Tuke (J. B.). Reports from the Laboratory of the Royal College of Physicians, Edin. Edited by J. Batty Tuke and Dr. Noël Paton. Vol. 5. 8vo, pp. 254. (W. F. Clay, Edinburgh. Net. 7s. 6d.)

Williams (P. W.). Diseases of the Upper Respiratory Tract: The Nose, Pharynx and Larynx. Illust. 8vo, pp. 286. (Wright, Bristol. Simpkin. 8s. 6d.)

Wyllie (J.). The Disorders of Speech. 8vo, pp. 490. (Oliver and Boyd, Edinburgh. Simpkin. 18s.)

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 the "MANAGER" of the Homeopathic Publishing Company, 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. Dudgeon, London; Dr. Ord, Bournemouth; Mr. Crispi, Darlington; Dr. Cooper, London; Mr. Fredk. Kopp, Greenwich, N.S.W.; Dr. Stephenson, St. Kilda, Melbourne, Victoria; Dr. Mayumdar, Calcutta; Dr. Mahoney, Liverpool; Messrs. Keene & Ashwell, London; Dr. Banerjee, Calcutta.

BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Chemist and Druggist.—Homeopathic Review.—Zeit. Berl. V. Hom. Aertze.—New Eng. Medical Gazette.—Medical Argus.—Vaccination Inquirer.—New York Medical Times.—Nashville American.—Hom. Envoy.—Minneapolis Hom. Mag.—Hahnemannian Monthly.—N. A. Journal of Homeopathy.—Medical Advance.—Homœopatisch Maandblad.—Maanedskrift f. Hom.—La Homeopatia.—Journal Orifical Surgery.—Pacific Coast Jour. of Homeopathy.—Medical Century.—American Homeopathist.—Hom. Recorder.—Monatsblätter f. Hom.—Allg. Hom. Zeit.—Family Doctor.—Clinique.—L'Art Médical.—Homeopathic Physician.—Calcutta Medical Jour.—Healthy Life.—Southern Jour. of Homeopathy.—Herald of Health.—"Conium," by Dr. Theo. Ord.—Hahnemann's Therapeutic Hints, Dr. Dudgeon.—The Vaccination Question, Arthur Wollaston Hutton.—Rapport sur les Hôpitaux Homœopathiques de Etats-Unis d'Amérique, Dr. Sam Van den Berghe.

THE HOMEOPATHIC WORLD.

FEBRUARY 1, 1895.

THE NEW TREATMENT OF DIPHTHERIA.

"AN Old Homeopath," writing in a recent issue of *The Echo*, called upon the leaders of the homeopathic profession to say what they thought of the new "seropathy" craze. In our issue of November last we stated our position in regard to it, holding that the serum of animals inoculated with toxin consists of an attenuation of the poison, and when it cures it does so by virtue of its homeopathicity, as is the case with other nosodes. Since then Dr. Roux, of the Pasteur Institute of Paris, has expressed the same opinion, namely, that the serum cures because it is homeopathic. At the same time, we hold that the injection of the serum into the tissues of a patient is a violent proceeding and fraught with dangers which are only now beginning to be found out. Like all other homeopathic medicines, if it is to be ultimately successful, it will have to be used in homeopathic ways. At present its success is anything but assured, and the results are not to be compared with those obtained in ordinary homeopathic practice. This is the reason why homeopaths have not taken much interest in the new departure.

Statistics, as usual, are very ticklish ground to build on. To be of any value they should have been collected and arranged with very much greater care than these have been. Taken as they stand, some of them certainly show a great diminution of the death-rate as

compared with that of the pre-serum period. But some of the improvement may be accounted for by the omission of the ordinary allopathic treatment—the use of strong antiseptic applications to the throat and the administration of strong drugs internally. To make the comparison of real scientific value there should be a “control experiment”—that is, a number of the cases should simply have the best of nursing, proper diet, and no drugs at all either locally or internally. But such an experiment could only be adopted with the patients’ consent, and these patients are almost always too young to give it. Personally we should consider this far preferable to either the ordinary allopathic or the serum treatment, but those who believe in the efficacy of corrosive sublimate swabbings or serum injections could not conscientiously withhold from patients the benefits they suppose these capable of affording.

Now a word on the dangers of seropathy. Here is a letter by Dr. LENNOX BROWNE, which appeared in *The Medical Press* of January 9th:—

“I regret to have to record that a further experience of antitoxin has resulted in six deaths out of a total of eight cases treated, all due to inflammation of the kidneys. This is a sad but singular confirmation of the testimony you publish in the current issue of *The Medical Press* from Dr. Benda, of Berlin, who on post-mortem examination of 39 subjects dying under the antitoxin treatment, found nephritis in 33 cases, 8 of which were of severe grade.

“From an analysis of 1,000 consecutive cases of diphtheria, I find that death under the usual treatment resulted from uremia in only 2·7 per cent., the total mortality being at the rate of 27·4 per cent. It is perfectly clear that if we are to get at the truth of the results of antitoxin treatment, an autopsy should be made on every case dying under it, that we may learn the exact cause of death in each case of fatal issue. In this respect the recent paper of Drs. Washbourn and Goodall, at the Clinical Society, full though it is of detail, gives no information, nor was any afforded in response to my questions on this head asked in the course of the debate.”

In a letter published in *The British Medical Journal* of January 19th, Dr. LENNOX BROWNE adds to the above that the deaths under serum from cardiac failure are

greatly in excess of the usual percentage from that cause. In again urging the necessity of post-mortem examinations in all fatal cases, he says:—

“ In this respect the short series treated with antitoxin at University College Hospital, under the superintendence of Professor Ringer, is of exceptional value; but what a lesson it teaches! Eight cases with 5 deaths—1 from cardiac failure, 1 from total suppression of urine, and 3 with evidences of septicemia, all established by necropsy.”

From the homeopathic point of view, uremia and cardiac failure are very important symptoms for the antitoxin to have caused, but before the substance can come into general homeopathic use it will have to be attenuated and proved in the ordinary way. In the present routine use in the allopathic school it will probably do more harm than good, and very soon it will be dropped as was *Tuberculin* before it.

Among the minor symptoms that have been observed to follow the injection, the following, taken from an article in *The Medical Press* (January 9th) by Dr. MOISARD, Physician to the Hôpital Trousseau, Paris, are worth recording:—

“ Locally, complications are rare. A single abscess occurred in 600 injections practised in October and November. The patient had received five injections, and after the last developed a simple abscess, which was rapidly cured after being opened. In some cases a fugitive erythema showed itself around the point of inoculation. Rigorous asepsis of the skin and of the instruments used is believed to account for the rarity of local trouble.

“ General complications, although not very frequent, are often well marked, and clearly indicate a toxic action from the serum; and this action in one series of cases followed the use of serum from certain horses only—a fact for which it is not attempted to account. The general disturbances appear sometimes early, sometimes late. In a certain number of cases general reaction was clearly produced, and this was marked by the single objective symptom of rise of temperature. The temperature sometimes reached 39° Cent., but only lasted a few hours, and was unaccompanied by any other disquieting phenomenon. Cutaneous manifestations, sometimes accompanied by pain in the joints, simulating subacute articular rheumatism, were observed in numerous instances. Among these fourteen cases of urticaria, nine cases of scarlatiniform erythema, nine cases of polymorphous erythema, and one case of purpura were noted.

"Urticaria, as had also been noted by M. Roux, was the most frequent skin manifestation, and this appeared mostly a few days and rarely within a few hours after injection. The urticaria is usually general, and is usually unaccompanied by fever, but sometimes by malaise and insomnia. It is the least grave of the eruptions due to the serum.

"Polymorphous erythema, which was observed in nine cases, developed often all the classical symptoms, and although it was accompanied often by general disturbance enough to cause disquiet to an inexperienced observer, never led to a serious result."

There are immediate effects; what the remote effects of "equination" may be, time alone can show.

MENTAL DISTURBANCE AS A CAUSE OF HERPES ZOSTER.—Referring to Mr. Roche's note on the etiology of herpes zoster, in the *British Medical Journal* of October 20th, I should like to record the fact that in the hospital at Wanganui, New Zealand, a case of universal symmetrical herpes was shown to me by the resident physician. The patient was a Maori woman, who had been frightened by a dog. The eruption appeared soon after the fright, and her sufferings were great.—John Haddon, M.D., Hawick, N.B., in *British Medical Journal*, November 17th.

POISONING BY TOBACCO.—The New Zealand Press Association states that an inquest was held at Auckland on July 28th on the body of Eric McCullough, son of the manager of the Bank of New South Wales, who died somewhat suddenly. The boy was taken to James Beard, a hydropathic practitioner, who diagnosed the case and prescribed for worms an injection of a decoction of tobacco mixture—1 oz. of tobacco to two and a half pints of water—and a certain dietary regimen. The first injection was given by the parents with an enema. A second was given five days subsequently, and, after vomiting and purging, the boy died in a short time. William McCullough deposed that the boy had suffered from worms while in Queensland, and was not in robust health. He had not received personal benefit from Beard's treatment, and took the lad to him because of his reputation. He did not know the dangerous properties of tobacco in using it in the way of injection. Drs. Lindsay and Gordon, who made a post-mortem examination, deposed that there was no organic disease and no trace of worms. They condemned Beard's treatment, and never heard, in modern practice, of tobacco being used in such a way. For such purposes a drachm would have been equally fatal. Beard stated in evidence he had dictated a diagnosis, in which was a prescription, to his female assistant. He could not remember whether he had dictated an ounce or a drachm. He had a drachm in his mind. A verdict was returned that deceased came by his death through an injection of tobacco, otherwise narcotic poisoning. The above sad calamity needs no comment, except to show how necessary the clauses in the amended Pharmacy Act are to the public of this colony.—*Lancet*.

NEWS AND NOTES.

THE NEW DIRECTORY.

WE are happy to announce that the long-looked-for *Directory* will be in the hands of subscribers and the public immediately. It will contain the most complete list of Colonial homeopathic practitioners ever published. The Continental list has been corrected up to date. In the British part, in addition to the names of practitioners, there are complete lists of homeopathic veterinarians and chemists. The *Directory* also includes an account of all the principal homeopathic hospitals and dispensaries in Great Britain and Ireland. We have no doubt the *Directory* will meet with a hearty welcome from all interested in the reformed Therapeutics. The Homeopathic Publishing Company, 12, Warwick Lane, E.C., are the publishers. The price is 2s.

PROFESSIONALLY "INFAMOUS."

WE pointed out last month that a writer in one of the medical journals had been at pains to distinguish between the "professionally moral" and the morally moral. The General Medical Council are now manufacturing a new meaning for the word "infamous," which will have also to be distinguished by the prefix "professionally." For instance, in the opinion of Mr. Patrick Heron Watson, every practising homeopath is "professionally infamous," and no doubt the "professionally moral" writer alluded to above would consider a homeopath to be "professionally" highly immoral. But this exciting diversion of giving new meanings to old words is apt at times to bring those who indulge in it into difficulties. For have we not so eminent a person as Sir John Williams, M.D. (who, we are certain, is far too professionally moral to meet a homeopath in consultation), plaintively writing to the *Lancet* to protest that he is not professionally infamous! The General Medical Council say that he is (though they have not yet struck him off the Register). Here are extracts from Sir John Williams' letter:—

"SIRS,—For many years the Obstetrical Society of London has laboured in the cause of the education and registration of midwives.

Meanwhile, until this object be attained by legal means, the Society has, at great trouble, examined women who have passed through a certain training, and given certificates to the successful candidates."

On December 3, 1894, the General Medical Council passed a resolution to the effect that this was professionally infamous conduct, or rather that it would be if they did it again. Sir John proceeds:—

"I can hardly think that the Council can be fully aware of the full significance of its resolution, for should the Society grant its certificate again the following persons will be regarded as guilty of infamous conduct by the General Medical Council—viz., all the past presidents of the Society, its trustees, and other officers, most of the examiners in midwifery in the Universities of London, Oxford, and Cambridge, and the Royal Colleges of Physicians and Surgeons—in fact, all the obstetric physicians of note in London. These men, contingently branded with infamy, are well acquainted with the provisions of the Medical Acts, and many or all of them well versed in the ethics of the profession and punctilious in their observance, many of them having held high positions in the colleges and schools, and are held in honour by their professional brethren. None are better informed of the needs of the poor in their travail; none are better able to train and examine midwives; and from their learning, culture, and experience, none are fitter to form correct views of what is and what is not professionally infamous. Yet these are the men who have for years been guilty of what is declared to be infamous conduct after December 3, 1894, by the General Medical Council."

How very sad!

THYROIDIN.

HERE are some valuable observations on the effects of this new and potent drug, which ought to be turned to good account by those who practise according to the law of similars. They are taken from a recent issue of *Medical Reprints*:—

"The *Gazette Médicale de Paris* reports of a recent meeting of the *Société Médicale des Hôpitaux*, at which M. Bécélère presented a woman, thirty-one years of age, who had recovered from myxedema after treatment with the thyroid glands of sheep. She had taken, by mistake, at the beginning of the treatment, three ounces of the gland in eleven days, and this excessive dose had given rise to symptoms of thyroid intoxication. English authors, said M. Bécélère, have described these symptoms as tachycardia, instability of the pulse, elevation of the temperature, insomnia, agitation, polyuria, glycosuria, albuminuria, and partial paraplegia, with a sensation of heat and sweating. M. Bécélère had further observed an acceleration of respiration, transitory trembling in the arms, exophthalmia, and a

staring expression of the eyes. Was there not, he asked (with no very startling originality one thinks), a striking resemblance between these symptoms and those of exophthalmic goitre? Was not their appearance in exophthalmic goitre allied, perhaps, to a supersecretion of the thyroid gland? Furthermore, M. Bécèle had seen that, during the course of his treatment, the patient had had distinctly hysterical symptoms, although there had been no previous neuropathic symptoms, such as aphasia, monoplegia, and anesthesia of the right arm. Might it not be concluded from this, asked M. Bécèle, that the thyroid juice excreted in excess was one of the exciting agents of hysteria? Furthermore, he said, when thyroidism appeared in a hysterical person, it roused hysteria in her, as other intoxications did. M. Bécèle thought that the syndrome of exophthalmic goitre denoted supersecretion by the thyroid gland, and that it acted like the poisonings that proved exciting causes of hysterical outbreaks."

Dr. Burnett has sent us an extract from *La Semaine Médicale* giving further opinions of M. Bécèle on this subject. He fed a Macaque monkey with sheep's thyroids and it died in six days. He had heard of an adult and one or two children having died suddenly of the thyroid treatment. He considers *Thyroidin* a heart poison, and that it produces a cumulative action like *Digitalis*. He advises complete rest in the recumbent position for all who undergo the treatment, the rest to be continued some time after the administration has ceased.—What a pity he does not use it in the 3x trituration and avoid all the risks!

LITERARY NOTES.

WE are pleased to learn that Mr. J. S. Hurndall, M.R.C.V.S., of Sussex Villas, South Kensington, has been commissioned by Messrs. Boericke and Tafel, of Philadelphia, to write a work on "The Treatment of the Horse." The commission could not have been placed in better hands. "Homeopathy: All about it," continues to find favour with the critics. Dr. H. C. Allen, of Chicago, has sent the publishers an order for 100 copies for the students of Hering Medical College.

THE ANTI-TOXIN DIPHTHERIA TREATMENT AND HOMEOPATHY.

A RECENT editorial in the HOMEOPATHIC WORLD on Diphtheria, *Toxin* and *Anti-Toxin* having been communi-

cated by Dr. Aldrich, of Minneapolis, in a letter to *The Times* of that city, the editor comments upon Dr. Aldrich's letter as follows:—

“Dr. Henry C. Aldrich calls attention to the fact that the *Anti-Toxin* treatment for diphtheria and all kindred treatments for disease like *Tuberculin* and Pasteur's cure for hydrophobia, are founded on strictly and absolutely homeopathic principles. And from the unprejudiced standpoint of the layman, the claim seems well founded. The theory of serum therapeutics is that the cultivated and attenuated poison of a contagious disease introduced into the circulation of the patient gives immunity from the disease itself, for the reason that the attenuated toxic principle already exists in the blood, and successfully combats the attempt of the purer poison to enter. And if this is not according to the basic homeopathic dogma, *Similia similibus curantur*, the unprejudiced layman would like to learn the reason of its difference. Dr. Aldrich writes this communication apparently for the purpose of arousing the homeopaths to prevent the ‘old school’ from carrying off all the honours of the discovery of this principle of the prevention and cure of disease; and from the unprejudiced standpoint to which allusion has already been made, he seems to have good ground for his implied claim that the allopaths are trying to get honour for the discovery and application of a homeopathic and time-honoured principle of therapeutics.”

THE INDIAN MEDICAL CONGRESS.

DR. D. N. BANERJEE having offered to present specimens of homeopathic medicines, also a note about Antivivisection and records of provings of drugs, to the Indian Medical Congress, received the following reply from the Central Secretaries, Drs. W. T. Simpson and D. M. Moon, writing under date November 21st:—

“In reply to your letter No. 92 of the 16th inst., we beg to state that the five medicines therein named” [*Ficus Indica*, *Azadirachta Indica*, *Aegle Marmeloo*, *Sarsaparilla*, and *Spirit of Camphor*] “can be exhibited, but Antivivisection and homeopathic literature cannot be accepted, as this might lead to unprofitable discussions that had much better be avoided.”

It is evident the secretaries wish to spare the members of the Congress the painful operation of having new ideas inoculated into their minds.

DR. DULLES ON PASTEURISM.

The New York *Mail and Express* announces that Dr.

Charles W. Dulles, of Philadelphia, has just made a contribution of great value to medical knowledge on the subject of hydrophobia, and quotes a long passage, of which the following is an extract:—

“The number of cases of hydrophobia that occur in this country is happily small. It would doubtless be smaller still but for the exploitation of the Pasteur Institute, conducted by Gibier, in New York, and of its feeble imitator, conducted by Lagorio, in Chicago. These institutions and newspapers that in times past have published sensational accounts of cases of so-called hydrophobia, have in a mild way reproduced some of the conditions which made France the hotbed of hydrophobia, as well as of hystero-epilepsy. But the psychological make-up of Americans is less favourable to the development of the germs of hydrophobia or those of hystero-epilepsy than that of the French, and consequently there is less of both than there is in France.”

The *Mail and Express* concludes by remarking:—

“As this is not the opinion of a quack or of a notoriety seeker, it deserves the widest publicity, so that it may strengthen and reassure thousands who live in constant dread of mad dogs and hydrophobia.”

PROF. HORSLEY ON THE TREATMENT OF HYDROPHOBIA.

MR. JOSEPH COLLINSON sends us the following:—

“Professor Victor Horsley says in the *Star*, that before Pasteur began his researches ‘all the so-called treatments,’ including sweating, for hydrophobia, were ‘hopeless and cruel.’ What are the facts? Pasteur does not pretend to cure the disease; he simply aims at preventing the disorder of a bite; injects a poison into the human body of more or less virulence, about which he knows little, in order to counteract another poison, acquired by accident, about which, by his own admission, he knows less; works according to the moving inspirations of the hour—it may be 15, 13, 3, 8, 1, 7, 10, or some other higgledy-piggledy arrangement in which the figure 8, for instance, would slip in between 7 and 10, or some other figure, according to the position of the guiding star of his imagination; and inoculates all alike, whether inflicted with the bite of a rabid animal, or by an animal suspected only of being so—a system that has been demonstrated to kill the patient, and under which not less than 268 persons have died. Surely not a system worthy of public confidence! Whereas, the sweating plan instituted by the late Dr. Buisson not only prevents, but has actually cured, the patient when the malady had fastened upon him, and there is no record of any case in which the treatment has failed to cure. The remedy, however, is neither nasty, cruel, nor contrary to common sense; therefore, it is not to the experimental and other interests of Professor Horsley to laud the result of such means.”

It must not be forgotten that a number of cures are to be put to the credit of homeopathy. In the *Southern Journal of Homeopathy* of January, 1894, a case is recorded as having been cured with *Gelsemium*. *Lachesis*, *Cantharis*, *Belladonna*, *Stramonium*, *Cannabis Indica* and *Curare* have also cured cases. See articles by Dr. J. D. Hayward in *Homeopathic Review*, vol. xxxi.

PROF. CROOKSHANK AS A MAGISTRATE.

THE following is taken from the *Herald of Health*, January 1st:—

"Professor E. M. Crookshank has recently been appointed, by the Lord Chancellor, a county magistrate. The force of paradox can hardly be expected to go much further, when this eminent authority, who has had the courage of his opinions, who has taken his own advice, and whose own children are, and will remain, unvaccinated, is now to be called upon to sit in judgment of those of his fellow-citizens who, under his own instigation, have participated in his own crimes, and who will be called before him to receive at his hands the punishment assigned by the law for having done exactly what he has done himself."

HERING COLLEGE—A CORRECTION.

DR. HEATH writes to us to say that in his paper on Hering College in last month's issue, he gave the number of students *this year* as being 87, whereas the correct figure is 100.

A PEMPHIGOID ERUPTION FOLLOWING THE ADMINISTRATION OF COPAIBA.—A. G., aged 28 years, caretaker, in good health, but for a slight attack of urethritis on the night of August 18th last took three copaiba capsules, and five more on the following day. On the evening of August 20th, on rising, he found that his face was swollen and red, and that his body was also covered with red patches. The same evening several blisters appearing on his legs he applied for advice. His face was slightly swollen and red, and his arms and thighs presented irregular erythematous patches, somewhat raised above the surface. At the lower part of each leg, over the tendo Achillis, were large bullæ about the size of a small hen's egg, with several smaller ones—six on the right leg and five on the left leg. The walls of the bullæ were strong and tense, and contained clear serum. There was no areola around them, and after rupture the exposed skin rapidly yielded to treatment. Copaiba, it is well known, produces in many people several forms of eruption, mostly of an erythematous type; but an eruption resembling pemphigus is, I believe, quite exceptional.—Geo. W. Sequeira, M.R.C.S. Eng., L.S.A., Jewry Street, Aldgate, in *British Medical Journal*, November 17th.

ORIGINAL COMMUNICATIONS.

A STUDY OF *KALMIA LATIFOLIA*, WITH TWO CASES.

By J. R. P. LAMBERT, M.B., C.M.

THE following account of *Kalmia* is based entirely on the symptoms recorded in the "Cyclopædia of Drug Pathogenesy," vols. iii. and iv.

Kalmia is a drug which has certainly not received the attention it deserves, being seldom used by homeopaths, and not mentioned in allopathic text-books.

In its symptomatology we find most marked the following:—Pains (variously described) of a rheumatic or neuralgic character, in almost every part of the body, chiefly the head and limbs, but also the back, and to a less degree in the abdomen and chest. In the limbs the pains are not limited either to the joints or to the intervening parts, but usually affect a large part of the limb at once, or several joints, and have always this peculiarity, that they change their locality frequently. There are no signs of pathological change such as swelling or redness. *Kalmia* appears to have a special affinity for the ulnar nerve and for the index finger.

Large doses act powerfully on the heart, greatly reducing the frequency and strength of its beats, and at the same time cause nausea, with loss of vision more or less complete, severe pain in the head and down the back, pallor, and coldness of the extremities.

Smaller doses rather increase the frequency of the heart's action, and produce palpitation, with anxiety and dyspnea.

In addition to the above, vertigo and dizziness, with or without nausea and impairment of vision, are very characteristic symptoms.

Kalmia also acts on the alimentary tract, but not characteristically, and on the genito-urinary organs, but here the provings are too scanty to be of much value.

ANALYSIS.

Sensorium.—Vertigo and dizziness are very constant symptoms, and occur in nearly all the provings. Nausea is a frequent concomitant, and headache and limb pains

usually accompany. The vertigo is < on stooping or looking down, and sometimes < towards noon, and < on rising from a seat. Inability to collect the thoughts.

Head.—The headache more often affects the front part of the head, forehead, supra-orbital or temporal regions, and from these parts may extend backwards down the neck and spine, or downwards into the upper teeth.

Frequently the headache is one-sided (more often the right), affecting temple and occiput, or it may be confined to the occiput or vertex.

Occasionally the pain starts from between the scapulæ, and passes up over the head to the forehead, but not the eyes (*cf. Bell., Sil., Ferr., Phos., Spig.*).

Headache on awaking is a frequent symptom (*Nat.-m.* has same). Sometimes occurs only on rising, and is worse after.

The pains in the head are variously described as pressing, shooting, rending, bursting, and may be very severe and persistent, or intermittent.

The headache is frequently accompanied by vertigo or dizziness, sometimes by obscuration of vision, and sometimes by nausea.

Eyes.—Itching of eyes, which sting when rubbed. Sharp stitches in the eyes, which feel dim and weak. Pressure in them, can hardly keep them open. Pressure as if walls of orbit were pressing on the globe. Edges of lids sore. Muscles of eyes and lids feel stiff. Movement is painful.

Vision is disturbed in various ways, with headache and nausea—thus glimmering before the eyes occurs, muscæ, volitantes are seen, sight is obscured or abolished temporarily, < in erect posture. There is nothing to point to organic change unless it be slight conjunctivitis.

Supra-orbital neuralgia is a common symptom: it mostly occurs on the right side, but sometimes affects both sides.

The eye symptoms of *Spigelia* are very similar, but it has a marked affinity for the left side.

Ears.—One prover complained of loud tinnitus, another of buzzing before the ears. Sharp pains in and behind the ear are also recorded.

Nose.—Fluent coryza with frequent sneezing and increased sense of smell. Pressing on ridge of nose, with frequent sneezing.

Face.—Flushing is mentioned by two provers, as also "neuralgia of face," the pains being transient but severe.

Mouth.—Lips swollen, dry, and stiff. Dryness of mouth with dysphagia. Pain in right side of tongue, > by biting on it. Shooting pains in jaws and teeth.

Throat.—Irritation in throat, described as scratching or scraping, is a frequent symptom, and causes a constant desire to cough. There is also pain on swallowing, and throbbing in left tonsil, and itching in left side of throat.

Stomach and Abdomen.—Nausea, which may be excessive, is a frequent symptom, and often accompanied by impaired vision. Vomiting without nausea, recurring every few minutes, with dim sight, and finally much bile thrown up. Constant retching, with violent pain in vertex.

Glowing sense of warmth in epigastrium. Gnawing and tearing in epigastrium.

Pressure in epigastrium, < on bending forward, and > sitting erect.

Feeling of contraction in stomach, which may be followed by "globus," or by vomiting.

Rumbling and sense of emptiness in stomach.

Stitches in hypochondria.

Cutting pains in bowels, followed by loose stool and relief.

Anus and Stool.—Soft, diarrhetic stools, with much flatus, chiefly in morning, and between the motions ineffectual urging.

Great burning in anus after stool.

One prover had marked constipation—stools large and hard—too large to pass, or only passed with difficulty.

Genito-urinary.—Urine increased, and frequent desire to urinate.

Pain in right testis, then in left.

Menses—too late or too early—accompanied by pain in loins and back, and in front of thighs.

Respiratory.—Tickling in larynx. Cough, with easy expectoration of putrid, saltish, unctuous sputum.

Peculiar noise on breathing, as from spasm of glottis (in one poisoning case).

Oppression of chest and dyspnea are of common occurrence.

Sticking pain under third and fourth left ribs, causing dyspnea.

Circulatory.—Weak, slow pulse, 35–40 per minute. Pulse imperceptible or irregular.

Fluttering of heart, with anxiety.

Palpitation, with oppressed breathing and anxiety. The

palpitation has this characteristic, that it is < by bending forward as well as by mental effort.

Neck and Back.—Here we find constant pain in spine, with heat and burning. Sharp pain in upper three dorsal vertebræ; sticking pain in lumbar region; darting in cervical region; pains in scapulæ, across loins, and in sacrum; pain as if spine would break from within outwards; pains from between scapulæ or neck over head to temples (but not into eyes), and pains in reverse direction. Violent pain down back, or from vertex into cervical vertebræ occurred in the poisoning cases.

Limbs.—Numbness as if asleep. Pricking. Great weariness, or bruised sensation. Transient pains, not felt when lying. Cracking in joints. Coldness of extremities. Pains frequently changing place.

Upper.—The pains sometimes affect the whole arm, more often the forearm and hand, and especially the ulnar nerve. Pain from little finger along ulnar side of arm to elbow, or reversed. Pain as if forearm in a vice. Pain in index finger—from left elbow to index, which jerks.

The joints most often affected are the shoulder, elbow, and wrist, together or alternately.

Lower.—Pains extending from hip or knee into feet and toes, described as rending or stitching. The knee is often affected, the patella and the hollow of the knee are frequent sites. We find also pain in ball of great toe, twitching in heel, weakness below knees, stitches from sides of trunk into hips and thighs.

Skin.—Itching, pricking, burning all over. Diaphoresis.

Sleep.—Restless, with unpleasant dreams.

Talking or walking in sleep.

Sleepiness during day.

Fever.—Coldness and shivering. Alternate heat and cold. Heat, with flushed face, but normal pulse.

Generalities.—Great sense of fatigue and exhaustion, with vertigo. Restlessness. Bruised feeling all over. Marked lassitude. Aversion to movement, which aggravates pains; > on lying down. In one case the pains occurred while lying down, and disappeared on standing.

Pains are frequently worse in the evening.

Character of pains—mostly sticking or rending.

Peculiarity—pains frequently shift their locality.

PRACTICAL APPLICATIONS.

The chief use that has been made of *Kalmia* has been in organic heart affections characterised by pain, dyspnea, and slow pulse. It may also be useful in functional disturbances. Additional indications are pressure in the epigastrium and palpitation, < bending forwards, and > sitting erect (characteristic): also pain in either arm, with or without numbness and pricking. Also the accompaniment of right-sided headache or neuralgia, and vertigo.

Its application in rheumatism is obvious; it is indicated where there is no visible organic change, and the pains shift frequently, and movement aggravates. [It is thus distinguished from *Colch.* and *Puls.*, both of which have pains shifting rapidly; but *Colch.* has redness and swelling of joints, and *Puls.* > movement—patient must move the part.]

It should prove useful also in hemicrania and other headaches and in trigeminal neuralgia.

I would also suggest its use in so-called "bilious attacks" where nausea predominates over vomiting, and where vertigo or dizziness and obscuration of vision are prominent symptoms, especially with right-sided headache.

There is recorded a case of Bright's disease cured by *Kalmia*, given on account of severe and persistent pains in the limbs. Lumbar pains and increased secretion of urine, frequent micturition, are the only symptoms to point to action on the kidneys. Cowperthwaite gives albuminuria, as a pathogenetic symptom; but in the provings in the cyclopædia no analysis of the urine is recorded.

Finally, cases of poisoning in animals point to a deep-seated action on the spinal cord. There is produced trembling, staggering, jerking, followed by clonic spasms and violent convulsions, in which the eyes are turned upwards, head drawn backwards, limbs become rigid, also abdomen is bloated, and bowels loose. If recovery occurs the animal is nervous and weak, and has a tottering gait for three to four months.

In the two poisoning cases recorded in the human subject, the collapse (pallor, cold extremities, and weak, slow pulse) and the pain in the back may point to an action directly on the nervous system, as also such symptoms as numbness, pricking, and pains in the limbs.

The following two cases may be of interest as examples

of the beneficial action of *Kalmia*, though my notes are scanty :—

THE CASES.

CASE 1.—*Tobacco heart, with right temporal pain.*

P. L., æt. 54, gatekeeper, complained of sharp pain in right temple like pins and needles. It was induced by touch and turning the head quickly; and he had had it about eighteen months. He also suffered from palpitation on the least exertion or fright, sometimes awakening him at night. He also had tingling in arm and leg (left), and sensation as if blood did not circulate in these parts; he could walk all right, but not far. Bowels rather costive.

Twenty-five years ago he suffered from "neuralgia in chest," but not for some time.

Physical examination revealed nothing abnormal, except a very irregular heart, intermittent every three or four beats. No valvular lesion.

He had been nine months under homeopathic treatment, and previously was told by allopath that no more could be done.

He had been a smoker since he was seven years old.

Kalmia 3x was ordered, and in a week he reported himself much better—temporal pain nearly gone, and later it went completely, and his pulse intermitted only one in eight or nine. He took *Kalmia* for about seven weeks, when other drugs were given, as its beneficial action seemed to have ceased, and the pulse did not improve further.

Remarks :—This case would suggest *Kalmia* as an antidote for tobacco, many symptoms of which are very similar.

CASE 2.—*Locomotor ataxy.* Henry H., æt. 65. He has been ill fourteen years, and is quite blind. He came under treatment for the following symptoms :—Sleeplessness due to constant throbbing pain in left parietal region, which had lasted two to three months. Also vertigo and pains in the legs which shoot and shift their position frequently. He had no pain in the back or arms. Nov. 30, 1894, *Kalmia* 3x mij. in a tumblerful of water, ʒij. t.d.

Dec. 8. Vertigo gone, headache much better, and sleeps a good deal better. Complains to-day of abdominal pain, as if constant desire for stool. Flatulence, > eructations, and quivering in legs. Thinks he caught cold two days ago. *Nux-vom.* given.

Dec. 17. Abdominal symptoms better, but another old

symptom has returned, viz., frequent micturition every half-hour, with sharp pain during and after, and pain in hypogastrium. *Canth.* 3x, one drop in a tumbler of water 3i. two hours.

Dec. 22. Bladder trouble better, was relieved at once by *Canth.* Still sleeps well, and is pretty free from headache. Has his old pains in legs. *Kalmia* 3x mi. was again given as before.

Dec. 28. Feels very well. No headache or giddiness, and sleeps well. Has only slight pains in legs now. Rep.

Remarks:—This case is of interest because it confirms the supposition that *Kalmia* has an action on the spinal cord. It shows also that too much stress must not be laid on the right-sided headache, for in this case it removed a left-side one. The reappearance of old symptoms, Dec. 8th and 17th, may have been due to the action of the drug, in which case it would have been better to give no intercurrent drugs, as the symptoms would have disappeared without them.

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MATERIAL AND DYNAMIC REMEDIES.

By Dr. GEORGE HERRING.

THE practice of homeopathy may be viewed under two aspects. It may be seen either as a simple or as a complex system of medicine. Considered as a *simple* system, it seems both easy to understand and to practise. It is merely putting into practice the law of similars in its most obvious form. For instance, *Belladonna* will produce an inflammatory redness of the mucous membrane of the throat, therefore when we see a patient having an inflamed throat we give this remedy and cure him. *Kali-iodidum* will produce a nasal defluxion, therefore when we see a patient with this symptom we give the same medicine and cure him. A multiplication of examples is needless; the two given show the simple action of the law of similars. It seems very easy of application; here is the symptom and there is the remedy.

But we do not practise homeopathy very long before the *complex* meets us, and we then find ourselves beset with difficulties. The symptoms are so numerous that we can hardly group them so as to fit any remedy, that is, any

single remedy. And sometimes, on the other hand, the very absence of well-defined symptoms is a puzzle to us.

Then comes another difficulty. Having, after much research, discovered what may be called the *general* simillimum, we have now to find the potency in which to use it, so that we may have the *specific* simillimum. From the crude drug to the 200th dilution what are we to employ? Which of the two hundred is the specific simillimum? Authors do not agree—in fact each practitioner picks out one according to his fancy. Proving does not solve the question; and yet they might do so if a certain well-defined system were adopted, into which I cannot now enter.

The only point that I would now emphasise is this: Until we clearly differentiate between the remedial powers of the crude drug (or strong tincture) and the remedial powers of the same drug when dynamised, we must expect nothing but confusion. This differentiation should be made, and no doubt could be made. At present it has not been done. Homeopathy is in reality, as at present practised, a compound of two different methods of procedure. One set of practitioners use the crude drug, another set the dynamised drug. Probably both are successful—sometimes one, sometimes the other. A knowledge of both procedures is necessary to success; that is, success in all cases. To give an example: Here is a patient with incipient quinsy. The strong tincture of *Belladonna* (or the 1x) will abort it. Will the 200th dilution do so? I do not know, but very much doubt it. Then, on the other hand, there are probably some cases of disease where the 200th or the 30th will cure, and the strong tincture will not. So we see here, assuming the above proposition to be correct, that the crude drug and the dynamised drug *are two different medicines*. This is only an instance of what we may expect in going through the whole *materia medica*. When, therefore, an author gives us a work on homeopathic therapeutics he should distinctly separate the effects—the *remedial* effects—of the crude drug (or its equivalent of 1x) from those of the dynamised drug. Will not the author of *Pharmacodynamics* do this for us in the next edition of his valuable book? We naturally expect much from such an author, and perhaps he will not disappoint our expectations. A few words from him on this subject would, I am sure, be most acceptable to all readers of THE HOMEOPATHIC WORLD.

REMARKS ON THE "MATERIA MEDICA."

CINCHONA (continued)—CHELIDONIUM.

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

CINCHONA (continued).—*Sleep*, as soon as she sits down in the daytime she falls into a doze, but as soon as she lies down she becomes wide awake from the least noise; deep sleep like that of a drunkard; aching pain in the head during the night appears to be characteristic of Cinchona; *snoring inspirations and expirations when asleep*; inspirations are somewhat snoring, expirations *puffing*; one eye open, the other half-closed, the eyeballs being turned backwards as in dying persons; lies on back, head bent backwards, arms extended over the head; heat in the head, sweat all over, greasy morning sweat; dreams, on waking from which, it is difficult to come to one's senses, or the anxiety continues; dreams are very various, mostly of a distressing or terrifying character. *Fever*, dread of the open air; feeling of icy coldness in the left hand, externally it feels as warm as the right; rest between the cold and hot stages; shuddering and chilliness when entering a warm room from the open air. The Cinchona fever frequently commences with an accessory symptom, palpitation of the heart, or sneezing, or great anxiety, or nausea, or great thirst, or canine hunger, or aching pain in the hypogastrium, or headache; redness and heat of the cheek and lobule (of the ear), with chilliness over anus and abdomen; heat in the head, with distension of the veins of the hands; *the blood rises to the head, the forehead is hot, and the limbs are cold; the warmth of the body is somewhat increased, with distended veins, but no thirst, and easily dilated pupils*; heat over the whole body without thirst; in the hot stage he can scarcely uncover his hand without feeling a pain; after waking at 3 a.m., sweat of the body with thirst, but no sweat on the feet, there is no sweat about the head except on that cheek on which he rests; violent sweat over the whole body when walking in the open air; cold sweat in the face with thirst (the above fever symptoms are all given by Hahnemann). From others may be added: he does not feel cold although the room is cold; cold hands, and chilliness over the whole body externally, as if he had cold water poured over him, in the open air, where the chilliness increased to

chattering of teeth, the chilliness passed off in the room, but the cold hands remained; icy-cold feet, the other parts of the body being warm; the right hand is considerably colder than the left; cold hands and feet early in the morning, and thrills of chilliness over the thighs, increasing when walking; chills, internal and external, through the whole body, sometimes more in the marrow of the bones of the feet, these are colder than the hands; thirst after the cold stage, without any subsequent heat; aching pain in the abdomen during the chills; thirst sets in one hour after the heat had ceased; two chills at different periods before the heat sets in; great internal heat in the whole face, trunk, thighs, with cold sweat on the forehead, cold cheeks and cold feet; *dry heat* the whole day; unquenchable thirst during the hot and cold stages of a fever and ague; heat of the whole body . . . producing sweat on the forehead, preceded by violent hunger; *transitory sensation of heat, and heat over the whole body, and in some parts of the skin fine slight prickings, with thirst for cold water*; quick, irregular pulsations; slow faint pulse; slow weak pulses becoming gradually quicker and stronger; the fever anticipates when employing the Cinchona in the treatment of intermittent fevers. In looking over the above category we may remind ourselves again of the importance of the moral symptoms, and note the italicised head pains, under eyes, the amaurosis as further proof of a most powerful action on the nervous system, then the redness of the cheeks and lobules if taken in connection with the occurrence of such symptoms among those of the fever will be seen to have more importance than might otherwise have been supposed, and so trivialities, as some would call them, will be found to possess, in some cases, real diagnostic importance; the time of the epistaxis and its repeated occurrence are to be noted; also the conditions of throat pains compared with the general sensitiveness to cold air, and which again brings into marked contrast the amelioration of some symptoms by open and cold air; under abdomen, the splenic stitches are valuable in view of the distinct pathological action of Quinine on that remarkable viscus, the spleen, other important kidney symptoms also come in here; certain chest as well as stomach symptoms are unaffected by either inspiration or expiration; then in the upper extremities comes what we may call the golden condition of *sensitively painful when touched*,

and when the pain has passed off it can be excited again by contact; the remarkable thing is that firm pressure does not hurt, may even relieve. Quite recently I have had an unfortunate patient who had been heavily drugged when abroad with both Strychnia and Quinine, and has been subject for some months to fortnightly paroxysms of intense and distressing pains in the lower limbs. The first time I witnessed these, they so reminded me of what I had seen in a cat poisoned by strychnine, that I sought to antidote that drug, but with little apparent benefit; a further, study, however, brought out markedly the above-mentioned characteristic, and accordingly, what is homeopathically known as Chininum Sulphuricum was administered in the 200th potency with the most gratifying results, not only at the time, but when the next periodic recurrence was due, not only was it delayed, but the amount of pain and duration were gratifyingly less also. This same condition it will be noted is found under the lower extremities, *excited only by contact, not by motion*; for it is a characteristic of Cinchona, as before stated, and runs through its whole pathogenesis, like "a red string" or "golden thread," as has been aptly expressed. It is these symptoms that are found appearing and reappearing, in perhaps somewhat modified forms, but evidently conveying the same fact that constitute characteristic symptoms, because they are stamped on the very nature of the drug, and it is these we need to learn and understand. An equally characteristic one is seen under Lycopodium in the peculiar movements found in various parts, such as "protrudes the tongue and oscillates it to and fro"—the muscles of the nose first appear distended, then again contracted and shortened, like the brim of a hat turned over—"the whole countenance first extended in length, afterwards in breadth"—this *fact* in other expressions will be found repeated in the pathogenesis of Lycopod and of inexpressible benefit to those who wish to heal the most serious acute diseases, *e.g.*, Pneumonia or Bronchitis, by observation and legitimate deduction from observation, and not waste time and endanger life by speculations on the exact material pathology of the case. To return to our drug—the peculiar swelling on the calf is interesting, and shows yet once more that even if suppuration be imminent *routine* treatment by so-called anti-phlogistics is *never* to be adopted, but careful discrimination and individualisa-

tion; rheumatism again may require Cinchona. Under weakness-fits I omitted a somewhat caustic remark (though most true), of our author, namely—"a sort of unnatural excitement, similar to the artificial strength which physicians excite in a patient when they fail in curing the disease;" feeling of ease in the evening. The importance of this is that not only are persons often deceived by temporary stimulation induced by medication, but that in disease unaltered by medicinal action, feelings of strength and vigour often occur, and buoy up by false hope only to be followed by corresponding depression when the inevitable reaction ensues; hence temporary and especially sudden feelings of great improvement are to be regarded with caution. Under sleep, the puffing expirations, the peculiar character of the dreams, and their impression remaining after waking, will all be found useful, as also positions during sleep, always important, and often conveying invaluable information. In fever, here as elsewhere, local heat, cold or sweat and accompaniments are all of moment, as also the alternation of heat in one part and cold in another, and the time at which thirst occurs.

Our next drug will be *Chelidonium majus*, the greater Celadine. There is first a reference to the oddities of "old physic," for it was thought that this drug might be useful in bilious diseases because of its looking yellow, then a caution against praising a drug too much, *ab usu in morbis*, especially as other drugs were given in mixture with it. Symptoms—first from Hahnemann—these I will give verbatim. (Vanishing of the senses.) Stitching headache in the vertex, in paroxysms, especially when walking fast; contractive headache. (Titillating itching in the eyeballs.) He imagined a dazzling spot was before his eye, and when he looked into it lachrymation ensued. Tremor and twitchings in the tip of the nose. Digging-up tearing in the antrum highmorianum (a. 3 h.) Diminished thirst. Nausea with inclination to vomit (induced by the external use of the drug). Tension across the epigastrium. Colic. Pain over the left hip, as if a sac were forming in that region. Emission of a quantity of flatulence. Diarrhea, three times a night. Mucous diarrhea. Reddish urine (from using the drug externally). The urine was emitted from ten to twelve times a day, and several times in the night, a large quantity being emitted every time (a. 24 h.). Burning in the urethra, immediately before the emission.

Stitching and cutting in the urethra during micturition and motion of the body. Asthma. Drawing, in the left forearm, and moving thence into the palm of the hand, which experienced a twitching motion. The left wrist-joint felt stiff in the evening, A sort of stagnation and a stiffness in the right wrist-joint, felt only during motion. A few red pimples, with white tips, on both thighs, characterised by a corrosive itching. The anterior surface of the thigh goes to sleep, with fine stinging and erosive pain (from applying the plant externally). Stiffness in the tarsal joint as if sprained. (Apoplectic insensibility and numbness of the whole body, with trembling, the pulse being unaltered.) Diminution of animal heat. Before passing on to the observations of others, I should like to remark on the above, first, how apparently trivial many of the symptoms mentioned are, but then, Hahnemann knew how to use them: next, several were caused by external use of the drug, and two of these, nausea and reddish urine, such as would not, *a priori*, be looked for from such a use; then the time of occurrence is noted more than once. We come now to the observations of others. *Moral*: desponding, full of sad thoughts about the present and the future; he could not remain in any one place. Sad, unto weeping, about the present and the future, *Head*: pressing sensation in the cerebrum as if the skull were too narrow to contain it, and as if it would press through the ear, in which he hears a noise as of a distant waterfall; disagreeable sensation in the left temple as if the blood were suddenly arrested in that part. *Eyes*: aching pain above the left eye, which seemed to press the upper eyelid down (a. $\frac{3}{4}$ h.). *Face*: tension and drawing in the left zygoma only when lying down. *Ears*: long continuing stitch in the external right ear going off gradually; sensation in both ears as if wind were rushing out; he had to insert his finger into the ear frequently, in order to suppress that sensation. *Pharynx and Esophagus*: Great tension over the neck, and in the throat, above the larynx, as if the parts were constricted; the constriction, however, amounted merely to a narrowing of the pharynx (a. $\frac{1}{2}$ h.). Sensation as of the larynx being pressed upon the esophagus by some external pressure, which does not impede respiration but deglutition (a. 5 m.). A sort of choking in the throat, as when too large a portion is swallowed too hastily. *Mouth and gastric*: taste as of juniper tea; desire for milk, which induced a feeling of ease through the whole body; however much he drank of it he did not feel

inconvenienced by it, whereas before it caused much flatulence; *hiccough*. *Abdomen*: continual gurgling; *continual cutting in the bowels immediately after a meal which he had relished*. *Stool*: costiveness, stool like sheep's dung, hard, two days in succession; diarrhea. *Urinary*: pressure upon the bladder the whole day, with but little emission of urine. *Catarrh*: oppression of the thoracic cavity during an expiration: pressure, with tearing in the left axilla, and also in the parts nearer the nipple. *Back*: pressure, with tearing, in the region of the lowermost lumbar vertebræ, extending to the iliac bones; sensation as if the vertebræ were being broken asunder, only when stooping forwards, and then when bending backwards again, for several days; also felt when walking. *Upper extremities*: Weariness of the muscles of the right forearm, so that they could only be moved with difficulty, and were painful at every motion, and when seizing something; the anterior joints of the fingers of the right hand became yellow, cold, and dead, the nails were blue; fine tearing in the tips of the fingers of the right hand. *Lower extremities*: a sort of paralytic weakness in the left thigh and knee when treading; hard pressure in a space of two fingers' breadth below the patella, more towards the inner side; cramp in the sole of the right foot, which is curved downwards together with the toes, the toes were like dead and without sensation; the cramp subsided by compressing the calves with the hand, but it increased when trying to set the foot upon the floor. *General*: shooting prickings, now in the hand or arm, now in the foot, knee, abdomen, &c.; in the morning he felt so weary that he could not get up. *Sleep*; great drowsiness and laziness, no yawning; great uncomfartableness; he does not feel well, without knowing what ails him; he has to lie down without being able to sleep, everything was unpleasant to him; restless sleep full of dreams, restless sleep without any particular dreams; restless sleep with sudden waking and excessive sweat, which had come on during sleep, and continued in the morning even while awake. *Fever*: Violent chills and shakes, the external body feeling warm, goose flesh terminating in sweat, which lasted the whole night; felt alternately warm and cold through the whole body, sometimes only in single limbs; the right foot is cold as ice, up to the knee, feeling also cold to the prover, whereas the other foot and the rest of the body have their natural warmth, and the veins of the hands and arms are swollen (a. 3½ h.). *Remarks*: The times of the occurrence

of the symptoms are mentioned several times; the length of time after a dose of any medicine at which a change is noticed is always instructive; the pharyngeal symptoms have been very useful in practice; the action of milk is unusual, and would make one think of the medicine in many cases where milk disagrees, but here again the question must be, how does it disagree? One of the catarrhal symptoms is peculiar, and the *condition* of the back pain would distinguish it from others which have "as if broken"; the locality also must be noticed.

BLOOD CONTAMINATION.

By ALFRED HEATH, M.D., F.L.S.

PURE blood uncontaminated by any poisonous matter gives life, but blood made impure by all kinds of animal poisons, entails endless misery, often death. We seem in this latter part of the nineteenth century to be having a mania for blood-poisoning; to this end every animal in a *diseased* state is requisitioned, and the diseased condition implanted in the blood of human beings. Where will it end!

Amongst physicians it is a case of "follow your leader"; like a flock of sheep, if one jumps into a bog, all the flock go likewise. Before the introduction of vaccination, inoculation, or putting the disease small-pox into a healthy person or child, was the order of things, but this was put a stop to by Act of Parliament, because it spread the disease small-pox. The spreading of small-pox would be a trifling matter compared to the terrible evils that are and may be spread by the constant inoculation of animal diseases into the human system. Small-pox, like many other diseases, is a ferment that cleanses those it attacks, and often cures hitherto incurable constitutional diseases (but for this constitutional state they would not be susceptible to it); but these animal blood poisons come to stay, with all their hydra-headed evils. Parliament may have to interfere again to stop the growing craze; or, as vaccination is now often small-pox inoculation, first of the cow and then of the human being, is it not already an infringement of the Act?

The laws of nature which, when obeyed, are capable of curing or preventing every evil, are disregarded or despised

on account of their simplicity. We must needs have some virulent morbid product from the brute beast injected into the blood, in the vain effort to cure; but the effect of this will permanently poison the life by causing all kinds of diseases, making life a burden, a fruitful cause of mania and suicide. The lymph taken from an animal disease (to wit, cow-pox vaccination) is used to prevent small-pox, a similar disease, no matter what other malady it produces. The saliva of the mad dog is passed through a rabbit to meet the effects of the dog's bite, hydrophobia. The *poison of consumption* * injected into human beings as well as animals to cure consumption, and recommended as a test to show whether consumption exists or threatens: if it does exist the temperature is raised and the disease aggravated, and death comes more quickly; if consumption does not previously exist, the germ † is produced by the inoculation, and sooner or later the disease comes to those also who were previously free from it. Koch has injected this virus into himself, it is said. All honour to him for doing no more to others than to himself! Will he die of consumption?

Extract of the thyroid gland of sheep is recommended as a cure for myxœdemia, a disease of the thyroid gland, with dropsical gathering of a mucus-like substance in the connective tissue with atrophy of the gland.—There is a disease with dropsical symptoms common to *sheep* called rot, or fluke disease, and one *peculiar* symptom of this disease consists of a *soft* indolent tumour on the upper part of the neck and the lower part of the jaw. Is this *similia*?

The latest introduction, *Anti-toxin*, is made by injecting the diphtheria poison from a human being into a horse until saturated with the poison, when the blood is drawn as wanted from the poor beast; and the serum of the blood is injected into the circulation of human beings to cure diphtheria. I presume the animal selected is not a poor

* Prepared by breeding the bacillus of consumption, and then separating the resulting ptomaine or animal alkaloid, a poisonous fluid generated by the bacillus, causing death when injected in far less quantities than may be found in the patient's own lungs.

† To many minds the germ means the bacillus. I believe the poisonous fluid without the bacillus is just as capable of promoting the disease or morbid state, and I mean that also when I refer to germs, and that comparatively healthy people who may be inoculated with this fluid, have the consumptive habit put into them, and in certain conditions of ill-health it will develop sooner or later.

worn-out diseased one, but *absolutely* free from every other kind of contamination; it will, I presume, be *guaranteed* that he has never had farcy or glanders, grease, strangles, poll-evil, skin-disease, fistula, diseases of the bones, that it is not consumptive, and that he has not inherited any of those diseases. When a child is vaccinated, particular inquiries are made as to the health of the child the virus is taken from—for virus it certainly is—also the health of its father and mother, and if this is not found to be good, it is refused. A few years ago it was maintained that if the lymph was carefully taken so that *no blood* was with it, no contamination could follow, but even then the greatest care was exercised in selecting the child to supply the fluid: why, is a mystery; *if it carried nothing, any diseased child would be as good as a healthy one*, and if there was any knowledge, or even suspicion of *syphilis* or of *scrofula*, it was always rejected; *if the taint was not carried with the lymph free from blood in one case*, what was to cause it to be carried in the other? If there is only a *possibility* of constitutional taint being so carried, is that possibility not sufficient to prevent any wise parents running the risk of contaminating their children? and we know that such contaminations have frequently taken place by one of the most dreaded of all diseases, *syphilis*, and as it is a very easy matter to take the fluid free from blood, from the vaccine vesicle, it is to be presumed it was in these cases taken free from blood. But after a time heifer lymph became the safe and proper thing to be used. Why? Is the animal not liable to disease either of inheritance or otherwise, and cannot these diseases, many of them, be transmitted to the human being?

What manner of people will the future race of man be if his progenitors are engrafted with the diseases of the cow, the horse, the dog, the pig, and the sheep, to say nothing of human complications? I have said it was thought necessary that great care should be exercised in taking the lymph from a child that no blood was with it, otherwise taints or germs of constitutional disease would go with it into the constitution of the child into whose arm it was put, and so spread those evils to untold generations; but here in this preparation, *Anti-toxin*, it is the blood that is taken. Supposing that it has the power to control the disease diphtheria, which, under certain conditions of use, I am willing to concede, is not the remedy *applied* in this

way likely to be the greater evil of the two? If the morbid conditions of the lower animals are transmitted to the human race, will not the last evil be greater than the first?

The treatment of diseases in this way by the allopathic profession is to me astounding—they are *absolutely advocating "like curing like"*—but although they treat by *similia similibus curantur*, they are *applying* the similar remedy in the wrong way. Let me instance my meaning: Take a virulent snake poison, *inject* a small portion into the blood (snake-bite), and death is the result; take the same poison, but instead of a small quantity let it be a tangible one—it can be swallowed with impunity, *provided it does not come in contact with any abraded surface*.* Take this same poison, potentise it on the homeopathic plan up, if you like, to the 30th potency; it will cure, if taken internally, conditions similar to those produced by the crude poison, and it has often cured the effects of snake-bite itself. By this plan, as in the case of *swallowing* the crude poison, it does not enter directly into the blood, also the quantity is too small to poison or otherwise injure, but it is enough to do good, and *produces physiological effects even in this dose*, as any one can prove for himself.

The poison of the crotalus (its use borrowed from the homeopaths) is recommended, and is used, in allopathic practise in the treatment of malignant scarlet fever in 3-drop doses of a solution of 1 in 1,000. Now all these preparations that have recently turned the world and medical men upside down—save, perhaps, thyroid extract—have long been used by the homeopaths, *but used by them in the same manner as the snake poisons* before mentioned; and such has been their success with them in *curing* disease, that I verily believe it was this success that first brought them under the notice of old school physicians and chemists.

Take the first introduced by an old school chemist (Pasteur) to be *injected (Hydrophobin)*, made from the saliva of the mad dog passed through the body of a rabbit; it was *originally* introduced by the celebrated American homeopathic physician, the late Dr. Constantine Hering,

* There is a snake in South Africa called the "spitting snake" (*Sepedon hamachates*). It spits with marvellous accuracy directly into the eye. The fluid ejected produces violent inflammation—the natives say ultimate blindness, but not death. The blindness may be the result of the inflammation—a false cataract. This is one of the most dangerous snakes, and its bite is generally fatal to man.

in 1833 (see Hering's *Materia Medica*, and his *Domestic Physician*, published 1851, also the *North American Journal of Homeopathy*, 1879, also provings by other homeopaths in 1835 and 1853, &c.); it was used successfully by the introducer on the same lines as the snake poison. The snake poison *Lachesis* was also introduced by Hering.

Pasteur first introduced his mode of treating hydrophobia by injecting the weakened virus of the mad dog in 1883 or 1884. His plan was to first inject the virus into rabbits; in other words, produce rabies in them. The virus, or ptomaine, obtained from the spinal cord of the rabbit so poisoned, in a weakened state is then injected into the veins of human beings to cure hydrophobia. What if the bite in some of these cases should not have been from a rabid dog!—then the poison of rabies is put into the blood. It has been said that since *this* inoculation was introduced there has been a larger mortality from hydrophobia.

Tuberculinum was first introduced by Dr. S. Swan, an American homeopathic physician, about twenty-five or thirty years ago; and at the time the medical journals in this country took the matter up and spoke of the disgusting nature of the proceedings. In 1890, Dr. Koch brought before the word *his Tuberculinum* (as in the case of Swan's, a product of phthisis) to be injected into the blood (not disgusting this, although in a tangible quantity, because done by an allopath!). All the allopathic medical profession fell down and worshipped him and his remedy, and numberless people were sent to their graves by it, as in the case of the snake poison, by having it injected into their blood. This mode of treating consumption by the old school men has now had its day, because, being improperly applied, it cannot be depended on; and because it is not the only remedy in all cases, there being no such things as specifics. Swan's plan, as well as Hahnemann's, Hering's, and others, is to potentise it and use it as an internal remedy free from its grosser particles. I have myself proved that this mode of preparation gives absolutely perfect results, when the remedy is indicated. In 1883 I prepared myself *Tuberculinum* from the bacilli and tuberculous ptomaine, and potentised it with *Alcohol* on the homeopathic plan; and this same preparation is now being used with the greatest success in the cure of consumption all over the world, and constant reports of cases

of consumption and idiocy cured by it appear in the homeopathic journals; a book has also been written on its wonderful effects by another physician, detailing cases he has cured. By this mode of preparation and administration the blood is not poisoned.

Jenner stated that by vaccination the human system is permanently altered. Does he mean that to vaccinate with cow-pox a previously healthy child, that its state of health is permanently changed? And are we to have as many forms of *Anti-toxin* vaccination as we have of vaccine poison?—as I presume any form of inoculation must produce similar radical changes as Jennerian vaccination. Jenner's theory was that the fluid taken from the disease called "*grease*" in the horse's heel, and applied to the udder of a cow, produced cow-pox.* The fluid taken from this artificially produced disease is injected into a healthy child to guard it against a disease, small-pox, that it may never have, and probably under proper sanitary conditions would not have, and certainly if the health of the person was properly regulated, and diseased conditions cured instead of suppressed, it would not have. Without sanitation vaccination is a failure; with sanitation it is hurtful, and no such treatment is necessary. Another mode adopted by Jenner was to vaccinate with fluid *Grease* direct from the diseased heel of the horse, without passing it through the cow.

Jenner vaccinated his eldest son with *swine-pox*. He died of consumption at the age of 20 years. In my last paper on this subject of vaccination (HOMEOPATHIC WORLD, September, 1891), I mentioned two cases from *The British Medical Journal* of January 24, 1891, in which small-pox attacked two men in the last stage of consumption, with cavities in their lungs, who had been at one time vaccinated. The consumption was cured by the small-pox, and the men regained perfect health and increased many stone in weight.

Another source of vaccine is to inoculate the cow with small-pox itself, and then vaccinate with this modified or altered small-pox virus; this I believe is commonly done now.

Since the introduction of vaccination as a preventive of

* If an artificial disease can be produced in a cow by inoculation, why may not an artificially-produced animal disease be generated in a human being, the effect of which remains?

small-pox, cancer and consumption have largely increased: What is this due to? It cannot be on account of neglected sanitation, as that is vastly improved of late years. What more likely than that the blood is poisoned by filthy animal diseases put into it, and by the constant check to the evolution or throw-off of diseased conditions caused by vaccination and other kindred practices.

Hahnemann, in his *Organon*, says, "By placing into one class protracted diseases arising from unwholesome habits of living, together with countless *drug diseases* produced by the debilitating treatment often employed by old-school physicians, we shall find that all other chronic diseases without exception are derived from the development of one or more of three chronic miasms—internal syphilis, internal sycosis, but chiefly and in far greater proportion, internal psora. Each of these must have pervaded the entire organism and penetrated all its parts, before the primary representative local symptoms peculiar to each miasm (itch, eruption of psora, chancre and bubo of syphilis, and condyloid excrescence of sycosis) makes its appearance for the prevention of the inner disease. When its local symptoms are suppressed, the internal disease will be developed sooner or later in obedience to the laws of nature. It will be followed by endless misery in the form of innumerable chronic diseases which have been the scourge of the human race for thousands of years, and these would never have prevailed to such an extent had physicians endeavoured rationally and zealously to cure and eradicate each miasm by internal *curative* homeopathic medicines, instead of tampering with their local symptoms by topical applications."

What Hahnemann says in the above quotation applies absolutely to treatment by inoculation, and there is no doubt by this mode of treating diseases we shall add one other and *greater* miasm to the cause and production of disease. It is most probable that cancer, consumption, and most forms of epidemic disease, may be caused in this way by producing changes of the most far-reaching kind.

Shade of Hahnemann! So far from homeopathy *dying out*, everything our friends of the opposition are introducing in the way of cure at the present moment bears the impress of "*Similia similibus curantur.*"

KEY NOTES—PRACTICAL ONES.

By AGRICOLA.

CATARRHAL inflammation of the naso-pharyngeal tract, throat and mouth, stomatitis, fetor, retching (pharyngeal), &c., had, during one of my influenza experiences, assumed alarming conditions. Medicines were powerless; I had become quite stricken with despair.

Happening to turn into my kitchen, where from the large cast-iron tea-kettle on one of those low, most useful so-called American cooking stoves (but made in Glasgow) a volume of steam was being belched out of its spout, my eye caught sight on the plate-rack above it of a piece of iron gaspipe $\frac{3}{4}$ -inch bore, 24 inches long, with a socket on one end.

The very thing, I exclaimed, for inhaling steam and for bringing it into contact with the awfully painful, dry, burning mucous membrane surfaces of mouth, throat and nose.

Wrapping a housemaid's dusting cloth around the end, so that I could handle it and thus apply it to my lips, and placing the socket end over the kettle spout, I commenced to inhale the steam, *mixed with atmospheric air* (which entered through the socket end of the pipe), ejecting the exhaled vapour through the nostrils.

In a few minutes relief to pain commenced, the whole surface of the mucous membranes began to pour out a deluge of fluid, then I danced with joy and delight at my happy hit. Since then I have often had to avail myself of the appliance; but it has to be used *with brains*—mechanical, physical and therapeutical.

PRUNUS VIRGINIANA AS A HEART TONIC.—Dr. Seymour Taylor, in the *Medical Record*, says: "There is yet another drug which I venture to think may be unknown to some of you. That is the prunus virginiana or American wild cherry. My attention was first called to it some years back by an article in one of the journals by Dr. Clifford Allbutt. I can reiterate all that he says in praise of the drug. It relieves the flagging and distended ventricle of the chronic bronchitic, it stimulates the flapping chambers of the anemic, and it increases the muscular tone in subjects recovering from fever and other exhausting diseases. It is also given with great advantage in the irritable 'convulsive' heart of the overworked man of feeble physique. It is especially useful in dilatation of the right heart, whether as a result of chronic bronchitis or of mitral stenosis. I use it more in private than in hospital practice; and perhaps no drug has brought me so much credit."—*New York Medical Times*.

MATERIA MEDICA.

PTELEA TRIFOLIATA AS A REMEDY IN FRONTAL HEADACHES.

By FREDERICK KOPP, Greenwich, N.S.W.

PTELEA TRIFOLIATA is commonly known by the name of the Wafer Ash, although it is also called by some Swamp Dogwood. It is a shrub growing to a height of from seven to eight feet. The leaves are trifoliate (hence the descriptive botanical name—*trifoliata*), and are from three to four inches long, and about one and a half inches wide. The leaflets are short and ovate. The flowers are of a greenish-white hue, and have a very disagreeable odour. The tincture should be first made with strong alcohol from the bark, and then dilutions and triturations prepared from this.

It truly is a boon to suffering humanity that there exists such a remedy in the materia medica as *Ptelea trifoliata* for the speedy reliefs and ultimate cure of frontal headache—a by no means uncommon complaint, which is often of a severe, obstinate, and even agonising nature. *Ptelea trifoliata* is a remedy of priceless value in the treatment of frontal headaches, being in this respect almost without a rival. But this result in the treatment of this ill to which human flesh seems to be the heir is but what ought to be expected, if one judges by the symptoms developed in the proving of the drug, in which frontal headaches are very prominent and constant throughout. The following are the symptoms developed, during a proving of *Ptelea trifoliata*, in relation to this complaint.

Pain of a throbbing character over both temples, extending from the left to the right; headache of a persistent nature, the pains being very sharp, and extending from the frontal to the left parietal region; severe frontal headache, greatly aggravated by noise, or by walking; sharp darting pains over left eye, extending right deep into the brain; sudden pains of a pressive nature (neuralgic) in both temples, but most severe in the right. Very heavy and pressive frontal headache, passing from within outwards, and greatly aggravated in the night and by stooping; gloomy feeling in the forehead, with heavy feeling in the occiput; shooting, piercing pain through both temples,

with headache and nausea; sensation as if a nail were driven into the left side of the brain, with pressive pain in the forehead extending downwards as far as the nose; frontal headache, of a racking nature, with great heat in the head and face; continuous frontal headache all day, pressing outwards from within; sudden pains, of a pressive character in both temples, with sensation as if both temples were tightly drawn together or as if the right temple were pressed to the left; severe throbbing, frontal headache, on rising in the morning, with great debility; headache over both eyes; frontal headache, aggravated by reading; dull headache, with acidity of the stomach and great depression; frontal headache, often accompanied with faintness and sudden and severe attacks of vertigo; the frontal headache is greatly aggravated by rolling the eyes upwards. Headache accompanied with a great desire to hurry over everything, especially in reading, writing, or business matters, with a hankering after solitude. Great irritability and fretfulness are also very prominent symptoms, as are also forgetfulness, great languor, and indisposition to do any labour either mental or physical. Weakness of the memory is a very marked symptom, being often so severe that the prover is unable to either read or recognise common names. The thoughts seem confused, and cannot be concentrated, but seem to be chasing each other through the brain. Intolerance of noise is also a prominent symptom throughout the proving, and the headache is greatly aggravated by singing, which causes shooting pains in the forehead, passing from within outwards. There is great weakness of the brain power, especially of thought, memory, and will, and also of the limbs. The headache is aggravated in a warm room, but relieved predominantly while out in the cool open air, when rising from bed, during constant motion, or by pressure. A peculiarity is that the taking of vegetable acids predominantly alleviates the pains, and causes them suddenly to disappear. The pains in the head pass from within outwards. They are also aggravated by walking, stooping, ascending stairs, rolling the eyes, speaking, noise, mental exertion, or by warmth, or while in bed. The sleep itself is very heavy and deep, and is very much disturbed by the severe racking frontal headaches. It is restless and broken, disturbed by terrible and frightful dreams, and even nightmare, the prover often on awaking finding himself in a profuse perspiration. In the morning there is a great

languid and unfreshed feeling, as if from want of sleep. There are also hot flashes in the face, with frontal headache and pain in the eyes. The pulse is increased from normal to 125 beats per minute, and is thready and small. Great heat in the forehead is also a prominent symptom.

Cases in which hepatic and gastric symptoms are prominent, are especially benefited by the use of *Ptelea trifoliata*. The liver symptoms range from a dull, heavy pain in the hepatic region to sharp pains, and even jaundice, although the pain most commonly is of a dull, heavy, aching character, usually aggravated towards morning, as are also the gastric symptoms, which consist mainly of acidity of the stomach, with pain and soreness, and even griping pains; nausea; pressure and sensation as if a stone were lying in the pit of the stomach; frequent drawing or constrictive pains in the stomach; severe pains, bearing down, throbbing and sharp, or else spasmodic and griping, in the bowels, with rumbling. The pains are generally worse on motion, and relieved by pressure.

In cases of frontal headaches unaffected by other remedies, this drug has often worked marvels, owing to its strict homeopathic relation to the same, and, on that account, it can be ill afforded to be missing from our materia medica. In cases also of splitting headaches, with cough, most prominent in the morning, it is strictly homeopathic, and can be depended upon.

In conclusion, *Ptelea trifoliata* is one of those remedies which are generally described as specifics, and in the treatment of frontal headache it is truly specific in its action, and only requires to be better known, so as to be more widely prescribed and used in relation to those symptoms to which it is strictly homeopathic.

CARBO PYROLIGNEUS.*

By AGRICOLA.

My housekeeper has just requested me to refill an empty $\frac{1}{2}$ -oz. wooden phial 6x trituration of the above, which I had just two years ago prescribed for one of my maid servants (now 17), who was at that time *hors de combat*

* The heavy distillate of Wood Charcoal Works (see p. 84 HOMEOPATHIC WORLD, Feb., 1893).

from an intense urethral scalding *after* urination, a condition from which she had suffered every now and then, more or less, for years, the urine at such times being scanty and high coloured.

Upon inquiry, I ascertained from her father that in living members of four generations "som'at wrong wi' the water and the bladder" was characteristic of the family or race, and that such disorder was proverbially the cause of death amongst the men; "the women, you know, sir, do keep such matters to themselves, but all my girls have it."

Now the said patient considers herself practically cured by the above remedy; for the attacks become farther and farther apart, while *instant* relief is invariably observed after one single dose.

I may observe that this most reticent girl is so sensitive to the action of *Nux Vomica* trituration of the ground nut 6x as to experience actual purgation, equal to that from "a dose of salts," and by one single grain only.

Her father and grandfather have years ago both been under my hands, but as I discovered that they never let slip the chance of getting drunk I refer them to their club doctor.

OREODAPHNE CALIFORNICA.

OREODAPHNE CALIFORNICA produces a dull ache in the occipital and cervical regions, extending down to the scapulæ; great heaviness of the head, with a constant desire to move the head, which, however, gives no relief.—*Med. Cent.*

MINUTE-GUN COUGH.—*COCCUS CACTI, ETC.*

COCCUS CACTI has a "minute-gun" cough, and the cough of *Niccolum* is clock-like in regularity, and it is said that *Grindelia* cures a cough from habit.—*Med. Cent.*

[*Corallum Rubrum* should be added to this list: "Firing minute guns" of short, hacking cough all day and for half an hour or so towards evening, increasing to a violent spasmodic paroxysm.—J. H. C.]

COUGH RELIEVED BY LYING DOWN—*FERR. MET. AND MANGANUM.*

FERRUM MET. 30, one dose cured for Dr. Baltzer, of

Stettin, a case of cough without expectoration, the peculiar feature of which being that the cough only occurred when the patient was up, and ceased entirely when lying. He had kept his bed several days to prevent it, but as soon as he got up, the cough came back. The cure by *Ferrum* was permanent.—*Med. Cent.*

[Compare *Manganum*, the metallic congener of *Ferrum*, which also has "cough ceasing on lying down."—J. H. C.]

CAPSICUM AND CHILL.

A CASE of illness occurring in a worker in a capsicum plaster factory is reported (in the *North Amer. Journ. of Hom.* for June) as one of poisoning by this drug. In this case the attack began by a severe chill with shaking, and eventuated in an intense coryza.

In the July number, Dr. von Musits relates a case of tympanites, with cold nose and extremities, and cyanosis, occurring on the fifth day after laparotomy. Enemata were useless, but *Capsicum* 30 every half-hour brought about immediate relief and disappearance of the symptoms within two hours.—*J. B. H. S.*

CARDUUS MARIANUS IN "MINER'S DISEASE" AND LIVER AFFECTIONS.

AN old miner in the gold mines of Bockstein suffered from the so-called "Bergsucht" (miner's disease). His chief symptoms were: earthy complexion, eyes dim, hardness of hearing, mucous coating on tongue, loss of appetite even for his favourite food and tobacco; great dyspnea and palpitation on going up hill; spleen and stomach distended; much wind eructated, constant borborygmus, constipation alternating with diarrhea, but the latter most frequent, evacuations grey, urine scanty and pale, skin dry as if withered, great weakness, pulse slow and weak. Especially remarkable was the disposition of this man. Formerly cheerful, he is now joyless and apathetic; the most important events he took no notice of. I gave him *Tinct. Card.-mar.*, a few drops four times a day. I was unable to effect any alteration in his food, drink, or regimen. A month after this he returned looking much better. On

asking him how he was, he replied: "You have made a new man of me." Almost all the former symptoms had disappeared and given place to the opposite. His complexion was fresh, his eyes sparkled, he was cheerful, wished to live and work, had good appetite, motions brown, more urine passed, pulse normal. He said he now for the first time knew what it was to be well, and he remained so for many years. He had a relapse which yielded speedily to the *Carduus Marianus*.—Pröll, *Zeitch. d. Berlin. Ver.*, xiii., p. 357.

A brewer's man who lived six miles from me and was suffering from ascites caused by infarctus of liver asked me for a remedy. I inferred liver disease from the following description of his symptoms: yellowish-brown complexion, yellow furred tongue, bitter taste, anorexia, constant thirst, hardness in right hypochondrium, frequent eructation of wind, chronic constipation, scanty brown urine; had been in the habit of drinking much beer and wine. I sent him a bottle of tincture of *Card.-mar.* (10 grammes), of which he was to take four drops four times a day. A week later I was informed that the patient, thinking the medicine was meant as a purgative, drank up the whole contents of the bottle at once, as he thought a few drops would have no effect on his sluggish bowels. Well, he did not die; on the contrary, he recovered completely from the dropsical affection in a few weeks, and most of the other symptoms disappeared also.—*Ibid.*, p. 358.

A housekeeper, aged 45, of choleric temperament, had formerly suffered from her kidneys, and on account of want of appetite had for long been eating but little, and as she suffered much from the heat of the kitchen had only drunk beer. She was suddenly seized with edema, which in eight days obtained a great height. Her complexion was yellowish-green. Her eyes were hardly visible, arms and legs felt like boards, hepatic and splenic regions painful, urine very scanty, brown coloured, bowels disposed to diarrhoea, stools whitish grey; she was much troubled by eructations (inodorous); respiration and circulation normal. I gave her *Nux-vom.* 6, one drop three times a day, but as there was no change after three days she got two drops of *Tinct. Card.-mar.* four times a day. The effect was astonishing. From day to day the swelling diminished, and with it the other symptoms, and in twelve days she was

perfectly cured and remains so to this day, fifteen years afterwards.—*Ibid.*, p. 958. J. B. H. S.

COCCUS CACTI IN URIC ACID EXCRETION.

THE patient is a gentleman, aged 75. Up to his 7th year he suffered from enuresis nocturna. When about 20 he had frequently large quantities of uric acid in the urinary excretions. About the same time he got symptoms of chronic catarrh of the colon, with frequent scanty stools containing much mucus, cross humour, itching in anus, threatening of piles, but never any bleeding. Insomnia soon came on, which I attributed to his uric acid diathesis. I gave *Coccus Cacti* without satisfactory result. *Aq. Calcis* seemed to do more good, but not much. I thought it useless to go on without doing something to get rid of the intestinal catarrh. He was sent to Carlsbad for three successive years, with good results to this affection. But the sleeplessness remained untouched. Gradually all kinds of arthritic symptoms were developed, especially in the knee joints. There was occasionally considerable excretion of water, and I observed that the more copious this was the better the patient slept, and the less stiff the joints were. He had occasional attacks of diarrhea, as often happens in patients whose kidneys are affected. They were always attended with relief to the other symptoms. Four weeks at Assmannshausen caused a large excretion of uric acid, but the following year it did not have the same effect. The arthritic affection of the knee got worse. Wiesbaden did good one year, the next none. Half a tumbler of Kronenquelle water every morning had a good effect on the knee, so that he could walk comfortably, which he had not been able to do for long. Since three or four years the uric acid excretions had ceased, and the patient's state grew worse. Insomnia again occurred, diarrhea became much more frequent. A fortnight previous to such an attack the patient noticed that he had a great aversion to butcher's meat. The symptoms convinced me that uric acid was present but was not excreted. How to bring about this excretion was the question. I fixed upon *Coccus Cacti*, and gave it in the 30th dilution, a drop morning and evening. Gradually sleep returned, and there was almost a daily excretion of uric acid, sometimes in the form and size of large shot; the diarrhea ceased, the bowels became regular,

and the patient went about his work with pleasure. I should observe that I had previously given the *Cochineal* in the 2nd and 3rd dilution without effect.—Kunkel, *Allg. h. Ztg.*, cxxix. p. 43. J. B. H. S.

HYPERICUM—ITS HEADACHE, ETC.

In the *North Amer. Journ. of Hom.* for May–July, Dr. Allen criticises the existing pathogenesis of *Hypericum*, and gives a new one. It is in schema form, with clinical notes. From the latter it would appear that besides the ordinary uses of the drug it has been beneficial in emotional excitement, nervous gastric derangements, catarrhal and asthmatic conditions aggravated in fog, and neuritis. Sense as of elongation of the head upwards has occurred in a prover, and has been verified in practice. The remedy is always to be thought of, Dr. Allen says, for pains involving the vertex, especially when they extend down the sides of the head, and even into the face. J. B. H. S.

INSTITUTION.

CALCUTTA HOMEOPATHIC CHARITABLE DISPENSARY.

WE have received the report of this excellent institution for the year 1893–94 from the Physician and founder, Dr. D. N. Banerjee, who has recently been decorated with the Legion of Honour by the Government of France. Among other interesting matter, Dr. Banerjee includes a proving of *Tinaspora Cordifolia* and several clinical cases, of which the following will be read with interest.

“FEVER WITH MERCURIAL RHEUMATISM CURED BY AZADIRACHTA INDICA.

“Case No. 953 of 1893–94. S. D., a Hindu woman aged 30 years, occupation, service, entered the Dispensary on 10th November last, when she was suffering from fever, cough, mercurial eruptions, and rheumatism, when I prescribed our newly proved Indian drug, *Azadirachta Indica*. After six days’ medication she reported *much better*, and four days after reported *nearly cured*, when on the 20th December she returned her admission card with gratitude for her perfect recovery. Several similar cases have been cured with this drug. Let the medical world try its reproving.”

Dr. Banerjee appeals to all the charitable to help him in his

work, which includes giving free diet as well as medicine to the destitute patients. Subscriptions may be sent to the Hon. Sec., Calcutta Homeopathic Charitable Dispensary, 48, Chorehagan, Calcutta.

REVIEWS.

CONIUM REARRANGED.*

Those who have seen such of Dr. Ord's re-arrangement of drug pathogenesies as have seen the light of print will regret to learn from the preface to the one before us that it is the last we may expect to see. The preface is somewhat pathetic reading, but it will be better to quote it entire. Dr. Ord says :

"In sending this reprint of my arrangement of the pathogenetic material on which our uses of *Conium* are based, I have regretfully to say that the project entertained by me of arranging the *Materia Medica* in this manner is now brought to a close. My hope was to provide a really useful *Handy Reference Book of Proving*s for the busy practitioner—one that might supply all that the true Hahnemannian usually required in a single convenient volume, and that also some of those who are prevented by pressure of work from adhering as strictly as they could wish to the master's method of prescribing might possibly be induced by it to relinquish guide books and key-notes in favour of the stronger meat of pure pathogenesy. For nearly two years this work has occupied most of my leisure time ; as a result nearly thirty drugs are practically completed in this form. The impossibility of publishing the book in this country, except at a heavy financial loss, and the improbability of its having any considerable sale elsewhere to compensate for this, have compelled my relinquishing the attempt. Many thanks are due to those colleagues and friends who have so kindly expressed their approval of the method adopted and have frequently encouraged me to persevere. These will now understand that it is no fear of the labour or time involved nor the demands of a busy practice that deter me from the project, but the uselessness to all, except myself, of completing a work which, however valuable it might prove to those who are guided in their drug selection by the 'law of similars,' is nevertheless unlikely to achieve a sale which could in any way meet the heavy cost of its production."

A glance at the work itself is sufficient to show the vast amount of labour Dr. Ord has expended upon it. He has taken as his basis the *Materia Medica Pura* of Hahnemann and the *Cyclopedia of Drug Pathogenesy*, and he has referred every symp-

* *Conium: A Re-arrangement of its Pathogenesy, with a Clinical Guide.* By W. Theophilus Ord, M.R.C.S. Eng., L.R.C.P. Lond. London: E. Gould & Son, 59, Moorgate Street, E.C. 1894.

tom to its authority. The arrangement of the symptoms leaves little to be desired, and in the margin Dr. Ord gives clinical suggestions and medicines which have corresponding symptoms. Now, why has Dr. Ord not succeeded in producing a work answering to the needs of everyday prescribing? In homeopathic materia medicas there are only two kinds which are entirely satisfactory. On the one hand, there is Allen's *Cyclopedia*, which gives every known symptom, and on the other, there are works like the lectures of Dunham, Kent, Farrington, and Hughes, which give readable, comprehensive, memorable pictures of the drugs dealt with, putting the student at once into possession of sufficient facts to make the knowledge available for use; not the *full* use of the drug by any means—that can only be attained through the complete symptomatology and the repertories—but still, a serviceable amount. Dr. Ord in endeavouring to combine the two has just missed the mark. It is only very advanced students of the *Materia Medica* who can read through a proving in *Allen* with keen enjoyment; to such Dr. Ord's setting of *Conium* is eminently readable, but to others we fear it is not. However, we trust Dr. Ord will not give up his *Materia Medica* work. He has in him all the elements of a successful writer in this field, and it is by no means astonishing that he has not found the best form in which to cast it at the outset of his labours. Let him next endeavour to write a connected account, à la Farrington, let us say, of one of the medicines (*Conium*, for instance) on which he has already expended such a labour of love.

THE MUSCLE IN LATERAL CURVATURE.*

An interesting and useful pamphlet. Mr. Smith concludes, as a result of his observations, that in the matter of treatment, "a judicious eclecticism forms the only safe basis." Gymnastics, recumbent position, supports—each have their place, and Mr. Smith very clearly shows what is the place and function of each.

ELECTRO-THERAPEUTICS.†

This tiny booklet consists chiefly of a record of cases successfully treated with electricity by the author. It is prefaced with an interesting introduction by Hurro Nath Roy, L.M.S.

* *A Study of the Muscles in Lateral Curvature of the Spine.* By Gerard Smith, M.R.C.S. London: Riddle & Couchman, 22, Southwark Bridge Road, S.E.

† *Treatment by Electricity, or Electro-Therapeutics.* By Nondo Lal Ghose, L.M.S. Calcutta: Printed by D. D. Basu, 46, Brajo Nath Mitta's Lane.

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.

DORONICUM: REPLY TO "FERRUM."

MESSRS. SMITH, St. John's Nurseries, Worcester, diagnosed my specimen (sent them in full blossom, &c.), as *D. macrophyllum*, and to them I refer "Ferrum."

I shall not be surprised to find that my specimen of *D. macrophyllum* is a hybrid, but the term *usually* occurring twice in "Ferrum's" description is suggestive.

Babington, in his excellent manual, gives two specimens only, the same as "Ferrum," while Messrs. Smith's catalogue names seven specimens. Messrs. Barr, of Covent Garden, name four specimens. As to mine, I cannot ascertain where it came from, while the gardener who gave it me four years ago called it an everlasting sunflower.

Hulme's *Familiar Wild Flowers* (Cassell-) gives in vol. iii. a most excellent illustration, &c., of *Doronicum pardalianches*. Martyn's *Botany* also illustrates it.

I continue to derive unspeakable benefit in numerous aspects from *Doronicum* as a lotion. I class it as an analogue of *Phosphorus Amorphous*, of *Phosphoric Acid* and of the phosphides in its power as a stimulant to the energy of the brain and motive force; and to *Bryonia*, *Rhus*, *Aconite*, *China*, *Calendula*, *Arsenicum*, in removing local pain, stiffness and inflammation. To *Belladonna* in causing brain congestion, vertigo, &c., for which *Digitalis* is a prompt antidote.

Beyond this I will not go at present, as I await further evidence *in propria persona*, although fifty-nine is not an epoch in a man's life for much self-sacrifice *pro bono publico* generally, and for the commercially-keen intellect of London's drug merchants as a body.

AGRICOLA.

P.S.—Upon subsequent inquiry from Messrs. Smith, I learn that *D. macrophyllum* is now properly (botanically) recognised as *D. plantagineum excelsium*. Garden cultivation, special plant-food, soil, and situation materially change the aspect of most specimens of vegetation. Witness my *hyoscyamus*, 6ft. high and most herbaceous; whereas grown *à la nature* amidst the limestone rocks and turf it rarely exceeds 18 inches in height, while specimens are seen here and there only.

One of the limestone burners pared off a cartload of this turf and dug it with his pig-dung into the soil of his garden during winter.

"Believe me, sir," he exclaimed, "I had millions of those plants spring up" (alluding to henbane), "and for years I thought I should never get rid of them!"

MICROBE KILLER. INTERNAL TUMOURS.

"BELLIS" asks:—

1. Radam's Microbe Killer is sold in three different degrees of strength, viz., Nos. 1, 2, and 3, the latter being the strongest. Was the analysis by Dr. Eccles made from No. 3, and is the strength regulated by the addition of the muriatic acid?

2. Have any cases of internal fleshy tumours ever been reported or come under notice as having been cured by the internal administration of drugs? If so, how were the tumours affected by them?

REPLY.

1. We have no information beyond what has already appeared in the *WORLD*. If any of our readers have, we shall be glad to hear from them.—Ed. *H.W.*

2. Homeopathic literature abounds in records of the cure of tumours—internal and external. The indicated medicines brought about their absorption, and they simply disappeared.—Ed. *H.W.*

GENERAL CORRESPONDENCE.

CHEAPNESS *VERSUS* QUALITY.

To the Editor of the HOMEOPATHIC WORLD.

DEAR SIR,—Dr. John Maffey, of 26, Wynyard Square, Sydney, N.S.W., has very properly drawn attention to and complained of "the action of a London firm of manufacturing chemists in flooding Sydney with advertisements of homeopathic 'compounds' and proprietary articles, and also of ordinary homeopathic medicines (sold through a drapery firm), at prices unfair to the local homeopathic chemist."

Unfortunately, the above statements of Dr. Maffey are only too true, and it is, therefore, a duty we owe to suffering humanity, that we should caution the public to be on their guard concerning these cheap preparations. The unsatisfactory results obtained from these so-called homeopathic medicines undoubtedly go a long way to lower in the eyes of the world, and to hold up to ridicule the treatment of disease by the law of similars, and, far from making converts to our cause, only drive them from us. In a matter of life and death it is indeed the height of folly for any one to purchase these cheap nostrums, instead of procuring the genuine article from some responsible homeopathic chemist. The "penny-wise, pound-foolish" system is a very bad one, even at the best of times, but, when it is introduced into the

treatment of disease it becomes doubly so, and is certainly not very far from criminal.

Concerning the sale of homeopathic medicines by drapery firms, I am reminded of a case which occurred a few years ago, where the head of one of these firms paid a visit to the pharmacy of a homeopathic chemist for the purpose of purchasing a 1 oz. bottle of ϕ tincture of *Rhus toxica dendron* for rheumatism. The chemist, being aware of the fact that the draper kept the drug in stock himself, wished to know how it was that he did not make use of the same, instead of coming to him. "Ah," replied he, smiling, "it may please some people to buy them, but, you see, I am in pain, and therefore I want *something I can rely on* to give me relief!" What a candid admission for one to make of his stock of drugs! Well, the man certainly spoke the truth, and thus the value of these preparations may be easily understood and weighed, even by the most simple.

Another danger to the progress and welfare of homeopathy in Sydney is the preparation of homeopathic (?) medicines by allopathic chemists, and sold to the public as such. I have had the opportunity of examining numerous samples of these, the best prepared of which would be a disgrace to any homeopathic pharmacy. These tinctures, instead of possessing the bright and sparkling colour of our drugs, with which we are so familiar, were dull and cloudy, being mostly prepared from allopathic preparations and extracts, such as *Nux vomica*, *Aconitum*, *Belladonna*, *China*, *Podophyllum*, &c. Of course, such remedies as *Bryonia*, *Baptisia*, *Apocynum*, *Coffea*, *Silicea*, *Sepia*, and the like, not being members of the allopathic pharmacopeia, were conspicuous by their absence. This chemist, on being asked his opinion of homeopathy, ridiculed it as an absurdity, asserting that the theory was false and unnatural, and that its drugs in the treatment of disease were worse than useless. "How is it," I asked, "if such is really the case, that you go to the trouble of preparing them?" "Oh!" he replied, "people will come in here and ask for them, and so I have to keep them for the sake of their custom!" Another well-known and old-established chemist of the old school in Sydney was for years in the habit of filling small bottles with a solution of rectified spirits of wine and water and labelling them as *Aconitum*, *Belladonna*, *Bryonia*, *Phosphorus*, *Nux vomica*, and so on! The ignorance of the two chemists above alluded to, in their way of preparing homeopathic drugs, is self-evident, and it is much to be regretted that the public should be thus gulled by such unprincipled men.

Beyond a doubt, the remedy lies in the hands of the people. Let them patronise only responsible homeopathic chemists, and, instead of dissatisfaction and failure, as is so often the case, they will be gratified and rewarded by the speedy restoration of the

patient to health. Special training and knowledge is required in the preparation of our tinctures, simple though they may appear, and no member of the old school, untrained as he is, can accomplish this satisfactorily. Allopathically prepared drugs in a diluted state are far from being genuine homeopathic tinctures, and the public should hesitate in purchasing them at any price.

Yours faithfully,

Greenwich, N.S.W.

FREDERICK KOPP.

VARIETIES.

THYROID EXTRACT IN WASHERWOMAN'S ECZEMA, AND AS A LOCAL APPLICATION.—S. H., aged 42, a washerwoman, was placed on the sick list on January 27th. The patient was suffering from an acute attack of typical eczema, of the impetiginous type, with intolerable itching and exudation. The legs and arms were chiefly affected. She was unable to stand to do her daily work. She was treated with the ordinary remedies for a week, and these failing to do her any good, I determined to give thyroid tabloids a trial. On February 6th three tabloids were daily prescribed. The result was most gratifying. In twenty-four hours she began to peel, and, when I visited her on February 9th, the epidermic scales and crusts filled the bed and littered the floor. The patient expressed herself much improved by the medicine, and the soreness about her limbs had disappeared. The eruption still further yielded to treatment, and, on February 12th, she was able to attend at the out-patient department practically convalescent. This patient occupied a small room in a back court, the general surroundings being very unfavourable for a good recovery. I think the remedy undoubtedly had a curative effect in this case.—*New York Medical Times.*

TUBERCLE AND CANCER.—Mr. W. Roger Williams, F.R.C.S. (Preston), writes: In Sir J. Paget's lecture on Scientific Temper, I am surprised to read the following remarks: "It has never been carefully studied what may be the result when one parent has one transmissible disease, and another has another; what comes if one parent is a member of a cancerous family, and another a member of a tuberculous family? Do these two diseases in any respect disturb one another; are they mutually exclusive or do they mingle together? We know that acute tuberculosis and acute cancer never make rapid progress together; they seem, in so far as that, to be antagonistic. But what comes of it when they are mingled together by inheritance?" From this I conclude that Sir J. Paget is unacquainted with the work done by me in this direction during the last few years. From the very standpoint advocated by him I have investigated the inter-relations of tubercle and cancer, on a far larger scale than has ever before been attempted, with the result that those demonstrated the existence of certain correlations between these two diseases, never before set forth in their

true light, which have important bearings on the etiology and treatment of cancer. As I have fully entered into this subject in my immediately forthcoming book on "Diseases of the Breast," I will here merely set forth in the briefest manner possible the conclusions at which I have arrived. These are as follows : 1. Pulmonary tubercle is by far the most prevalent disease among the relatives of cancerous persons. Such persons are very much more prone to it than the rest of the community ; indeed, their liability is so considerable as even to equal that of the phthisical themselves. 2. A large proportion of cancer patients are the surviving members of tuberculous families. 3. No heritable condition is more favourable to the development of cancer than that which predisposes to and accompanies tubercle. The like is true of insanity. 4. Nevertheless, between tuberculous and cancerous manifestations there is a certain antagonism ; for it is very rare to find both diseases in active progress in the same individual. 5. As a rule, where tuberculous diseases are most prevalent there cancer is rarest. 6. The great increase of cancer during the last half century has coincided with a remarkable decline in the death-rate from tuberculous diseases, especially phthisis. It seems to me exceedingly probable, from considerations derived from the study of the family history of cancer patients, that a large proportion of those thus saved from tubercle eventually perish of cancer and insanity ; and I think the increase in the latter disease has largely been brought about in this way. 7. It will be gathered from the foregoing that I regard the predisposition to cancer as closely allied to the tuberculous predisposition, of which in all probability it is but a diluted form.—*British Medical Journal*, November 3rd.

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.

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| <p>Birch (E. A.). The Management and Medical Treatment of Children in India. 3rd ed., Revised and Enlarged. Cr. 8vo. pp. 490. (Thacker. 10s. 6d.)</p> <p>Bell (Robert). The Home Book of Medical Treatment: Being an Encyclopedia of Domestic Medicine. Cr. 8vo. pp. 460. (Bryce: Glasgow. Simpkin. 6s.)</p> <p>Bradbury (J. B.). An Inaugural Lecture on Pharmacology and Therapeutics. 8vo cl. Macmillan. Net, 1s.)</p> | <p>Cooper (A.). Syphilis. 2nd ed. Enlarged and Illustrated by 20 Full-page Plates, 12 of which are Coloured. Edit. by Edward Cotterell. 8vo, pp. 498. (Churchill. 18s.)</p> <p>Crookshank (E. M.). The Prevention of Smallpox. With Special Reference to Origin and Development of the Stamping-Out System. 8vo, ed. (Lewis. 1s.)</p> |
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- Dowse** (T. Stretch). On Brain and Nerve Exhaustion (Neurasthenia), and on the Nervous Sequelæ of Influenza. 5th ed. 8vo, pp. 140. (Baillières. 2s.)
- Fenwick** (E. Hurry). Epitomes of Modern Surgical Progress, for Students and Practitioners: Urinary Surgery. Illust. Cr. 8vo, pp. 219. (Wright & Co.: Bristol. Simpkin. 4s.)
- Fink** (G. H.). Methods of Operating for Cataract and Secondary Impairments of Vision. With the results of 500 Cases. With Illusts. Cr. 8vo, pp. 76. (Churchill. 5s.)
- Gowers** (W. R.). The Dynamics of Life: An Address given before the Medical Society of Manchester, Oct. 3, 1894. Cr. 8vo. (Churchill. 2s.)
- Headley** (W. B.). The Evolution of the Diseases of Women. 8vo, pp. 392. (Smith & Elder. 16s.)
- Hunter** (C.). Manual of the Dental Laboratory: A Practical Guide to its Management, Economy, and Methods of Manipulation. (Baillières. Red., 3s. 6d.)
- Husband** (H. Aubrey). The Students' Handbook of Forensic Medicine and Public Health. 6th and Revised ed. 12mo, pp. 670. (Livingstone: Edinburgh. Simpkin. Net. 10s. 6d.)
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- Onodi** (A.). The Anatomy of the Nasal Cavity. Roy. 8vo. (Lewis. Net. 6s.)
- Rolleston** (H. D.) and **Kanthack** (A. A.). A Manual of Practical Morbid Anatomy: Being a Handbook for the Post-Mortem Room. (Cambridge Natural Science Manuals.) Cr. 8vo, pp. 254. (Cambridge Warehouse. 6s.)
- Schimmelbusch** (C.). The Aseptic Treatment of Wounds. Trans. Cr. 8vo. (Lewis. 5s.)
- Sheld** (A. M.). Diseases of the Ear. With 4 Coloured Plates and 84 Woodcut Illusts. Cr. 8vo, pp. 272. (Cassell. 10s. 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 the "MANAGER" of the Homeopathic Publishing Company, 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. Herring, London; Dr. Cooper, London; Mr. Fredk. Kopp, Greenwich, N.S.W.; Dr. Heath, London; Dr. Lambert, London; Dr. Burnett, London; Mr. J. Meredith, Lydney.

BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Chemist and Druggist.—Homeopathic Review.—Medical Argus.—New York Medical Times.—Hom. Envoy.—Minneapolis Hom. Mag.—Hahnemannian Monthly.—N. A. Journal of Homeopathy.—Homeopatisch Maandblad.—Maanedskrift f. Hom.—La Homeopatia.—Pacific Coast Jour. of Homeopathy.—Medical Century.—American Homeopathist.—Hom. Recorder.—Monatsblätter f. Hom.—Allg. Hom. Zeit.—Family Doctor.—Clinique.—L'Art Médical.—Calcutta Journ. of Medicine.—Southern Jour. of Homeopathy.—Rev. Hom. Belge.—Journal Belge d' Homeopathie.—Hom. News.—Archiv. f. Hom.—Vegetarian.—Primary and Secondary Symptoms and Their Relation to Dose. Dr. Hale.—Essentials of Homeopathic Therapeutics, by Dr. Dewey.—The Animals' Friend.

THE
HOMEOPATHIC WORLD.

MARCH 1, 1895.

THE FROST AND INFLUENZA.

“A GREEN CHRISTMAS makes a fat churchyard,” says the old adage; but the truth of it would seem to depend very much on the kind of weather that follows. An open winter like that of last year coincided with a low death-rate. And this year, so long as the weather was mild, the death-rate remained quite moderate. But the frost has changed all that. One of the effects of it has been to start influenza, which has been with us more or less for the last five years, once more on an epidemic career. Some innocent people have imagined that a good hard frost would “kill the germs” of influenza, and rid us permanently of the plague; but seeing that the home of the disease is Siberia, it does not require much thought to perceive that the germs of it must be pretty well used to frost before they come on their travels. At any rate, the facts of the past few weeks will have sufficed to dissipate this pleasing delusion from the minds of most of those who have entertained it.

The infective principle of influenza appears to be everywhere. In ordinary health most people are proof against it. It requires some lowering influence to depress the vitality in order to give it a start in an organism or in the community, and this influence the frost has supplied. And the fog has assisted the frost.

In any case the malady is with us once more, and it may be useful to recapitulate some of the medicines which have been found most useful in coping with it.

The drug which comes nearest to being a specific is *Baptisia*. The heaviness, besotted appearance of the eyes, headache, foul tongue, sore-throat, soreness all over, and general uneasiness with or without fever, faithfully reproduce the main features of *Baptisia*, and this medicine given in any potency will quickly cure a large proportion of cases. Even when cough supervenes *Baptisia* will often do all that is required for that.

Bryonia will be preferable when the aggravation from movement is well marked; headache aggravated by coughing; cough causing pain in the chest relieved by lying on painful side.

Sanguinaria. Cough and coryza, pains chiefly on right side of chest or right shoulder, expectoration difficult, great relief when it comes up.

Cimicifuga racemosa. Pains in the eyeballs or back of eyes very marked. Pain in head, nape of neck, and back, and muscles generally. Restlessness and sleeplessness at night.

Glonoin. Bursting pains in the head or any other part will single this drug out in preference to any other.

Belladonna. Violent throbbing headache, sore-throat, hoarseness, dry cough, heat of skin, and restlessness. Inflammation of the ear, especially the right, neuralgia right side of head and face.

Phytolacca. This medicine also covers a large number of cases. The especial indication is inflamed and enlarged tonsils with white spots (the herpetic sore-throat of Trousseau). It has also intense headache and pains in the back and general rheumatism. It is allied botanically to *Belladonna*. Aggravation from damp is a characteristic feature, rendering it suitable (like *Rhus*) for cases in which a wetting has been the determining cause of the attack.

There is no need to go through the whole list of remedies. The well-known indications for *Aconite*, *Arsenicum*, *Camphor*, *Gelseminum*, *Nux vomica*, *Sulphur*, &c., will single them out where cases present themselves. There is, however, one

remedy which has proved of very great service in removing the great debility so often left behind, and that is *Psorinum*. Intense prostration and desire to lie down, and great sensitiveness to cold air are the leading "notes" of this medicine. The 30th potency is the lowest which is ever prescribed, and this, given two or three times a day, will answer all purposes.

In acute attacks it is well to repeat frequently, about every hour, and where the indications are clear the higher the potency the more prompt is the action in our experience.

BRASSFOUNDERS' AGUE.—The Home Secretary has given notice of his intention to schedule brass casting and mixing as unhealthy industries. Of these two processes the mixing produces the more definitely toxic symptoms, probably owing to the larger development of fumes which takes place. The copper is usually melted first and then the zinc is added, a considerable quantity of it rising in the form of vapour, which is immediately converted into oxide. It is interesting to observe, however, that in the manufacture of zinc the symptoms which occur are somewhat different, being chiefly the result of irritation of the respiratory and digestive tract, although later on various nerve degenerations seem to result. In brass casting, however, there is in addition a group of symptoms spoken of as "brassfounders' ague," which is thought by many to be due to some admixture of copper in the vapour. "The so-called ague fit is ushered in by languor and depression, then prostration with pallor, cold sweats, and chills, that even may amount to rigors, with chattering of the teeth, precordial anxiety, headache, nausea, and muscular pains. The onset of vomiting arrests the symptoms, and usually is followed by sleep, from which the patient arouses almost well" (Arlidge). The symptoms are pretty clearly those of an acute poisoning by an overdose of the metal. If one considers the very different melting points of the two metals, it seems extremely probable that the zinc by boiling in the midst of the copper mechanically carries up in its fumes a certain admixture of copper or its oxides, for whereas copper requires a temperature of about 1,100° to melt it, zinc boils at a temperature between 930° and 954°. "Over and above the production of the bastard ague described, brassfounding is charged with various other ill consequences to health. Among these Dr. Hogben mentions the development of gout and chronic nephritis with disinclination to active exertion, progressive paresis of legs, tremor, muscular wasting, and not infrequently locomotor ataxy" (Arlidge). The rules proposed by the Home Secretary aim principally at cleanliness both of person and workshop, ventilation, provision of respirators while actually casting, and prohibition of eating where casting or mixing is carried on.—*British Medical Journal*.

NEWS AND NOTES.

HOMEOPATHIC VICTORY IN SAN FRANCISCO.

THE following from the *San Francisco Call* will be read with interest. It will be remembered that in the United States many of the hospitals are Government institutions, supported by the community, hence the fight there is on different grounds from what it would be in the case of our own hospitals. It is something like what the Disestablishment question is here:—

“The old time-honoured fight between the rival schools of medicine—the homeopaths and the allopaths—cropped up before the Board of Freeholders last evening, and for the time being, at least, the homeopaths came out victorious. Drs. Kerr R. Beverly, Cole, and W. F. McNutt, of the Medical Department of the University of California, appeared before the Board and asked that ten of the fourteen wards at the City and County Hospital be reserved for the use of the teachers of their institution and the Cooper Medical College.

“They desired the disposal of the four remaining wards to be left to the Board of Health. This, as Mr. O’Brien expressed it, would virtually keep any other school except the allopathic from gaining a foothold in the hospital.

“When the physicians had retired, Louis Sloss, jun., made a spirited attack on the proposition of giving any special school a monopoly of the privileges of the hospital. He said that the homeopathic school was believed in by thousands of San Francisco’s best people, and he thought they had fully as much right to teach in the wards of the hospital as any other school.

“‘Do you believe that this—um—homeopathic school is the equal in dignity and standing of the regular school?’ asked Mr. Marye.

“‘I do, decidedly,’ returned Mr. Sloss, ‘and I can call your attention to any number of citizens and taxpayers who swear by it. I ask that the Hahnemann Medical College be given special recognition as well as the California University and Cooper Colleges.’

“After several amendments had been offered and lost, a motion to that effect was finally carried, and two wards were assigned for the Hahnemann College.”

THE “INDIAN MEDICAL CONGRESS.”

FROM Dr. Banerjee’s letter, which we publish elsewhere, it will be seen that the “Indian Medical Congress” was anything but the cosmopolitan gathering which its name would lead one to expect. It no doubt delighted Mr. Ernest Hart and the kindred spirits which assembled to applaud his sentiments, but it would be more correct to describe it



as a mutual admiration assembly of allopaths and experimenters, chiefly European, now resident in India. This fact is emphasised in an able article in the *Statesman*, one of the most influential of Indian journals, to which our notice has been drawn by Dr. Sandberg. It is often lost sight of in this country that the number of practitioners possessing European degrees among all the hundred millions of India would leave not more than two or three to the million. A really representative Congress would take in homeopaths and also native practitioners of all descriptions in whose hands is the vast bulk of the medical work of the country.

MEDICAL LEGISLATION IN NEW SOUTH WALES.

A CORRESPONDENT has sent us the *Sydney Daily Telegraph* of December 27th, containing an able article by Frances G. Holden, entitled, "Common Sense About Quackery," from which it may be useful to publish a few extracts. Medical trades unionism appears to be very well understood by some, at least, of the laity in the Colonies :—

"A Medical Bill is thoroughly just and right in so far as it aims at preventing the adoption of registered medical titles by other than those to whom they legally belong, in order that the public may be able to discriminate between regular and irregular practitioners. Upon this point there can be no two opinions, but in regard to further provision opinions may widely diverge, and as health legislation intimately concerns every member of the community, such legislation to be sound and equitable must be based upon actual fact rather than upon current theory, however plausible and widely accepted. . . .

"To clear the ground of any misconception, let me quote, as the solid foundation of whatever I think, say, or write upon this subject, a definition of the true healer, which must presumably commend itself to every sane mind as absolutely unassailable. 'It is neither the dress, carriage, position, nor equipage that makes the doctor, but simply the knowledge how to cure disease and the capacity or power to do it. They who can accomplish the same, whether Jew, Turk, or Christian, savage or civilised, are doctors, and they who cannot are quacks, no matter whether educated for the express study of the profession or not.' If that be not good common sense I know not what is; and once granted, it carries with it logically, upon the strength of a verifiable fact, all that the worthy *bonâ-fide* unregistered practitioner, and those who employ him, ask or desire. . . .

"There is 'quackery,' undoubtedly, among the ranks of the unregistered, and there is 'quackery' as undoubtedly in the ranks of the registered. But the one stands open to detection and punishment, the other is practically invulnerable, and in so far more dangerous, to

an unknown extent. If the first be a devouring Nile to its devotees, the second, with its tremendous trades unionism of professional convention (where 'honour rooted in dishonour stands'), vicious medical etiquette, locked freemasonry, and social traditional prestige, shielded in its errors, neglects, and perfunctoriness by the sacro-sanct aegis of legal diploma and all that pertains thereto, is a car of Juggernaut, crushing its custom-ridden followers under its arrogant cast-iron wheels."

THE MATTEI SECRET.

IN an interesting article entitled "In Defence of Matteism," which appeared in *The Humanitarian* of January, Mr. Gliddon tells of attempts that have been made to induce Count Mattei to reveal his secret and the degree of success that has attended these efforts.

"For some time past we have been trying to persuade Count Mattei to tell us enough about the composition of the remedies for us to be able to satisfy those who wish to have a fairly definite idea respecting the nature of the drugs which they are taking, and which would at the same time not be sufficiently clear to enable any imitator to prepare any one of the remedies. And I am now able to state, on the authority of Count Mattei himself, that the globules belonging to the two great groups into which he divides his great constitutional medicines are medicated with the life blood or elaborated saps of certain trees. Count Mattei for the present declines to reveal the exact details of the treatment to which the saps are subjected after they have been drawn off from the trees. The names of the trees, from which the various remedies applicable to the treatment of the blood and its vessels on the one hand and the lymph and its vessels on the other are derived, include the following: the cedar, the pine, the laurel, the fir, and the evergreen oak; the elm, the poplar, the beech, the oak, and the willow. The saps are drawn from the trees at certain fixed seasons, and then subjected to special processes of distillation. The *electricities* are derived from shrubs growing on the Apennines, the names of which are still kept a profound secret."

This is not very much, certainly. It is plainly useless to expect Count Mattei to act like other people, but it certainly was incumbent upon him in appropriating the word "homeopathy" to show in what way he used homeopathic indications in prescribing his remedies.

TREATMENT FOR TAPEWORM.

A CORRESPONDENT of *The British Medical Journal*

(February 16th) sent the following note to that journal:—

“Before commencing to treat an individual for tapeworm, the physician would do well to satisfy himself that there actually is a member of the tenia family located within his patient's intestine. Cases of self-delusion in the matter are by no means uncommon. There is but one pathognomonic sign of the presence of tapeworm: the passage *per anum* of fragments of segments, more or less numerous, detached from the main body. According to Dr. Dujardin-Beaumetz, the best of all tenicides is the pelletierine of Tanret. His method of prescribing is as follows: The patient's bowels should be thoroughly cleared out towards evening by means of a copious enema; and, if he cannot do without supper altogether, the meal should be as light as possible, consisting chiefly of milk. The next morning, while fasting, 9½ grammes of sulphate of pelletierine should be given in solution, with ½ gramme of tannin, and ten minutes after swallowing the dose the patient should drink a large glassful of water. In three quarters of an hour he should conclude the treatment by taking ʒjss of castor oil. Pelletierine is not a suitable vermifuge for children, for whom the subjoined formula is recommended: Pumpkin seeds, newly hulled; sugar, of each 40 grammes; orange flower water, a sufficiency to make a paste; the whole to be taken, fasting, in the early morning.

“At Aden, where tapeworm is very common, pumpkin seeds are in high repute as a palatable and successful remedy, not only in the case of children, but also for adults. Large quantities of decorticated and crushed seed are freely swallowed in the form of pottage made with milk, the patient having abstained from all food during the preceding twenty-four hours, and also, as far as possible, from all drink. This treatment is said never to fail, but the writer can only vouch for a single case, that of a European, in whom the pumpkin-seed regimen was eminently successful in bringing away the head of a tenia solium—a very old stager—together with several yards of body, a variety of remedies, including oil of male fern, having previously been essayed in vain.

“In conclusion, here are two minor, but practical, points connected with the treatment of tenia. Never exercise traction on a protruding worm; the prolapsed portion should be snipped off. After taking a vermifuge the patient should pass his dejections into a receptacle half full of water, in order that, if present, the head of the parasite may not escape identification.”

RESCUCITATION OF THE APPARENTLY DEAD.

THE following is from the Paris Letter of *The Medical Press*, February 13th:—

“At the last meeting of the Académie de Médecine, M. Laborde compared the results of the different methods of recalling to life employed. Insufflation from mouth to mouth, contrary to what is believed, introduces into the infant but a very small amount of air;

besides, as a result of his experiments, he was persuaded that the mechanical phenomena of respiration were not due, directly at least, to the penetration of this air, but to the stimulation of the mucous lining of the air passages. It was well that it was so, as the air we endeavour by this means to introduce is what we *expire*, and consequently would be hurtful to the child.

"Insufflation by means of a laryngeal tube sends air into the bronchi, but how does it act? It excites the broncho-pulmonary mucous membrane, dilates the lungs and the thoracic walls, and re-establishes finally those movements which preside over respiration. But the air does not alone produce this function, the presence of the tube itself acts as a very stimulating influence, so much so that he has known of cases where its simple introduction provoked the respiratory movements desired. Flagellation, pressure on the thoracic walls, as advised by Marshall Hall, Sylvester, &c., have certainly produced this reflex action, but the exciting cause has always been indirect, whereas, *traction of the tongue*, in acting on the sensitive respiratory nerves, and in particular on the superior laryngeal and glosso-pharyngeal realises the most intense direct stimulant, which explains its superiority over every other method and especially that of insufflation."

HYDROPHOBIA.

T. A. W. writes :—

"I have been trying to find out the facts about hydrophobia, and have thought the result would interest your readers. This terrible disease, of which the average person turns pale with fright if he hears it mentioned, kills possibly two persons out of 10,000,000 in 32 years; on the other hand, summer diarrhoea of children and bronchitis in winter are responsible for 80,000 deaths in 10,000,000. Surely the scare about hydrophobia is unworthy the boasted practical common sense of the English people."

INOCULATED MEAT AND POISONED FOOD.

THE following letter from the pen of Mr. Joseph Collinson appeared in the *Newcastle Weekly Chronicle* on the 2nd of February last :—

"SIR,—With regard to the Pasteurian method of vaccinating beasts and sheep (fleshers' meat) with '*virus charbonneux*' (done with a view to confer immunity against the natural infection of anthrax), which, I learn through the medium of a contemporary of recent date, is still very much advocated and occasionally practised by some British veterinarians, Dr. Koch, the great German authority on such matters, considering the danger to which this culture so applied subjects men and animals not so vaccinated, has uttered a strenuous warning against its employment for this purpose. In his reply to Pasteur, *L'Inoculation Preventive du Charbon*, a work too little known, he says:

'The preventive vaccination of Pasteur cannot be considered practically utilisable, on account of the insufficient preservation that it gives against natural infection, on account of the short duration of that preservation, and on account of the danger to which it subjects men and non-vaccinated animals,' p. 35. And Professor Klein, of the Local Government Board (I can quote no higher authority), in his valuable supplement to the Twelfth Annual Report of this Board, has given utterance to a somewhat similar warning—that as this country is 'comparatively free from anthrax . . . the introduction of the so-called "vaccine charbonneux" is most dangerous, and capable of producing incalculable mischief.' In this same report he also put the question: whether the cultivation of anthrax virus prescribed and sold by Pasteur was ineffective for the purpose for which it was designed and said, 'The answer is simply, "Yes, it is perfectly ineffective,"' p. 208. This business—the whole of this business—is most filthy, dangerous to the public health, and financially risky to the agriculturist and slaughter-man: reasons enough, surely, for its total prohibition by law, as I most earnestly hope it shortly will be. Meanwhile, it is necessary to advise stock-breeders, and owners, and butchers, to set themselves firmly against the practice, and I beseech you to help me to do this by publishing this brief minute in your valuable paper.—I am, &c.,

"JOSEPH COLLINSON.

"Wolsingham, January 19, 1895."

THE TREATMENT OF GOÏTRE BY THYROID FEEDING.—P. Bruns (*Deut. Med. Woch.*, October 11, 1894) has tried thyroid feeding in cases of goitre, especially in young people. Cystic goitre, of course, is not amenable to this treatment. Of twelve cases goitre disappeared either entirely or in great measure in nine. In four cases completely cured the thyroid was enlarged in all its parts, the one half being about the size of a hen's egg. In one case there was stridor with difficulty of breathing, which also disappeared. In a boy, aged 14, a goitre as big as the fist diminished in four weeks, so that the circumference of the neck became less by 7 cm. In a man, aged 40, a right-sided goitre of about the same size, and present for six years, caused displacement of the trachea, and increasing difficulty of breathing. It disappeared after four weeks' treatment. In three patients, aged 23 to 57 years, the results were negative. The treatment lasted six weeks in one case and fourteen days in the other two. Strumectomy showed in one case a hyperplastic goitre with small cysts, and in another abundant colloid material. In only one case did the treatment give rise to unpleasant symptoms—namely, headache, anorexia, frequency of pulse, and loss of weight. This occurred after 46 g. were taken, distributed over fourteen days. The author concludes that thyroid feeding exercises a specific effect on many goitres, causing their rapid diminution or disappearance. He refers to Reinhold's cases (*Epitome*, August 15, 1894, par. 157). The numbers are still much too small to permit of conclusions, but it is desirable to know what kinds of goitre can be thus treated. Provisionally it would appear to be the relatively recent non-cystic goitre, especially if occurring in young people.—*British Medical Journal*, November 3rd.

ORIGINAL COMMUNICATIONS.

TWO CASES OF TUMOUR CURED BY MEDICINE.

By P. C. MAJUMDAR, M.D., CALCUTTA, INDIA.

CASE I.—TUMOUR OF ANTRUM OF HIGHMORE.

A BOY about twelve years of age, son of a wine merchant of this city, had frequent attacks of cold from slightest exposure. The boy is of a delicate state of health, thin but well-built. I saw him on the 15th November, 1894, with a protuberance on the right side of his cheek; the superior maxillary bone was pushed out. It was about the size of a large orange, extending from the outer border of nose to the outside of the cheek-bone. It did not invade the orbital fossa, but the hard palate was pushed out to some extent. On pressure upon the tumour, hard, resistant bone felt underneath the finger. The patient complained of no pains anywhere. He was examined by an eminent surgeon of this city, who declared it to be a tumour in the Antrum of Highmore, and nothing but an operation was the remedy.

He was brought to my office, and after a careful search of the constitutional symptoms I came to the conclusion that *Calcaria* was the right remedy for it. One dose of *Calcaria Carb.* 30 in the morning for a week.

Report was not favourable after the lapse of a week. I changed my prescription, and gave *Silicea* 30, a dose every day.

No improvement after five days.

Calcaria Fluorica 12, one dose every third day, was my last prescription.

No notice from the patient for a fortnight, after which I learned there was some improvement.

Sac lac one powder every day, and favourable report of continued improvement brought to my notice now and then. The tumour seemed smaller and smaller. About a month after my last administration of *Sac lac*, the patient was brought to my office, and I was quite surprised to find no trace of the tumour left. The patient continues in good health up to this time.

CASE II.—VAGINAL POLYPUS.

A young handsome lady, aged 19, of a robust con-

stitution, consulted me on the 16th July, 1891, for uterine hemorrhage. The loss of blood was alarming, and she became pale and bloodless in consequence. The blood was of a florid hue and thin consistency, with a very few clots. She was otherwise healthy. Menstrual flow since its commencement in her thirteenth year was normal in every respect.

Two months before she consulted me she had noticed an unnatural flow of blood one day, and since then she was in flow almost every day.

I gave her *Sabina* 3x one dose morning and evening. There was no hemorrhage for a week, but on the next day dark, coagulated, fetid blood appeared. *Secale Cor.* 3x checked the hemorrhage for a time, but it reappeared with double violence. I had to take the help of a female doctor, who, after careful examination, found a polypus in vaginal wall as large as a pigeon's egg, partly black and partly of red colour.

I administered a dose of *Sanguinaria* 3x three times a day and an injection of the same, ten drops of the mother tincture in two ounces of water. Three days after, the tumour was dislodged and hemorrhage stopped for the last time. About a year after she conceived and gave birth to a healthy male child.

Jan. 9, 1895.

DEAF-MUTISM AND THE EARACHES OF CHILDHOOD.

A PAPER.

By ROBERT T. COOPER, M.A., M.D., Phys., Diseases of Ear, London Homeopathic Hospital.

GENTLEMEN,—Casting about for a subject upon which to address you to-day, the impression, upon reflection, gained upon me that the sooner I bring forcibly forward the important subject of Deaf-mutism—more especially as it possesses so much collateral interest to the general practitioner—and, if possible, enlist your sympathies thereupon, the better.

Homeopathy, as we all know, is a system of *curative*, allopathy a system of *palliative*, therapeutics; and though by the administration of homeopathic remedies palliation—pure and simple—often is induced, and by the adminis-

tration of allopathic a curative influence results, we cannot, speaking generally, describe homeopathy as a palliative, much less allopathy as a curative, system.

Essentially, then, a curative system, it is of the utmost importance that we endeavour to extend the sphere of its curative influence, and our aim, of course, ought to be not alone to make addition to the number of striking and isolated cases for which we find it applicable, but more a great deal, if this be possible, to add to the classes of diseases for which we find it useful.

To be able to accomplish such a considerable result as this at the present day seems hardly possible, seeing that we have applied our remedies to all forms of disease.

That this is not so, and that deaf-mutism constitutes a class, or at any rate a variety, of disease for which homeopathy has not been claimed with any prominence as a curative system is, I think, undeniable.

Why this is so we need not stop just now to inquire.

Deaf-mutism, though often classed as a distinct and separate affection, is in reality nothing more than a symptom of what at first was very ordinary and perfectly curable aural catarrh. It is when this catarrh is of considerable duration, and when the child continues to grow while the catarrh remains uncured, that the vocal organs not being called into play, the power of speech is necessarily lost, and there ensues the very decided and pronounced affliction, deaf-dumbness.

This, then, is the simple pathology of the great majority of cases of deaf-dumbness, always excluding—as of course we must—the cases that arise from causes that are in operation previously to the birth of the child, and which of course are beyond the range of our present inquiry.

Though but a symptom, deaf-mutism has by the profession from all time been looked upon as so completely beyond remedial range, that little seems to have been done, even by ourselves, in the way of treating it by remedies, antipsoric or otherwise.

When an infant suffers from dental irritation, there will probably be found a swollen gum obscuring an expected tooth that indicates the whereabouts of the originating distress; so when verminous irritation exists, there is generally to be found wriggling in the stool a solitary ascaris, if not a bundle of them, to point out the offender; cerebral, gastric, spinal, and other neuroses have symptoms

more or less special, and that render such cases more or less easily diagnosable.

It is different with the irritations that arise in infantile life from ear complications; the earache that of course in later life would distinctively characterise such a malady, in infantile life, is very often not discernible.

It is, I am convinced, to this fact that we must attribute the large number of cases of acquired deaf-mutism: the otitis, masked as it often is by other symptoms, is left untreated.

Even with children—aye, and with adults in the possession of full powers of expression—the existence of ear complication is often unsuspected; especially is this the case in the enteric fevers, where pronounced cerebral, spinal, or gastric symptoms are present.

This is well illustrated by the following case from Hinton* :—

“The child of a medical man, æt. 2, was taken ill on March 9, 1864, with feverish symptoms, &c., and a powder of *Calomel* was given it. On the three following days continued very ill, constantly crying out as if in pain, and with much febrile disturbance.

“On March 15th Dr. Wilks saw him, and found him very ill, very restless, constantly moving about as if in great pain; skin hot, lips parched, pulse 104. There were no symptoms indicating any cerebral mischief, but the bowels were relaxed, the abdomen full and soft. It was thought, therefore, that his complaint might be dysentery in an early stage, and two grains of Dover’s powder were ordered.

“19th.—Appeared better, had slept, and was quieter. After this, however, the former symptoms re-appeared, extreme restlessness, and screaming, as if in pain. There was evidently some source for this, but it was difficult to discover. For a week he thus continued, throwing his head about as if in pain, but with no other cerebral symptoms, and the child appeared quite sensible. He then passed a lumbricus, and it was hoped another purge might relieve him, but it had no such effect.

“22nd.—Appeared worse, never quiet for a moment, laying in his nurse’s lap, throwing himself about, his arms, legs, and head, as if endeavouring to gain repose from

* *Aural Surgery* (p. 224), by James Hinton, London, 1874.

some internal agony. He then began making a curious movement with his mouth, constantly thrusting his tongue out and licking his lips. For nearly another fortnight the child thus continued, with constant restlessness, throwing his head about as if in great pain, and placing his hand over his head and face. The father then lanced the gums, but with no effect. Sometimes for a whole day he never slept, and chloroform was given to soothe him, which generally had the desired effect. About a month after the commencement of his illness, and when the child was wasted to a mere shadow, a discharge occurred, first from one ear, and then from the other. For a day or two there appeared no relief; but after this the child began to get better, ceased to cry, took its food, and grew stout. He is at the present time in good health, and his hearing seems to be good."

I have referred to this case at pp. 83-85 of my work on Diseases of the Ear; you will find some other cases by Dr. Rafael Molin in vol. xxxv. of the *British Journal of Homeopathy*.

My reason for bringing forward this case is twofold: firstly, that it is of great interest to all who are engaged in the practice of all branches of the profession; and, secondly, because it shows us how insidiously deaf-mutism may be induced; for it is evident that had not a discharge taken place from the ears, deaf-mutism would have resulted. In these cases the middle ear inflames, congestion occurs, pressure is brought to bear upon the membrana tympani on the outer wall, and upon the membranes of the fenestrum ovale and rotundum on the inner, the result being distension caused by the labyrinthine fluid and the induction of such symptoms as rolling of the head, turning up of the whites of the eyes, and throwing about of the arms and legs.

When such symptoms are met with in any case of febrile disturbance in infants, the proper treatment is not, as was resorted to in this case, to scarify the gums, but to direct attention to the ears.

The timely recognition of the nature of such cases is so important, that I have thought it well to bring forward an additional and more deep-seated affection of a similar kind; the report given is from a letter received from a lady interested in the case. We incline to look upon it as a case of—

Inflammation of the Inner Ear.—"Stephen H.," the lady writes, "was a bright, intelligent child, and was able to run about and beginning to talk well, when, at 21 months old, he had an illness which the parish doctor attributed to teething. I," the lady writes, "was sure that it was very much more; but the father naturally trusted the doctor, who, however, believing it to be only teething, gave him little or no medicine. He evidently *suffered greatly in his head, putting his hands up to both sides of his head, and knocking it against things if he could.*

"His cheeks were hot, but the right cheek especially burning and scarlet, and it continued so, long after the head was relieved from pain. He was *sometimes violent, sometimes torpid.*

"It was long after the illness before he recovered the power of walking. His speech went away gradually during the illness and continued to do so after the acute part of the illness seemed to be over, till at last he ceased to speak altogether.

"There never was any discharge from the ears whatever, and it was not suspected that he was deaf, but he appeared to be an idiot and most excitable.

"A year and a half ago, in the latter part of 1878, he was sent to the London Homeopathic Hospital, where he received great benefit, for he returned home much quieter, happier, and more rational. We were told that he would improve and he has done so, till he has become a very intelligent child, but it is now clear that he is deaf and consequently dumb.

"I should mention," the lady goes on to say, "that long after his illness, when he had begun to walk again, *he staggered in doing so, and had had falls, often knocking his head.*

"When he used to stagger so much he always seemed affected by *throwing his head back and looking up.* If he did so when standing, it seemed to make him giddy, for he then staggered backwards.

"He staggered very much when he went to the hospital nearly a year after his illness, but he was much better in this respect, as in others, when he returned from the hospital, and gradually ceased to do so, and became quite strong and well. But he does not *run straight, going from one side of the road to the other, though he can run very fast.*"

These cases placed side by side form an interesting study. Symptoms of labyrinthine disturbance existed in both, but were much more marked, and never entirely left in the last case. The inco-ordinate movements, particularly, show this.

The critical discharge in the first case saved the patient from deaf-dumbness; would a discharge in the second case have been attended with equal relief?

The reply to this question is impossible unless we knew from local examination whether the middle ear was engaged; of this we have no evidence.

It is certain, however, that very often cases occur where one ear discharges and the other does not, the lesion presumably being the same, with the result that the non-discharging ear becomes permanently deaf while the other regains its hearing. In some of these cases we are, I think, justified in supposing that something more than the middle ear was involved.

As regards our treatment, we have one remedy which for symptoms such as were present in both these cases will naturally suggest itself to you, and this is *Veratrum Viride*, from the internal administration of which much is to be expected.

My experience of *Veratrum Viride* is chiefly with its external use, and is almost limited to its use in the treatment of ordinary inflammatory otitis. And it is well to impress upon you whose sphere of practice does not lie in the same direction, that in a very extensive experience in the treatment of inflammatory earache, in which I have employed *Veratrum Viride* as a local application with *Glycerine* and water (four drops of the *Veratrum Viride* to two drachms of equal parts of *Glycerine* and water) I do not remember to have once found it fail to give relief. Over and over again patients have testified to the immediate and positive relief given by these drops. The strength here given is the maximum; if *Veratrum* be used stronger it may aggravate; seven drops to half an ounce of the *Glycerine* and water is now my usual prescription.

The most recent was that of a boy of 13, who on recovering from measles complained of double earache with deafness, always a most unpleasant complication in the convalescence of this affection. The application of these drops at once removed all pain and deafness.

It is simply invaluable to the general practitioner to

know that *Veratrum Viride* possesses this property, as it is possible, I feel sure, to prevent hundreds of cases of deafness by the adoption of this treatment.

Again, in cases of obscure and masked otalgia, where, owing to violent delirium, we really are uncertain whether it is the ear that is at fault, the application of these *Veratrum Viride* drops will help to determine the question.

We should thus proceed:—To a teaspoon filled with hot water, add a drop or two of the above drops, and of this pour a little upon the outer surface of the auricle of the child. If in doing this we produce pain it will probably be owing to the temperature of the water employed, which therefore must be regulated accordingly.

Having regulated the temperature of the lotion to what we believe suits the child, we then proceed to pour it into the ear we believe to be affected in such a way as will secure its entering the meatus as gently as possible.

If positive relief follow this application we of course conclude that the ear is at fault, and repeat it as the necessities of the case require.

But in making this experiment the all-important point to remember is that the temperature of the water is that suitable to our patient, and no dipping of the finger into water, or thermometrical testing can determine this; the effect of contact of the water upon the external portion of the ear alone ought to be our guide.

Then, of course, we have many other remedies for ear-ache, all of which will be selected according to the nature and symptoms of the case, prominent among these being *Aconitum*, *Belladonna*, *Mercurius*, *Pulsatilla*, and last, but not least, *Hydrastis*. These I have from time to time noticed, and will now only stop to impress upon you all the urgent necessity that exists for a timely recognition of and attention to ear diseases of all kinds in infants.

Do not, I beseech you, allow any want of interest in ear affections to stand as an excuse for neglecting what may be all important to a child in after life, and never be content, as is so often done, in advising parents that their children will grow out of the derangements of the ear incidental to infant life. Grow out of them they will not, unless, favoured by circumstances, the efforts of nature induce restoration of the natural functions; but we cannot be called scientific physicians if, with means of cure within our reach, we leave serious cases to go untreated. Allow

me to impress upon you that the cases to which we are now making reference concern you as general practitioners quite as much, if not more, than they do those engaged in this special branch of medicine.

We have passed in review the case of a child whose life was rendered miserable by improper treatment, and we have asked the question whether if a discharge occurred it would have brought relief.

But, gentlemen, even during the acute stage of the affection, we ought not to place entire reliance upon the efforts of nature; there may come relief in the form of discharge, but this does not necessarily take place, nor is it necessarily accompanied by the expected relief.

What, then, is to be done?

Supposing we are treating such a case as we brought forward just now, where the internal ear is engaged, and where the indications are not such as justify paracentesis of the membrane, what ought to be our treatment, assuming that our remedies fail to relieve?

This is a question it is but fair to ask, seeing that we face such grave and urgent danger; for, remember, that twenty-four hours of such suffering may be quite sufficient to lead to life-long impairment, if not deprivation, of the functions of the ear as an acoustic instrument. The contracted space in which the middle and internal ear are situated is such that, in inflammation of either part, we can admit of no temporising with danger; this is particularly the case with the internal ear, buried deeply as it is in the bone and not admitting of any tumefaction without resulting destruction of the functions of the auditory nerve.

Given, then, a child rolling its head about and putting its hand to its head as if in pain, screaming occasionally, with a quick pulse and high temperature and constipated bowels; what are we to do, supposing our *Veratrum Viride* fails to relieve?

What we require is to lessen the inflammatory swelling that we are justified in supposing in the presence of these symptoms to be going on in the ear.

Our action at such a crisis involves issues of such moment to the well-being of our patient that we certainly would not be justified in facing the difficulty in a sectarian spirit. It is manifestly our duty to use every means in our power to prevent the destructive effects of the inflammation, and

for this purpose I can certainly recommend the application of a leech to the meatus of the child, the effect of which is admittedly to relieve inflammatory tumefaction wherever existing, and to repeat it should occasion require.

My experience in the treatment of severe otitis threatening cerebral meningitis fully justifies me in recommending this course, and considering that timely subsidence of the temporary tumefaction means very often complete restoration of the functions of the ear for the remainder of life as an acoustic instrument, I can see no objection that can at all weigh in the balance against it.

As stated, my conviction is that in our remedies we have powers sufficient to cope with such danger, but failure to arrest the inflammation in a sufficiently short space of time may nevertheless occur, and it is in such an emergency that resort to other means is not alone justifiable but absolutely necessary.

Remember the pathological conditions are without parallel; in no other variety of simple inflammation (except perhaps in acute orchitis) can it be said that the functions of an organ stand in such jeopardy, and in none can timely treatment so certainly prevent evil after-effects.

The affection we have been considering, "masked febrile otitis," is very often left undiagnosed, at least not diagnosed during the stage when treatment can do so much. We would readily admit that this arises from its obscurity, did we find in the usual treatises on fevers, or even in the many voluminous treatises on ear diseases, an adequate recognition of this affection; the reason, of course, is that hitherto it has been mistaken for meningitis, typhoid fever, or worm fever, and it has been deemed sufficient to explain the subsequent deafness upon the clear and eminently lucid supposition of its being "the effect of the fever."

I am free to admit that many cases of deafness and blindness arising from fever are due more to the exhaustion and loss of nutriment in the system than to otitis, otherwise how can we account for observers looking upon the symptom, deafness, as one to be favourably considered in a prognostic point of view in fevers.

The late Dr. Gwynne gave me particulars of a case of severe fever which left the patient speechless and without hearing or sight.

Dr. Moore, of Liverpool, was consulted as to the case,

and he advised the administration of cod liver oil, upon which the patient continued for several months, getting gradually better till all the functions were quite restored.

In spite of such cases, I undertake to affirm that the majority of cases of deafness following fever are due to unrecognised and untreated otitis coming on during the course of the fever; or, even in itself, as we have seen, occasioning the fever.

A slight discharge from the ear in an infant, a trivial earache, or a slight deafness on recovery from a fever may mean, if untreated, absolute deaf-mutism.

These are facts with which the general public are not conversant, and they prove what risk parents run in undertaking the treatment of these infantile affections in the absence of professional assistance.

The restlessness and constant crying of children is often caused by ear affections. A mother brought her boy of seven years old to me the other day, saying that he used, when an infant, to cry very often, and for a long time they were unable to discover a likely cause till they noticed his hand going up to his head continually; and at last, when a year old, a discharge took place from both ears, and since then he has constantly had earache followed by discharge, the result being that it has left him as nearly as possible a deaf-mute.

Of the symptoms that point to ear involvement in infants there is none more characteristic than this of constantly putting the hand to the head, and, as Wilde has shown, of attempting to support the head with the hand when rising, and then the child either dislikes to move his head or else he rolls it about, and almost invariably the external ear and its surroundings are very tender; and, however inclined he is to put his hand to it himself, he shrieks at the thought of another person touching it.

N.B.—This paper, which was intended for the British Homeopathic Society, was written some fifteen years ago, and has remained in this unfinished state in a drawer; it is now published, as I consider it contains much that is worthy of reflection.

It might be added to by pointing out the immense importance of imperfect closure of the jaws, a symptom found in infants unable to swallow properly or to pro-

nounce words, and which accompanies large port-nasal growths; in these cases, however, we deal not with deaf-mutism but simply with mutism, the hearing often being unaffected.

KALMIA.

By JOHN H. CLARKE, M.D., Physician to the London Homeopathic Hospital.

APROPOS of Dr. Lambert's article in last month's HOMEOPATHIC WORLD it may be well to record another experience with *Kalmia*.

About the end of January a married lady complained of having been out of sorts a few days with sick feeling and pains flying about, especially down the left side. The tongue was dirty, bowels regular. The catamenia came too early and lasted too long. She slept indifferently and had troublesome dreams.

As she had benefited much from *Nux* on previous occasions, I gave her that medicine in the 30th potency every two hours.

Two days later there was no particular change. Still pains flying about; headache at vertex; chilly; pulse 84; poor appetite and dirty tongue.

I now gave her *Kalmia* 200 every two hours.

She was very much better the following day, and the day after that was quite well. The medicine began to tell at once.

In the same house is a patient who suffers at times from attacks of tachycardia which have been greatly controlled by *Thyroidin* 30. At the time of my attendance on the first-named patient, Miss X— had a severe cold with rapid heart and pains through the heart region and inability to lie on left side. *Thyroidin* relieved the over action of the heart, but did not relieve the pain. *Kalmia* 200 relieved both, but especially modified the pain in a very short time.

It may be useful to append here an extract from the *Journal of the British Homeopathic Society* of October last.

KALMIA—PAIN IN RIGHT SHOULDER IN CONNECTION WITH
PULSATING TUMOUR.

DR. MOLSON exhibited on a "consultation day" at the London Homeopathic Hospital a case of pulsating tumour in the right neck. It was improving under *Baryta Car-*

bonica; but an interesting point about the case was that patient had applied for intense and constant neuralgic pain in the right shoulder, going down the arm, which had lasted for six months, and that this had been completely removed by *Kalmia* 1x.—*Monthly Hom. Review*, July.

REMARKS ON THE "MATERIA MEDICA."

CICUTA VIROSA—*CINA*.

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

CICUTA VIROSA. From the symptoms given by Hahnemann himself I extract the following. In the morning when waking, headache as if the brain were loose, and were shaken by walking; when reflecting on the real nature of the pain it had disappeared. Violent headache in the occiput, resembling a dull pressure, and accompanied by some coryza. Violent headache for two days, after a sick feeling in the abdomen; stitching extending from the nose and the right eye to the occiput. The headache is followed by a gloom lasting two days. The headache went off when sitting erect. The headache is relieved by the emission of flatulence. A slight twitching under the lower eyelid, in the orbicularis muscle. Heat and burning around the eyes. Yellow discharge from the nose. A kind of cramp in the cervical muscles; when looking around he is unable to turn the head back again immediately: the muscles do not yield and he would suffer a good deal of pain if he were to use violence. Want of appetite owing to a feeling of dryness in the mouth; food has no bad but not its full taste. Appetite for dinner, but the appetite disappeared after swallowing one mouthful. He did not relish his breakfast, the food pressed in the abdomen, as if he had eaten already a good deal. Cutting in the abdomen shortly after a meal. Pressure in the pit of the stomach, shortly after a meal, which obliges her to take a deep inspiration; accompanied by an inclination to eructation. Colic and drowsiness immediately after a meal. Tightness in the pit of the stomach, and anxiety for eight days; he would like to walk out all the time, to get cool. In the morning nausea in the abdomen; in the afternoon, after the nausea left, headache, a stitching in the right side of the head, extending from the right eye and nose, in both of which

organs it was most violent, to the occiput, lasting three days, after the lapse of which time the nose began to run and secreted a yellow mucus (a. 9 d.). Accumulation of a quantity of mucus with continual anguish and ill-humour. Itching in the rectum, close above the anus; rubbing induced a burning pain, this pain always inducing a shuddering, after walking, when standing still, and during stool.

Obstruction of the nose, accompanied by secretion of a profuse quantity of mucus. Swelling on the inner side of the bend of the left elbow, as if an ulcer would form; when moving the arm, a pain was felt in that part similar to what is felt when pressing against an ulcer. Burning itching all over about noon, anxiety, sweat in the face and trembling of the hands; sensation about the heart (in the middle of the chest) as if he would faint. *Vivid dreams at night, about the events of yesterday.* Obtusion of the head early in the morning after rising. Sweat on the abdomen at night. He became indifferent to all things, and began to doubt whether he was really in the condition he was in. He confounded things of the present with those of the past. Thinking of the future made him feel anxious, and he was sad all the time. Suspicious. Excited, and apprehensive about the future; he imagined that everything which might occur to him would be dangerous. He was sad when others were cheerful. He imagined he was not living in his usual condition and circumstances; everything appeared to him strange and almost terrible; he felt like one waking from an acute fever, and seeing all sorts of visions, but without feeling bodily sick. He felt like a child of seven or eight years, as if he were as fond of objects as a child is of his toys. Before passing on to the observation of others, I just notice two of the mental. 1. Reflecting on the pain made it disappear, and in contrast with this, "*thinking of the future made him feel anxious.*" The first of these conditions would lead one to compare *Cicuta* with *Agar. Camph.* and *Prunus*, all of which have amelioration of head-pains when thinking of them; also *Croc. Ferr.* and *Nat. carb.*, all of which have amelioration generally from exertion of the mind. The last symptom about the toys would indicate in how many cases of insanity, bordering on dementia, this plant might show itself useful.

In the general detail we find: *Anxiety; he is sadly affected by sad tales, moaning and howling.* Great tendency to

start. Mania: after an unusual sleep her body felt hot; she jumped out of bed, danced, laughed, did all sorts of foolish things, drank much wine, jumped about, clapped her hands, and looked very red in her face. Want of confidence in men, and dread of men; he avoided their society, remained alone, and reflected upon their errors and upon himself. *Head*: loss of sense, absence of all thought; all objects seem to him as if they moved in a circle, especially when sitting for many hours (a. 2 h.). *Vertigo*: he fell down; stupefying headache, externally, in the forehead, increasing when at rest (a. 1, 36 h.). *Eyes*: drawing stitches along the eyebrows (a. 12 h.) *Face*: pimples, of the size of lentils, in the whole face (and on both hands), causing a burning pain when coming out, afterwards becoming collected into one, dark-red, lasting nine days; at the lapse of this period they peeled off, this process lasting three weeks (I have cured chronic eruptions in the face, flowing together into one mass of pus, by means of one or two doses of a drop of the juice; when one dose was not sufficient, I never gave the second till three or four weeks had elapsed). Swelling of the face. *Ears*: pimples below and in front of the ears, their tips being filled with pus, and painful like a boil. Hemorrhage from the ears. Detonation in the right ear when swallowing. *Nose*: sore pain of the right wing of the nose, as after a shock or blow. *Jaws and teeth, lockjaw*: the mouth is full of foam. Whitish sore on the border of the tongue painful to touch. After uttering a few words, jerking of the head and arms hinder his further utterance. *Pharynx and esophagus*: inability to swallow. Feeling of dryness in the mouth. *Appetite and gastric*: continual hunger and appetite even shortly after a meal. He had great desire for coal, and swallowed it. *Hiccough*: nausea; vomiting. *Stomach*: hematemesis; burning pressure at the stomach; shock in the precordial region as with a finger, it makes him start; throbbing in the pit of the stomach, which had become raised to the size of a fist. *Abdomen*: heat, rumbling, considerable emission of flatulence. *Stool*: constipation, diarrhea; sensation in right groin as if an ulcer would break through when sitting. *Urinary*: frequent desire to urinate; difficult emission, retention, the urine comes out with great force. *Genital* pollutions, without any lascivious dreams; the menses are delayed. *Cold*: frequent sneezing without coryza (a. 29 h.). *Respiratory and chest*: sensation in

chest and throat, as if something the size of a fist and pressing the throat asunder were lodged in them, it impedes respiration, worse when sitting than when walking; hoarseness; cough with a quantity of expectoration, especially in the day-time; burning around the nipple (a. 3 h.); itching and feeling of heat in the right side of the chest. *Back*: painful sensation on the inner surface of the scapulæ; red vesicle on the right scapula painful to the touch. *Upper extremities*: sore pain as from a shock in the right shoulder-joint; cracking sensation in the shoulder-joint not audible; sensation in the left arm as if there were no strength in it, with lancinating pain in the arm when raising it; jerking in the left arm which shakes the whole body; sore pain in the left forearm as from a shock or blow; distension of the veins of the hands; pimples of the size of lentils on both hands, even the balls of the thumbs, causing a burning pain when first coming out, and afterwards flowing together into one, dark-red, and of nine days' duration. *Lower extremities*: frequent involuntary jerking of the lower limbs; painful feeling of stiffness and rigidity in the muscles of the lower limbs, which made walking impossible for three hours (a. 1 h.). *General*: fits; trembling in the upper and lower limbs; itching of the whole body; crampy stiffness of the whole body with coldness of the same; catalepsy, the limbs were hanging down relaxed as they do in a dead person. *General convulsions*: horrible epilepsy, returning first at short, afterwards at longer, intervals; the limbs, head and upper part of the body are moved in a strange manner, accompanied by lockjaw; she lies like one dead, with lockjaw. *Sleep*: frequent yawning as if he had not slept enough; *vivid dreams, which he is unable to recollect; frequent waking, with sweat all over, the sweating makes him feel stronger.* *Fever*: they want to sit near the stove; excessive heat of all the parts of the body, from the beginning of the action of the drug until its termination.

In reviewing the above, some few points arrest the attention, such as the character, course, and accompaniment of the eruption; the sensation as from shock (showing that one must not always fly to *Arnica* when this sensation is experienced by patients), the variety of movements, and, on the other hand, stiffness approaching paralysis; hemorrhage; the peculiar hunger; dreams, and cold and heat of fever without tendency to perspiration.

CINA.

Our next drug will be the familiar and therefore much abused *Cina* (*semen Santocini*). Let all who regard the formation and passing of worms, especially in childhood, as a mere mechanical local affection ponder until they understand our author's prefatory remarks. For centuries past this important drug has been used only to expel worms, being given in doses of 10, 20, 30, 60, and more grains. I shall say nothing of the dangerous and even fatal consequences attending the administration of such doses, and I would merely make the passing remark, that a few worms in lively children cannot be considered an important disease; they are quite common in childhood, and cause but little inconvenience *at an age when the psoric miasm is yet in a latent condition* (italics mine); on the contrary, however, where worms are found in a large quantity, they originate in a morbid condition of the system, *in the psoric miasm* (italics mine) which has been roused from its latent state, and which must be cured; otherwise the worms are speedily reproduced. By such improper reiterated expulsions of the worms nothing is gained, and, in very many instances, they end in the death of the sufferer. The following list of symptoms shows that this agent has many more powers than that of expelling worms. It possesses great curative powers in whooping cough, and in certain intermittent fevers accompanied by vomiting and canine hunger. Formerly I was in the habit of using the 9th potency, but I know now that the 30th potency exhibits the curative powers of *Cina* in a more appropriate degree. One, two, or three pellets may be given at a dose. *Antidotes: Bry., Chi., Hyoscy., Ipec.*

We come now to detailed symptoms. *Moral:* delirium; when walking in the open air great anguish about the heart as if he had committed some evil deed; disposed to take offence at the least jest; indifferent to both agreeable and disagreeable things. *Head:* dizziness, staggering relieved when lying down; *when walking in the open air, stupefying internal headache, especially in the fore part of the head, afterwards in the occiput* (a. 3 h.): headache as if the whole head were screwed in, with obtusion; headache diminished by stooping, moving the head; as the headache disappears, an oppressive pain in the abdomen sets in, the headache returning after the disappearance of the latter

pain. *Eyes*: jactitation of the orbicularis palpebrarum, a sort of convulsive twitching; burning pain in the outer canthus mixed with itching also in the margin of the upper eyelid; he looks sick around the eyes and pale in the face. *Face*: pain as if the two zygomata were seized by pincers and compressed, the pain increases by external pressure. *Ears*: cramp-like jerking in the external ear; dull stitches under the mastoid process, a sort of clawing pressure; when pressing upon the parts the pain is as that of a bruise or contusion; white and bluish colour around the mouth; bloated, bluish countenance. *Nose*: the child bores in the nose until blood comes out. *Mouth, jaws, and teeth*: ulcer upon the cheek with hardness all round; toothache as if the teeth were sore; inspired air and cold drink affect the teeth painfully. *Pharynx, appetite*: inability to swallow; the drink is pushed to and fro in the mouth for a long time; violent hunger shortly after a meal. *Gastric*: eructations empty, tasting of ingesta; several lumbrici creep along the esophagus and make their appearance at the mouth of the child. *Abdomen*: digging-up pain in the epigastric region with sensation as of numberless confused motions, and as if the parts were bruised; dull stitches, diminished by deep inspirations; boring pain over the umbilicus going off when pressing upon the parts; intermittent prickings and stitches; violent pains in the umbilicus and umbilical region as if the umbilicus were pressed forcibly into the abdomen, or as if one had knocked it against something, first for a short, afterwards for a longer time, when it became more violent during an inspiration; labour-like, frequently recurring pains in the abdomen as if the menses would appear. *Anus*: voluptuous itching of the front part. *Urine*: turbid. *Genital*: hemorrhage from the uterus during the whole time of using the drug, in a girl of ten. *Cold, coryza*: a burning, as if blood would come, deep in left nostril; violent sneezing, which affected the chest, as if it would burst, on both sides; fluent coryza; discharge of purulent matter from the nose. *Respiratory and chest*: heavy, loud breathing; short, rattling breathing; short breathing, sometimes interrupted, a few inspirations being wanting; mucus in the larynx, after rising; he is frequently obliged to hawk it up, after which it speedily returns; previous to coughing, the child raises herself suddenly and stares around, the whole body looks rigid, she is without con-

sciousness, as if about to have an epileptic fit; *hoarse cough with vomituration, only a few fits at a time, the succeeding fit being excited after a longer pause, in the evening; asthma while standing, with anxiety, he sweated very much on the chest; a kind of oppression of the chest, sensation as if the sternum were too close to the chest, the breathing is somewhat oppressed; boring, stitching pain in middle of right side below ribs, disappearing when pressing on the parts. Back: pain, as from bruises in the small of the back, not increased by motion; painful weariness in the loins as if he had been standing a long while; drawing-tearing pain along the whole of the dorsal spine. Upper extremities: paralytic pain in the arm, he is obliged to let it hang down; boring, cramp-like pain in the left upper arm, not going off by motion; intermittent, cramp-like contraction of the hand; single small jerking stitches, at times in the right, at times in the left, hand. Lower extremities: thrills of shuddering over the thighs; paralytic pain in the left thigh not far from the knee; the child stretches out his feet spasmodically; a sudden suffusion of heat over the knee, as if a hot body—for instance, a glowing coal—were brought into the neighbourhood of the knee; intermittent stitches, as with a fork, in the left tibia, close below the knee; cutting pain in all the toes of the right foot, as if they were being amputated. General: dull stitches in the outer parts of the body, here and there; in the evening, eruption of red, itching pimples, disappearing speedily; translucent rash. Fits: epileptic convulsions with consciousness; at 4 in the afternoon he is seized with a fit of spasmodic stretching of the body, afterwards trembling of the whole body, with blue lips and lamentations about pain in the chest, neck, and all the limbs; painful sensitiveness in all the limbs of the body, when moving or touching them; morning and evening the symptoms are most violent.*

THE CURABILITY OF DISEASES OF THE FEMALE
GENERATIVE ORGANS WITH *HELONIAS*
DIOICA.

By FREDERICK KOPP, Greenwich, N.S.W.

THE primary effect of *Helonias Dioica* upon the female generative organs is of a congestive nature; the secondary

is marked by general and complete atony. Therefore, in the treatment of symptoms of an atonic character it is necessary to use the lower dilutions of the drug; while in symptoms indicating congestion the higher potencies should be prescribed. *Helonias Dioica*, as an analogue of *Ferrum*, has a most marked and useful sphere of action in connection with the female generative organs, and, as a uterine tonic, is worthy of recommendation in cases in which atony of the uterus and its appendages and ligaments is a prominent symptom. Prolapsus uteri, for instance, when caused by want of muscular tonicity, would point to *Helonias Dioica* as the remedy indicated, as is borne out in the proving of the drug, namely, "general atony of the uterus and its appendages, followed by prolapsus of the organ." It is also indicated in those cases of prolapsus in which there is ulceration of the uterus and a continual discharge of blood, very dark and fetid. Those cases of amenorrhœa which are dependent upon a general state of atony, are usually greatly benefited, and often cured, by a faithful perseverance with this remedy; and the same may be said of those cases of amenorrhœa which are of a congestive character. In menorrhagia also, resulting directly from active congestion, we have in *Helonias Dioica* a very useful and reliable remedy, as has been proved by numerous severe cases which have been cured by the administration of the drug. Pruritis of the vagina and vulva is one of the most distressing symptoms imaginable connected with the female generative organs, and therefore not one of the least of the many valuable properties of *Helonias Dioica* is its homeopathic relation to this condition. A secretion coming from the vagina of a curdy nature is an additional indication for its administration. In all such cases, besides the internal administration of the drug, I would recommend a weak injection, namely, 30m of the ϕ to a pint of tepid water; with this lotion the external parts should be well bathed also. It must be remembered, in such cases, that cleanliness is of the utmost importance, and is highly conducive to bringing the treatment to a successful termination. If these hints are properly carried out, I fail to see that the treatment can be ineffectual, even in severe cases, as "an intense itching of the female genital organs" is one of the most persistent and distressing symptoms developed during a proving of the drug.

In inflammation of the vulva and vagina of an aphthous character *Helonias Dioica* is again indicated. In such cases it is advisable to follow out the treatment as recommended above for pruritis, using the drug both internally and locally at the same time. In the proving of the drug the following is a prominent symptom, namely, "a drawing and piercing pain in the lower part of the back, passing through to the uterus, as if inflammation were there." It is, therefore, of great value in all diseases of the female generative organs in which the above symptoms are present. This being a primary effect of the drug, only the higher potencies should be used in its administration.

In all those complaints in which the following sympathetic symptoms are present, namely, "swollen breasts, the nipples being very tender and painful, and when the slightest pressure on the breasts causes intolerable pain," *Helonias Dioica* will be found of great service, as it often speedily relieves and removes these highly unpleasant symptoms. The knowledge of the great sympathy that exists between the breasts and the uterus will help us to understand the great value of the drug, especially in such cases as are dependent on uterine affections.

Helonias Dioica may also be prescribed with good effect in cases of irritation of the vagina, which are accompanied with pain in the back; also, in those cases of profuse flooding, occurring at the climacteric period, which are accompanied also with profuse leucorrhœa of a serous nature, and in which there is intense ovarian and uterine pain. Threatened abortion may often be averted by a timely use of *Helonias Dioica*. The cases in which it is the most effectual are those in which the abortion is habitual, usually resulting from atony of the uterus. It is also valuable in meeting most of the after-effects of abortion or miscarriage: It is especially valuable in cases where the uterus and its appendages are in a relaxed condition. Besides removing the general debility, it strengthens and improves the condition of the sexual organs. In cases of leucorrhœa, marked by general atony, *Helonias Dioica* is the drug indicated.

Lastly, but not least, *Helonias Dioica* is one of the most valuable and effective remedies that we possess for the treatment of those cases in which there is a loss of sexual desire and power. This loss may be accompanied with or

without sterility. *Helonias Dioica* will be found beneficial in both. The curative power of this drug in some of the most annoying and distressing complaints that women are liable to, prove this drug to be one of the most valuable that we possess in our *materia medica*. Analogous with *Ferrum, Sepia, China, Senecio*, and *Hydrastis canadensis*, the reputation of *Helonias Dioica* as a tonic is at once established, and past experience has proved that its value as such, especially in uterine atony, has been borne out in the treatment of many severe and obstinate cases.

INSTITUTIONS.

HAHNEMANN HOSPITAL AND DISPENSARIES, LIVERPOOL.

THE annual meeting of the friends and subscribers to the Hahnemann Hospital and Homeopathic Dispensaries of Liverpool was held on Tuesday, January 29th, in the Town Hall, the Lord Mayor (Mr. W. H. Watts) presiding over a large attendance.—The Committee stated in the Annual Report that the number of in-patients was larger last year than had been the case during any previous year.—A larger number of out-patients had also been prescribed for than in any previous year of the institution's existence. Without expressing any opinion as to the use of alcohol in disease, the Committee recorded their satisfaction at the fact that several cases of chronic alcoholism had been admitted, and gratifying reports had been received that more than temporary benefit had been derived from their stay in hospital. In the out-patient department, Hope Street, the attendances at dispensary were 34,102, and patients visited at their homes 6,406. At Roscommon Street Dispensary there had been 26,546 attendances, while 3,471 patients were visited. There were 511 in-patients treated in the hospital during the year. The number of admissions was 480, an increase of 28 on the year previous.—Mr. SHORROCK ECCLES, Hon. Treasurer, said that although the expenditure had been less than usual during the past year, there was a debit balance of £763 8s. 7d. The cost of the institution during the year had been £3,136, towards which £580 had been contributed by the inmates.—The LORD MAYOR moved the adoption of the report and financial statement. He said it was most satisfactory that although the claims of homeopathy had only been before the public in comparatively recent times—it was not much older than some of the persons

present—it had been so much appreciated by the people of this country, and especially by the people of Liverpool. His lordship described the hospital as a model one, and said that if he were taken ill and wanted the assistance of a hospital, he knew of none he would sooner avail himself of, or recommend his friends to, than the Homeopathic Hospital. It was greatly to the credit of homeopathy that it placed such an institution before the public. Alluding to the question of the use of alcohol in such institutions, the LORD MAYOR said that he had had some experience in this matter which had convinced him that stimulants were better left outside a hospital. He was not a teetotaler, so that he did not speak because of any antagonism to drink; he took it himself in moderation. But he had observed that in hospitals where stimulants were largely used the death-rate was considerably higher than in places where they were made little use of, if at all. He had statistics which showed that those hospitals throughout the country which used no stimulants at all were by far the most successful. (Applause.)—Mr. T. CROSFIELD seconded, and the motion was adopted with unanimity.—On the motion of Dr. CHAS. HAYWARD, seconded by the Rev. CHAS. BARRETT, a vote of thanks to the General and Executive Committee for their services throughout the year was passed.—The Lord Mayor, who contributed £10 towards the funds of the Hospital, was accorded a vote of thanks for presiding.—*Liverpool Daily Courier*.

TUNBRIDGE WELLS HOMEOPATHIC HOSPITAL.

ANNUAL MEETING.

THE annual business meeting of the Tunbridge Wells Homeopathic Hospital was held at Trinity Parish Room on Monday afternoon, January 28th. Mr. W. Langton presided, and the attendance included Dr. Nield, Dr. Pincott, Dr. Capper, the Rev. A. Large, Messrs. H. Edmunds, W. Brackett, Tinne, Booth, E. Westbrook, Chambre, A. R. Baldwin, Burnley, Wheatley, Roberts, and several ladies.—The Committee's Report mentioned that the Hospital had been improved at considerable expense. About £84 18s. 2d. had, however, been brought forward, and this showed that the Hospital was £180 richer than in the previous year. (Applause.) There had been 78 in-patients, 1,971 out-patients, and 819 dental patients. Over 2,774 visits had been made during the year, and much good done. The thanks of the Committee were tendered to the medical staff, the nurses, Captain Westbrook, and others for valued assistance. A legacy of £50 had been received from a lady, and when more funds were secured it was hoped to enlarge the building.—It was

stated that the Hospital Saturday Committee had handed over a fair proportion of the collections.—*Sussex Daily News*.

THE BRIGHTON HOMEOPATHIC DISPENSARY.

JUBILEE MEETING.

THE Fiftieth Annual Meeting of this Charity was held on Monday afternoon, July 4th, at the Town Hall, Brighton. Mr. Daniel Hack, J.P., was voted to the chair, and there were also present Mr. J. Beal, Mr. F. S. Champion (Hon. Secretary), Mr. D. Friend, Rev. W. Harbour, Mr. R. Hughes, L.R.C.P., M.R.C.S., Mr. H. Wilde, M.B., and Mr. R. Walder.—THE HON. SECRETARY read the Annual Report, of which the following is a summary:—

“At the close of the fiftieth year of the Dispensary’s career, the Committee were glad to be able to report to its friends a twelve-month of unabated and, indeed, increased usefulness. The new cases admitted, the consultations held, and the visits paid to patients at their homes, showed an increase over the number for 1898 of 97 new cases, 619 consultations, and 322 home visits respectively, while the deaths were fewer by one-fifth. The Committee wished their balance-sheet presented a similarly favourable aspect. Unfortunately, there was a larger deficit than usually experienced, arising principally from the falling off of donations. They, therefore, earnestly appealed to the friends of the Institution to assist in clearing off the deficit by recommending its claims to their friends, and generously adding to the subscriptions or donations. The balance-sheet showed receipts amounting to £250 4s. 8d., and expenditure to £288 17s. 8d., leaving a deficit of £33 12s. 7d. The following comparative statement was submitted with the Report: Dispensary Report, new cases admitted, 932 in 1894, 835 in 1898; consultations, 5,289, as against 4,670; payment on cards, £42 2s., as against £44 16s. Visiting Officer’s Report, new cases, 279, as against same number in 1898; visits paid, 2,517, as compared with 2,195; discharged, cured, or relieved, 247, as against 270; deaths, 12, as against 15. Ophthalmic Surgeon’s Report, new cases, 191, as compared with 171; consultations, 1,032, as against 894.”—In moving the adoption of the Report, the CHAIRMAN expressed regret at the absence of his old friend, Mr. Marriage Wallis, who had always taken very great interest in the institution. (Hear, hear.) He was glad to show his interest in homeopathy, and the work carried on by the institution, by taking the chair, and to find that at the end of the fiftieth year of its existence the work was keeping up, indeed increasing. The number of consultations at the dispensary was larger than any reported during the last four years, while the

Visiting Officer's Report showed that the visits paid had greatly exceeded those of former years. Commenting on the adverse balance of £38, the CHAIRMAN attributed it chiefly to the demise of old subscribers, and pointed out that it was very difficult to fill their places without some special effort. Still, he felt sure the number of ladies and gentlemen, who were not only sympathisers but thorough believers in homeopathy, was a large one in Brighton, and that the Institution had only to make its needs known not only to have the deficit wiped out, but a number of new annual subscribers added to the list. He hoped some special effort would be initiated to bring this about. (Applause.)—Mr. BEAL, who seconded, promised £5 towards clearing off the adverse balance. (Applause.)—Mr. FRIEND pointed out that it was very kind of these gentlemen to give their time and services to the Institution, which, he was persuaded, was doing a great deal of good, especially among the poor visited by the honorary medical officers. (Hear, hear.) Very many severe cases were relieved, and all the patients spoke in grateful terms of the kindness with which they were treated at the Institution.—Mr. WALDER, who seconded, said he would also give £5 to wipe out the deficit.—The CHAIRMAN: So will I. On the proposition of Mr. WILDE, seconded by the Rev. W. HARBOUR, a vote of thanks was passed to the Committee and the honorary officers for their services during the last year, and a similar compliment was paid the Chairman for presiding.—*Sussex Daily News.*

SUSSEX HOMEOPATHIC DISPENSARY.

ANNUAL MEETING.

ON Wednesday, February 6th, the annual meeting of the Governors and subscribers of the Sussex County Homeopathic Dispensary (founded in memory of the late Dr. Hilbers) was held at the Institution, 29, Richmond Place, Brighton, Mr. W. A. Hounsom, J.P. (Chairman of the Committee of Management), presiding. Dr. Henry Belcher, Rev. E. Riley, Mr. W. B. Chamberlin, and Mr. J. H. Sharp, J.P. (members of the Committee), Mr. A. F. T. Shapland (of Messrs. Evershed and Shapland, hon. solicitors), Mr. Hermann G. Hilbers, L.R.C.P.E. (hon. physician), Mr. William Prowse, M.R.C.S. (medical officer), and Mr. Frederick Hilton (secretary) were also present.

STEADY AND SUCCESSFUL WORK.

In their Annual Report, the Committee stated that the past year had been one of steady and successful work in regard to the Medical Department. The new cases numbered 1,446 for

the Dispensary in 1894 as compared with 1,392 in 1893, while consultations had decreased from 9,658 in 1893 to 9,453 in 1894. In the Visiting Department the new cases totalled 684 in 1894 as against 664 in 1893; visits, 5,228 as against 5,398; deaths, 85 as against 48; tickets sold, 1,441 as against 1,316. The Committee felt that these figures amply testified to the extensive work carried on, and the fact that the demand for free tickets had been even greater than in any previous year warranted them in again urging the need of more subscribers.—*Sussex Daily News*.

LEAF HOMEOPATHIC COTTAGE HOSPITAL, EASTBOURNE.

We have received the Seventh Annual Report of this Institution. The Committee have much satisfaction in presenting to their subscribers and donors a report on the work accomplished during the past year. Financially, it is the most satisfactory that has occurred since the Hospital was opened. The total number of cases treated has also been larger than in 1893, and though circumstances have caused a considerable excess in the expenditure, yet the very great increase in donations has not only far more than counter-balanced this, but has enabled the Committee to add £400 to the invested capital, and to carry forward a balance of £111 13s. 5d. to 1895 as compared with £82 15s. 10d. at the close of 1893. During the seven years the Hospital has been open 826 cases have been under treatment.

The total number of patients treated at the Hospital during the year has been 158, of which 85 occupied beds in the wards and 63 were out-patients, against 150 cases in 1893, 95 of which were in the Hospital and 55 out-patients.

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

65	patients cured,
12	„ relieved,
2	„ unimproved,
1	„ has died,
5	„ remained in the wards on Dec. 31, 1894.
—	
85	
—	

Eight operations have been successfully performed during the year.

The average number of patients at the end of each week has been 6·8 against 5·8 in 1893. This, however, hardly shows the excess of work done, as for thirty weeks the wards were practically full, there being from seven to nine beds occupied. There have been several long and tedious cases; one patient was in the Hospital for thirty-three weeks, four from ten to sixteen weeks, and three from five to seven weeks, all being free of any expense to the patients, but at a heavy charge to the Institution.

LEEDS HOMEOPATHIC DISPENSARY.

SECOND ANNUAL REPORT.

IN presenting the Second Annual Report, the Committee are glad to be able to point to the steady growth of the work of the Institution. During the year the number of attendances at the Dispensary was 2,148, and 224 visits were made to patients at their own homes. These figures afford the best evidence of the need that existed for bringing the homeopathic treatment of disease within reach of the poorer members of the Leeds community. They also represent an amount of beneficent labour on the part of the purely honorary medical staff that deserves recognition by the subscribers; and the Committee feel confident they will manifest their appreciation of the good work thus done by continued practical support of the Institution.

It will be observed that a resident medical officer has not yet been appointed. The Committee greatly desire that such an appointment should be made, as they believe the usefulness of the Institution would thereby be much increased; so far, however, they have not been able to secure the services of a suitable man. They are glad to state that the interests of the Dispensary have not suffered under present arrangements, and that it has been possible again to make a substantial addition to the capital account. But while the Committee congratulate the subscribers on this addition to the funds of the Institution, they desire to impress them that on the appointment of a resident medical officer, the present expenditure will be doubled, and the Committee therefore earnestly appeal to subscribers for increased support.

J. B. G. TOTTIE, *President.*

ZECH, YEWALL, *Hon. Sec.*

REVIEWS.

THE HOMEOPATHIC DIRECTORY, 1895.*

As announced in our last issue, the Directory is now in the hands of the public. The following is the preface, which will speak for itself :—

“After an interval of four years the *Homeopathic Directory*, which has long discharged such a useful function in the homeopathic body, again resumes its place. The occasion of its suspension need not be dwelt on here further than to say that a rival publication having appeared in the shape of a list of members of the British Homeopathic Society, a number of the gentlemen composing this Society requested to have their names withdrawn from the Directory, and the late publishers did not care to bring it out under those conditions.

“But many members of the homeopathic body having expressed a strong wish to have the Directory continued, the Homeopathic Publishing Company agreed to accede to their wishes. It is felt that the British Homeopathic Society's list cannot efficiently take the place of the old Directory. A large number of homeopathic practitioners are not members of the Society, and the Society has no more right to consider itself identical with the body of British homeopaths than the British Medical Association to claim to be the British medical profession. Moreover, the Society's list contains no list of veterinarians or chemists, and no colonial list beyond the few who are members of its body. However, in spite of these great imperfections, many members of the Society persist in considering their list sufficient and withholding their names from the Directory. This accounts for the number of names appearing not being as large as it otherwise would be. The Society's list is on sale to the public,† so that any who desire to have the complete numbers are in a position to do so.

“A list of the more important homeopathic societies and institutions in Great Britain is included, and also of the journals published in the interests of homeopathy.

“Great attention has been paid to the colonial part of the Directory. Through the kindness of Dr. Wanless, Dr. Scott Nichol of Montreal, and Mr. D. L. Thompson of Toronto, there will be found the first complete list of the homeopathic practitioners of British America ever published. In some instances particulars of degrees and appointments are given, and it is hoped that before the next issue appears the same particulars of each practitioner will be obtained. Now that there is a strong feeling in favour of a closer union between the home country and the colonies, it is fitting that the *Homeopathic Directory* should afford a common

* *British, Colonial, and Continental Homeopathic Medical Directory for 1895.* London: Homeopathic Publishing Company, 12, Warwick Lane, E.C. Price 2s.

† *Annual Supplement of the Journal of the British Homeopathic Society.* London: John Bale & Sons, 87-89, Great Titchfield Street, W. Price 1s.

meeting-ground for British homeopaths all the world over, and so help to strengthen the existing bonds of natural and professional kinship.

"The appearance of Dr. Viller's *International Annual* has made it possible to correct the continental list; but readers must refer to Dr. Viller's work for full information respecting the practitioners themselves, and the homeopathic institutions and pharmacies of the Continent.

"Arrangements are being made for publishing in future editions a yearly summary of the most important events and publications of the homeopathic year, and also of the principal advancements in homeopathic and general therapeutics.

"12, Warwick Lane, E.C.

"February 1, 1895."

The publishers have received warm congratulations from many quarters on the appearance and style of the little volume, which has met with a general welcome from the homeopathic confraternity. It is to be regretted that a few errors have crept into it, but in making a new start this was hardly to be avoided. The publishers request us to point out with apologies the following:—

ERRATA.

Dr. BURWOOD. On p. 68, in the list of Institutions, in describing the Ealing and West Middlesex Homeopathic Dispensary, Dr. Burwood's name should appear as Hon. Consulting Physician, but it has been omitted.

Dr. MARSH. The date of Dr. Marsh's qualification as M.R.C.S.ENG. is given by a printer's error, 1886; it should be 1866.

Mr. GERARD SMITH. On p. 32 Mr. Smith's West End address, 87, Gloucester Place, Portman Square, W., is printed on the second occasion on which it occurs, "87, Gloucester Place, *Portman* Square." "Portman," of course, is correct.

Dr. VAWDRY. On p. 78 Dr. Vawdry's name should appear as Hon. Surgeon to the Devon and Cornwall Homeopathic Hospital and Three Towns Dispensary.

HENSEL'S MACROBIOTIC.*

THE author of this remarkable work writes as one having authority and not as the scribes. This has its advantages and its disadvantages. There is a freshness and originality about the book that are very captivating; but all the time we feel that the author takes us into a region in which we have no possibility of checking his statements, for they are to a large extent outside the commonly accepted sciences of the day. Not that they are necessarily any

* *Macrobiotic, or our Diseases and our Remedies.* By Julius Hensel, Physiological Chemist. Translated by Professor Louis H. Tafel from the second German edition. Philadelphia: Boericke and Tafel. London: Homeopathic Publishing Co., 12, Warwick Lane, E.C.

the worse for this ; but at the same time if Hensel wishes his theories to be accepted he must show in what way they are superior to those which now prevail. For example, Hensel is an out and out spontaneous generationist. Given the chemical elements of an acarus or a grub, and lo and behold the grub or the acarus appears ! Now we are far from thinking that the last word on that topic has been said by Tyndall or Pasteur. The occurrence of parasites in the intestines of the unborn is a riddle of which no satisfactory solution is yet forthcoming. Indeed, we cannot understand how any believer in evolution can doubt the possibility of spontaneous generation. At the same time, the ex-cathedra utterances of our author scarcely suffice to set the question at rest.

Perhaps it will be fairest to the author to quote here his preface entire :

“ As the introduction to an opera gathers together the motives which are the foundation of the musical work, so I wish herewith to prepare the way by stating that I have throughout ascribed the origin of internal diseases to a *diminished electric force*. This is in agreement with the demonstrated unity of forces, which I have also applied to our vital force. The cause of this diminution of the electric force may be found either in *respiration of oxygen insufficient* in itself, or in the *more difficult absorption* of the quantity of oxygen required for the prosecution of our vital functions, owing to a diminished number of red blood corpuscles, or in *strong emotions of the mind*, or in *atmospheric influences*, or in the reduction of the nervous tension in special regions of the body owing to a *partial check in the circulation of the blood*. As a tangible cause of the diminution of the blood disks which absorb the oxygen, I have pointed to the insufficiency of the amount of sulphur, lime and iron contained in many articles of food ; but I have made especially prominent the loss of electrifying blood-salts which loss is not sufficiently compensated by food, as being by far the most frequent cause and one hitherto not sufficiently considered, producing a diminished electric tension of the nerves and thence fatal maladies. This daily loss of blood-salts is thoroughly natural, because the *urea* resulting as a product from respiration, *requires mineral salts in order to combine with them into permanent combinations of double salts*. If the urea does not find enough mineral salts in the blood, it is changed by the chemical absorption of water from the venous blood into carbonate of ammonia, which produces paralysis of the nerves, blood-poisoning and even leads to putrescence. Various lesser as well as more intense degrees of chronic sufferings are connected with this state. Either singly or together the afore-mentioned injurious influences manifest themselves in anemia, chlorosis, and dyscrasic affections, in pulmonary consumption, dropsy, rheumatism, diabetes, cramps and in inflammatory conditions.

“ As to urea (CO N₂ H₄), its materials are found in part in an oxidized form as a double stratum of *gelatine sugar* (COO, CHH, NHHH), and in part in a grouping of the atoms into *cyanide of ammonia* within the molecules of the bases of flesh : *Creatin*, Sarkin,

Xanthin and ureate of ammonia (s. p. 67) as their physiological foundation.

"Thus may be understood, why we and our children are subject to the consequences which the liberation of Ammonia from the stagnating blood or from urea carries with it in the form of *catarrhal affections*, whenever our blood in its serum does not contain the natural protection and defence in a due quantity of mineral salts. What a luminous significance is there contained in this with respect to the children's catarrh, called 'Diphtheria'! This begins with stagnation of the blood in the Thymus Gland, whence the products of the putrefaction of the albumen of the blood are spread with their infecting force over the whole vascular system. Now as the children of a family are in the same state as to nutrition, only the first case of diphtheria is needed in order to carry away the whole troop of children and also the mother. For when the mother is confined to the sick-bed of her children, the regular progress of the household is checked. Salted milk-soups and flour-soups are not provided. But the respiration takes its usual course and in consequence urea is liberated, which carries off the blood-salts in the excretion of the urine. These salts, deficient before, are diminished from day to day. One child dies; a second, badly cared for, has to take to its bed; the mother watches over each, and in her grief she does not think of eating and drinking, and she follows her children and dies because no physician prescribes for her the physiological salt-water which would save her.

"We cannot, however, deny that a certain guarantee against certain affections is offered by a vegetarian diet, because it is richer in mineral elements than a meat-diet; especially if the nourishing vegetables are cultivated not in a garden fertilised with stable manures, but on natural mountain soil, or at least on fields which are preserved in their pristine fertility by manuring with finely ground rocks; but also vegetarians remain subject to the injuries caused by changes of weather, and by emotions, which affect the nervous system, causing stagnation of the blood and the pathologic consequences flowing from it. Besides this, vegetarians also are subject to hereditary tendencies, which may be restored to their normal state by improving the constitution of the blood by means of preparations of iron, lime and sulphur, as we see, *e.g.*, in scrofulosis; for when the blood is renewed the whole body can be built up anew.

"While I have endeavoured to furnish an explanation of the chemical processes taking place in certain pathologic conditions, I hope thus also to have furnished to practising physicians a sort of thread of Ariadne, which may be of service to direct them in the labyrinth of diseases that has hitherto prevailed, and which may considerably enlarge the boundaries of the healing art."

"Hermsdorf unterm Kynast."

As a work on the Chemistry of Life and Disease we can strongly recommend it to our readers. We have not found anywhere such a clear statement of the chemical changes through which the tissues pass, and the products of those changes in any other work which we have seen. His chapter on the functions of the lymphatics and the spleen are well worth careful consideration. A passage in the former so forcibly

states a contention frequently advanced in these pages and in the recently published work on "Glands and Bones," that we will reproduce it :

" If, then, the lymphatics with their ' relay-stations ' the lymphatic glands have this important mission to fulfil of supplying fresh material to the blood and nervous system, it is to be hoped that those gentlemen who have hitherto been so ready to remove swollen lymphatic glands with the knife, because it was customary to say that no one knew what was their use, will in future be a little more backward in making operations."

As we should naturally expect, Hensel's remedies are mostly of a chemical nature. A list of them is given at the end of the book. Among them are the following : Almond confects, Almond milk, Bitter essences, Calcium-magnesium-phosphate, Citric acid, Cream of Tartar, Formic acid, Gum-lemonade, Hematite, Hensel's Tonicum (containing lime and iron protoxide combined with formic and acetic acids), Physiological salts (Phosphates, sulphates, hydro-chlorides and carbonates of potassa and soda corresponding with the analysis of the blood-salts made by Denis), Rhubarb, Amorphous silica, Sulphur, Superoxide of hydrogen.

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.

REMOVAL.

MR. SURSHAM, *St. Paul's Churchyard*.—MR. F. T. SURSHAM, late manager to Messrs. Leath and Ross, writes to us to say that he commenced business at 5, ST. PAUL'S CHURCHYARD, E.C., on October 1, 1894, on his own account, after managing the same pharmacy for Messrs. Leath and Ross since 1862.

NO MORE BUTTER.—Certain Italian bacteriologists have now denounced as pernicious the bland menstruum which has enabled all the world to assimilate stale bread. Dr. Rothe, of Zurich, and Dr. Fevro, of Turin, have declared that the use of butter is highly dangerous, as they have found the tuberculous bacillus in sundry pats. The sequence of reasoning is obvious. Cows *may* be tuberculous, *may* produce tuberculous milk, which *may* be churned into tuberculous butter, which *may* be consumed by a person in the receptive condition for tuberculosis, who *may* develop phthisis, *ergo*, no prudent person should eat butter!—*Medical Press*.

GENERAL CORRESPONDENCE.

INDIAN MEDICAL CONGRESS.

To the Editor of the HOMEOPATHIC WORLD.

SIR,—I beg to communicate the following extract from the *Indian Mirror*, of the 20th instant, for the information of my learned colleagues.

“We published in our issue of Sunday a * letter from Dr. D. N. Banerjee, homeopathic practitioner of this city, complaining of the exclusion of homeopathy and other systems of medicine from the proceedings of the recent medical congress. We agree in the view expressed by Dr. Banerjee that the name Indian Medical Congress is a perfect misnomer, as homeopathy, kabiraji, and other systems of medicine which are largely practised in the country, were rigidly excluded from its proceedings. The last congress was undoubtedly a one-sided affair, and its continuance in future can be of little practical benefit to humanity. The holding of another medical congress, dealing with all systems of medicine, will not be a bad idea, and we are sure it will command more success than its rival. We endorse the suggestion, made by a weekly contemporary, that the new congress should be founded on the lines of the late Parliament of Religions at Chicago. Every system of medicine should find a place in it, and none run down on the score of its insignificance. We think such an unsectarian assembly will bring in vast good to society, contributing in no small measure to the store of medical science. At all events, it is necessary to point out the fallacy of the recent congress.”

Yours fraternally,

D. N. BANERJEE.

January 21, 1895.

 THAT INFINITESIMAL DOSE!

To the Editor of the HOMEOPATHIC WORLD.

SIR,—In the HOMEOPATHIC WORLD for November last, there appeared a very interesting article from the pen of our esteemed confrère, Dr. J. P. Gallavardin, of Lyons, translated by Dr. Clarke, and entitled “The Cure of Uncleanliness by *Ammonium Carbonicum*.” In it Dr. Gallavardin quoted four cases successfully treated with high potencies of that drug. In the first three cases he prescribed *Ammonium Carbonicum* 30, and in the fourth

* *Vide Homeopathic Recorder* of November 15, 1894, p. 551.

a single dose of the 200th potency given in the patient's soup. It is to the latter case that I would specially draw attention. According to the old-school theory the administration of such a dose would be considered the height of folly, and, so far as its action was concerned, inert. But what was the result in the case above quoted? Was the *single* dose of a *single* remedy, and of a *high* potency, of no effect, and, therefore, inert? No, decidedly not. To quote his own words:—"On January 22nd he begins to be more and more cleanly, to such a degree that he reprimands others for their uncleanness, and makes them sweep the rooms carefully, and he brushes his clothes when he goes out and when he comes in. On the 25th of January he shows himself, perhaps for the first time, with his face washed, his hair combed, and dressed with taste. He no longer cultivates bad company, but prefers that of his father, whom he previously shunned; he no longer has antipathy to his sister, to whom he has become very attentive. His judgment has developed." After such a great transformation as the above it is not surprising that, as Dr. Gallavardin adds, "all the people of his acquaintance are astonished to see the young man of cynical aspect transformed so rapidly into an elegant, polite, and amiable young man." It must be borne in mind that the dose of medicine was administered on the 11th of January, a fact that must not be lost sight of, as it shows the speedy action of the high potency of the drug. To the question, naturally asked, "But was the cure permanent?" Dr. Gallavardin replies that it "has held good for a period of nearly twelve years!"

Now, I would ask, "What further proofs do we need of the efficacy of the infinitesimal dose?" And yet there are thousands upon thousands of medical men (or medical men so called) who are drugging their patients to death with material and "heroic" doses, or else permanently injuring their constitutions! To add more weight to his argument in favour of the *single* dose, Dr. Gallavardin has added a *post scriptum* to his communication, to the effect that he has treated several children, varying from three to ten years of age, whose intellectual development was very backward. *They all passed motions more or less involuntarily.* He asserts that he has dissipated these uncleanly habits by giving them from time to time a *single* dose of *Ammonium carbonicum* 200. The efficacy of the higher potencies of a drug, used homeopathically, more especially in chronic cases of the disease, is an undoubted fact, which cannot be done away with, and which no amount of arguing and ridicule can prove to the contrary. Personally I have come across cases in which a drug of a low potency did not give any satisfactory result until a higher one was used. One case of hepatitis struck me in particular. *Nuxvomica* 1x and *Bryonia alba* 1x, 2 minims every three hours alternately, had

been administered without any improvement taking place; in fact, they appeared to aggravate rather than to ameliorate the disease. The same remedies in the 80th potency (1 minim of *Nux vomica* in the morning, and 1 minim of *Bryonia alba* in the evening) were then substituted. The effect was highly satisfactory. Within three days an improvement set in, and in three weeks afterwards the patient was perfectly and permanently cured. Undoubtedly, any diseased organ or portion of the human anatomy is highly susceptible to drug action. Especially is this the case when drugs are homeopathically administered; so that a comparatively *strong* dose (strong from a homeopathic point of view) over-excites the diseased part, and irritates it, thereby aggravating the symptoms of the disease. To our brethren of the allopathic school all this may appear an enigma; yet the great undeniable fact remains, and cases without number are annually cured by infinitesimal doses, administered by homeopathic hands, which have resisted all the wholesale drugging of the allopathic system of medicine. Surely this should open their eyes to the great truth as first taught by Hahnemann over a century ago, that "likes *must* be treated with likes," and that "heroic" drugging is as unscientific as it is dangerous to human life. Yet the proverb has said truly—"None are so blind as those who *will not see*."—I remain, yours faithfully,

FREDERICK KOPP.

Greenwich, N.S.W., December 15, 1894.

ACCORDING to M. Joal singers regard violets as the flower that especially causes hoarseness. *Viola odorata*, i.e., sweet violets, was proved by Hahnemann, Gross, and Stapf. Among the symptoms elicited were: "Short breath; respiration is scarcely noticed, inspiration and expiration are difficult; it is most painful on expiration," &c. On "chest": "frightful oppression of the chest and dyspnea, with pain in the chest as from a stone lying upon it.—*Homeopathic Envoy*."

CONSUMPTION AT DIFFERENT AGES.—The common impression, based on the statements of many of the older text-books, is that phthisis is especially a disease of early adult life. The statistics of death in Great Britain, probably the most complete and extensive anywhere attainable, however, indicate that this is not correct. The largest number of deaths, according to these statistics, occur in the decade from thirty-five to forty-five years of age, and not until about sixty years of age do the number of deaths from this cause, as compared with the number of persons living, fall below the average for the period from twenty to twenty-five. It is to be remembered, however, that the disease usually requires several years to run its course, so that infection probably occurs, on the average, nearly five years earlier than death.—*New York Medical Times*.

VARIETIES.

A METHOD OF EXAMINING THE LIVER (*Norsk Magazin for Laegevidenskaben*, No. 12, 1893).—Dr. Lane describes a method of examining the liver which enables one to obtain results impossible in the ordinary dorsal position. The patient sits with his body well bent forward, and so supported that the abdominal walls are relaxed. The examining physician sits behind the patient, and places a hand around each of the patient's sides. In the position the anterior border, lower surface and gall-bladder may be explored with great ease. He has often seen cases where the objective symptoms were indistinct in the dorsal position, but by employing his method no difficulty was found in outlining the organ.—*New York Medical Times*.

A NEW METHOD OF MAKING PALATABLE AND DIGESTIBLE MILK.—Dr. Robert T. Edes, of Boston, gives (*Med. Record*, Aug. 18th) a valuable way of preparing milk where other methods have not proved useful.

A pint of milk is gently warmed. Into it is dropped, very slowly and with constant stirring, about twenty minims of the dilute hydrochloric acid of the United States Pharmacopeia. The milk should be stirred until it cools. In this way a very fine flocculent coagulum is produced floating in the whey, which is easily accessible to the digestive secretions, while the whole fluid has lost somewhat of the flat and cloying taste which makes it unacceptable to so many. It will be noticed that milk prepared in this way differs from the various "wheys" in the highly important particular that the casein is retained and used, instead of being separated out as a distinct product, while it avoids the bitterness of pancreatized milk.

INFLUENCE OF COFFEE AND ITS SUBSTITUTES ON DISEASE GERMS.—This subject has been investigated by the Russian bacteriologist, Proteorowski, who arrives at the following conclusions: 1. An infusion of coffee, when taken either as a beverage in the ordinary way, or with meat bouillon, undoubtedly acts as a disinfectant. 2. The disinfecting properties of coffee depend on the formation of certain constituents during the process of roasting; also on the tannic acid which it always contains. 3. The germicidal efficacy (such as it is) of acorn-coffee, rice-coffee, &c., is likewise developed by roasting. 4. An infusion of coffee or one of its substitutes, made with water only, is a much better disinfectant than another of the same strength but mixed with meat bouillon. 5. A pure watery infusion of coffee of the usual strength kills the bacilli of cholera within three hours, typhus bacilli in one day, and the spores of the Siberian plague within nine days. Coffee substitutes, in like infusions, destroy the two former species of germs, but not those of the plague.—*New York Medical Times*.

AN EASY METHOD OF KEEPING WARM.—Dr. Ernest B. Sangree (*American Therapist*), calls attention to an easy method of warming one's self when other and common means are not available. It consists merely in taking deep inspirations. He says: "On a very

cold afternoon of this winter, though walking briskly along, I was uncomfortably cold; feet and hands were very cold, and my ears so chilled as frequently to require the application of my heavily gloved hands. In addition, the whole surface of the skin was unpleasantly chilled; 'creeps' ever and anon running up and down my spinal column and radiating thence over the body and extremities; in short, a condition that every reader of this little article has doubtless many a time experienced. I then began taking an exercise often employed before with benefit; deep forced inspirations, holding the air as long as possible before expulsion. After a few inhalations the surface of my body grew warmer, and a general sense of comfort pervaded me. Continuing, the next part to feel the effects of the effort was my previously frigid ears; they grew agreeably warm, and within the time required to walk three blocks, at the previous pace, hands and feet partook of the general warmth, and I felt as comfortable as if the same length of time had been passed by a glowing fire. Many times unavoidable exposure, as in riding, driving, standing, and the like, for a longer or shorter time in the cold, has been the cause of severe and even fatal congestive troubles, such as pleurisies and pneumonias, and a means of quickly stimulating the flagging peripheral circulation which a person has always with him, and which can be employed without moving a step, is one that ought not to be neglected or forgotten."—*New York Medical Times*.

TECHNIQUE OF LABORDE'S RYTHMIC TRACTION OF THE TONGUE.—Dr. Laborde (*Bull. Méd.*, No. 40, 1894), in the employment of his procedure, which is said to be indicated in all varieties of asphyxia, proceeds as follows: Seize the anterior third of the tongue, either with a towel or with the bare index finger and thumb, and exercise from fifteen to twenty times a minute strong traction. This is repeated at measured intervals and followed by relaxation of the tongue, thus imitating the respiratory movements. During the tractions, one should be able to feel that a fair amount of strength is brought to bear at the root of the tongue, which in apparent death will yield more readily to traction than normally. When a certain amount of resistance is beginning to be perceived, then the respiration is becoming re-established and life is reappearing. Then one or two swallowing movements are made, and followed by a growing inspiration—*le hoquet inspireteur*.

If the jaws are clenched, open them with the ordinary measures. If the patient be a person who has been more or less drowned, while making rhythmic tractions with the right hand, introduce the index finger of the left hand into the pharynx to provoke attempts at vomiting. In the asphyxia of the newborn a pair of forceps would be more convenient, though they are not absolutely necessary. It is of the greatest importance to continue the tractions with persistence, without cessation or discouragement, for a sufficiently long time, for fortunate results may be obtained after a half-hour, an hour, or even longer, with the uninterrupted use of this measure. The procedure is very simple and easily carried out by any one. The object is not to cause air to enter the lungs, as with the methods of artificial respiration, but to induce spontaneous respiration by stimulation of the terminations of the superior laryngeal and glosso-pharyngeal nerves, which reawaken the bulbar respiratory centre, and thence lead to contrac-

tions of the diaphragm and respiratory muscles.—*New York Medical Times.*

A CURE FOR TYPHUS FEVER.—Accounts come from Mexico of a wonderful remedy which has done more during the last five months toward suppressing the typhus-fever epidemic in that country than all the physicians of the country. If these accounts are confirmed, a panacea of marvellous virtue has been discovered, and its investigation should at once engage the further attention of scientists. A general of the Mexican army was applied to by a woman of the town near which he was encamped for permission to treat the fever patients in the hospital. Permission was given, and all the men recovered. The general asked the woman if the medicine was a secret. She answered that it was merely a preparation of jicama, a farinaceous root, classified by botanists as *bumella*. The general himself then began to administer the root, which he has done so successfully as to be the means of curing thousands of cases of typhus and typhoid. A dispensary has been opened in the city of Mexico, where doses of jicama are given free to poor people who ask for it. It is said that 4,000 cases have been treated during the past year, not one of which has terminated fatally. The remedy is reputed to be equally efficacious in pneumonia.—*Science Siftings.*

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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.

Armstrong (H. G.). The Treatment of the Exanthemata by Antiseptic Inunction. 8vo. (Churchill. 1s.)

British, Colonial, and Continental Homeopathic Medical Directory for 1895. Fcap. 8vo. (Homeopathic Pub. Co. Net, 2s.)

Craig (William). Posological Tables, Appendix on Poisons, Index of Diseases, Medicines Arranged according to their Actions. New ed., Revised in accordance with the latest British Pharmacopœia. 64mo, pp. 100. (Livingstone: Edinburgh. Net, 1s.)

Dessar (L. A.). Home Treatment for Catarrhs and Colds: A Handy Guide. Cr. 8vo. (Baillière. 5s.)

Felkin (R. W.). On the Geographical Distribution of Tropical Diseases in Africa. With an Appendix on a New Method of Illustrating the Geographical Distribution of Disease. With Table and Map. 8vo, pp. 88. (Clay: Edinburgh. Simpkin. Net, 3s. 6d.)

Herschell (G.). Indigestion: An Introduction to the Study of the Diseases of the Stomach. 2nd ed. Cr. 8vo. (Baillière. 5s.)

- Martin** (B. R.). A Practical Treatise on Diphtheria and its Successful Treatment. 2nd ed. Cr. 8vo. (Baillière. 2s.)
- Medico-Chirurgical Transactions.** Published by the Royal Medical and Chirurgical Society of London. Vol. lxxvii. 2nd series, vol. lix. 8vo. (Longmans. 28s.)
- Rabagliati** (A.). On Some Symptoms which Simulate Disease of the Pelvic Organs in Women, and their Treatment by Allo-Piosto-Myo-Kinetics (Massage). 8vo. (Baillière. 7s. 6d.)
- St. Thomas's Hospital Reports.** Edit. by T. D. Acland and B. Pitts. Vol. xxii. New series. Illust. 8vo. (Churchill. 8s. 6d.)
- Shaw** (C. E.). Diseases of the Eye: A Practical Handbook for the Use of General Practitioners and Students. With Illusts. and a Test Card for Colour Blindness. Cr. 8vo, pp. 98. (Churchill. 8s. 6d.)
- Waldo** (F. J.) and **Walsh** (D.). Bread, Bakehouses and Bacteria. Cr. 8vo. (Baillière. 8s. 1s.)
- Weichselbaum** (A.). The Elements of Pathological Histology. With Special Reference to Practical Methods. Roy. 8vo. (Longmans. Net, 21s.)
- Year-Book of Pharmacy.** Comprising Abstracts of Papers Relating to Pharmacy, Materia Medica, and Chemistry, Contributed to British and Foreign Journals from July, 1893, to June, 1894. With the Transactions of the British Pharmaceutical Conference at the Annual Meeting held at Oxford, 1894. Edit. by Louis Siebold. 8vo. (Churchill. 10s.)
- Year-Book of Treatment for 1895: A Critical Review for Practitioners of Medicine and Surgery.** 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 the "MANAGER" of the Homeopathic Publishing Company, 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. Majumdar, Calcutta; Dr. Mahony, Liverpool; Dr. Thos. H. Newell, Boston, Mass.; Dr. Sandberg, London; Dr. Banerjee, Calcutta; Mr. John Cumming, London.

BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Chemist and Druggist.—Homeopathic Review.—La Homeopatia.—N. A. Journal of Homeopathy.—Maanedsskrift f. Hom.—Allg. Hom. Zeit.—Family Doctor.—The Animals' Friend.—Calcutta Journal of Medicine.—L'Art Médical.—New York Medical Times.—Medical Century.—Chironian.—Healthy Life.—Clinique.—Hahnemannian Monthly.—Jour. of Orificial Surgery.—Vaccination Inquirer.—Medical Visitor.—Medical Advance.—Sydney Daily Telegraph.—Reynolds's Newspaper.—Gentry's Record of the Homeopathic Mat. Med.—Two copies of bound volumes American Homeopathist for 1894.—Annual Report Leaf Homeopathic Hospital, Eastbourne.—Jour. British Homeopathic Society.—Life of Hahnemann. Dr. Bradford.

THE
HOMEOPATHIC WORLD.

APRIL 1, 1895.

“BURROUGHS-AND-WELLCOMEISM.”

THE lamented and untimely death of Mr. SILAS MAINVILLE BURROUGHS, which took place at Monte Carlo in February last, is an event of more than passing interest. It is scarcely too much to say of the late Mr. BURROUGHS that his business genius has revolutionised pharmaceutical methods and founded a new system of medical practice. Thanks to his energy and foresight, the medical practice of to-day is very different from what it was before he appeared on the scene: it is a much more pleasant, more simple, and more rational affair than the old polypharmacy it is steadily supplanting. It is not homeopathy, though it approaches it in many respects; no more is it allopathy—it is something between the two to which we may give the name which we have put at the head of this article—“Burroughs-and-Wellcomeism.”

Years ago Mr. BURROUGHS saw that if traditional pharmacy did not mend its ways it would not long be able to compete with the gentle and easy methods of homeopathy. Here was his opportunity. Borrowing from homeopathy the use of sugar of milk as an attenuating substance, he devised the tabloid form of dispensing all manner of strong medicines in high-fractional doses. By persistent and intelligent advertising he brought before the profession the properties and uses of a number of drugs known only to homeopathic and eclectic medicine before; and he thus encouraged the use of one

medicine at a time, so strongly insisted upon by HAHNEMANN. This is not exactly homeopathy (though in some cases the indications given for the remedies are clearly homeopathic), but it is at least a very flattering imitation of it.

Not many months ago a letter appeared in *The British Medical Journal* from a country practitioner, which showed the extent of the influence of Mr. BURROUGHS' firm. The letter was headed, "The New Pharmacy," the "new pharmacy" being what we have called "Burroughs-and-Wellcomeism." Formerly this practitioner had to keep a surgery, with a dispenser and surgery-boy, whose combined efforts resulted in the production of nauseous mixtures, which patients were very loath to swallow. Now, thanks to BURROUGHS & WELLCOME, he has a neat cabinet in his consulting-room, with all manner of tablets which he can dispense himself, saving himself no end of expense and his patients no end of wry faces.

And he mentions another point of importance. Formerly he had a homeopathic rival who carried off a large number of his patients in his "mixture" period. As soon as he took to "Burroughs-and-Wellcomeism" the patients began to come back, and the homeopath soon afterwards left the neighbourhood.

Which things — if true — are a parable. We have known homeopaths of this description; let this be a warning to them, that, unless they can boast of something better than the mere negative virtue of not disgusting patients, they will have no chance against the new system of "Burroughs-and-Wellcomeism." Homeopathy is something vastly superior to this, but those who profess it will have to master its principles and practice, if they are to do it and themselves justice. If they fail to do this, it is not likely that the public will face the odium of heterodoxy when so-called orthodoxy provides them with medicines in equally unobjectionable forms.

In another way, "Burroughs-and-Wellcomeism" has had an effect upon homeopathy. Many semi-homeopaths, tiring

of the difficulties of the homeopathic art, have frankly lapsed into Burroughs-and-Wellcomeists, finding practice according to the directions in B. and W.'s little books a much easier affair than finding the simillimum. Thus has the New Pharmacy provided a ladder for weak-kneed homeopaths to climb down by.

There is one matter in which great harm has resulted from the enterprise of this firm, and that is the putting within the reach of the public, in convenient and palatable form, of strong drugs of the *Antipyrin* order. The result of this is that thousands are taking *Antipyrin*, &c., every day without any prescription from a doctor, some bringing on themselves things much worse than the headache, or what not, for which they take it.

But whilst we cannot praise all the results of Mr. BURROUGHS' labours, we rejoice that he has done what he has in the direction of civilising Old Physic. Some years ago it was announced in one of the medical journals that Dr. LAUDER BRUNTON's work on *Pharmacology and Therapeutics* had made an "epoch" in medicine. On the contrary, the book has fallen quite flat, except for the infusion of homeopathy which it contains. The late Mr. BURROUGHS has been much more successful. He has established a genuine epoch in Old School medicine—he has introduced the new era of "Burroughs-and-Wellcomeism."

INFLUENZA ONCE MORE.

OUR contemporary the *Westminster Gazette* (which, by the way, did us the compliment of reproducing subsequently parts of our last month's leading article on "The Frost and Influenza") was almost angry with the leaders of the profession for not giving the exact facts about the pest. The *Birmingham Mail*, commenting on our article, caustically remarked that it was all very well to say that the germs come from Siberia, but it would be much more to the purpose if we could tell "where to pass the influenza on to and how to send it." We fear that that would not be

much to the purpose either, for it seems to us we have been pretty successful in sending it all over the world, but at the same time we have kept a good share of it at home.

Now, however, official medical authority has found a voice in a circular issued by the medical department of our Local Government Board, containing the following advice gratis which we trust will prove soothing to the *Westminster Gazette*.

"1st. The sick should be separated from the healthy. This is especially important in the case of first attacks in a locality or a household.

"2nd. The sputa of the sick should, especially in the acute stage of the disease, be received into vessels containing disinfectants. Infected articles and rooms should be cleansed and disinfected.

"3rd. When influenza threatens, unnecessary assemblages of persons should be avoided.

"4th. Buildings and rooms in which many people necessarily congregate should be efficiently aerated and cleansed during the intervals of occupation.

"It should be borne in mind that the liability to contract influenza, and also the danger of an attack, if contracted, are increased by depressing conditions, such as exposure to cold and to fatigue (whether mental or physical). Attention should hence be paid at epidemic periods to all measures tending to the maintenance of health, such as the use of clothing of suitable warmth, and a sufficiency of wholesome food. Persons who are attacked by influenza should at once seek rest, warmth, and medical treatment, and they should bear in mind that the risk of relapse, with dangerous complications, constitutes a chief danger of the disease."

Without attempting to criticise at length these not very novel remarks we will briefly give our own views of the epidemic.

There is no use in upbraiding the medical profession for knowing so little about it: we know just as much and just as little about this disease as we do about any other. We know as much as we can spell out of its history, course, and symptoms, and that is all.

That there is a "germ" in it we have no doubt at all; but this certainty does not help us much; for the development of the germ is subject to such a variety of conditions which are more or less unknown or incalculable. The germs have existed any time these many centuries, but why they have multiplied at one time and not at another is

more than any one has been able to discover. Possibly certain variations in the electrical or magnetic conditions of the earth may be the chief factor, but this is only a guess. The frost, as we showed last month, coincided with the beginning of the present epidemic, and the thaw induced a still further extension.

Influenza partakes of the nature of a malarial disease and also of an infectious fever. Facts prove that it is transmitted from one person to another; but, again, many persons take it who have not been directly exposed to infection, and who have only suffered from such lowering accidents as chill or over-exertion. In our opinion the poison is everywhere, but in the vast majority of people it does not set up the disease unless some determining factor is introduced. For this cause we do not think there is much to be gained by elaborate measures of disinfection.

Of all prophylactics that have been advocated in our experience *Arsenicum* is the best; a couple of pilules of *Arsen.* 3 or 30 two or three times a day would most likely ward off an attack. Those who are specially liable to catch the disease should take *Arsenicum* continuously; even after they have had an attack they should go on with the medicine until the epidemic is over. Dr. COOPER, in his very interesting paper published elsewhere, recommends other measures which must have serious consideration.

Now, about going to bed. Is it always necessary? We do not think so. We have known many who have done better by fighting through an attack than they probably would have done if they had given in. Every case must be decided on its own merits. It is easy to see at a glance in the majority of cases whether bed is necessary; but we think it a mistake to order bed indiscriminately.

On the other hand, influenza has proved a perfect god-send to many an over-wrought toiler with brain or hands, in that it has *compelled* them to go to bed for a time when nothing else would. In spite of the disease the thorough rest in bed has given the patient a new lease of life.

Bathing, in our opinion, should only be indulged in

sparingly in epidemic times. Water is such a powerful conductor that it robs the body of some of its electricity and the skin of its natural secretion, thus in two ways reducing the vital resistance. The skin is a self-cleansing organ, and the effect of a bath (except so far as the more exposed surfaces are concerned) can be obtained by frequent change of the underclothing. Those to whom the morning cold tub is indispensable should make it salt with one of the sea-salt preparations, such as *Egerton's Brine Crystals*, an excellent preparation.

One thing which makes influenza such a puzzling disease is the protean nature of the malady: it will take the form of almost any complaint a patient has or has had, exaggerating it and probably not showing any unmistakable influenza characteristics till long afterwards. For instance, a neuralgia to which a patient has been subject may gradually get worse and worse, not responding to remedies as it had done formerly, and then, after this has gone on for weeks or perhaps months, a fully-developed influenza attack will set in.

Finally, influenza is no respecter of persons or ages—from the earliest infancy to extreme old age, all are alike obnoxious to it. This immensely increases the incidence of the disease, and increases the difficulty of circumscribing it within the limits of a terse definition.

SULPHATE OF IRON AS A MANURE.—Mr. Wightman Bell has been making experiments to determine the value of sulphate of iron as a manure. These have been made on potato plots at Spalding Marsh, and every care was taken to secure reliable data. In one case a manure consisting of three cwt. of mineral superphosphate per acre, with and without the addition of half cwt. of iron sulphate, showed an increased yield of twenty-nine cwt. per acre from the use of the iron salt. In another case a mixture of three cwt. of mineral superphosphate with one cwt. of sulphate of ammonia, with and without the addition of half cwt. of iron sulphate, showed an increase attributable to the iron of fifteen cwt. per acre, which more than fifteen times repaid the first cost of the salt. It consequently seems settled that the addition of sulphate of iron to artificial manure composed of phosphates and sulphate of ammonia is an improvement in potato growing, and worthy the attention of both growers and manufacturers of artificial manures.—*Monthly Magazine of Pharmacy.*

NEWS AND NOTES.

THE HOMEOPATHIC WORLD.

WITH this issue the HOMEOPATHIC WORLD completes its tenth year under the present editorship.

ANTIPYRIN—A DANGEROUS MEDICINE.

THE following letter, which appeared in *The Lancet* recently, bears out our own protest against the extensive drugging that is now carried on. The preparations of the "New Pharmacy" are so "elegant" that many persons suppose them to be harmless:—

"DOMESTIC DRUGGING: A CASE OF ANTIPYRIN POISONING.

"To the Editors of *The Lancet*."

"SIRS,—May I echo the warning note of alarm raised by Dr. Tom Robinson in *The Lancet* of November 17th on the subject of domestic drugging and the increasing popularity of such drugs as *Antipyrin*? The other day I received an urgent message to attend a visitor to the town. On my arrival I found the patient in a state of extreme collapse, pulse feeble and fluttering, cold clammy skin, vomiting, &c. With difficulty and after prolonged effort she rallied, but her condition for many hours was most grave. On making inquiry I learned that, on the advice of a lay friend, she had taken ten grains of *Antipyrin*; not obtaining immediate relief, she took a second dose, followed by a third, within a short space of time. I may say I could find no organic heart disease, but the patient was very anemic, and for some time had suffered from fainting attacks. There had been no difficulty in obtaining the drug, nor had she any idea apparently of its potency. 'Why, my dear doctor,' she replied with a smile, 'all my friends take it.' No doubt her own immediate circle of acquaintances will, after this, see the error of their ways; but what of the unfortunates who have not a kind friend to experiment and draw clinical pictures for their benefit?

"Southport.

"I am, Sirs, yours truly,

"STANLEY MELVILLE."

EXPLOSIVE PHYSIC.

A FRESH danger of the "New Pharmacy" will be found recorded in the annexed paragraph from *The Lancet* of February 16th. We have become accustomed to see the pavement flying in the air, thanks to the combined efforts of the Gas and Electric Supply companies, the frost has

made explosions of water-pipes and boilers an every-day occurrence, but here is an explosion of a new kind :

"In *The Lancet* of January 17th we published a brief note on the dangers likely to be incurred by carrying certain articles of popular request in the same pocket. The details of the particular case to which we referred have since been reported to us by Dr. W. Davidson, and we are glad to note that the result of the 'pocket explosion' has not been so serious as it might have been. On the morning of Saturday, January 19th, Dr. Davidson was called to see the patient and found him suffering from an extensive burn of the inner surface of the left thigh, with another burn of smaller extent, but more severe, extending over the thenar half of the left palm. The history of the injury elicited was that the patient had been suffering from sore-throat and had purchased some chlorate of potash lozenges. These he was carrying in his trousers-pocket rolled up in a piece of paper. One of the lozenges was loose in the pocket, which also contained a box of safety matches. While moving about he suddenly heard a noise like the hissing of a squib before the detonation, and saw smoke issuing from his pocket, which he grasped from the outside thinking to smother the fire. An explosion followed which blew out the whole of the front of the trousers-leg. There was no loud noise, only an exaggeration of the hissing noise heard at first, but there was a considerable volume of flame. What had evidently happened was that the loose lozenge, by rubbing on the composition on the outside of the box of safety matches, had become ignited and that the rest of the lozenges had been exploded by it, causing the chief explosion. On the room being searched the remains of several of the lozenges were found. They had been reduced to about a third of their normal size, and the outside of them appeared scorched. The patient had fully one ounce of the lozenges in his pocket at the time of the occurrence. On January 25th the wounds were healing rapidly, and were almost entirely covered with new epidermis."

A GROUNDLESS ALARM.

THE following paragraph from *The Chemist and Druggist* of March 9th gives an amusing instance of an allopathic chemist's ignorance of homeopathy, and at the same time enforces the injunction of some of our contributors not to go to allopathic chemists to purchase homeopathic medicines, until homeopathy is made part of the curriculum of both pharmaceutical and medical students:—

"PUZZLED BY THE 8x.

"A correspondent of *The Scarborough Post* informed the readers of that paper last week that 'two pilules of *Arsenicum 8x*, taken twice a day' was a good preventive-medicine, in these influenza times. Whereupon in rushes 'G. Sheldrake,' who, we are told, is a retired

chemist, to inform the public that 'Arsenic is a very dangerous poison, and should never be administered except under the supervision of a medical man. The "two pills of *Arsenicum 3x*," in plain English,' he said, 'meant four *Arsenic* pills weighing $1\frac{1}{2}$ oz. each, which is exactly equal to two gross of the ordinary-sized pill—a very nice dose for one day. There is not a shadow of a doubt,' he added, 'that the prescription would prevent influenza, but an inquest would follow a few hours after taking the dose.'—Mr. Sheldrake evidently imagined the $3x$ meant ten drachms."

VITALITY OF HOMEOPATHY IN SYDNEY.

OUR contributor, Mr. Frederick Kopp, sends us the following interesting account of what he justly terms "A Model Pharmacy" in Sydney, N.S.W. :—

"When Dr. William W. Browning, and others of the same clique, made their insinuations as to the moribund condition of the law of *similia*, they should, at least, have excepted the city of Sydney, in the Colony of New South Wales, Australia. A visit to the pharmacy of Messrs. Fisher and Co. certainly does not give one the impression that homeopathy is 'practically dead' and a thing of the past. The business place of this enterprising firm is situated at 337, George Street (the main thoroughfare in the city of Sydney), almost a stone's throw from the General Post Office. A more than life-size bust of the immortal Hahnemann occupies a prominent position in the large shop window, and is surrounded by medicine chests, and various homeopathic medicines and preparations. Entering the pharmacy, as we step on the rug at the door, a bell loudly gives notice of our intrusion, and the genial countenance of Mr. A. M. Hart is soon seen behind the counter, ready to receive us, and to supply our wants. This gentleman is the general manager of the firm, and it is owing largely to his business capacities, combined with a thorough knowledge of his profession, and his persistent and untiring advocacy of the law of similars, that the pharmacy has made such wonderful strides during the past twelve months. The thanks of the homeopathic medical profession in Sydney are undoubtedly due to Mr. Hart, as his strong and convincing arguments in favour of the Hahnemannian theory and practice of medicine have been the direct cause of not a few of the visitors to the pharmacy becoming converts to homeopathy; and it is greatly to be wished that he may be long spared to carry on this good work. Being naturally gifted with a large amount of brain power, he has not left his talents lying idle, and, mainly through constant and hard study, he has made himself master of the new system. Thirsting ever for fresh knowledge, he has spared neither money nor pains in obtaining it, and any new homeopathic literary production is sure to receive a hearty welcome at his hands, as his well-stocked library of books bears ample witness. All prescriptions are dispensed in the dispensing-room at the rear of the shop. Here everything looks bright, clean, and cheerful, and great care is taken that each drug used is of the purest description,

and true to name and potency. When one considers how very important these points are, both to the patient and his medical attendant, the wisdom of such a precaution will be at once evident. A number of the plants used in preparing the tinctures are grown by Mr. Hart himself, thus doubly insuring their purity and strength. A sample of *Bellis perennis* ϕ , which we procured from this firm lately, and had been prepared from locally grown plants, was at least quite equal to, if not superior, to any imported. Another sample, with which we were well pleased, was *Spongia marina tosta* ϕ , prepared from locally gathered sponges; this was one of the best prepared tinctures that it has been our lot to meet. The tinctures, being kept in a dark place and in tightly-stoppered bottles, are not in danger of having their strength in any way impaired. A large number of homeopathic literary works are sold annually by this firm, and their tincture and pilules are sent and used all over the Colony. Not the least gratifying result is that, since the advent of the new manager, the circulation of THE HOMEOPATHIC WORLD in Sydney has been more than doubled—a healthy sign, surely, of the progress of the homeopathic law of healing in that city and in the Colony generally. It is thus that the common sense of the people is appealed to, and that new converts are being constantly made. The great need of New South Wales is more men eager and able to push homeopathy to the front, so that all may become convinced of its truth, not only in theory but also in practice. It has been affirmed by some that homeopathy is yet on its trial. Be that as it may, the fact remains unaltered, that wherever it has been fairly tried, it has succeeded beyond all expectations. Down deep into the hearts of the people it is sinking, and, once fairly implanted there, all the antagonism of its opponents will be ineffectual to stifle or remove it. Like as the 'little leaven leavened the whole lump,' so the doctrine of the law of similars, first declared to the world a hundred years ago by the immortal Hahnemann, has kept on spreading year by year, until at last the little band of humble followers of the great German physician has developed into a mighty multitude numbering its millions of adherents."

CALCAREA OSTREARUM DISCOVERED BY THE ALLOPATHS.

THE following note appeared in *The Daily News* of March 14th:—

"Ground oyster-shells were prescribed by empirics in the olden time for goitrous, rickety, and scrofulous children. In a communication to the Academy of Medicine in Paris, Drs. Muntz and Chatin say they were right. Oyster-shells were long ago known to contain lime, nitrogen, iron, and sulphur. Besides these constituents, they hold manganese, magnesia, fluor bromure, phosphoric acid, and iodine—all excellent for feeble children. The bromure taken from the oyster-shell is a strong antiseptic. Teeth, they say, would be much improved were pulverised oyster-shells given in food to growing children and to nurses."

Whereupon the following letter was addressed to the editor of that journal and appeared on March 16th :—

“GROUND OYSTER-SHELLS IN MEDICINE.

“SIR,—It is astonishing how long it takes academies of medicine of ancient name to find out anything really good. Measures like wholesale bleedings they will preserve for centuries, whilst they leave to ‘empirics’ and homeopaths the discovery and preservation of really curative substances. The paragraph in your issue of yesterday regarding the value of powdered oyster-shells as a medicine being at last acknowledged in the Paris Academy of Medicine illustrates this. But all Drs. Muntz and Chatin said might have been found nearly seventy years ago in Hahnemann’s work on ‘Chronic Diseases.’ The oyster-shell is the substance known in homeopathy as *calcareo carbonica* or *calcareo ostrearum*, and the communication of Drs. Muntz and Chatin is a tardy acknowledgment on the part of traditional medicine of Hahnemann’s wisdom in the choice of it.

“30, Clarges Street, W.

“Yours obediently,

“JOHN H. CLARKE, M.D.”

KALMIA.

THE following item from *The Journal of the British Homeopathic Society* will serve to keep up the interest in this medicine :—

“Dr. Allen relates a case of post-diphtheritic paralysis, in which the heart failed, pulse going down to 38, face pale and pinched, cold extremities. *Digitalis* helped at first, then lost its power; but *Kalmia* 6 ‘was like magic, acting instantly and holding him—no slipping back this time, and before morning the danger was over.—*Amer. Homeopathist*, Nov. 15th, p. 370.”

MAGICAL GROWTH OF PLANTS.

A CORRESPONDENT sends us the following extracted by *Public Opinion* from *The New York World* as an illustration of the power of infinitesimals :—

“A French scientist, M. Ragonneau, has just discovered how to make a plant grow from the seed in thirty minutes as much as it would under ordinary circumstances in as many days. Heretofore nature has shared this secret with the *Yoghis* of India alone, and the methods pursued by these clever magicians in performing this trick have been often described. They plant a seed in the earth and cover it with a cloth. In a few moments the cloth begins to be pushed upward by the growing plant, which in a short time attains the height of several feet. Various theories have been advanced as to the *modus operandi* of this miracle, one of the latter being that the

spectators are all hypnotised. During his travels in India M. Ragonneau saw this trick performed frequently, and noticed that the Hindoos always embedded the seed in the soil which they brought with them especially for that purpose. At last he learned that they obtained this earth from ant hills. Now, as every one knows who has inadvertently eaten one of these industrious insects, ants contain a large proportion of *Formic Acid*, with which in time the soil of their habitation becomes charged. This acid has the power of quickly dissolving the integument surrounding a seed and of greatly stimulating the growth of the germ within. After a little experimenting with this acid, the learned Frenchman was able to duplicate perfectly the Hindoo trick. His further researches have led him to believe that this discovery may be profitably applied to agriculture. By infusing ants in boiling water acid as strong as vinegar may be obtained. M. Ragonneau has achieved the best results and most perfect growth by using earth moistened with a solution of 5,000 parts of water to one of acid."

There is no necessity to boil ants in order to obtain *Formic Acid*. It is manufactured much more expeditiously from *Oxalic Acid* and *Glycerin*.

DR. CRETIN OF PARIS.

WE regret to learn that another of the homeopathic veterans of Paris has passed away. The following is from the *Chemist and Druggist* of February 23rd :—

"One of the leaders of French Homeopathic Medicine, Dr. Cretin, has just passed away at Versailles, where he retired some eight years ago, worn out by age and fatigue. The deceased was 75 years of age. For many years he acted as assistant to Dr. Petroz, in collaboration with whom he wrote a *Treatise of Materia Medica*. He was a frequent contributor to the Bulletin of the French Homeopathic Society, and a treatise on the subject of cholera, written by him during the 1886 epidemic, attracted a good deal of attention. Dr. Cretin took an important part in founding the St. Jacques Homeopathic Hospital, to which institution he contributed considerable gifts of money."

ICHTHYOL IN URTICARIA.—Lanz, of Laupen, from observations on his own person (*Rev. Méd.*, October 21, 1894), concludes that ichthyol given internally is an effectual remedy for certain forms of urticaria caused by error of diet. Having been seized with a violent urticarial eruption, which menthol in 20 centigramme doses twice a day relieved only for the moment, it occurred to him to take a cachet containing 20 centigrammes of ichthyol; half an hour later the urticaria had completely disappeared. As a measure of precaution he took a similar dose of ichthyol on the following day after the two principal meals, and there was no recurrence of the eruption.—*British Medical Journal*.

ORIGINAL COMMUNICATIONS.

ACIDUM CARBOLICUM FOR ERYSIPELAS.

By DR. GUSTAV PROELL.

CARBOLIC ACID is not given as a remedy for erysipelas in any medical paper or homeopathic handbook, except in the fourth edition of Hales' *New Remedies* in which there is a full description of the pathogenesis of *Acidum Carbolicum*, principally on the skin, but no mention is made of the use of this remedy in *idiopathic erysipelas*. Now I made the experience on my own body.

On the 15th of February (the coldest day of this winter at Graz—15 Celsius) I was seized in the early morning with a violent trembling chill (Schüstelfrost) and great thirst for cold water. The next night with a severe tearing pain in the right elbow. In the morning *there appeared the erysipelas* from which I had suffered already twice in my life, but always on the left side (extremities). *The back of the right hand, the three first fingers and the arm* showed a violet colour, and swelling with roughness. I took *Rhus* and the pain disappeared instantly, but the erysipelas increased. There was 39·8 degrees (Cels.) and uneasy dreams on the second night. On the third night 38 degrees (Cels.) only. But the erysipelas went on. Now Dr. Streintz (my only homeopathic colleague here) visited me and advised me to try *Carbolic Acid 30*, and already after one day the erysipelas stopped and did not seize the last two fingers. I could move the hand better, and then began the desquamation, which continues still.

Graz, March 3, 1895, Schlögelgasse.

THE EPIDEMIC INFLUENZA.

A Lecture, delivered before the Balloon Society, on the evening of Tuesday, March 5, 1895. By ROBERT T. COOPER, M.A., M.D., Physician, Diseases of the Ear, London Homeopathic Hospital.

My position here this evening is due to the fact that your worthy President, Mr. Lefevre, requested me, towards the end of last week, to take the place vacated by another and to deliver a lecture upon the all-engrossing subject of the prevailing epidemic.

The subject is one that literally comes home to us all,

and comes home to us after a fashion that is, in the very severest form, undesirable. I suppose I am right in saying that there are very few houses in this colossal collection of bricks which have escaped the ravages of the influenza during the last six years; for I need hardly remind you that this present epidemic has been amongst us, not this year only, but since the winter of 1889-90. In some respects, perhaps, there have been differences in the characters of the symptoms each winter, as there certainly have been differences in our modes of speaking of it. When it first began, it was quite common to hear the most flippant remarks made about the "flue," but now this mode of speaking seems to have altogether changed; for, the moment we get discussing the subject, instead of indulging in a flippant laugh, we seem to be much more inclined to burst out into tears. When such exquisite foolers as G. R. Sims, or, as he delights to term himself, "Dagonet," of the *Referee*, and a comic actor in one of our theatres, can, on meeting, shed copious tears, and find no other way out of their discomfiture than by getting into the nearest four-wheeler, it is not to be wondered at that ordinary people should be stricken with sadness, and adopt some other less flippant designation for the epidemic than that of the "flue." With a vengeance have we learned to laugh at the other sides of our mouths; it has come to a pass truly, when we find it impossible to raise a smile even within the elevating gallery of the Balloon Society!

The names given to influenza during its different onsets have comprised such terms as Chinese, Indian, Russian, and Siberian catarrhs; but it was not until the epidemic of 1741, which visited the north of Italy, that the term influenza was adopted. This Italian term, influenza, and the French one, *la grippe*, have remained as the popular designation of this strange epidemic in preference to the more correct medical term, epidemic catarrhal fever, and perhaps the only thing we can congratulate ourselves upon is our choice of its name. The term influenza, especially, an influence, expresses exactly what it is, that is to say, it expresses it as exactly as the nature of things will admit. For in truth this influence is a something which appears to be atmospheric, and which, though microbic, is to be found pervading the entire population of the places that it attacks, being therefore what is technically termed, pandemic.

It is quite unnecessary to enter into a consideration of the many theories that have been put forth to explain its cause. It being so widespread and affecting such a large number of the people, we are justified, I think, in considering that it owes its origin to atmospheric disturbance, and proof seems to be given of this when we see how commonly its onset dates from the breaking up of great frosts, as has been somewhat the case with us this year. In the almost universal epidemic of 1782, a similar circumstance was noticed in St. Petersburg. Then, it is said, that on one night the temperature rose 30 degrees, Fahr., and that the following day some forty thousand people were stricken down with it in this city alone; and, numerically, a similar outbreak of the malady is said at the present moment to be affecting the people of both Rome and of Munich. Moreover, the spring of 1782 was remarkably late, with a long prevalence of cold easterly winds; the hedges were not full blown in Cornwall before the beginning of June. A similar state of weather, says one writer,* has commonly ushered in this universal malady. The month of May, too, was remarkable for its unusual degree of cold and humidity, with a gloomy and uncommonly disturbed state of the atmosphere. Very mild weather, on the contrary, accompanied the epidemic of 1803, and epizootic diseases preceded it; cats, dogs, horses, cows, sheep, and swine being affected.

Then again, in one epidemic in the eighteenth century, the disease advanced from the east as far as the Elbe, then passing over the intermediate countries, it reached England where the epidemic wave divided up into two great divisions, the one crossing over the Atlantic to the United States of America, the other going downwards to the south of France, to Spain, and to Italy, until it was lost in the Mediterranean. This cannot but remind us of the way in which lightning storms, in passing over a country, seem to divide and fork off in different directions. A similar peculiarity has been observed regarding cholera. Influenza, too, like cholera, may travel along the banks of rivers, leaving the more remote districts free from its ravages.

The present series of epidemics seems to have baffled all calculation. When it first appeared amongst us, we were told to expect it to last for three years, and then it

* Trotter's *Med. Naut.*, vol. i. p. 362.

was to be followed by cholera. It is a matter of congratulation to us that all symptoms of cholera have kept away during these latter epidemic years; and that, not only has cholera been absent, but that when the influenza has lessened, there has been a notable decrease in the amount of other kinds of prevailing diseases; when at its height the mortality in all classes of disease runs up.

To describe all the symptoms of influenza would be a matter of no small difficulty. It seems to affect every part of the body, pitching with special violence upon those parts that have previously been weakened by disease. It seems to spare no part, no person, no locality. It is here and there and everywhere; it can truly be said to knock impartially at the cottage of the poor man and at the palace gate of the king.

In his *Practice of Medicine*,* the late Professor Aitken attempts to define it; and this is his definition: "A specific catarrhal inflammation of the mucous membrane of the air passages with severe constitutional disturbance. The disease is invariable in its essential characteristics, frequently prevailing as an epidemic, attended with lassitude and prostration to an extreme degree, with special and early implication of the naso-laryngo-bronchial mucous membrane. Chills occur and great susceptibility to cold exist over the surface of the skin; the eyes become injected and tend to fill with tears, the nostrils discharging an acrid fluid, attended with fixed and intense pain in the head, mostly frontal over the eyes, sometimes also attended with giddiness. The nights are sleepless with delirium or lethargy; cough prevails, with yellow expectoration, most troublesome at night, and tending greatly to increase the headache. Fever attends the disorder, sometimes slight, sometimes severe, and of a type varying in different epidemics and localities. The duration of the fever is definite, of from four to eight days (Parkes). The sense of taste is generally greatly disordered, and there is great anxiety and depression over the region of the heart."

When the *definition* of a disease is so long, what manner of *description* should we give of it? And, in truth, it needs no description, we know it too well; were I to attempt to describe it, I should say it were like what was declared some years back to have been the Apocalyptic

* *The Science and Practice of Medicine*, by William Aitken, M.D., p. 748. Sixth edition. Griffin & Co., London.

reference to the Napoleonic Dynasty—a thing that is, and is not, and yet is.

I need hardly say that the purpose we ought to have in hand this evening is a useful and practical study of the disease. It has troubled us sufficiently, and, without a doubt, we, medical men, have had sufficient experience of it by this time to be able to speak with some certainty about it. We surely have seen enough now to justify us in pronouncing what are the best preventive means to be adopted, and what the curative agencies most likely to prove efficient once it has come. Amongst the preventive agencies, it goes without saying that a condition of health, both as regards body and mind, the *mens sana in corpore sano*, is to be inculcated. There is no more effective way of contracting a disease, and this holds good especially of epidemic disease, than the keeping the mind in a distressed or anxious state. The effect of the mind upon the body is probably never better shown than in times of epidemic; it is by no means uncommon to find whole masses of people stricken with disease where the evidence is all but sufficient to prove that fear was the main cause of the infliction.

And then it is equally important to keep the body in health. In order to keep the body in health it is necessary that every little vein and nerve, every little particle of tissue throughout the frame should be kept in a condition of healthy activity; movement, healthy movement, universal movement, is beyond everything desirable, and more calculated to ward off the incidence of disease than any other agency. For this purpose, I would enjoin upon each member of the community the adoption of graduated movements, of the arms, the legs, and the entire body, morning and evening, and such measure of bodily activity, especially in the open air, as is possible throughout the day.

It is certainly a fact that those who are living amongst healthy surroundings are attacked as well as those whose environments are unhealthy; and the influenza has been known to seize upon the crews of ships at sea, as well as upon bodies of men pent up all day in unhealthy offices. But this is no argument why the laws of health should be disobeyed, nor can they at such seasons be disregarded without running extreme risk. The weak succumb, while the strong survive.

Then I would specially enjoin the application of cold water in one form or another to the surface of the body; for those who cannot endure a cold bath, I would recommend flipping on the surface of the body with the end of a towel dipped in cold water, and to make a practice of doing this every morning, following it with graduated exercises as just referred to.

My own feeling with regard to influenza is, not only that it is caused by electrical disturbances of the atmosphere, but that in its very nature it consists of an electrical change in the human body. This, of course, is no new idea; but acting upon it I have, in several cases, recommended patients who are just seized to betake themselves at once to the electric baths in York Terrace, Marylebone Road, and feel sure that if anything could be said to cut short an attack, this has done so. As a rule, a person when first seized with influenza ought to go to bed and stay there till well, but if this cannot be done, then the next best thing is to resort, without loss of time, to the electric bath.

The exhibition of electricity in the form of an electric bath seems to lift the patient up out of that terrible state of despondency and depression, and to give him that feeling of lightness and cheeriness that is, or at least ought to be, in every case attendant upon health. I say ought to be, for it is the duty of every one to endeavour to live as happily as circumstances will admit. All nature, when placed under circumstances favourable to healthy life, presents an appearance of liveliness and gaiety, and why should man, contrary to what he sees around him, be gloomy and despondent?

As regards diet at these times, there is much controversy in regard to the exhibition of stimulants, and certainly, if by stimulants is meant that combination of sherry and hock, champagne, port, and claret, and liqueur that constitutes the essential attendant upon a London dinner, stimulants are a pernicious poison.

I must say, in some cases, however, where vitality is low, and persons suffer from anemia and weakness of the circulation, the exhibition of a little warm Jersey punch, in the morning, before dressing, need not be discounted. From a dessert-spoonful to a tablespoonful of old rum in a little warm milk, sprinkled over with nutmeg and sugar, is certainly sustaining.

Then we must not forget the good effect of fresh fruit, of oranges, of lemons, and of small quantities of lime-juice.

In addition to which occasional draughts of rough Herefordshire cider will prove beneficial.

Dr. J. H. Tucker, in a paper read, several years ago, before the Epidemicological Society of London, begins by alluding to the remarkable, but well-established fact, that in 1849 the cider districts of Herefordshire, Somersetshire, and part of Devonshire were, to a great extent, exempt from the ravages of cholera, while the disease was raging around. Upon further inquiry it was found that this exemption was confined a good deal to those individuals who drank cider as a common beverage, and that those who partook of malt liquor occasionally suffered. He also remarks that in some parts of France and Normandy, more particularly where cider is the common beverage, cholera is seldom known to exist. . . . Cases are related in which not only were persons exempt from attacks of cholera raging around them, who drank freely of cider, but a case of severe cholera is also related which yielded to the diluted juice of sour apples.

The medicinal treatment of influenza will divide itself into preventive and curative.

Among the agents that I consider have a preventive or prophylactic effect upon the disease, there is none that I can so heartily recommend as that suggested by me some years ago in *The Echo* for ordinary catarrh and cold, and this is the 3x. trit. of *Carbo-animalis*. This I usually recommend patients to take as a snuff, a few grains to be sniffed up the nostrils. The effect of it is to cut short at once the preliminary disposition to nasal catarrh. When the catarrh has reached the larynx and chest it is advisable to change to a similar preparation of *Lobelia Cerulea* taken in the same way.

Influenza, as I previously stated, attacks every part of the body, beginning, ending, and continuing throughout, with depression. It seizes very often upon the brain, disordering the mental faculties, very often upon the throat, causing persistent and obstinate night-cough; very often upon the lungs, giving rise to catarrhal and interstitial pneumonia. Here and there and everywhere exerting its fell influence, it depresses, while it seldom kills.

In order to find for this Protean disorder an efficient

remedy, we must find one, which, in accordance with Hahnemannian philosophy, will meet the greatest number of the symptoms, the characteristics of the disease.

I know of but one drug that is capable of doing this. And the proof of the capacity of this drug to meet these symptoms depends as much upon my own observations of its effect as upon any chapter and verse I can quote from other authorities. That it meets with effect most of the symptoms of the disease more efficiently than any other remedy I can affirm from a pretty extensive experience.

There is one point that makes me hesitate in recommending it, and that is the fear that it will be used in doses other than those I recommend. Let me then impress upon those who feel inclined to use the *Mono-bromide of Camphor*, that the strongest form suitable for its repeated administration is that of a 6th decimal trituration made up into one grain tablets or pilules, and that a larger dose than one or two of these tablets, given every third hour, should never be administered in this disease.

The *Mono-bromide of Camphor*, *Camphor-bromide*, or, as it is more correctly termed, *Brominated Camphor*, has a special effect upon the brain, and those who are liable to brain disturbance ought not to have the administering of it in their own hands. The public insist upon knowing everything nowadays, and I give them this knowledge, but not without this warning.

Camphor admittedly has a special influence over epidemics of cholera, and it probably has also an effect upon influenza, but it is not ordinary camphor that I recommend, but the *Mono-bromide*; and while I can heartily advise its administration if properly watched throughout the whole course of the disease, I do not mean to say that it ought to be given indiscriminately or without proper and educated supervision.

The public are too fond of taking into their own hands the treatment of serious disease, and of dabbling unthinkingly with powerfully acting drugs. No drug ought to be given except when wanted, and no more of it should be administered than will effect the object we have in view.

Camphor enters into the composition of that pleasant and efficient disinfectant, *Sanitas*, along with *Peroxide of Hydrogen* and *Camphoric Acid*; used freely throughout houses, it is probably a more efficient destroyer of germs than any other known compound. Closely allied to it is

the much more expensive volatile extract of *Eucalyptus*, or *E. oil*, as it is termed, and of which there are many inferior preparations in the market. Either may be taken in potentised form internally, say in the third or sixth dilution, as preventives of the malady; in this way the action will be much more searching than in grosser forms. Following closely upon the *Camphor-bromide*, in point of usefulness, is the American green hellebore, *Veratrum-viride*, as it is called. Here we get a drug which, if given in suitable cases, is capable of lowering pulse, fever, and temperature, not in a violent and unnatural manner, but in a gradual and safe way. The pains about the eyes, forehead, and shoulders; the tendency to sickness and gastric pain, and disturbance; the muscular pains and weakness of the limbs, the backache and depression, find in *Veratrum-viride*, if given in doses of a drop of the third dilution frequently repeated, an efficient and grateful remedy.

In all feverish conditions, where the fever is persistent, or constantly recurring and affecting equally the whole body, rather than, as with *Aconite*, one particular organ especially, the fever being acute and decisive; *Veratrum-viride* has proved itself the grandest of the many modern triumphs of the Homeopathic School.

Comparing the indications for *Veratrum-viride* with those for *Camphor-bromide*, the contrast is very pointed in regard to the accompanying fever; where fever is sustained, where, in other words, the temperature remains high for longer than an hour, whatever be the type of the fever present, whether remittent, intermittent, or continuous, *Veratrum-viride* will, other things indicating, be called for; whereas a temperature that shifts irregularly, running up suddenly and falling irregularly, will call for *Camphor-bromide*.

Suddenness of seizure, whether high fever or great depression accompany the attack, will call for *Camphor-bromide*; only that in the feverish condition it ought to be given in single dose, and *Verat.-vir.*, *Aconit.-nap.*, *Bell.*, *Baptisia*, or other indicated remedy allowed to follow it; whereas in a severely depressed state of the system it may be repeated.

If the patient fall into a drowsy, semi-tranced condition, with indescribable dreams, and tendency to numbness over the back and top of the head, a single dose of *Camphor-*

bromide, 6th decimal, is all that need be given, as such condition would be too closely homeopathic to that it produces to allow of repetition without risk of aggravation.

As a rule, a single dose of *Camphor-bromide*, given in the commencement of acute seizures of any kind, renders the patient more susceptible to the action of other remedies.

There have recently been introduced synthetical compounds, amongst which the substances *Antipyrin* and *Phenacetin*, take precedence. These are drugs that as Professor Pepper, of Pennsylvania, writing in his *Theory and Practice of Medicine*, vol. i. p. 195,* one of the most recent and authoritative works published, says must be used with great caution in influenza. It is quite true, however, that these, *Phenacetin* especially, are sometimes useful in alleviating the pain, particularly the headaches, of the epidemic. But of all the abominations that the ingenuity of man has devised for the alleviation of discomfort, commend me to the recently introduced hypnotics. One after another of these is foisted on the public as a harmless and efficient sleep-producer, only to prove in course of time a pernicious poison. A drug may produce sleep in a healthy person, doubtless, but this it can only do by a species of poisoning; the Nemesis will come, if not in the form of a warning headache next day, in the insidious and undermining deprivation of the faculties in course of time.

Those who suffer from sleeplessness—I am speaking of the matter now apart from the influenza merely—should carefully endeavour to remain quiet in bed. If they can but accomplish this feat, I can promise that their want of sleep will lose half its terrors, and that they will be surprised how little exhausting sleeplessness is of itself. Should it be caused by mental suffering, I can only remind the sufferer that he is, by indulging in depressing emotions, thereby producing poisons within his own body as deadly as any to be found without it.

I can but lay down the law; and I do it, well knowing that—

“Reason’s whole pleasure, all the joys of sense,
Lie in three words—health, peace, and competence.”

—Pope.

* *Theory and Practice of Medicine*. By William Pepper, M.D., LL.D. F. J. Rebman, Adam Street, Strand, London.

A VERBASCUM CASE.

By R. H. BELLAIRS.

FRIDAY, March 8th.—Confronted with a desperately painful otalgia with a very "blurred" picture in a married lady of about 30.

Right ear and an adjacent molar stump had been sore since an attack of influenza some weeks back.

As I was on the spot I tried remedy after remedy, puzzled as I was by the utter want of clearness in the symptoms, produced, without doubt, by long years of allopathic drugging.

This lady used to suffer almost continuously from facial neuralgia, from which I have kept her free for some time past by homeopathic treatment.

In this case the pain was paroxysmal, intense, relieved somewhat by warmth.

Great intolerance of pain during the attacks. *Magnesia Phos.* 5x—no result. *Cham.* 12, *Coffea* 30, *Glon.* 3—no result.

Then gave Sul. 200 frequently, which brought out the following picture :

Attacks come on every 15 or 20 minutes, but not clock-like (*Cedron*).

Agonising, shooting pains.

Sensation of intolerable *drawing*, as if the ear were being *wrenched out* of the head (Buck ascribes this to *Bell.*).

Cannot bite teeth together. *Verbascum* 3.

No more attacks, though some soreness remained.

N.B.—No discharge occurred.

The attack had lasted about 24 hours or rather more.

Previous attacks have lasted off and on for weeks.

On Monday, 11th, comes out a pigeon-egg swelling on lower right jaw, showing where the *fons et origo malorum* really was, and that the art of the dentist could have prevented all this. *Heckæ Lava* 6 trit. every morning.

As regards the connection of dental caries and otalgia, *vide* Dr. Cooper's valuable work on "Ear Inflammations," page 89.

As regards the result of allopathic drugging, it is interesting to note that at the Central Homeopathic Society of New York some weeks since, several members expressed their conviction that the suppression of malaria by *Quinine* was a frequent cause of tuberculosis! (*vide Medical Advance* for January, 1895).

I myself much doubt whether the system ever recovers from a heavy course of *Quinine*.

Certainly homeopathic antidoting is essential.

REMARKS ON THE "MATERIA MEDICA."

CINA (continued)—*COCCULUS*—*CYCLAMEN*.

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

CINA (continued). *Sleep*: frequent yawning as if he had not slept enough, drowsiness the whole day; nightly restlessness, frequent change of position in order to be more comfortable; dreams, absurd, full of anxiety; accompaniments of disturbed sleep are colic, suffusion of heat and glowing redness of cheeks without thirst. *Fever*: tremor of the whole body while yawning, with sensation of shuddering; shuddering over upper body as if the hair would stand on an end, even near the warm stove; cold face with warm hands; cold sweat on the forehead, nose, and hands; quotidian fever at the same hour; several attacks of chilliness with thirst, with coldness of hands and feet, every afternoon; afterwards heat, with pallor of the countenance but especially hot hands and feet with cutting colic; heat in fever, mostly about the head, with yellow complexion, and blue margins around the eyes.

In referring to the *résumé* I would once more reiterate the importance of Hahnemann's prefatory remarks, in order that we may understand what has been well called "the spirit of the homeopathic doctrine," and in this connection would note in looking over the symptoms how many of them are connected with disorders of the digestive organs, especially the peculiar restlessness and forms of sleeplessness; the peculiarity of the fits and the importance of noting these in diseases of children, and the fact in fever of thirst accompanying chill.

COCCULUS.

We now pass on to the next drug in the list, namely, *Menispermum Cocculus* or *Cocculus Indicus*, more familiarly spoken of simply as *Cocculus*, concerning which we read in the opening remarks: "This plant, which had been heretofore used merely for the purpose of destroying a few hurtful animals and stupefying fishes, in order to facilitate

their being caught with the hands, had never been employed as a remedial agent previous to the provings which I instituted with that drug upon the healthy body. This drug is indispensable in many forms of lentescent nervous fevers, in certain abdominal spasms and spasmodic pains of other parts, disposing the mind to sadness, especially in females, in many cases of paralysis and certain moral affections. *Camphor* is its chief antidote. In chronic diseases this drug acts many ways." In detailed symptoms we find—*Moral*: his thoughts are exclusively directed to one disagreeable object; he is absorbed in his own thoughts and sees nothing around him; continually absorbed in sad thoughts as though he had suffered an insult; very anxious about the indispositions of others; sudden violent anguish; irresistible disposition to warble a song, a sort of monomania. *Head*: headache with inclination to vomit as if he had taken an emetic; stupid feeling in the head; cloudiness of the head, mostly increased by eating or drinking, as if the brain were constricted; headache as if the eyes were being torn out. *Eyes*: as of dust in; dim-sightedness as if flies and black spots were before the eyes. *Ears*: heat in the outer and inner right ear, early in the morning in bed; noise as of rushing water. *Nose*: swelling of the right half of the nose. *Face and teeth*: redness of the cheeks and heat in the face without thirst, in a room entirely cold; swelling of the parotid gland; swelling and hardness of the submaxillary glands, and nodosities in the forearm, painful when moving the hand along them; the cervical muscles appear too weak to support the head; most relieved by leaning the back against something; the anterior teeth feel as if raised out of their sockets, and so heavy as if they would fall out. *Mouth*: feeling of dryness with foam-like saliva and violent thirst; dryness of the tongue, with a yellowish white coating without thirst. *Pharynx and esophagus*: dryness and roughness, especially perceptible during deglutition, without thirst; burning, accompanied by shuddering about the head. *Taste and appetite*: metallic, coppery, sourish; food tastes as if unprepared. *Gastric*: frequent empty eructations, tasting of ingesta, putrid, bitter; pain at pit of stomach at every eructation as of a blow; unsuccessful eructations terminating in hiccup; feeling of hunger in stomach, little diminished by eating, almost the whole day; great thirst at every hour of the day; sensation as of a worm moving

in stomach. *When becoming cold, or when catching cold, an inclination to vomit comes on, exciting a copious accumulation of saliva; inclination to vomit, accompanied by and related to headache, and a pain in the intestines as if bruised.* *Stomach:* sensation as if one had been for a long time without food, until the hunger was gone; *violent spasm of the stomach, griping sensation.* *Abdomen:* compressive pinching in the epigastrium arresting the breathing; empty and hollow sensation in the abdomen as if she had no intestines; cutting in the hypogastrium in the direction of the epigastrium diminished by standing. *Stool:* constipation lasting several days; precursory symptoms of inguinal hernia soft stools, diarrhea; tingling and itching in the rectum as from ascarides. *Urinary:* watery urine; tensive aching pain in the orifice of the urethra, between the acts of micturition. *Genital:* itching of the scrotum; menses seven days too early, with distension of the abdomen and contractive pain with cutting at every motion and inspiration, accompanied by a contractive feeling in the rectum; pain during menses as if the inner parts suffered a sharp pressure from a stone; leucorrhœa; increased excitability of the genital parts. *Catarrh:* sneezing; violent coryza the whole day; ulcerative pain in the left nostril. *Respiratory and chest:* tenacious mucus in larynx; tensive constriction of right side of chest, oppressing the breathing; sibilant snoring breathing, with oppression unto suffocation, especially during an inspiration, the breathing is very slow and sometimes arrested, and the face is disturbed as in apoplexy; stitches in the interior of the chest synchronous with the pulse, when sitting, continuing without interruption for at least a quarter of an hour; shivering over the mammæ; piercing pain in the articulations of the chest and all the dorsal vertebræ, as if they were sprained or were being spasmodically drawn together, especially during motion. *Back:* paralytic pain in the small of the back, with spasmodic drawing across the hips, hindering walking, with anxious apprehensive mood; pain in the spine as if it would break; painful cracking of the cervical vertebræ, when moving the head. *Upper extremities:* single stitches in the shoulder-joint, and the muscles of the upper arm when at rest; a sort of creeping as of something living, and a throbbing and burning under the right shoulder, extending as far as the fingers; a breaking, tearing, or stitching pain in shoulder- and elbow-

joint and in the humerus, the pain being intolerable when at rest, with a sensation of pain; he is afraid of moving his arm although the pain decreases by motion; intense paralytic pain, as if the bones were broken in two, during a violent motion of the arm; when lifting the upper arms they feel a pain as if broken; *stitches in the right upper arm*; the forearm goes to sleep, with sensation in the hand as if swollen, and a constrictive pain in the muscles; the fingers are cool, the interior feeling icy cold; *both hands—now the one, now the other—are insensible, and as if they had gone to sleep; both hands—now the one, now the other—are alternately hot or cold.* Lower extremities: cracking and painful sensation in the left hip-joint when turning the thigh, especially perceptible when walking; paralytic drawing in the thighs, with weakness in the knees, as if they would bend suddenly; *cracking of the knee during motion*; heat and swelling of the feet, with continual corrosive itching. *General*: itching of the skin of the body, especially in the evening when taking off the clothes; single pimples, becoming filled with pus, and afterwards drying up and disappearing, over the nose, on the temples, chest, and between the scapulæ; also a sort of hard blotches containing no fluid, surrounded with a red border. *Cocculus excites stitching pains and heat in cold glandular swellings, at least when touched; all the symptoms and pains, especially in the head, become aggravated by eating, drinking, sleeping, or talking; intolerance of both the cold and warm air; intensely painful paralytic drawing, continuing for a time, and beginning with a jerk, in various parts of the limbs, apparently in the bones; cracking in the joints; painful stiffness of the joints; alternate going to sleep of the feet and hands, in transitory paroxysms; fits; weakness; disposition to tremble; a sort of epilepsy; great weakness of the body, he found it difficult to stand firmly.* *Sleep*: coma vigil; short yawnings, one is not able to take sufficiently deep breath when yawning; when sleeping he lays one arm under the head; dreams vivid, of life and death. *Fever*: shivering in the back, chilliness as if he were touched with ice here and there, not yielding to the warmth of the stove, in the evening; chilliness with violent colic; alternation of chilliness and heat of the body; the outside of the body feels hot without the prover experiencing any heat himself, without thirst; burning heat in the cheeks with cold feet; desire for cold things, especially

beer; *exhalation and sweat over the whole body, during the slightest motion.* *Remarks:* we may observe, first, how the detailed symptoms justify the general remarks as to its value in certain fevers and mental conditions, pains and sensations tending towards paralysis, and also note from the above that though a non-antipsoric, its action in chronic diseases, of which, as we have been previously informed, some seven-eighths arise from the chronic miasm, psora, continues many days. This same fact will apply to many at least of the non-antipsorics when administered in chronic cases, and is of importance to bear in mind clinically. In the moral sphere, the one thought occupying the mind absorbingly would connect it with *Nux. vom.* rather than, *e.g.*, *Ignatia*, or any drug which has rapid change of thought or action; and again would make one think of it in cases of monomania, and add another arrow to our quiver in that painful and often troublesome class of cases. The thought of insult again would connect it with *Staph.* and *Coloc.*, and distinguish it on the other hand from *Lycopod.*, which has effects of vexation, or *Gels.*, which has more sorrow. The anxiety about the *indispositions* of others would call to mind as a correlated antipsoric, *Causticum*, which has "excessively sympathising"; "when she saw boys climbing, she had the greatest fear lest they should hurt themselves," &c. In the nose, swelling of the right half is worth noting; again, local redness and heat in a cold room is clearly unnatural, and these sort of symptoms are not only well to observe as being peculiar, but also as, because they are unnatural they must be either a part of disease or medicinal ones, and so if a medicine is being taken and *new* symptoms follow which are found to be in the proving of that medicine, it is more scientific to believe they are the effect of that medicine than of a cold or something, or indeed anything else, as some extra sceptical persons seem to desire, especially if the medicine happen to have been taken in a potency in which they have already decided, *on no proof whatever*, but their opinion, that there could not possibly be any medicinal action. In mouth *feeling* of dryness with foam-like saliva is one of those peculiar conditions with which the natural history of disease in its contrarities abounds. The chest pain, synchronous with the pulse, is worthy of note; also, in several parts, a pain as if it would break, which I believe is characteristic of *Cocculus*. The two kinds of eruption

too, the dry and pustular, have their value; position in sleep, whether generally or of any particular part, is as always useful to note.

CYCLAMEN.

I pass on now to the next drug, *Cyclamen Europeum*. Our author says: "This valuable drug has, from time immemorial, been unjustly suspected of acting in too powerful and unsafe a manner. Suppose what Dioscorides says of this drug is meant for our *Cyclamen*, he speaks after all from mere hearsay. The Arabians employed this root, under the name of *Arthanita*, as a component part of a cathartic, which was rubbed upon the abdomen in the shape of an ointment (*unguentum de Arthanita*), containing a quantity of the most violent drastics. This procured for our *Cyclamen* the reputation of being a drastic, which is not the case. Modern physicians know nothing of this drug, excepting scarcely what the ancient physicians had imagined. The homeopathic method being opposed to taking anything for granted, I have deemed it my duty to prove this drug, and to record the symptoms which I and my disciples have obtained from it. We can no more determine the medicinal virtues of a drug from its appearance, its colour, shape, &c., than we can judge of the intrinsic worth of a man by his dress, his manners, his speeches. As we can only judge him by his deeds, so can we know the remedial properties of a drug only by trying it upon the healthy organism. I have so far used a very small portion of a drop of the third attenuation at a dose, but in many cases this dose is too powerful." In the above remarks one cannot but admire the rescuing of a drug from a calumny so ancient as the days of Dioscorides, and the unanswerable proof of innocence established, as also the firm attitude persistently maintained that the only true *Materia Medica* is founded on experimental proof, and knows nothing of theories and mere learned effusions; and finally, the caution as to the dose, which again is evidently a fruit of *experience*, and not an *ipse dixit* or oracularly pronounced opinion. The following symptoms have been furnished by Hahnemann: Continual stitches in the fore-part of the brain, when stooping. After dinner or supper, he feels a qualmishness and inclination to vomit in the region of the stomach, as if he had eaten too much fat. Drawing pain in the left arm, extending as far as the

fingers; the child wants to lie down continually. When lying in the bed, in the evening, he feels the pulse in the brain, and falls asleep late. Coming now to the other symptoms, we have—*Moral*: not disposed to any kind of work until evening; indisposition to work in paroxysms of several hours, then the desire to work returned; suddenly serious and somewhat out of humour; after a while he again became cheerful, soon after out of humour again; deep meditation over the present and future, almost unto weeping; internal grief and anxiety of conscience, as if he had not done his duty or had committed a crime. *Head*: memory becomes suddenly weak for things which had just taken place, but it soon becomes quick again, these opposite states alternate at short intervals; his mind is constantly in a state of stupor; he is neither able to be glad nor sorry, although he constantly feels as if he had suffered great affliction; headache, with yawning without drowsiness; *fine, sharp itching stinging in the hairy scalp, which constantly reappears in another place after scratching.* *Eyes*: dilatation of the pupils; obscuration of sight; swelling of the upper eyelids without dilatation of the pupils. *Ears*: drawing pain in the right meatus auditorius internus, with diminished hearing in that ear. *Nose*: diminution of smell. *Mouth, jaws, teeth*: dry lip without thirst; tongue coated white for three days; tearing pain in the three left molar teeth as if being torn out. *Gastric*: frequent accumulation of water in the mouth, with eructation tasting of the ingesta, in the evening and the whole of the next day; nausea, with accumulation of water in the mouth like waterbrash. *Appetite and taste*: little hunger and appetite; no appetite for breakfast; if he eats ever so little of some aliment, the rest is repulsive to him, and he feels nauseated in the palate and throat; complete want of appetite, especially at breakfast and supper; repugnance to bread and butter, less to warm food; food has a flat or no taste; no thirst for four days; hiccough after a meal. *Stomach and abdomen*: grunting in the abdomen after a meal, returning every day; uncomfortable sensation in the abdomen, with some nausea in that part; paralytic oppressive sensation in the epigastrium as if one part of the intestines were loose, and as if a stretching sensation occurred in the neighbouring part; the right side of the abdomen, below the umbilicus, appears to him swollen and bloated in the morning, this is an illusory sensation. *Stool*: grunting in abdomen,

preceded by emission of flatulence; papescent; hard; drawing-aching in and about anus and perineum, as if there were subcutaneous ulceration, when walking or sitting.

NEW REMEDIES.

ECHINACEA AUGUSTIFOLIA.

THE *Homeopathic News* of August last published several articles on the uses of this remedy. The plant grows in marshes and prairies of Illinois, Missouri, Nebraska, and Texas. It grows to the height of two or three feet. The root is long, dark brown when dug, turning black when dried. It appears to resemble *Baptisia* in its action in low fevers and typhoid states, and it has been used successfully in the treatment of chronic ulcers, fever-sores, and wounds. Struma and syphilis have also been benefited by it. In the case of wounds it is also used locally, diluted with water or mixed in the proportion of 1 to 2 with vaseline. Snake-bites, bites of venomous spiders and venomous insects and rabid animals, carbuncles and cases of blood-poisoning have been benefited by it. It is said to possess antiseptic properties superior to those of carbolic acid.

JACARANDA GUALANDAI — A REMEDY FOR ACUTE SORE THROAT AND FOR LEUCOR- RHEA, Etc.

Dr. J. F. Convers writes from Bogota, Columbia, S.A., in *The Homeopathic Recorder* of July, 1894:—

“*Jacaranda* θ is a very useful remedy in acute sore throat or pharyngitis when the deglutition is very difficult and there is no swelling in the tonsils, but the throat is red and hot, the deglutition is very painful and there are many little vesicles in the pharynx.

“I have employed the *Jacaranda* θ *intus et extra* after *Acon.*, *Bell.*, *Merc.*, and *Phytolacca* have failed, and I assure you that the mother tincture (3 gtt. every two hours) is the best remedy for that disease.

“I have used it several times with very good success in leucorrhœal catarrhs, when, after having employed the remedies indicated by Eggert in his book on ‘Uterine and Vaginal Discharges,’ I have had no success.

"I give to the patient a decimal solution in water for injections every twelve hours, and 3 gtt. for every spoonful of water at the same intervals.

"It is a very innocent remedy; but the 3rd dilution is better for the ophthalmic catarrhs with hypersecretion of the membranous glands."

HELODERMA HORRIDUM.

Excellent provings of *Heloderma Horridum*, the poison of the Gila monster lizard, have appeared in several numbers of *The Homeopathic Recorder*. This poison produces a sensation of coldness more intense than that of any other substance. The following extract illustrates this:—

"Quite a number of those who read the proving of *Heloderma Horridum* shrugged their shoulders and cried, 'Too sensational.' Among them was a young clerk in the employ of Boericke and Tafel. He laughed at the whole thing, and in a spirit of bravado took six doses of the 6th dil. On the second night he awoke with a cold sensation creeping down his body and legs, and found himself in a very cold and clammy sweat. This lasted all the remainder of the night, and he was unable to go to sleep again; by morning the disagreeable experience began to pass off, and he felt no more of it."—*Homeopathic Recorder*, October.

The proving of the drug—a very important one—appears in the March and April numbers of the *Recorder* for 1893. The prover, Dr. Boocock, has used it successfully in cases of paralysis with staggering gait; chorea, with blue-cold hands; and paralysis agitans with cold hands and feet, clammy cold and wet.

The following case of pneumonia cured by the drug was related by Dr. Boocock in the *Homeopathic Recorder*, and will serve to illustrate its action:

DR. ROBERT BOOCOCK in *Hom. Recorder*.—Mrs. Ford, eighty-one years of age, has been my patient several times during the past four years. She suffered from erysipelas and dropsy in the legs. In October she caught cold, and had also a bad fall; her symptoms were those of pneumonia: fever, delirium, and cough, pain in chest and hard work to breathe, blueness of lips, tongue, and cheeks, cold extremities, and was very low in appetite, and

appeared to be sinking. Pulse, fifty; temperature, ninety; and to all human appearance was rapidly dying; all said so, and I fully believed so, but left *Heloderma Horridum*, one powder in water, and ordered her tongue to be moistened with a feather dipped in this every half-hour. I did not call the next day until evening. I was waiting to be notified of her death, but no such notice coming, called to see, and to my surprise, found everything changed. I then gave *Helo. Hor.* every four hours, with placebos. All the bad symptoms gradually disappeared, breathing became natural, heart gained strength, pulse increased to seventy, temperature to ninety-eight, and appetite became better, asking frequently for food. This continued so long as she was taking this medicine. She was so well that I ceased to attend, she having no aches or pains, was eating and sleeping well, bowels moved regularly, and night watching was given up. All who saw the recovery were pleasingly surprised, and so was I, and have frequently asked myself, Could anything else have done this? *Lachesis* has changed a slate-coloured tongue, and has aroused those who appeared to be dying, for a short time, but to extend the life of one as good as dead for thirty days is a triumph for the *Helo. Hor.*

PICHL.—Pichi, or *Fabiana imbricata* belonging to the family of the *Solanaceæ*, is a shrub or small tree which grows on high dry hill-tops in South America. Its branches are arranged in the form of plume-like sprays, which have a peculiar light bluish-green colour, due to a large amount of bluish or greenish-grey resin, with which all its tender parts are covered. Besides this resin, the drug contains tannin, starch, a minute quantity of some unknown alkaloid, and an abundant proportion of a glucoside analogous to esculin extracted from the horse chestnut. The pharmaceutical preparations are made from the leaves; one consists of the fluid extract, the dose of which is 15 to 40 minims, and the other of the simple tincture. The tincture of pichi has a disagreeable, persistent, bitter taste. Its resin is precipitated on addition of water. It exerts a stimulant effect upon the kidneys, but its physiological action has not been closely studied. Its therapeutic effect is chiefly manifested in affections of the genito-urinary organs. In enuresis nocturna, pichi has, it is said, often a most beneficial action. Pichi has been given with success in jaundice and dyspepsia resulting from an insufficient secretion of bile. It is said to be a valuable remedy in the treatment of lithiasis, or calculus of the kidney or bladder. When given with alkalis it holds uric acid in solution, and it is thought that its resin dissolves the mucus which binds together the particles of stone, leading to disintegration and facilitating expulsion. In chronic renal congestion and calculus pyelitis this drug is of service, but it is believed to be contra-indicated when degeneration of renal tissue exists. Acute or chronic cystitis is benefited by the administration of pichi. Dr. H. C. Wyman, an American practitioner, has reported very favourably upon this remedy in cases of cystitis of various origins, and likewise in cases of lumbago and sciatica associated with the deposition of uric acid.—*Monthly Magazine of Pharmacy.*

MATERIA MEDICA.

BERBERIS VULG. FOR PAIN IN RIGHT URETER.

Mrs. N., aged forty-two years, has had leucorrhœa for several months. She has pain in the right kidney, following the course of the ureter. Has had cough since she was a little girl. *Berberis* was given, thinking that these pains came from sand passing through the ureter. After the pains she passed large quantities of muddy urine. The curative effect of a drug is on the reverse side of the provings. *Berberis* has cured the pain in the right ureter, and the pain in the left ureter has been produced by the remedy. *Berberis* is a great remedy for passages of stone or sand through the ureters. Her appetite is better since she began taking the remedy; her cough continues same, but in every other respect she is better. On the third return of the patient the *Berberis* was discontinued and *Sac. Lac.* substituted. Progressed to complete recovery.—From private notes.—*Amer. Hom.*

STRAMONIUM IN LAMENESS OF KNEE.

JULIA, aged five years, has pain in left knee, which may be the beginning of hip-joint disease. On rotating the leg in socket no pain is experienced, nor on suddenly striking the leg below the knee are the patellar reflexes absent. She has spontaneous limping, with occasional pains in inner part of left knee. *Colocynth* and *Stramonium* are the two specific remedies for this disease. *Stramonium* acts well where there is an inflammation arising from syphilitic origin. *Stramonium* 1,000 was given her one week ago, and to-day she reports getting better every day: she has had no screaming spells; her limping is almost gone. She was, therefore, put upon *Sac. Lac.*—From private notes.—*Amer. Hom.*

CONIUM IN DYSMENORRHEA.

Miss G., aged twenty-five, has always had dysmenorrhœa, says Dr. Goodno in *Hoyme's Clinical Therapeutics*, the flow scanty, almost stopped; epistaxis, cough, stitches through the left lung at times. Two years ago, after unusual exertion, had bearing-down pains, &c. *Bry.*, *Sepia*, *Sulph.*, and *Graph.* relieved dysmenorrhœa somewhat, but the prolapsus pains increased. Examination showed uterus prolapsed and anteverted; bearing down as though the womb would be forced from

the vulva, aggravated when standing and walking, before and during the menses; intermittent flow of the urine, with cutting after micturition; obstinate constipation, absence of stools for seven days (long standing); stools large, hard, and followed by tremulous weakness; she must lie down; dull pain below left mamma (one year); *Conium* 1,000, with prompt relief and speedy cure.—*Amer. Hom.*

LYCOPODIUM IN SCIATICA AND LUMBAGO OF
TWENTY YEARS' STANDING.

DR. BANERJEE in *Calcutta Med. Jour.*—An old lady, aged seventy years, was suffering from very painful sciatica and lumbago for the last twenty years. Since the last five years she was confined to bed. She never suffered from rheumatism nor gout. She was subject to acidity only.

Present condition.—Very irritable, abuses servants and relatives needlessly, and then weeps; very obstinate; always afraid of being left alone; this dread of solitude is noticeable both in the day and at night; is drowsy during the day, but wakeful at night; starting on falling asleep at night; continued oppression of the chest, and dyspnea from the least exertion; complains of painful flatulence every night; cough day and night with copious purulent expectoration which tasted salty; frequent copious urination at night and wetting of the bed every night. Another prominent symptom was burning between the scapulæ (like coals of fire). This also she used to feel in the night after lying down and when the back was in contact with the bed.

All these symptoms closely resembled *Lycopodium* symptoms and it was prescribed in the 30th potency thrice daily. After taking six doses she felt almost cured. No more medicine was given. She has been enjoying good health since the last six months.—*Amer. Hom.*

CALCAREA-CARB. IN RHEUMATISM—AGGRAVATION
AT FULL AND NEW MOON.

DR. CHAUDHURI in *Calcutta Med. Jour.*—A lady, aged about thirty-four, was suffering from acute shifting rheumatic pains in the left arm from the shoulder to the elbow-joint. The pain was of a very agonising character, which she described as aching and throbbing. There was aggravation from cold and during the periods of full and new moon. There was no decided swelling or tenderness. She came under my treatment on the 4th of

May, 1893. *Puls.*, *Bry.*, *Rhus Tox.*, *Mez.*, were given, but without effect. It at last became less under *Calc.-carb.* 12. On the 13th of June, the day of new moon, notwithstanding that *Calc.-carb.* was being continued, the pain again returned in an aggravated form, though not as bad as before, but it was less the next day. By the further persistent administration of the same medicine the pain disappeared altogether, and did not return.—*Amer. Hom.*

KALMIA IN CARDIAC HEADACHE.

DR. PRÖLL (*Hom. Monatsblätter*) relates the case of a boy of thirteen 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.—*Amer. Hom.*

GRAPHITES IN ERUPTION.

LUTZE, *Allg. Hom. Zeit.*—A young lady had suffered for two years from a white, branlike, rough eruption occupying the whole side of the right forefinger. It exuded a little occasionally, and for the last fourteen days showed a tendency to spread to the thumb. The eruption somewhat resembled that seen by the author in a case of leprosy, though, of course, that disease was out of the question in this case. *Graph.* 30, two doses at a week's interval, was the only medicine prescribed, and when seen six weeks later the eruption had completely disappeared.—*Amer. Hom.*

COLLEGE NOTES FROM HERING OF CHICAGO.

HEADACHE WITH HUNGER.—You will find only a few remedies for headache accompanied by great hunger. I know of but three: *Anac.*, *China-sulph.*, and *Psorinum.*—*Sawyer.*

COUGH BETTER BY WARM DRINKS.—Cough ameliorated by warm drinks: *Spongia.* What other remedy has this?—*H. C. Allen.*

[Lee and Clark give *Alum.*, *Ars.*, *Eupion*, *Lyc.*, *Nux Vom.*, *Rhus*, *Sil.*, *Verat.*, in addition.—*Ed. H.W.*]

In cases of poor recovery from *la grippe*, or where that disease is followed by brain or lung trouble, I have frequently found *Lac. Can.* to be the indicated remedy.—*H. C. Allen.*

In photophobia without apparent cause *Conium* is the first remedy to be thought of.—*L. A. L. Day (Amer. Hom.).*

STROPHANTHUS—PATHOGENETIC EFFECT.

A DOSE of ten drops of this tincture, taken by mistake, caused in a man of 60 nausea, vomitings, weight in head, cold sweat with tendency to syncope. The pulse was feeble and irregular, and there was cerebral torpor.—*L'Art Médical*, August.
J. B. H. S.

URANIUM—PROVINGS.

EXPERIMENTS with this drug are being made in both schools of medicine. At Yale College they "showed *Albumen* and sugar in the urine in almost every case"; animals were probably the subjects. None of the (five) homeopathic provers presented these phenomena; but persistent back-ache, suppressed or delayed menstruation, "disgust for washing the face," and severe mental depression, are mentioned as resulting from it. In the subject of the last symptom the specific gravity of the urine ranged from 1,026 to 1,030. We hope to have more detailed reports of these experiments.—*North Amer. Journ. of Hom.*, June.
J. B. H. S.

CARBOLIC ACID AS A CURE FOR SNAKE BITE.

MR. GEO. B. PENSE, superintendent, reports the following case:—

Last fall, in company with Mr. H. Carlos, of Cape Gracias, Nicaragua, I was coming down the river from the Constanca gold mine. Stopping one evening at the Sumo Indian village we found that the chief had been bitten on the foot by a "tomagas," the most venomous snake in this country. The man was in the most pitiable condition. Thin, watery blood was issuing from his mouth, nose, ears, and even from the tattoo marks on his arms and breast. His urine was also discoloured by blood.

The people were all clamorous for us to give him some "Merican seekia" (American medicine), knowing that we always carried a medicine chest with us. It happened that we had been discussing that same day the various remedies for snake bites, and Mr. Carlos had said that to cauterise the wound with *Carbolic Acid* and give the same internally was a sure cure. After explaining to them that it had been so long since he had been bitten it might not be possible to cure him, we decided to try the above cure. The question was how much to give him. We decided upon three drops dissolved in glycerine, in half wine-glass of water. We gave him two doses at an interval of half-hour that evening. Two hours after the second dose we gave him an emetic that greatly relieved him and he soon went to sleep. The next morning we gave him another dose of the acid and left him.

I was on my way to the World's Fair, and have just returned. Mr. Carlos has got back from another trip to the mine, and tells that our patient is fully recovered, and that he had successfully treated another one the same way.
—*American Homeopathist.*

SPIGELIA IN HEADACHE.

THE headaches of this remedy are always worse from noise, a jar, or thinking. The pains are situated in various parts of the head, and may be either on the right or the left side. We find the pains of various character, as pressing, shooting, stitching, boring, or tearing. The most characteristic headaches are of neuralgic nature—headaches commencing in the morning in the cerebellum, spreading up and over the left side of the head, causing violent and pulsating pains in the left temple and over the left eye. This headache increases in severity until noon, and then gradually decreases until evening, when it disappears.

Spigelia is also a very useful remedy for left-sided facial neuralgia when the infra-orbital and maxillary branches of the fifth pair of nerves are involved. These pains are tensive, burning, throbbing; are worse when lying down and better when sitting up; either cold or warm applications relieve. We may also find pains as if red-hot needles pierced the skin; the pains come and go suddenly; proso-

palgia from tea-drinking.—Dr. S. F. Shannon, in *American Homeopathist*.

OPIUM AND FEAR.

“FEAR produces a wonderful influence over an *Opium*-patient; it seems to leave a photograph upon the mind of the one frightened. It is generally expressed ‘the fear of the fright remains.’ A photograph of the image of the cause of the fright before the mind. A woman frightened by a dog will recall the image of this dog long after with the same fear when she sees another dog. This kind of fear has brought on epilepsy. Frightened by fire, murder, or seeing some one run over by the cars. Fear comes on so suddenly that it produces paralysis. If this awful fear remains an abortion, convulsions or insanity will come on. I knew of a distinct case with many fits almost daily, cured with *Opium*; it came on from fright of fire. I knew of a woman who suffered for more than a year; she heard a scream in the next house; somebody had cut his throat; she would awaken from sleep screeching and screaming hysterical screams. Where the fear of the fright remains, only *Opium* has such a state. It seems singular that *Opium* should have that image within itself that no other remedy has it.”—Dr. Kent in *Medical Advance*.—*Homeopathic Envoy*.

OLEUM GAULTHERIÆ IN RHEUMATISM.

DR. KRAFT in *Southern Jour. of Hom.*—Some months ago I found in *The Homeopathic Recorder* a little article from the pen of Dr. Benj. F. Lang of Nebraska, citing the value and virtues of *Oleum Gaultheria*, or *Wintergreen Oil*, in the cure of rheumatism and some other allied complaints. The cases stated attracted my attention, for just at this time I had been having a severe “tussle” with a case of rheumatism that had been sent to me in a rocking-chair from a distant State. It was one of that class of cases, which, if cured or sensibly improved, would redound greatly to the credit of the physician, besides swelling his bank account.

So far as I could determine from several visits, and subsequent careful study of the “scriptures,” it was a pure, clean-cut case of *Bryonia*; but as I have a mental obliquity in favour of *Bryonia* in almost every case I touch, I refused to use it, resolutely put the temptation behind me, and resumed my studies

of the case. I began ultimately with *Psorinum* (which is my forlorn-hope remedy), in order to unearth and bring to the surface any symptom of prominence that might at some time have been in the case, but now possibly suppressed or covered up by the heroic dosing to which this patient had been subjected in his fourteen weeks of allopathic treatment. I tested the urine and corrected his diet and habits. But the longer I studied, the more perfectly *Bryonia* stood out. At last he got *Bryonia*. Then I ran the gamut of potencies in the two weeks that followed; but the patient saw no amendment. Discouragement seized upon both patient and doctor. I restudied the case, again gave *Psorinum*; returned to the patient's side and talked with him by the hour in hope of finding a clue that might lead to something else; eventually I found that *Rhus* and *Belladonna*, given upon their indications, and a little *Aconite*, would help temporarily, but only temporarily. Now at this time I saw the Lang article, and at once bought a bottle of *Wintergreen Oil*. I administered it thrice daily, a dram on loaf sugar. In twenty-four hours the patient complained that he was very dull of hearing; that his eyes were failing him; that he was passing great quantities of urine; that his bowels were unusually loose; that he was sweating profusely; but that his appetite was better, and that he could now sleep six hours at one stretch without waking from the pain. But no change as yet in his rheumatism. One week after, he found one morning that his back did not hurt him so badly, that he could straighten out his legs a little better, and if it had not been for former unfortunate experiences in that direction, he would have tried to stand up. This man came to me in the early days of August, propped up in a rocking-chair, shipped in a baggage car, unable to stand or move without great agony; and about the middle of September he returned to his home in a distant State walking only with a cane, which, he has since informed me, he has discarded.—*Amer. Hom.*

SENECIO AUREUS; TWO SHORT PROVINGS.

DR. JULIA WASHBURN reports in *Southern Jour. of Hom.*—Mrs. B., twenty-six years. In perfect health; menstrual periods devoid of pain; bowels normally constipated. Began the proving a week before the menstrual period, taking 5 drops of the 2x dilution three times a day.

Menses appeared *two days too soon*, with pain in back and across hypogastrium, which was not very severe and lasting only a day. The flow was more profuse the first two days than usual. Noticed no difference in a leucorrhœa with which she is troubled. Resumed medicine one week preceding return of menses. Had very severe aching in back and pelvis lasting a day and night,

with menses three days too soon and increased flow the first two days. Nausea was a constant symptom during the period, lasting one half-hour after rising and meals. Bowels were less constipated.

Mrs. W., thirty-five years. A business woman, had backache with heavy bearing-down feeling during the menses, with headache three or four days after menstruation begins. Menses continue only three or four days. Took five drops of the 2x dilution three times a day for five days. Had taken the drug but two days when she said she felt a "brightness of spirit," "a rested feeling." This brightness of spirit was very noticeable. She usually has a far-away, careworn look, but under influence of the drug her interest seemed to attach to things about her, and she looked bright and happy. She experienced no sense of fatigue while proving. Had backache all the time, and a profuse watery leucorrhœa, so much as to run down the thighs. Ceased taking drug five days, when backache ceased and less leucorrhœa. Resumed drug, when same symptoms returned. Menses on time, with some cramping before flow appeared; ceasing with appearance of flow, which was more than usual and lasted seven days. The pains were relieved by lying down.—*Amer. Hom.*

INSTITUTIONS.

LONDON HOMEOPATHIC HOSPITAL.

THE annual meeting of the supporters of this hospital took place on the afternoon of Thursday, March 7th, at the office of the Nursing Institute, at Queen Square, Bloomsbury, under the presidency of Lord Wemyss, who fills this position in succession to the late Lord Ebury. The Chairman proposed the adoption of the forty-fifth annual report, which showed that the past year had been one of exceptional activity, seeing the progress made in the erection of the new hospital premises at Great Ormond Street, the increase in the amount subscribed to the building fund, and that the number of in and out patients—11,872 in all—was the greatest ever recorded in the annals of the institution. Except in the case of nursing receipts, the income of the hospital maintained the general level of former years, the ordinary income having been £5,123, and the current expenditure £5,397. The premises and payments in connection with the new premises amounted to £35,000, leaving £10,000 still to be obtained. Lord Wemyss announced the receipt of a letter from the Duchess of Teck, who was very interested in the hospital, inquiring when the new building was to be opened; and although the exact date had not yet been fixed, they trusted

that the opening ceremony would take place in July, when the Duchess would be present. He referred to the regrettable decline in the receipts from nursing during the past year, and this had brought them face to face with a total deficit of £1,528. This deficit caused the governors much anxiety in view of the fact that the new hospital, with its larger accommodation for patients and its improved arrangements, would entail an increase in their annual expenditure of not less than £2,000. He emphasised the necessity for homeopathic practitioners loyally availing themselves of the advantage of employing nurses retained by the hospital, and further reminded lay friends that a large staff of trained nurses was always kept in readiness to attend invalids.—The report was seconded by Viscount Emlyn (treasurer), and unanimously adopted. Several members of the retiring board of management were re-elected, and votes of thanks were also accorded to the medical officers and staff before the proceedings terminated.—*Daily News*.

THE PHILLIPS' MEMORIAL HOSPITAL, BROMLEY.

WE have much pleasure in presenting our readers with an illustration of the proposed new building for the housing of the above institution.



"The building will contain a waiting hall, dispensary, matron's sitting-room, servants' hall, kitchen, &c., on the ground floor; and on

the first floor a ward for female patients, with eight beds, and another for male patients, with six beds; a private ward, isolation room, matron's and nurses' bedrooms, baths, linen-rooms, w.c.'s, &c.; also a small operating room. The second floor will be devoted to servants' bedrooms, cisterns, &c. In the grounds outside there will be a *post-mortem* room and ambulance shed. The design of the building is in a simple domestic style, red brick with stone dressings, the gables having the usual barge boards, and the roof tiled. The whole of the fittings, &c., are to be of the best and most approved kind, and suited to the requirements of a hospital. The honorary architect is our esteemed townsman, Mr. Charles Bell, F.R.I.B.A., of 3, Salter's Hall Court, Cannon Street, E.C., whose large experience in works of great magnitude specially qualify him for the work."—*Bromley District Times*.

The report just to hand gives an excellent account of the work done at the hospital during the past year. All who are desirous of helping in this good work should communicate with Mr. Skinner, Homeopathic Chemist, 138, High Street; or to the Treasurer, C. H. Aylwin, Esq., Sorrento, Bromley, Kent.

REVIEWS.

DR. CLARKE ON DISEASES OF THE HEART AND ARTERIES.*

The author's preface is as follows :

"In the vocabulary of medicine there is no term more charged with fatal import to the lay mind than that of 'heart disease.' It means, in the language of the laity, a disease that is incurable, and that is sure to end in sudden death sooner or later. Now this is very far from being the truth. Heart disease is not by any means incurable; many forms of it are capable of being perfectly cured; and in others a practical cure may be effected through compensatory increase of strength, even when the damaged part does not itself admit of repair. Neither does heart disease necessarily end in sudden death. A considerable percentage of heart cases undoubtedly do end suddenly, but in by far the larger number the end is gradual and there is ample warning. In disease of the great vessels of the heart, where this has gone so far as to form aneurism, a sudden ending is more common than in affections of the heart itself; but even here the majority of cases end otherwise. And it must not be

* *Diseases of the Heart and Arteries: their Causes, Nature, and Treatment.*
By John H. Clarke, M.D. London: E. Gould and Sons, 59, Moorgate Street, E.C. Pp. 204. Price 3s. 6d.

forgotten that neither heart disease nor aneurism, even when uncured, is necessarily fatal in the long run; the patient may live the full span of life and die of some inter-current and quite independent disease. So the prevailing popular notions about heart disease cannot be too strongly combated; and more especially by homeopaths. The helplessness of Old School medicine in the face of disease in general, is responsible for much of the despair which attaches to the very mention of certain diseases in the popular estimation. Those who ought to know say there is nothing to be done in the way of remedy, and the patient resigns himself to his fate! This is the rule; but there are exceptions.

"A colleague, a patient of mine, now on the retired list, was many years ago refused by a life insurance office because he had a valvular defect in his heart. Now, if he had been a layman, or if he had not had the advantage of knowing something more than is taught in ordinary text books, he might have done as many a one has done under like circumstances—gone home, given himself up for lost, and verified the insurance doctor's prognosis by dying in a short time. He did nothing of the kind. He went to work as usual, made up his mind to insure himself, and has lived long enough to save the sum he would have paid in premiums three or four times over.

"Not very long ago an old patient of mine came to me in a terrible state of agitation. A note he brought me, announcing the fact that an insurance office to which he had applied for a policy could not see its way to accept him, explained his trouble. He had a valvular defect, it is true, but it was fully compensated. I assured him that there was not the least necessity for him to regard the refusal as a sentence of death, and advised him to follow the example of my friend and insure himself. Life took a new aspect to him; he recovered his spirits, and has not required any assistance from me since that time.

"As my object is to deal more especially with the *therapeutics* of heart disease, I shall only devote to the consideration of the pathology of diseases of the heart and its vessels just so much space as is needed for my purpose. My work on 'Iodide of Arsenic in Organic Disease of the Heart' being now out of print, I have made use of the material it contained in the present volume, and also of the cases narrated in a paper which I contributed to the World's Homeopathic Congress of 1893, entitled, 'The Curative Action of Homeopathic Remedies in Cases of Organic Disease of the Heart.'"

BRADFORD'S LIFE OF HAHNEMANN.*

DR. BRADFORD'S *magnum opus* is fittingly inscribed to Dr. Dudgeon in these words:—

“This book is respectfully dedicated to R. E. Dudgeon, M.D., of London, England, than whom no one has done more to render the writings of Hahnemann accessible to the English-speaking world.”

Dr. Bradford has performed a task which will never need to be repeated. With great patience and industry he has collected from all sources all the information that was to be obtained about the great reformer, and he has put it together in such a way that compels the attention and enchains the interest of his readers. The chief criticism that we have to make is that he has given us rather too much than too little. In his desire to give everything he has often given us two views of Hahnemann and members of his family which are mutually contradictory, and he has given no judicial summing up to enable his readers to choose between them. Another want in Dr. Bradford's book (which we have no doubt will be made good in subsequent editions) is an index. An index it ought to have, and a very full and complete one.

The picture which forms the frontispiece may have satisfied Madame Hahnemann, but to us it looks very much of a fancy portrait with all the strong lines taken out.

UNIVERSAL HOMEOPATHIC ANNUAL, 1894.†

We cordially welcome the appearance of this work, which we have no doubt will take a permanent place among homeopathic publications. No homeopathic practitioner should be without it. It will not save him the trouble and expense of taking in the journals, but will give him an idea of what is contained in those he does not take in, and it will form a *catalogue raisonné* of those to which he subscribes.

The work is divided into sections, *materia medica* forming the first. The subjects in each section are arranged alphabetically. A full contents table and a complete index would greatly enhance the value of the *Annual*.

* *The Life and Letters of Dr. Samuel Hahnemann*. By Thomas Lindsley Bradford, M.D. Philadelphia: Boericke and Tafel. London: Homeopathic Publishing Company, 12, Warwick Lane, E.C. 1895. Linen, 12s. 6d. net; half-Russia, 17s. 6d. net.

† *The Universal Homeopathic Annual of 1894*. A Yearly Report of all the Homeopathic Literature throughout the World, and a Review of Allopathic Works interesting Homeopathy. Edited by François Cartier, M.D., Paris, France. Paris: Fr. Cartier, 18, Rue Vignon. London: E. Gould and Son, 59, Moorgate Street, E.C. 12s. net.

Dr. Cartier and his associate editors are sincerely congratulated on the result of their labours.

GENERAL CORRESPONDENCE.

MILK FROM INOCULATED COWS.

To the Editor of the HOMEOPATHIC WORLD.

SIR,—Under this heading the following correspondence was published in *The Herald of Health* (London) of last year :—

“ Copy of an advertisement.

“ Our cows have been inoculated with Koch's lymph and pronounced free from tuberculosis. An analysis of their milk shows it to be 50 per cent. better than two other dairies largely advertised. A few customers can be supplied by application to Richard Tribellock, Manager, Montclair, P.O.”

“ Montclair, N.J., June 5th, 1894.

“ DEAR MR. WALLACE,—Nearly all my family have been through the following symptoms :—Suddenly drooping, high fever, vomiting, severe cough, croupous in character, and all of us breaking out in pimples, which itched intolerably, chiefly under the armpits and on the hips. The above milkman's advertisement met my eye, and like a flash it came to me that our milkman had been vaccinating his cows, and we were suffering from effects of this tuberculous lymph; and I found he had.—Your unintentionally lymphiated servant and grateful patient,

“ JOSEPH H. MOORE.”

This matter is most important, alike to the agriculturist and consumer.—Yours truly,
M. A.
March 1, 1895.

VARIETIES.

TWO EXCELLENT HINTS FOR PRACTITIONERS.—Dr. Cocksedge, of Dinas-Mawddwy in Wales, places the following “tips” at the disposal of his brethren : If you have a fatiguingly deaf patient to talk to, place the ear-pieces of your binaural stethoscope in the patient's ears and talk into the chest-piece, and you have an excellent ear trumpet. If you leave your spectacles at home, being old and presbyopic, make a hole with a pin in the corner of your visiting card, and you can read your clinical thermometer or anything else.—*Medical Press.*

CEREBRAL LESIONS IN GONORRHEA.—In a recent number of the *Revue Neurologique* Professor Pitres has a short paper on this subject,

He has been led, he says, to publish the two cases presently to be referred to because of a recent communication given to the Society of Neurology and Psychiatry at Moscow by Professor Tambourer on affections of the nervous system resulting from or associated with gonorrhœa. In this communication M. Tabourer mentioned the case of a young man, aged twenty-five years, who in the course of a chronic gleet lasting three years was suddenly struck down with apoplexy and died on the third day. Unfortunately no necropsy was permitted, but M. Tabourer attributed the attack to septic embolism. Professor Pitres' cases are as follows. The first was that of a man aged fifty-nine years, who, in the course of an acute attack of gonorrhœa, had painful swelling of some joints the day after admission to hospital, and later in the same day was suddenly attacked with right hemiplegia accompanied with coma. Six weeks later he was seized with Jacksonian convulsions, in which he died. At the necropsy a very extensive softening was found in the region of the Sylvian artery. The parts were diffuent, and no atheroma of the vessels could be discovered. No bacteriological examination was made. The second case was that of a young man aged twenty-three years. He had an attack of gonorrhœa, from which he made a good recovery. A second one two years later had lasted for five months, and was not quite cured when one morning he suddenly had an attack of left hemiplegia, which rapidly cleared up, so that in a few weeks he was able to use his hand and walk without difficulty; but there still remained facial asymmetry and a certain amount of awkwardness in carrying out voluntary movements with his left hand. There was no evidence of cardiac lesion or of atheromatous arteries. The coincidence of these attacks with the presence of gonorrhœa is certainly striking, and the well-known fact that myelitis occurs apparently as a result of gonorrhœa suggests that these cerebral lesions may have a close causal connection with that disease and are not merely coincidences.—*The Lancet*.

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.

Bradford (T. L.). The Life and Letters of Dr. Samuel Hahnemann. 8vo, pp. 513. (Homeopathic Publishing Company. Linen, 12s. 6d.; half-Russia, 17s. 6d. net.)

Davies (A. M.). A Handbook of Hygiene. Illustrated. Cr. 8vo, pp. 583. (Griffin. 12s. 6d.)

Dewey (W. A.). Essentials of Homeopathic Therapeutics; being a Quiz

Compend upon the Application of Homeopathic Remedies to Diseased States. Post 8vo, pp. 266. (Homeopathic Publishing Company. [Net, 7s. 6d.]

Furbringer (P.). Text-book of Diseases of the Kidneys and Urinary Organs. Translated by W. H. Gilbert. 2 vols. Vol. I. 8vo. (Lewis. 7s. 6d.)

Hawkins (H. P.). On Diseases of the Ver-

- miform Appendix. With a Consideration of the Symptoms and Treatment of the Resulting Forms of Peritonitis. (Macmillan. Net, 7s.)
- Hellier (J. B.).** Infancy and Infant Bearing: An Introductory Manual. With Illustrations. Cr. 8vo, pp. 114. (Griffin and Co. 8s.)
- Holcombe (William H.).** How I became a Homeopath. Roy. 8vo, paper, pp. 28. (Homeopathic Publishing Company, ls.)
- Jackson (R. E. Scoresby).** Note-book of Materia Medica, Pharmacology, and Therapeutics. 5th ed., revised by J. Rutherford and Ralph Stockman, M.D. Cr. 8vo, pp. 860. (Thin, Edinburgh; Simpkin. 12s. 6d.)
- Kanthack (A. A.) and Drysdale (J. H.).** A Course of Elementary Practical Bacteriology. Including Bacteriological Analysis and Chemistry. Cr. 8vo, pp. 204. (Macmillan. 4s. 6d.)
- Kimber (D. C.).** Text-book of Anatomy and Physiology for Nurses. Cr. 8vo, pp. 294. (Macmillan. Net, 10s.)
- Maudsley (Henry).** The Pathology of Mind: A Study of its Distempers, Deformities, and Disorders. New ed. 8vo, pp. 578. (Macmillan. Net, 15s.)
- Medical Annual (The) and Practitioners' Index; a Work of Reference for Medical Practitioners.** Illustrated. Cr. 8vo, pp. 751. (Wright, Bristol; Simpkin. 7s. 6d.)
- Medical Register, 1895.** 8vo. (Spottiswoode. 6s.)
- Roberts (R. L.).** Illustrated Lectures on Ambulance Work. 5th ed. With illustrations. 8vo, pp. 220. (Lewis. 2s. 6d.)
- Tuson (Richard V.).** A Pharmacopœia. Including the Outlines of Materia Medica and Therapeutics for the Use of Practitioners and Students of Veterinary Medicine. 5th ed. Revised and edit. by James Bayne. Cr. 8vo, pp. 360. (Churchill. 7s. 6d.)
- Webster (J. C.).** Ectopic Pregnancy; its Etiology, Classification, Embryology, Diagnosis, and Treatment. With 80 Illustrations of Naked Eye and Microscopic Appearances. 8vo, pp. 250. (Pentland. Net, 12s. 6d.)
- Wesselhœft (O.).** How to Study Materia Medica. Three lectures. Roy. 8vo, pp. 27. (Homeopathic Publishing Company. 2s. 6d.)
- Yonge (E. S.).** Aids to Surgical Anatomy. 12mo, pp. 146. (Baillière. 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, 30, *Clarges Street, W.*

All advertisements and business communications to be sent to the "MANAGER" of the Homeopathic Publishing Company, 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. Mahony, London; Dr. Cooper, London; Dr. Proell, Graz; Mr. R. H. Bellairs, Reading.

BOOKS AND JOURNALS RECEIVED.

Zoophilist. — Animals' Friend. — Chemist and Druggist. — Hom. Review. — Hom. Envoy. — Amer. Homeopathist. — Medical Century. — Rev. Hom. Belge. — Hom. Maandblad. — Hom. Recorder. — La Homeopatia. — Chironian. — Monthly Mag. of Pharmacy. — Allg. Hom. Zeit. — Maanedskrift f. Hom. — New Eng. Med. Gazette. — Zeit. Berl. Ver. Hom. Aert. — The Speler; and a number of Tracts relating to Phonography, by Sir Isaac Pitman and others. — H. Monatsblätter. — Vaccination Inquirer. — Hom. News. — Medical Advance. — Medical Argus. — N. A. Journal of Homeopathy. — Bath Chronicle. — The Universal Homeopathic Annual. Dr. François Cartier. — Medical Annual. — Sixth Annual Report Phillips' Hom. Hospital, Bromley. — Accoucheur's Emergency Manual. Yingling.

THE
HOMEOPATHIC WORLD.

MAY 1, 1895.

THE LANCET AND HOMEOPATHY.

THINGS are undoubtedly looking up. The "Conspiracy of Silence" with which the allopathic journals have so long sought to keep down homeopathy is giving way: homeopathy is not to be ignored any longer. On April 13th *The Lancet* felt it incumbent upon itself to apologise for the boycotting proclivities of the profession, and devoted its first leading article to the "ethics" of protecting medical societies from the assaults of homeopathsists.

It is a little difficult for several reasons. The law of the land will not allow licensing bodies to withhold their qualification from professed homeopaths; and the editors of *The Lancet* must know well that the General Council of Medical Education and Registration cannot keep homeopaths off the Register. But medical societies are not amenable to the Medical Act, and the only law they recognise is "Medical Ethics." *The Lancet* is aware of this, and does its best to excuse them for treating as outlaws men who have exactly the same legal standing as those whom they admit.

Before criticising the article in question we may usefully quote a few sentiments from *The Lancet* of April 20th. *Lancet* sentiment is sometimes very fine—if not particularly novel. For example take the following:—

"Medicine, like other departments of science, does not encourage a blind submission to authority, but rather impels her votaries to the daily accumulation of fresh facts and the daily trial 'whether these

things be so.' A reverent scepticism is the only possible frame of mind for the sincere scientific inquirer. He looks on Nature solely with the view of penetrating her secrets, and he accepts every demonstrable fact, no matter how unwelcome or how inconvenient."

"Science has her adherents, her devotees, her martyrs, but she has no priests. She opens her arcana to all who will patiently look upon them. Patience, humility, and labour are the keys which unlock all her treasures."

So much for *Lancet* sentiment when it is all in the air. Now let us look at it when it comes to concrete acts:—

"The *raison d'être* of a medical society being the interchange of opinions upon pathological, clinical, and therapeutical facts, it is clear that the members should be of one mind as to the essentials of medicine and pathology. The introduction amongst them of persons who, having gained the necessary qualifications to practise, enter upon their profession by repudiating the bases of its science, and adopt a name which affirms this openly, is both undesirable and unseemly."

We have neither time nor space to dissect this piece of *Lancet* "humility" and "reverence," and to point out the wonderful number of falsehoods it contains. Nor is it necessary, for they must be patent to everybody; only, some persons love falsehood rather than truth. "Bases of its science" is good—for a profession which has no "principles," if we are to believe Dr. WILKS and Sir ANDREW CLARK; but the amusing thing is that at the end of its article *The Lancet* maintains that there are no real homeopaths worth mentioning, and that except in the limited matter of drug treatment the homeopath "follows the canons of medical and surgical practice as universally laid down." How homeopaths can repudiate the bases of medical science and yet follow the canons of medical practice as universally laid down, it is difficult to understand, except on the Wilksian explanation that these canons are based on no principles at all.

Here is a bye-law one society has passed for its own protection:—

"Subscribing members must be duly registered medical men, but no one shall be a member or eligible for election as such who is

practising as a homeopath, or engaged in carrying on, or assisting in carrying on, any form of irregular practice, or who is resorting to any methods for procuring patients or practice which is derogatory to the practice of medicine, surgery, or obstetrics as a profession. And the council shall have power at any time to remove from the roll of the society the name of any member who shall be proved to have transgressed or to be transgressing this law."

The Lancet thinks this "explicit" and worthy of imitation. It goes on:—

"It is all very well for a society or its council to express or give an opinion as to the 'unadvisability' of admitting homeopaths, and to open the doors to all registered medical practitioners, as most of these societies do; but then they have only themselves to blame if perchance it be shown that papers have been accepted and read by avowed homeopaths, or other 'irregular practitioners,' and discredit accrue therefrom to the society."

As we have often pointed out, the homeopaths are the only body who can in truth be called "regular practitioners," since they alone have a *rule* of practice. In refusing to examine this rule, to associate with or hear papers read by those who have had experience in its working, *The Lancet* and the societies it defends break all those pretty copy-book precepts *The Lancet* itself lays down when it doesn't happen to be thinking of homeopathy. "The sincere scientific inquirer," says this organ of medical ethics, "looks on Nature solely with the view of penetrating her secrets, and he accepts every demonstrable fact, no matter how unwelcome or inconvenient." Does he? Then all we can say is that the "sincere scientific inquirer" is conspicuous by his absence from allopathic British Medical Societies.

But it is not so in all other countries. America leads the way in this matter. On February 8th, last, the Cleveland Medical Society, a branch of the American Medical Society, voted by a very large majority to admit to membership all properly accredited physicians, no matter to what school of practice they may belong. This is the only logical ground to take, but we don't expect *The*

Lancet and its societies to take it just yet. In the meantime we hope our "ethical" contemporary will continue its apologies for the boycott.—*Qui s'excuse, s'accuse.*

NEWS AND NOTES.

TUBERCULIN FOR INSANITY.

THE Vienna letter of *The Standard* of April 9th, containing the reference to *Primula obconca* commented upon elsewhere, contains also the following paragraph:—

"Professor Wagner von Jauregg, who is in charge of the department in the University devoted to mental diseases, was induced by the improvement that always follows upon an infectious disease in cases of insanity, especially if it be accompanied with high fever, to bring about that condition artificially by means of inoculations with Koch's *tuberculine*. He now claims that, though after each injection the decidedly favourable symptoms soon disappeared, there was such a steady clearing of the confused sensorium as to encourage him to continue the experiments. It was mentioned by Professor Albert, in the course of a discussion that ensued, that transfusion of blood and subsequent high fever had caused astonishing changes in the mental condition of one of his patients, whose pronounced melancholia disappeared, as though by magic, after the fever had subsided. He, too, anticipated good results from the artificial production of high fever in persons mentally deranged."

Professor von Jauregg sees only the high temperature as the curative agent; but experiences with *Bacillinum* in the cure of meningitis, cretinism, and insanity prove that there is something more than this. A large number of cases of insanity are based on a tuberculous taint, and the cures by *Tuberculin* are doubtless homeopathic. *Thyroidin* also cures insanity when it is homeopathic to the cases. *Thyroidin* is allied to *Tuberculin* in its action, as is suggested in the frequent combination of myxedema and tuberculosis.

THE BRITISH MEDICAL JOURNAL AND HOMEOPATHY.

UNDER the title of "More Humours of Homeopathy," the "funny man" of *The British Medical Journal* (apparently a recent acquisition to its staff), endeavoured to amuse the readers of that usually sombre print by giving the indications of several homeopathic remedies mentioned

in Dr. Dewey's *Essentials of Homeopathic Therapeutics*. Here is the paragraph which appeared in the issue of March 30th :—

"In these days, when the 'new humour' is eclipsing the gaiety of nations, and the latest novel is generally a treatise on pathology or political economy in disguise, it is difficult for the weary man to find anything in the shape of light literature that is not more depressing than his work. In the general dulness of contemporary literature we should be grateful to our friends of the homeopathic persuasion for continuing to provide us with so much matter for honest laughter. To any one suffering from the depression that follows influenza, we can confidently recommend a book by Dr. W. A. Dewey, entitled *Essentials of Homeopathic Therapeutics*, and published by Messrs. Boericke and Tafel, of Philadelphia. We are indebted to our excellent contemporary the Philadelphia *Medical News* for bringing us acquainted with this delightful work, which will, as our forefathers used to say, 'desoppilate' the heaviest spleen. We cannot give anything like an analysis of the book, which indeed, like homeopathic medicines, defies analysis; we can give only a few specimens, taken almost at random, of the unconscious humour which pervades its pages. The grammar, it will be observed, matches well with the matter, and the personification of the drugs gives a final touch of whimsicality. Take, for instance, the sad case of a drug which has hitherto been considered fairly respectable. We are told that 'stramonium has visions of animals coming towards him from every corner.' Perhaps stramonium had been fortifying 'himself' with whisky. Thuja also would seem to be in a bad way, but as 'he' (or is it 'she'?) lies under suspicion of heresy, our sympathy is not so keen as it would be for an orthodox drug in similar circumstances. Still, it is distressing to learn that 'the diarrhea of thuja is a chronic diarrhea traceable to vaccination forcibly expelled like water from a bunghole,' and we hope neither Mr. Tebb nor Mr. Hutton will get to know of this fresh misdeed of their particular 'bogey.' Here is a conundrum which we must confess ourselves unable to solve: 'What drug has nausea at the thought of food? Even mention food and he vomits.' If we were asked to state what produced the following symptoms:—'Patient thinks she will go crazy, is suspicious, has visions of rats, &c., is conscious but can't help it,' we should, with some confidence, say gin. Does any one wish to know the symptoms caused by anacardium? 'It produces a weak memory, he imagines he hear voices; and another condition is a propensity to swear,' possibly, it may be hinted, in response to the 'voices.' Nitric acid also is said to 'produce a disposition to swear,' therefore, on the homeopathic principle, it should cure that evil habit. Perhaps some philanthropic golfer will try it, and report the result. The following is an interesting question:—'What drugs have the symptom that the patient has to think how words are spelt?' Whatever may be the case with the disciples of Hahnemann, we regret to say that in 'allopaths' this symptom not infrequently exists independently of drugs. There is a pretty close connection between sulphur and certain schools of theology; it is therefore not altogether surprising to learn that the 'mental symptoms of sulphur' are as follows:—'Patient fears she will not be saved, there is anxiety about her own soul, but

perfectly indifferent about the souls of others.' An occasional dose of sulphur might be useful to some well-meaning but mistaken people. But enough of this nonsense. Clearly some of the homeopathic fraternity dilute their sense as well as their drugs to the infinitesimal degree. Their silliness is like unto Bottom's dream, for it hath no ottom."

To this Dr. Clarke sent a reply, a truncated version of which appeared on April 18. It appears that a modestly anonymous "Heretic" also wrote to *The British Medical Journal*, throwing over Dr. Dewey, and deploring that "it is actually possible for our orthodox brethren to believe that such curious ideas as to therapeutics are held by the English body representing homeopathy." It would be interesting to know what right this bashful person has to speak on behalf of English homeopathy, and how many English homeopaths call him their leader. Here is Dr. Clarke's un mutilated reply:—

"To the Editor of THE BRITISH MEDICAL JOURNAL.

"SIR,—Few homeopaths will be so churlish as to grudge the writer of the note on 'More Humours of Homeopathy' the innocent amusement he finds in Dr. Dewey's book. It is of the same order as that indulged in by ingenuous British youth when they hear foreigners speaking in language unknown to themselves. But, without wishing to modify the mirth of the writer, I should like to ask, Where is the absurdity in distinguishing between the different kinds of delirium produced by different drugs? *Stramonium*, *Opium*, *Belladonna*, *Hyoscyamus*, *Cannabis indica*, with many other drugs, produce delirium when given to healthy persons, but in each case the delirium is different. In delirium tremens—to take an example—allopaths will, in all probability, give one or other of these drugs as a 'sedative.' But the delirium of acute alcoholism also differs widely in different cases, and it is only when the symptoms of a particular case correspond with the symptoms produced in the healthy by the drug given that the 'sedative'—or, as we say, 'homeopathic'—effect follows. Should any of your readers meet with a case in which that very ridiculous symptom, 'visions of animals coming towards him from every corner,' is present, I advise him to give no other drug but *Stramonium*, in drop doses of the tincture (or less) every hour or so, and I can promise him the gratitude of his patient, and a smile of a different kind on his own face.

"*Ex uno disce omnes.*

"Your obedient servant

"Clarges Street, W., March 31.

JOHN H. CLARKE."

Dr. Clarke might have added that this very symptom of *Stramonium* was taken by Hahnemann from an allopathic authority!

Dr. Proctor, of Birkenhead, points out to us that in the same number of *The British Medical Journal* which contains the above specimen of wit a correspondent, "W. A.," recommends two-minim doses of *liq. hydrarg. perchlor.* for chronic diarrhoea, hill diarrhoea of India, and for choleraic diarrhoea. His authority is Ringer, who discovered it in homeopathic works. "W. A." also recommends "a very dilute solution of *Podophyllin*" for certain forms of diarrhoea in children. As "W. A." did not mention the word "homeopathy" *The British Medical* humorist saw nothing funny in these palpably homeopathic prescriptions.

PRESS NOTICES OF "BURROUGHS-AND-WELLCOMEISM."

The Medical Press of April 3rd commented on our first leading article of last month in these terms.

"Our contemporary, THE HOMEOPATHIC WORLD, in recording the sudden death of the senior member of the firm of Burroughs, Wellcome and Co., dwells with amusing emphasis on the 'homeopathising' tendency of the 'new pharmacy' introduced by this enterprising firm. Our contemporary accuses the innovators of having borrowed from homeopathy the use of sugar of milk as a diluent, a very bold but very purposeless claim, and thereby of enabling all manner of strong medicines to be dispensed in 'high-fractional' doses. If 'high-fractional' means small-fractional, then we can only say this is not the practice of the firm in question, the tabloid doses being those usually employed in general medicine. We remember that some years ago an attempt was made to popularise the use of 'triturations,' that is to say, small doses, for frequent repetition, but we are not aware that they ever 'took on.' Moreover, the use of large or small doses is not homeopathy, nor does it indicate any tendency in that direction, any more than the preference given of recent years to the exhibition of single drugs in contrast with the polypharmaceutical achievements of years gone by."

With regard to the "small-fractional" dose contained in the tabloids—or, at least, a large number of them—the general impression among allopaths is not in accordance with the view of our contemporary. In *The British Medical Journal* of December 29th last a letter appeared in the course of a correspondence on "The New Pharmacy" from Dr. H. G. Lys, of Bournemouth, in which he said "these

proprietary articles are mostly palatable and contain homeopathic doses."

In confirmation of this we have before us as we write the following samples :—

- B. and W.'s Tabloids of Aconite Tincture, 1 minim, prepared by trituration with sugar of milk.
- B. and W.'s Tabloids of Belladonna Tincture, 1 minim, prepared by trituration with sugar of milk.
- B. and W.'s Tabloids of Hydrarg. c. Creta, $\frac{1}{3}$ grain, prepared by trituration with sugar of milk.
- B. and W.'s Tabloids of Calcium Sulph., $\frac{1}{10}$ grain, prepared by trituration with sugar of milk.
- B. and W.'s Tabloids of Tinct. Camph. Co. 2 minims, prepared by trituration with sugar of milk.

In none of these cases is the dose the ordinary allopathic dose.

We are of course well aware that dose does not constitute homeopathy; but the doses prepared in these tabloids are certainly not such as would produce the ordinary physiological effects of the drugs; and if not it must be the specific and homeopathic effects they are designed for.

The Chemist and Druggist of April 13th quotes part of our article in an editorial headed "The B-W System of Medicine."

PHILLIPS'S MATERIA MEDICA.

In the obituary notice of our *confrère*, Dr. Coghlan, which we quote elsewhere from *The Medical Press*, it is mentioned that he succeeded to the practice of Dr. Charles Phillips when the latter left Manchester. By a singular coincidence the very next paragraph in *The Medical Press* reviews the second edition of the *Materia Medica* of Dr. Charles Phillips. Our contemporary finds in the work "the charm of originality." The "originality" consists in the omission of the word "homeopathic" from its title-page; but we fear *The Medical Press* would not have discovered the charm if this had been supplied.

ANTITOXIN OR TOXIN?

THE following is from the New York Letter of *The Lancet*, April 20 :—

“DEATH FOLLOWING THE INJECTION OF *ANTITOXIN*.

“The death of two persons immediately following the injection of so-called *Antitoxin* excites a profound interest in the medical profession. The facts are as follows. A boy from the country while visiting his uncle in Brooklyn developed diphtheria; as he gradually grew worse under treatment the physician obtained a bottle of *Antitoxin*. An injection of this fluid was made, and the boy died three hours after. On the following day a seventeen year-old daughter of the uncle complained of a sore throat. The physician obtained another bottle of the *Antitoxin*, and it was administered. After receiving the injection the girl said she felt a tickling sensation all through her body. She then fell on the lounge in convulsions, and was dead in ten minutes, despite the physician's efforts to save her. Her face turned black almost immediately after receiving the fluid. The physician states that the girl's death was a mystery to him, and he could only account for it by crediting it to some powerful poison in the bottle of *Antitoxin*. He had used the remedy for some time with gratifying results, and always got it at the same place. The colour was the same as that he had used, being pink. He had never witnessed such a terrible death. There had been a mistake somewhere in bottling the fluid. The amount injected was between two and three drachms, which came in each bottle. The bottle was put up in a box in Germany, and bears the date of shipment, Jan. 30th last. The necropsy revealed nothing abnormal.”

AN ITEM FROM MORTICOLIA.

THE following appeared in the *Medical Press* of March 19 (Paris letter):—

“A TRAGICOMIC STORY.

“They are having a good time of it at the Tenon Hospital. An incorrigible drunkard was being treated in the establishment for hallucinations and certain visions, which deranged somewhat his intellect. It will doubtless be suggested that an asylum would have suited his condition better than a hospital, and in fact it was there he was sent after his last exploit, which took place on Wednesday. On the evening of that day one of the nurses was passing through the dissecting-room where were lying two or three empty coffins, and walking close to one of them, a hand was thrust out under the lid and caught the girl by her dress, and a voice from within called out, ‘I say, when are you going to bury me?’ The girl, as may be supposed, screamed with terror, and fled through the passages calling for help. Half the house came down around her, and when they heard her story they laughed and chided her; but she maintained the truth of it so persistently that they repaired in a body to the chamber of horrors. When they opened the door they saw to their great amazement a man sitting up in a coffin! It was our friend the drunkard, who by some means had made his way to this room and conceived the idea of getting into his coffin before his time. The girl is seriously ill from the fright.”

BOERICKE AND TAFEL.

WE understand that the death of Mr. A. J. Tafel, of the firm of Boericke and Tafel, will make no difference in the business of that firm, which will be conducted by the surviving partners on the same lines as in the past. The corps of employees remains unchanged.

ORIGINAL COMMUNICATIONS.

ODIUM MEDICUM AT MARGARET STREET
AGAIN.

THE subscribers and governors of the Margaret Street Infirmary for Consumption and Diseases of the Chest and Throat were startled a short time ago by receiving the following amazing circular :—

INFIRMARY FOR CONSUMPTION AND DISEASES OF THE
CHEST AND THROAT,

26, MARGARET STREET, REGENT STREET, W.

SIR OR MADAM,—

A Special General Meeting of the Governors and Subscribers of this Institution will take place on Thursday, the 11th day of April, at 4.30 p.m.

AGENDA.

1. That Dr. J. Cooper Torry, M.R.C.P., be called upon to resign his post as Physician to the Margaret Street Infirmary, and that in the event of such resignation not being tendered in writing to the Secretary on or before the next meeting of the Executive Committee on April 24th, 1895, that his post be declared void from that date, and he be removed from the said post.
2. That Dr. V. Jagielski, M.R.C.P., be called upon to resign his post as Physician to the Margaret Street Infirmary, and that in the event of such resignation not being tendered in writing to the Secretary on or before the next meeting of the Executive Committee on April 24th, 1895, that his post be declared void from that date, and he be removed from the said post.
3. That Dr. Marsh be called upon to resign his post as Visiting Physician to the Margaret Street Infirmary, and that in the event of such resignation not being tendered in writing to the Secretary on or before the next meeting of the Executive Committee, on April 24th, 1895, that his post be declared void, and he be removed from the staff of the Infirmary.
4. That Dr. Day be called upon to resign his post as Visiting Physician to the Margaret Street Infirmary, and that in the event of such resignation not being tendered in writing to the Secretary on or before the next meeting of the Executive Committee on April 24th, 1895, that his post be declared void, and he be removed from the said post.

5. That in the event of the aforesaid posts being vacated or declared void, that arrangements be made to carry on the work of the Infirmary until such posts be filled up in the usual way.

By order,

W. H. JOHNSON, *Secretary.*

This was followed in a day or two by circular letters from two of the medical men referred to, one of them (Dr. Jagielski's) having, as an appendix, a crushing criticism by Lord Grimthorpe. We give them entire :—

27, WOODSOME ROAD, HIGHGATE, N.W.
6th April, 1895.

SIR OR MADAM,—

MARGARET STREET INFIRMARY.

Certain members of your Executive Committee, and others, are pursuing a course of alteration in the laws of this Institution which, if not arrested, will I believe lead to its extinction.

I, the senior member of your medical staff, have long used my best endeavours to resist that downward course, and am now, in consequence of my opposition, tyrannously called upon by the Committee to resign my appointment, and failing to comply therewith, am threatened with speedy dismissal from my post.

Three others of your Medical Officers are in like manner menaced.

I most earnestly entreat your presence at the Special General Meeting summoned for the purpose of carrying out this tyrannous persecution, to be held on the 11th of April instant, at 4.30 p.m. at the Infirmary.

I confidently trust that you will thereat support us with your votes, and express, unmistakably, that you will not suffer the illegal domination of any set of men in your Infirmary.

I have the honour to be,

Your obedient servant,

J. COOPER TORRY, M.D., M.R.C.P. Lond.

MY LORDS, LADIES, AND GENTLEMEN,—

You have doubtless received a printed summons, signed by the Secretary in writing, to attend a Special General Meeting of the Governors and Subscribers of this Infirmary, on the 11th inst., for the purpose of calling on the Senior Physicians, Dr. J. Cooper Torry and myself, and the Senior Visiting Physicians, Drs. Marsh and Day, to resign their posts in connection with this Institution, and in the event of their not complying with this arbitrary demand, threatening them with expulsion.

No reason is alleged for this extraordinary proceeding, and no explanation of this summons is given. But on the notice board in the Committee-room there is a paper signed by three of the junior medical officers, and the ex-treasurer of the Infirmary, stating that they are "of opinion that it will be clearly for the interests of the Institution that Drs. Torry, Jagielski, Marsh, and Day, members of the honorary medical staff, be called upon to resign," &c.

You will be able to judge of the correctness of this statement as regards myself, when I inform you that I have served the Infirmary as physician for twenty-one years, and every year have obtained the thanks of the Committee for the mode in which the duties of my office were performed, and I may add that the other officers included in this threat of expulsion have also annually received the thanks of the Committee. I have induced many persons to become subscribers to the funds of the Infirmary, among whom are six or more Life Governors at ten guineas each, and I have persuaded one of my patients to leave £100 to the Infirmary in her will, which sum was received last year by the Infirmary, on her sudden death while abroad. I have induced two more Governors to do the same in their wills—one for a larger amount, if freedom of prescribing is maintained at the Infirmary. I may add that during the whole period of my services in the Infirmary I have received nothing but thanks from the numerous patients I have attended, so how the interests of the Infirmary will be promoted by my dismissal I fail to perceive.

The real reason for the animus exhibited against me and two other of my colleagues is that our mode of prescribing differs from that of our opponents.

Many of you will remember that a similar attempt was made to expel me and Dr. Marsh from the staff of the Infirmary at a Special General Meeting in 1887, but this was defeated by the adoption by twenty-one against seventeen of the Governors present of an amendment proposed by one of the Governors to this effect:—

“That any attempt to limit the liberty of opinion and practice of the medical officers is not sanctioned by the laws of the Infirmary, is injurious to the interests of the Infirmary and of its patients, and is opposed to the spirit of the Medical Act of 1859.”

The gentlemen at whose instance the present Special General Meeting has been called are acting in direct opposition to the above resolution in calling upon myself, Dr. Marsh, and Dr. Day to resign our posts, for no other reason that I can imagine but that we practice medicine according to our conscientious convictions on a method different to and, as reliable statistics prove, more successful than that pursued by our medical detractors.

It is for you to determine if you will yield to the demand of three junior medical men connected with the Infirmary only for short periods, varying from one to three years, and at their bidding expel from your Institution officers of the medical staff who have worked zealously and successfully for periods varying from twenty-seven to eight years, and thereby stultify the resolution in favour of liberty of opinion and practice passed by yourselves in 1887.

In the assured hope that you will not adopt such a retrograde, illiberal, and unjust step,

I remain,
My Lords, Ladies, and Gentlemen,
Your obedient servant,

VICTOR JAGIELSKI, M.D., M.R.C.P. Lond., &c.
London, April 8, 1895.

Subjoined is a copy of a letter, on the subject of this attempt to oust the Senior Medical Officers of the Infirmary,

from Lord Grimthorpe, who presided at the Special General Meeting in 1887, when the amendment in favour of liberty of medical opinion and practice by the Medical Staff was passed by a majority of the meeting.

88, QUEEN ANNE STREET, W.

April 5, 1895.

DEAR SIR,—

I am sorry I cannot attend the meeting at the Margaret Street Infirmary next Thursday, nor I suppose can anybody who is going out of town for Easter. The whole proceeding announced in the circular you send me is monstrous, whatever may be the unknown merits of the case, for other reasons besides that.

This is the first copy of the circular I have *received*, only four days practically before the meeting, though I happen to have seen another. A proposal to turn out four medical officers at a blow, without a scrap of information of the reasons for it, is an insult to the Governors and subscribers who are thus expected to endorse blindly the decree of a Committee not appointed for this purpose. I suppose the failure of a similar attempt in 1887, when at any rate the reason for it was known beforehand, has suggested the expediency of keeping it secret now—so secret that I have no idea what is at the bottom of it. I have a lively recollection of the series of irregularities (apart from the merits or reasons) committed by the Committee in 1887 at two, if not three, successive meetings, but they were not so bad as this.

I can only authorise you to use this letter as you please, for the purpose of securing a full and proper disclosure beforehand, and reasonable time to consider the alleged reasons and any answer that may be circulated; reserving entirely my judgment on their validity when I see them. I should hope a majority of those who do attend will see the gross impropriety of proceeding as the Committee are doing, and the probability of its ruining the Institution.

Yours obediently,
GRIMTHORPE.

At 4.30 p.m. on the day appointed the board-room of the Infirmary was full. A proposition was made that Dr. Cooper Torry should take the chair, and this was carried by seventeen votes to fifteen. It was plain then to the party of disorder that their little plans had come to naught, and the junior members of the staff learned the truth of the Thompsonian maxim: "We are none of us infallible—not even the youngest of us."

At the last general meeting of the governors the reactionary party secured a majority on the committee, and Dr. Walsh, one of the youngest members of the staff, appears to have set himself to work to devise means for changing the policy of the Infirmary. The first symptom of the activities of himself and the committee was the astonishing circular which called forth the comments of Lord Grimthorpe.

Having been elected to the chair, Dr. Cooper Torry opened the meeting, and asked if any one had a resolution to propose. Dr. Walsh had an "explanation." This the chairman refused to hear. Another member proposed to adjourn the meeting. This proposition was refused as monstrous after so many governors had assembled, some of them at great personal inconvenience. So it came about that not one of the persons who prompted (but did not sign) the circular had the courage to propose the resolution the meeting had been summoned to transact. Dr. Cooper Torry therefore declared the meeting at an end.

In the course of the meeting objection was raised to Dr. Cooper Torry occupying the chair, as he was one of the "accused." On which a member pertinently asked, "What is he accused of?" to which there was no reply. Another governor remarked, "It seems there are some cowards here;" a sentiment which was warmly applauded, and which was painfully illustrated later on when one of the junior staff, in the heat of his *odium medicum*, committed a violent assault (for which he afterwards humbly apologised) on a supporter of the cause of Liberty.

LIBERTY OF MEDICAL OPINION AS "MADE IN GERMANY."

We read in the papers that the great Bismarck said to a deputation of schoolmasters the other day:—

"Nowadays, in the whole of the English commercial world, it is looked upon as a recommendation if goods are stamped with the words, 'Made in Germany.'"

We were not aware before that this was considered a recommendation of goods by the English commercial or scholastic world, but we are sure the British Medical Faculties must envy the methods pursued by German

Faculties in the making or marring of doctors, as shown by the following delightful narrative from the pen of our colleague, Dr. Waszily, of Kiel. Kiel is, of course, only a German university since the annexation of Schleswig-Holstein to the German Empire, but it seems to be on most fraternal terms of solidarity with the older German universities. Dr. Waszily writes:—

“Originally destined and prepared for theology, I resolved to devote myself to medicine, after having experienced in my own person the superiority of the homeopathic method over the ordinary system of medicine. My grandfather was a doctor of the allopathic school, on which account my family always endeavoured to prevent my inquiries into the homeopathic method. As there are at present no chairs of homeopathy in the German universities, I applied to a well-known practitioner of this method to give me instruction and direction. While thus engaged, I pursued my studies at the university like any other student. After passing the preliminary medical examination in Kiel, I went to Berlin and attended the University clinical classes there, and also the dispensary of the Berlin Homeopathic Society, so that I could compare daily both therapeutic methods as regards their treatment and results. On my return to Kiel my teacher mentioned above gave me a permanent appointment as his assistant; as, on account of his great age, he was not equal to the requirements of his large practice. I received many warnings, and was greatly pressed, for my own good, to give up homeopathy. Convinced of the uselessness of such a procedure, I did not submit to be bullied, but continued to study zealously at home and at the bedside. I had need of all my time, for the study of the homeopathic materia medica requires years, if one is in earnest about it.

“In order to inform myself still further, I took the practice of homeopathic physicians, thus, for instance, that of one in Hamburg in the summer of 1892, whilst the cholera epidemic was raging there, and I imprudently published a short article on the subject. Later, I left Kiel, telling my friends that I was going on a journey that would occupy a month. On account of the warnings I had received I thought it better not to tell where I was going. As a matter of fact, I went to one of the largest German universities (Leipzig), with which I had hitherto been unacquainted, for my examination. I passed every

subject, some with the highest encomiums. The last subject I was examined in was hygiene. I presented myself to the examiner; the examination was long delayed without my suspecting why. At last it came off, and I was very closely examined. When I was on the subject of cholera—among other subjects I had drawn the theme, ‘Prophylactic rules for infectious diseases’—the examiner suddenly said, ‘In 1892 you published in the *Husumer Nachrichten* (Husum is my home) an article on cholera, do you know what you recommended then as a prophylactic?’ I had mentioned Hering’s *Milk of Sulphur* as a prophylactic, as remedies *Veratrum*, *Cuprum*, and *Arsenicum*, as recommended by Professor Hugo Schultz-Greifswald, and as an analeptic *Camphor*. On this I was overwhelmed with a torrent of reproaches; I was told that this was delusion and nonsense, &c., &c. In conclusion, my examiner said regretfully that I should be persecuted all over Germany as a homeopath, that the Kiel Faculty had sent a circular to all the medical faculties of Germany, accompanied by that article of mine on cholera; that it was in his power to pluck me, but after the impression I had made on him he would not do this. He was an honest man, but could not allow me to pass; had the circular come from an unknown denouncer, he would have thrown it into the waste-paper basket, but that he could not do out of respect to the Faculty. Finally, he gave me the following advice: I should write to the Kiel Faculty, saying I regretted having published the article, and that I had shown by my examination that I was able to do justice to the views, &c., of modern science, &c. As soon as I was able to produce the receipt of this letter by the Kiel Faculty he would give me my certificate. I wrote immediately, but in spite of my urgent request for an acknowledgment of the receipt of my letter, I got no answer. This was all the more annoying, as I wished to fulfil my military duty as a one-year volunteer physician. A few days later I went again to my examiner; he was very amiable, apologised for the harsh words he had formerly spoken in his excitement, pitied me and lamented that on account of the Faculty he could not act otherwise. He got me to write another letter under his inspection and with his assistance, with more details and in a more courteous tone than my first one. The letter was written and dispatched as a registered letter. Although the affair

was represented as of great urgency, no letter came from the Kiel deacon. The prolonged irritation made me ill; a dear homeopathic colleague took care of me and comforted me as well as he could. I sent to my examiner, whose assistant came to me and told me that his chief advised me to write a third time to Kiel. As soon as this letter was brought to him he signed my examination papers and transmitted them to the authorities. Two days later a short letter arrived from Kiel for me, acknowledging the receipt of my two first letters. I sent this at once to my examiner. A short time after this I secured my approbation from the Ministry.

"In my leisure hours I had, on the advice of the director of the University Hospital for Women where I had undergone my examination, composed a dissertation which I sent in to the deacon of the Faculty, after it had been approved by the above-mentioned director. The deacon was very reticent, and told me I should take my degree at the university from which the circular was issued! Notwithstanding this, I sent him the dissertation and the fees for the degree. After some weeks my essay and money were returned—declined with thanks! That I never could take my degree in Kiel I was quite convinced by the Faculty's circular by which I was presented. Moreover, the following incident occurred some time afterwards in Kiel: A physician of that town who among other modes of treatment occasionally made use of the homeopathic, but was far from being a strict homeopath, wished to take his degree from the Faculty of that town after having passed the state examination there only two years previously. He had not been able to get his degree then because the Faculty had been informed—as he supposes, by the same person who had proved hostile to me—that he was a homeopath. He was now informed that he must first abjure homeopathy publicly. Accordingly he published in the Kiel newspaper that he had abandoned his homeopathic practice and was studying in order to take up a special subject. He sent this declaration to the Faculty, and what do you suppose the Faculty did now? They insisted, in spite of his declaration, that they could not give him his degree for a long time to come in case he might have a relapse! So he was cheated!

"After considering for a long time, I again quitted Kiel, and by the advice of a friend I delivered my thesis, &c., to

the Medical Faculty of the ancient and renowned university of Jena. It was accepted by the Faculty, though I was a complete stranger there; I passed the examination for the doctor's degree, and obtained my diploma as M.D. after my thesis had been printed.

"I pass over many incidents, and will only mention that later on I underwent the examination before the royal examination committee in Berlin in order to obtain the right to dispense homeopathic medicines. Now just consider this: I was persecuted by a Prussian Faculty on account of an inclination towards a method of treatment which the Prussian State acknowledge to be legal by its establishment of a royal examination committee!"

How the Medical Faculties of Britain, and more especially those of Aberdeen and Edinburgh, deprived as they have been of the liberty to reject and refuse diplomas to homeopathically inclined candidates by the Medical Act of 1859, must envy the much greater liberty to persecute heretics from the orthodox faith enjoyed by the Medical Faculties of favoured Germany! Who after the above revelation will contend that Britain is *par excellence* the land of liberty? It cannot compete for a moment with the liberty to persecute as "made in Germany."

HELLEBORUS NIGER.

By ROBERT T. COOPER, M.A., M.D., Physician Diseases of the Ear, London Homeopathic Hospital.

THE following extract is from a work called *Flora Historica*, by Henry Phillips, F.H.S., published by E. Lloyd and Son, Harley Street, London, 1824, pp. 23, 24. The work is a rare one, and many may not have seen it:—
"Mr. Waller tells us in his *Domestic Herbal* that 'he remembers, in the dépôt for French prisoners of war at Norman-cross, in the year 1806, that a peculiar disease, called Nyctalopia, was very prevalent among them. The symptoms which distinguish this disease are, that the patient becomes by degrees perfectly blind from the moment of sunset till the reappearance of the sun next morning. This disease affected a great number of the prisoners, who were obliged to be led about by their comrades immediately after sunset, and all of them at the same time were labouring under symptoms of extreme

dyspepsia. After a variety of treatment ineffectually applied, the powder of *Black Hellebore* was given them as snuff. As they were most of them attached to the use of snuff, and had been for a long time deprived of it, they took the *Hellebore* with avidity, and generally recovered from their nyctalopia in the course of a very few days, and the dyspeptic symptoms were at the same time greatly relieved. There is no doubt (says the same author, Waller) that in many other affections of the head the same treatment would be found extremely efficacious, and is well worthy of a trial in many chronic diseases of the eyes, particularly in the early stage of *gutta serena*."

DRABA VERNA ; THE COMMON WHITLOW GRASS.

"A PHYSICIAN whom I (the Hon. Robert Boyle) knew, was sent for to a scrofulous patient, in whose throat he found a tumour so large, and so unluckily seated, that greatly compressing the esophagus, it rendered deglutition exceedingly difficult; the tumour was likewise so hard and stubborn, as not to be discussed, nor brought to suppuration; whence the patient was put in imminent danger of being starved. In this strait, the physician remembering the character I had given of whitlow grass, sent about the country to get all that could be procured; and at first gave a little of it, in the form of infusion, in such liquid aliments as the patient was able, though with great difficulty, to get down; and having, by this means, after some time, gradually made deglutition more easy, he gave the remedy in greater plenty, to imbue the whole mass of blood, and juices of the body, with the virtue of the herb; whereby the tumour was at length dissolved, and the patient secured.—"The Philosophical Works of the Hon. Robert Boyle," by Peter Shaw, M.D.: Art. *Specific Remedies Considered*, vol. iii. p. 580.

30A, George Street, Hanover Square, W.

REMARKS ON THE "MATERIA MEDICA."

CYCLAMEN (continued)—*DROSER*A.

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

CYCLAMEN (continued).—*Urinary*: frequent painless

desire to urinate (a. 1 h.) Frequent copious emission of whitish urine (a. 4 h.). *Coryza*: sudden and violent coryza (a. $1\frac{1}{2}$ h.): coryza and sneezing (a. 7 h.): sneezing when smelling the juice (a. $\frac{1}{2}$ h.): short and hacking cough (a. $\frac{3}{4}$ h.). *Chest*: oppression of chest with oppression of breathing; oppressive pain in the left half of the chest, especially about the heart, as if too much blood had accumulated in this part, with perceptible palpitation of the heart; paralytic pressure in the chest, upper arm, and tibia, when sitting still (a. 8 h.); sharp flat stitches in the upper part of the sternum, recurring at unequal periods (a. 32 h.). *Back*: some piercing, pinching dull stitches, recurring at equal periods of some seconds, on the right side of the spinal column in the region of the kidney, more violent during an inspiration, which is interrupted by the extreme pain (a. 28 h.). *Upper extremities*: A kind of paralytic hard pressure on the right upper and lower arm, apparently in the periosteum and in the interior of the muscles; the pain thence moves into the fingers hindering writing (a. 37 h.); painful drawing in the inner surface of the ulna and wrist joints (a. 38 h.): a sort of paralytic, hard pressure, commencing feebly in the forearm, and gradually extending to the fingers, where it becomes so violent that he is not able to write except with the greatest effort; red vesicle on the middle joint of the little finger of the left hand, coming on after violent itching (a. $15\frac{1}{2}$ h.). *Lower extremities*: cramp-like pain in the posterior surface of the thigh, above the bend of the right knee (a. 8 h.); bright-red spots of the size of half an inch, like burns on both thighs (a. $10\frac{1}{2}$ h.); violent itching of the right calf, in the morning, with swelling of the veins down to the feet; he had to scratch the parts until they bled, after which the part remained red and bleeding (a. 23 h.); pain as if sprained in the right foot, disappearing again when touching the part or when walking (a. $4\frac{1}{2}$ h.); fetid sweat between the toes of the left foot, some days in succession (a. 16 h.). *General*: itching of different parts of the body, consisting of a sudden sharp gurgling continuous pricking, after it had disappeared, it leaves for a long time a numb sensation behind; pressing, drawing, or tearing pains, more during motion than when at rest, in those parts of the body where the bones are immediately covered by the skin, for instance the tibiæ and clavicles. *Weakness*: sometimes he is exceedingly ill-humoured and indolent of mind with weak-

ness of body—this alone disappears when beginning to move; great weakness of the body especially of the knees, the mind being strong and lively (a. $1\frac{1}{2}$ h.). *Sleep*: nightmare as soon as he had gone to sleep, he was unable to scream even when yet awake; restless sleep, dreams about money, irresistible desire to sleep in the evening, with constant chilliness. *Fever*: continual chilliness renewed by every dose, and coldness of the whole body; after the chilliness left, the nose remained cold, but when the nose became warm the hands, which had got warm, became cold again (a. $\frac{1}{2}$ h.); great sensitiveness to cold, with frequent and sudden shakes and shudderings, afterwards heat of single parts with anxiety, as if threatened by misfortune; cold hands, the face and hands being hot, without thirst, in the morning; feeling of heat in the hands, perceptible also to others, with swelling of the veins, whereas the rest of the body and the forehead were merely warm and the cheeks cold (a. $15\frac{1}{2}$ h.); no thirst the whole day except in the evening, when hands and face became warm.

Remarks.—In Hahnemann's apparently simple symptoms we may observe the *kind* of nausea, "as if he had eaten too much fat," and the prostration indicated by a child wanting to lie down continually; then in the observations of others, the alternations of humour, so again in the mental conditions, so again of appetite and taste, with *locality* of nausea, as also alternation of sensations in the stomach and abdomen; then I have noted in several cases *when* the symptoms have occurred, that is, how long after the administration of a dose, and it will be observed in many cases it is comparatively soon. The value of this kind of information a little reflection must show is very great, both to guide as to repetition of dose and as to a judgment whether symptoms following the administration of a medicine are *post hoc* or *propter hoc*, coincidences or consequences. Some would-be purifiers of the Hahnemann *Materia Medica* would expunge symptoms wholesale at their own or others' discretion, and would thereby deprive us of much valuable clinical information and corroborative evidence which we can ill bear to do without. Take, *e.g.*, in this drug the coryza symptoms which were all produced at the end of 7 hours, and several of them in a much shorter time, how different is this to consequences of a cold never felt until the next day or later, and how different is a

sudden and violent coryza to one coming on gradually and stealthily; note under chest the peculiarity of a paralytic pressure on the tibia (shin bone), accompanying the palpitation, &c., also the symptoms in the upper extremities pointing so forcibly to a species of "writer's cramp" of these days; then in the lower extremities the itching accompanying swollen veins, for this latter pathological condition is often troublesome to treat on account of paucity of symptoms, and general ideas of congested liver, &c., do not answer *therapeutically*, but if peculiar sensations can be detected, subjective phenomena distinguishing varieties which are objectively the same, namely, enlarged veins, the results of treatment are correspondingly satisfactory. At the present moment I have a patient with a peculiarly obstinate varicose ulcer of the leg, and the indication "small wounds bleed profusely" led me to *Phosphorus* and three doses of the 800th potency, have astonished her with their satisfactory action. In herself she is marvellously better and more capable of work within a fortnight, and the small wound in the finger which gave the indication, *bleeds as much or worse than ever*: this alarmed her until I could assure her it was favourable. This is true homeopathy: *great general relief with temporary aggravation of a local trouble; the very opposite, as the whole system is, to the suppression of a local trouble to be followed ere long by a serious aggravation of the general condition*—compound interest with a vengeance. In the *general* symptoms, pains more during motion, and in parts immediately covered by skin is to be noted; under fever, the local variations of heat and cold are instructive; few persons would think, in going to consult a doctor, that it was worth while mentioning that they were troubled with coldness of the nose, yet such a symptom has its place and significance, and by taking a list of the medicines known to have caused this, and comparing their other symptoms with those of the patient, true cures can be effected.

DROSERA.

Our next medicine is *Drosera Rotundifolia*, the Sundew, stated by Lindley to be found in bogs. In his general remarks our author says: "This herb, which is one of the most powerful medicinal agents of our clime, has been frequently employed externally in cutaneous eruptions by

the older physicians, but not always with the best success; internally it seems to have been used with some benefit—modern physicians, knowing only their large doses, dare not use this heroic drug internally, and have therefore rejected it. I have been in the habit of using the 9th potency of this drug, but latterly I have constantly used the 30th. One single dose of that potency is sufficient to cure entirely epidemic whooping cough, as is shown by symptoms 50, 53, 57, 62, but especially 58 and also (87). Allopathic physicians have never been able to relieve this fearful disease, which does not, like other acute diseases, pass off of itself without either terminating in death, or else torturing the patient for twenty or twenty-two weeks; they either let the children die, or else kill them by large doses of unsuitable drugs. *Camphor* moderates the effects of *Drosera*." Then in a note he says: "The cure takes place surely between seven or eight days. Never give a second dose immediately after the first, no more than any other remedy; it would not only prevent the good effect of the former, but would even do considerable injury, as I know from experience." Before going into the detail of symptoms I will give verbatim the symptoms above referred to, because an opportunity of learning how Hahnemann understood and interpreted symptoms clinically and therapeutically is not to be passed over.

Symptom 50. Pain in the hypochondria when coughing, as if they were being forcibly constricted. 53. Contractive pain in the hypochondria, arresting the breathing; is unable to cough, owing to the pain, unless he presses with the hand upon the pit of the stomach. 57. Cough deep from the chest. 62. During an expiration, in the evening when lying in bed, sudden contraction of the abdomen, occasioning a heaving as if he would vomit, and bringing on cough. 58. Cough, the fits being so rapid that he is scarcely able to breathe. 87. *Rough scraping feeling of dryness deep in the fauces and in the region of the soft palate, inducing a short and hacking cough, accompanied by expectoration of yellow mucus, and hoarse voice having a deep bass sound, sensation of oppression in the chest, as if the air were retained when coughing or talking, and as if the breath could not be expelled* (continuing for several days). Then in a note: "Similar to this condition must be some forms of laryngeal phthisis, where *Drosera* is the only specific (pro-

vided the disease does not originate in syphilis, psora, &c.). *Drosera* is said to excite a very violent cough in sheep. Even some of the older physicians have cured some kinds of malignant cough and purulent phthisis by means of *Drosera*, and have by this means established its homeopathicity to those affections; but the modern physicians, guided by their antipathic theories, have advised the discontinuance of its use, owing to its pretended acridity."

We come now to the general epitome. *Moral*: out of humour, even a trifle puts him out of humour; he feels hurt by an offence more than usual; obstinate execution of his plans; anxiety, with sudden flush of heat over the whole body, especially the face, as if he were about to hear unpleasant news (a. $3\frac{1}{2}$ h.), and again after 27 hours a chill over the whole body, without heat or thirst; *restlessness*, when reading he was not able to continue long the same subject, he had to pass to something else all the time (a. 36 h.); *desponding about other people's persecutions*, and at the same time discouraged and apprehensive in regard to the future (a. 4 d.); *anxiety*, especially in the evening, as if he ought to jump into the river and drown himself, he felt no desire for any other kind of death; the anxiety appeared to arise from the hypochondriac regions. *Head*: *aching pain in the head*; vertigo when walking in the open air; he inclines to fall to the left side; *painful pressure through the forehead and the zygomata from within* (a. $7\frac{1}{2}$ h.); *tearing pain in the brain*, more towards the forehead, more violent when moving the eyes, but relieved by leaning his head on his hand (a. 10 h.); *feeling of soreness in the skin of the right temple*. *Eyes*: presbyopia and weakness of the eyes, sudden and repeated vibrations before the eyes, when endeavouring to recognise small things; *contraction of the pupils* (a. 1, 2h.), *dilatation of the pupils* (a. 25 h.); *burning pain in the right eyeball and fine stitches in the left inner ear* (a. 9 h.). *Ears*: induration behind and below the left ear painful to the touch. *Face*: *prickling burning pain in the skin of the cheek below the left eyelid* (a. $\frac{1}{2}$ h.). *Nose*: prickling in the left side of the nose and creeping in the left ear; in the morning when washing his face he blows blood out of his nose (a. 4 d.); small pimples in different parts of the face, causing a fine stinging sensation, with a little pustule in the centre, drying up in a few days; *bleeding of the nose when stooping*; *bleeding of the nose morning and evening*. *Mouth and teeth*: *frequent flow of watery*

saliva ; whitish ulcer on the tip of the tongue ; lacerations in the left lower jaw, apparently in the periosteum (a. 8 h.) ; cold sensation in the crown of a cuspidatus (a. 56 h.). *Taste and appetite* : food has lost its taste ; bread tastes bitter ; canine hunger without any appetite frequently during the day ; nausea even by thinking of it ; nausea, with an oppressive stupefying headache, especially in the forehead (a. 4 h.). *Abdomen* : the hypochondriac region is painful to the touch, and when coughing, he has then to lay his hand upon the spot to moderate the pain ; cutting pain in the abdomen without stool (a. 5 h.). *Stool* : loose stool all the time ; papaceous, scanty, hard, with bearing down ; bloody mucus with stool, followed by pain in the abdomen and small of the back. *Urine* : watery, inodorous, with stools of white mucus (a. 24 h.) ; frequent desire to urinate, with scanty urine, frequently only a few drops (a. 2 h.) ; enuresis. *Catarrh, larynx, chest* : painful sneezing and coughing, during which he has to lay his hand on his chest to hold it ; asthmatic, especially when talking, even at every word, the throat became contracted, no asthma when walking ; when coughing he expires air having a pungent smell ; intolerable stitches when coughing, and taking a deep inspiration, in the upper part of the side of the chest, near the axilla, relieved by pressing upon the affected spot with the hand, with purulent expectoration mixed with blood and tinged red, no pain when touching the spot from without (a. 24 h.) ; frequent sneezing with or without fluent coryza (a. 13, 24 h.) ; titillation in the larynx, inducing a short and hacking cough, with sensation as if a soft body was lodged in it, with fine stitches in the larynx extending down to the right side of the esophagus (a. 4 h.). *Back* : when walking fast, he feels a pinching with a sensation as of gripping together in the left lumbar region, arresting the breathing, relieved by pressing with the hand upon the part (a. 1 h.). *Upper extremities* : pain as if bruised in the shoulder joint, when bending the arm backwards, or when raising it or lying upon it, or when merely touching the joint ; twitchings in the right shoulder only when at rest (a. 52 h.) ; two red elevated spots of the size of lentils on the dorsum of the hand and behind the wrist joint, painful at first, afterwards itching stitches are felt in one of those spots, becoming more violent by rubbing ; deep little ulcer on the dorsum of the hand, itching, burning after friction, and when rubbed, emitting a sanguineo-

aqueous humour (a. 24 h.). *Lower extremities: violent sharp stitch in the os ischium when rising (a. 55 h.); paralytic pain in the right hip joint, thigh, and tarsal joints, the pain in the latter is more as if dislocated when walking; he is obliged to limp on account of the pain; intense pain in the bones of the right thigh and leg, coming on in the night during sleep, and obliging her when waking to stretch her limb immediately in order to alleviate her pain, for 18 hours; single cutting stitch in the middle of the anterior surface of the left thigh, returning from time to time (a. 24 h.); fine cutting stitch in the right calf, coming on when sitting and disappearing when walking; tearing pain in the right tarsal joint, as if dislocated, only when walking (a. 34 h.); tearing pain in the ball of the right big toe in one spot only when at rest; a gnawing and stitching pain in the bones of the arms, thighs, and legs, especially violent in the joints, with violent stitches in the joints, less perceptible during motion than during rest; rigidity of the tarsal joints, they are very stiff; general painful stitching pressure in the muscles of the extremities in any position (a. 4½, 30 h.); the herb corrodes the skin when applied externally; his whole body feels weak, with sunken eyes and cheeks (a. 8 h.); all the limbs feel bruised and are also painful externally. Sleep and fever: frequent starting in the night when asleep, as if from fright or fear, but she does not feel any anxiety when awaking; frequent waking as if he had slept enough; vivid dream about some insult inflicted upon others; frequent waking in the night, when sweat begins to make its appearance (the first night); feverish shuddering over the whole body, with heat in the face, but icy-cold hands, without thirst (a. 3, 27 h.); the left half of the face feels cold, with pricking pain, the right half feeling hot and dry, after midnight; frequent attacks of alternate chilliness and heat, with desire to vomit in the afternoon; quotidian fever and ague; chilliness during the day, heat in the night; sweat only in the face, three nights in succession.*

Remarks.—The difference *scientifically* between the treatment of hooping cough under true homeopathy and routine treatment is sufficiently demonstrated by the above remarks, and the value of our drug in certain *species* of consumption also shows how powerful may be the inherent properties of a "herb" hitherto regarded as comparatively inert. Among the moral symptoms the inclination to only

one form of suicide once more calls attention to the importance of discrimination in mental cases; the frequency of the condition amelioration by pressure is to be noted, as it is a characteristic of this drug and indicates what are known as "key-notes" or the "red string" running through a medicine. The *conditions* of nose bleed also for all who desire to treat on facts, not theories, will be welcome. The *rapid* formation of an ulcer on the back of the hand would indicate medicinal action. Pains over periosteum and bones are also to be noted; also the peculiarities of the fever.

CLINICAL CASES.

By HARI DAYAL CHAKRAVARTI.

1. SPASMODIC RETENTION OF URINE: *Tuberculinum*.

A man aged 37 suffered from gonorrhœa in 1892, and got better under ayurvedic treatment. Since the end of June, 1893, he had the following trouble:—Almost every day he had to send for a surgeon to pass the catheter. One of my friends advising him to come under my treatment, he came to me on the 25th of December last and asked whether there was any medicine that could cure him. I replied in the affirmative. He said he had paid a lot of money to a surgeon, who told him that he had stricture which could only be cured by operation. He also said that the catheter was his only means of passing water. The man, being too nervous, refused the operation. I gave him a dram of *Tuberculinum* 30, to be taken in drop doses, two to three doses daily until fair improvement set in. On the 7th of January he came to me and was exceedingly glad to report that he had had no occasion for using the catheter since taking the medicine, and that he was urinating more freely. I advised him to take the medicine once in the morning for a week more and then stop a fortnight. He came to me on the 2nd of February and said that he was quite free from urinary troubles, and that the symptoms he had of chronic gonorrhœa had also disappeared. I stopped the medicine, and up till now he is doing well—no more complaint of urinary organs.

2. SCIATICA: *Ferrum Phos.* and *Mag.-Phos.*

A young man aged 30 had been suffering from an intense

pain in the sciatic nerve of the right leg for a fortnight. He had been treated by an allopathic doctor who left no medicine untried to give him relief, but without avail. He had fever and extreme soreness of the affected part. This was simply the result of incessant fomentations and applications of blistering medicines. A slight movement made him cry with pain. Most part of the night he had to pass in a chair. Hot applications gave him temporary relief. On inquiry I learned that the man bathed in the Ganges at 4 a.m., and since then he had had the trouble. The pain became more violent during the night. He came under my treatment on the 10th inst. I gave him a few powders of *Ferrum Phos.* 6x and *Mag.-Phos.* 4x, to be taken every fifteen minutes until amelioration. Next morning he had no fever and could walk without much pain, and he said he had slept a good part of the night. I repeated the medicines alternately every three to four hours, and to my great satisfaction he was quite free from pain next morning.

3. DYSMENORRHEA: *Kali.-Phos.*

A young lady aged 18 had been suffering from severe menstrual colic for the last two years. She was under ayurvedic treatment for nine months without any marked benefit. As I had cured a lady, a near neighbour of hers, I was sent for on the 13th of December last. On investigation I found she had the following symptoms:—Mammæ painful, menstrual colic very cramplike, with bearing down in the hypogastrium. Headache over left eye. Pain in the uterus was more severe after the flow commenced. The girl was hysteric and nervous. Severe pains in the back loins and the lower extremities, ameliorated by moving about. I gave her *Kali.-Phos.* 6x, a few powders to be taken every half-hour. On the 14th she felt much better. I repeated the medicine every three hours, and on the 15th she had no pains at all. I gave three powders of the same to be taken in next three days, once in the morning. The same medicine was continued from the 10th of January, *i.e.*, three days previous to her next period three times in a day. This time she had very little pain, which disappeared on the second day of her flow. Medicine continued till the 15th of January. Same process repeated during her February period, and I was glad to see that

she had no pain this time. I stopped the medicine, and during her March period she had no pain at all.

4. SMALL-POX IN CALCUTTA: *Kantakaree*.

More than six thousand cases of small-pox have already occurred in this city since the beginning of February, of which seventy per cent. were fatal. Every means is being tried by Government authorities to put a stop to the epidemic, but without success. Almost all the people are vaccinated from virus of cow-pox (vaccin), and we regret that this vaccination does not prevent the attacks.

A mendicant has recently circulated that the root of *Kantakaree* is a prevention and a cure of small-pox. The persons infected with the disease have to take the root from four to five grains daily for three days, which will cure him of the disease; and one using it once will not be victim to the disease during his life. How far this is correct no one can say unless a fair trial is given to the medicine. The plant is thorny and is used by our ayurvedic physicians. The physiological action of the plant I shall collect from an ayurvedic book and report in my next. In my quarter there were only seven attacks of small-pox. I prevented the patients from taking anything in the way of medicine except the root of *Kantakaree* for three days. They had very high fever. None of these seven cases was fatal. I cannot say whether *Kantakaree* has saved them or nature has cured them. This requires a thorough experiment.

12, Kripanath's Lane, Soba Bazar,
Calcutta, March 27, 1895.

PRIMULA OBCONCA.

In *The Standard* of April 9th, the following paragraph appeared as part of the letter of its Vienna correspondent:—

“Dr. Riehl, a lecturer at the Vienna University, has also made a curious discovery. A man was recently brought into his ward, suffering from blisters and swellings on the hands, as well as on one eye, which he had touched with a swollen hand. The man was a gardener, and he attributed the blisters to a plant called *Primula obconca*, one of the primrose family. Experiments were made, and it was found that the tiny hairs on the leaf and stalks irritated the

skin, and gave rise to swellings and inflammation. Dr. Riehl succeeded in extracting the poison, which the plant apparently contains for its own protection, and by means of injections with it, claims to have healed more than one obstinate skin disease. His experiments are not yet completed, but they promise good results."

The following letter was addressed to the editor of *The Standard*, but apparently it was above the requirements of that journal, as it was not published.

"PRIMULA OBCONCA AS A REMEDY FOR SKIN DISEASE.

"To the Editor of THE STANDARD.

"SIR,—Intelligent readers of the interesting note of your Vienna correspondent in to-day's issue will not fail to observe that in discovering the powers of *Primula obconca* to cause and cure eczema Dr. Riehl has discovered homeopathy at the same time. Unfortunately for Dr. Riehl neither discovery is new. In THE HOMEOPATHIC WORLD of February, 1891, a correspondent drew attention to the eczema-producing properties of this Primula, and from that time it was recognised among homeopaths as a remedy for eczema. Subsequent experience and experiments have amply confirmed this. There was no need for Dr. Riehl to take elaborate measures to extract the poison or to administer it by injection under the skin. The simple tincture administered by the mouth will accomplish all that is necessary.

"I must add a word of warning: *Primula obconca* is no universal remedy for eczema. It will only cure those cases which present symptoms like those it can itself produce in the healthy—*similia similibus*.

"April 9th.

"Yours, &c.,

"JOHN H. CLARKE. M.D."

AN ALLOPATHIC VIEW OF "EXPECTANT MEDICINE."—Just at present the discarding of the antipyretic has lost its novelty, and the sensational physicians are seeking other channels. The whim now is to do nothing except visit the patient two or three times a day and leave the rest to nature. If he dies, "nature killed him." If he gets well, "I was very attentive." It is true that a large proportion of acute diseases will get well of themselves, but if we can do nothing to hasten a favourable result or relieve suffering or prevent complications, of what use is our profession? Even the homeopathist has learned better than this. For years they gave their minimum doses of Lake Superior, called frequently and depended on nature to heal, with very fair results, especially when the patient was not sick to begin with. But now they are using real medicine, such as it is, to hasten recovery and relieve suffering. This is bad enough, but are we to drop into what homeopathy was?—*Medical Progress*.—*Medical Visitor*.

INSTITUTIONS.

HOMEOPATHY IN PLYMOUTH.

BAZAAR IN THE GUILDHALL.

WITH a view to liquidating a comparatively small debt on the Devon and Cornwall Homeopathic Hospital, a bazaar was opened at Plymouth Guildhall on Tuesday afternoon, April 2nd, by the Mayor of Plymouth (Mr. W. Law). Numerous as have been the calls on the patronage and practical sympathy of the philanthropic, and many and varied the schemes for raising money for public purposes, the committee and friends of the Homeopathic Hospital in Lockyer Street felt that the good work which that institution has done in the past was amply sufficient to justify the belief that any effort they might make to relieve the hospital of its financial burden would meet with a generous support from all classes of the community; and, perhaps for want of a more convenient method of enterprise, the familiar "bazaar" was decided upon. The history of the hospital speaks for itself. Inaugurated at the dispensary in Bank of England Place, in 1859, the institution gradually developed, and from time to time it became necessary to remove to more commodious quarters until at last the building in Lockyer Street, which includes three general wards, with twenty beds, and two private wards, was opened by the Earl of Morley, in 1898.

The interior of the Guildhall, picturesque in itself, presented a bright, attractive, and busy scene. There were about a dozen stalls in all, and these, constructed of a light frame-work, fancifully draped with green and yellow art muslin, were crowded with useful and fancy articles, some of which were of considerable value. The holders of the fancy stalls were:—

No. 1—Mesdames Amery, Martyn, and Roussean, Miss Sturgeon, and the young ladies of Clarendon College.

No. 2—Mesdames Morrell and Yeo, and the Misses Cross and Hatherley.

No. 3—Mrs. Quinn and Miss Macqueen.

No. 4—Mesdames Chapman, Macey, Miller, and C. W. Phillips, and Miss Furse.

No. 5—Messrs. Blanchard, G. Davis, and Lester.

No. 6—Mesdames Fisher, Foale, and Roseveare, and Miss Foale.

The opening ceremony was attended by a large and influential gathering. The Mayor was accompanied on the platform by Professor Chapman (president of the hospital), Revs. J. P. Hatchard, W. J. Cuthbertson, and C. S. Slater, Staff-Com-

mander Quinn, R.N., Messrs. J. P. Brown, J.P., W. Hawkes, J.P., E. Roseveare, Jonathan Marshall, C. King (treasurer), G. Barrett, J. Kerry, G. Davis, and J. Cumming.

Professor Chapman, in the course of a few introductory remarks upon the objects of the bazaar, said he was pleased to know that they had in Plymouth a good homeopathic hospital, and that at the rear they also had a dispensary. In former days the hospital was located in Union Street, but it was found that the work increased so fast that it became necessary to seek larger and more commodious premises, and about two years since the committee purchased the present building in Lockyer Street. It was necessary to make considerable structural alterations to the building for the purposes of the hospital, and that, together with the furnishing, involved an outlay of no less than £2,516. The committee felt called upon to make a hospital which, in its internal arrangements and appliances, should be as good as modern skill and wisdom could possibly devise; and he thought those who had seen the hospital would bear witness that to a large extent they had succeeded in doing so. (Applause.) One lady, who visited the hospital recently, wrote in the visitors' book that the place looked so comfortable that if she were an invalid she would desire to be there. For comfort, quietude, and homeliness the Homeopathic Hospital was all that could be desired. Towards the cost of the improvements all but £354 had been raised. In addition to that debt, however, their extended work had involved greater expenditure, though their income had not fallen off in any way, but on the contrary, had increased, their extra work had left them with a deficit of £150, so that it was hoped by that bazaar to raise £504. Their hospital did not interfere in any way with similar institutions in the town, and Plymouth was increasing at so great a rate that it was believed that there was ample scope for such an institution. They simply did their part towards relieving human suffering, and they looked with confidence for the support of the large-hearted and the charitable in that effort. (Applause.)

The Mayor said it was a pleasure to him to be able to assist in any effort the object of which was the relief of human suffering, and, though he was associated with another important hospital in the town, he felt that there was room enough for the Homeopathic Hospital as well, and, therefore, he gladly gave that effort his support. He did not believe for one moment that there was any desire on the part of the promoters of that gathering to interfere with the prosperity of the South Devon and East Cornwall Hospital—(hear, hear)—and accordingly he had much pleasure in handing to their treasurer a cheque for £25—(applause)—in the hope that others might also be induced to subscribe to the funds of the institution. Referring incident-

ally to the question of intemperance, his Worship said what they desired was that some remedy should be supplied for the cure of drunkenness and—what he believed was also making serious inroads on the strength and vitality of the brain—excessive smoking. Having cordially wished for the bazaar every possible success, he declared it open.

Staff-Commander Quinn moved, and Mr. C. King seconded, a vote of thanks to the Mayor for his presence and practical help, the latter gentleman announcing at the same time that Colonel Armstrong, Colonel Barker, and Rev. J. T. Maxwell had sent letters of apology for non-attendance.

The vote of thanks having been warmly accorded, the business of the day was commenced in good earnest. Amongst the many who are deserving of unstinted praise for the whole-hearted manner in which they had laboured for some time past for the bazaar, the name of Rev. W. J. Cuthbertson, upon whom fell the onerous duties of hon. secretary, stands foremost, and to his unremitting zeal and uniform courtesy is due a large measure of the success of the venture.

The results of the first day were very encouraging, the receipts amounting to upwards of £140. Between 700 and 800 persons paid for admission, and all agreed that the bazaar and its adjuncts were a great success. The entertainment by Miss Minhinnick's clever pupils attracted a crowded audience, and the Punch and Judy show was also very largely attended.—*Western Morning News*.

SARCOMA SUCCESSFULLY TREATED BY TOXINS.—W. B. Johnson (*New York Med. Rec.*, November 17, 1894) reports a case of sarcoma of the palate which he has successfully treated with the toxins obtained from cultures of the micrococcus erysipelatosus and the bacillus prodigiosus. The patient was a boy, aged 16, who was said to be suffering from a sarcoma of the soft palate, which upon microscopical examination was found to be of the spindle-celled variety. The affection began six weeks before admission. The injections of the toxins of erysipelas were commenced on October 31, 1893, doses of 15 minims being given daily. The dose was increased each day until it had reached 60 minims. The bacillus prodigiosus toxins were used in doses of 5 minims, and were administered along with the other toxins after the dose had reached 35 minims. The injections were given in the arm and leg, and they generally caused redness, swelling, and pain, which persisted for twelve to thirty-six hours. The treatment was continued until June, 1894, during which time there were many intermissions. The result of the treatment was a constant steady but slow improvement. The sarcomatous tissue gradually disappeared, partly by necrobiosis and partly by absorption. One year after the commencement of the treatment the patient had practically recovered, the only signs of the disease being one or two spots of ulceration upon the palate, the other affected parts having cicatrised. The uvula and a small portion of the epiglottis were destroyed by ulceration.—*British Medical Journal*.

PREPARATIONS.

STANDARD MALT EXTRACT.

STANDARD MALT EXTRACT WITH COD LIVER OIL.

We have received from the Standard Malt Extract Company, Limited, of 23, Billiter Street, London, E.C., and 42, Castle Street, Liverpool, specimens of their Preparations of Malt. We have no hesitation in pronouncing these preparations to be of a very high order of excellence, rich in both nutritional and digestive properties, as we have proved by experience; and moreover extremely palatable. The combination of malt extract with cod liver oil is so successful that it would not offend the most delicate taste. Mr. R. H. Harland, F.I.C., F.C.S., reports as follows:

"I have carefully analysed a sample of your Malt Extract, and compared it with the best brands now in the market.

"I find that it contains a much larger proportion of diastase than any other sample examined, it is fully four times as powerful weight for weight.

"Diastase is the most important constituent of Malt Extract.

"It is carefully manufactured, and I am of opinion that it will keep well in any climate."

In a large number of cases of mal-nutrition and defective assimilation, more especially in children and convalescents, malt preparations are invaluable. They may be administered just as they are, or in milk, or used instead of sugar to sweeten farinaceous foods, which they render much more easy of assimilation. Whenever malt preparations are needed, those of the Standard Company may be confidently recommended.

SULPH.-AC. FOR BRUISES.—After Arn. has done all it will in case of a severe bruise, and there yet remain coldness, lividity of parts, cold perspiration, or there may be unconsciousness, think of Sulph.-acid, which follows Arn. well in such cases.—H. C. Allen, *American Homeopathist*.

DEATH UNDER NITROUS OXIDE GAS DUE TO TIGHT-LACING.—More than one fatality from tight-lacing has recently been noticed in our columns. In all conditions in which free respiration becomes a necessity if the vital processes are to be carried on tight-lacing means death. Of all states that in which a patient takes an anæsthetic is the one when absolute freedom of breathing is a necessity. Unhappily, but few know this elementary fact in physiology, and hence the sad death of a girl who had taken nitrous oxide gas at a dentist's rooms, and while recovering from its influence had a fatal attack of syncope. The statement is made that her stays were five inches too small for her natural body, a disparity of shape which we imagine the dentist might have seen and acted upon before he ventured to give the unfortunate girl nitrous oxide gas.—*The Lancet*.

REVIEWS.

WOOD'S TEXT-BOOK OF GYNECOLOGY.*

THERE is nothing more remarkable in the enterprise of American Homeopaths than the way in which they make themselves independent of allopathic works. If a text-book is wanted by our school on any subject in medicine or surgery, there are homeopaths ready to produce it equal to the best that the old school can boast of in matters common to both schools, and vastly superior in point of therapeutics. The book before us is an instance of this fertility of resource.

Dr. Wood has written a book which will, as he says in his preface, enable the busy practitioner, without unnecessary loss of time, to "bring to his gynecological patients those agents and methods which have been devised and are now being employed by the leading specialists of both schools."

When in London, Dr. Wood made the most of the opportunities offered by the Royal College of Surgeons Museum, and has enriched his pages with many illustrations from photographs taken by himself from specimens contained therein. For the privilege of so doing, Dr. Wood expresses his indebtedness to the curator of the Museum, Mr. Frederic S. Eve.

The therapeutic part of Dr. Wood's work is done with great care. The indications for the various remedies are given with clearness and precision, and will no doubt be found of great value by prescribers. It is, of course, always to be understood that the general symptoms of the patient correspond with those of the medicine chosen, or that the local ones constitute the only deviation from the normal.

Like all surgeons, Dr. Wood is apt to think a little too much of surgery. His directions for the medicinal after-treatment of cases in which ovarian tumours have been removed leave little to be desired; but we should like to have seen a little more of the *cure* of tumours without operation. This has frequently been accomplished, and should always be aimed at.

Another point which gynecologists almost invariably leave out of account is the remote effects of the removal of the ovaries on the individuality of the patient.

The author of a much-abused work, *Esoteric Anthropology*, long ago pointed out that the primary function of the generative organs of either sex was in relation to the organism itself, and only secondarily for procreation. The loss of them profoundly affects the nutrition of the individual, and very often the mind and disposition as well. Ovariectomy has not unfrequently

* *A Text-Book of Gynecology.* By James C. Wood, A.M., M.B. Philadelphia: Boericke and Tafel. London: Homeopathic Publishing Company.

been followed by insanity. Approaching the subject from another point of view, Brown-Séquard has enforced the same truth in maintaining that all the organs have an "internal secretion" in addition to any visible secretion which they may have. The results of thyroidectomy, and the experiences with extract of thyroid glands, have served still further to illustrate this doctrine. For this reason, among others, any operation which necessitates the unsexing of an individual should only be undertaken as a last resort, and under the gravest sense of responsibility.

THE MEDICAL ANNUAL.*

THIS volume maintains the reputation it has acquired in past years as a handy reference book of the year's doings in medicine. The "New Remedies" department is, however, very poor in novelties since the work has no longer a homeopath for its editor in chief. The only one we have found is in reference to our old friend *Naja Tripudians*. The writer of this section (who modestly withholds his name) refers to Dr. J. W. Hayward's monograph on *Crotalus*, but omits to mention homeopathy. He quotes from a Dr. A. L. Sandel, of Calcutta, who asserts that empirical practitioners in India cure cholera with the tincture of *Naja*; and he mentions yellow fever and septicemia as diseases in which *Crotalus* and *Naja* have been used with good effect.

MYXEDEMA CRETINISM AND THE GOITRES.†

IN this beautifully got up and illustrated volume Dr. Blake has collected much interesting information relating to diseases involving the Thyroid gland and their treatment by *Thyroidin*. In his preface Dr. Blake states the theory around which he has grouped his facts. The theory is that self-poisoning by the absorption of morbid products secreted by the individual is at the bottom of all the cases. Dr. Blake's ingenuity in working out his theory must be acknowledged by all readers; but whether he will carry conviction to most is more than doubtful.

Dr. Blake strongly recommends inunction with a preparation of thyroid gland extract when thyroid feeding is not well-borne.

* *The Medical Annual and Practitioner's Index: a work of reference for Medical Practitioners.* 1895. (Thirteenth Year.) Bristol: John Wright & Co., Stone Bridge. London: Simpkin Marshall, Hamilton, Kent & Co., Ltd. Price 7s. 6d.

† *Myxædema Cretinism and the Goitres.* By Edward T. Blake, M.D., M.R.C.S. Bristol: John Wright & Co. London: Simpkin, Marshall, Hamilton, Kent & Co., Ltd. Hirschfeld Bros., 82, High Holborn.

The preparation is—Thyroidine gr. x. ; Ether ʒi. ; Lanoline ʒi. Surely this is a very clumsy proceeding for a homeopath to adopt with the ordinary homeopathic attenuations at his disposal. That these are abundantly efficacious cases published in our own pages sufficiently testify.

EXTRACTS.

THE THERAPEUTICS OF SUNLIGHT.*

By a curious coincidence quite a number of communications have been published within the last few weeks on the physiological and therapeutical action of sunlight. In a first communication bearing on the quasi-pathological action of sunlight reflected from the Alpine glaciers, we learn that under certain not-as-yet well-understood conditions the effect of such rays is to blister delicate skins—a fact with which many of our summer travellers have doubtlessly become cognisant of late. Two salient facts were brought clearly to light, viz., that it is less the heat, than the actinic, rays that do the mischief, the actual temperature bearing no actual relationship to the intensity of the effect produced ; and, secondly, that veils or stains which prevent the passage of the chemically active rays go far in preventing the blistering action of sunlight. Though not altogether novel, these observations show that in considering the action of the sunlight we must distinguish between the factors which make up sunlight as a luminous whole. These observations are interesting, moreover, in view of the contributions that have been made of late on the question of the prevention of pitting as the result of small-pox. Various suggestions in this direction have been made for years past, but after a more or less brief trial they have been forgotten. Not many years since we remember visiting one of the principal small-pox hospitals of the Metropolis, and our attention was directed to the trial then being made of a blue glass as a protection against pitting. We are not able for the moment to specify the origin of this suggestion, but it contrasts curiously with more recent views on the same subject. It has long been suspected that direct sunlight had an injurious influence on the suppurative process which is supposed to be characteristic of, and inseparable from, the evolution of small-pox vesicles. Closer observation tends to show that this injurious action is real, but is due, not to the

* From the *Medical Press*, Oct. 31, 1894.

luminous, but to the actinic, rays. Now these may obviously be easily prevented from obtaining access to the damaged surfaces by a suitable disposition of curtains or coloured glass, on the same principles that guide the photographer in guarding his sensitised films or papers against the action of light, that is to say, by interposing a dark-red medium. In recent numbers of *La Semaine Médicale* some very interesting observations are recorded of cases of small-pox in which an important feature of the treatment has been the cutting off of the chemically active rays, and in face of the carefully recorded observations it is difficult to withstand the conclusion that pitting may really be reduced to an imperceptible minimum by keeping the patient from the first in a room of which the windows are protected by thick red curtains or deep ruby glass. Under this treatment, it is stated that the vesicles do not undergo any stage of maturation, but dry up, thus sparing the patient the dangers of the secondary fever and of the pitting consequent on the multiple suppurative process. Curiously enough, this view is supported by old-established custom in various European and Transatlantic countries. In Mexico, on the one hand, and in Eastern Europe on the other, there exists a popular prejudice in favour of relegating patients suffering from small-pox to rooms hung in red, or in which, by some means, red rays are made to predominate. Given the admitted activity of the actinic rays on healthy but delicate skins, it is not difficult to conceive that their action may be intensified in respect of a skin which is the subject of a pathological process, and is, therefore, presumably more susceptible to irritating influences. Counter-experiments confirm both the supposition and the results, for when light was allowed to fall on parts on which the vesicles had not quite dried up suppuration immediately set in, with the usual scarring. The fact that the pitting of small-pox is normally most marked on the parts ordinarily exposed to light is *a priori* an argument in favour of the view that the influence of light *per se* is not altogether foreign thereto. The various plans of minimising the pitting that have been suggested and practised from time immemorial appear to owe their efficacy entirely to the degree of protection they afford against the irritating rays, and their success has been proportionate to the degree of protection afforded. As there is no lack of material for experimental observation in this country, and as the experiment is one to which even the most rabid anti-vivisectionist could not take the shadow of an objection, it is to be hoped that the Metropolitan Asylums Board will take steps to give the plan a trial in the interest of the as yet unpitted patients and of science.

HYDROPHOBIA.*

SOME ten or twelve years ago it was my pleasure to visit a case which was being treated by Dr. Baltzell, Sr., of this city, one of our prominent allopathic physicians.

I had been reading upon hydrophobia, and here was an opportunity even without the consent of the physician to see a case.

I called at 11 a.m., and found the patient seated upon the side of his bed. When I entered the room I found the windows all up to their full height—for it was in warm weather. He welcomed me and commenced to talk of his disease about as freely and cheerfully as if he had only a case of rheumatism—spoke of the convulsions that attacked him about every half-hour.

I was not seated long before I saw indications of an attack of convulsions, and I would rather be near the door than the open window, for I did not know but that he might be moved to throw me out of the window and maybe himself after me. His convulsive attack was most severe and distressing; he looked as if he were suffering the deepest agony, and only kept himself in place by holding tightly to the bed-clothes, shaking the very house in his struggles. I confess I felt like getting still nearer the door during the convulsion, for I saw he was by no means unconscious. After a few minutes the attack passed, and he asked me, with a great deal of emphasis, if I was afraid of him, he having noticed that I stood very near the door. I told him I preferred to choose my way of exit, and therefore intentionally stood at the door.

He talked freely after the attack, and I, making up my mind it would not be any advantage to *him* for me to see him in another convulsion, bade him good morning. He invited me to call again. I did not respond to this invitation, but called upon his physician immediately, and we had a free talk relating to the case. He frankly said he was not relieving his case, and did not expect to, and was open to any suggestion in the treatment that I had to offer. I told him if that were my case I would give tincture of Gelsemium, four drops every hour for six hours, and every two hours afterwards. He immediately asked me if I had the remedy with me; I told him I had, and gave him a one-ounce phial of it. He said he would leave his office in a few minutes to visit the patient, and would at once administer the medicine.

I did not see the doctor for two days, when I noticed in the morning paper that the man was dead. I called that day to see the doctor to make inquiry about the case. He spoke as

* *Southern Journal of Homeopathy.*

follows : " Doctor, I gave the medicine as you directed, and as there was no return of the convulsions for twenty hours, I began to think I was master of the situation, when two of our oldest physicians called to see him, and advised that he now be well fed. He was given a good meal ; within one hour his convulsions returned and continued until his death, which was in about twenty-four hours.

Second Case.—A gentleman who was a preacher living in Chester County, Pa., with his family, owned a large dog, which he kept muzzled and often tied in the cellar. One day he noticed the dog was very restless, and he concluded to give him a little run. In taking off the muzzle he scratched his hand and the saliva from the dog's mouth touched it.

Upon being loosened the animal ran around the house amongst the children, of whom he was very fond, and bit the eldest one in the calf of the leg. Immediately the dog was led and tied in the cellar. The next day he developed unmistakable signs of rabies, and was shot to death. The family were in the deepest distress on account of the bitten child. Upon the ninth day the father of the child, whilst washing himself, was attacked with symptoms of hydrophobia (the child not suffering then nor at any time thereafter).

The preacher wrote me a long letter informing me of his condition, and desired me visit him at once. I could not possibly do so, but telegraphed for him to employ a physician, which he did (an eclectic or Thomsonian), and at the end of ten days he was entirely relieved, and in six weeks was quite restored to health. He is still living and has never had a day's sickness, except from colds, from that day to this. I am sorry I do not remember the names of the remedies used, but lobelia was the principal one. This case was watched by me, hearing from him daily until his convalescence. I visited him afterwards. He said water had its effect upon him for some time, and being a Baptist preacher he did not venture into the water for about six months.—*M. Hammond, M.D.*

STRONTIUM BROMIDE IN GASTRIC AFFECTIONS. — An Italian physician says that strontium bromide is particularly valuable in gastric affections, especially acute catarrh, which, he says, shows anew the remarkably favourable action of the drug. He uses a syrup made by dissolving thirty grains of strontium bromide in a mixture of a fluid ounce of syrup of orange-peel, and three and a half fluid ounces of distilled lettuce-water. This amount is to be taken daily in three doses, during and after meals. It stops the vomiting and lessens pain. It is thought to act both directly on the nervous system and as an antiseptic, arresting fermentation, and thereby reducing the flatulent distension that gives rise to the pain.—*New York Medical Times.*

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.

REMOVALS.

DR. W. ROCHE, *Eastbourne*.—Dr. WILLIAM ROCHE, late of Ipswich, has removed to CORNFIELD HOUSE, DEVONSHIRE PLACE, EASTBOURNE, having joined Dr. Croucher in practice. His at home hours are before 10 a.m. and from 2 to 3.30 p.m.

DR. REED HILL, *Ipswich*.—Dr. W. REED HILL has removed from Colchester to 38, BERNERS STREET, IPSWICH, having succeeded to the practice vacated by Dr. Roche. Colchester is now without a representative of our school.

Obituary.

CHARLES CAULFIELD TUCKEY, B.A., M.B.

WE greatly regret to record the death of Dr. C. C. Tuckey, which took place at Kew on February 28th, in the 84th year of his age. Dr. Tuckey had lived at Kew in retirement for the past twenty years. It was through Dr. Edward Phillips of Manchester that Dr. Tuckey was introduced to homeopathy, and, curiously enough, the second subject of our obituary notice, Dr. Coghlan, was connected in practice with Dr. E. Phillips' brother, Dr. Charles Phillips; and it was in Manchester where Dr. Tuckey commenced the practice of homeopathy in 1857. He afterwards removed to Preston, and finally to Canterbury, where he continued to practise until he retired.

WILLIAM BOYLE COGHLAN, M.A., M.D., M.R.C.S.

"WE regret to announce the death of Dr. William Boyle Coghlan, of Manchester, which took place last week at his residence, 24, York Place, Chorlton-on-Medlock. He was the eldest son of Mr. William Coghlan, Firmount, county of Cork, and grandson of the well-known Dr. Boyle Coghlan, of Cork city. Dr. Coghlan was the first student and scholar of the Queen's College, Cork, his degrees of B.A. and M.A. being granted through the Dublin University. He was the gold

medallist of his year. He was ordained by the late Bishop of Hereford to the curacy of Chirbury Parish Church, Shropshire. Shortly afterwards he was appointed chaplain to Lord Murray Stewart, Calley, Kirkcudbright, where he lost the use of his voice. Failing to have his voice restored, he applied to the Archbishop of Canterbury and the Bishop of Hereford for permission to qualify as a medical man. With a view to this end he re-entered his old University, and after some time took up his residence in London, and completed his studies at St. Thomas's Hospital. Dr. Coghlan succeeded to the practice of Dr. Charles Phillips, of Manchester. Having of late years somewhat regained his voice, he devoted much of his time to the profession of his first affection, and was frequently heard in the various pulpits of his diocese. In Manchester Cathedral he has pleaded on behalf of the local hospitals, and in various parish churches and hamlets he advocated their cause, and also the needs of the voluntary schools and mission societies. He was a popular preacher and successful medical practitioner. Dr. Coghlan married Helena, eldest daughter of Mr. Forbes, of Marrington Hall, Salop. He had two children, one of whom survives him."—*Med. Press*, March 27th.

A. J. TAFEL.

THE death of Mr. A. J. Tafel, head of the well-known firm of Homeopathic Pharmacists and publishers, which took place suddenly on March 9th, in his 56th year, will be read with regret throughout the homeopathic communities of the world. Mr. Tafel was born at Ulm in Germany, and emigrated to the States at the age of fourteen. He took an active part in the Civil War, and it was at the close of the war that he joined Dr. F. E. Boericke in founding the great house of Boericke and Tafel, under the guidance of Constantine Hering.

ALCOHOL FROM APPLES.—Normandy had a tremendous crop of apples last year, and successful experiments have been made for the production of brandy from the fruit. The yield amounted to about 5 per cent., but the quality was good.

PRESERVED FRUIT.—The acting British Consul at Oporto, in his report to the Foreign Office, suggests that a new industry could with advantage be commenced in England—that of preparing preserved fruit. Considering that the better fruit and cheaper sugar can be had in this country, he considers it strange we should import from Portugal. The process for the preparation of the fruit in Portugal is simple in the extreme. It consists, roughly speaking, in boiling the fruit before complete maturity with sugar six times in the same water, after which the sugar is allowed to run off, and the fruit is put on trays to dry in the open air.

GENERAL CORRESPONDENCE.

THE ABUSE OF CINCHONA.

To the Editor of the HOMEOPATHIC WORLD.

SIR,—The note of warning given in Dr. Edward Mahony's admirable "Remarks on the 'Materia Medica,'" in the current year's January number of THE HOMEOPATHIC WORLD, and which was first sounded by Hahnemann himself years ago, is, unfortunately, not superfluous. It seems to be the belief of a number of the profession (of the old school generally) that *Cinchona* is indicated in every form of weakness, independent of symptoms; but we, as homeopaths, are compelled to admit that a drug which cannot produce the symptoms in a healthy subject identical with those in a diseased one, can have no homeopathic relation whatever to such a disease, and also that a certain remedy, although it may be a *polycrest* (*Aconitum*, *Belladonna*, and *Nux Vomica*, for example), it is certainly not a *catholicon*. This great truth has been taught to us over and over again in the past by experience, and the great secret of the failures of certain drugs (not only of *Cinchona*, but of others also), which are recorded from time to time as taking place in cases in which they were supposed by the attending physician to have been indicated, is that the drug has been prescribed wrongly, it having *no homeopathic relations to the symptoms of the disease*. The treatment of disease in accordance with the homeopathic method means the treatment of disease in accordance with scientific principles, and success can only be looked for in those cases in which these principles are strictly adhered to.

I feel more and more convinced every day that the most essential part of the study of a physician of our own school is a *thorough* knowledge of our materia medica—a familiarity with the action of and the symptoms produced by drugs. Without this knowledge a physician can never hope to be successful in his calling, however skilful he may be in other respects, and will only prove himself to be a stumbling-block in the ever onward march of medical science as embodied in the law of similars. It stands to reason, as every right-thinking homeopath will admit, that a disease can only be cured when the drug administered stands in strict homeopathic relation to that disease, and the sooner that this great truth is accepted and adopted by every member of the medical profession, the better will it be both for the physicians and for their patients.

In reference to *Cinchona*, experience teaches us that it is of little use in cases of weakness, &c., so long as the exciting cause remains in operation, and also that it is homeopathically indicated

in those cases of weakness arising from excessive diarrhea, excessive hemorrhage, excessive suppuration, loss of semen (as in spermatorrhea or excessive sexual indulgence), and of humours, and in ptyalism. As Hahnemann himself has remarked, in all these cases the other symptoms generally correspond to the symptoms of *Cinchona*.

In the old school the abuse of *Cinchona* has certainly been very great, owing to the supposed "harmlessness" of the drug; in fact, judging from the size of the doses prescribed, one would imagine that the drug in its action is almost inert. In the form of *Quinine* it has been largely used in the treatment of neuralgia, and, more recently, in influenza, and it is needless for me here to dwell on the sad after-effects of the drug in cases so treated, as, unfortunately, they are too well known. Dr. Mahony speaks truly when he declares that "any drug, frequently repeated, and especially in material doses, will soon produce its own symptoms." It is inconsistent with and contrary to the true law of healing that drugs should be administered in such doses as to produce their own symptoms in the sick, and the production of the after-effects, in the form of a chronic *Cinchona* cachexia, is also highly to be condemned as the result of a very unscientific and injurious mode of treatment. *Mercury*, *Opium*, and *Cinchona* are, perhaps, the three most abused drugs in the *materia medica* of the old school, as many poor unfortunates in times past, and in our own day, have borne witness, and it is one of the missions of homeopathy to expose these abuses, and to lead the way to safer, gentler, and more scientific methods.

I remain,

Your N.S.W. Contributor,

FREDERICK KOPP.

Greenwich, N.S.W., February 25, 1895.

THE PASTEUR TREATMENT OF HYDROPHOBIA.

To the Editor of the HOMEOPATHIC WORLD.

SIR,—Why do we doubt the percentage of deaths which Pasteur chronicles is any proof of the efficacy of his treatment? When he first brought before the public his system, he announced that he was able by his inoculations to confer protection at any time before the patient actually developed hydrophobia; next, that people would be preserved from them if treated within thirty days from the time of being bitten; but since then he has introduced many limitations, which have been summarised by Mr. Ernest Bell as follows:—(1) he does not now profess to protect unless the patient comes to him within a fortnight of

being bitten ; (2) he does not reckon deaths which occur during the treatment ; (3) he does not recognise those which occur within a fortnight after the end of the treatment ; (4) he does not attempt to keep any record of his patients after that time ; (5) he does not even include in his list deaths which occur afterwards, and are duly chronicled elsewhere ; (6) he does not claim that his inoculations have permanent effect—reinoculation, he says, is necessary after a time ; (7) he does not hesitate to swell his successes by any number of patients who were never in any danger of contracting the disease ; (8) he does not mind adding to his total, cases which infringe one and of all these conditions, *providing they do not die* ; (9) he does not know how his so-called protective inoculations act ; (10) he does not know what is the cause of rabies. There is hardly a loophole left by which the most malevolent patient could die if he wished ever so much to do so, and for these limitations there is no scientific grounds whatever. They are purely arbitrary—adds Mr. Bell, who is a thorough student of the Pasteur school of so-called preventive medicine—and have been introduced one after another to account for untoward deaths, which have kept on occurring, when, if the treatment had been what Pasteur professed at first, the patients would have been saved. It must be evident that you or I, with a syringe and some pure water, could not fail under such conditions to obtain a similarly striking percentage. The known deaths from hydrophobia after Pasteurian treatment now amount to 270 ; and the strange paradox already confronts us, that with the erection of Pasteur Institutes hydrophobia increases *pari passu*. One distinguished French doctor has said “ Pasteur ought to be put on his trial for manslaughter,” while another French doctor and vivisector, some three years ago, proved conclusively to the *Academie de Medicine* that “ hydrophobia was being engendered through fright,” the result of the Pasteur mania.

Faithfully yours,

JOSEPH COLLINSON.

Hendon, N.W., April 11, 1895.

“ OIL OF GAULTHERIA.”

To the Editor of the HOMEOPATHIC WORLD.

SIR,—In view of the enthusiastic reports on the above in the treatment of inflammatory rheumatism and neuralgia, perhaps the following remarks may not be out of place.

Dr. Richard Hughes, in the journal of the British Homeopathic Society, intimates that the curative, or rather palliative, power of *Gaultheria* lies in the Salicylic acid it contains. According to the U.S.D., an American authority, 169 grains of the

oil contain 152 grains of methyl salicylate, and are therefore equivalent to 188 grains of Salicylic Acid.

Gaultheria in half-ounce doses has proved fatal, though not invariably.

According to the *Medical Examiner*, half an ounce produced in a boy severe vomiting, purging, epigastric pain, hot skin, frequent pulse, slow and laboured respiration, dulness of hearing, and bulimy in spite of excessive gastric irritability.

This "proving" shows that the use of *Gaultheria* for rheumatism in massive dose is allopathy of the grossest type. It might prove an exceedingly valuable homeopathic remedy in inflammatory colic with purging.

I myself was foolish enough to recommend it in five-drop doses to a patient suffering from intercostal neuralgia of long standing. Bitterly did I regret it, for though it produced temporary palliation, it also induced a most appalling enteralgia with excessive vomiting.

--I followed Dr. Lang's instructions to the letter.

Beware, oh, beware of *Gaultheria*, say I, more especially as there is a coal-tar imitation on the market.

Yours faithfully,
R. H. BELLAIRS.

TUBERCULOSIS.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—On the 26th of November last, Professor Wilson, F.R.C.V.S., lecturing at Cirencester on "Tuberculosis," is reported in the *Wilts and Gloucestershire Standard* to have said, "Of course they were not able to experiment with tuberculous milk on the human subject, as they could do with the lower animals, and it was a question whether experiments of that kind might not be tried on some of our criminals sentenced to death, so that the matter might be thoroughly proved." Is it not extraordinary that in a "large attendance" not a single individual had sufficient feeling to protest against this fiendish proposition? Imagine the position of some stalwart criminal; condemned to expiate his crime by death, but reprieved in order that a foul wasting disease may be communicated to him, and in the event of it not proving fatal, then he must go to the gallows. What a hideous mockery! While the chaplain would be trying to prepare the poor fellow's soul for heaven, the doctor would be trying to destroy his body, by infecting it with some awful wasting disease.

I am, Sir, yours, &c.,
HARRY RICKETTS.

VARIETIES.

SINGULAR PROPERTY OF LYCOPodium.—By spreading a layer of lycopodium powder upon the surface of a basin of water it is possible to plunge the hand into the water without wetting it, as the lycopodium powder prevents all contact of the water with the hand. This property is taken advantage of by the Parisian dressmakers during the heat of summer; by rubbing it over their hands they prevent the perspiration from attacking the delicate ribbons and fine silk articles which they are constantly touching.—*Monthly Magazine*.

A REMEDY FOR FLEAS.—Dr. Richard Neale writes in *The Lancet*, April, 20:—"In your annotation in *The Lancet* of April 6, regarding the means of destroying this irritating pest one plan not mentioned upon one occasion gave exceptionally good results. The matting on my bungalow in Java suddenly became infested with myriads of fleas, so numerous that the legs, covered only with loose white trousers, were instantly coated with a living mass. Strong quassia tea was freely used as a wash to the mat-covered floors, and the swarms vanished as by magic."

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.

- Ambler (G. A. H.). *The Gentle Art of Nursing the Sick.* (Every-day Help Series.) 18mo, pp. 108. (W. Scott, 6d.)
- Beach (F.). *The Treatment and Education of Mentally Feeble Children.* 8vo. (Churchill, 1s. 6d.)
- Duehrssen (A.). *A Manual of Gynecological Practice for Students and Practitioners.* Trans. by J. W. Taylor. 12mo, pp. 241. (H. K. Lewis, 6s.)
- Examination Questions in Midwifery and Gynecology, University of Edinburgh.** Answered and Annotated by W. Ramsay Smith. Cr. 8vo, pp. 84. (Young J. Pentland, 1s. 6d. net.)
- Examination Questions in the Practice of Physic, University of Edinburgh.** Answered and Annotated by W. Ramsay Smith. Cr. 8vo, pp. 80. (Young J. Pentland, 1s. 6d. net.)
- **Questions in Surgery, University of Edinburgh.** Answered and Annotated by W. Ramsay Smith. Cr. 8vo, pp. 88. (Young J. Pentland, 1s. 6d. net.)
- Longley (E.). *Student's Pocket Medical Lexicon.* New edition. 18mo. (Pentland, 4s.)
- Obstetrical Society of London, Transactions of.** Edited by W. Duncan and P. Boulton. Vol. xxxvi., 1894. 8vo, pp. 482. (Longmans, 25s.)

- Pollock (J. E.) and Chisholm (J.). *Medical Handbook of Life Assurance. For the Use of Medical and other Officers of Companies.* 4th edition. 8vo, pp. 210. (Cassell, 7s. 6d.)
- Robson (A. W. M.). *A Guide to the Instruments and Appliances required in Various Operations.* 16mo, pp. 58. (Cassell, 1s. 6d.)
- Thorne (W. B.). *The Shott Methods of the Treatment of Chronic Diseases of the Heart.* 8vo, pp. 80. (Churchill, 5s.)
- Walsham (W. J.). *Surgery: Its Theory and Practice.* With 380 illustrations, 5th edition. Cr. 8vo, pp. 792. (Churchill, 12s. 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 the "MANAGER" of the Homeopathic Publishing Company, 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; Herr Zöp- pritz, Stuttgart; Mr. Frederick Kopp, Greenwich, N.S.W.; Dr. Cash Reed, Plymouth; Messrs. Boericke & Tafel, New York; Standard Malt Extract Company, London; Dr. Dudgeon, London; Dr. Roche, Eastbourne; Dr. Reed Hill, Ipswich; Dr. Proctor, Birkenhead; Mr. J. Kay, Redland

Bay, Queensland, Australia; Dr. Watson, Sydney, N.S.W.

BOOKS AND JOURNALS RECEIVED.

Zoophilist. — Animals' Friend. — Chemist and Druggist. — Family Doctor. — Reynold's Newspaper. — Hom. Review. — Hom. Envoy. — Maanedskrift f. Hom. — Allg. Hom. Zeit. — La Homeopatia. — Hom. Maandblad. — Journ. Orif. Surg. — Chironian. — Medical Century. — New York Medical Times. — Journ. of Diagnosis and Climatology. — Pacific Coast Journ. of Hom. — Minneapolis Hom. Mag. — Clinique. — Journ. Belge d' Homeopathie. — New Eng. Med. Gazette. — Hom. Recorder. — Hom. Monatsblätter. — L'Art Médical. — Hahnemannian Monthly. — Indian Hom. Review. — Medical Visitor. — Hom. News. — Archiv. f. Hom. — North Amer. Journ. of Homeopathy. — Monthly Mag. of Pharmacy. — Vaccination Inquirer. — The Clerk of the Weather. — Hom. Journ. of Obstetrics. — Medical Argus. — Hom. Physician.

THE
HOMEOPATHIC WORLD.

JUNE 1, 1895.

THE PAST, PRESENT, AND FUTURE OF TRADITIONAL MEDICINE.

IN a "review of the past year," by the editor of the *Wiener Medicinische Wochenschrift*, we find the following candid but desponding appreciation of the state of old physic :

"In the progress of time, indeed, under our eyes, medicine has undergone great changes. The old *thesaurus herbarum* has mostly given place to chemical substances and preparations; physical and mechanical treatment by electricity, metallotheropeia, massage, &c., is constantly gaining more ground; surgery, formerly left to an inferior class of the medical profession, commands the field and achieves results on the internal parts which the internist had never dreamed of; the much bepraised antiseptic treatment has been quickly ousted by aseptic treatment; bacteriology already dominates pathology, and continues to increase its domain; the fear of infectious diseases has penetrated profoundly into all classes of the people; the human race threatens to go crazy over protection against them, and Hygiene has gone so far as to declare herself the only true medicine, though she is but the adopted daughter of medicine.

"These changes, but especially therapeutic nihilism and indifferentism, have created betwixt science and the healing art, theory and practice, a gulf which is perpetually widening; they have produced specialism, and along with this particularism, and, what is much worse, they have allowed the weeds of self-advertisement and charlatanism to grow rank; they have deeply injured medical existence; they have converted the profession

into an oligarchy of coryphæi, a middle-class eking out a precarious existence and a crowd of medical proletarians. Medical colleges, societies, ethical leagues are powerless to remedy this state of things; and the cash of patients, the Eris-apple of our days, is truly no panacea to cure these ills.

“Amid all the conflict of opinions the progress of knowledge advances in all directions, and nowadays this progress does not remain the exclusive property of the learned; it is rapidly converted into practical use. On all sides we can point to the benefits scientific progress has brought to practical life; if here and there it takes a longer time, because perhaps there is a want of energy or means, still it remains the peculiar sign of the times; it influences the minds in spite of the lethargy and dullness of some, and urges them irresistibly forward in all spheres of our multiform life; it is the development-history of this planet from the first formation of its elements to the present day, and will remain so to the end.

“If here and there we find much which we think ought to be better—and if we look around we shall find enough—we trust to the future and expect it to do what the past and the present have failed to effect. But all must lend a hand and work in their own sphere, undeterred by the obstacles they may encounter, and surmounting the dead weight of their own indolence.

“Optimism and pessimism are both equally deleterious; both accomplish nothing, the former because it rests on its real or fancied laurels, the latter because, past failures before its eyes, it despairs of the future.”

And so it ever is and ever will be until traditional medicine shall cast off her traditional fetters and feel herself free to seek for a guiding rule of therapeutics to enable her to employ successfully the immense stores of knowledge she is constantly accumulating, but which without such a guiding rule are nearly useless to practical medicine.

ASAFETIDA IN DYSPNEA.—A recurring dyspnea, after lasting three weeks, and resisting for another week *Ignatia* and *Arsenicum*, was removed in twenty-four hours by *Asafetida* 2. It was connected with flatulence.—*North American Journal of Homeopathy*, September, p. 595.

NEWS AND NOTES.

THE *MEDICAL CENTURY* MILITANT.

OUR hearty congratulations to *The Medical Century* on the attitude it has taken up with regard to Old School intolerance. Among our representative journals in the States it has taken a leading part in protesting against the boycott which is maintained against the appointment of homeopaths as examiners for insurance companies; and now another *casus belli* has arisen. The publishers of the new *Text-Book of Surgery* which is rapidly approaching completion under the editorship of Dr. C. E. Fisher (editor of *The Medical Century*), applied to the publisher of an allopathic work for the use (on the usual trade terms) of certain stock plates which had been used by them in *The American Text-Book of Surgery*. The request was refused on the ground of the strong prejudice against homeopathy entertained by certain writers in that work. This aroused the *Century's* ire, as a leading article on *Intolerant Book Publishers* in the issue of April 15th bears witness. Allopathic publishers have no hesitation in sending their canvassers to solicit orders from homeopaths who are an important source of their revenue, but they cannot extend usual trade courtesies to publishers of homeopathic works. The only thing now is for our American *confrères* to be independent of their adversaries. As the *Century* says:—

“We are now strong enough numerically, and strong enough in all the departments of our profession, to get along without old school books if necessary, and to construct libraries of our own, whereby we may be spared the humiliation of dealing with publishers who not only ignore us professionally, but decline to extend to our publishers common business courtesies simply because they are homeopaths.”

In this country it is somewhat different, the fight being so unequal. But for our part we regard the allopathic workers as mere Gibeonites—hewers of wood and drawers of water—to the homeopathic school. They are always collecting facts and materials which nobody but ourselves can make therapeutic use of. “*Sic vos non vobis*,” we say to them, and help ourselves. In the States the conditions are otherwise and there homeopathy must fight allopathy till it has killed it. In this fight are centred the highest interests of the health of mankind.

THE NEWPORT MEETING.

ON June 17th the annual meeting of the American Institute of Homeopathy commences at Newport, Rhode Island, under the presidency of Dr. C. E. Fisher. We wish the meeting and its President every success. One feature of the gathering will be the completion of the fund for the Hahnemann Monument to be dedicated at Washington next year. The competition has already been decided and the best design chosen. Illustrations of it have appeared in *The Medical Century* and *The Chironian*, from which we gather that it will be worthy at once of the man and the nation.

DR. DUDGEON AND *THE LANCET*.

THE following letter from Dr. Dudgeon appeared in *The Lancet* of May 4th, and will doubtless interest our readers. A letter from Dr. E. A. Neatby appeared at the same time. *The Lancet* was completely silenced; it had not even a word of comment to append:—

“MEDICAL SOCIETIES AND HOMEOPATHS.”

“*To the Editors of THE LANCET.*”

“SIRS,—I read your leading article on the above subject in *The Lancet* for April 18th, but did not know that you expected or would admit a reply to your ‘arguments’ until I saw in to-day’s issue that you apparently expected such a reply. As I happen to be a member of the Pathological Society of London of more than forty years’ standing, I suppose I may consider your article includes a reference to my membership in this society. I may say that I joined in order to keep myself *au courant* with the progress of pathological knowledge, and not with any view of enlightening its members on any peculiar pathological theories or doctrines held by the school of homeopathy, for I may add that our school has no peculiar pathological theories or doctrines, and that the pathology we profess is precisely that taught in the ordinary medical schools. Such being the case, I do not see how my peculiar therapeutic views should disqualify me from being a member of a pathological society which is of no therapeutical faith. I do not happen to be a member of any society of general medicine which has to do with therapeutics, the homeopath societies proper being quite sufficient for my wants. But as according to the confessions of your most eminent men the therapeutics of the non-homeopaths are in a most imperfect and unsatisfactory state, I do not think it would do the general profession any harm, but probably much good, if they had in their societies members who are conversant with the reformed therapeutics of homeopathy. As we observe with amuse-

ment the frequent recommendations in *The Lancet* and other medical periodicals, as newly-discovered remedies, of medicines that have long been used in our school, and for precisely the same affections as they are employed in homeopathy, it might on the whole be better that you should obtain a knowledge of these medicines and their therapeutic uses at first hand, from those who have long employed them, than have them introduced into your practice in the indirect and round-about manner they are at present. To object to us as 'irregular practitioners' seems to me to be very absurd, as we are the only medical men who really practise according to a *regula* or rule, and eminent authorities in your school have declared that medicine as they practise it has no principles, and that their treatment is not guided by any rule. I can assure you that those whom you call 'homeopaths' are not, as a rule, desirous of joining your therapeutic societies, as they know they would meet with but scant courtesy from the members; nor are we at all desirous of having consultations on medical treatment with adherents of the old school, as we think that our own therapeutic method is infinitely superior to yours, as we are always ready to prove by reasoning and by results.

"I am, Sirs, your obedient servant,

"R. E. DUDGEON, M.D.,

"Member of the Pathological Society, and Consulting
Physician to the London Homeopathic Hospital.

"Montagu-square, April 27, 1895."

MEDICAL WOMEN IN THE STATES.

THE following from *The Morning* shows how many women practitioners there are in the United States and the proportion of them who are homeopaths:—

"According to statistical reports, there are in America fully 2,000 women practising medicine in one or other of its forms, and inclusive of 180 homeopaths. The majority were ordinary practitioners, but among the remainder were 70 hospital physicians or surgeons, 95 professors in the schools, 610 specialists for diseases of women, 70 alienists, 65 orthopedists, 40 oculists and aurists, and, finally, 30 electro-therapeutists. In Canada there is but one medical school exclusively devoted to the training of medical ladies, but in the United States, in 1893, there were ten, one of them being a homeopathic establishment."

WHY ALLOPATHIC DOCTORS LACK PATIENTS.

In the following letter published in the *Sunday Times* of April 28th Dr. De Noë Walker accounts for the "bitter cry" of the general practitioner:—

"DOCTORS V. CHEMISTS.

"To the Editor of the *Sunday Times*."

"MADAM,—You observe in the *Sunday Times* of this week, 'it is

melancholy to reflect upon the condition of thousands of doctors throughout the country, thoroughly capable men, who cannot get sufficient practice to enable them to live in a style expected of their profession.' A member of the faculty attributes the present state of affairs to the growing practice among chemists of prescribing for customers. I have never believed, and still continue to disbelieve, in the reason adduced by one of the faculty. The most potent factor that causes the lack of patients complained of is the steady advance of the homeopathic treatment of disease generally, but especially the homeopathic treatment of many ordinary ailments, including measles, by mothers or nurses. Admirable handbooks for domestic practice have been used for many years, and are sold by all homeopathic chemists. I have made it my business for forty years to encourage this, and to make 'openings' for homeopathic physicians and chemists in India, France, Italy, and in the whole of the West of England. Whenever an epidemic prevails, I have a couple of pages printed, giving plain directions for homeopathic prevention and treatment. I have firmly established homeopathy in many convents, mostly Du Sacré Cœur and of Notre Dame, much, both to the better economy and comfort of nuns and schoolgirls. A mother superior said to me a little while ago, 'I cannot be sufficiently thankful to you for having brought homeopathy to my notice. We seldom call in a doctor now, and our chemist's bill is two-thirds less than it used to be. It seemed to me that the moment the doctor came into the house it was sure to be the beginning of some long illness.' Another cause at work is the decreasing belief of any kind in the allopathic mode of treating diseases. Finally, the way 'legitimate practitioners' have abused physicians practising homeopathy—their bigotry, excommunications, and misrepresentations, have convinced thousands that if homeopathy is thus dealt with by the 'orthodox' there really must be 'something in it.' One thing, however, the 'orthodox' take good care never to do. They will abuse it, misrepresent it, &c., but they take good care never to try it.—I am, your obedient servant,

"ARTHUR DE NOË WALKER.

"21, Albemarle Street, W."

MEDICAL AMENITIES.

DR. J. DOBSON, of Bethel, Conn., U.S.A., has sent us a number of extracts (from the *Medical Brief* chiefly) satirising the manners and customs of the Old School in relation to the New, one of them being especially severe on Mr. Ernest Hart in his character as the second Mr. Turveydrop. Another paragraph in the same number of the *Brief* records the sequel to the resolution of the Cleveland Society in favour of medical liberty:—

"Last month we announced in these columns that the Cleveland, O., Medical Society had thrown down the bars and allowed members to consult with homeopaths, and then, going still further, agreed that they should be admitted to membership in the Society. Since then

the Society became so frightened at its own shadow—awful aspect!—and the hue and cry raised by others of the school, that it reconsidered the membership part, and postponed action on the matter indefinitely.”

We learn from the *American Homeopathist* that the rush for membership was not great. So little did the homeopaths of Cleveland esteem the honour of membership that not a single application was made.

HAHNEMANN'S BIRTHDAY IN THE FAR WEST.

FROM the *San Francisco Call* of April 11th we learn that the 140th anniversary of the birth of Hahnemann was duly honoured at the Hahnemann Hospital College of San Francisco on the previous day. These ever-pleasant functions, which were so marked a feature of the last period of Hahnemann's life in Paris, have played an important part in the furtherance of homeopathy. As Dr. Wm. Boericke said in his address on the “Life, Teachings, and Beneficent Works of Hahnemann”—

“In commemorating this anniversary we leave for the time being the common-place level of our professional life and gain strength and inspiration for the work that has devolved upon us as his disciples—the work of continuing the development of the homeopathic healing art.”

Dr. French, who is known to many on this side of the water, was the poet of the day, reading a poem of his own on Hahnemann. In the evening a banquet was given by the President of the College, Dr. J. M. Eckel, at his residence, 324, Geary Street.

SECRET REMEDIES WITH A DIFFERENCE.

THE Berlin letter of *The Medical Press*, which appears in the issue of March 27th, contains the following paragraph:—

“SECRET REMEDIES AND PROFESSIONAL HONOUR.

“A case was recently before the courts during the course of which an extraordinary opinion was expressed by a scientific functionary. The case was that of a man who had sold a mixture of honey and water as a secret cure for consumption. The ‘remedy’ was sold for 4 marks the bottle, the actual value of it being 2½d. The counsel for

the defence asked Medizinalrath Dr. Long, who was present as an expert, whether the accused could not believe in the curative power of his remedy as much as the discoverers of *Tuberculin* and *Cantharidine* could in theirs. The reply of the scientific expert was: 'It was not clear to him how they could take the little thieves and let the big ones go free.' The State Solicitor-General was the only one who expressed his regret that science should be named in the same breath with the accused, and that the expert had given his 'opinion' in such a form.

"The incident found its way into the papers, and excited astonishment in the minds of all, that a medical jurist should make such an attack on such men as Professor Robert Koch and Professor Oskar Liebreich. A week later the papers announced that Herr Medizinalrath Long had been induced to give an apology or explanation of honour to Professor Koch, to the effect that the latter was not alluded to in the expression made use of, and that he would not cause him any offence for the world. It has been whispered, however, that Herr Long had not by any means given this explanation *sua sponte*, but only after the alternative had been offered him on the part of the offended bacteriologist by two military officers of high position of either signing the apology or accepting a meeting with pistols.

"The older and perhaps cooler-blooded scientist attacked does not intend to revenge himself, thinking rightly that the enormity will recoil on the perpetrator. It is not at all unlikely that the Ehresreth of the Standesverin, or the Aerstekammer will also require an explanation of his foolish outburst from Herr Long."

Evidently "Science" can do no wrong. Koch need not apologise for using a secret remedy; but Dr. Long must for alluding to the fact.

CANTHARIDINE.

THE following portion of the same Berlin letter reported a discussion at a meeting of the Medical Society of Berlin on the use of Liebreich's *Cantharidine* in lupus:

"Hr. Grabower first reported on ten cases of tuberculosis of the larynx and lungs treated by *Cantharidine* in the Moabit Hospital. In three cases the treatment had to be abandoned on account of the effect on the kidneys. In one case cylinders and epithelium of tubules appeared in the urine, although none were present before the commencement of the treatment, and continued until the death of the patient two years and four months later. In the second case albumen and strangury appeared two days after the fourth injection, the patient dying two days later. In the third case the albuminuria was transient, as the injections were stopped in time. The remainder of the cases had injection from fifteen to twenty-three times, but no effect was observed on the local affection."

Other speakers related accidents from the drug, and some claimed to have made cures.

ORIGINAL COMMUNICATIONS.

KALMIA IN CHRONIC HEADACHE.

By J. R. P. LAMBERT, M.B.C.M.

ON January 21, 1895, W.S., aged 54, came to my dispensary complaining of a constant headache, from which he had suffered for years. He was never free from it, and for three or four days a week it was very bad, sometimes so severe that he had to shut himself up in a room alone, and feared he would go out of his mind.

He described the pain as an opening and shutting sensation. It affected chiefly the right supra-orbital and temporal regions, but sometimes the left side. When very severe it was accompanied by swelling of the eyelids and temporal region. He seldom got up in the morning free from pain, and usually woke up with it.

In addition to the headache he complained of giddiness, weariness, and languid feeling in the limbs; also shifting pains in the joints and constipation. He was sometimes jaundiced, and usually had a bilious attack every three months or so. I gave him a few powders of *Kalmia* 3x, to be diluted in water and a dose taken every three or four hours. The effect was most marked. The headache was relieved at once, and completely disappeared for awhile, and then returned, but only slightly. He has continued taking *Kalmia* ever since, and finds he cannot do without it. I gave it gradually weaker, 4x and 5x, and then tried the 200th potency, to be taken when required, but it failed, and I went back to the 3x powders, which appear to keep him free from pain as long as he takes it. The only other medicine he has had is *Sulphur* 30, given a month after commencing the treatment for an irritation of the skin on the back. Not only has his headache been greatly relieved by the *Kalmia*, but his general health has been improved and the joint pains cured. It was these pains and the general symptoms that led to the selection of *Kalmia* as the remedy.

11, Sydney Place, Onslow Square, S.W.

REMARKS ON THE "MATERIA MEDICA."

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

EUPHRASIA—HELLEBORUS NIGER.

EUPHRASIA. The following symptoms are from Hahnemann—Obtusion of the head, and a pressure in the outer and upper part of the head. Heat in the head with pressure. Heat in the forehead with headache in the temple. Jerking of the upper and lower eyelids towards one another. Light seemed to him darker. The light seemed to vacillate and to burn at times with a bright, at times with a dark flame. The eyes are painful when exposed to the glare or the light, as when one has not slept enough. Contractive pressure in the eye when walking in the open air. Occasional smarting in the eyes; acrid lachrymation. Eye-gum in the inner canthi, even in daytime. Stitches in the lower teeth. Beating in two teeth, after and between meals. Flat taste in the mouth. Eructations tasting of the ingesta. Distension of the abdomen, but, apparently not from flatulence, before dinner. Stool every day, but hard and scanty. Pressure in the region of the anus when sitting. Stitching in the fig-warts, even when sitting; worse when walking: when touching them they feel sore and burning. Itching sensation in the fig-warts. Cough most violent in daytime, with mucus in the chest, which cannot be got loose. Cough only in daytime. Has no breath when coughing, almost as in hooping-cough. Laboured breathing even in a room. Sensation in the arms as if they had been to sleep. Stitching in the left hip-joint when walking. Jerking stitching in the left knee when walking. Tension from the outer ankle, near the tendo Achillis, to the calf, when walking and sitting. *Excessive yawning when walking in the open air.* Drowsiness in the day, although he had slept well the previous night. Weariness in daytime; nevertheless he only fell asleep at two o'clock in the night following, three nights in succession. Fit, three mornings in succession; he wakes at every moment, at three o'clock in the night, falls into a sort of stupor at six o'clock without dreams; immediately on waking from that stupor, he feels a pressure in the upper part of the chest, his head becomes giddy and heavy; he feels, moreover, nauseated, and sweat breaks out all over his body; the vertigo increases at every

motion, even small ; he inclines to fall to one side ; all his limbs are weak and tremulous ; the upper part of the body feels too heavy when rising from the bed, as if the limbs could not support it ; the fit gradually decreases until noon ; want of cheerfulness during the fit. Constant chilliness. Internal chilliness the whole forenoon ; in the afternoon he is attacked with violent chilliness of both arms, they were quite cold. Sweat in the night while sleeping, going off when waking, two nights in succession. Three nights in succession sweat all over the body while asleep, the sweat, especially on the chest, having an acrid smell ; chilliness when rising from the bed. Lazy, hypochondriac ; the objects around him had no charm for him. From the observations of others we may notice the following. *Moral* : taciturn, and want of disposition to talk, the whole day. *Head* : fluent coryza with violent headache, as if bruised or a sort of painful dreariness in the head, obliging him to lie down sooner than usual, although the head felt worse after lying down. Long lasting, piercing pricking in the right temple. A few sharp stitches in the right side of the forehead. Aching pain in the outer part of the head, especially in the forehead. *Eyes* : obscuration of sight at a distance when walking in the open air (short-sightedness) for three days. Injection of vessels in the sclerotica, extending to near the cornea (at the same time a pressure which had been felt in the eyes for some time past, and dark spots upon the cornea, disappeared). Troublesome dryness of the eyes as if he had suppressed sleep. *Ear* : violent boring pain in the inner right ear, in the region of the tympanum, as if from within outwards. *Face* : stiffness of the left cheek, when talking and chewing, with a feeling of heat and single shootings through the same. *Jaws and teeth* : drawing pain in the upper jaw in a transverse direction. Violent bleeding of the gums. He frequently interrupts himself to begin the period in a different manner, whereas his speech was usually very coherent. *Taste and appetite* : hunger without an appetite at noon. Hiccough. *Stomach and abdomen* : a few fine stitches below the pit of the stomach, in the evening when sitting, during an inspiration and expiration. Painless grumbling in the abdomen, as when one is hungry and empty. A sort of oppression in the abdomen, a sort of burning-pressing pain in a transverse direction, in rest or motion. *Urinary* : frequent micturition. Frequent emission

of clear urine. *Genital*: cramp-like retraction with pressure above the mons veneris, in the evening when in bed. *Cold, catarrh, chest*: sneezing with violent fluent coryza, a good deal of mucus being discharged, through the nose and the posterior nares. Copious fluent coryza in the morning, and violent cough with expectoration. Single fine stitches under the sternum, especially during an inspiration. *Back*: intermittent cramp-like pain for half an hour. *Upper extremities*: stunning stitch in the left upper arm. Pain in the right fore-arm and hand, as if the parts had gone to sleep. Cramp-pain in the metacarpus and fingers. *Lower extremities*: stitching drawing from the upper part of the thigh into the groin, most violent when sitting. Continual boring stitches in the tibia from below upwards. Pain in the periosteum on the left tibia, moving up and down, when sitting. *General*: shooting, itching stitches here and there, the whole night; he tosses about in his bed and cannot get warm. Great weakness in the whole body, especially the lower limbs; walks with great difficulty the whole third day. *Sleep and fever*: drowsiness without being able to sleep, with much yawning. *Frequent waking in the night as from fright*: pale face for an hour. Frightful dreams in the night, about fires and lightning. Feverish chilliness all over the body. Red-hot face for an hour and a half. Sudden heat and redness of the face, with cold hands; no thirst.

Remarks.—It will be observed that though there are few symptoms of this plant compared to what have been obtained from many, they have their distinct place; and, as Hahnemann says, this plant deserves the name it bears, and ought not to have been neglected by modern physicians. He gives, it will be observed, seven symptoms referable to the eye, and one of these, "light seemed to him darker," clearly points to a remarkable condition of the nervous tissue of that organ. The "yawning" condition, too, shows how so apparently trivial an act nevertheless may have its value; the detail of the "fits," also, reminds us that no medicine is to be overlooked in the treatment of the most serious diseases, such as epilepsy. In the detailed symptoms I would notice the injection of vessels in sclerotica with disappearance of pressure, &c., because a beginner would naturally be alarmed at finding such injection, but a little further inquiry would show it to be a medicinal action accompanied by benefit to the diseased condition,

and it is this kind of observation that is so necessary in practice. The *transverse* direction of pain in jaws and abdomen is worth noting, and that, *from below upwards* in the tibia. The kind of wakefulness, too, shows how important it is in treating insomnia, that bane of civilised and town and city life, to ascertain if possible the kind of wakefulness.

HELLEBORUS NIGER.

Our next drug is *Helleborus Niger*, the symptoms of which, we are informed, show that this drug must be able to cure a peculiar kind of fever, swellings, and mental diseases. By continuing the proving of this drug, we shall find out what diseases they were which the Greeks were in the habit of curing by means of *Hellebore*; for the plant which they used was a species very much like ours, the flower whereof had pale-red petals. In large doses it acts for a few weeks. *Camphor* seems to moderate the primary effects of *Hellebore*. *Cinchona* relieves best its secondary effects. The root which has been used in our experiments has been gathered by myself. These prefatory remarks will make us listen with the more interest to the symptoms furnished by Hahnemann, which follow: Obtusion of the head, producing dulness; a dull pain every afternoon from four to eight o'clock. Headache in the occiput, as if bruised, especially when stooping (a. 48 h.). Headache on one side, a tearing, with chilliness. Headache from the nape of the neck to the vertex. Piercing headache, changing to a burning in the brain when sitting up. He knows not how to hold his head to relieve his pain; he lays it all the time to another side; the pain is least when he forces himself to lie still and forgets his pain, slumbering with his eyes half closed. Dulness and heat in the head; burning in the head. Dull and heavy in his head. (I infer from various observations, that stupor, an obtusion of the sensitive nervous system—imperfect and heedless sight, although the eyes are perfectly good; imperfect hearing, although the organ of hearing is perfectly sound; imperfect or no taste, although the organ of taste is in a good condition; constant or frequent absence of thought; want of recollection of the things which had just taken place; indifference; light slumber, without the sleep being refreshing; desire to

work, without having the power or attention necessary to do something—is a primary effect of *Hellebore*.)

Heaviness and heat in the head, with cold fingers and chilliness of the whole body, diminishing when the hands are kept wrapt up and warm (a. 1 h.). Painful heaviness in the head, with tension and pressure, apparently from without inwards, in the temples, but especially in the forehead; at every pulsation a pressing drawing is felt, as if the blood pressed violently through the head (the whole day, especially during the fever), less in the open air. Aching pain in the root of the nose. Small tumours in the integuments of the forehead, painful, as if bruised or contused. Yellowish colour of the face.

Pale face, while the head is hot. Twitchings of the eyelids (swollen, red eyelids). He is sensitive to the light of day; he does not want to see the objects around him, and lies with his eyes closed (during the fever). Dilatation of the pupils. Sensation in the eyes as if closed by something heavy pressing from above; he has to make an effort to open them wide—in the open air (a. 7, 8 h.). Pressure in the hollow behind the lobule. Rheumatic stiffness of the nape of the neck. Pain of the cervical glands (ulceration of the angle of the lips, with itching). Vesicles on the tongue. Sore throat, pressure during deglutition. Ptyalism. Bitter taste in the throat, more so when eating something. He has an appetite, but he does not relish what he eats, and he feels nauseated for a few moments, ceasing immediately after dinner. Aversion to greens and sourkrout, with good appetite for bread and flesh (a whole week). No thirst, the whole day. Inclination to vomit (a. 40 h.). Inclination to vomit, rising from the pit of the stomach. Empty eructations and inclination to vomit, and he is nevertheless unable to vomit. Severe pain, as if bruised, near and below the pit of the stomach, in the region of the pylorus, where he feels a pain at every step he makes; the pain increases when talking loud and when touching the place. Sensation as if the pit of the stomach were drawn in. Distension of the pit of the stomach and the epigastrium, oppressing the breathing, and painful as if there were subcutaneous ulceration. At every step he feels a painful pressure on the pit of the stomach. Grunting in the abdomen. Excessive rumbling in the abdomen (immediately). Colic. Stitches in the abdomen, and tearing pain across (a. $\frac{1}{2}$ h.). Sensation of

coldness in the abdomen. Passing distension of the abdomen in the evening (a. 5 d.). He passes a sort of white jelly three or four times a day, with much pressing. Diarrhea. Retention of stool the first day, next day ordinary stool, and diarrhea in the afternoon. Stools composed of tenacious, white mucus. Frequent micturition. Appearance of the menses. Hurried breathing. Short and hacking cough. Contractive pain in the small of the back. Itching, gnawing of both arms; after scratching he feels a smarting as of salt water, after going to bed and in the morning yellowish, roundish herpetic spots on both arms, emitting a fluid when scratching. Weariness of the thighs. Heaviness and faintness of the feet. Stiffness of the bends of the knees. Unsteadiness of the limbs, weakness of the feet, vacillation of the knees; he is only able to walk slowly. Sudden relaxation of the muscles; coldness of the body and cold sweat on the forehead; falling suddenly to the ground and stammering, but with consciousness; the pulse is very slow and the pupils are contracted (a. 1 h.). He feels better in the open air; the desire to vomit passes off, and the headache is much less. Sensation in the open air as if he had been long sick, all objects appear to him changed and new. Sudden dropsical swelling of the skin (this symptom together with others appears to show that *Helleb.* will be a great remedy in certain swellings). Sensation in the swollen parts as if they were distended and too heavy. Stitching boring pains in the periosteum. Stitching boring pains, in various parts of the body, aggravated by cool air, bodily exertion, and after eating or drinking. He slumbers with his eyes half open, the pupils turned upwards (immediately). *Slow pulse* (a. 1 and 16 h.). Very small pulse. Coldness of the body, especially in the morning. Fever: violent heat in the head, cold hands and feet, afterwards slight sweat on the whole body, for an hour (a. 4 h.). Fever lasting several days; when out of the bed he is constantly affected with chilliness of the body, no thirst (when sitting, standing, or walking), cold hands, internal burning heat and dulness of the head, great drowsiness, heaviness and weakness of the feet, and stiffness of the bends of the knees; after lying down in the bed, he is immediately attacked with heat and sweat all over the body, likewise without thirst. Fever: continual chilliness over the body, without thirst, heat in the head and headache in the occiput, as if bruised. Shivering,

would like to lie down, and has a yellowish complexion. The shivering commences on the arms. Thirst comes on after the chills had lasted five days without thirst. Chilliness in the evening, when lying down, and sweat every morning (a. 10 d.). Slight sweat on the feet, towards morning on the first night. Heat and sweat (a. 36 h.). Frequent alternation of general dry heat, shivering and coldness, followed by a concealed colic. Feeling, after the fever, as if he had been sick long. *Excessive anxiety*: absence of mind when studying; he was unable to fix his ideas (irresoluteness). He despairs of his life. Moaning and groaning. Homesick. He feels sad when seeing a cheerful person, and feels very unhappy (he dresses improperly). We come now to the observations of others. *Moral*: he was neither able to sit, lie, nor stand, and pointed to his heart. Taciturn the whole afternoon. *Head*: heaviness of the brain and sensation as if it were surrounded by a tight skin, with inability to think and to retain anything in memory; weak memory; he had to make an effort and to take some time to remember what he had intended to say, and about which he was asked (a. $\frac{1}{2}$ h.). With the fluent coryza the head feels muddled as if bruised (a. 5 h.). Drawing pressure in the left hemisphere of the brain, extending from the occiput to the forehead as if the cerebral mass were accumulating (immediately). *Eyes*: pressure in the orbits, as if the eyes would fall out. Prickling in the eyeball from above downwards. *Ear*: drawing in both ears, as if the inner ear would burst, a kind of otalgia. Lancinating toothache, together with a digging-up, boring stitching in the right ear, through the night; nothing but the otalgia remained in the morning and through the whole day. *Nose*: itching burning in the left wing of the nose, smarting itching around and below the nose, and in the upper lip, as if coryza would set in. *Jaws, mouth*: insensible rigidity of the tongue. Dry white tongue in the morning when rising from the bed. Vesicular pimple in the middle of the vermilion-border of the upper lip, in the morning when waking. *Troublesome dryness of the palate and cutting and scraping pain of the palate when moving the mouth to perform the act of deglutition* (continuing many days). *Taste, appetite and gastric symptoms*: dry, slimy taste with violent thirst, for two hours. Great appetite, he is constantly hungry and relishes everything. *Nausea in the stomach, he*

has frequently a sensation of hunger, but the food is repulsive to him, although he has a natural taste in the mouth, and food tastes natural to him (a. 24 h.). *Stomach and abdomen*: scraping, rough sensation in the stomach (as when rubbing with something woollen). Violent pinching, as in dysentery, transversely across the abdomen (after a meal). Sharp pressure transversely across the abdomen, underneath the umbilicus, from without inwards, especially violent when sitting (a. 24 h.). *Stool*: diarrhea with nausea and colic. Hard scanty stool, during and after which violent cutting stitches in the rectum, from below upwards, as if the rectum became constricted around a body with cutting edges (a. 12 h.). *Urinary*: frequent desire to urinate, emitting but a slight quantity (a. $\frac{3}{4}$, $2\frac{1}{2}$ and $5\frac{1}{2}$ h.): emits a quantity of watery urine. *Genital*: seems to suppress the sexual instinct. *Catarrh, chest*: sneezing in the morning before breakfast. Contraction of the chest, had to gasp for air with widely open mouth, but was not able to breathe. Increase of warmth in the lower part of the cavity of the chest. *Back*: stiffness of the cervical muscles as far as the occiput, even when at rest, but most when moving the head in the morning (a. 41 h.). Dull pain in the left shoulder joint, increasing during motion. Pain as if bruised between the *scapulæ*, in the region of the spine.

IN OLD BRETAGNE.

By DR. MORRISSON.

Yes, it is a night passage from Southampton to St. Malo, but that is not altogether a disadvantage. Make yourself comfortable in your berth before the steamer starts, and get to sleep soon, for by so doing you may escape the dreaded sea-sickness. A dose of *Strychnia Phos.*, in pilules, 3 or 4 times a day, for two or three days before starting, will improve digestion and lessen the risks of nausea. Besides this, a night journey does not require much attention from the steward, and as the tea and coffee are often crudely made and roughly served, that is a further consideration.

An average passage will take from ten to eleven hours. Should the voyager be fortunate enough to approach St. Malo with a smooth sea and in the clear light of day, he will be well repaid for any inconvenience experienced during the crossing. Not far off, on the right, will be seen the largish

island of Cezambres, guarded by a strong fort and with the lighthouse on a rock near its western extremity. In the distance will be seen Cape Frehel, with St. Lunaire, St. Enogat, and Dinard coming into view. On the left, close to St. Malo, is the island of Grande Baie, with the tomb of Chateaubriand on its eastern extremity, and a fort or magazine on its western point. Near this, in the Bay of St. Malo, is the smaller island of Conchève, surmounted by a powder magazine. Several rocky islets enhance the picturesqueness of the view.

ST. MALO,

one of the oldest towns in France, contains a population of about 10,000, and is as fine a specimen of a walled town as can be found in Europe. The spacious ramparts form an extensive promenade, and furnish excellent panoramas of land and sea. Just across the estuary of the river Ranche is Dinard, the Trouville of Brittany; at the eastern extremity of the bay is Paramè, a rising seaside resort; and on the other side of the harbour, extending to the river Ranche, is St. Servan. Towering above the walls of St. Malo are the lofty houses. Near the centre of the town is the massive cathedral with its lofty spire. I believe the custodian said the height is 200 metres, upwards of 150 feet higher than the dome of St. Paul's Cathedral! Visitors who are good at stair work should not fail to climb up to the bells, taking peeps at the surroundings *en route*. Close by the cathedral is a small but interesting museum, with the Courts of Justice adjoining. The streets of St. Malo are narrow, to economise space; and in some of them the sunshine never thoroughly penetrates. Passing down the main street one sees a plentiful display of Brittany jewellery, and of fancy work. The latter is chiefly done by men in the neighbouring villages, while the wives and daughters do a large part of the more common toil. At low tide the people pass over to the island of Grande Baie, and at that time the steamer for Dinard starts from a small pier at the western end, as it cannot enter the harbour of St. Malo. Four hotels may be mentioned: the new Hôtel Franklin, which is outside the walls and close to the inner harbour, in fact, too close to be exactly pleasant at low tide; the Hôtels de l'Univers, Vieux Franklin, and de France, inside the walls. But as St.

Malo is not a place for the voyager to stay at long, the choice of an hotel is not a matter of very great consequence. The town is built upon a rocky island, with a narrow strait separating it from the mainland. There is an outer and an inner harbour, but as the tide leaves the vessels dry, although the full depth in the inner harbour is nine metres (about 30 feet), the arrivals and departures have to be timed to meet this.

The two harbours are joined by a narrow entrance which is crossed by the *pont roulant*. You mount a small platform, pay your five or ten centimes, and are drawn by a chain cable through the water. Practically it is an elevated tramway car, with the rails submerged, except at very low tides. You reach

ST. SERVAN

either by the *pont roulant*, by driving round the harbour, or by the steam tramway. This is the chief residential town, with a population of about 11,000. The houses are chiefly detached, and with gardens. Most of the shops are in one street, the Grande Rue, and a market is held on Tuesdays and Fridays. The streets are fairly wide, but some of them, such as the Grande Rue, are roughly paved, and they are not kept clean. Visitors need not be afraid of sewer gas, as the general drainage system is that of garden closets and open street gutters, with odours not always as pleasant as that of eucalyptus oil. Water is somewhat scarce, on account of the trouble of pumping, and it is not always nice for drinking. To some extent this is obviated by the use of cider, which is the national beverage. Close to St. Malo is a mineral water manufactory, the productions being seltzer water and effervescing lemonade. It is said that the water used by this enterprising firm comes from a neighbouring stream, which is also utilised by washerwomen. We derived some consolation from the information that the water for drinking purposes is filtered and purified.

St. Servan contains but little of special interest. The most prominent object, near the harbour, is a strong fort; at the mouth of the Ranche, where the Dinard steamer starts, is the Solidor tower, formerly a prison; and at an elevated point near the Grande Rue is the Semaphore, a tower which was formerly used as a signal station. At the lower end of the Grande Rue is the Hotel Beau Rivage, with

excellent views of the bay, and across to Dinard. Two boarding-houses may be mentioned, the Maison Massias, Rue Robert-Secouf, kept by the pastor of the Eglise Evangelique and his wife; and another at No. 20, Place Constantine. The purity of the air and the porous soil render St. Servan a healthy town, though its death rate is rather higher than that of St. Malo. A considerable English population resides here—I was told about five hundred in all—and there is an English Established Church. Lovely views of river scenery may be obtained in the grounds of Mons. de la Chambre; but the general scenery of Brittany, even around Dinan, is much overrated. It is the change in the national costumes and habits of life which really “lend enchantment to the view.” And certainly the Bretons are not very cleanly, either in their habits or their surroundings.

About twenty minutes by car will take us to

PARAMÈ,

the seaside suburb of St. Malo, and an infantile paradise. With a fine sweep of sand, extending right on to St. Malo, with a rocky promontory at its eastern end, with charming views, and with a pleasant country in the background, what more can be desired? Paramè has all the charms of Dinard, with less ostentation, and with even greater facilities for visiting neighbouring parts. The St. Malo station is easily reached by car, and from there you go to Dinan, to Dol, to Mont St. Michel, and onward if desired. You can find an English church, with a resident English clergyman. On the sea-front are the Grand Hotel, adjoining the Casino; the Hôtel de la Plage, with an English proprietor; and the Hôtel Drouay-Trouin, also adjoining the Casino. The latter is a small hotel, with sea-views from every window, very clean, and with an obliging host who thoroughly understands the art of cooking. An English boarding-house will be found at the Villa Grazia Maria, and a French boarding-house near the Hôtel Drouay-Trouin.

During the season these seaside resorts are overcrowded, but those travellers who can visit them in the months of May and September will be likely to fare well. Why should we go so far? some will say. Because the thorough change benefits the wearied brain as well as the prostrate body. And as, out of the season, living is cheaper than at our own

seaside resorts, and as the return tickets enable travellers to break their journey at Jersey and Guernsey the extra cost is by no means great.

Clapham Common, May, 1895.

THE BEE-STING TREATMENT IN RHEUMATISM.

By FREDERICK KOPP, Greenwich, N.S.W.

THE bee-sting mania seems to have begun in earnest in New South Wales. A correspondent (Josiah E. Taylor, of Cowra, N.S.W., of the *Australian Bee Bulletin*, gives an interesting account of the treatment of a case of rheumatism by bee-stings in a recent number of that journal. From this correspondence it appears that a certain old man was suffering greatly from rheumatism in one of his elbows which he was unable to raise. The arm was terribly swollen, he was in dreadful pain, could not sleep, and was almost driven crazy. Mr. Taylor was informed of the poor fellow's condition one morning by his wife (Mrs. Taylor) at the breakfast table. Without finishing his breakfast he immediately went down to see him. He asked him what was the matter, and the man replied, "Rheumatism," and that he felt very bad. Mr. Taylor replied, "Oh, that is nothing—I can cure you!" and, with that, he showed the sufferer several journals, published in the bee interest, which contained certain articles in favour of the bee-sting treatment in rheumatism. After the man had finished reading these, Mr. Taylor asked him if he thought that he would have the courage to try it. The man replied that he would try anything to obtain relief. "All right," said Mr. Taylor, "when will you come up?" "I'll come up at dinner-time," replied the man. Mr. Taylor, however, would not hear of this, and told him to come up at once, as there was no time like the present. The man promised, and said he would be up in a few minutes.

Mr. Taylor went home to prepare for the operation. As it happened, he had some combs in the honey-room, with a little honey in them, and he was allowing a few bees to take this honey away, having left the door of the room open on purpose to allow the bees to get in to the honey. They were making their exit therefrom by the escape over the window, being loaded with honey. He secured about

a dozen of these bees in readiness for the operation. He had hardly done so when the subject to be operated upon put in his personal appearance. Mr. Taylor, before commencing operations gave the man to understand that the experiment that he was about to undergo was according to his own free will, and without any coercion on the part of Mr. Taylor, and that, therefore, Mr. Taylor was relieved of all responsibility in the matter. "All right," replied the patient, "go on with the music!" Mr. Taylor, thereupon told him to take off his coat. The man did so, and the operation began. It is thus described by Mr. Taylor:—

"I tied a handkerchief round his arm, outside the shirt, above the elbow; I opened the sleeve, and let in about a dozen bees, but not one would sting. Of course not, just what I expected, they were full of honey; so I released them, and went to a hive that I knew I could back its inmates for stinging (hybrids), and, opening it without smoke, I secured about twenty, and placed about six on his arm. 'There's one,' says he, 'there's another—another one, that makes three!' I encouraged them a bit by touching them up, and he got another sting—total, four. But he was not satisfied; he wanted more. 'All right!' I said, 'but you will have to come and stand over the hive, while I shake them on to your arm.' So I gave him a veil to protect his face, and similarly protected myself. I drew out a centre frame covered with bees, made him hold his arm over the open hive, a good shake of the frame, and his arm was covered with bees. Oh, my! wern't they savage! I got a good dose on my hands, but he got none till I told him to move his arm about to irritate the bees, when he got a good dose of medicine—totalling *twenty-two* stings. I asked him how he felt. He said it was pretty painful, and his arm was very hot; but the pain was no worse than before, and he thought he would go and lie down for a while, 'and, if it does me good, I'll come for another dose presently.' 'Oh, no! you don't,' I said, 'enough's as good as a feast; you don't get any more here to-day!' So he went home (just across the street) to lie down."

Mr. Taylor, however, began to fear that he had rather overdone it, so, feeling rather anxious about it, in about half an hour's time he went over to see how his patient was progressing. He expected to find him asleep, and was, therefore, surprised to see him sitting up, quite

"jolly." He informed Mr. Taylor that he already felt great relief. Mr. Taylor left him, as he had to go down town, leaving instructions that he was to send for him at once if he felt worse. About two hours afterwards, as he was coming up the main street, somewhat anxious as to how his patient was progressing, he was surprised to see him standing in the centre of a small group of townsmen, telling them of the wonderful cure effected, and lifting the arm to his head which, two hours before, he had been unable to move. Mr. Taylor says that the arm has been better ever since, and that his patient is eager for another operation, which he (the patient) believes will complete the cure, and he winds up a rather long letter by advising all persons suffering from rheumatism to give the bee-sting treatment a trial.

Another correspondent, Mr. John Pollock, of Wingham, N.S.W., also writes on the subject in the same number of the *Australian Bee Bulletin*. He asserts that he had been under several doctors, and had bought every patent medicine that he saw advertised, and had so many liniments rubbed in, that his wife got disgusted with the job. It was not until he tried the bee-sting treatment that he got the long-looked-for relief, and he announces that he has not had the slightest attack from his old complaint for the past ten weeks, although, as he says, "the weather has been bad enough to give even a wooden man rheumatism!"

The above account, by Mr. Taylor, of the treatment of a severe case of rheumatism with bee-stings, is undoubtedly very interesting, and fully shows how agonising must have been the sufferings of the poor patient ere he submitted himself to so extreme an operation. One sting from an angry member of the *Apis* tribe at any time is far from pleasant; how nice then must it feel to have twenty-two bee-stings penetrating into one's skin. Of course, the pain would not be quite so intense in a person suffering from rheumatism as it would be in any one entirely free from that complaint. As Mr. Taylor's patient himself said, when he was asked how he felt, "it was painful, and his arm was very hot, but the pain was *no worse* than before." Mr. Taylor asserts that his statement as to the man's condition, the treatment followed, and his subsequent cure, is *the truth, the whole truth, and nothing but the truth*. Now, I hold that there can be no cure in any disease, unless the drug administered is homeopathically related to the disease

—in short, that every cure made is a *homeopathic* cure. Now, where does the homeopathic relationship come in in the case above quoted? It was a case of rheumatism in one of the elbows (which elbow is not stated), and the symptoms were:—“He was unable to raise his arm, which was terribly swollen; he was in dreadful pain, could not sleep, and was almost crazy.” The arm was *terribly swollen*. In the proving of *Apis mellifica* one of the most prominent of the symptoms is rapid and *extreme swelling*. Another very prominent symptom, although not mentioned by Mr. Taylor, undoubtedly was present in the case that he quotes, namely “high coloured and scanty urine.” *Apis mellifica* is a prime remedy in urinary difficulties, especially in such cases where there is great difficulty in passing water, amounting even to complete retention. It will thus be seen by the above that the treatment of rheumatism by bee-stings is a homeopathic one. Yet, at the same time, I do not think it necessary for any patient to submit, to say the least of it, to such an unpleasant operation. There is not only the unpleasantness, but also a certain amount of danger connected with the treatment. It is not always an easy task to provide against accidents, and there have undoubtedly been instances, notwithstanding what some may say to the contrary, in which the sting of even one single bee in a vital part (the temple, for instance) has had fatal results. I certainly do not wish to alarm or to discourage the advocates of the “bee-sting treatment” in rheumatism in their laudable endeavour to cure that obstinate and painful disease, but I desire to impress upon them that the liquid extracted poison of *Apis mellifica* injected by the insect itself into the affected part is not the *only remedy* for the effectual treatment of rheumatism, and that there are other means, less risky, and without pain or danger, to accomplish that purpose. In THE HOMEOPATHIC WORLD of December, 1893, I first published and revealed to suffering humanity and to the medical practitioners of the homeopathic school in general, my proving of *Stellaria media*, and, again, in the May number of last year, I gave some further information as to the medicinal properties peculiar to the drug in reply to a letter from one of our correspondents. *Stellaria media* is indicated in almost every case of rheumatism (at least 95 per cent., and I dare say the remaining five would be

greatly benefited by its use), and, in my opinion, is far superior to *Rhus toxicodendron*, or to any other remedy yet discovered for the treatment of that complaint, even including Mr. Taylor's own heroic treatment with bee-stings. Since the publication of my proving of the new drug in THE HOMEOPATHIC WORLD twelve months ago, I have received numerous highly gratifying proofs of the wonderful and almost miraculous curative properties of the drug in the treatment of rheumatism. Not only by practical and personal experience in the treatment of cases close at home has the proof of its potent power been established, but I have received letters from various parts of the world, testifying as to the great success achieved by the new drug in overcoming rheumatic complaints. If ever a proof was wanting as to the truth of the law of similars, it would be at once supplied by the new remedy—*Stellaria media*. It covers all the most prominent symptoms of rheumatism—even the dreadful pain, the soreness of the parts to the touch, the stiffness of the joints, and the aggravation of the symptoms on the slightest motion. *Similia similibus curantur!* We need no greater proofs that homeopathy is built on sound, undeniable, everyday facts. Such a foundation cannot be shaken; because it is based upon truth. *Stellaria media* in the treatment of rheumatism has more than justified my highest expectations, and to suffering humanity and the medical profession in general I would strongly recommend its use in the treatment of that often obstinate and inveterate disease, fully confident that it will give entire satisfaction, both to the patient and to the physician. I would advise the internal use of the drug in the 2x dilution, using the ϕ tincture externally at the same time in the form of the lotion (30 to 60 m to a tumbler of water), the liniment (30 to 40 m to ζj of pure olive oil), or the ointment (30 m to ζj of pure lard). By adopting this plan the cure is more speedily effected, and more effectually than if the drug is only used either internally or externally. The fact that *Stellaria media* has proved effectual in cases unaffected by the administration of every other drug proves it to be a most valuable addition to our *materia medica*, and a remedy that is certain to be most extensively used in everyday practice.

It is only a few days back that a neighbour of mine was seized with severe pains in the small of the back (in the

region of the kidneys), which extended downwards through both ureters. Her husband being a member of a certain lodge, she, of course, paid a visit to the lodge doctor—a firm believer in the old heroic drugging system of medicine. He diagnosed the case as one of rheumatism, told her to *apply a mustard-plaster over the seat of pain*, and wrote out the following prescription:—

℞ *Pot. Iodid.* ʒij
Pot. Bicarb. ʒiv
Fr. Aurantii Cort. ʒvj
Ad. Aqua dest. ʒvii]

One dessertspoonful to be taken in a little water three times a day.

As far as the diagnosis of the case was concerned, I, for one, certainly cannot agree with our allopathic friend, as the symptoms present pointed more strongly to kidney trouble than to rheumatism, especially as the urine was not high-coloured and scanty, but, on the contrary, was profuse, pale, and watery; also, the pain extending into the ureters was, in my opinion, a further indication as to what the complaint really was. A chill caught across the kidneys often produces the above symptoms, and such it undoubtedly was. Under homeopathic treatment these symptoms would probably soon have disappeared through the alternate administration of *Aconitum napellus* 1x and *Acidum phosphoricum* 3x. But let us imagine that the case really was one of rheumatism. Was the treatment rational? The prescription itself is composed of three active ingredients, viz., *Potassium-iodidum*, *Potassium-bicarbonicum*, and *Tincture of Aurantii cortex*. The last named, according to allopathic logic, is inactive, and is merely used as a flavouring agent, or just to impart an agreeable flavour to otherwise disagreeable or tasteless mixtures. So far as the *inactive* properties (according to the old school reasoning) of the drug are concerned, they are somewhat of the same nature and degree as another *inactive* ingredient used by them in colouring mixtures, namely *Coccus cacti*, the fallacy of which I fully exposed in the April number of THE HOMEOPATHIC WORLD of last year. Where the advantage may lie in flavouring *tasteless* mixtures it is hard for me to say. Perhaps, as allopathic patients are so used to swallowing disagreeable and nauseous drugs and compounds, tasteless doses might

cause them to imagine that the mixture was no mixture at all, but simply water. But, to return to the prescription, to say the least of it, a good drug has been spoiled, through the addition of two other drugs. I allude to *Potassium-iodidum*, or *Kali-hydriodicum*, as we generally call it. It has in the proving, amongst other symptoms, the following:—"Excruciating pains, produced by the least variation or irregularity of motion; inverted hands; swollen stiffened, almost immovable joints; the slightest attempt to rise occasions torture in the lumbar vertebræ; chronic induration and enlargement of the glandular structures." The pure action of this otherwise valuable drug is decidedly interfered with through the addition of the two others. It is thus that a large number of some of our most prominent and important drugs are "smuggled" by the allopathic school, and afterwards spoiled through the addition of a conglomeration of other drugs. I certainly do not object, for the sake of suffering humanity, to allopaths making use of our remedies, but I do most emphatically protest against their adding other drugs thereto, instead of using the one drug, pure and simple. The concluding advice of the physician to go and put a mustard-plaster over the seat of pain at once places the *allopathic* nature of the treatment beyond the shadow of a doubt. Years of experience in such a mode of treatment certainly should have taught him the folly of prescribing mustard-plasters in combating rheumatism. But, then, it is well known that the members of the old school of treatment are blind to and shut their eyes at past failures.

In conclusion I may add that this *learned* doctor's treatment had no effect whatever on his patient, at least so far as the cure of the complaint was concerned, and, perhaps, even as I am penning these lines now, he is still considering what new conglomeration of drugs will be likely to meet her case. A lady made the remark to me to-day, that "while the doctor is considering the case, the patient dies," and there certainly is a vast amount of truth contained in these words. Had the case above quoted truly been one of rheumatism, it could readily have been cured by the administration of one single drug, the great homeopathic remedy—*Stellaria media*.

Its power, most potent,
To those who it need,
Is second to none,
Though *only a weed!*

INFLUENZA: ITS CAUSE, PREVENTION, AND CURE.

By ALFRED HEATH, M.D., F.L.S.

ONE of the many all-engrossing questions of the day is, What is influenza, and what is its cause? A disease that is credited with having carried off, in the last five or six years, tens of thousands of human lives, may well excite the liveliest dread, and a desire for knowledge as to its nature. Medical men of the old school, at any rate, seem to be in ignorance or doubt about it; but instead of following the well-known saying, "When in doubt do nothing," they proceed in the most heroic way to do a very great deal, not in the way of combating the trouble and curing the disease, but by giving large doses of powerful medicines that very soon kill the patients. Take as an example the treatment first adopted and still largely followed—I refer to the use of *Ammoniated Quinine*, a powerful stimulating tonic. A person is taken with influenza, there is profound prostration, both mental and physical, showing that the cerebro-spinal nervous system is the principal seat of the trouble. *Quinine* acts most powerfully on these nerve centres, stimulating them to increased action; the patient feels better, but the disease is not in the least affected by this treatment, so that after the exalted state produced by the drug, comes depression, great or little, according to the dose given and the violence of the attack; another dose is given with the same result, until after the repeated excitement or stimulation of the nervous system, it becomes weakened, because the treatment not being curative, no good effect has taken place, the disease not only going on but increasing as the patient gets weaker from the stimulation caused by drugging; then we have to reckon with a double depression, the depression caused by the *disease*, and the depression produced by the *drug*, and with this double load, nature (except in the more robust) is unable to react, and the patient dies, *killed by the drugging more than by the disease*. This applies to many other diseases besides influenza, and often when death does not ensue, a long lasting convalescence is the result, lasting often for years, followed by other diseases of an organic nature, such as phthisis, from which the patient generally dies.

The dangerous practice of giving *powerful* drugs as a preventive cannot be too strongly condemned, because it upsets the balance of the nervous system, by first exalting,

and then leaving it depressed, and in the *depressed* state, after drugs as well as vital depression without the use of drugs, the disease seizes the person.

The predisposing cause of influenza is without doubt *psora*.* It is born of psora, nourished in psora, and all the eminently bad cases show a strong psoric taint or condition; its sequelæ are diseases that are considered eminently psoric. One common sequela, consumption, is always of psoric origin. There is no microbe, unless it be from some disease such as phthisis, aroused by the influenza. I am of opinion that influenza partakes more of the nature of a miasmatic disease like ague, but of an infectious character; but I would say here, infection can only affect those who are susceptible, no matter what the disease. The germs of influenza—if I may be allowed the term—take root in people who are in a weak state from various causes (*i.e.*, below par)—it may be from want of proper nourishment or from unhealthy surroundings (a plant under unnatural conditions is attacked by parasites, both vegetable and animal), from want of oxygen, from the depressing effects of other diseases; it always attacks the weak spots in a person's constitution, as shown by its various symptoms in different people. Take away the weak spot, psora, or conditions arising from psora, and there can be no influenza (this is often the case also in other diseases of an epidemic character); but influenza always produces prostration or depression of vital power, *that is its main feature*, and this symptom is eminently a psoric condition. One of the most fruitful *exciting* causes is the depressing effects of large doses of drugs, taken as a preventive (they first raise and then depress the nerve power), such as *Antipyrin*, *Quinine*, and especially *Ammoniated Quinine*. These drugs have the power of producing feverish conditions in the healthy, and in the doses given they must necessarily produce great alterations of nerve balance. In the fevers of hot countries, ague, &c., I believe one of the chief predisposing causes is the eating salt food, and salt in large quantities. Salt produces a large number of fever symptoms—such as violent chills, and heats of an intermittent character, chills

* By psora I mean, as I believe did Hahnemann, all those constitutional conditions, or states produced by the constant suppression of disease (especially but not alone, diseases of the skin, which are only the external manifestation of constitutional disease), which he calls a monstrous miasm, excepting, of course, sycosis and syphilis.

and heat at various times of the day, profuse perspirations day and night; it very much affects the liver and the spleen. As a homeopathic remedy it is known as *Natrum Muriaticum* (Chloride of Sodium), and when potentised it is curative of some of the worst forms of intermittent fever, with enlargement of liver and spleen.

Pneumonia (inflammation of the lungs), a common condition in persons suffering from influenza, is a disease that affects people in a state of lowered vitality, and anything that causes *obstruction* to respiration, and consequently to the proper purification of the blood, immediately lowers the resistive power of the system. The impure blood, brought back to the heart through the veins, is thrown into the lungs to bring it into contact with the oxygen of the air; through the capillaries the air purifies it and makes it again fit for distribution through the arteries, for the nourishment of the body; therefore anything that prevents this, not only prevents proper nourishment, but also produces blood poisoning, thus causing a typhoid state. Remedies like *Quinine*, given in large doses during chest troubles, often cause engorgement of the finer tubes and capillaries. The bronchial tubes become full of phlegm (congested); the cough set up is an *effort of nature* to remove this accumulation, then medicines such as *Morphia*, *Squills*, &c., are given in material doses to stop the cough. Every one must see that this kind of treatment will be fatal for the reasons I have stated. The lungs are not simply for breathing; but that in the act of breathing oxygen is inhaled, which purifies the blood. The inhaling of *poisonous* vapour or air kills by preventing oxidation of the blood. No doubt many have seen cases, as I have, where the cough has been entirely stopped by drugs, although an enormous quantity of phlegm could be heard on the chest; the patient has died asphyxiated. I believe simply because the cough having been checked, the patient could not get rid of the block in the air vessels, the patient being smothered, and the blood poisoned because he had not the power to expectorate, the accumulated mucus preventing the entrance of oxygen into the lungs. I believe that many forms of blood poisoning, both by *inoculating* the human system with animal poisons or animal diseases, for the prevention of similar diseases, as well as excessive drugging, both internally and externally, acting on the psoric state, cause a further *suppression* of disease, and

consequently a greater complication and production of disease conditions, adding to existing evils, and preventing healthy reaction is *the greatest cause of epidemic disease*. Generally during epidemics of disease, such as cholera, small-pox, scarlet fever, &c., the general or *whole mortality* during these epidemics is *lower than at other times*; * but in this epidemic of influenza it is *higher*, and the cause, I have no doubt, is that the law of vicarious mortality is upset by the drugging, and I have no doubt that the great mortality in influenza is not from the disease but from the effects of remedies given.

Eradicate or modify the psoric state by constitutional treatment, and you will get rid of epidemics, for a healthy system is not susceptible to these diseases. One of the best preventives to influenza, as well as disease in general, is keeping up the nervous energy with nourishing food frequently given, and avoidance as much as possible of over-fatigue, and all stimulants, both in *drink* and *medicine*. Those who are not in the habit of taking stimulants should leave them absolutely alone. Simple nourishment constantly taken is one of the best guards against influenza. The best prophylactic in medicine would, of course, be the medicine in small doses that would produce in larger doses the same symptoms as the patient would have when attacked; but as this cannot be determined beforehand, I think the best preventive is *Psorinum* in the 30th or 200th potency. It meets and modifies the predisposing cause of the disease; if that, as I have said, can be relieved, no disease can come, as there must be a predisposing as well as an exciting cause in every disease. Without predispositions no exciting cause can take effect, and no exciting cause is sufficient without a disposition. *Psorinum* is one of the best remedies for the after effects of influenza, especially the *profound prostration* and for the obstinate pains that often persist, and which few other remedies relieve. In those cases that never seem to get quite well after influenza this medicine may be given with advantage, proving the similarity of its action and that it acts on the part affected, but it is not the remedy for prostration arising from drugs. In the treatment of influenza it is absolutely necessary that the nerve power be not further depressed. For the reasons I have given strong drugs should be avoided; rest in bed in severe cases is best, in slight

* See note at end of this paper on vicarious mortality.

cases the warmth indoors and constant *nourishment* is the proper course to pursue. The medicine must depend entirely on the symptoms present; neither this or any other disease can be treated by name. The homeopathic plan is to treat the patient's constitutional state with a medicine that has the power of producing in a healthy person a condition most like it; but as the disease varies in different people, so different medicines are needed. The principal medicines that produce conditions similar to some of the forms of influenza are *Acon.*, *Arsen.*, *Bapt.*, *Bell.*, *Bry.*, *Cimicif.*, *Eupat. Perf.*, *Gelsem.*, *Kalmia*, *Psor.*, *Puls.*, *Rhus*. A mistake often made is to give *Aconite* for every feverish condition—*fever is always best met with that drug which covers the whole symptoms*. Here it may be noticed what an advantage the homeopath has in knowing the sphere of action of his drugs, previously determined by their effects on healthy people. All the medicines I have mentioned are given in certain states of fever; the prostration is best met by following the same rule—such medicines as *Baptisia*, *Arsen.*, *Gelsem.* give marked prostration; but the other symptoms must be covered by the remedy, or failure will follow. The only successful plan is to give a remedy that has been found to produce in a healthy person symptoms like those the patient has.

VICARIOUS MORTALITY TAKEN FROM "VITAL STATISTICS."

In 1829 there died of small-pox in Sweden.....	53	The mortality from all causes in 1829 was...	82,619
In 1833 there died of small-pox.....	1,145	The mortality from all causes in 1833 fell to.	63,947

In London in the four years preceding the vaccine practice:—

	Small-pox deaths.	All causes, including small-pox.
1795.....	1,040	21,179
1796.....	3,548	19,288
1797.....	522	17,014
1798.....	2,237	18,155
Total.....	7,347	Total..... 75,636

Four years during the vaccine practice:—

	Small-pox deaths.	All causes.
1799.....	1,111	18,134
1800.....	2,409	23,068
1801.....	1,461	19,374
1802.....	1,579	19,379
Total.....	6,560	Total..... 79,955

Instead of the mortality being lessened it increased by more than 4,000.

In 1849 there died in England of cholera and diarrhea, 71,106.

In 1847-48, the mortality from all causes was... 819,510

In 1849-50, the cholera year 809,441

10,069

The deaths in England being 10,000 less when cholera killed 71,000 people.

In 1866-67, died of cholera and diarrhea, 52,331.

In 1864-65, mortality from all causes. 986,440

In 1866-67 " " " 971,762

14,678

When cholera killed 52,000, the whole mortality was nearly 15,000 less.

When the plague swept off 15,000 persons, the general mortality was nearly 600 less than the following year when there was no plague.

Vaccination was made compulsory by Act of Parliament in the year 1853, again in 1867, and more stringently in 1871.

Between 1853 and 1880 we had three epidemics of small-pox.

	Died in England from small-pox.
1st epidemic, 1857-59	14,244
2nd " 1863-65	20,059
3rd " 1870-72	44,840

Increase of population from 1st to 2nd epidemic 7 per cent.

" " small-pox in the same period nearly 50 "

" " population from 2nd to 3rd epidemic 10 "

" " small-pox in the same period..... 120 "

By this it appears that as vaccination increased, small-pox deaths multiplied.

Out of every hundred small-pox cases admitted into small-pox hospitals, 84 to 90 of them are found to have been vaccinated.

THE ACTION OF *CANNABIS INDICA* ON THE URINARY ORGANS.

By FREDERICK KOPP, Greenwich, N.S.W.

Cannabis Indica, or Indian Hemp, as it is commonly known by, is an annual, indigenous to Northern India and Persia. It has a green, angular, branched, and erect stem, and has its leaves either alternate or opposite. These leaves are composed of long and narrow leaflets, sharp at the end and five in number, which spread out from the end of long and lax leaf stalks. The flowers, which are in axillary

branches, are of two kinds, the male and the female; the male flowers are leafless at their base and drooping; the female flowers are the reverse, namely, leafy at their base, and stand erect. *Cannabis Indica* is generally considered to be botanically the same as *Cannabis sativa*. Yet, although the two varieties, if such they may be called, agree together externally, their medicinal properties are entirely different. It is possible that this difference is caused by change of climate, soil, and mode of cultivation. The whole plant has active medicinal properties; but the resin which exhudes from the leaves and branches is, undoubtedly, the most potent. The dried flowering tops of the female plant, from which the resin has not been taken, is called "hashish" or "gunjah" by the natives. It is smoked by them in the same way as tobacco, a small quantity of which is generally mixed with the "hashish." Its first effect when taken in this way is one of intense exhilaration, which almost amounts to delirium. The second stage is one of dreamy enjoyment, and the third one of stupor, so intense as to amount almost to a state of catalepsy.

The officinal preparations are the ϕ tincture, made from the entire plant, cut during inflorescence, with strong alcohol, and the various dilutions prepared from this tincture.

That *Cannabis Indica* has a most decided effect upon the urinary organs there can be no doubt, as the following symptoms, developed during a recent proving, do most emphatically show:—

Weary, dragging, and aching pains in both kidneys, very constant, preventing sleep. When laughing, a pain is felt through the kidneys. Burning sensation in both kidneys. Sharp and severe lancinating pains through the urethra, very severe, sending a thrill to the head. Profuse flow of urine, perfectly colourless. The urine has to be passed very frequently, but in very small quantities. The last drops have often to be forced out with the hand. Dribbling of the urine after the flow has ceased. Severe urging and desire to urinate, but cannot. Some considerable time elapses before the urine will flow. Urination very frequent, with burning pain in the urethra, most prominent in the evening. Great straining and urging to urinate. Constant urging, even after urination. Severe burning and pain during urination. Great uneasiness, accompanied with

constant calls to urinate, and a burning sensation in the urethra and penis. Scalding and burning before, during, and after urinating. Severe stinging pain, almost unbearable, before, during, and after urinating. While urinating, an intense burning is felt at the orifice of the urethra, which continues even after the flow has ceased. Peculiar feeling in the urethra as if there were a discharge of a gonorrhœal character, a glairy white mucus escaping on the glans penis being squeezed. Severe itching of the glans penis. Burning and itching of the scrotum.

Cannabis Indica causes primarily a profuse flow of colourless urine, and, secondarily, a complete suspension of the urine. It is of great value in those urinary troubles in which there is great urging and straining while urinating, with a very scanty flow of the urine. In these cases there is generally a stinging pain felt throughout the urethra, accompanied with an intense burning and scalding sensation before, during, and after urinating. Under its action the bladder is placed in a state of debility, and even paralysis, and the whole tract of the urethra becomes highly inflamed. It is, therefore, a very valuable remedy in those cases of debility of the bladder which are accompanied with a paraplegic state of the lower limbs. To prove beneficial it is, of course, necessary to continue its administration for some months, and at regular intervals. It is also more effectual in these cases if *Nux vomica* of a similar potency is given in alternation with the *Cannabis Indica*. Constipation, in conjunction with the urinary troubles is an additional indication for *Cannabis Indica*, a prominent symptom in the proving being a sensation as if a part of the urethra and the anus were filled up by a hard round body, accompanied with costiveness. The aching developed in the kidneys is very severe, aggravated at night, and preventing sleep.

As a reliable remedy in cases affecting the urinary organs, having present either one or several of the symptoms described above in the proving, *Cannabis Indica* cannot be too highly recommended, and numerous cases effectually treated fully bear out this statement.

Cannabis Indica is analogous to those three great urinary remedies, namely, *Cantharides*, *Uva ursi*, and *Terebinthina*.

MATERIA MEDICA.

NUX MOSCHATA.

THE following case of poisoning by nutmegs was reported by T. G. Simpson, L.R.C.P. Edin., in the *Lancet* of January 19th :—

Having been in practice a great number of years without seeing, or even hearing, of a similar case, I think the following particulars of a case I had recently under my care may possibly interest some of the readers of the *Lancet*.

On Sunday morning, December 9, 1894, during my absence, my assistant, Mr. E. Gibbs Smith, was called to see a woman twenty-six years of age. His report was as follows :—“ I found the patient lying upon the bed in a drowsy condition and very delirious, the delirium taking the form of confusion and mistaking one person for another. There were fairly lucid intervals. She complained of a sensation of great tightness across the chest, of vertigo and faintness upon attempting to stand. She had vomited several times, but unfortunately I was unable to see the vomited matter. The pulse was 75 per minute and rather feeble, as was also the heart's action. The pupils were normal. Inquiries of a person in the house elucidated the fact that the patient, a strong, healthy woman, had, being a week over her menstrual period, taken two nutmegs, bruised, in a small quantity of gin. I ordered her to be kept in bed and to be given a little strong coffee with a dessertspoonful of brandy in it every half-hour. I also prescribed the following mixture every four hours : bromide of potassium, carbonate of ammonia, bicarbonate of soda, spirit of cajuput, and chloroform water.” I saw the patient myself in the afternoon, and found her condition considerably improved, but still showing the symptoms described. I continued the same treatment, and the next day she was very much better, but still had some vertigo and was very weak. I discontinued the coffee and brandy, but kept on with the medicine, and by the following day she was able to get up, though still weak. The case has gone on favourably since. I may add that the nutmegs had no effect whatever in producing miscarriage.

Hackney Road, N.E.

CEANOTHUS IN HEADACHE.

Dr. JOHN L. FERSON, of Pittsburgh, reports in current volume of *Pennsylvania Transactions* as follows :—On July 19, 1892, Mrs. C., a short, stout woman, of florid complexion and even tem-

perament, called and made complaint as follows: Constant dull ache in occiput and forehead; if it does stop for a time, which happens occasionally, it begins in the occiput and appears in the forehead; always worse in the occiput, sometimes becoming very severe; it feels heavy, as if the head must fall back; too heavy to hold up; ameliorated in cool, open air, when lying down, and by pressing firmly front and back, or tying tightly; she can go to sleep easily in spite of headache, and sleep well, but finds the head aching just the same on awaking; face and head burn at odd times an hour or so at a time, but the face does not flush; relieved in cold air; from 9 a.m. till after dinner each day hands tremble continuously, and if she walks the knees feel weak, as if they would give way. Shortly after dinner these symptoms pass off, to reappear next morning. I found the spleen enlarged and tender, with dull, aching, smarting, burning pain. This lady is the mother of three healthy children, and has always herself enjoyed perfect health. The above symptoms have been present for several weeks, gradually increasing in severity, and constituted the sum total of her complaint. After taking her history, I found I had no time then to make a careful prescription, and the symptoms picture presented were those with which I was not familiar, and was, therefore, unable to prescribe for without study; so I did what I presume many of us do at times—I did a slovenly piece of work, and gave her *Ceanothus*, five drops every four hours. The reputed value of this drug in the cure of diseased conditions of the spleen was the sole basis upon which it was given, and, contrary to one's usual experience in such slipshod work, the result was gratifying.—*Medical Argus*.

INSTITUTIONS.

SOCIETY OF TRAINED MASSEUSES.

WE have much pleasure in calling attention to the formation of a new society which promises to be of great importance and utility, both to the public and to the general body of Masseuses. The following circular will show the objects the promoters of the society have in view.

THE SOCIETY OF TRAINED MASSEUSES TRAINED NURSES' CLUB,

12, BUCKINGHAM STREET, STRAND, W.C.

The Society of Trained Masseuses has been formed for the purpose of improving the training of, and organising an inde-

pendent examination for, competent Masseuses. It is hoped this may establish a more uniform standard of proficiency and qualification.

The Council holds periodical examinations for candidates, who are required to produce satisfactory evidence of training and moral character. Candidates will be examined in the Theory and Practice of Massage by two examiners other than their own instructors. Notice of the examinations will be given in *Nursing Notes*.

Successful candidates, after signing the required undertaking, will receive the formal certificate of the Society, and will then be entitled to have their names placed on its roll.

Further particulars can be obtained on application to Mrs. Arthur, Hon. Sec., Society Trained Masseuses, at the above address.

THE COUNCIL.—Miss Buckworth, Miss Griffiths, Miss Manley, Miss G. Manley, Miss Molony, Mrs. Palmer, Miss Robinson; Mrs. Arthur, and a Member of the Council Trained Nurses' Club, *ex-officio*, Hon. Secretaries.

RULES OF THE SOCIETY (signed by each Successful Candidate).—I. No Massage to be undertaken except under Medical direction. No General Massage for *Men* to be undertaken. Occasional exceptions may be made at a Doctor's special request for urgent or nursing cases. II. No Advertising permitted in any but strictly Professional Papers. III. No sale of Drugs to Patients allowed.

BIRMINGHAM AND MIDLAND HOMEOPATHIC HOSPITAL.

The annual meeting of the Governors of the Birmingham and Midland Homeopathic Hospital was held on Thursday afternoon, March 28th, at the Council House. Alderman Johnson presided, and among those present were Lieutenant-General Phelps, Dr. Gibbs Blake, Dr. Brown (house surgeon), Dr. Huxley, Messrs. W. Charlton, A. Harris, E. L. Tyndall, Garner, T. W. Ryland, P. W. Walker (secretary), &c. Apologies for non-attendance were received from Lord Calthorpe, Right Hon. Jesse Collings, M.P., and others, the former expressing regret that there had been a reduction in the subscription list, and enclosing a donation of £25 to make up the deficiency.

The Secretary read the report, which stated that the number of in-patients treated during the year was 242, against 167 in the previous year; the out-patients numbered 2,467, and the attendances 14,082, as compared with 2,401 patients and 15,223 attendances in the preceding year; the number of home-

patients treated was 410, the visits made by the house surgeon totalling 1,244, as against 444 patients and 1,628 visits in 1893. There had been a gratifying increase in the number of patients treated in the wards, contributed to by the adoption by the Medical Board in September, 1893, of a plan conceding to the junior members of the honorary staff the privilege of sending in, under their own treatment, paying patients. Of the patients admitted in 1893, 95 were free and 72 paying; while in 1894, 153 were free and 89 were paying. The total amount contributed in 1893 was £114 14s. 4d., and in 1894, £168 6s. Several changes in the staff of nurses and servants had been made, and for the first time, the building in the rear of the hospital, erected for the treatment of infectious cases, but never used for that purpose, had been furnished as a Nurses' Home, and secured for the nurses a comfortable retreat during their time off duty. The training of probationer nurses had from time to time engaged the attention of the committee, and they trusted that the measures which had now been adopted would meet with success. In addition to practical teaching in the wards, a class was held weekly, taken alternately by the house-surgeon and lady superintendent, who gave to the nurses lectures on special subjects, illustrated by diagrams. At the end of their term, probationers so trained in the hospital would receive certificates of proficiency on passing the examinations on medical and surgical nursing, which had been instituted by the honorary medical officers. The accounts for the year showed an increase of expenditure, compared with 1893, of £185 15s. 9d., of which about one-half was attributable to the increased number of in-patients. Consequent upon the receipt, in August last, of Mr. Thomas Avery's legacy of £2,000, there had been a saving of £14 16s. 2d. in bank interest, which had been growing in recent years in consequence of increase of debt. The accounts, which showed that the annual subscriptions had fallen off to the extent of £22 13s. 6d., were credited with £50, a special donation from the Muntz Trust, and £25, being one-fourth of a legacy of £100 left to the hospital by the late Miss Martineau. The deficiency for the year amounted to £172 17s. 9d., which, added to £259 16s. 3d. brought forward from 1893, made a total adverse balance of £1,132 14s. The committee thought it desirable to appropriate towards the reduction of that amount one moiety of the late Mr. Avery's legacy, and to carry forward the balance, £132 14s., to the debit of next account. The cost of furniture, repairs, &c., amounting to £177 11s. 7d., had contributed largely to the deficiency of the past year. The amount of the expenditure on the Nurses' Home would have been much larger but for special gifts towards the furnishing received from members of the ladies' committee, and other friends.

The Chairman, in moving the adoption of the report, said the hospital was doing a great amount of good with very small means, and in proportion to its means the success of its operations was not exceeded by that of any other hospital or charitable institution in the city. (Hear, hear.) He regretted to find there was a diminution in the subscription list, and he trusted that during the coming year they would secure a large number of new subscribers.

Lieutenant-General Phelps seconded the resolution, observing that since the fundamental change in the method of admitting in-patients was made, the subscriptions had fallen off nearly one half. That was very discouraging, but he hoped there would be an improvement in the financial position of the hospital during the ensuing year. The resolution was carried unanimously.

Lord Calthorpe was re-elected president, and Mr. R. L. Impey treasurer. The General Committee were appointed. The officers were thanked for their services, and the Wardrobe and Relief Committees were elected. The meeting then closed with a vote of thanks to Alderman Johnson for presiding.—*Birmingham Daily Post*.

OXFORD HOMEOPATHIC MEDICAL DISPENSARY, 37, HYTHE BRIDGE STREET.

We have received the Twenty-Second Annual Report of the above Institution, for the year 1894, from which we extract the following:—

“The year ending December 31, 1894, has been an exceptional period. During the first quarter, our late physician, Dr. Guinness, was again laid aside with illness, and was unable to carry on the work.

“The summer was approaching, when the Committee secured the services of Dr. McLachlan. The work, however, of the Dispensary has so far succeeded that not only has lost ground been covered, but an actual increase of 123 patients is recorded.

“Considering the difficulties that attend a transition period in any institution, especially a Dispensary, it is with satisfaction that the Committee recognise the success that has attended Dr. McLachlan's labours during the past nine months.

REPORT OF THE PHYSICIAN, DR. JOHN MCLACHLAN.

“The number of applications for Medical advice during the past year has been 780, this brings up the number since the opening of the Dispensary to 27,060; the deaths were 3.

“The number of visits made to patients' own houses has been about 180. In many cases where patients could not procure tickets, visits have been made without them; further, in these hard times, some poor patients have not been able to pay even the small Dispensary fee of 6d., but none have been refused or sent away unserved on that account. 86 children have been vaccinated with pure calf lymph, with almost invariable success, and always without any ill-effects.”

CROYDON HOMEOPATHIC DISPENSARY.

MEDICAL REPORT FOR 1894.

THE Dispensary was open four mornings in the week as usual. The number of patients entered in the books during the year was 1589. The number of attendances was 5,000.

This is exclusive of Home visits, and shows a decided increase in the usefulness of the Institution.

Medical { T. E. PURDOM, M.D., C.M., L.R.C.P. & S.
Officers { J. DELEFINE, M.B., C.M.

REVIEWS.

DR. BURNETT ON GOUT.*

“For the successful treatment of gout,” says Dr. Burnett, “it is necessary to have a clear idea of what constitutes its various parts; notably must we differentiate between its pre-deposit and its post-deposit symptoms, for much of the want of success in its cure is due to a mixing up of the two sets of symptoms.” In the work before us Dr. Burnett shows how he distinguishes between these two stages, and how he deals with each. In this the latest product of his pen, Dr. Burnett is as eminently readable, fresh, and original as ever. His discovery of the powers of *Urtica urens* in acute gout is an example of his keen powers of observation, and we have no doubt it will be thankfully welcomed by the homeopathic profession. A considerable portion of the book is taken up with a description of the powers of this remedy, with illustrations of its action. We have tested it in practice in other affections on indications supplied by Dr. Burnett, and are convinced that it is destined to take a much higher place in the homeopathic materia medica than has yet been accorded to it. Another remedy Dr. Burnett mentions is *Spiritus Glandium Quercus*, in which he has found a valuable antidote to the effects of alcohol.

On the gouty diathesis, Dr. Burnett has much that is interesting and practical to say. His exposure of the fallacy of the allopathic method of neutralising the acidity of gout by the constant administration of alkalis is particularly refreshing. His own notion of what gout is he puts as follows: “The gouty product is the uric smoke and soot of the human economy.” But this does not take us very far. For the answer to the

* *Gout and its Cure.* By J. Compton Burnett, M.D. London: James Epps & Co., Ltd., 170, Piccadilly, and 48, Threadneedle Street. 1895. Cloth, 2s. 6d.

question why there should be this accumulation of smoke and soot Dr. Burnett refers us to the individual organs at fault, and finally to Hahnemann's Sycosis as the parent of it all. This is new to us, and the evidence brought forward to establish the hypothesis is very important. In our experience *Psora* is the miasm most frequently found to be the *causa causans* of gout; but there are doubtless many factors capable of bringing about the "smoke and soot" accumulations, and Dr. Burnett has shown that Sycosis at any rate may be one.

GOODNO'S PRACTICE OF MEDICINE.*

In this well-printed portly volume of 960 pages we have the first part of a text-book of general medicine. In his short preface, Dr. Goodno says he has endeavoured to write from a thoroughly practical standpoint, and he goes on:

"That there is a place in homeopathic literature for such a treatise will, it is believed, be generally admitted. In the therapeutic sections the aim has been to consider the relationship of medicines to disease conditions, especially from the supreme position of clinical experience, which must always prove the ultimate test of the value of any remedy. . . . The sections upon therapeutics contained in a work upon the practice of medicine are not of sufficient magnitude to permit of the inclusion of extensive discussions in special therapeutics or the introduction of the *materia medica* bodily."

In regard to the descriptive part of the work, which constitutes nine-tenths of the whole, we cannot praise it too highly. It is clearly and conscientiously done, and any one who wishes to post himself in all the latest additions to our knowledge of diseases and their manifestations will not be disappointed if he applies to Goodno's *Practice of Medicine*. Both Dr. Goodno and Dr. Clarence Bartlett have done this part of their work admirably.

It will be gathered from the preface that the therapeutic part is dealt with less fully; and also that it is treated more from the pathological than the symptomatic standpoint. And this is what we find. We do not question the value of the former method in many cases. It often happens that a certain pathological change produces a definite group of well marked symptoms which are strongly reproduced in the pathogenetic

* *The Practice of Medicine*. By Wm. C. Goodno, M.D., Professor of Medicine in the Hahnemann Medical College of Philadelphia; Physician to the Hahnemann Hospital. With sections on *Diseases of the Nervous System*, by Clarence Bartlett, M.D., Lecturer on Nervous and Mental Diseases in the Hahnemann Medical College of Philadelphia; Senior Neurologist to the Hahnemann Hospital. Vol. I. *Specific Infectious Diseases and Diseases of the Nervous System*. Philadelphia: Hahnemann Press. London: Homeopathic Publishing Company, 12, Warwick Lane, E.C. 1894. Price, cloth, 30s. net.

effects of one or more medicines; but for accurate prescriptions and the final differentiation of medicines, the "totality of the symptoms" is the only safe guide. We cannot help thinking that something more in this direction might have been accomplished; without seriously adding to the size of the work, as has been already done in works like Raue's *Pathology*. However, practitioners who use the work will have their own way of "spotting the remedy" before they come to it, and will be glad of the additional help of the suggestions they will find in its pages.

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.

DR. SIMPSON, Liverpool. Your paper is unavoidably held over till July.

DR. CLIFTON, Northampton. We are much obliged to you for your communication.

A REMARKABLE CASE FROM PORTUGAL—COUNSEL WANTED.

We have received the following letter which we are happy to publish. If any of our readers can assist Dr. Castro we shall feel obliged by their communicating with us.

"SIR,—A rarely observed case was brought to my notice some days ago, and, not only for this reason, but for the sake of human suffering, I wish to make it reach the knowledge of every one interested in such things. Therefore I hope you will give it a place in THE HOMEOPATHIC WORLD.

"The patient is a man aged 24; his history is as follows. When two years old he had a pain in the big toe of left foot. His father sent to the druggist of his village for any medicine which the druggist might think proper. The child took it, and on a sudden experienced convulsions, anxiety, vomiting, and other troubles; his inferior members lost the power of moving, and the spine became crooked. By some means employed by a physician this curvature was changed, taking a left side position, so that when the man is seated it is hardly perceptible. He can by no means stand on his legs, and has to be carried from one place to another like a child. His left leg is quite motionless, he can execute no movement with it; right leg he can move a little outwards and backwards, and can bend and stretch it a little as well, but it is always in a fixed half-bent condition. Left arm and hand are more affected than the right, their movement being more limited, and are more distorted; of course the right side is also affected, but in a lesser degree. The neck has no defect. All the functions are normal. His mental faculties have not been affected in the least; on the contrary he is intelligent, has learned his own language, and speaks correctly and in a sprightly manner. He is a wine merchant, and for the purpose of his business he often travels

in a car drawn by a horse; and it is this circumstance that has led him to know me. Strangely enough, only the power of locomotion is destroyed; he has no spot in his body insensible to any influence; sensation in his legs is as good as in any other part, both to temperature and to the slightest touch of a hand or any instrument. His breath is very offensive; nothing else can be perceived.

"What may be the *rationale* of such a state? We have to deal with a strong poison as the cause of it, doubtless. But its kind is unknown; the parents of the unhappy man did not care to keep what had remained in the cup for analysis, only, to test the poisonous nature of the medicine, they gave the remaining portion to a dog that in a few minutes was dead. Is it possible to infer what kind of poison it was?

"The poor man, of a rather refined training, as his demeanour seems to indicate, has been for several times under allopathic treatment, always without any advantage for him, and whenever he hears of any one that he thinks capable of doing him good, he never loses the opportunity of having recourse to him. He feels very deeply that he is unable to keep himself at least in a standing position by the aid of crutches, and has earnestly requested me to tell him what opinion I entertain about the possibility of a change in his state."

"This being a case never heard of, to my knowledge, I would feel extremely obliged for knowing what think about it the readers of THE HOMEOPATHIC WORLD, of the profession and lay as well.

"Taking for granted my letter will be printed, please accept the assurance of my gratitude, and believe me, yours truly,

"J. M. FOURECARE CASTRO.

"Alcobaça, Portugal, May 15th."

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.

REMOVAL.

DR. PULLAR, *Denmark Hill*. Dr. Pullar, having succeeded to the practice left vacant by the death of Mr. Harris, has left Bournemouth, and is now located at 111, DENMARK HILL, S.E.

Obituary.

HENRY HARRIS, M.R.C.S.

It is with deep regret that we record the death of Mr. Henry Harris, which occurred suddenly, on April 26th, at his residence, 111, Denmark Hill. Never of robust constitution, Mr. Harris displayed in his life an energy that would have done honour to the strongest.

Latterly, however, his strength had given way under the strain. Under the watchful care and advice of his relative, Dr. Clifton, he had been spending some time at Hastings, where he apparently regained much of his strength. Almost immediately after his return the sudden and fatal collapse occurred, to the deep regret of many friends and colleagues and of the whole community in the midst of which his active life was spent. Dr. Harris was one of those who believed in the forward policy in homeopathy. He was one of the founders of the Homeopathic League, and so long as health and leisure permitted was an active member of the executive committee. We take the following from the *Brixtonian* of May 4th:—

HENRY HARRIS: IN MEMORIAM.

By Dr. THOMPSON HAGUE.

Henry Harris, M.R.C.S., well described by the *Daily Chronicle* as the leader of the Liberal Party in Brixton, died suddenly on Friday, April 26th, and was buried on Tuesday last, in the presence of hundreds of sorrowing friends. No man that I have known had the gift of making friends of all sorts and conditions of men and women as he had. The last time I saw him in public was at an election meeting for the London County Council, when he arrived late after a hard day's work, pale and tired, and the reception he met with was such as a Gladstone might remember with pride. Each political ally looked on him as a friend, not as a mere representative. They called him the "little doctor," the epithet being a term of endearment as well as of description. I cannot define exactly how he made so many friends, but the essence of it is that he was what he seemed to be. Whenever I have had to make a speech in his presence I have kept my eye on him, and have tried—from his utter honesty—to learn my measure of success from the expression on his face. The Arabs say that every man's history is written in his face; if only one can read it! Harris wore his heart upon his sleeve, and every one could read his feelings, for he had nothing to disguise. Utter truthfulness was his leading characteristic.

In spite of the handicap of serious physical disadvantages (he had spinal curvature), he achieved successes, professional, political, and social. He practised homeopathy, and in 1881 was President of the Homeopathic Congress. He took a deep interest in politics, and was President of the Liberal Association in 1889, and President of the Liberal Club. 1892 saw him

returned at the head of the poll to represent, with Mr. Tayler as his colleague, the Progressives of Brixton on the County Council. His politics were a religion with him, and he believed that in attempting as much as one man may to foster and to consolidate the feeling of brotherhood and its responsibilities among his fellow citizens, he was performing one of life's most sacred duties. So it was that he spared not time nor health nor money when engaged in leading the vanguard of the army of Liberalism in Brixton. Thus, too, he became a very effective platform speaker. His lips were not touched with the divine fire of eloquence, yet the very earnestness of his faith inspired his speech with life and vigour. Then a keen sense of humour and a wealth of anecdote prevented his committing the sin of dullness, and so he became one of the most effective, if not one of the most eloquent, of our local political leaders.

GENERAL CORRESPONDENCE.

"READY-MADE" HOMEOPATHIC MEDICINES.

To the Editor of the HOMEOPATHIC WORLD.

SIR,—Sydney is not the only city in Australia exploited by manufacturers of ready-made homeopathic medicines: Brisbane is similarly treated.

The fact is that people's eyes are opening to the superiority of homeopathy, and hence enterprising firms are making it as easy to obtain homeopathic medicines as allopathic. Allopathic chemists recognise the increasing demand for our medicines, and sell and profess to prepare them. Homeopathy, however, must not be blamed for unsatisfactory results following the use of medicines sold as butter or cheese is sold or bought, without any judgment as to the quality or suitability of the article to the case in point. A good doctor and a reliable homeopathic chemist are needed to obviate this. Homeopathy is sometimes damaged by persons who, being able to understand a prescription given by a homeopathic doctor, take it to an allopathic chemist to obtain the medicine, and not securing the benefit expected blame the doctor. This is what happens here sometimes. An allopathic chemist will not—if he can?—prepare our medicines as they must be prepared to be effective. As one said to me recently, "We could not give the time required." Of course not. One must be so imbued with the incomparableness of the end sought with time or labour necessary to secure it as to ignore the latter.

In Brisbane we are just now told by a doctor practising homeopathy, and who has opened a chemist's shop, that medicines imported from England lose their strength in transit, and that therefore he makes all he uses and sells here. The person is regarded as quite a genius by old homeopaths here, who have been using imported medicines for many years with immense satisfaction.

There is another feature, too, in this new chemist's advertisement that is unique from the homeopathic standpoint, viz., "No so-called solutions of insoluble substances." Is not this frank? Have some homeopaths been professing to solve the insoluble? or does not the author of the above know how "so-called" insoluble substances arrive at solution?—Yours,

J. KAY.

Redland Bay, Queensland, Australia.

THE NEW CHANCELLOR OF THE UNIVERSITY OF SYDNEY.

To the Editor of the HOMEOPATHIC WORLD.

SIR,—Sir William C. Windeyer, Kt., LL.D., was elected Chancellor of the University of Sydney on March 11, 1895. Sir William was the first graduate of the University of Sydney, 1856, and an outline of his career may be seen in the *Sydney Morning Herald* of March 12, 1895. He was President of the Sydney Homeopathic Dispensary, which opened on July 1, 1892.

His election as Chancellor of the University of Sydney was proposed by Mr. H. C. Russell, B.A., C.M.G., Government Astronomer. This gentleman first drew my attention to homeopathy in 1875, and presented me with Hempel's "Materia Medica and Therapeutics."

Dr. MacLaurin, M.L.C., seconded the proposed election of Chancellor.

You will doubtless remember that this latter gentleman, while discussing a recent Medical Bill in our Parliament, is reported to have stated that the well-known Clause XXIII. of the Imperial Act was unnecessary in this colony. You will also remember that this same gentleman was chairman of the Medical Defence Association here, whose first bye-law was for the suppression of homeopathy.—Yours in truth and justice,

WM. GEO. WATSON, M.A., M.B., &c.

150, Elizabeth Street, Sydney.

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.

Allinson (T. R.). Medical Essays. Reprinted from *The Weekly Times and Echo*. Vol. 5. Cr. 8vo, pp. 86. (Pitman. 1s.)

Da Costa (John Chalmers). A Manual of Modern Surgery, General and Operative. With 188 illustrs. in the Text and 18 full-page Plates in Colours and Tints, aggregating 276 separate Figures. Cr. 8vo, pp. 802. (Kimpton. Net, 10s.)

Martindale (W.). An Extra Pharmacopœia,

Medical References and a Therapeutic Index of Diseases and Symptoms. By W. Wynn Westcott. 8th ed. 18mo, pp. 520. (H. K. Lewis. 9s.)

Obstetrical Society of London (Transactions of). Edited by W. Duncan and P. Boulton. Vol. 36, 1894. 8vo, pp. 482. (Longmans. 25s.)

Osler (W.). Lectures on the Diagnosis of Abdominal Tumours. 8vo, pp. 190. (Kimpton. Net, 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, 80, *Clarges Street, W.*

All advertisements and business communications to be sent to the "MANAGER" of the Homeopathic Publishing Company, 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. Frederick Kopp, Greenwich, N.S.W.; Dr. Dobson, Bethel, Conn., U.S.A.; Dr. Purdom, Croydon; Dr. Dudgeon, London; Dr. T. Simpson, Waterloo; Dr. Morrisson, London; Dr. Pullar, London; Dr. Castro, Alcobaca, Portugal; Dr. Clifton, Northampton.

BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Chemist and Druggist.—Animals' Friend.—Monthly Hom. Review.—H. Monatsblätter.—Homeopathic Physician.—New Eng. Med. Gazette.—American Homeopathist.—Revue Hom. Belg.—La Homeopatia.—Hom. Recorder.—Family Doctor.—Allg. Hom. Zeit.—Pacifie Coast Journ. of Hom.—Journ. Belge d'Homéopathie.—Zeit. Berl. Ver. Hom. Aert.—Med. Argus.—N. Y. Med. Times.—Maanedskrift f. H.—L'Art Médical.—Med. Century.—Hahnemannian Monthly.—Clinique.—Homeopathic News.—Med. Advance.—Minneapolis Hom. Mag.—Med. Visitor.—Southern Journ. of Hom.—Healthy Life.—Monthly Mag.—Report Croydon Homeopathic Dispensary.—Report Oxford Homeopathic Dispensary.—Public Control of Hospitals. By Harry Roberts.—International Brief.

THE
HOMEOPATHIC WORLD.

JULY 1, 1895.

THE MEDICAL PRESS AND HOMEOPATHY.

WE have learned to regard our contemporary *The Medical Press* as honourably conspicuous among allopathic journals for its independence and liberality. It was therefore with some surprise that we found in its pages in the issue of May 29th an article on homeopathy entitled, "An Exploded Error and a Dead Superstition," full of the usual misconceptions and misrepresentations we are accustomed to find in *The Lancet* and *British Medical Journal*. We agree with *The Medical Press* in one important point, in reference to a letter signed "Heretic," which recently appeared in *The British Medical Journal*, in which the writer attempted to curry favour with allopaths by repudiating the doctrine of infinitesimals. Homeopathy and infinitesimalism are inextricably bound together. But we will make a quotation from the article itself. *The Medical Press* says:—

"We should sympathise with ["Heretic"] in having to endure a share of the ridicule attaching to the vagaries of transcendental homeopaths, but we really cannot see how he can escape unless he definitely recants the fundamental theories upon which homeopathic practice is supposed to be based. Can, for instance, the theory of *similia similibus curantur* be, in the face of modern therapeutic science, truthfully described in other words than 'an exploded error and a dead superstition?' But supposing it can, what is to be said of the theory of infinitesimalism, which it would be a compliment to designate as an error? Is this writer prepared publicly to recant that heresy or is he not? If he does so he is no longer a homeopath, and can no longer recommend himself, truthfully and honestly, to

the class of patients with whom he does business, and who believe in billionths of a drop and snuffs of sugar of milk as therapeutic influences. If, on the other hand, he refuses to publicly recant he must be content to be classed with the Yankee homeo-quacks who claim him as a brother believer and co-practitioner under these tenets. The unvarnished truth is that scientific physicians not only abjure these tenets, but they cannot be brought to believe that homeopaths can possibly believe in them themselves"—

and a great deal more of the same kind of stuff to which we are so well accustomed.

Our contemporary is really very much behind the times. The doctrine of similars is already established beyond the possibility of dispute. Of recent authorities we may name DR. ROUX, one of the heroes of seropathy. "Seropathy," says DR. ROUX—the treatment of diseases by an attenuation of the disease virus—"is really a kind of homeopathy," and he considerably adds, "There is truth in the HAHNEMANN method of curing like by like." DR. LAUDER BRUNTON, in apologising for the large amount of practical homeopathy taught in the "Index of Diseases and Remedies," at the end of his *Pharmacology and Therapeutics*, is obliged to admit that the homeopathic rule is "one of partial application"—"partial" referring to a very large "part," to judge by the said Index. JONATHAN HUTCHINSON saw in the doctrine "the gleams of a fruitful suggestion"; and no wonder, when he can vouch for *Arsenic* producing epithelioma in some cases and curing it in others. We might go on quoting authorities from the present time back to Hippocrates in proof of the acceptance of the homeopathic doctrine, but it is unnecessary. To the open-minded the proof is overwhelming. Those who are determined not to see, nothing can enlighten.

But what about infinitesimals? Here again facts are accumulating daily to prove that a doctrine which our contemporary says is so utterly ridiculous that it would be a "compliment to designate as an error," is, for all that, solid scientific fact; and the beauty of it is, it is allopathic authorities who are busy supplying the proof.

Take the following, extracted from non-homeopathic sources, in recent numbers of *The Medical Visitor*.

Writing in *The New Science Review*, T. W. NUNN says:—

“The domain of the infinitely minute is a broad one. It was lately stated at a scientific meeting that a single drop of ether thrown on the floor of the laboratory would entirely prevent the success of experiments illustrative of certain electrical phenomena. A pin-hole in the door of a photographer’s “developing” room will ruin his freshly-taken plates.”

And the following from *The New York Therapeutic Review* is even more to the point:—

“Nægeli’s first studies revealed the fact that in the presence of the most diluted solutions of nitrate of silver, the filaments of *Spirogyra* could not live. But he soon found that there appeared to be two modes of death. With comparatively strong solutions of the salt, the cellular contents disappeared from the membrane, the bands of chlorophyl changed colour, but not position, and the cell lost its turgescence. With infinitely diluted solutions the chlorophyl spirals separate from the plasma, which remains in place, they become shorter, agglomerate, and the cells maintain their turgescence. Nægeli decided that in the first instance death was due to a chemical action, while in the second it occurred through the action of some hitherto unknown force, which he termed oligodynamia. His results are well described as stupefying. He found that death occurred in three or four minutes in a solution of 1-1,000,000,000,000,000. In such a solution there could not be more than one or two molecules of the salt to each litre. Was the distilled water itself at fault? No, for within it the *Spirogyra* thrived. Corrosive sublimate gave even more pronounced results—the organism died in a solution of 1-1,000,000,000,000,000,000,000,000,000. This could contain but a trillionth of a molecule in a litre. He endeavoured to find what other factors could bring about such an unexpected result. Gases, the nitrous acid which is sometimes found in appreciable amount in the water of Munich, were all incriminated, and other waters were employed, but the results still remained. He then endeavoured to discover what substances could render water toxic, and which ones could impair or remove this toxic or oligodynamic condition. He discovered that many substances, hitherto reputed insoluble in water, such as the metals, gold, silver, copper, iron, mercury, lead, and zinc, by their mere presence in water, possessed this property.”

Did we not well to say that our contemporary is behind

the times? *The Medical Press* should leave the propagation of ignorance and *Odium Medicum* to *The Lancet* and *British Medical Journal*. It is part of the venerable traditions they inherit; but it is not a fitting occupation for an organ professing independence like *The Medical Press*.

INSOMNIA.—*Aconite*.—Sleeplessness of infants from fear; restless and tossing.

Belladonna.—Sleepy, but cannot sleep; frightful dreams, twitches and starts in his sleep.

Coffea.—Kept awake by mental activity, a rush of ideas and acuteness of senses. Wide awake.

Coca.—Sleepless from overwork, mental and nervous exhaustion.

Gelsemium.—Drowsy all day and restless at night. Insomnia from mental strain. Lies stupid and drowsy, but does not sleep.

Hyosc.—Mind perfectly at rest, but nervous excitement.

Ignatia.—Sleepless from grief, anxiety, and depressing emotions.

Opium.—Insomnia with acuteness of hearing. Distant and slight noises keep one awake.—*American Homeopathist*.

SOMATOSE AS A NUTRIENT IN THE CACHEXIA OF SYPHILIS.—Dr. P. J. Eichhoff (Berlin *Klin. Wochenschr.*, No. 46, 1894) relates his experience with somatose as an auxiliary food in the diet of persons suffering from that form of cachexia which attends severe cases of syphilis. He was induced to try this new albumose preparation by the favourable results obtained from its use by Dr. Woodbury (*Medical Bulletin*) in typhoid fever. His method of administration was as follows: one teaspoonful of somatose was dissolved in warm water and added to one-third litre of milk, and this quantity was given morning, noon, and evening, in addition to the ordinary diet. A characteristic case is cited by Eichhoff to illustrate the effects of somatose in syphilis cachexia. The patient had been under treatment for ten years for severe tertiary syphilis, and also presented a large patch of lupus on the left side of the neck. He complained of severe pains in the right leg, formation and twitching, especially in the sole of the right foot; a girdle feeling, slight vesical and rectal disturbances. The treatment consisted in mercurial inunctions and the internal administration of iodide of potassium. In consequence of the development of mercurial stomatitis, the inunction treatment was discontinued, the patient being much reduced in health and harassed by constant pains and sleeplessness. Somatose was therefore given in the above-described manner, and the mercurial treatment resumed, which was now well tolerated. Remarkable improvement was soon manifest; the patient felt much stronger, and his former wretched condition soon gave place to a healthy appearance. During the four weeks that somatose was given, a gain of about ten pounds in weight was noted, and this well illustrates the remarkable properties of this food in conditions of great debility.

NEWS AND NOTES.

LONDON HOMEOPATHIC HOSPITAL.—OPENING OF THE NEW BUILDING.

THE month of July will be memorable in the history of this Institution. The new building is to be opened on the 9th, as will be seen by the subjoined circular issued by the hospital authorities, whose efforts we commend to the hearty co-operation of our readers :—

“The Board of Management have the gratification to announce to the friends of the hospital that Her Royal Highness the Princess Mary Adelaide, Duchess of Teck, has most graciously consented to open the new hospital building on Tuesday, July 9th, at four o'clock, when every donor to the building fund will be invited to be present.

“The new hospital provides accommodation for one hundred patients and contains every approved and tried improvement in hospital construction. The total cost, including an extensive addition to the site, and the cost of furnishing and fitting, with all other expenses, is estimated at £45,000. The building fund has reached the total of £35,000, and therefore to open the new building free of building debt (which the Board earnestly hope will be accomplished) the sum of £10,000 remains to be promised by the opening day, July 9th.

“To raise this considerable sum by the middle of July the Board can only look to the many staunch and steadfast friends of homeopathy who have already by generous aid raised the building fund to its present high total of £35,000, in their desire that the science of homeopathy shall be fittingly represented among Metropolitan hospitals, and that the sick poor shall receive its benefits in a hospital worthy of the present position of homeopathy and of modern progress. To those friends alone can the hospital look for help, the great mass of the charitable public (always overwhelmed with general claims of an urgent nature) being quite beyond the reach of its appeals.

“In order that the charity may commence its new career unencumbered by debt, and may rest upon the soundest and widest basis, the Board hope that all friends of homeopathy in every part of the United Kingdom will join in opening this, its Metropolitan hospital and teaching centre, absolutely free of debt.

“If each donor who so readily responded three years since, when the building fund was commenced, would undertake to promise a single additional gift the amount necessary (£10,000) would be secured, and the Board would have the gratification to

report to the patron of the hospital—the Princess Mary Adelaide—on the opening day, that Her Royal Highness has opened a hospital for which complete payment has been provided by its friends.

“At the opening ceremony it is proposed to present to the Princess Mary Adelaide purses of five pounds and upwards; and subscribers willing to provide or collect such amounts are requested to give early intimation to the Secretary-Superintendent, who will supply the purses.

“The opening of the new hospital will be celebrated by a banquet at the Whitehall Rooms, Hôtel Métropole, on Wednesday, July 10th, at seven o'clock, to which ladies will be invited. Friends of the hospital whose engagements may permit their accepting invitations, will render assistance by an early intimation to the Secretary-Superintendent.

“It is hoped that the purses presented on the opening day, and the list of donations announced at the dinner, will complete the required sum of £10,000.

“The Board of Management appeal earnestly, and they trust finally, to every supporter of the hospital and friend of homeopathy to make one special effort to open the hospital free of debt.

“Promises may, if preferred, be payable at any time during the present year, and may be in two amounts—a gift for the opening day and a promise by the end of the year.

“Cheques and money orders, which may include amounts for presentation purses, should be crossed and made payable to ‘The London Homeopathic Hospital.’

“EMLYN, *Treasurer*.

“W. H. TRAPMANN, *Vice-Treasurer*.

“J. P. STILWELL, *Chairman*.

“G. A. CROSS, *Secretary-Superintendent*.”

The following list of donations have reduced the building deficit from £12,000 to £10,000, the amount still remaining to be promised:—

Per MISS J. DURNING SMITH.		£	s.	d.		£	s.	d.
	£	s.	d.					
Miss J. Durning Smith...	250	0	0	Captain Cundy ...	250	0	0	
Mrs. Salis Schwabe ...	10	0	0	William Debenham, Esq.	250	0	0	
A. P. Tree, Esq....	5	5	0	F. G. Smart, Esq. ...	250	0	0	
Sir John Barran, M.P....	5	0	0	Mrs. F. G. Smart ...	250	0	0	
Fredk. W. Lawrence,				H. W. Prescott, Esq. ...	100	0	0	
Esq. ...	5	0	0	Lord Grimthorpe ...	50	0	0	
Tertius Lawrence, Esq.	2	0	0	J. P. Stilwell, Esq. ...	21	0	0	
				Captain Wale Willis ...	1	1	0	
Per J. PAKENHAM STILWELL, Esq.								
(Chairman).				Per G. A. CROSS				
Colonel Clifton Brown ...	500	0	0	(Secretary-Superintendent).				
				William Lindley, Esq. ...	50	0	0	

	£	s.	d.		£	s.	d.
Miss M. A. Walford ...	5	5	0	Per DR. COOPER.			
Miss E. H. Burney ...	5	0	0	Ralph Callard, Esq. ...	2	2	0
A Friend (per Mrs. Letts) ...	5	0	0	Per DR. DUDGEON.			
Mrs. Letts ...	5	0	0	Anonymous ...	1	0	0
Mrs. Howard Spensley ...	3	0	0	Per DR. GOLDSBOROUGH.			
Walter Robert Kersey, Esq. ...	2	2	0	Mrs. Carter ...	0	10	6
Miss Louisa A. Bott ...	1	1	0	Per DR. REED HILL (Colchester).			
Mrs. Bryce ...	1	1	0	T. M. Bear, Esq. ...	1	1	0
Mrs. Hiron ...	1	1	0	Dr. Reed Hill ...	1	1	0
General Phelps ...	1	1	0	Miss Walker ...	1	1	0
Mrs. Pryor ...	1	1	0	Miss Francis ...	1	0	0
Mrs. F. Skipwith ...	1	1	0	Mrs. Wakefield ...	1	0	0
J. Smith, Esq. ...	1	1	0	Per DR. BYRES MOIR.			
Miss Wilkinson ...	1	1	0	The Misses Jacomb ...	10	0	0
Lieut.-Colonel Western ...	1	1	0	Dr. Byres Moir ...	5	0	0
Mrs. S. B. Murray ...	1	0	0	Miss Bragge ...	2	2	0
Per DR. BLAKE.				Miss Hodson ...	1	1	0
Thos. H. Akroyd, Esq. ...	5	0	0	A Friend ...	0	10	0
Per DR. DYCE BROWN.				Per DR. EDWIN A. NEATBY.			
Dr. Dyce Brown ...	10	0	0	A. C. Hill, Esq. ...	1	1	0
Per DR. BURFORD.				Per DR. NEILD.			
Mrs. Jackson ...	20	0	0	E. B. ...	10	10	0
Per DR. CLARKE.				Per DR. NEWBERY.			
Lady Dunn ...	10	0	0	Mrs. Chas. F. Hodges ...	1	1	0
Per DR. A. C. CLIFTON (Northampton).				Per DR. SANDBERG.			
Fitzhugh Whitehouse, Esq. ...	20	0	0	W. B. Dunthorpe, Esq. ...	3	3	0
Per. DR. F. W. Clifton (Sheffield).				Mrs. Henry Simmonds ...	3	3	0
Miss Ellis ...	2	2	0	Per DR. HORACE SANDERS.			
Mrs. Cobbe ...	1	1	0	Dr. Horace Sanders ...	5	5	0
Further donations have been promised by the following:—				F. W. Levander, Esq. ...	1	1	0
Per Miss J. DURNING SMITH.				An Old Patient (per Sister Olive) ...	1	1	0
Miss Durning Smith ...	250	0	0	Per DR. CARFRAE.			
Miss Pattison ...	1	1	0	Miss Flora Smith ...	10	0	0
Per J. PAKENHAM STILWELL, Esq. (Chairman).				Per DR. CASH.			
T. D. Galpin, Esq. ...	50	0	0	The Misses Cash ...	10	0	0
W. T. Gadd, Esq. ...	1	1	0	Lady Castlestuart Oobill-trie ...	1	0	0
Per G. A. CROSS. (Secretary-Superintendent).				Per DR. ROBERSON DAY.			
Miss Mackintosh ...	20	0	0	A Grateful Patient ...	4	0	0
Mrs. Waterhouse ...	10	10	0	Per DR. BYRES MOIR.			
E. Walter Greene, Esq. ...	10	0	0	Miss Leon ...	5	5	0
Mrs. Coulson James (3rd donation) ...	5	5	0	Mrs. Struben ...	3	3	0
Miss Field ...	1	1	0				

HISTORY OF THE HOSPITAL.

UNDER the title, "Historical Sketch of the London Homeopathic Hospital," the Homeopathic League have issued a most interesting tract, which appears at a very opportune moment. It has been issued from the Hospital in a special cover and we hope it will be widely read. The hospital has been intimately associated with the rise and progress of homeopathy in this country, and we trust the New Building will carry worthily forward the best traditions of the past.

SNAKE-VENOM EXPERIMENTS.

THE following note appeared in *The Westminster Gazette* of June 5:—

"AN EDINBURGH PROFESSOR'S EXPERIMENTS.

"Professor T. R. Fraser, of the University of Edinburgh, has communicated to the Edinburgh Royal Society an account of his experiments, extending over six years, in rendering animals immune against the venom of the cobra and other serpents. The Professor by administering to guinea-pigs, white rats, rabbits, and cats successive non-lethal doses of venom, has again and again made them perfectly indifferent to an ethal dose from ten to fifty times as large as the normal one. His discovery, which will be completed when he has experimented on human beings, is regarded as an important one to India, where the yearly destruction of life is 20,000."

The next day the following letter, addressed to the editor, appeared in the same journal:—

"SNAKE-VENOM EXPERIMENTS.

"TO THE EDITOR OF *The Westminster Gazette*.

"SIR,—It is astonishing how much trouble some people will take to discover things that are already very well known. Any respectable savage could have told Professor T. R. Fraser facts relating to inoculation with snake-venom of far greater importance than any he has gained from observations on 'guinea-pigs, white rats, rabbits, and cats.' He has still, as you say, to experiment on human beings. The savages have 'gone one better'—they began with human beings, to wit, the persons most concerned. In Africa, when a native is bitten by a serpent the animal is killed, the poison glands extracted, and the patient sucks up a few drops of it. In the *Journal d'Hygiene* of October 20, 1892, a traveller related his experience of the method made use of by the savages of Guiana, as follows:—

'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 centimetres 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 the 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 several times by different serpents, all very dangerous—*grage*, coral snake, &c.—and I have never even had an attack of fever.'

This may be called a specimen of aboriginal homeopathy. Homeopathy has existed from all time, but Hahnemann was the first to discover the laws of its operation and establish it on a scientific basis. Eminent allopaths like Koch, Pasteur, and Professor Fraser are always making grand re-discoveries of little bits of it, and I should not be surprised if some fine day they end by discovering Hahnemann himself. It must be exceedingly difficult for the clearer-sighted among them to keep up the farce of ignoring him.—Yours, &c.

“ JOHN H. CLARKE, M.D.

“ 30, Clarges Street, W., June 5.”

A SNAKE-VENOM-PROOF MAN.

MR. FREDERICK KOPP sends us the following interesting account of the “Snake-venom-proof Man,” Mr. Clifford, who, within the last five years, has been bitten no less than *five* times by some of the most venomous and deadly of the Australian snakes. The account given below was sent to the *Sidney Evening News* by Mr. James S. Bray, the eminent Australian naturalist, who has made a life-long study of these reptiles, and whose information may therefore be depended upon as being strictly authentic. Mr. Bray says:—

“As considerable public and scientific interest has been awakened in reference to Mr. Clifford, the snake-catcher, who has been bitten so frequently by our Australian venomous snakes, I venture sending you a more correct account of his ‘bite’ adventures than has yet appeared. This man has been bitten no less than five times, from all of which he has recovered with but little inconvenience, excepting the occasion of the second bite, when he became delirious at the Little Bay Hospital. For scientific record I give the dates:—

“Mr. Clifford was first bitten during the season 1890-91 by a black snake (*Pseudechis porphyriacus*) and attended to by Dr. Reddal. The season 1892-3 he was bitten no less than three times. Once by a black snake, and attended to by Dr. Pierce, of Little Bay Hospital, on December 24, 1892, *Strychnine* being used. Again he was bit on

January 25, 1895, by a brown snake (*Diemenia superciliosa*), and again attended to by Dr. Pierce, *Strychnine* being used. In March following he was again bitten by a tiger snake (*Hoplocephalus curtus*) while selling the reptile to the lady 'lion-tamer' belonging to the circus then in Sidney. This lady's husband scarified the wound, and used *Ammonia*. During the present season 1894-95 he was again bitten by a black snake on February 7, from which he recovered without aid of any kind, under Dr. Milford's care the puffed-up condition of his hand going down to its normal state inside of a week."

ABORIGINAL PASTEURISM.

THE two following letters from *The Lancet* of May 11th and 25th respectively show how the uncivilised races have elaborated an anti-rabic treatment on the "hair-of-the-dog-that-bit-him" plan, much superior to that of Pasteur, in that it at least does not give rabies to those who have not got it.

"A PREVENTIVE OF HYDROPHOBIA.

"TO THE EDITORS OF *The Lancet*.

"SIRS,—In the course of a conversation which I had with an intelligent Haussa native a few days ago I was informed that the following method is adopted here with the view of preventing hydrophobia following the bite of a rabid dog or other animal. When a person is bitten by a dog supposed to be suffering from rabies the animal is instantly caught, killed, and cut open, the liver is taken out and slightly browned by being held to the fire, after which the whole of the organ is eaten by the patient. I have made further inquiries, and I find that it is generally believed here that this treatment in many instances prevents the onset of the disease. If it is so, it is interesting to notice the similarity which exists between it and that of M. Pasteur.

"I am, Sirs, yours faithfully,

"THOMAS J. TONKIN, L.R.C.P. & S. Edin.

"Medical Officer, Haussa Association, Soudan Expedition.

"Kano, Haussa State, Western Soudan, Feb. 6th, 1885."

"A PREVENTIVE OF HYDROPHOBIA."

"TO THE EDITORS OF *The Lancet*.

"SIRS,—Under the above heading in the current issue of *The Lancet* Mr. T. J. Tonkin calls attention to a curious method of treatment prevalent in the Soudan. It may be of interest to mention that a somewhat similar case came under my notice in the province of Shantung, North China, about three years ago. An intelligent native of considerable literary ability called on me to provide him with a remedy, he having been bitten slightly in the hand about six weeks before by a rabid dog. The wound, which must have been very small, had completely healed. I asked what treatment he had already

adopted, and he informed me that the dog had been killed, the *heart*—in this instance—taken out and boiled, and that he had eaten it. He was seen again twelve months later, and had been free from any symptoms of disease. In a country where the whole carcase of the dog is considered a delicacy, this method of therapeutics cannot, perhaps, be regarded as strange.—I am, Sirs, yours faithfully,

“WM. W. SHRUBSHALL, L.R.C.P., L.R.C.S.E., &c.

“Fawcett Street, S.W., May 17th, 1895.”

THYROIDIN.

In the current number of *L'Art Medical* is appearing a translation by Dr. Marc Jousset of the Pathogenesis of *Thyroidin* collected in this journal last year, together with additions from French literature. A considerable number of experiences of importance have accumulated of late in current literature, and it is our intention to collect and arrange them for publication in coming numbers of THE HOMEOPATHIC WORLD. In this way it will be possible to make the picture of the drug's sphere of action more complete, and we trust will be of service to our French *confrère* in the work on which he is engaged. If any of our readers have had striking results from the use of the medicine we shall be obliged by their letting us have them for publication.

SPONTANEOUS CURE OF CANCER.—At a meeting on January 11th, of the Imperio-Royal Society of the physicians of Vienna, an interesting discussion took place on the spontaneous cure of cancer. Professor Billroth cited the case of a woman, æt. 50, who was affected seven years previously with a mammary carcinoma, the size of an apple. The tumour underwent a process of mummification and was eliminated. To-day there remains only a white cicatrix around the site of the disease. The eminent surgeon had seen a number of cases in which tumours, with the exception of sarcoma, ended in a similar manner. Dr. Stoerk mentioned a case of epithelioma of the tonsil which disappeared spontaneously. A year after, however, a relapse took place which necessitated the resection of the maxilla. Professor Kaposi remarked that the cicatrisation of the cutaneous epithelioma is not infrequently observed by dermatologists. Ten years ago, the editor was consulted by an old lady living in the centre of France, for a cutaneous epithelioma of the cheek, close to the eyelid. The tumour was of slow growth, but had a tendency to increase both in surface and depth, and for a few weeks it bled freely. The application of very hot water several times daily was advised. With the exception of a very small scab, the tumour had almost entirely disappeared in a couple of months. The treatment was discontinued, and the ulceration returned, but shortly after its resumption she was permanently cured. To-day she is quite well.—*New York Medical Times*.

ORIGINAL COMMUNICATIONS.

REMARKS ON DR. COOPER'S "ARBORIVITAL
MEDICINE."

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

WHEN a colleague who is both eminent as an aurist and as a clinician in general practice based on the law of similars declares that he has discovered a principle which "solves the problems connected with homeopathy," we look with eagerness to what he has to reveal.

Dr. Cooper's theory of "Arborivital Medicine" and his cases illustrating it have appeared in *The Hahnemannian Monthly Journal of Philadelphia, U.S.*, during the past two years, the first paper appearing in the number for January, 1893. Through the courtesy of the author—to whom I am greatly indebted for personal help in the line of his speciality—I have before me copies of all his papers, and am prepared to give the impressions and comments to which these strange and novel ideas have given rise in my own mind. There is sufficient material here for an interesting discussion at our autumn Annual Congress: but, if the powers that rule the selection of papers draw the line at "Arborivital Medicine," we can fairly and thoughtfully interchange our thoughts upon it in these pages, and let not the theory be abruptly dismissed by any homeopath as "rubbish."

Imprimis, Dr. R. T. Cooper is a skilled practical botanist, and has a familiar acquaintance with a book which few of his colleagues have seen, viz., "Culpepper's Herbal (1652)." Amid much that is superstitious and astrological about plants, there is much information about our indigenous flora that is useful to a physician, especially a homeopath, in this quaint old book. Our author has indeed imbibed so much of its lore, that rumour credits him with a belief in the doctrine of "signatures." Be this true or false, it is clear that "Culpepper's Herbal" has been foster-parent to "Arborivital Medicine."

Dr. Cooper starts by assuring us that this new investigation of the therapeutic powers of plants is neither intended to overthrow or to break up homeopathy; and that the clinical use of each "Arborivital" remedy is limited to chronic cases of aural disease, and in single, infrequent doses

of a new kind of tincture or solution of each plant which retains the "growth-force."

The key-note of his very original idea is this (p. 7) :—

"Every plant that grows is in sympathetic relationship with the human body, and the first thing we have to learn is the way in which the plant-force—the growth-force, or the dynamis, by whatever name we like to call it—can best be given so as to exert a beneficial action upon disease, the mode of administration being therefore all-important for investigation purposes."

His new pharmaceutical preparations are made thus :—

"I advocate the preparation of Arborivital tinctures in the field from the living plant, the preparer carrying with him a small phial, into which the budding stalk and young leaves of the plant are placed, fresh as they grow, and upon these, simply crushed between finger and thumb, the rectified spirit should be poured. . . . To secure with even greater certainty the power of the growth-force, I am in the habit of plunging the living stalk, while yet connected with the plant, into the spirit, and allowing the strongest daylight that usually plays upon the plant in its native habitat, to fall upon the phial filled with the spirit, the stalk being at the same time immersed in it."

Dr. Cooper regards an exposure to daylight of this imprisoned flower-stalk of five minutes' duration as Potency No. 1, of ten minutes as Potency No. 2, and so on, so that an exposure of one hour is No. 12. He coins two ingenious words, "helioستن," meaning an "Arborivital" tincture, thus sun-prepared: and "ستنوگرام," meaning the mark indicating the potency. *Plantago lanceolata* 12, ϕ_{Δ} , is the "12th Arborivital mother tincture" of that plant. After an hour's soaking in rectified spirit, in daylight, "the flower-stalk and leaves become withered"—an important statement, on which I shall presently comment. Dr. Cooper claims a superiority of these "helioستنs" over ordinary homeopathic preparations, inasmuch as "the force associated with the material particles of the plant, the original growth-force, and the force derived from potentisation by means of exposure of the living plants in spirit, will, each of them . . . represent a definite power." Thus these preparations cannot be strictly called either "infusions," "tinctures," or "extracts" of the plants, but simply "helioستنs." Now it is plain to me that the established methods of pharmacy, entirely departed from

in his "Arborivital system," have been proved for centuries past, by every possible clinical proof, to be efficient in obtaining and retaining the essential characteristic "force," whether poisonous or medicinal, of each plant—though, of course, improvements are every year being made. Most homeopaths will, on trial, admit the superiority of tinctures made from the fresh plant to those made from the dried plant (whether root, leaves, or stem). But here we have an idea which is so transcendental that my mind cannot admit it as a fact—namely that the "growth-force," the *vis vitæ*, of a living plant can be dissolved in alcohol and water in an hour or less! As well might Dr. Cooper try to bottle up the magnetic force, the mesmeric aura, or the perfumed exhalations of the heliotrope, as the "growth-force" of a living plant. Alcohol is as acrid a poison as strong ammonia, or dilute nitric acid, to the parts of a growing plant above ground. The process which rectified spirit sets up in the plant is a rapid drying up of the plant cells, the water from which is sucked out by the spirit, and the cellulose is hardened, the *growth checked at once*; and this goes on until "the flower-stalk and leaves become withered." Possibly some soluble crystalline and resinous substances in that very short time may become transferred to the spirit; but the "heliothen," as thus made, cannot but be regarded by all pharmaceutical chemists as a very weak and imperfect tincture. I believe, however, though it is not stated in any of the pamphlets, that Dr. Cooper keeps the flower-stalk immersed in the same rectified spirit for some months, by which process the "heliothen" is strengthened.

"Heliothens" have thus far been made of the following plants:—*Agraphis* (or *Scilla*) *nutans*, *Viola odorata*, *Viola tricolor*, *Cheiranthus cheiri*, *Lemna minor*, and *Arbutus andrachne*:

In a concluding article I shall analyse the clinical results of these remedies as employed by Dr. Cooper.

51, Canning Street, Liverpool, June 5th, 1895.

REMARKS ON THE "MATERIA MEDICA."

HELLEBORUS—HYOSCYAMUS.

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

HELLEBORUS.

Upper extremities: sensation as of a shock in the right upper arm, but not when touching the part; prickings running transversely across the flexor tendons of the left hand when walking in the open air (a. 12½ hrs.); sweat of the palms of the hand with cold dorsa (a. 2 hrs.); paralytic tearing and cramp-like rigidity in the fourth finger of the right hand, going off when at rest; small humid painless vesicles on the middle joint of the fourth right finger: when pressing upon them strongly, the bone appears to experience a sore pain. *Lower extremities*: sudden paralytic stiffness in the right hip-joint when walking in the open air (a. 23 hrs.). *Single prickings in the left hip*. A few violent, somewhat slow stitches, as with needles, in the left hip. Digging-up pain in the region of the right patella (a. ½ hr.); sharp stitches darting upwards, in the right leg, near the external ankle (a. 3 hrs.); pain as if sprained in the left tarsal joint, he is afraid of bending the foot (a. 30 hrs.); aching pain in the calcanean process of the right heel, in every position of the foot (a. 11 hrs.); fine painful pressure in the right sole when sitting (a. 5 hrs.); tearing in the ball of the left foot (a. ¼ hr.); stitching jerking in the left big toe. *General*: falling off of the hairs of the whole body and of the nails; peeling off of the epidermis; sharp tearing stitches in several parts of the body at once, in the thighs, chest, legs, &c.; paralytic weakness of the limbs and unusual stiffness; all the muscles of his limbs feel so heavy and painful that he was very much averse to moving them. *Sleep*: stretching of the limbs; weary and drowsy in the forenoon (a. 2 hrs.). *Fits*: fainting fits; convulsive movements, and a shock into the brain as with an arrow; as soon as he opens his eyes in the morning, he has to stretch himself, feels faint, and closes his eyes again; towards morning his sleep becomes a restless slumber, filled with historical dreams, he turns now to one side, now to the other; after lying down in the evening, he sees a hundred forms before his eyes, going off as speedily as they came; *confused anxious dreams in the night, which he is un-*

able to recollect; fever: strong pulse (a. $\frac{1}{4}$ hr.); general chill with goose-skin, the head is painful when feeling or moving it, drawing tearing in the limbs and frequent stitches in the joints, especially the elbow and shoulder joints, without thirst, for some days, from morning till evening (a. 23 hrs.); in the evening, and especially after lying down, burning heat over the whole body, especially the head; internal shuddering and chilliness, without thirst; when attempting to drink he felt an aversion to drink, he was only able to drink a little at a time; general sweat towards morning for several nights, the temperature of the body being natural (a. 48 hrs.); pale sunken countenance, no pulse, icy coldness and cold sweat all over, a drop of sweat being suspended from every hair.

Remarks. By comparing the symptoms with the general remarks we shall see what are the peculiar kind of fever, swellings, and mental diseases to which this drug will apply. It will be noticed, also, how many of the symptoms occur after a few hours, hence how frequently it is likely to be called for on the occurrence of symptoms of acute diseases, e.g., brain inflammations of children, causing convulsive attacks, and dropsical conditions accompanying acute diseases; note also heat of head with cold fingers and chilliness of whole body, as alternative conditions are always of moment, found again in the aversions as to food, and again in the fever symptoms, and under taste; also stitching upwards in rectum as directions of pains in diarrhea attacks are frequently most useful; also transverse pains will be observed in several organs or localities, and under general symptoms the remarkable falling off of hair and nails, and under fits the tendency to stretch, and last but not least the character of the dreams.

HYOSCYAMUS.

Our next medicine will be *Hyoscyamus niger* or *Henbane*. *Moral*: delirious while awake; extreme shyness; dullness of feeling; unfeeling indolence; does not know his relatives; they prate about all those things that a prudent man would have kept secret; absurd laughter; grasping at flocks and muttering; takes men for hogs; sings amorous and obscene songs; they (a whole family) perform all sorts of ludicrous actions like monkeys (from eating the root); acts as if he were cracking nuts; he lies in his bed naked

and delirious: alternations of ease and rage; mania, he can scarcely be governed; insulting speeches, quarrel, dispute; horrid anguish; he complains of having been poisoned; concussive startings alternating with trembling and convulsions; impatient, thought he would die when obliged to wait for something unimportant. *Head*: dull, tearing, lancinating stinging, stitching pains; headache as if the brain shook and flapped like a wet sheet when walking; he remembers involuntarily persons and events which he had no intention to think of (a. $\frac{1}{2}$ h.); he easily recalls of things which he does not intend, and is unable to recollect things which he would like to remember (a. 3 hrs.); cloudiness of the head, costiveness and pain in the loins; sensation in the head as if he had lost all power of thinking; headache alternating with pain in the nape of the neck. *Eyes*: the flame of one light appears larger than that of the other, although both are of equal size (a. 10 hrs.); dark spots hover to and fro before the eye in quick succession; all things look red as fire, or golden-yellow; what is small seems very large; convulsively moved protruded eyes; swelling of the eyelids; inability to open them. *Face*: distorted, bluish clay-coloured, with mouth wide open, cold pale; pustules resembling small-pox. *Ears*: ringing as of bells; sudden indescribable pain in right ear. *Nose*: clawing pressure in the root of the nose and the zygomata (a. 1 hr.); bleeding from the nose; *Jaws, teeth, mouth*; clean parching dry tongue; lips look like scorched leather; loss of speech and consciousness; pain of subcutaneous ulceration in the soft parts between the cheeks and the last molar teeth (in the evening during the feverish heat); painful drawing in a single tooth, here and there, as if a tooth were becoming pithy; toothache during the sweat; tearing toothache with congestion of blood to the head as if he would spit blood. *Pharynx and esophagus*: posterior part of throat is affected, he points with his finger to it, as if something were lodged there; thirst occasioned by the stinging dryness in the throat; then follows a reference to several symptoms, by taking which, he remarks, "we shall have a tolerably accurate image of certain forms of hydrophobia which may therefore be homeopathically cured by *Hyoscyamus*." "The true accounts," he continues, "which we possess of this fearful malady, show that there are varieties of it which may each be cured by a specific drug. *Hyoscyamus* is one of these."

Stramonium and *Belladonna* correspond to other varieties. *Belladonna* has already cured some cases of hydrophobia, but it would have cured many more, if it had been left unmixed with other drugs, or if it had not been given in such murderous doses. *Large doses of homeopathic remedies are more injurious than large doses of allopathic drugs. A practitioner who prescribes a drug homeopathically, commits a real crime by administering doses of the size used in the common allopathic routine. Such doses become real poisons and homicidal agents. I say this not only in regard to Belladonna and Stramonium, but in regard to every other drug, in all forms of disease, and especially acute diseases.* Let no one come and tell me that his patient died in spite of having taken one of those medicines, even a large dose thereof, every two or three hours. I tell him that the patient died because of having taken that large dose. If the patient had taken the smallest portion of a drop of the 15th or 30th attenuation, and in rare cases another dose three or four days after the first, he would have been saved." I return to the symptoms—constriction of the throat with constricted deglutition. He twice spit out a liquid which had been introduced into his mouth. Unquenchable thirst; dread of liquids; after drinking he was now attacked with convulsions, now he did not recognise those present; ptyalism; bloody saliva with a bloody-sweet taste (in a few hours); appetite and strength diminished day after day. *Appetite and gastric symptoms*: bitterness in mouth in the morning, but the food he took did not taste bitter (a. 24 hrs.); when pressing upon the pit of the stomach he is attacked with nausea, going off by stooping. *Frequent hiccough*: hiccough with spasms and rumbling in the abdomen; violent hiccough, with costiveness. *Stomach and abdomen, pinching in the abdomen*: colic, as if his abdomen would burst; he presses his fists into his sides; the abdominal muscles are painful as if he had fallen upon them (when sitting); puffiness of the abdomen, painful to the touch. *Stool*: delaying three hours on the first day beyond the usual hour, on the second day it takes place four hours before the usual hour; copious papescent stool with scanty emission of urine; frequent expulsion of ascarides; flowing hemorrhoids for eight days. *Urinary*: yellow urine, turbid already while being emitted, afterwards depositing a whitish-grey sediment; frequent and urgent desire with scanty emission the first two days;

on the third and following days copious micturition; copious micturition with rumbling in the abdomen; copious emission of urine, sleep, perspiration, diarrhœa, and afterwards cheerful mood. *Genital*: profuse menses with delirium; retarded menses; before menses hysteric pain, almost uninterrupted laughter; during enuresis, rage, headache, profuse sweat and nausea. *Catarrh*: much mucus in the larynx and trachea making the voice rough (a. $\frac{1}{2}$ h.). *Asthma*: continual cough while he lies down, going off when sitting up. *Back*: tension of the muscles of the back and chest near the shoulder-joint, when raising the arm, as if they were too short; repeated attacks of pain in the loins; pain in the loins, and swelling around the malleoli. *Upper extremities*: dull pain in the wrist and elbow-joint, spreading and decreasing during motion; trembling of the arm in the evening after exercise; painful stupor of the hands; aching with drawing around the wrist-joint and knuckles (a. $\frac{1}{4}$ h.); swelling of the hands. *Lower extremities*: redness of the nates and feet; stitching drawing in the thighs worse when at rest; tensive pain across the middle of the thighs, as if they were too short, when going upstairs; pain as if bruised in the left tibia when walking, especially in the evening; the side of the calf being hot, swollen, and bordered with red rash, but without pain or itching; gangrenous spots and vesicles, especially on the lower limbs (a. 24 h.); stiffness and faintness in the knee-joints when walking in the open air (a. 3 h.); cold feet; pinching-jerking pains in the feet; drawing tearing in the soles, mostly when at rest, disappearing by walking and re-appearing when sitting down (a. 36 h.). *General*: dull drawing pains in the joints, but more in the muscles and neighbourhood of the joints; the symptoms seem to be most marked in the evening; fine stitches through the tips of the fingers and through all the parts of the body from within (in a few minutes); when applying the warm hand to any part of the body, the back, arms, &c., he felt a very painful warmth in that part, lasting a long while (a few hours); large pustules on the skin, clustering in various places, from the region above the hips to the knees, looking like confluent small-pox; they do not contain any fluid, and peel off in four days (a. 3 d.); alternate appearance and disappearance of brown spots on the whole body; obstinate dropsy. *Fits and weakness*: weariness, faintness of the whole body; when walking in the open air he shortly

becomes hot and weak (a. 12 h.); chronic weakness of the feet; general loss of strength, with trembling of the whole body and extreme coldness of the extremities, until fainting was about setting in; death-like fainting. *Sleep*: lying down in silence; in the morning he shows an excessive wakefulness as if from weakness, in the afternoon drowsiness, relaxation, and irresoluteness; sleeps for three days; deep sleep; quiet sleep with profuse sweat and frequent micturition; coma vigil; although he had fallen asleep long after midnight, nevertheless he woke very early, feeling exceedingly cheerful and vigorous; anxious dreams about furious cats assailing him; grinding of teeth; there is almost no perspiration except during sleep; when slumbering he has a smiling look; when in bed, he now raised his knees, now he extended them, now he raised his hand and knocked upon the bed, now he pulled straw out of his bed, moved the fingers over the bed; said nothing; he was neither out of humour nor desponding. *Fits*: apoplexy with snoring; hemiplegia; in his convulsions he stamps with one foot after the other; convulsions with foam at the mouth; convulsions with clenching of the thumbs; slight epileptic fits alternating with paroxysms of apoplexy; subsultus tendinum; spasms with watery diarrhoea and enuresis; spasms diarrhoea and coldness of the whole body. *Fever*: chilliness and shivering over the whole body, with hot face and cold hands, without thirst (a. 1 h.), and recurring the next day (a. 24 h.); violent and long chilliness in the evening, with restless sleep, followed by copious sweat, pulse hard, small, quick, intermittent, full, strong; distended veins of the whole body; burning heat in the whole internal body; copious sweats; sour; cool.

Remarks.—The variety of symptoms in the moral sphere first call for notice and show how useful a drug this must be both in cases of insanity of various kinds, of delirium such as occurs in the various acute fevers, and again in that much misunderstood condition of the nervous system commonly spoken of as hysteria. Referring to insanity, I well remember in my allopathic days, and while believing that opiates of various kinds were the true treatment for mania and its frequently accompanying sleeplessness, going to assist a doctor who had the charge of a large asylum in London, where cases of all kinds were treated; he informed me that he found experimentally that *Hyoscyamus* benefited more cases of sleeplessness and delirium and

mania in its varieties, than any other drug he was acquainted with—why he did not know. I followed suit, and experienced the same happy result, so here was an instance on a pretty large scale of homeopathy unconsciously practiced (for we gave the *Hyoscy.* by itself), and thus illustrating what I doubt not sufficient investigation, were such possible, would prove to be the case universally, namely, that all real cures performed are under the law of similars. Of course, here as elsewhere, the cure would only be of the acute symptoms, *Hyoscy.*, not being an antispasmodic, could not reach the root which lay at the back of the acute manifestations; for this we must search among the antipsorics, antisyphilitics, and antisycotics. Among the head symptoms the peculiar and unpleasant one of remembering what you would rather forget while being unable to recall what you wished to remember, is well worth noting; also the eye symptoms, as peculiarities of the sight will repay their study, especially in these days when oculists seem to have convinced the public that the majority even of children cannot for ordinary purposes avail themselves of the natural use of their eyes; the feeling of pithiness in several parts is useful as pointing in the direction of paralysis; the character of the thirst accompanied by spitting—nausea going off by stooping; hiccough, and the alternation of conditions in stool, urinary, and other symptoms, all point to a peculiarity in the way in which the nervous system is affected by this drug and thus direct us to the *sphere* of its action, the "red string" or keynote which will ensure success in its administration in all suitable cases. The action on the skin also is not to be overlooked, nor the peculiarities in the character of the sleep it will induce. Lastly, but not least, the pungent but painfully true remarks of our author on the treatment of hydrophobia, and the murderous effects of pouring in repeated doses of this or any other drug in acute diseases, especially where the nervous system is so clearly assailed, are to be pondered until understood. Let us note first the expression "certain forms of hydrophobia," which at one blow demolishes the modern giant yclept Pasteurism, for the whole theory of that ignis fatuus rests on the supposition that every case of hydrophobia is identical, and therefore requires identical treatment, a "fatal error" which has been only too painfully proved by results. No two cases of hydrophobia are exactly identical unless it can be proved that any two

individuals are exactly identical, for individuality is stamped on disease as surely as on health; next, the "murderous doses" of our author's reference were proved most surely, if not in Pasteurism yet certainly in Kochism, so that a halt was called by the profession itself, and falsely-named heroic treatment had to be set aside and rational treatment to be substituted for it, the rationality implied in the statement "*large doses of homeopathic remedies are more injurious than large doses of allopathic drugs.*" This essentiality to the understanding of homeopathic treatment and ignorance of which has been the cause of all the laughter at the small dose, except that which was wilful, was forced upon the profession when they approached homeopathic lines so distinctly as to treat by viruses; they were compelled to potentise, and the strongholds of such admittedly formidable diseases as hydrophobia and phthisis were found to be garrisoned by a guard of such strength, circumspection, and unceasing vigilance that though invisible, impalpable to all our senses and all known instruments of exploration, microscopic or otherwise, it could only be overcome by a similar intangible force, namely, potential virus. A truly grand vindication of the genius and foresight of Hahnemann. In conclusion, note that he applies this warning of the danger of such frequent repetition of large doses and especially if homeopathically indicated to "every other drug in all forms of disease and especially acute disease."

MEDICINAL TREATMENT OF THE SUICIDAL IMPULSE.*

By Dr. GALLAVARDIN, of Lyons.

Translated by Dr. CLARKE.

I.

IN making known the medicines which are capable of dissipating the impulse to suicide, I consider I am performing at once a charitable and a social act: a charitable act in preserving members to thousands of families—and often their most important members; a social act in preserving thousands of citizens to each nation. In France, for example, previous to 1830 there were only 1,500

* It is Dr. Gallavardin's wish that American journals should copy this article.—Ed. H. W.

suicides a year; to-day the rate is nearly 10,000. And the number will increase in proportion to the decline of religious education which teaches resignation to the unhappy of this world in the hope of future recompense. Thus the Mahomedans, in spite of their deplorable morals, do not commit suicide because they retain a religious faith.

In the French edition of my book on the Treatment of Alcoholism I said I had found six agents of moral and intellectual culture: three of them immaterial—Religion, Education, and Instruction; and three material—Medicine, Food, and Climate. Experience has taught me that we can only make daily use of two of these agents—Religion and Medicine, which can come to the assistance of the alcohol habit and sometimes replace it altogether. The present article is concerned with the suicidal impulse; when this is not dissipated by religion it must be done by medicines. This is what I am now going to teach in setting forth in what follows the differential indications of several medicines.

II.

Medicines indicated against:—

1. The suicidal impulse: *Aconitum*, *Alumina*, *Aurum*, *Belladonna*, *Carbo Vegetabilis*, *China*, *Graphites*, *Lachesis*, *Natrum-muriaticum*, *Nux Vomica*, *Opium*, *Pulsatilla*, *Rhus Toxicodendron*, *Sepia*, *Staphisagria*.

2. Persistent suicidal impulse: Give successively, and following this order, a single dose of these five remedies in the 200th centesimal dilution, allowing each dose to act forty days: (1) *Bell.*, (2) *Nux Vom.*, (3) *Puls.*, (4) *Aur.*, (5) *Ars*. This treatment would thus last two hundred days, giving each medicine only once.

3. It may be cured in other ways; for example, in paying regard to the disease which leads to suicide. Thus, when it is hypochondriasis which induces it, choose the best indicated amongst the following: *STAPHISAGRIA*, *NAT.-MUR.*, *Caust.*, *Calc.-carb.*, *Graph.*, *Alum.*, *Sepia*, *Sulph.*

4. The following are indicated for the impulse to commit suicide by firearms: *Alum.*, *Calc.-carb.*, *Carbo Veg.*, *China*, *Nat.-mur.*, *Nux Vom.*, *Opium*, *Sepia*, *Sulph.*, *STAPHISAGRIA*.

5. Suicide by throwing oneself under a carriage : *Ars.*, *Lach.*
6. By drowning : *BELL.*, *ARS.*
7. By dagger : *Ars.*, *Bell.*, *Nux Vom.*
8. By poison : *Ars.*, *BELL.*, *Puls.*
9. By leaping from a height : *BELL.*, *Hyos.*, *Stram.*, *Secale*, *Nux Vom.*, *Aur.*, *Ign.*, *Silicea.*
10. By suffocation with carbon fumes : *Ars.*, *Nux Vom.*
11. Cutting the throat with a razor : *Acon.*
12. Impulse to suicide with fear of death : *China*, *ACIDUM NITRICUM.*, *Plat.*, *STAPH.*
13. From the death of a lover ; from unfortunate love ; from the despair of love : *Caust.*, *Staph.*, *Bell.*

III.

I will now quote a few observations of cure.

OBSERVATION I.—Eight or ten years ago Dr. Burnett, of London, sent to me an English gentleman who had suffered for at least four years from the delirium of persecution, a repulsion against women, and a strong impulse to drown himself. Two of his brothers actually had drowned themselves. I completely dispelled these three orders of symptoms by giving him at intervals of one, two, three, or four weeks a single dose of each of the following medicines : *Staph.* 200, *Staph.* 10,000, *Nux Vom.* 200, and *Nux Vom.* 10,000.

OBSERVATION II.—A lady of 65 years of age, after a quarrel with her son-in-law, spoke about nothing else but drowning herself. I caused to be given to her, without her knowing, a single dose of *Belladonna* 300 in her soup. A month later she said to one of her neighbours, "Formerly I used to think of nothing else but drowning myself ; I no longer think of it now."

OBSERVATION III.—A drunkard had hanged himself twice in one day. The first time at his own house, when his wife had cut the cord ; the second time at the Parc de la Tête d'Or, at Lyons, when he was taken down by the police. I caused to be given to him in his soup, without his knowing, *Belladonna* 300 once every two days. It is now a year since he has attempted to hang himself.

OBSERVATION IV.—I have often cured with *Nux Vomica* 200, suicidal impulses in alcoholics.

OBSERVATION V.—It has been remarked in France that

the soldiers who have committed suicide are chiefly those who have received no money from their relatives, who are too poor to send it. I treated, unknown to himself, one of these soldiers who had a strong suicidal impulse, and who suffered, in addition, from insomnia. *Belladonna* 800, given every two or three days, cured these symptoms completely. This remedy is the most efficacious of all against the impulse to suicide.

IV.

The foregoing shows how superior homeopathy is to allopathy from the social point of view, allopathy having, so to say, no remedies at all for the suicidal impulse. If, for example, the twelve thousand doctors of France employed our remedies, France would not lose nearly one hundred thousand citizens every ten years. When will Governments understand the social importance of homeopathy, which, besides, would diminish by more than half the number of criminals by curing them of their passions? This last result I frequently observe in my Tuesday Morning Dispensary, where, during the last nine years, I have given more than eight thousand consultations, of which more than five thousand were for alcoholics.

THE NEW SNAKE-BITE ANTIDOTE.

By FREDERICK KOPP, Greenwich, N.S.W.

PROFESSOR HALFORD, in his latest work on the Snake-poison Question, undoubtedly proves himself to be a warm advocate and admirer of the Pasteur Institute. He asserts that all experiments should be first made on animals, the test trial being "to inject a known fatal dose into some animal, and then to restore to health the creature which, if left alone, would be doomed to die." I confess I have but little faith in the experimenting on animals with drugs, as it has been proved over and over again, beyond the shadow of a doubt, that in such experiments it is very often a case of "one man's meat, another man's poison;" or, in other words, there are certain drugs which, although capable of producing fatal effects in man, are non-poisonous to certain members of the brute creation. The instance of the non-poisonous influence of *Morphia* on fowls, quoted

in last December's issue of THE HOMEOPATHIC WORLD, is an example of the fallacy of taking animals as the basis of the study of the action of drugs on man. Perhaps, however, a little margin may be left in experimenting with snake-poison, as the venom has been proved to be fatal in its effects both to man and beast.

It may, perhaps, be a little early in the day for me to criticise the new antidote—*Chloride of Lime*—which is held by its advocates to be far superior to anything yet discovered, as, according to their argument, it has the *lowest* death-rate of any antidote. As its administration in cases of snake-bite in human subjects has not been, so far, numerous enough for me to form a fair estimate of its value in such cases, I am compelled at present to accept the result of the experiments carried out on animals by Dr. A. Calmette, of the Pasteur Institute. The Institute experiments on fourteen rabbits and one guinea-pig resulted as follows:—Eleven recovered and four died, being equal to a death-rate of 26·66 per cent. In my opinion, if the above result of the experiments is correct, and Dr. Calmette and Professor Halford both acknowledge that it is, its death-rate will have to be greatly reduced, in the case of human subjects, to enable it to successfully compete with other antidotes at present in use, which, according to Mr. H. Willoughby, a staunch supporter of Professor Halford, have a record of “disheartening failure.” By referring to my article on “Snake-bite and the *Strychnine* Treatment,” in THE HOMEOPATHIC WORLD of February, 1894, it will be seen that the death-rate by the *Strychnine* treatment has been 13·2 per cent., and, by other treatment (such as *Liq. Ammon.*, *Liq. Ammon. Fort.*, and *Kali Perm.*), 4·1. Taking animals as the basis in the new antidote, and man as in the other, the death-rate of the former is about *double* that of the *Strychnine* treatment, and over *six* times that of the ordinary treatment. But, as aforesaid, it is yet rather early in the day to judge the new antidote on its merits, as only by its results in cases of snake-bite in human subjects can a fair and impartial idea be given as to whether it is superior to the antidotes at present in use, or not.

Dr. Calmette mentions one point, which he claims goes far to prove that the right mode of treating snake-bite has at last been discovered. After asserting that the injection of either the *Chloride of Lime* or the *Hypochlorate*, in small quantities under the skin, renders the animal venom-proof,

and also that the serum of such animals is an antidote against snake-poison, he says:—"Half a c.c. of this serum added to one milligramme of cobra-venom rendered the latter harmless. Three drops of a solution of the *Chloride of Lime* powder (bleaching powder) are sufficient to destroy in a test-tube the activity of a milligramme of cobra-venom." He also states that in seven cases of animals a fatal dose of snake-poison was injected, and that, on the "immunity serum" being injected, there were six recoveries, or a death-rate of 14.28 per cent., which is slightly higher than the death-rate under the *Strychnine* treatment (13.2 per cent.).

Professor Halford says that it is astonishing that so small an amount of free *Chlorine* should have such a powerful effect in antidoting the action of the snake-venom, as he has found that all experiments made hitherto have proved the poison to be indestructible, which has led him to the belief of the existence of a ferment in snake-poison.

Dr. Weir Mitchell, writing on the indestructibility of the snake-venom, says:—"Freezing has no effect; boiling has no effect; strong *Nitric Acid*, strong *Sulphuric Acid*, has no effect. After these powerful acids had been mixed with the venom they were neutralised; but the venom, when injected into the subcutaneous tissue, produced death. When mixed with *Ammonia*, or *Soda Potash*, and each mixture injected, no effect was found to have been produced on the virulence."

Professor Halford points out that one evil, which often follows the treatment of snake-bite by *Ammonia*, namely, the subcutaneous injection inducing sloughing, is entirely absent in the new treatment by *Chloride of Lime*. He says:—"These injections are never painful, and never produce sloughing."

Mr. Howard Willoughby, in reviewing Professor Halford's work on the new treatment, admits that the only claim he has for taking part in the discussion is as the literary exponent of the late Vincent Richards and the Indian Commission. He quotes thus from the first letter sent to him by Mr. Richardson on the subject:—"If a fatal dose has been injected, and the animal has been recovered, there is an apparent antidote. But, so far, all drugs have failed when thus tried, and so has the treatment last recommended to us (the *Strychnine* treatment).

The Australian recoveries are either recoveries from a non-fatal dose of the poison, or from alcoholic poisoning. They are not recoveries from a mortal dose of snake-venom." Mr. Willoughby goes on to remark:—"I have repeatedly pointed out as regards one antidote after another, when brought forward with a great flourish, that there has been no compliance with test conditions, and that, however astonishing and satisfactory recoveries may seem in individual instances, yet in reality they prove nothing, for, though the sufferer may have been *sufficiently poisoned to produce alarming symptoms*, he may not have been *fatally* poisoned. And the Australian cases have been almost all complicated by the administration of alcohol in large quantities, usually sufficient to produce insensibility, and often with evil effects. But the Pasteur Institute experiments are free from this defect. They face the situation. Animals, who have been so poisoned, that assuredly they would have died if they had been left alone, as their companions poisoned at the same time and in the same manner did one and all die, have been treated, and recovered. *The Pasteur claim, therefore, demands attention.*"

And, yet, judging from the death-rate above quoted, namely—

<i>Chloride of Lime</i> (tested on animals).....	26.66 per cent.
Immunity serum (tested on animals).....	14.28 "
<i>Strychnine</i> (human cases treated).....	18.2 "
Other treatment (<i>Ammonia</i> , &c.) (human cases treated).....	4.1 "

—the antidotes which Mr. Willoughby so much despises and attempts to belittle, appear to have a much lower death-rate than the new antidote, which, making use of his own expression, he is bringing "forward with a great flourish." Time, however, will prove the efficacy or otherwise of the new antidote in cases of human subjects suffering from the effects of snake-bite. It must, nevertheless, be borne in mind that the Pasteur Institute, so greatly eulogised and much thought of by both Mr. Willoughby and Professor Halford, is far from being infallible in its experiments, and that some of the greatest scientific frauds imaginable have originated therefrom. Take, as an instance, the Pasteurian inoculations in the treatment of hydrophobia.

"A. G.," in THE HOMEOPATHIC WORLD of January of the current year, undoubtedly hits the nail on the head, when

he says :—“ Seeing that the death-rate from hydrophobia has gone up wherever Pasteur Institutes have been established, that this is admitted to be the case in France, and that likewise it is admitted at the *Institut Pasteur* that no one has ever seen the supposed microbe of hydrophobia, it does not appear that we owe anything but *268 deaths* to Pasteur ! ”

Note also the opinion of Dr. C. W. Dulles, of Philadelphia. He expresses himself in the following terms :—“ The number of cases of hydrophobia that occur in this country (the United States) is happily small. *It would doubtless be smaller still, but for the exploitation of the Pasteur Institute, conducted by Gibier in New York, and of its feeble imitator, conducted by Lagorio, in Chicago.* ”

Alluding to the Pasteurian system of vaccination as a preventive of anthrax, the following statement made by Mr. J. Collinson, of Wolsingham, Durham, England, is straight to the point :—“ Pasteur’s treatment has been carefully studied and condemned by a large number of eminent men, many of whom have repeated his experiments. Some of his results have been tested by *special* investigators, too. His own pupil and agent, the late M. Thuillier (watched by a Government Commission), tested them in Hungary ; he also tested them in Germany. Professor Klein tested them in England ; and they were tested by others in France ; also, if I mistake not, in Russia. All of these observers agree that Pasteur’s vaccinations, though not without scientific interest, are not only *without any practical value, but positively dangerous* to man and beast.”

Undoubtedly, as Mr. Willoughby asserts, “ the Pasteur Institute claims attention.” It certainly claims attention on account of its gigantic blunders and failures—but not in the way that he presumes that it does. Pasteurian statistics are anything but creditable to the followers of that system, as, unfortunately, the world long ere this has found out to its sorrow.

Professor Halford, in his work, brings up again his old arguments in favour of the supposition that snake-poison is a *blood-poison*. He insists emphatically that it is so, and claims that the “ Calmette treatment,” as the new antidote is termed, is but a confirmation of his own views. I still contend, notwithstanding the arguments of Professor Halford, Mr. Willoughby, or of any one else, as I have

always done, that snake-poison is not a blood, but a *nerve-poison*. The simple fact of it having a special affinity for the motor nerve-cells, and the way in which it lowers their functional activity, and, in fatal cases, even entirely suspends it, surely go far to prove that the nerve-poison theory is the correct one. But, at the same time, I hold that it produces no structural change, but merely a purely functional derangement. Dr. A. Mueller, of Yackandandah, Victoria, Australia, the staunch advocate of the "*Strychnine* treatment" in snake-bite, is, I believe, of the same opinion, and declares that the snake-venom is "a depressing *nerve-poison*, acting on motor nerve-cells."

Professor Halford believes that the venom of the Australian black-snake and tiger-snake is at least as virulent as that of the Indian cobra, although, at the same time, he admits that the quantity of the venom is smaller in the Australian than in the Indian snake, and that *quantity* as well as *quality* is a main factor in the sum.

The following are the directions, recommended to be carried out in the treatment of snake-bite with the new antidote:—

"First, a ligature (such as a strong string, a boot-lace, or a narrow strip of cloth) is to be applied, so as to stop the circulation of the blood and of other fluids from the bitten part; then cut freely into and round about the bitten part to a depth of a quarter of an inch or so, and then suck at the wounds so made. The ligature must be applied *tightly*. For cutting into the bitten part a knife, a razor, a pair of scissors, a broken piece of glass, or other sharp substance may be used. The sucking of the wound must be *thorough*, and be undertaken by persons who have no wound, crack, sore, or ulcer in their mouths or on their lips. If the bite be on the hand, arm, foot, or leg, the ligature is to be applied near the bitten part, and between the bite and the heart, *i.e.*, between the bite and the body. If it be on the head, face, neck, or body, if possible, pinch up the part that is bitten, ligature it, cut into it, and suck at the wound so formed. The *Chlorinated Lime* (or *bleaching powder*) to be used for the injection must be obtained from a good chemist, and if kept in stock, it must be kept in a cool, dark place, and be well sealed up. The solution (or extract) may, however, be prepared and kept ready for immediate use; and in that case, too, it must be kept in a well-sealed bottle in a cool and dark place. The solution

is easily prepared by thoroughly stirring up *one* part of *bleaching powder* with *twelve* parts of water, straining off the sediment, and then diluting the solution so obtained by adding *one hundred and eight* more parts of water; in other words, first make a solution of *one* part of the powder in *twelve* parts of water, and then dilute the other by adding *nine* times its volume of water. This diluted solution is to be injected by means of a hypodermic syringe into and round about the bitten part. Half-an-ounce of the diluted solution, or 30 drops of the stronger solution (1 in 12), may be thus injected at one time, and be repeated once or twice, or oftener, if the symptoms of snake-poisoning continue. If the symptoms show that the poison has been absorbed into the general system, it is as well also to inject the solution under the skin in some other part than that below the ligature, and similarly to repeat the injections if the symptoms continue. Remove the ligatures as soon as the injections have been made. Wash the wound with an abundance of the concentrated solution of the bleaching powder. Of course, all practicable care should be taken to use clean instruments, whether for cutting the skin and tissues, or for injecting. It will be advantageous to sustain the heart's action by injecting a feeble dose of *Morphia* (about one-seventh of a grain) or *Caffein* subcutaneously. It is as well, also, to give a certain amount of *brandy*—for an adult, about half-an-ounce as a dose, and, if necessary, to repeat that dose two or three times, at intervals of three hours."

The following account of a case of snake-bite, successfully treated by the new antidote, may prove of interest to my readers:—

Miss McKinnon, sister of a selector, residing near Korumburra, Victoria, on January 30th of the present year, was bitten by a snake on the leg below the knee while rounding up the cows. Her brother immediately tied a ligature round the leg, and scarified the wound. The assistance of Mr. James Halford, son of Professor Halford, who has a neighbouring selection, was sought, and he immediately administered six injections of the 1 in 12 solution of *Chlorinated Lime* in water in half-dram doses. The young woman was subsequently taken to Dr. Mackenzie's surgery, who found that, although there was ample evidence of her having been bitten, her condition was in no way alarming, and next morning she returned to her home to all appearances perfectly well.

The following cases of snake-bite, successfully treated, but otherwise than by the new antidote, occurred during February and March of the current year:—

Case 1.—On Friday morning, February 15th, a young man named Mr. Goddard, engaged in sleeper cutting near Narrabri, N.S.W., saw a black snake about six feet long. He immediately attacked the reptile with a stick, but it broke, and the snake sprang at his face. He put up his left hand to protect his face, and the snake fastened on to his little finger. He knocked the snake off with his right hand, and the reptile escaped while he was looking for a weapon. Mr. Goddard then tied a ligature round the finger, and directly after took an axe and chopped the finger off. He then went into town, and was treated by Dr. Shraeder. He was soon out of danger and on the road to recovery, the amputated finger healing well.

Case 2.—In the early part of March a man, named Mr. Albert Foster, was chasing hares near Salisbury Plains, N.S.W. He put his hand into a hollow log after a hare, and a snake bit him. He killed the snake, and cut the wound. His mates bound his arm, and a young fellow, named Mr. McPherson, sucked the blood. Mr. Foster then galloped to Walsha, where Dr. Boodle attended him, and he afterwards felt nothing beyond a slight stiffness in the arm.

Case 3.—A lad, named King, residing with his parents at Pullwood, N.S.W., was bitten by a snake on Monday, March 4th. He had been searching for fruit among some blackberry bushes, when a black snake caught him by the top of the forefinger of the right hand, driving its fangs in deeply. The boy immediately gripped the bitten finger tightly, and ran to his father, who made his son hold his finger in the air, and turn his head away. Mr. King then took his gun and blew the top of the lad's finger off. He then drove him to Crookwell, where the injured finger was treated, and the lad soon recovered.

Case 4.—A young man, named Thomas Cagney, was bitten on the wrist by a snake on March 20th, at Yango Creek, Wollombi. He was getting a drink of water when the affair occurred. The wound was scarified and sucked, and ligatures fastened round the wrist, and the young man was then taken into Wollombi, a distance of ten miles, for medical treatment. Dr. Bapty found the patient to be in a very weak and dangerous state; but, by the injection of *Strychnine* and the administration of other remedies, he succeeded in saving the young man's life.

Case 5.—Mr. Herbert Sterling, employed by Mr. William McDermott, was bitten on the little finger by a black snake on March 20th, outside of Camden, N.S.W. At the time he was in the act of lifting up a bag of straw, the reptile being underneath. With an axe he immediately chopped off the finger, and walked about a mile into town to Dr. Bell, who dressed the wound. It was some time, however, before the man was out of danger. The remedies used by Dr. Bell in this case were, unfortunately, not given in the report.

The following are among the fatal cases of snake-bite, reported during the months of February and March:—

Case 1.—On Friday, February 1st, a gardener, named John Willmott, living in Mackie Road, East Brighton, Victoria, cut a large black snake in halves with a scythe; but the head portion got away. Next day Mrs. Willmott was horrified at finding the latter on the verandah, and she discovered that it had bitten her little child on the hand. The child expired before medical aid arrived.

Case 2.—A little boy, named Armit, about eight years of age, was bitten near the ankle by a tiger snake on Thursday afternoon, February 14th, about four o'clock, at Inverary, near Bungonia, N.S.W., as he was crossing a paddock bare-footed with his mother. He was brought into Goulburn, after the wound had been scarified and a ligature implied; but, though *Strychnine* and other remedies were applied by Dr. McMater, the child died at about half-past eight o'clock, four-and-a-half hours after being bitten.

Case 3.—Mrs. J. Portars, wife of a selector, residing at Mundaroo, about twelve miles from Tumbarumba, N.S.W., was bitten on the hand by a tiger snake on Saturday, February 16th, and died an hour afterwards. Mrs. Portars was sitting on a couch in a dark room, and, noticing something on the floor, near her feet, she stooped down to pick it up. As she put her hand near the floor she was bitten on the thumb. Although she did not think at the time that a snake had bitten her, she shortly afterwards exhibited signs of serious illness, and Dr. Johnstone, of Tumbarumba, was immediately sent for. The doctor at once started out; but, before he had gone four miles, he was met by another messenger, who informed him that the woman had expired. It appears that, after the occurrence, Mrs. Portars's son wanted to cut the part of the thumb that was bitten, and to suck the wound, but his mother would not allow him to do so.

The above case, having received no treatment whatever, shows how rapidly the venom of the tiger snake is capable of causing death.

Case 4.—A little boy, named J. Charlesworth, was bitten on the foot by a brown snake, while playing with other children at the rear of his parents' residence, at Bulli, N.S.W., on Sunday morning, February 24th. About three hours elapsed before medical aid could be obtained, and the child was then in great pain. Dr. Sturt excised the bitten part, and, subsequently, at the cottage hospital, administered *Strychnine*. Death, however, ensued on the following morning.

Case 5.—An old man, named Mr. Harris, was bitten on the hand by a snake while rabbiting on the Hyram Estate, Narcoorte, N.S.W., on Thursday, February 28th. He immediately drank a bottle of *brandy*, and, subsequently, the *Strychnine* remedy was administered in the hospital, but he died on the following Saturday, March 2nd.

Case 6.—A daughter of Mr. Richard Maher, of Harwood Island, N.S.W., aged 22, went out just after dark on Saturday night, March 2nd, to get a drink at a tank. She ran inside again, saying she had been bitten by a snake. A few minutes afterwards she became unconscious, and died within an hour. It is believed she was bitten by a death-adder, as there were three distinct marks on her foot; one being by itself, and around this spot the flesh turned black shortly afterwards. Although search was made, the reptile was not found.

I have always asserted that snakes, more especially during March, are to be found outside their holes at night time as well as during the day, and the above case clearly proves the truth of my statements. I have always held this opinion, in spite of ridicule, and the assertions of others to the contrary. There is now lying before me, as I write these lines, a copy of a letter written by Mr. James Bray, the eminent Australian naturalist, the contents of which strongly coincide with the views that I hold. He says:—"So far as the present New South Wales snake season of 1894-95 has gone, the death-rate from snake-bite has greatly exceeded the annual average. *The worst portion of the season has yet to come, that is, the month of March, and part, or, it may be, the whole of April.* After that time reptiles are not so fond of leaving their homes, and, consequently, the danger is almost nil. *The present*

month—March—is the worst of the year, on account of the female reptiles being in an interesting condition, and about to add to the population of our reptile world, both venomous and non-venomous. Country people need to be more on the alert during the afternoon, and towards sundown, and *after dark*, for all our venomous snakes are to be found in greater numbers from after four o'clock in the afternoon until darkness sets in. In fact, our venomous reptiles are *nocturnal*, not diurnal. Already, within the past month or two, six lives have been lost in this Colony by snake-bite, two of which died in one hour each." The two latter cases referred to are Cases 3 and 6 quoted above. It is needless for me to add that Mr. Bray has had many years of experience in the study of the habits of our reptiles, and, therefore, knows perfectly well what he is writing about.

A peculiar adventure happened on Tuesday, February 19th, to Mr. W. Carroll, at Salisbury, Victoria. He was walking through his paddock, when he espied a moving object, which he at first thought was a monkey. He was in the act of capturing the animal, when, to his astonishment, he discovered it was a hare, with a snake coiled round it, the tail of the latter projecting from underneath through the hare's hind legs. The snake had three coils round the hare. Mr. Carroll quickly gave his snakeship, which was of the brown species, and four feet in length, the happy despatch. The hare died shortly afterwards.

In conclusion, the following case of a dog bitten by a black snake, one of the most venomous of the Australian reptiles, is worthy of record:—

A dog, belonging to Mr. G. Schreiber, of Wollongbar, N.S.W., recently killed a black snake, five feet in length, the appearance of which induced Mr. Schreiber and others to cut the snake open with a brusshook, when they found it to contain fifteen young snakes. The remarkable thing about them being that they were all sizes, up to eighteen inches in length; the largest one being nearly as thick as a man's finger, and so lively that it made strong efforts to escape. The dog was bitten in three places about the lip, to which the snake hung by its fangs. The dog was taken to the creek and placed in the water, the only ill-effects experienced being a great amount of swelling, which affected the whole head. Mr. Schreiber says that he has seen many dogs bitten, who always recovered if they could be got to

the water within reasonable time. A Mr. Jemmett saved his dog in the same way a few years ago, and Mr. Schreiber declares that the fact is worth knowing by dog-owners.

As the Pasteur Institute places such great faith in experimenting on animals to discover an antidote for the cure of snake-bite in human subjects, I would draw the attention of its members to the above paragraph as worthy of their consideration. Surely Dr. Calmette, Professor Halford, and others concerned will jump at the idea of possessing so simple an antidote.

The above strongly reminds me of a case quoted in the *Australian Medical Gazette* of April, 1890. The case was that of an adult, and the symptoms given were that "he was kept awake for thirty-six hours, and then was getting sleepy." (By the bye, who wouldn't after thirty-six hours?) The bitten limb was immersed in running water, and recovery ensued.

However, so far as I myself am concerned, I can hardly think that the treatment, as given to the dog above mentioned, would have been of any avail had the case been that of a human subject.

INSTITUTIONS.

HOMEOPATHIC SCHOOL OF CALCUTTA.

WE have received from Dr. M. M. Bose a report of this school, from which we are pleased to make extracts, which we are sure will be interesting and encouraging to our readers:—

"Another year has rolled by, and under Divine Providence the school has made rapid strides in its onward work for the advancement of homeopathic medical education in the country. As will be seen later on, the homeopathic system of treatment has been steadily and practically gaining ground in other Presidencies than that of Bengal. It is a healthy sign of the times, as was remarked by Mr. R. D. Mehta, the late sheriff of Calcutta, when presiding last year at the opening of the summer session, that people should take to other independent career than following to the ordinary over-stocked profession in arts and law. The records kept in the school shew unmistakably that the alumni are year by year spreading far and wide in

the different provinces and earning a decent and respectable livelihood. This may be more said of the students coming in from the Burdwan Division of the Bengal Presidency. A highly respected medical gentleman, holding a responsible position, remarked that in the interior of the district, he is often surprised to find so many homeopathic practitioners coming out from this school, keeping a distinct and lucrative practice among themselves.

"There were twenty-seven more admissions to the school this year than in former session. Admission to female pupils were not entertained as numbers of candidates were not so many as to have separate classes for them. It may be necessary in a short time to provide accommodation for training qualified female homeopathic practitioners. The following districts in the Bengal Presidency stand according to the number of admissions in the last year as follows: Hughli, Burdwan, twenty-four Perganas, Howrah, Jessore, and in a minor degree almost all other Zillahs, besides Assam, Orrissa, and Bombay. Including Calcutta; twenty-four Perganas heads the list.

"Among the licentiates, twenty-one qualified themselves to practice homeopathic medicine and surgery last year, among whom six have been placed in the first, and fifteen in the second division. The student who stands first in 1894 has been carrying on a very good practice in the Hughli district. He has been taking the first prizes in all the examinations. For the first time, an Assamese, native of Upper Assam, named Kusha Kanto Barkakati, belonging to a respectable family, has taken the licentiateship. He was reading for the membership of the school. He has begun to practice in his province.

"Among the candidates who appeared in last February for the senior examination, and in due course will be qualified in June next, two names require to be specially mentioned. The *first* is a Maharatta, Kashinath Kesho Jog, native of Kohlapur in Southern Maharatta country. Having been educated at the Rajaram High School, he entered this institution three years ago. He has been all along a diligent student, always taking the premier places in all the examinations. Since, two other Maharatta pupils have joined this institution. May his exemplary conduct and application stimulate others of his countrymen and the students in general to follow in his footsteps. The *second* one is a native of the Punjab, who joined this school after having successfully passed the higher examination of the well-known Madras Agricultural College. Although Bicchitar Sing's ancestors followed the military profession (grandfather being a Sirdar of forces under Runjit Sing and the uncle a non-commissioned officer in the British Army and father in the service of the Chumba Raj) he has stuck to the

noble art of healing. He was also examined by the Science Association and been awarded a silver medal in chemistry by the Chaitannya Library this year under the presidency of Sir Alexander Miller, the law member of the Government of India. There is no doubt that both these students will have a successful career in their respective places of residence. These two will be the first to qualify them as licentiates from Bombay and Punjab. Two licentiates attended the 'post graduate' lectures for three months, but none of them has yet appeared for the membership. It is expected that few more will read up for this higher qualification. The subjects for this year's discourse will be found in the announcement. Licentiates generally leave Calcutta, immediately after qualification, for practice in the Muffossil. However some have already signified their desire to prosecute further studies and attend the 'post graduates' course next July.

"Clinical demonstrations are generally carried on among the third-year pupils, though the second-year students have the opportunities of observing the examinations of the patients. Advantages are taken in this class to touch on all important diseases which may not have been dwelt on for want of time in regular practice of medicine lectures. Rules regarding the case taking by students (at least fifty cases) have been strictly adhered to. Important cases from the principal's practice are also sometimes shown in this clinique. Numerically and in points of importance, more diseases have been demonstrated in the clinical class than in former years.

"The work of the new session commenced with an address by Dr. M. M. Bose, on Friday, the 15th June, when he especially dwelt upon the present state of homeopathic education and the prospects of homeopathic practice, the latter of which was considered hopeful and encouraging. The learned doctor also touched on the qualities, requisite for a student of medicine: as thoroughness, enthusiasm in his studies, working for the profession heart and soul, conscientious in the discharge of his duties. He should be a man of indefatigable industry, unquenchable energy, of singleness of purpose and unbounded sacrifice. The address concluded with an exhortation to the students to keep always in view the ennobling character of the profession."

The following is a short account of the origin of the school:—

"Shortly after the return of Dr. M. M. Bose, M.D., the founder of this school, from Great Britain and America in 1879, it was suggested to him by some influential persons, that as the

homeopathic system was daily gaining ground among the people of Bengal, it was time that an institution was formed to teach homeopathic practitioners a general knowledge of medical science with special reference to homeopathic therapeutics. It was also observed that not only those who had entered the Medical Schools for a year or two, or those who had been compounders and dispensers, but even the Gurus of Pathshalas, pandits of vernacular schools, and other people with a little knowledge having had nothing particular to do to gain a livelihood, buy some homeopathic publications (a great many of which are published, not by regular medical men); peruse them for a short time and then set up to practice. To counteract the evils of people becoming homeopathic practitioners without any adequate knowledge of the system and its practice, it was found high time to have a school where some systematic education might be given, and from which students after passing the necessary examinations might enter the world as better qualified practitioners. It would also afford an opening to many young men, who after some education in middle vernacular and English schools, do not find any career in life. From the very beginning up to this time, the school has been under one and the same management. Now that the school has passed its initial stage, it is desirable that the rules which were framed in 1883, should be published for general information. From past experience it may be hoped that the onward march and the future progress of the school will be as steady as it has been up to this time. The school began with a handful of students; now (in 1889) more than 150 of its pupils have passed through the various examinations of the Institution both in the vernacular and English departments, and established themselves in all parts of the country both to their own and their patients' advantage. It may be mentioned that there was an application from a chief in the Upper Provinces for a qualified student of this school to take charge of a dispensary in his state. Since then applications for service are being largely received. Originally there was only the vernacular class; but as pupils began to come from N. W. P., and as also good many people who had passed higher English examinations (including some F.A. and B.A. passed) and others employed during the day, wanted to enter the school, an English or evening class was added five years ago. The same success has attended this department, as in the vernacular."

BRYONIA AND MERCURY.—If you know a patient who has been taking mercurius in the very low potencies or in allopathic doses, do not follow immediately with bryonia; it will certainly salivate the patient.
—Hoynes, *American Homeopathist*.

REVIEWS.

DEWEY'S THERAPEUTICS.*

In this work Dr. Dewey has given us the homeopathic materia medica approached from the nosological point of view. It is expressly stated on the title-page that it is "arranged and compiled especially for the use of students," so that those who look to find in it anything approaching to completeness have only themselves to thank if they are disappointed. Dr. Dewey does not profess or attempt to name all the medicines that may be used in each disease; he does not even include all diseases in his arrangement. But it would be a mistake to assume from this that the *Essentials of Homeopathic Therapeutics* will be of no service to anybody else but students. The indications for the different remedies are clearly and concisely put, and in such a form that it is easy to remember them. There is a very full Clinical Index, as well as a Contents table, which make the book available as a work of reference in which the busy practitioner will often find valuable suggestions.

THE VACCINATION QUESTION.†

This is a very complete summing up of the case against vaccination, written in a clear and forcible style. All who wish to be posted up in the history and the pros and cons of the subject should possess themselves of Mr. Hutton's book.

SOME EFFECTS OF DRESS.‡

This pamphlet, which is a reprint from the proceedings of the International Periodical Congress of Gynecology and Obstetrics, held at Brussels in 1872, gives a series of most instructive charts of measurements taken by an apparatus of the author's own devising. Diagrams are also given showing the displacement of organs and other deformities produced by modern articles of dress.

* *Essentials of Homeopathic Therapeutics*; being a Quiz Compend upon the application of Homeopathic Remedies to Diseased States. By W. A. Dewey, M.D. Philadelphia: Bericke and Tafel. London: Homeopathic Publishing Company, 12, Warwick Lane, E.C.

† *The Vaccination Question*: A Letter addressed by Permission to the Right Hon. H. H. Asquith, Q.C., M.P. By Arthur Wollaston Hutton, M.A., formerly Scholar of Exeter College, Oxford. Librarian of the National Liberal Club, London. Methuen and Co., 36, Essex Street, W.C. Cloth, 1s. 6d.

‡ *The Relations of Static Disturbances of the Abdominal Viscera to Displacements of the Pelvic Organs*. By J. H. Kellog, M.D. Modern Medicine Pub. Company, Battle Creek, Mich.

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.

P. N. As a recent convert we understand your point of view, but it would be better to wait for a little more experience before attempting to criticise old hands. *The British Medical Journal* is a high authority on orthography, orthodoxy, and odium medicum, no doubt; its weak points are therapeutics and professional amity.

A PUZZLING CASE.

To the Editor of the HOMEOPATHIC WORLD.

SIR,—Please kindly insert the following:—The mother of the writer, aged 71, has been suffering for some time past from an internal tumour, situated just below the liver; in fact, some medical men believe that it is actually connected with the liver. Well, be that as it may, the tumour is there, and is of a hard, fleshy nature. About twelve months ago she received a fright, and her condition became very critical, and the medical attendant held the opinion that she would not live longer than a few days, or a few weeks at the most. She became dropsical, her heart was very weak, and she suffered intense pain below the hepatic gland. The administration of *Colchicum autumnale* reduced the dropsy, and also strengthened the cardiac action; and shortly afterwards the tumour was first noticed. The pressure of the tumour on the intestines has been so great that it has forced out the umbilicus, which refuses to return back into its original position. A continued use of *Bellis perennis* and *Ceanothus Americanus*, taken internally for a period of nine months, was resorted to. For the first three months there seemed to be some improvement, as the tumour appeared to decrease slightly in size, and the tympan-like contraction of the skin of the abdomen became more relaxed; but, after that period, the tumour once more began to increase in size, until it has now become even larger than it was at first. *Hepar Sulphuris*, *Thuja occidentalis*, *Silicea*, *Calcarea carbonica*, and *Apis mellifica* have each been tried without success. Every three weeks the tumour makes a descent lower down into the abdominal cavity, which process is attended with an intense burning pain. This lasts for about five days, when it returns to its original position, after which the pain is barely perceptible. During walking—which, of course, is rather difficult—there is a great straining at the umbilicus, at which there is occasionally a pricking pain. The appetite is impaired, and there is a constant thirst. There is also a dull headache, usually coming on at 2 a.m. and lasting until about 10 a.m. There is occasionally a pain in the bowels, followed by a quick stool. The stools at other times are irregular, which, considering her age, is nothing uncommon. The

urine becomes dark and offensive as the tumour descends, resuming its pale colour as soon as it regains its original position. There is nervous trembling and occasionally vomiting, which generally follows the partaking of any fatty or rich food. There is also a large accumulation of flatulence present. The vision was much impaired, but this symptom gave way to an alternate use of *Silicea* and *Calcarea carbonica*. During the last twelve years there has been an occasional eruption of pimples, of about the size of a threepenny bit and smaller, on the chest (between the two breasts), which discharged a mattery substance. Underneath the two breasts, also, during the above period, there has been, now and again, a vivid superficial redness, with a secretion of a sticky substance, of a most disagreeable odour. There is also an intolerable itching sometimes of the whole body, followed by an eruption underneath the skin, of the same colour as the skin. Until recently sudden attacks of severe shivering, similar to the first stage of ague, and followed by high fever with bounding pulse, and great heat of the body (the pulse rising to 125 per minute, and sometimes higher), were of frequent occurrence, but were cut short by the administration of *Camphora officinarum* in the cold stage, and *Aconitum Napellus* in the hot.

The case has puzzled medical men in general, as the tumour, which appears to be the prime cause of the other complications, is very obstinate, and has, so far, resisted all attempts at treatment. Should any of our medical readers in the course of their practise have had occasion of successfully treating a similar case of tumour, the writer would be glad to hear from them in the HOMEOPATHIC WORLD, and would also feel thankful for any opinions on the subject expressed, more especially as to the drugs indicated, and the general mode of treatment.—Thanking you in anticipation,

I remain, yours faithfully.

“PUZZLED.”

GENERAL CORRESPONDENCE.

A HOMEOPATHIC HOSPITAL WANTED.

To the Editor of the HOMEOPATHIC WORLD.

SIR,—Under the above heading there has appeared a good deal of correspondence recently in the columns of the *Sydney Morning Herald*, which is both interesting and instructive to homeopaths generally, though more especially so to the disciples of Hahnemann in the colony of New South Wales. Mr. W. H. Delvitte, in a letter, dated February 27th, writes thus :—

“Will you kindly allow me, through the columns of your influential paper, to draw attention to the necessity that exists for a homeopathic hospital in Sydney, where the sick and needy who believe in the system can have prompt and proper treatment? There are many thousands of persons in the city and

country districts who firmly believe in the principles laid down by Hahnemann; and would, I am certain, be glad to assist any effort that may be made to establish such an institution. The amount required would not be great, and, if a meeting were called and a good working committee formed, I think the amount necessary to make a good start would soon be forthcoming."

A few days after the appearance of the above lines in the *Sydney Morning Herald*, the following was sent by Mr. Albert T. Fitt for publication in the columns of that journal:—

"I also ask your permission for room in your influential journal to supplement the practical letter of Mr. Delvitte with a few observations. *Propos* the need of a homeopathic hospital for Sydney, 'the sick and needy who believe in homeopathic treatment' is the keynote. Well, such persons cannot obtain this treatment, and how long is this lack of consideration for their poor and sick brothers and sisters going to continue by those whose circumstances are easy, not to say affluent?"

A reply to the above two correspondents was sent by Mr. C. Stuart-Cansdell in the following terms:—

"I am afraid your correspondents will find it difficult, as I and others did over twenty years ago, to found a homeopathic hospital. While in America there are homeopathic colleges and hospitals, New South Wales, following the mother country, which is itself trammelled by monopolies granted to certain old institutions, which only can give the right to practice, and will not do so, save on allopathic lines, it follows that all who seek the privilege of practising must, most absurdly, first qualify as allopaths. Under this irrational state of the question, there are, of course, few homeopathic practitioners who are duly qualified according to law, and so the bulk of them who do so practice have no recognised legal standing, or any means of obtaining it. To meet this unsatisfactory state of the matter, I endeavoured, when applied to, over twenty years ago, by those who had faith in my knowledge of this system of medicine, to found a school, which I hoped would grow into a college, and one or more small cottage hospitals. Considerable progress was made, but the few practitioners who were duly qualified as allopaths, but were practising homeopathy or, more generally, an absurd mixed system, declined to associate with those they deemed unqualified, and the rest agreeing in nothing, save in thanks to me, the proposals were abandoned. Men of great ability could now be obtained, but an Act of Parliament would be needed to establish a college capable of conferring degrees.

But even a hospital would be a great boon to sufferers, and especially so in the treatment of those mentally afflicted."

Dr. John Maffey, L.R.C.P., &c., &c., of 26, Wynyard Square, Sydney, also replied, as follows:—

"Your correspondents, in suggesting the establishment of the above-named institution, can scarcely be aware of the pitiful failure of a recent attempt made in this direction. The preliminary step to any such undertaking must be a dispensary to form a nucleus. In 1892 a start was made; a dispensary, having a 'good working committee,' was opened, with his Excellency the Earl of Jersey and the Countess of Jersey as patron and patroness, and the Hon. Mr. Justice Windeyer, a host in himself, as president, who took a warm interest and most active part in its development. The honorary medical staff included every legally qualified practitioner of homeopathy then resident in the city. The efforts of the committee were seconded by the generous aid of a few subscribers, and the work done was highly appreciated by the 'sick and needy who believe in the system'; but the bulk of the public here, who have so enormously gained in the past by the practice of Hahnemann's law, did not appreciate the benefits they have received to the extent of supporting such an institution pecuniarily for the aid of our poorer brethren. So its doors had to be closed in twelve months for lack of funds. All that I am aware of is now being done in this great community in the way of gratuitous distribution of the boon of homeopathy falls upon the individual charity of its private practitioners, and this to such an extent as to prove both an unfair and far too heavy tax upon us in this period of terrible distress. However, I am of the strongest opinion that, at all events at the present time, any effort of the character suggested will prove futile."

The above correspondence of Mr. C. Stuart-Cansdell and Dr. John Maffey, solicited a reply from a correspondent signing himself "Sympathy," in the following terms:—

"With regard to two letters in a recent issue of the *Herald* on this subject, I shall be glad to make a little fair comment, with your permission. Both correspondents endeavoured to found institutions—one a school for homeopathic instruction, with the hope that it would ultimately lead to a hospital; the other a dispensary, with a similar notion. Both attempts came to grief, and more's the pity, for the intentions were good. The reason for failure in both cases is not far to seek, for, to use a common phrase, 'the cart was put before the horse'—neither a school nor yet a dispensary is the thing needed. What really

is wanted is a hospital, where sick and needy homeopaths can get prompt and proper attention, carried out under a system in which they only have confidence. It seems to me that your correspondents overlooked a fact which the public apparently recognise, viz., that a hospital is always a school, and, further, always contains a dispensary within its borders, so that the aspirations of both gentlemen will be fulfilled if the hospital be carried to a successful issue, and, accordingly, their vigorous support may be reckoned on in this truly benevolent enterprise. One does not expect a hospital to spring into existence immediately; but, if a beginning be made in the right direction, that is to say, a committee formed with a strong commercial element in it, and in which a fair sprinkling of large-hearted women should find a place, and a subscription list opened, money would flow in much more rapidly than is supposed. Throughout the world there is no city with the population of Sydney without its homeopathic hospital or kindred institution. Surely this reproach will shortly be removed, and a suitable building erected for those requiring homeopathic treatment."

The indifference and apathy of the bulk of the public in the matter of the establishment of a homeopathic hospital in Sydney, complained of by Dr. Maffey, is undoubtedly a great obstruction in the way, and one which will have to be removed or surmounted, ere success can be thought of. To attain this end there is, in my opinion, one way which I believe to be worthy of consideration, and that is, "the education of the people to *homeopathic* principles." We can never expect the public to take an interest in anything of which they know nothing, or next door to nothing. I am well aware that the establishment of a homeopathic hospital itself would be the greatest instructor and educator of the people, as its results in the way of a far superior treatment and a lower mortality over its allopathic rivals, would appeal most strongly to the commonsense of the people, and open their eyes. Yet there are other ways in which to educate the people, and to impress upon them the superior claims of homeopathy over every other system. Homeopathic literature, in the form of the tractates published by the Homeopathic Publishing Company, of 12, Warwick Lane, London, for general distribution, have done a good work in the past, in the mother country, in making fresh converts to homeopathy; and there is no reason, that I am aware of, why their use in New South Wales should not be attended with the same successful results. Dr. Burnett's "Fifty Reasons," for instance, are written in a clear, simple, and convincing style, and appeals directly to the intelligence of the reader. "Fallacies and Claims" is also a very useful little treatise. There are

many others, too numerous to mention separately, which would prove of use.

Public lectures on the subject of homeopathy would also be a means of making our system of treatment better known to the public, and be the cause of gaining converts.

I consider that the thanks of homeopaths in general is due to our physicians and chemists in not placing their light under a bushel, as I have known numerous instances where the success achieved by them in the treatment of disease has been the means of opening the eyes of hitherto old-school patients, and convincing them of the truth of the law of similars.

"A homeopathic hospital wanted!" is the cry of the followers of Hahnemann in Sydney, and the need for such an institution is indeed a great one, so that "the sick and needy who believe in the system may have prompt and proper treatment." I have come across some people who asserted that as they had only to die once, they might as well die an orthodox death, under orthodox treatment, instead of placing their faith in new-fangled ideas. By an "orthodox" death I presume that they meant "a death resulting from a drug disease." With such I have no sympathy; the working of a homeopathic institution will not be laid down on "orthodox" lines, but on the principle of the law of similars.

The working of the old-school hospitals in Australia, as I daresay it is elsewhere throughout the world, is not quite up to the mark that one would wish them to be, and forms a strong contrast to the management of the Melbourne Homeopathic Hospital.

Fraternally yours,

FREDERICK KÖPP.

Greenwich, N.S.W., April 26, 1895.

VARIETIES.

ARSENIC TREATMENT OF CANCER.—At the Medical Gesellschaft, Lassar showed a woman whom he had successfully treated for melanotic tumour of the breast with *Arsenic*. In his remarks he said that all were familiar with the general and rapid progress that these tumours made in spite of surgical treatment where they usually recurred. All had a wholesome dread of the systematic affection which early occurred, and that literature confirmed. Some of these neoplastic growths were slow in their increase, others more rapid, but the present case came under the former category. It appears that the steel of her corsets had pressed unduly on the mammilla, after which a nodule appeared. The treatment adopted seems to have been caustic, or blisters to the part to reduce the swelling, which evidently gave it a new impetus, for after a week we are told it

assumed the size of a large pear, when energetic treatment by extirpation was proposed. Lassar commenced internal treatment with five drops of Fowler's solution three times a day after food. From the very first week after this treatment was commenced the tumour began to shrink, often succeeded with pauses, but still the size retrograded till the present year, when it has finally disappeared. The treatment has been discontinued for two months, and no recurrence is evident. He notes one particular which is worth bearing in mind in connection with nevi which increased during the treatment with *Arsenic*. He believes, however, that heteroplasmic neoplasms of malignant character can be easily counteracted by *Arsenic* if promptly applied at an early stage of progress.—*Medical Press*, Aug. 11, 1894. (Berlin Letter.)

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.

- Allinson (T. L.). Lung Complaints. Cr. 8vo. pp. 104. (Fowler, 1s.)
- Ballantyne (J. W.). The Diseases and Deformities of the Fœtus: An Attempt Towards a System of Ante-Natal Pathology. With Plates. Vol. 2: Congenital Diseases of the Subcutaneous Tissue and Skin. 8vo. pp. 274. (Oliver and Boyd, Edinburgh.) (Simpkin, 10s. 6d.)
- Barwell (R.). The Causes and Treatment of Lateral Curvature of the Spine. 5th ed. Carefully Revised. With numerous Illustrations. Cr. 8vo. pp. 220. (Macmillan, 6s.)
- Boulby (A. A.). Surgical Pathology and Morbid Anatomy. 3rd edition. Cr. 8vo. pp. 652. (Churchill, 10s. 6d.)
- Bramwell (B.). Diseases of the Spinal Cord. 3rd edition. Entirely Re-written and Greatly Enlarged. With 170 Illustrations throughout the Text (some Printed in Colours). 8vo. pp. 659. (W. F. Clay, Edinburgh.) (Simpkin, 16s. net.)
- Bridger (A. E.). Depression: What It Is and How to Cure it. New edition. Cr. 8vo. pp. vi-95. (J. Hogg, 1s.)
- Burnett (J. Compton.). Gout and its Cure. Fcap. 8vo. pp. 180. (Homeopathic Publishing Co., 2s. 6d.)
- Cheyne (W. Watson). Tuberculous Disease of Bones and Joints: Its Pathology, Symptoms and Treatment. With 63 Illusts. 8vo. pp. 384. (Pentland, 14s. net.)
- Foxwell (A.). Essays on Heart and Lung Disease. 8vo. pp. 480. (J. Griffin & Co., 12s. 6d.)
- Frothingham (L.). Laboratory Guide for the Bacteriologist. Illust. Royal 8vo. (Hirschfeld, 4s. net.)
- Galbraith (Anna M.). Hygiene and Physical Culture for Women. Illust. Cr. 8vo. pp. xxix-294. (B. F. Stevens.)
- Green (T. H.). An Introduction to Pathology and Morbid Anatomy. 8th ed. Revised and Enlarged by H. Montague Murray. Illust. by 224 Engravings. (Renshaw's Manuals.) 8vo. pp. 580. (Renshaw, 17s.)
- Guernsey (Wm. Jefferson). The Homeopathic Therapeutics of Hemorrhoids. 2nd ed. Demy 8vo. pp. 142. (Horn Publishing Co., 5s. net.)
- Harris (T.). Endurative Mediastino-Pericarditis. Reprinted from the *Medical Chronicle*, 1894-5. Royal 8vo. pp. 68. (Smith, Elder, 5s.)
- Illingworth (C. R.). An Address upon Hydrophobia, Dog-Bites and other Poisoned Wounds. 8vo. s.d., pp. 32. (Baillière, 1s.)
- Keating (J. M.) and Hamilton (H.). Kimpton's Pocket Medical Lexicon: Being a Dictionary of Words and Terms used in Medicine and Surgery. Collated from the Highest Authorities and Brought up to Present Date, with Addenda, consisting of the Etymological Factors Common in Medical Terminology, Comparative Tables of Metric and Apothecaries' Weights, a List of Poisons and their Antidotes, and Abbreviations used in Prescriptions. 18mo. pp. 280. (Kimpton, 2s. 6d. net.)
- Kocher (Theodor) Text-Book of Operative

- Surgery. Translated with the Special Authority of the Author, from the 2nd Revised and Enlarged German ed. With 185 Illusts. Roy. 8vo, pp. 318. (Black, 20s.)
- Ostrom (K. W.) Massage and the Original Swedish Movements: Their Application to Various Diseases of the Body. 3rd ed. Revised. Illustrated. 16mo, pp. 158. (Lewis, 3s. 6d. net.)
- Parkes (L. C.). The Elements of Health: An Introduction to the Study of Hygiene. Illustrations by Henry Parkes. Cr. 8vo, pp. 256. (Churchill, 8s. 6d.)
- Prentice (Chalmers). The Eye in its Relation to Health. 8vo, pp. 210. (Wright, Bristol. Simpkin, 6s. 6d.)
- Raymond (J. H.). A Manual of Human Physiology. Prepared with Special Reference to Students of Medicine. With 102 Illusts. in Text, and 4 full-page Coloured Plates. Cr. 8vo, pp. 860. (Kimpton, 6s. net.)
- Skene (A. J. C.). Medical Gynecology: A Treatise on the Diseases of Women from the Standpoint of the Physician. With Illusts. 8vo, pp. 534. (Pentland, 21s.)
- Spencer (W. H.). A New Method of Inhalation for the Treatment of Diseases of the Lungs. Cr. 8vo, pp. 64. (Scientific Press, 1s. 6d.)
- Surgery. Part. 1: Hemorrhage Repair, Inflammation, Suppuration, Ulceration, Mortification, Erysipelas, Wounds, Burns. 12mo, pp. 70. (Livingstone, Edinburgh. Simpkin, 1s. net.)
- Syllabus of Gynecology. Based on the "American Text-Book of Gynecology." By J. W. Long. Oblong 12mo, pp. 134. (Hirschfeld, 4s. net.)
- Vintras (A.). Diabetes and its Treatment. 12mo, pp. 24. (Baillière, 2s. 6d.)
- Walsham (W. J.) and Hughes (W. K.). The Deformities of the Human Foot and their Treatment. 8vo, pp. 550. (Baillière, 18s.)
- Williamson (R. T.). On the Relation of Diseases of the Spinal Cord to the Distribution and Lesions of the Spinal Blood Vessels. 8vo, 6ds., pp. 44. (Lewis, 5s.)
- Yingling (W. A.). The Accoucher's Emergency Manual. Fcap. 8vo, leather. (Hom. Publishing Co., 6s. 6d. net.)

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 the "MANAGER" of the Homeopathic Publishing Company, 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 Mr. Fredk. Kopp, Greenwich, N.S.W.; Dr. Bose, Calcutta; Mr. Rendall, Torquay; Dr. Newell, Crowborough; Dr. Murray Moore, Liverpool; Dr. Mahony, Liverpool; Dr. Gallavardin, Lyons; Mr. J. Meredith, Lydney.

BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Chemist and Druggist.—Homeopathic Review.—Maanedskrift f. H.—International Brief.—N. A. J. of Homeopathy.—Allg. Hom. Zeit.—Hom. Maandblad.—Calcutta J. of Medicine.—Hom. Envoy.—La Homeopatai.—Minneapolis Hom. Mag.—Pacific Coast Journ. of Hom.—Medical Mission Herald.—Southern Journ. of Hom.—Med. Argus.—American Homeopathist.—N. Y. Med. Times.—Journ. of Official Surgery.—Med. Visitor.—Hom. Recorder.—Report Hom. Medical School of Calcutta—H. J. of Obstetrics.—Family Doctor.—Archiv. f. Hom.—Med. Century.—Monatsblätter f. H.—Indian Hom. Review.—Med. Advance.—Clinique.—Vaccination Inquirer.—Report Torquay Hom. Disp.—The Eye in its Relation to Health, by Dr. Prentice.—London Homeopathic Hospital Reports, Vol. IV.

THE HOMEOPATHIC WORLD.

AUGUST 1, 1895.

THE NEW HOSPITAL BUILDING.

At last the object of so many years of thought and effort is an accomplished fact. The London Homeopathic Hospital is now housed in a building designed and erected expressly for its special requirements and not adapted from buildings previously erected for some other purpose. No pains or expense have been spared to render the new edifice in all essential particulars everything that a hospital ought to be in point of sanitation; and the result is one upon which all who have had to do with the work are to be heartily congratulated.

We publish elsewhere a full and official account of the Opening Ceremony, with a description of the building; and also an account of the Banquet in celebration of the event, both of which functions were eminently successful and pleasant. Readers of the speeches made at the banquet will find that the whole of the expenses have been subscribed with the exception of £6,000—a sum which we have no doubt the friends of homeopathy who have not yet found an opportunity of doing so will hasten to provide.

The year 1895 will be for ever an epoch in the history of British Homeopathy. A fillip should be given to the enthusiasm of both medical and lay adherents of the system, and we trust and expect that Mr. Cross, the indefatigable Secretary-Superintendent, will find no difficulty in securing subscriptions to make up the additional £2,000 a year required to keep the wards full.

SEROPATHY.

WE publish in another part of our present issue an interesting paper by Dr. SIMPSON, of Liverpool, in which he contends that the accidents which have followed the injection of antitoxic serum have been due to impurities in the serum. In our opinion the blame must be put elsewhere, namely, on the method of injection itself. As we have already stated, we look upon this class of preparations as identical with the nosodes used in homeopathy (as Dr. Roux himself has virtually admitted), but the manner of their preparation and administration we regard as little less than barbarous. To our thinking the proper method of administering medicine is by what are justly termed the "via naturales." Injection into the tissues or into the blood is a distinctly unnatural and violent method, and the experience of homeopaths has shown it to be entirely unnecessary. Moreover, in the particular case of diphtheria, the results of ordinary homeopathic treatment are so far superior to anything brought forward by the advocates of Seropathy that there is no likelihood of its gaining favour in our school. But the principle, the use of the attenuated virus of a disease in the treatment of patients suffering from the disease is nothing more nor less than homeopathy itself, and as such demands our attention.

The following article from the July number of *The New York Medical Times* bears out, from another point of view, our contention as to the danger of the injections, and explains the cases of sudden death that have occurred when the *Antitoxin* has been used, either as a prophylactic or curative, better than the hypothesis that they have been due to some undiscovered impurity. Living substances ought not to be forced into the organism. If given at all they should enter through the proper portals of the digestive tract. Here is the article:—

THE DANGERS OF ANTITOXIN.

"What seems to us the strongest argument yet brought against the employment of *Antitoxin* as a specific for diphtheria, is conveyed as

follows in a recent communication to *The Medical Journal*, by Dr. Samuel Treat Armstrong:—

“Those that heard Dr. Winters’ very comprehensive criticism of the value of *Antitoxin* serum in diphtheria, at the meeting of the Academy of Medicine on the 4th inst., cannot but feel that an important factor has been overlooked in the consideration of the treatment with this substance; and that factor is the globulicidal power of alien serum on the blood of an animal into which it is injected.

“In a monograph on transfusion of the blood, published in 1875, L. Landois reported that the serum of the dog, the horse or the rabbit, dissolved the red globules of other animals with great rapidity. And in the last edition of Professor Stirling’s translation of *Landois’s Physiology*, there is the statement that, if the serum of one animal is transfused into an animal of another species, the blood corpuscles of the recipient are dissolved, and if there is a general dissolution of the corpuscles death may occur.

“Dr. G. Daremberg (*Arch. de Med. Exp.*, 1892) stated that his experiments showed that, while the serum of an animal of one species did not destroy the red corpuscles of an animal of the same species, it rapidly destroyed the corpuscles of an animal of another species. If warmed to from 122° to 140° F., or exposed to the light for several days, the serum lost this globulicidal power.

“G. Haymen, in his monograph on the blood, states that the serum of the ox more or less profoundly changes the blood of the dog, producing in it small emboli that may involve the functions of organs or even life itself. Microscopally, these emboli consist of degenerated elements of the blood, the hemotoblasts and the red and white corpuscles being altered by the serum. He specifically states that horse’s serum produces phenomena similar to those caused by ox’s serum. He further states that the urine is habitually suppressed and the kidneys are congested.

“The tendency of alien serum to produce emboli has also been noted by C. Lazet (*La France Méd.*, 1891), who found that if the serum of a dog was mixed with the blood of a man, or *vice versa*, there were produced more or less pronounced alterations, and solid concretions were formed from the metamorphosed elements.

“The author believes that it was this tendency of alien serum to form emboli, that caused the death of the seventeen-year-old girl in Brooklyn. And this toxic influence of serum *per se* explains all the unusual and untoward phenomena that have been reported in diphtheria patients treated by *Antitoxin* serum. The post-mortem lesions found in the five-year-old child, whose clinical history is reported in *The British Medical Journal* for March 30th, correspond throughout with those observed by Haymen in dogs that died from the

effects of alien serum injections, though the animals were given forty times as much serum as the human being.

"Empiricism that has bacteriology as its sole foundation, is as condemnable as any other form of that cult, and as prognosis is not yet a lost art, it seems absurd that the medical profession should accept the dictum that all persons whose nasal or faucial secretions contain the Klebs-Loeffler bacilli, should be injected with *Antitoxin* serum. There are many recorded instances in which the bacilli have been found in the secretions of healthy individuals, and there are some recorded instances in which these bacilli have not been found in patients who clinically presented the phenomena of the disease, even to the secondary paralysis.

"While *Antitoxin* serum probably has a field of usefulness, it is evident that nice discrimination is necessary to designate wherein it lies."

For an example of cool experimentation on hospital patients the following from *The British Medical Journal*, of May 18th, is not bad :—

"PHYSIOLOGICAL ACTION OF ANTIDIPHTHERITIC SERUM.

"Mya (*Lo Sperimentale*, April 11, 1895) has investigated the physiological action of the serum in children *not suffering from diphtheria* [*Italics ours*]. They were cases of slight measles, malarial cachexia, mild rickets, and slight laryngeal catarrh. The ages were 6 years, 18 months, 2 years, and 29 months respectively. In these four cases there was no noteworthy action on the circulatory apparatus or kidneys. In the case of mild measles, slight arrhythmia, noted before injection, was not aggravated by it. The author says that this arrhythmia is sometimes seen in children after infective diseases. No change was produced in the temperature, except in one case in which a scarlatiniform rash appeared. A slight increase in the quantity of the urine was observed, and also in the amount of urea. The most obvious change was noted in the blood, and consisted in an increase of the white cells and diminution of the red cells immediately after the injection; it was transitory, not lasting more than twenty-four to forty-eight hours, and was not accompanied by any alteration in the colouring matters of the urine. The author's results correspond with those of Zagari and Calabrese, but he does not agree that there was any hemolytic action exercised by the serum. He thinks that the injection of a heterogeneous serum causes a dilution of the blood, which is brought about by the absorption of lymph. Sevestre has lately shown that the injection of horse's serum produces fever and urticaria in children. Mya is of opinion that the antidiphtheritic serum exercises no noxious action such as can be appreciated by

present methods of examination, and that disturbances hitherto noted have been due to the lymphagogue action of the horse's serum introduced subcutaneously."

Mya was very fortunate in not experiencing the graver results noticed by other observers. His experiments, however, do not by any means prove the innocence of the serum, but quite the contrary, especially in respect to its destructive effect on the blood, thus confirming the statements contained in the foregoing quotation. Moreover, the possible remote effects of the introduction of animal serum into the tissues can only be shown after a lapse of time.

Another point to be borne in mind is that the serum is not pure: it is treated with various antiseptic substances in minute but quite medicinal quantities, the possible therapeutic effect of which must be taken into account.

Finally, the chorus of praise is not by any means unanymous, as witness the weighty criticisms of Dr. LENNOX BROWNE in his *Comparative Study of the Treatment of Diphtheria, especially in regard to Antitoxin*.

SANGUINARIA.—*Sanguinaria* in the third dilution taken for four or five days produced a severe pain localised in a small spot over the upper portion of the right parietal region. The pain became so violent that the experimenter was obliged to discontinue the remedy.—*Journal Belge* (Dewey in *Medical Century*).

CHELIDONIUM.—This remedy in the sixth cured a case of pneumonia of the right side, appearing as a sequel of whooping cough and measles. The respiration was short, the fever very high and the attacks of cough were convulsive, appearing every half-hour. In twenty-four hours sub-crepitant râles appeared, and in three days the number of attacks of cough was reduced to five.—Dewey in *Medical Century*.

OLEANDER.—*Oleander*, twelfth, cured a case of crusta lactea in three weeks which had lasted fifteen months. It was situated behind the left ear over the left cheek, the crusts were brownish-black, the odour was fetid, the hair was matted together. On removing the scabs the excoriation left was very moist. According to Lilienthal the following are the essential symptoms of *Oleander*: Eruptions on the scalp and behind the ears with much oozing, and extending to the cheek.—Dewey in *Medical Century*.

NEWS AND NOTES.

A SNAKE-VENOM ROMANCE.

It is well known that Constantine Hering was the first to prepare, prove, and use snake-venom as a remedy in disease, but few know the heroism this great therapeutic genius—the second name to Hahnemann's in homeopathy—displayed in obtaining his first supply of venom and in experimenting with it on his own person. The thrilling story is told in full in the June number of *The Minneapolis Homeopathic Magazine*, by one of Hering's old pupils, Professor W. E. Leonard, from whose article we will make a quotation.

“When a young man of thirty-five” [*i.e.*, in 1835; Hering was born on the first day of the century—January 1, 1800.] “Hering and his wife were directing, on behalf of the German Government, botanical and zoological collectors from a temporary dwelling on the edge of the tropical forest of the upper Amazon. The natives, who were his sole assistants, had told Hering much about the deadly lance-headed viper” (*Trigonocephalus Lachesis*), “and he offered liberal rewards for the capture of a living specimen. Finally, one day, a bamboo box was brought in hastily and placed in his rooms. Immediately, to his amazement, not only those capturing the serpent, but also his entire native household, fled precipitately from the place! They saw no hope for their master or his wife if he proposed to deal in any way with a living ‘Churukuku’—the native name for the reptile. He was left to obtain the venom from this creature with his wife's aid alone, and at the imminent risk of his life. This was accomplished by stunning the serpent by a heavy blow as the box was opened, then holding its head in a forked stick, and pressing the poison out from the venom-bag upon sugar-of-milk.”

The effect of handling the virus, and preparing it in triturations with sugar-of-milk, was to throw Hering into a fever with tossing delirium and mania. His wife watched him anxiously through the night, alone in the forest, miles from any other human being, not daring to think of the possible effects of such a violent poison, and having no knowledge of any antidote. “Toward morning he slept, and finally awoke, his mental vision cleared from the passing storm. His first question, when a little water had moistened his throat, was—‘What did I do and say?’” It was all too vividly imprinted on his wife's mind for her to forget: the symptoms were written down, and this constitutes the first homeopathic proving of *Lachesis*. Thus, “Before their native helps, one by one, crept sheepishly back to

the camp, expecting to find their corpses, this enthusiastic couple had prepared all the *Lachesis* since used by the profession, and had begun a reliable pathogenesis of one of our greatest remedies." This historic serpent is now preserved in alcohol in the American Academy of Science, in Philadelphia. The reptile is a large one, growing to seven feet or more in length, with fangs nearly an inch long; it has a reddish-brown skin marked along the back with blackish-brown rhomboidal spots.

THE EFFECT OF EXCESSIVE HOT WEATHER IN INCREASING
THE VIRULENCE OF SNAKE-VENOM.

The following paragraph is from the Rome letter of *The Lancet* of July 20th:—

"The excessive heat prevailing these last few weeks throughout the kingdom has had one remarkable effect—to increase the virulence of snake-bite and the mortality thence arising. This is a very common lesion in Italy, where so many of the agricultural poor are employed in the *macchie*, or tracts of stunted forest growth, mainly in gathering fuel for the charcoal burners. As a rule the vipers with which these places abound are not deadly—at least, the wounds they inflict are nearly always susceptible of a few days' cure in the local hospital. With the intense heat, however, that since the middle of last month has made itself felt throughout the peninsula a distinct exacerbation of the lesion has declared itself, and cases of death have been so common, particularly in the Alta Italia, as to engage the serious attention of practitioners. On the 13th inst. (I hear from Brescia) a youth of fifteen was bitten on the foot by a viper at Lumezzano, and in a few hours the familiar symptoms of virulent snake-bite (swelling, pain, and ultimately coma) developed themselves, and he died in violent convulsions—all medical aid notwithstanding.

DR. T. F. ALLEN.

DURING a recent visit to Europe Dr. T. F. Allen spent a short time (much too short) in London, and many of his friends had an opportunity of meeting in the flesh one who has made the whole homeopathic fraternity his debtors by his works on *Materia Medica*, with which all are familiar, and notably by his *magnum opus*, the *Encyclopedia of Materia Medica*. Although one of our veterans, Dr. Allen is quite youthful in his enthusiasm for the homeopathic art, and his visit proved most refreshing to all

who had the happiness to meet him. His presence gave an additional interest to the opening functions of the new hospital building and the subsequent banquet. We look for his return next year, when he promises to attend the International Homeopathic Congress to be held in London, and to bring with him an ocean liner full of his compatriots. We can guarantee them a hearty British welcome.

DR. BRASOL.

ANOTHER distinguished *confrère*, Dr. Brasol, who so worthily upholds our system in the Russian capital, has paid a flying visit to London. Unfortunately he arrived just too late for the hospital festivities, but he has been able to look up some of his old friends and acquaintances. He makes a suggestion which we hope will bear fruit—that the International Congress of 1896 will be combined with a celebration of the centenary of Homeopathy. It was in 1796 that Hahnemann published in *Hupland's Journal* his "Essay on a New Principle for Discovering the Curative Properties of Medicine," which was the first enunciation of homeopathy.

"KILL OR CURE."

MR. FREDERICK KOPP sends us the following cutting from the *North Shore and Manly Times*, accompanied with his own comments:—

"The melancholy circumstances surrounding the death of Sir Robert Duff show the absolute uncertainty which attends the practice of medicine. The real state of the disease from which he was suffering could not be diagnosed with precision by five of the presumably most skilful surgeons of the colony, and resort was had to the knife to reveal the condition of the deceased; and the revelation was of such a nature as to lead the surgeons immediately to close the incision, and to declare the prospect of recovery hopeless. Without reflecting in the slightest degree upon the professional men who performed or recommended the operation, which was doubtless conducted with consummate skill, it must be admitted that there are surgeons who, when confronted with a difficult case which obstinately resists all their attempts at treatment, or which possibly they cannot diagnose, adopt straightway the motto, 'Kill or Cure,' and make a too free use of the knife. Law and medicine are two of the liberal professions, both liberally remunerated, and both equally untrustworthy in their practice."

"After reading the above," says Mr. Kopp, "as to the *absolute uncertainty* attending the practice of medicine, and the *untrustworthy* character thereof, the advocates of the old system of treatment must feel anything but encouraged. Drs. Fiaschi, H. Sydney Jones, Scot-Skirving, A. Jarvie Hood, and A. McCormic, the surgeons above mentioned, are acknowledged to be five of the leading allopathic physicians in the city of Sydney, and their failure in the above case, deeply regretted as it is not only by the people of New South Wales, but of all the Australian colonies generally, once more painfully illustrates the utter uselessness of the knife in affecting a cure. His Excellency, according to Dr. Fiaschi, caught a chill while sleeping in a bedroom with an open window, on an intensely hot night; the chill was followed by severe congestion of the liver, which was afterwards accentuated by jaundice, and terminated in multiple abscess of that gland, which Dr. Fiaschi rightly asserts is a very serious disease; estimating that in the case of single abscess only, with 'good luck,' an average of 85 per cent. is all that can be hoped for under ordinary medical treatment. Allopathic medicines in the above case proved useless, and so also did the subsequent operation. One cannot help thinking what a different tale might have been told had the patient been placed under *homeopathic* treatment. Supposing the history of the attack to be correctly given, the prompt administration of *Aconitum Napellus* at the commencement would in all probability have speedily counteracted the evil effects of the chill, the complications that supervened would probably have been avoided, and the life of the governor spared. The practice of *homeopathic* medicine is undoubtedly far from being 'untrustworthy' and an 'absolute uncertainty,' and the motto also of 'Kill or Cure' is unknown to the disciples of Hahnemann."

ANOTHER SERUM "ACCIDENT."

THE Paris Letter of *The Chemist and Druggist* of July 15th contained the following:—

"SERUM-THERAPY.—The last report of the Seine Council of Hygiene contains an article concerning a case of death by the anti-diphtheria serum. The patient was a six-year-old child who was suffering from a sore throat. As the nature of the malady could not be exactly determined, a preventive injection by Dr. Roux's method was made while awaiting the result of the bacteriological examination. This analysis did not show any trace of diphtheria, but the child died eight days after the injection of the serum. A doctor of the Children's Hospital, who had been called in for consultation, expressed the opinion that death was probably due to acute poisoning resulting from the serum. Professor Prout was consequently requested to examine into the question, and he concluded that it would be very difficult not to incriminate the serum. In the case in question he thought it might have been more prudent to await the result of the bacteriological examination, but expressed the opinion that if such was laid down as a rule precious time might often be lost. Dr. Prout

further says:—"Another question might be asked—Was not the dose too large? The anti-diphtheria serum at present supplied by the Pasteur Institute is more active than when the inoculations were first commenced. In view of this it may be advisable, especially in doubtful cases, to inject only 5 c.c. The initial dose at the commencement was 20 c.c., and an injection of 10 c.c. was made in this instance."

HOMEOPATHY: ALL ABOUT IT.—ALLOPATHIC RECOGNITION.

THE *Journal de Médecine de Paris* of July 14th contains an appreciative review of *Homeopathy: All about it*, which is all the more welcome as appearing in an old-school publication. From the review, which is signed by Dr. Serrand, a few passages may be translated:—

"A book quite small in dimensions but rich in documents and full of interest, from the first chapter, 'How I became a Homeopath,' to the last, 'Homeopathy in Aphorisms'—every portion of it deserves to be read.

"One of the most attractive chapters is that in which the author tells the story of the life of Hahnemann—that Littré of Germany, chemist, man of letters, linguist, clinician, and thoroughly honest man. The narrative is relieved with a spice of humour which renders the reading exceedingly pleasant. . . .

"The author concludes with aphorisms into which, under a clear and concise form, he concentrates, as his title says, 'Homeopathy: All about it.' Whatever may be thought of the doctrine of Hahnemann, all must allow that Dr. Clarke's little book is full of interest and charm."

It may be mentioned that *The Medical Press*, among English allopathic journals, very favourably noticed the same work.

ANNUAL HOMEOPATHIC CONGRESS.

WE would remind our readers that the next Annual Congress of British Homeopaths will be held at Leeds on Thursday, September 19th.

ELAPS 6 has been found by Dr. E. V. Moffat to be almost a specific in chronic naso-pharyngeal catarrh, with greenish crusts and subjective disagreeable odour.—*American Homeopathist*.

ORIGINAL COMMUNICATIONS.

THYROIDIN.

I. SKIN CASES.

By JOHN H. CLARKE, M.D., Physician to the London Homeopathic Hospital.

THE following cases are condensed from reports in *The British Medical Journal* and *Lancet*. They are numbered consecutively to those collected in Vol. xxix. (1894) of THE HOMEOPATHIC WORLD, the last of which will be found on p. 250. The series comprises cases of (1) Skin disease, (2) Insanity, and (3) Tetany, traumatic and idiopathic. In the present article I have arranged the *Skin Cases*. The cases of *Insanity* and of *Tetany* will be given in subsequent numbers.

[*Brit. Med. Jour.*, March 30, 1895.]

PITYRIASIS RUBRA.

34. SCATCHARD. Woman, 72, in December, 1893, began to suffer from redness and scaliness of skin of legs and arms, accompanied by intense itching. The condition was that known as *pityriasis rubra*. The legs and forearms presented large patches of redness and thickening, over which were numerous large flat, translucent scales, which became easily detached. By October, 1874, the whole body had become more or less affected, with the exception of the cheeks, and wherever she went she left scales. The usual treatment had no effect—*Ichthyol*, *Iodide of Potassium*, *Salicylate of Sodium*, *Perchloride of Mercury*, and *Arsenic* were all given in vain, and the last in ten-drop doses of the solution.

On October 5th half a five-gram tablet of *Thyroidin* (B.W.) was given daily after dinner, and this was gradually increased. In twelve days decided improvement was visible, and continued till, by January 8th, the skin had become normal in appearance. On November 12th the *Thyroidin* was discontinued, but renewed on December 9th—one tablet daily, as the *pityriasis* showed signs of returning. A patch of *eczema* was not improved by the treatment, and though the itching was greatly lessened, it did not disappear.

The constitutional symptoms produced by the treatment were as follows :—

Great emaciation.

Depression.

Anemia.

Short breath (from heart failure).

These effects passed off on ceasing the treatment and giving *Strychnine* and wine.

[*Ibid.*]

ICHTHYOSIS.

35. NOBBS. Man, 46, suffering from general paralysis. Had had ichthyosis all his life. General condition as follows :—Hair sparse ; scurf shed easily ; skin universally dry, even in perineum and axillæ, desquamating over trunk in large flakes. Elbows, wrists, knees, ankles, backs of hands and feet presented numerous dingy greenish squames, varying in size from lentil to threepenny-bit, firmly adherent, leaving dry white scaly base when detached. Prolonged treatment with a glycerine Extract resulted in very great improvement in the condition of the skin—almost amounting to cure. His general health also improved in the following respects :—

Appetite improved.

Facial expression became brighter.

For a time his personal habits altered for the better.

The progress of the general paralysis became more slow.

[*Ibid.*]

PSORIASIS, &c.

36. PREECE. Unmarried woman, 26, erythema on face, scaly eruption on scalp, psoriasis over body. Mother had same affection for very long time ; sister very intractable eczema of face. Under treatment with tabloids, the skin nearly cleared and irritation left her. The treatment caused on one occasion :—

Severe headache.

Slight rise of temperature.

(*To be continued.*)

REMARKS ON DR. COOPER'S "ARBORIVITAL
MEDICINE"—*AGRAPHIS NUTANS*.

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

Author of *Common-Sense Homeopathy*.

(Continued from p. 300).

WHILE it is good to have a sound theory as the basis of any System of Medicine, it is better to be able to show, on trustworthy evidence, *cures* more numerous and complete than those recorded under other systems or methods. "Arborivital Medicine," being as yet but an infant in age, has not yet amassed clinical results of such importance as to overshadow and excel those of legitimate homeopathy. It exists just now in the experimental stage; but the cases narrated by Dr. Cooper are of considerable interest, as demonstrating distinctly curative powers of certain half-proved or unproved plants. I believe Dr. Cooper to be shrewd enough not to mistake an alleviation for a complete cure, nor to put down a *post hoc* for a *propter hoc*, in his enthusiasm. The sphere of chronic aural disease, which he has chosen as the field wherein to sow the good seed of arborivital remedies, is sufficiently extensive and varied to demand the closest scrutiny, and even a wholesome scepticism of mind as to final "cures" reported by patients with long-standing perforations or loss of the tympanic membrane.

One is surprised at the enormous number of persons, otherwise healthy, who are deaf, partly deaf, or hard of hearing, when once one's attention has been drawn specially to this subject. Certain it is that in Great Britain the proportion of the deaf to the general community very largely exceeds that of the blind and one-eyed. And, furthermore, some occupations, such as that of boiler-maker, iron ship-builder, riveter, and artilleryman, produce deafness in greater proportion to the general body of workers, than other trades produce blindness in their victims. Lastly, as we have no *otoscope* nearly as effective as the perfected *ophthalmoscope*, we are more in the dark about diseases of the middle and inner ear than we are concerning the tunics, humors, and retina of the eye. Dr. W. T. Ord has introduced recently to the British Homeopathic Society a line of study relating to the analogies between eye and ear diseases, which will be

useful and profitable to his colleagues. And many valuable and original observations and practical suggestions are to be found in Dr. Cooper's two works, *Lectures on Inflammation, &c. of the Ear*, and *Vascular Deafness*. But we need more "provings" of remedies which directly and specifically affect the ear and the auditory nerves of healthy persons. For I do not hold with Dr. Cooper (p. 18 of his first pamphlet) that "it is evidence of the drug's action collected subsequently to prescribing, whether it acts in accordance with the law of similars or not, that "we (that is, all true homeopaths) wish to secure." Dr. Cooper and the arborivitalists aim at obtaining this by observance of the disturbance which the remedy sets going in the diseased as well as in the healthy. This principle is much the same as that of our allopathic *confrères* when they are trying a new laboratory drug. Doubtless, however, we ourselves use for the relief of suffering, several medicines, *ex usu in morbis*; but we only use these in this relationship because their provings on the healthy are hitherto incomplete. And nowadays provers are hard to obtain. The clinical results I have been able to gather from the pamphlets thus far published are the following:—

I. *Agraphis* or *Scilla nutans*, now denominated *Endymion* (Nat. Ord. *Liliacee*) our English Blue Bell, is considered by our author to act peculiarly well upon light-haired persons who are subject to catarrhal fluxes from any of the mucous membranes.

Case 1.—C. G., a light-haired girl, aged five, deaf for six months after measles, with pneumonia. Is deaf in both ears, unable even to hear watch. The tympanic membranes perfect. Three doses, given from January 28th to May 27, 1893, cured.

Case 2.—Ellen H., aged nine, deaf for three years from measles, and subject to psoriasis, had four doses of *Agraphis* ϕA from December 10, 1892 to February 4, 1893. Cured by March 11th, not only of the deafness, but of the psoriasis also. The membranes had been perforated in this case.

Case 3.—*Agraphis* greatly improved the chronic deafness from childhood of a lad of seventeen; worse in damp weather; after Dr. Cooper's favourite *Calc.-carb.* 200 and *Calendula* had both failed.

Case 4.—Two doses, given at long intervals, cured a man aged thirty, with a gonorrhœal history of seminal

emissions, catarrhal diarrhoea with pain, and great weakness of the nervous system.

Case 5.—A single dose freed from her attacks for eighteen months an old stout patient, who was bronchitic, asthmatic, and emphysematous.

51, Cannon Street, Liverpool, July 11.

(*To be continued.*)

A LIME-WATER CASE.

By E. D. SHIRTLIFF, L.R.C.P. Lond., M.R.C.S. Eng.

A MIDDLE-AGED single lady had complained of constant chilliness, with extreme sensitiveness to draughts for six years. There was no aversion to open air; but if a wind blew she felt chilly and apprehensive of taking cold. If in bed at night, and door at the top of stairs was left open, she could feel it and would have to get up, come down, and shut it. She is subject to bursting pains in thighs very acute. While they are on there is great restlessness and relief from heat. *Antipyrin* (taken on her own initiative) always relieved and caused a feeling as of warm glow in the affected parts. The patient has fair hair; she is subject to great depression; she is a great walker; has done much nursing through life, and work amongst the poor. There has been no marked relief from any medicines, except above-mentioned *Antipyrin*, though she has been under many doctors, and at least one eminent one (homeopathic). Nothing had ever done her real solid good. The patient had consulted me many times; *Rhus.* had done most good (she must have a hard surface to sleep on), *Nat.-mur.* had done no good, nor *Hepar.* Last medicine prescribed, *Aranea diadema*; finding no benefit from this she left it off, and concluded to try no more doctoring for the trouble.

Her own idea was that it was gout, so she thought she would try lime-juice. The chemist advised lime-water, of which she took a draught at once. Next day all chilliness had gone! and she was still free from it after a week. The patient, full of joy, took lime-water for a week and then left off, as it produced constipation.

Boeninghausen has under "Chilliness" *Calc.-c.* in the third highest rank.

Patient had also had at various times *Aco.*, *Bry.*, *Igt.*, and some others which I forget.

Holmwood, Cowleigh Road, Malvern, July 5th.

THE DIPHTHERIA ANTITOXIN QUESTION.

By THOMAS SIMPSON, M.D.

IN proportion to the severity or gravity of any disease is the eagerness with which a probable specific is hailed by the profession and by the public, and it is therefore natural that the vaunted remedy for diphtheria (*Antitoxin*) should have aroused unusual attention. That undue and unqualified praise of its virtues should have been followed by suspicion and denunciation is by no means without precedent; for Koch's cure for phthisis shared a similar condemnation, as a reaction after great popularity. The publicity that has been given to the researches of eminent German physiologists, and the impartial manner in which the scientific world has been made acquainted with the successive steps that led up to the practical application of the doctrine of immunity in the treatment of diphtheria, has placed in the hands of adventurous manufacturers of the *Antitoxin* sufficient information to enable them to produce a serum which is calculated more to prejudice the value of the original discovery than to supply the demand for an efficient and inexpensive remedy.

It is obvious that in the preparation of a substance of a character so entirely novel, and so thoroughly beyond the limits of ordinary physical and chemical research, as the remedial principle called *Antitoxin*, experience (minute and extended) would play a most important part. The sudden reaction of scepticism which has taken the place of unbounded faith, only justifies the statement made in some quarters that the cure for diphtheria was *not* made merely by inoculating an animal, drawing off its blood (after a few minutes coagulating) and separating the serum (or watery part of the blood). This is the *elementary* principle of the operation, it is true; but its application is complicated by endless attention to detail, otherwise the continental manufacturers, who were first in the field (under the able counsel of Dr. Aronsen and others), would have had an easy task in maintaining an ample and continuous supply from the first. Nevertheless, the public excitement that still waxes

strong over a discovery which appeals to every home of childhood, must not be permitted to be deluded into the belief that all preparations which are introduced to the notice of the profession have equal value, neither should occasional failure of success deter from the endeavour to cure by the new remedy; for it is notorious and lamentable that preparations have found entrance into the market which a careful examination has proved to be too weak to be reliable, and other specimens which teemed with bacterial life. Such preparations are calculated to bring the discovery into discredit by depreciating its success, in false results and evil consequences. As yet no accurate convenient test has been found by which a physician can assure himself of the activity of the vaunted specific, or safeguard his patients from bitter disappointment. In this emergency Dr. Aronsen has led the way to final success of the treatment, providing a guarantee of purity and efficacy, by placing under State control and inspection the diphtheria *Antitoxin* manufactured in the Schering Bacteriological Department under his able supervision. The State control of this diphtheria *Antitoxin* comes immediately into effect, being conducted under the following conditions:—

I. That the serum be perfectly clear.

II. That no addition of preservatives is made.

III. That the preparation possesses the specific degree of immunising power.

This control is carried out in the Berlin Institute for Infectious Diseases, the weighing-out, drawing of samples, and filling of phials being conducted in the presence of a sworn State official; further, the State requirements include the keeping of a control-book, in which entries are made of all the animals, the period of their treatment, and all details of the experiments. Only when these requirements are satisfactorily fulfilled is the Imperial insignia stamped upon each phial, and *this* is a guarantee that the preparation has been made, tested, and put up under direct supervision of State officials and independent scientific experts.

Having now a source of supply upon which we can fully rely, it is incumbent upon medical men to put to the test this well-authenticated remedy whenever opportunity occurs; and we are gratified to know that the Local Government Board has made provision for the supply of reliable lymph to any private practitioner who will apply to the medical officer of health of his district.

The importance of a careful selection of the nosode (Diphtheritic Antitoxine) can scarcely be too strongly urged upon any who elect to test the effect of it at the bedside, as will appear from the following instance of grave results from the use of a spurious specimen :—

“HORRIBLE DEATH BY POISONING.

“A fatal misadventure, arising out of the application of a fluid believed to be the new *Antitoxin*, is reported in the New York papers. Miss Valentine, a young lady aged 17, residing in Williamsburg, had nursed her cousin, Louis Hampston, nine years old, who was attacked with malignant diphtheria. Dr. J. L. Kortright, a well-known specialist, whose papers on Antitoxin and other subjects, which he has read before the King’s County Medical Society, have attracted considerable attention, was called to see the boy, and said he could not live. He was begged to try Antitoxin, and consented, although he said that no human aid could save the boy’s life. He accordingly applied to the American agents of the Behring Company, of Germany, for a dose of *Antitoxin*, and received the Pasteur lymph, which he administered to the boy, but, as he predicted, the child died that afternoon. Next day Miss Valentine went to her next-door neighbour and complained of a sore throat. Within an hour, Dr. Kortright called at the house. He examined the girl, and told her that she had a slight attack of diphtheria, but it would be readily checked by the use of *Antitoxin*. A second packet of the *Antitoxin* was for this purpose obtained from the agents, on which was printed a statement to show that it contained *Antitoxin* put up in Germany on January 20th, and Dr. Kortright injected the contents of a bottle, about $2\frac{1}{2}$ drachms of fluid, into Miss Valentine’s left arm. It was evident immediately afterwards that something was wrong. Miss Valentine complained of a tickling sensation throughout her body, and sank to a lounge near where she was standing. She was unable to sit up, and fell back on the lounge. Her face blackened, and she went into convulsions. Five minutes after she sat on the sofa, and eight minutes after the fluid was injected into her arm, she died. Dr. Kortright had been unable to do anything for the girl, so rapidly had the poison done its work. When she ceased to breathe, Dr. Kortright said to Miss Valentine’s parents, ‘There has

been some terrible mistake.' He subsequently told a reporter, 'The whole thing is a mystery to me. When the *Antitoxin* was prepared in Germany, some powerful poison must have been mixed with it. I have used Pasteur's *Antitoxin* with singular success. This is the first experience I have had with Behring's lymph. When Mr. Valentine handed me the package it was tightly sealed, and a bottle, encased in wooden box, was tightly corked. The fluid was of a pinkish tint, and resembled the Pasteur lymph. I never witnessed a more horrible death. I cannot say where the blame should be laid, but I believe the mistake was made in Germany.'"

Further comment is needless.

Waterloo, May 12th, 1895.

REMARKS ON THE "MATERIA MEDICA."

IGNATIA.

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

IGNATIA. Under the general remarks, the following important observations are made:—Owing to the power it possesses of producing alternate effects in quick succession, *Ignatia* is specially adapted to the treatment of several acute diseases, as may be seen from the symptoms it produces. It may be considered a polychrest. Generally its action lasts only a few days; however, in certain constitutions and conditions it is incapable of bringing on evacuator processes; in such cases I have seen it act nine days. It is very seldom useful in the treatment of chronic affections, and can only be used in such cases as an intermediate remedy. One of the characteristics of *Ignatia*, which very few other remedies possess, is this—that it produces a double order of symptoms, antipathic one to the other. In giving *Ignatia*, that series of symptoms which is antipathic to the disease itself may, from a cause unknown, be brought into action, and, although palliating the disease at first, may aggravate it afterwards; in this case a second dose will effect a cure. The necessity of administering a second dose occurs very rarely; the first dose generally does all the good required, provided the remedy was exactly homeopathic to the symptoms. In case it should have

been administered in too large a dose, and should have produced an excess of sensibility, susceptibility, or hurriedness, &c., coffee is the antidote; but in cases where it had been exhibited without being homeopathic to the disease, its effects may be antidoted by *Pulsatilla*, *Chamomilla*, and sometimes by *Cocculus*, *Arnica*, *Camphora*, or vinegar. Although the effects of *Ignatia* are very similar to those of *Nux Vomica* (which similarity does, indeed, point to a botanic affinity of both plants), nevertheless, those two drugs correspond to very different conditions, were it only for this reason: that the temperaments of those patients for whom *Ignatia* is indicated is very different from that of those who are more favourably acted upon by *Nux V.* *Ignatia* is not suitable for persons or diseases characterised by anger, vehemence, &c., but by sudden alternations of cheerfulness and disposition to weep, or by those other moral conditions which *Ignatia* realises in the healthy body, provided, of course, that the physical symptoms likewise correspond. *Ignatia*, even a high potency thereof, is a chief remedy against the evil effects of chagrin in persons who are not in the habit of breaking out into vehemence or of seeking revenge, but who keep their chagrin concealed and dwell upon it in their recollections. Epileptic fits which only break out after chagrin or grief about a moral wrong (and never appear from any other cause), may be prevented by *Ignatia*; but it is very improbable whether epileptic fits of a different kind may be, or ever have been, cured by that drug; in those cases, at least, which are said to have been cured by *Ignatia*, it has always been given in combination with other drugs, or the cure had not been completed. A first attack of epilepsy, brought on by some contrary event, and assuming a threatening aspect, either on account of its duration or instantaneous return, may be, in most cases, permanently cured by one small dose of the tincture of *Ignatia* (I know this from experience); but it is different as regards chronic epileptic fits; these can no more than other chronic diseases be permanently relieved by *Ignatia*. The reason is, that the primary symptoms of *Ignatia* constitute a double series, antipathic the one to the other, and reproduced in the treatment of disease. If the first dose act by its series corresponding to the disease, a second dose cannot be administered without aggravating the disease, realising in this manner all the injurious secondary effects of a palliative,

Hence it is that *Ignatia* can only be used in sudden attacks and acute diseases. *Ignatia* should be administered in the morning, except in cases of necessity; if taken just before bedtime, it disturbed the night's rest. It is seldom necessary to give more than a drop of the ninth or twelfth potency at a dose. Coming now to detailed symptoms, we have—*moral*: anguish, as if he had committed an evil deed; after a mental exertion, especially in the morning, his will becomes precipitate; is unable to speak, write, or do anything else as fast as he would like: this induces an anxious demeanour, wrong talking, writing, and awkwardness of proceeding, requiring constant correction (a. 20 h.); she fears she will have an ulcer in the stomach; fearfulness, timidity; has lost all confidence in herself, gives up everything; *great tendency to start*; *boldness*; *inconstancy, impatience, irresoluteness, quarrel* (returning every three or four hours); *subdued, low voice, is unable to talk aloud*; looks as if he were absorbed in deep thoughts, and stares, but is without any thoughts whatever; *fixed ideas*—for example, of music and melodies—in the evening before and after going to bed; *tender-heartedness, with very clear consciousness*; *fine-feeling sense, delicate conscientiousness*. *Head*: *heat in the head*; *heaviness of the head*; *his head inclines forward*; *he lays his forehead upon the table*; *headache increased by stooping* (a. 1 h.); *violent headache in the morning, when waking and opening the eyes, going off by rising*; *tearing headache in the forehead and behind the left ear, being made tolerable by lying on the back, increasing by raising the head, with heat and redness of the cheeks and heat of the hands* (a. 5 h.); *aching in the forehead over the root of the nose, obliging him to incline the head, followed by inclination to vomit* (a. 5 h.); *headache as if something hard were being pressed on the surface of the brain, recurring in paroxysms* (a. 6 h.); *pressure in the temples, sometimes accompanied by a deep sleep*; *talking aloud excites a headache, as if the head would burst, going off entirely when reading to himself or writing* (a. 48 h.); *beating (jerking) headache*; *headache at every pulsation*; *when waking in the morning, headache as if the brain were dashed to pieces*; *when rising, the pain goes off and is converted into a toothache, as if the nerve were crushed and dashed to atoms*; *afterwards the pain passes into the small of the back in a similar form*; *the headache is brought back again by reflecting (falling off of the hair)* (a.

36 h.). *Eyes*: in the evening when reading one eye feels dim, as if it contained a tear which ought to be wiped off, nevertheless there is no water in it; dim-sightedness of the right eye after the siesta, as if a gauze were spread over the eye (a. 6 h.); white zigzag-shaped vibrations out of the line of vision, shortly after dinner (a. 30 h.). *Face and ears*: itching in the meatus auditorius (a. 3 h.); music excites a most pleasant sensation in the ear (a. 2 h.); insensible to music (a. 30 h.) (these are alternate effects); pain of the inner surface of the lower lip, as if sore and raw (a. 8, 10 h.); ulceration of a gland in the inner surface of lower lip, with sore pain (a. 4 h.); the lips bleed and crack. *Jaws and teeth*: pain of the anterior molares, as if dashed to pieces and crushed, together with their nerves; the toothache commences towards the end of a meal, and increases after the meal; pain in the joint of the lower jaw, in the morning when lying down. *Mouth, pharynx, and esophagus*: when talking or chewing he easily bites one side of the tongue (a. 5, 8, 20 h.); painful swelling of the orifice of the stenonian duct; stinging in the throat between the acts of deglutition; sensation when swallowing as if one swallowed over a lump, causing a cracking noise (a. 3 h.); stinging during deglutition, deep in the pharynx, going off by continued swallowing, and returning when ceasing to swallow; stinging sore throat, except when swallowing; creeping in the pharynx (a. 1, 2 h.); then in note, the angina of *Ignatia* causes a swelling of the throat as if a lump were lodged in it—this lump feels sore only during deglutition; natural angina, which is to be cured by *Ignatia*, must be characterised by similar symptoms; aching pain of the sub-maxillary glands. *Taste and appetite*: the mouth is always full of mucus; taste as of a spoiled stomach; sour taste of saliva (a. 1, 6 h.); aversion to sour things; appetite for sour things; desire for fruit which agrees, aversion to fruit which disagrees (a. 3, 10, 20 h.); hiccough from smoking in a practised smoker; aversion to milk (his favourite beverage), it is repulsive to him while drinking it, although it has a natural taste and does not cause nausea; aversion to warm food and meat, desires butter, cheese, and bread (a. 96 h.); when eating, drinking, or smoking, these things, as soon as the urgent desire for them has been satisfied, suddenly lose their relish, or even become disagreeable, and he is no longer able to partake of them, although he feels yet hungry. *Gastric symptoms*: gulping up of a bitter fluid; regurgitation

of the ingesta; in the evening before going to sleep, and in the morning, the food seems to reach up into the throat (a. 2, 15 h.); the inclination to vomit disappears after a meal (a. 2 h.); eructations, sour, musty, mouldy; frequent spitting; the saliva flows from the mouth while one sleeps (a. 1 h.); *hiccough after eating or drinking* (a. 3 and 8 h.). *Stomach*: cold stomach; burning in the stomach (a. 1 h.); qualmishness of the stomach, stomach and bowels feel as if hanging down relaxed (a. 24 h.); peculiar feeling of weakness in the epigastrium and pit of the stomach (a. 2 h.); fine stinging in the region of the stomach. *Abd.*: painful pricking jerks in slow succession in the epigastrium and pit of the stomach (a. $\frac{1}{2}$ h.); colicky pain in the epigastrium as if the intestines would burst, almost like pain in the stomach, extending as high up as the throat, in the morning when in bed, when lying on one side, the pain goes off in the recumbent posture (a. 40 h.); constrictive sensation in the hypochondria, as in constipation, with hemicrania as if a nail were pressed into the brain, in the morning (a. 20 h.); sensation in the umbilical region as of something living existing there (a. 8 h.); *rumbling in the bowels; throbbing in the abdomen; colic, first pinching, afterwards stitching, in one of the sides of the abdomen* (a. 2, 10 h.); drawing and pinching in the abdomen, resulting in a pressing sensation in the rectum, with qualmishness and weakness in the pit of the stomach and paleness of countenance (a. 48 h., two days previous to her menses). *Stool*: easy and sufficient stool taking place in half or one hour; *prolapsus recti when making a moderate effort at stool*: stool of a very large size, whitish yellow, and being expelled with difficulty; *painless contraction of the anus*: a sort of narrowing, lasting a few days; several attacks of cutting, rather high up in the rectum (a. 20 h.); *long stitch extending from the anus into the rectum*: hemorrhoidal sufferings during soft stool (a. 5 h.); hemorrhage from the anus, with itching of the perineum and anus; ascarides creep out of the rectum (a. 16 h.). *Urinary organs*: frequent emission of watery urine (a. 2, 6, 20 h.); dark urine is emitted with a burning sensation. *Genital*: furious, vehemently pulling, tearing pain with pressure in the root of the penis, coming on in successive paroxysms, especially when walking, going off when leaning with the small of the back against something while standing; burning itching in the region of the neck

of the bladder, exciting the sexual instinct, accompanied by flatulent distension of the abdomen; *itching in the parts around the sexual organs, and in the penis, in the evening after lying down, going off by scratching* (a. 3 h.); *soreness and ulcerative pain, with itching in the margin of the prepuce* (a. 3 and 27 h.); sweat of the scrotum; lascivious amorous fancies and sudden excitement of the sexual instinct, the genital organs being powerless, and the external body disagreeably warm; *complete want of sexual desire*: chronic leucorrhœa; violent crampy pressing in the region of the uterus, resembling labour pains, followed by a purulent corrosive leucorrhœa; the menses come off in lumps of coagulated blood; the menses are scanty, but the blood is black, and has a putrid odour. *Coryza, Larynx, Chest*: titillating itching in both nostrils; instantaneous bleeding at the nose; coryza preceded by dropping of water from the nose; obstruction of one nostril, as if a leaflet were stretched over the inner side of it; not as in dry coryza; hollow dry cough when waking in the morning; uninterrupted, not titillating desire for short and hacking cough in the larynx, not going off by coughing, disappearing more easily by suppressing the cough (a. 5 h.); every fit of cough darts into the penis, producing a painful sensation as if the blood were suddenly rushing in; *stitches in the left side* (a. $\frac{1}{4}$ h. and 3 h.); pressure in the region of the middle of the sternum as with a sharp body (a. 20 h.); *inspirations are impeded as by a load oppressing the chest; the expirations are so much the more easy*. *Neck and Back*: stiffness of the nape of the neck; heat and burning in the nape of the neck, or on one side of the neck externally; *pain in the os sacrum also when lying on the back, in the morning when in bed*. *Upper Extremities*: *pain as if bruised or as after a bodily exertion, in the upper arm joint when bending the arm backwards*; pain in the upper arm joint as if dislocated (a. 10 h.); *twitching jerking in the deltoid muscle* (a. 24 h.); intolerable (nameless) pain in the bones and joints of that arm upon which one does not rest, in the evening when in bed, the pain only goes off when lying on the affected arm (a. 12 h.); intolerable (nameless) pain in the bones and joints of the arm upon which one rests, in the morning when in bed, not going off until one turns to the other unaffected side (a. 20 h.); warm sweat in the palm of the hand and fingers (a. 16 h.); transitory yellowness of the hands as if from jaundice; when touch-

ing a hair upon the hand, he feels a piercing fine stitch, as if a splinter were lodged there. *Lower Extremities* : almost paralytic immobility of the lower limbs, with single jerks in the same ; in the morning when rising, stiffness of the knees and tarsal joints, thighs and small of the back (a. 38 h.) ; boils on the inner surface of the thigh (a. 12 h.) ; creeping, apparently in the bones of the feet, not as if they had gone to sleep (a. 10 h.) ; tension in the left to beyond the knees, with *heaviness of the legs* ; contusive pain, as if he had leaped from a great height, in the ball of the heel, or rather in the periosteum of the os calcis (a. 3 h.) ; pressure in the left tarsal joint with an internal tickling, obliging him to agitate the foot for the purpose of being relieved ; *hot knees* (with tickling itching of one of the knees) *the nose being cold* (a. 3 h.). *General symptoms* : *tingling in the limbs as if they had gone to sleep* (several times after 4 h.) ; in several parts of the periosteum, in the middle of the long bones (not in the joints) a sudden pressure as of a hard body, painful as if the parts were bruised, in daytime, but especially in the evening when lying in bed upon one or the other side, and going off when turning on the back (a. 20, 36 h.) ; *pain as if sprained or dislocated, in the joints of the shoulder, femur, and knees* (a. 8 h.) ; *single startings of the limbs when going to sleep* (a. 3 h.). A characteristic symptom of the itching of *Ignatia* is that it easily disappears by scratching ; sensitiveness of the skin to a draught of air, feeling in the abdomen as if he would catch cold (a. 4 h.) ; *simple violent pain in various parts of the body, in small places, for instance in the region of the ribs &c., the pain is only felt when touching the part* ; the symptoms of *Ignatia* are increased by taking coffee or by smoking tobacco ; leaves a disposition to swelling of the cervical glands, toothache and looseness of the teeth, also pressure at the stomach. *Weakness, fits* : aversion to motion, dreads labour ; heaviness in the feet, when walking in the open air, accompanied by anxiety, this went off in the room, and discouragement appeared in its stead ; faintness, as if arising from weakness in the pit of the stomach, he feels qualmish and has to lie down. *Sleep* : deep sleep ; *his sleep is so light that he hears everything while sleeping* ; for instance, distant ringing of bells ; flatulent colic in the evening when in bed, a sort of pressure which is felt successively in one or the other part of the abdomen, renewed whenever he wakes in the

night; moves his mouth while asleep, as if he were eating (a. 3 h.); short inspirations and long expirations during sleep; *snoring inspirations* during sleep; lies on his back during sleep and rests with his flat hand under the occiput; sudden starting during sleep, moaning, piteous expression of countenance, stamping and kicking with the feet, hands and face being pale and cold; dreams full of sadness, of frightful things; *fixed idea in a dream*; *dreams the whole night of one and the same object*; general heat with anxiety during the night, with slight sweat around the nose, the greatest heat being felt on the hands and feet, which require to be covered all the time, with cold thighs, palpitation of the heart, short breathing and lascivious dreams; these symptoms being felt most when lying on either side, less when lying on the back; nightly dreams full of learned exertions and scientific labours; excessively frequent yawning; frequent yawning interrupted by a sort of immobility and unyielding of the chest. *Fever*: thirst in the afternoon and evening; thirst during the chilliness; it is characteristic of the feverish coldness of *Ignatia* to disappear by external warmth; heat of the hands, with shuddering over the body and an anxiety increasing unto tears; *one ear and one cheek are red and burning*; *sudden attacks of flushes of heat over the whole body*; *external heat and redness without internal heat*; the heat caused by *Ignatia* is almost always external, it is almost never accompanied by thirst, not even when that heat occurs in the shape of a fever and ague; *external warmth is intolerable to him*, followed by more hurried respiration; *sensation as if sweat would break out* (anxious feeling of flushes of heat); palpitation of the heart during deep meditation. *Remarks*: in the prefatory remarks I would call attention to the short duration, the "double order of symptoms," the similarity and *dissimilarity* to *Nux Vom.*, and the character of epilepsy, for which alone *Ignatia* will be found suitable. Then in the detail we may readily understand its usefulness in certain anomalous nervous conditions when, to put it briefly, very much is felt with very little to show for it materially, and at the same time there is a marked contrariety in both bodily and mental or moral symptoms, *e.g.*, changeability, yet a fixed idea; thirst during chilliness and the absence of it during heat, which latter is only external, and this kind of incongruity will be found to run through the different

spheres, digestive, respiratory, urinary and so on—hence, too, the value of this drug in hysteria. If these points are grasped this drug will take its place in the memory with a certain distinctness which will make it easy to differentiate from other medicines having similar *isolated* symptoms, and this *differentiation of character* is the great thing to study out in learning the *materia medica*, practically, that is, therapeutically.

KEY-NOTES—PRACTICAL ONES.

LEAD IN WATER.

By AGRICOLA.

A MECHANIC, 35, a roller of hot steel ingots into thin sheets, whose daily routine was an eight-hour exhausting spell of seizing with tongs these 28-lb. white-hot ingots and passing them into rapidly-revolving massive rolls, came to me with a piteous tale of some ten years' suffering from frequent attacks of agonising abdominal colic, and which would leave him utterly prostrate for some ten days. Out of, during these many years, a dozen doctors, not one had hitherto afforded him any relief, nor yet traced out the actual seat of the pain, nor the exciting cause of the attack. His exclamation, "*Everything I eat seems to turn to wind,*" was, I hoped, *my* clue to the origin of the *malaise*, while obstinate constipation, insomnia, loss of appetite, intense nervousness, flabby, shrunken muscles, &c., these pointed out a line of treatment which I believed would improve his general health, and possibly ultimately remove the cause of his trouble.

After a few weeks' treatment the patient had learnt by instant alleviating experiences, sufficient to be able to tell me which of the medicines suited (some of) the individual symptoms. *Carbo.-V.*, the flatus; *Nux V.*, the constipation; *Phos.-amorphous* and *China*, the exhaustion and depression; *Potassium meta-sulphite* 6x,* the spasm, &c., but the attack still came, and as often and as severe as ever. *Tolle causam* still stood out, flashing as an electric light, at the head of my written description of his case. I inquired as to his surroundings in the factory, but could trace no

* Potassium sulphite, even as high as 6x, is a potent antiseptic, deodorant disinfectant, and is the best antidote, both chemically and pathogenically, to the presence in the animal tissue of the morbid lead. The patient continues its use twice daily, and will do so for the immediate future.

index *there*; then as to his cooking utensils, the sources of his diet, and his water supply (a pump on his own freehold), but without avail. One day I asked him if there was a leaden pipe to his pump. "Yes," he said; "thirty-six feet of three-inch diameter." "Hurrah!" I shouted. "Now I am, I hope, on the scent."

The following analysis made (*gratis* to the sufferer) by a young member of the staff of management of the works explains the whole affair; but his concluding remark is strong evidence as to the necessity of the future *propaganda* of Hahnemann's discoveries in *re* the influence morbidic on human health in minute, long-continued doses of (amongst other agents) metallic matter.

I hope and believe that this one case will so influence this young amateur analyst as to lead to *his* becoming in the early future a shining light in the grand art—*i.e.*, Hahnemannian Therapeutics.

Appended is the analyst's report:

"Two samples taken on different days contained '05 and '07 grains of lead per gallon. The water rapidly attacks a clean surface of lead, but the action is considerably diminished on metal which has previously been exposed to the action of water.

"A qualitative analysis shows a high percentage of nitrates and nitrites, to the presence of which the action on the lead is due.

"The free and albuminoid ammonia is also rather high.

"I do not think the amount of lead is sufficient to spoil the water for drinking purposes, provided always that water which has stood in the pipe is not used.

P.S.—Since date of analysis, May 25, the sufferer has had no return of the spasms, &c.

INSTITUTIONS.

LONDON HOMEOPATHIC HOSPITAL.

OPENING OF THE NEW BUILDING BY THE DUCHESS OF TECK.

THE new building of the London Homeopathic Hospital, Great Ormond Street, Bloomsbury, presented a most festive appearance on the 9th inst. The exterior was decorated with flags, Venetian masts gay with bunting being placed at intervals the whole length of the handsome *façade*. All these preparations were in honour of H.R.H. the Duchess of Teck, patron of the

hospital, who was to perform the opening ceremony. The guard of honour stationed outside the building was, by permission of Colonel Coles, furnished by the City of London Artillery Volunteers, whose band played the National Anthem as her Royal Highness alighted. At the entrance the Duchess, who was attended by the Hon. Mrs. Mitford and the Hon. A. Nelson Hood, was received by the Viscountess Emlyn, the Lady Ebury, the Lady Calthorpe, the Lady Newton, the Hon. Mrs. Algernon Grosvenor, the Hon. Mrs. William Rowley, the Hon. Sibyl Legh, and other lady visitors of the hospital, the Viscount Emlyn (treasurer), the Earl of Dysart, Mr. Alan E. Chambre, Mr. W. H. Trapmann, Mr. A. R. Pite, Dr. Galley Blackley, Mr. C. Knox Shaw, and Mr. G. A. Cross (secretary-superintendent).

The Hon. Alice Grosvenor presented the Princess with a lovely shower-bouquet of orchids and yellow roses, arranged with sprays of asparagus fern.

Her Royal Highness was then conducted by the members of the Board of Management and Building Committee, the consulting physicians and surgeon, members of the medical staff, the Bishop of Stepney and the chaplain, the president, vice-presidents, and treasurer of the hospital, to the ward in which the opening ceremony was to take place. Here the Blue Hungarian Band was stationed, and on the arrival of the Duchess played the National Anthem. The chairman of the Building Committee (Mr. Alan E. Chambre) read the following address to her Royal Highness, which was artistically illuminated:—

“MAY IT PLEASE YOUR ROYAL HIGHNESS,—

“We, the President, the Treasurer, the Chairman and Board of Management, and Building Committee, the Officers, and the Members of the Medical Council and Medical Staff of the London Homeopathic Hospital, beg leave to tender to your Royal Highness our respectful thanks for your kindness in being present here to-day, and to offer you a most cordial welcome to the new Hospital, so happily associated with your Royal Highness as patron.

“From its inauguration nearly fifty years ago, by the late distinguished physician, Dr. Frederick Foster Quin, under the auspices of Royal and personal friends, and by the wise guidance of the late president, the Lord Ebury, and the able administration of the late chairman, Major William Vaughan Morgan, this Hospital has continually progressed until, at the present time, its supporters contemplate with a feeling of just pride a newly built and greatly enlarged Hospital, calculated to effect an extended and widespread work amongst the suffering poor; worthy, it is felt, of illustrating, among the most useful

and progressive hospitals of the metropolis, that true development in medical science can be best promoted by the recognition of new truths and tested principles.

"That the medical exponents and the lay adherents of those principles are animated by the greatest readiness to join in real scientific progress is, it is thought, demonstrated by the erection of the building submitted this day to the inspection of your Royal Highness, for it embodies, as a consequence of the mature advice of the medical staff, every proved invention which modern ingenuity has devised for the sanitary, scientific, and successful treatment and nursing of the sick poor.

"We earnestly trust that the new Hospital, with the facilities it affords for widespread medical work, may greatly tend to enlarge the area of medical science, and have a material effect in promoting real and free union in the medical profession.

"When the present yearly average number of 700 in-patients shall have become more than a thousand, and the yearly average number of 10,000 out-patients shall have become more than 30,000—and the capacity of the Hospital will easily admit of such increased results—we shall look back with increased pride on this day, when your Royal Highness will have declared open a building, the site, erection, and furnishing of which has cost some £45,000, a sum provided by the generosity of friends of a reformed practice in medicine, headed by the munificent gift of £10,000 from 'A Friend well known to the Hospital.'

"The presence of your Royal Highness on the occasion of laying the foundation stone of this building, when you were graciously pleased to perform that act, and of opening it for the reception of the needy sick, for whose benefit it has been provided, will always be remembered, not only as a distinguished honour, but also as crowning the enterprise which has throughout been a work of love, alike to the authorities of the London Homeopathic Hospital, the medical staff, and the numerous donors, who have all had in view the good of the poor and the progress of a great cause."

After this, a portion of Scripture was read by the chaplain of the hospital, the Rev. Dacre Craven, Rector of St. George the Martyr. The anthem, "Except the Lord build the house," was excellently rendered by Misses Louise Burns and Annie Stanyon, and Messrs. Hulbert Fulkerson and Baring Ranalow.

The Right Reverend the Bishop of Stepney offered prayers, which were followed by the singing of a hymn by the assembled company, and in which her Royal Highness the Duchess heartily joined. The architect, Mr. William Alfred Pite, F.R.I.B.A., presented to the Duchess a key of the hospital, and her Royal Highness then declared the building open in

the following words: "I have great pleasure in declaring this hospital open, especially as it is a memorial of two friends of mine—Dr. Quin, who was a very dear friend of mine and the founder of the hospital, and also of Lord Ebury, who was present with us on the occasion of laying the foundation stone of this building. I heartily join with you in the hope that the present number of 700 in-patients may become more than a thousand, and the 10,000 out-patients more than 30,000."

Purses of £5 5s. each were presented to the Princess by a large number of children, present and former patients of the hospital and children of visitors and subscribers to the institution. The Bishop of Stepney pronounced the Benediction, and then her Royal Highness proceeded to make an inspection of the building, after which tea was served in the "Quin Ward," and her Royal Highness received a hearty ovation on leaving the hospital.

There was a very large attendance of subscribers and friends at the opening ceremony. All the visitors were invited to go over the hospital, and a cheery scene the wards presented, decorated as they were with a wealth of summer bloom; the children's wards were especially attractive, and in one of them the little patients who had presented purses were having tea.

The building accommodates a hundred beds, in wards of from eight to fourteen patients, and consists of a central block, with east and west wings. It is in the wings that the wards are situated, and they are severed from the central block by a most ingenious system of air spaces bridged by covered and cross-ventilated corridors, so that by no possibility can any contagion or foul air be conveyed to the wards. Each ward is warmed by a central stove, so well arranged that the smoke shaft is conducted under the flooring, and on either side of the stove is the grate, so that all the patients can see its cheery light, it is an open grate for winter fires. The windows, with hopper lights, are so perfect that anything like a draught appears impossible, and the floors are of polished oak parquet. The operating-room on the floor devoted to surgical patients has a perfectly impervious floor of white terazzo mosaic; it is lighted by an enormous sheet of plate glass, and, in common with the whole building, with electric light. Here, as everywhere else, the water-taps are fitted with filtering arrangements. There are four storeys above the out-patients' department which is in the basement, is very fine, and affords comfortable accommodation for 300 patients, which will admit of an enormous yearly average of out-patients.

CELEBRATION BANQUET.

On Wednesday evening a banquet to celebrate the opening

of the hospital, took place at the Whitehall Rooms. The Earl of Dysart was to have presided, but was prevented by indisposition, and his place was most ably taken by the Viscount Emlyn. There was a large attendance of the friends of the hospital, including many ladies. Among those present were: The Viscount Emlyn (chair), Rev. W. H. Addison, Dr. Timothy Allen, Mr. E. A. Attwood, Mrs. Seymour Barrow, Mr. and Mrs. A. C. F. Boulton, Mr. and Mrs. Ridley Bax, General and Mrs. Birch, Mr. George Black, Dr. and Mrs. Burwood, Dr. Blackley, Dr. Dyce Brown, Dr. Burford, Dr. Bennett, Mr. and Mrs. Thomas Boyce, Mr. Frederick Charles, Dr. and Mrs. Carfrae, Dr. John H. Clarke, Dr. A. C. Clifton, Mr. and Mrs. Alan E. Chambre, Captain Cundy, Mr. and Mrs. W. M. Cross, Miss Couch, Dr. G. W. Chapman, Mr. and Mrs. G. A. Cross, Mr. Sydney Cross, Captain and Mrs. Davies, Dr. Duncan, Dr. and Mrs. Roberson Day, Captain Denshire, Dr. and Mrs. Dudgeon, Surgeon-Major Deane, Dr. Washington Epps, Mr. and Miss Offley-Forrester, Dr. Gilbert, Dr. Goldsborough, Dr. Hinson, Señor Guetary, Mr. Harris, Miss E. L. Harris, Mr. and Mrs. E. T. Hall, Dr. Hall, Dr. and Mrs. Hawkes, Dr. and Miss Harper, Dr. and Mrs. Johnstone, Mr. and Mrs. C. A. Kelly, Miss Kennedy, Miss Florence Lewis, Mr. and Mrs. Lambert, Dr. McLachlan, Dr. Byres Moir, Dr. and Mrs. Molson, Dr. Mackechnie, Dr. Neatby, Dr. Pincott, Mr. and Mrs. Wm. Pite, Mrs. Rayner, Dr. Cash Reed, Mr. Frederick Ross, Mrs. Reid, Mr. and Mrs. R. P. Reneau, Mr. Raphael Roche, Señor Rubio, Mr. and Mrs. J. P. Stilwell, Dr. Sanders Stephens, Mr. C. Knox Shaw, Dr. Horace Sanders, Miss Nellie Simon, Miss Grace Simon, Madame Sandon, Mr. W. H. and the Misses Trapmann, General Thomson, Mr. and Mrs. Conrad Thies, Miss and Mr. Arthur Williams, Miss Wintour, Dr. Wheeler, Mr. Dudley Wright, Mr. Henry Walgate, Mrs. C. W. Willis, and Dr. Eubulus Williams.

The Chairman, in proposing the toast of the Queen, said, that although her Majesty was not present, yet she would appreciate that which they were doing that night as a step in the direction of something that might lead to the benefit of her people and the comfort of the poorer classes. The toast having been duly honoured, the chairman went on to propose the health of the Prince and Princess of Wales and the rest of the Royal Family, and referred to the enormous amount of hard work which the Prince and Princess of Wales performed in attending various entertainments and ceremonies for the good of charity.

The health of the Duchess of Teck was next proposed. The Chairman said: The next toast that I have to propose is one for which I have to ask you to fill your glasses. It is one I know that will appeal to your hearts; I have to give you the toast of the Patron of the London Homeopathic Hospital, the Duchess

of Teck. Many of you know full well all that the London Homeopathic Hospital owes to the Duchess of Teck. You have all met with her kindness, and have seen the kindly interest she has taken in the hospital, and know the amount of trouble she is always ready to take on its behalf. I have not said too much about the amount of good the Royal Family are doing. We had an example of this yesterday from the Duchess of Teck. Any one present yesterday at the opening of the Homeopathic Hospital will not easily forget what we then saw when the Duchess graced the function with her presence. It was not alone the kindly simple words she spoke, but over and above this there was the sense of sunshine she left behind, and I venture to say that no one there engaged in the great work of the hospital, whether as a member of the committee or our overworked secretary—(cheers)—or our able architect, or the lady who presides over the training school, but felt that the Duchess had left behind her many rays of sunshine borrowed from her own individuality. I beg to give you the health of the patron of the hospital, H.R.H. the Duchess of Teck. The toast was honoured enthusiastically.

The Chairman then said: Ladies and Gentlemen,—I have now to begin what I have to say with an apology for my presence in the chair to-night, as I have to ask your indulgence while I explain why I am in the chair, and I am sorry to say the reason is that Lord Dysart, who was to have been here, and who is such a good and firm friend of the hospital, has been obliged to write this afternoon and express his regret at his inability to be present with us. (The speaker then read a letter from the noble Earl, apologising for his absence and stating that "Homeopathy, if properly administered, is powerful for good, but absolutely powerless for evil," and promising 10 per cent. of the building deficit if the remaining 90 per cent. be raised within the next twelve months, and a further sum of £1,000 towards a future extension of the hospital.) I think you will authorise me to thank his lordship for these generous offers. I am sure that all he has said shows that he is a true friend of the hospital, and ready to stand by it on all occasions. If you will allow me, I will express our deep regret that he is not here to-night, and tender him our thanks for his generosity. Just before I rose I had another message from his lordship, asking me to telegraph him after the dinner and tell him how things had gone off. I have yet another message to give you; it is from Dr. Yeldham. He says, "God bless all engaged in managing and working the new hospital." Now I must pass on to the toast which I am sorry to say has fallen to me, because I am new, so far as the Homeopathic Hospital is concerned, to the work, and I have had put on me that most unsentimental

work—the financial work of the hospital; but when I took it up I was assured that my vice-treasurer would do all the work and take all the responsibility. I am quite satisfied that he is ready to do all the work, and I shall take every opportunity of leaving him the responsibility—(laughter)—but I have to pass on to the serious part of my work. I have to give you the toast of “Prosperity to the London Homeopathic Hospital.” I do not want to address at great length you who are better acquainted with what has been done with regard to the hospital than I am. I will only trouble you with statistical matters, and as I look upon the dry figures of the last forty-five years they certainly tell me, as far as scientific homeopathy is concerned, of steady progress. First of all let us go back to 1849, when you established your hospital in Golden Square, with accommodation for twenty-five in-patients. Well, between that date and 1859 the in- and out-patients numbered twenty-five thousand—twenty-five thousand in nine years. You then established yourselves in Great Ormond Street, where you had an average accommodation for something like seventy in-patients. During the thirty-six years there you have accommodated no less than 275,000. That is a steady and a regular growth. Let us see what it means during the whole of the forty-five years your hospital has been in existence. During the first nine years you had given assistance to twenty-five thousand in- and out-patients. In the fifth nine years you had relieved ninety-four thousand. Those figures, to my mind, speak for themselves. The work has indeed been growing under your hands, and you mean to deal with the work as it increases on sound financial principles. You wish to make homeopathy essentially available for more people. The work has grown under your hands year by year—God grant it may grow still more in the future. But you have done something more during these forty-five years. You have established a nursing institute, which means untold comfort to many outside the hospital, and besides this you have established a convalescent home at Eastbourne. Looking round, I don't think I am saying too much that those who were with us fifty years ago would say that the work has grown to a greater degree than they could have expected. I can only say that there are amongst the members of your council men capable of looking round and seeing all sides of the question, and who appreciate very fully the direction in which it is wise to widen the great work. There are around us in London many social problems, and in endeavouring to widen out on scientific principles such a hospital as this, we are standing on solid ground and helping to do a vast good to the people of this great city. The work we are doing is a labour of love to all of us who are endeavouring to build up this hospital on the firmest basis. We can only express the hope that it will

widen out, and give to the poorer classes that which we know is so useful and of so great benefit to them. The toast was honoured with acclamation.

Mr. J. P. Stilwell: Ladies and Gentlemen,—Our chairman has given us certain statistics of the progress of the hospital in the last forty-five years. I will tell you of some of the notable men who have secured that progress; and first, the original conception of this hospital was in the mind of the late Dr. Quin—a man whom I had not the honour of knowing. I regret it very much. What a personality he was to the homeopathic world! Without him there would be no homeopathic hospital. We have at the present moment with us, Dr. Stephen Yeldham, Dr. Edward Hamilton and Mr. Hugh Cameron. These men rallied to the help of the hospital. They helped to establish the hospital in Golden Square. That was a beginning of the higher science of medicine in London. The next personality that I will mention was Lord Ebury. Our present hospital stands in the ground of the old hospital in Great Ormond Street. The old hospital was three houses converted into a hospital which lasted until two years ago. Lord Ebury contributed in many ways to the success of the hospital. This hospital was the means of showing that the death-rate of cholera can be reduced to 16 per cent. In the other hospitals that death-rate was 35 per cent. The Government called for a return of the death-rate in the different hospitals, but the return from this Hospital was pigeon-holed. But Lord Ebury insisted upon its being produced to the world, and without his efforts the world would never have known of it. Again, Lord Ebury was able to help us in a way that has done us much good. He succeeded in getting a clause inserted in the Medical Act prohibiting the refusal of qualifications on the ground of any theory of medicine. I think I may safely say that without Lord Ebury we should have had no homeopathic body of practitioners. I don't see how it would have existed in England without this modification of the Act. When first I joined the Homeopathic Hospital, which I did at the instance of Dr. Yeldham, and I am sure when I mention his name every one will be glad to hear that he is, I hope, recovering from a serious attack, and I hope he will be long spared to help us: well, when I joined the board in those days, the late Major Vaughan Morgan was the chairman. We all remember what he has done—how fervent he was in his appreciation of homeopathy, and putting it forward whenever he could; what a liberal contributor he was to the funds, and what a mark he made by his own personality to induce his friends to become supporters. He is no longer with us, but I am glad to have this opportunity of bearing testimony to the

fact that it was he who began to agitate for a new hospital. The medical practitioners were all of opinion, and justly so, that no good surgical work could be carried on in the old building, and Major Vaughan Morgan took up the work, I will not say to completion, because his life was not spared, but he began that which has since been carried out so well. We are indebted very much to a donor who wishes her name to remain unknown; she has given us £10,000 as a start, and all friends of the Homeopathic Hospital are deeply indebted to her for giving such help. It is not only the sum I have mentioned, but she has inaugurated a second fund, to which she herself is a great contributor, for the paying off of the debt on the hospital—a debt which has been incurred in order that there should be nothing wanted, whether medical or otherwise, to make it the most complete hospital in all London. The old building was very small for the amount of work done in it, and it speaks volumes for the energy and faithful services of the staff that in that building so much should have been done. Our chairman has mentioned the nurses. I can only thank them for the aid they have rendered us. The Nursing Home was originally intended for dormitories, but we have been able to carry out a considerable Hospital work in it during the rebuilding, and we are all deeply indebted to our lady superintendent, Miss Brew. We are indebted to her for having carried out the training of our nurses in such an admirable manner. All who know our secretary-superintendent (Mr. G. A. Cross) are aware how hard he has worked to gather together all the elements which have to be reconciled in such a charity as this. Every one knows that in crossing a choppy sea you need a good man at the helm, and this, I am glad to say, we have had in our secretary-superintendent. It is extremely creditable, too, to the architect, Mr. William Pite, and the builders, that they have been able to place the new building at our command. Now, ladies and gentlemen, I have only to say that I trust the efforts we are making to pay off the debt on this hospital, which is not a very large debt after all, will be ably seconded by you. If we could only raise £10,000, this hospital would be clear of debt to-morrow. I have only to thank you all most heartily for the way in which you have drunk this toast of the London Homeopathic Hospital. It is now my privilege to propose the health of the medical staff, and I couple with it the name of Dr. Blackley.

Dr. Galley Blackley, who replied for the medical staff, said he yielded to none in his love for the hospital, and he felt deeply the honour of having been called upon to respond. He thought, however, Dr. Mackechnie, one of the house surgeons when the hospital was established, and who served it through the whole of the cholera visitation, would have been the better man to

have spoken to the toast. His own acquaintance with the hospital dated back from 1858, when they had accommodation for forty patients, and treated on an average about 400 every year. When they moved into Great Ormond Street it was clear that sooner or later they would have to erect a new building, because the old hospital was a conversion of three old houses. In conclusion, the speaker referred to the enormous good the hospital had done in training homeopathic doctors, and said there were scores of medical men scattered all over the country and many medical missionaries abroad who owed a great deal to that hospital. This work with the whole of the staff from beginning to end had been emphatically a labour of love. (Hear, hear.)

Mr. G. A. Cross read the gratifying list of subscriptions, amounting in all to £6,100, which included £357, given in the purses on the opening day. He said that deducting the £6,000 from the £12,000, that would leave £6,000 to be raised to free the hospital from debt.

Mr. Alan E. Chambre in felicitous terms submitted the health of the ladies, and referred to the lady visitors, who, he said, were ministering angels indeed. They could never forget the great assistance the late Lady Ebury rendered them in that capacity, for she was one of the most devoted lady visitors to the wards. He was happy to say that in the present Lady Ebury they had a continuance of that charming devotion and tender care which came from loving the sick poor. (Hear, hear.) Their hospital owed very much to the ladies, for if it had not been for the generosity of one present that evening, who wished to remain anonymous, they would not have been in the enviable position of finding themselves with that splendid new building. (Hear, hear.)

Mr. C. Knox Shaw, in giving the health of the chairman, said it had always been the good fortune of the hospital to meet with influential friends and supporters. In the chairman they had indeed found a most influential and kind friend, for as they all knew, he also acted as their treasurer. (Hear, hear.) From his knowledge as a member of the board, he could assure them that the chairman looked upon his financial work as no sinecure, and he asked them to give hearty thanks to the noble lord for his kindness in taking the chair. (Applause.)

The toast was received with "three times three."

The Chairman replied that it was a great pleasure to him that the toast had been proposed by one of the working staff of the hospital, and he hoped that in the future he himself might claim to be one of the working staff. (Hear.) All connected with it, whether the nursing, medical, or administrative staff, seemed to have but one aim, and that was to make the hospital

a grand success. (Applause.) When they were trying to widen out the work of the hospital it was pleasant to know they had amongst them that evening two distinguished American friends, for it showed they appreciated the work of their English brethren, and he trusted the bond between English and American homeopathy might be still further strengthened. (Applause.)

At the conclusion of the speeches, a very agreeable hour was spent in listening to a fine selection of music rendered by Madam Amy Sandon, Señor Guetary, Miss Grace Simon, and Signor Rubio, under the conductorship of Mr. Raphael Roche.

PREPARATIONS AND INVENTIONS.

PEPTENZYME.

We have received from the Peptenzyme Company, 25, Alfred Place West, South Kensington, S.W., specimens of their preparations of the above in three forms—liquid “Elixir,” powder, and tablets. The following claims are made on behalf of this new digestive :—

1. It presents in functional physiological activity all the digestive agents of the animal economy: *Stomach, Pancreas, Spleen, Salivary and Brunner's Glands, and Lieberkuhn's Follicles, and Free Nuclein—the tissue builder of the organism.*
2. It prepares all varieties of food for introduction into the blood, reducing it to the exact conditions required in the organism.
3. It preserves perfect identity of function throughout the whole digestive tract.
4. It promotes digestion, both by aiding and perfecting the *process* itself, and by *stimulating* the *appetite* and secretory functions, through the absorbtion of the *mother ferments* by the organs it represents.
5. It produces perfectly assimilable material by exact, normal physiological processes.

We can answer for it that Peptenzyme is most efficient in those cases where the aid of a digestive is desired, and it has the additional advantage of being exceedingly pleasant and convenient to take. It is manufactured by the well-known firm of Reed and Carnick of New York, and this in itself is sufficient guarantee of its excellence.

LA LIMONSINE BIGNAUD.

SOME time ago Dr. Gallavardin drew our attention to *La Limonsine*, a preparation for the hair, which (we have it on his

authority) is prepared from plants used as homeopathic medicines, by its inventor, a friend of Dr. Gallavardin's, the Abbé Bignaud. We have since then given it a trial, and have found it in many cases of great use in preserving the hair from falling off too rapidly and strengthening the growth. It is a spirit preparation and contains no oil or grease. It may be obtained of Messrs. Epps, who have procured a supply from the Abbé Bignaud.

THE LIMPET AIR-TIGHT COVER.

We have received from Messrs. Day and Co., of Weston-super-Mare, the patentees, one of their "Limpet Air-tight Covers," by means of which any vessel with a smooth rim can be instantly provided with a hermetically sealed lid. The cover consists of an india-rubber drum tightly stretched on a metal rim. It will be easily seen how extensively serviceable such an invention must prove. The patentees have so far succeeded in depriving the india-rubber of its odour that the covers may safely be used to cover tumblers containing homeopathic medicines.

The inventors claim for the cover that it will instantly seal hermetically cups, tumblers, jars, basins, &c., and preserve their contents (such as milk, beef-tea, jellies, wine, tea, &c.) from the action of the air and contamination of all sorts. "It makes the best egg-beater ever introduced; for this purpose break egg into tumbler, put on cover; a few sharp shakes up and down for about a quarter of a minute will beat the egg up in the most perfect manner." The following are the directions for using the cover:—

"Depress centre of cover about half an inch with the middle fingers, and whilst so depressed place it in position on tumbler (or other vessel), release pressure of fingers and the joint is made. See that rim of vessel to be covered is free from notches, and when cover is in position partially invert vessel so as to allow contents to moisten surface of rubber. When taking cover off slightly depress it in the centre, so as to avoid using force to remove it. Clean the cover after use and avoid grease."

REVIEWS.

LONDON HOMEOPATHIC HOSPITAL REPORTS. VOL. IV.*

The fourth volume of the *Homeopathic Hospital Reports* contains a number of articles of great clinical interest, ably written and

* *The London Homeopathic Hospital Reports*. Edited by George Burford, M.B., C. Knox-Shaw, and Byres Moir, M.B. Vol. iv. Dec., 1894. London: Homeopathic Hospital. The Homeopathic Publishing Co., 12, Warwick Lane, E.C. E. Gould and Son, 59, Moorgate Street, E.C. Pp. 188. Price 6s.

well illustrated: a valuable sketch of the history of the hospital by Dr. Arthur C. Clifton, and a *Materia Medica* study of *Anacardium* by Dr. Dyce Brown, in his well-known interesting style. We miss, however, from the latter two keynote symptoms of *Anacardium*—the mania of being pursued, and the intense irritability with unconquerable propensity to swear. Of course this symptom (which allopaths make such cheap fun of) is of little use when it occurs in a patient who is an habitual swearer, but occurring in cases of delirium and mental aberration in persons who are not usually swearers, it becomes of the highest value. Then the delusion that some one is following, that a voice is heard behind one, has proved of the greatest use in prescribing *Anacardium*. In spite of these omissions, Dr. Dyce Brown's article is the most homeopathic contribution to the volume. In the remaining articles we miss any evidence of the therapeutic enthusiasm which should characterise the work of a homeopathic hospital. The hospital exists because it produces better therapeutic results than its allopathic rivals. If it did not it would very soon be effaced before the professional opposition of which it is obliged to run the gauntlet. We wish we could find in the *Reports* more attention paid to the scientific method of Hahnemann and less to the mechanical surgery which is common to both schools.

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.

“PUZZLING CASE.”

REPLY.

DR. GUSTAV PROELL writes to us from Bad Gastein under date July 9th as follows:—

“I read to-day with great interest your ‘Puzzling Case’ (p. 329, vol. xxx.), and I hasten to communicate to you that, though I have not had a quite similar case, if I had the case to treat, I would give *Kali phosphoricum* 5 trit. (of Dr. Schüssler), which is my last refuge in desperate cases. Then *Arsenic*, and finally *Thuja* 80 or 100th potency. I think that one of these three remedies would diminish the patient's ailments.”

REMOVAL.

DR. CLIFTON, *Northampton*.—Dr. A. C. CLIFTON having retired from active and regular practice in favour of his late partner, Dr. Ross, has removed from 65, Abingdon Street (which is now Dr. Ross's residence), to PENDENNIS, 9, EAST PARK PARADE, NORTHAMPTON. By arrangement with Dr. Ross, Dr. Clifton may still be consulted occasionally by any of his old patients who may desire it.

GENERAL CORRESPONDENCE.

MIXED TREATMENT.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—In a recently published volume of Hospital Reports a rather startling sentence attracted my attention the other day.

There seems to have been a mysterious case, somewhat difficult of recognition, which was, however, ultimately diagnosed as "*Bazin's malady*." The treatment was as follows:—"Patient was put on *Calcarea Carb.* 3x, and the ulcers dressed with *Lotio Nigra* and firmly bandaged," &c.

Now, sir, I am but a recent convert to the great law of similars, and would not presume to criticise the internal medication represented by *Calc. Carb.* 3x.

As regards drug selection, or the question of potency, it becomes those who are new in the field to listen respectfully to others, and to learn, themselves, by experience.

But when we come to "*Lotio Nigra*" we must all recognise a very old and familiar acquaintance—and I beg that you will allow me in your pages to raise against *that* side of the treatment a prompt and pretty vigorous remonstrance.

For several months past I have been studying Homeopathy from Hahnemann's *own writings* with immense profit and ever increasing interest: English translation of *Chronic Diseases*, more particularly vol. i., and also his masterly *Organon*.

Fresh from these—and having acquired a truer insight into medicine than ever I had in my life—for which I shall be ever grateful to those works and their gifted author, as well as to those friends who kindly put them in my way, I say, candidly, that when, in these Reports, I came upon the conflicting combination of treatment recorded—*Calc. Carb.* internally and *Mercury* (Calomel) externally—I was, to say the least of it, profoundly astonished.

It at once raises a doubt as to whether the gentlemen responsible for the case, and for the publication of the volume contain-

ing it, have ever studied, with any serious attention, vol. i. of the *Chronic Diseases*, and the *Organon*.

I am, Sir,

Faithfully yours,

COURTHOPE BONTEIN, M.R.C.S.

Leytonstone, July 10, 1895.

THE HUMANISING OF OUR PRISONS.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—Now that the Commission on English prison administration has issued its Report, and that Sir Edmund Du Cane has retired from the chairmanship of the Board of Directors of convict prisons, the world may give something like a sigh of relief at the prospect of a possible change in the conduct of these institutions. About the system which Du Cane introduced, and which has been in vogue so many years, there has been an atmosphere of whitewash, so to speak, and of machine-like respectability which has clouded and disguised from the public at large the subtle and really terrible cruelty of it. No doubt there were barbarities in the previous state of affairs—in the contaminations and filth arising in old days from the herding of prisoners together; in the irresponsible power of warders and prison officials, and so forth, barbarities which certainly needed reform; but it now appears not improbable that the "solitary" system, and all that goes with it, has been, in its effect on those concerned, even more inhuman and degrading than that which it supplanted.

Few people perhaps realise this. It has been the fashion to vaunt our prisons over those of foreign countries, to boast that there was next to no violence connected with them, that the prisoners were not at the mercy of individual officials, but were controlled by a system, that all was regulated and disciplined, that there were no evil communications to corrupt good manners, and so forth; and in this cloud of negative attributes it was forgotten that there was hardly one positive or redeeming feature in the system; that it meant a life devoid of any touch of humanity, deliberately shorn of all that might waken or interest the mind, without a suggestion of any influences that might soften the hard or heal the broken heart—nothing but silence, solitude, desertion by all the world, absolute monotony and hopelessness, and the systematic starvation of both body and mind.

It is in the last two points—which indeed reach a perfect refinement of cruelty—that the gist of Sir E. Du Cane's method lies: the *systematic* starvation of both body and mind. All the

other details flow from and depend on this. And what a nucleus is this for the treatment of criminals by a civilised nation—the denial to them of every germ or seed of possible growth to better things, physical, mental, or moral! The author of the system—whom probably future ages will set down as one of the greatest criminals of all times—himself describes such an imprisonment as “an artificial state of existence absolutely opposed to that which nature points out as the condition of mental, moral, and physical health”; and yet, knowing this, he appears to have deliberately introduced and upheld it! Think of a nation deliberately taking its weak, its half-witted, its ill-born—its children of the gutter, of drink, and of extreme poverty—for of such stock are the majority of criminals, and then trying systematically what amount of added starvation of body and mind these unfortunates could bear.

After repeated experiments and trials—in the course of which many prisoners have gone insane—it was found that nine months was the longest period of solitary confinement which could well be endured; and accordingly *every* prisoner now has to take the first nine months of his sentence in the solitary cell. That is to say, every one, to begin with, is put to about the severest strain that average human nature can stand, in the direction of the enfeeblement of his body and mind.

Few people pause to think what it all means. To be confined in a bare cell, with nothing but a stool to sit upon, for nearly twenty-three hours out of the twenty-four (for exercise and prayers occupy little more than an hour), the mind turned in upon itself, gnawing itself in monotony and desperation, the stomach gnawing itself with hunger, no sign or word from any friends or relatives, no look of kindness or sympathy from any one, no chance of doing or showing a kindness towards any one; if work has to be done, that work probably consisting in turning the crank or picking oakum, work brutalising and useless, from which every soul with a spark of manhood in it must revolt; and this to go on for days and weeks and months; can anything be imagined more debasing and stunting, more calculated to produce the hardened and hopeless “habitual criminal”? Nor is it enough that this system cuts off all healthy human intercourse—all social interest and feeling—the very thing of all others that the criminal *needs*; but it also, with diabolical ingenuity, cuts him off from all the tender, and redeeming, and sweetening influences of Nature. It is a fact that in most prisons the windows (too small already for the needful amount of light) are placed so high up and in such a position that the inmate of the cell cannot see *anything* out of them. In many cases they are actually made of ground glass. Let alone the things of earth, he is not even allowed to see the sky; not a

cloud passing, not a bird flying through the open blue (which might serve to remind him of the world he has left), not the sun by day or the moon by night is he allowed to look upon. All these might awake in his soul tender and sweet and sane impulses and memories, and all such things must be killed out. Yes, truly these prisons are outwardly clean and decent and orderly : but inwardly what are they but whited sepulchres full of dead men's bones ?

When the prisoner condemned to penal servitude has served his nine months "solitary," he is removed to a convict prison ; and here he is a little better off. He has work to do which has some show of usefulness in it, sometimes he is taught a trade ; he has rather better food ; he is allowed a few books to read which are not merely "religious" books ; and the nature of his work allows him sometimes stolen snatches of conversation with a fellow-convict. But the root of the system is the same. It is still the starvation-of-body-and-mind system. The following extracts from a letter lately received from such a convict will show how cruelly it works. He says : "Existence here drags on in such a dull and excessively narrow circle at the best, and at times so wearily and monotonously, that one is driven to find compensation amongst memories of the day that is past and the hopes, dreams, and plans of the one that is coming, while ignoring as far as possible this long intermediate night-time. I cannot tell you how much I long at times to feel again the influences of forest and field, of mountain, and stream, and ocean, or to see again a starlit sky. . . . How intensely one feels the want of some different human relationship to that of warder and convict (all other communication with one's fellows is very strictly prohibited). How much one would value the society of authors with whom one is in sympathy, and from whom one would gain some mental stimulus. What craving one occasionally has for recreation, for opportunities to expand the various sides of one's nature, so cramped and benumbed by the force of these regulations and surroundings, to join in the life and motion of the real world, to live again in fact. I can give you no idea of the force such longings have at times, or describe the sea of thoughts in which at other times I find myself immersed. . . . I still hope to get through with the minimum of mental and physical injury." Here one seems to see a youthful nature trying to grow and expand and throw out feelers towards the light, and ruthlessly deprived of anything which might possibly feed and encourage and nourish that higher life. Nor is it needful to point out how one must read between the lines of such a letter, written under the eyes of prison officials and without a thought of publicity.

It is not my object here to suggest details of changes which

will now have to be adopted; since these have been more or less fully dealt with in the Report of the Commission, and are being considered by the authorities. For some years slight improvements have been introduced in the directions indicated. But what, I think, has now become quite clear is that no mere modification of the present system is of any use; that it is radically inhuman and false and self-stultifying; and that the principle of starvation of body and mind must be completely abandoned, in favour really of an opposite principle—that of systematically encouraging mental and physical health, and nourishing in a wise way the germs of social life and industrial instinct, which in so many of these unfortunates of civilisation have really never had a chance of development. Cruelty is generally the result of fear. Society surely is strong enough not to be *afraid* of its criminals—strong enough, while holding them in durance with its powerful hand, to treat with pitifulness these products of its own wrong-doing, and to lead them gently and decisively back to the light.

EDWARD CARPENTER.

“A CLINCHER FOR ANTITOXIN.”

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—When so much has been written in favour of the antitoxine treatment of diphtheria, it seems only fair that the public should be informed also of the evidence on the other side of the question. A most valuable and carefully compiled paper was contributed by Dr. Lennox Browne to the May number of the *Journal of Laryngology*, in which he gives the results of his observations on one hundred cases treated at one of the hospitals of the Asylums Board. This paper, which has had so marked an effect on the medical journals that I fancy we shall not hear much more from them about antitoxin, has not attracted sufficient attention in the lay press, and I should be glad if you would let me mention a few of its points.

1. The actual mortality in one hundred cases treated with the antitoxin serum was exactly the same as in one hundred treated at the same hospital the previous year, “under exactly similar circumstances of situation, season, administration, and hygiene.”

2. The advocates of serum treatment urge that allowance should be made for cases which have proved fatal within twenty-four hours after inoculation. The figures show that if this is done in both treatments the result would *not* be in favour of the serum.

3. A strong claim is urged for the necessity of commencing the serum treatment as early as possible. The figures, however, show that there is no warrant for specially applying this general law to the case of the serum remedy. We learn that in the hospitals for diphtheria "where the disease is attacked at once, a fatal case is almost unknown, and this under the former methods of treatment."

4. The figures show that in fatal cases there is a prolongation of life, but Dr. Lennox Browne thinks this a doubtful advantage of serum, since, as he says, "it indicates a greater prostration of the recuperative energies or the acquirement of something in the system that occupies a much longer time for full elimination. Thus, while in all serum cases there is a tendency for convalescence to be delayed, in those terminating fatally death is simply procrastinated and the period of suffering of the patient and of anxiety to the parents unduly extended."

5. With regard to the position of the membrane as affecting the question, the numbers are pronounced too small to draw a conclusion.

6. The figures show that with regard to the duration of the treatment before the membrane commences to separate, and when the throat was declared free from membrane, the advantage was decidedly on the side of the old methods of treatment. In the hundred cases treated with serum there were five in which the membrane reappeared, thirteen in which it never cleared entirely, and one in which it was observed as late as thirty-nine days after admission.

Passing over other points in which the evidence is incomplete, we find—

7. That the figures show a considerable increase of kidney complications and heart failure in the cases treated with serum over those treated by the ordinary method.

In conclusion, Dr. Lennox Browne says: "When drawing attention at a meeting of the Clinical Society last December, to what cannot but be considered as increase, under the use of serum, of the most grave complications of diphtheria, viz., anuria, nephritis, and cardiac failure, I took occasion to express a hope that further experience might prove that the disadvantages of serum would be more than outweighed by its benefits. I deeply regret to be obliged to record facts which, if confirmed—and they are easily capable of being checked by parallel observations of others who may elect to make use of the opportunities which I have embraced—cannot fail to carry a contrary conviction."

Yours truly,

ERNEST BELL.

Bellgarth, Hendon, July, 1895.

VARIETIES.

TARENTULA.—*Tarentula*, sixth, produced a beneficial effect in a case of multiple spinal sclerosis after a number of other remedies were given without effect. The volitional tremor of this disease is similar to the trembling of the drug. It has also been found useful in paralysis agitans.—Dewey in *Medical Century*.

CARBURETUM SULPHURIS.—This remedy cured a case of sciatica of nine years' duration. The pain was worse by motion. The remedy was given in five-drop doses three times a day. *Carburetum sulphuris* has the following symptoms in its pathogenesis: Spasmodic and lancinating pains about the middle of the thigh, lasting a half-hour and returning the following morning. In the afternoon the same pains in the tibia. Painful point on the right thigh, pains and tension in the popliteal space on walking or extending the limb.—Dewey in *Medical Century*.

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.

- Allen (A. H.). *Chemistry of Urine: A Practical Guide to the Analytical Examination of Diabetic, Albuminous, and Gouty Urine.* 8vo, pp. 224. (Churchill. 7s. 6d.)
- Ball (C. B.) and Twenty-four others. *A System of Surgery.* Edited by Frederick Treves. 2 vols. Vol. 1, with 2 Coloured Plates and 463 Illusts. 8vo, pp. 1,184. (Cassell. 46s.)
- Berdoe (Edward). *Microbes and Disease Demons: The Truth about the Anti-Toxin Treatment of Diphtheria.* Cr. 8vo, ed., pp. 98. (Swan Sonnenschieden. 1s.)
- Blyth (A. W.). *Poisons: Their Effects and Detection.* 8rd ed., Revised and Enlarged. With Tables and Illusts. Cr. 8vo, pp. 758. (C. Griffin and Co. 21s.)
- Braithwaite (J.). *The Retrospect of Medicine: A Half-Yearly Journal, Containing a Retrospective View of every Discovery and Practical Improvement in the Medical Sciences.* Vol. 3, Jan.-June, 1895. 22mo, pp. 426. (Simpkin. 6s. 6d.)
- Brockway (F. J.) and O'Malley (A.). *Anatomy: A Manual for Students and Practitioners.* 2nd ed. With Full-page Plates. Edited by Bern B. Gallaudet. (Student's Essentials.) Cr. 8vo, pp. 370. (Kimpton. Net. 6s.)
- Dench (E. B.). *Diseases of the Ear: A Text-Book for Practitioners and Students of Medicine.* Illust. 8vo, pp. 668. (Kimpton. Net. 21s.)
- Dutton (T.). *Indigestion, Compulsion, and Gout Clearly Explained, Treated, and Dieted.* 4th ed., Enlarged and Revised. Cr. 8vo, pp. 280. (Kimpton. 3s.)
- Fenwick (E. H.). *Epitomes of Modern Surgical Progress, for Students and Practitioners.* Illust. 2nd ed. Cr. 8vo. (Wright, Bristol; Simpkin. Net. 4s.)
- Fernie (W. T.). *Herbal Simples Approved for Modern Uses of Cures.* Cr. 8vo, pp. xvi-432. (F. Wright and Co., Bristol; Simpkin. 5s.)
- Gimlette (J. D.). *Myxedema and the Thyroid Gland.* Cr. 8vo, pp. 184. (Churchill. 5s.)
- Hansen (Dr. G. Armauer) and Looft (Dr. Carl). *Leprosy: In its Clinical and Pathological Aspects.* Trans. by Norman Walker. With numerous Photographs and Coloured Plates. 8vo, pp. xi-163. (F. Wright, Bristol; Simpkin Net. 10s. 6d.)

- Hertwig (Dr. Oscar). The Cell Outlines of General Anatomy and Physiology. Trans. by Mr. Campbell and Edited by Henry Johnstone Campbell. With 168 Illusts. 8vo, pp. xvi.-368. (Swan Sonnenschein. 12s.)
- Jones (H. L.). Medical Electricity: A Practical Handbook for Students and Practitioners. Being the 2nd ed. Medical Electricity by W. H. Stevenson and H. L. Jones. With Illusts. Cr. 8vo, pp. 488. (H. K. Lewis. 10s. 6d.)
- Keating (J. M.). How to Examine for Life Insurance. 3rd ed. Roy. 8vo, pp. 212. (Rebman. 1s.)
- Luff (A. P.). Text-Book of Forensic Medicine and Toxicology. 2 vols. 8vo, pp. 428 and 870. (Longmans. 24s.)
- Martin (J. M. H.). Illustrated Ambulance Lectures. To which is added a Nursing Lecture, in Accordance with the Regulations of the St. John's Ambulance with Association for Male and Female Classes. 4th ed. Cr. 8vo, pp. 158. (Churchill. 2s.)
- Materia Medica. Part 6. (Catechism Series). Cr. 8vo, sd., pp. 72. (E. and S. Livingstone, Edinburgh. Net. 1s.)
- Murrell (W.). Clinical Lectures on the Prevention of Consumption, Delivered at the Westminster Hospital. Cr. 8vo, pp. 98. (Baillière, Tindall, and Cox. 8s. 6d.)
- Parkes (L. C.). Hygiene and Public Health. 4th ed. With Illusts. Cr. 8vo, pp. 548. (H. K. Lewis. 10s. 6d.)
- Practitioner (The). A Journal of Practical Medicine. Edit. by M. Morris. Jan.-June, 1895. 8vo, pp. 592. (Cassell. 7s. 6d.)
- Smith (W. J.). A Medical and Surgical Help for Ship-masters and Officers in the Merchant Navy, Including First Aid to the Injured. With Coloured Plates and numerous Illusts. Cr. 8vo, pp. 350. (C. Griffin and Co. 6s.)
- Surgery: Part 1.—Hemorrhage, Repair, Inflammation, Suppuration, Ulceration, Mortification, Erysipelas, Wounds, Burns. (Catechism Series.) Cr. 8vo, sd., pp. 72. (Livingstone, Edinburgh. Net. 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 the "MANAGER" of the Homeopathic Publishing Company, 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. Shirliff, Malvern; Mr. Courthope Bontein, Walthamstow; Dr. Proell, Gastein; Dr. Mahony, Liverpool; Mr. Ernest Bell, Hendon; Mr. Edward Carpenter; Dr. Murray Moore, Liverpool; Messrs. Boericke and Runyon,

San Francisco; Dr. Clifton, Northampton; Mr. Bellairs, Reading; Mr. G. A. Cross, London.

BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Animals' Friend—Chemist and Druggist.—Homeopathic Review.—Family Doctor.—Hom. Envoy.—N. A. J. of Homeopathy.—Southern Journal of Hom.—Med. Advance.—La Homeopatia.—Calcutta Jour. of Medicine.—Allg. Hom. Zeit.—Med. Visitor.—Minneapolis Hom. Mag.—Clinique.—Journal of Orificial Surgery.—American Homeopathist.—Medical Century.—Healthy Life.—N.Y. Med. Times.—Archiv. f. Hom.—Maanedskrift f. H.—Hom. Monatsblätter.—L'Art Médical.—The Sun, July 4th.—Med. Argus.—Vaccination Inquirer.—Hahnemannian Monthly.—Arsenicisation. Dr. R. B. Leach.—London Homeopathic Hospital Reports, Vol. IV.—Cheltenham H. Dispensary Report.—Indian Hom. Review.

THE
HOMEOPATHIC WORLD.

SEPTEMBER 2, 1895.

“SCIENTIFIC MEDICINE.”

FOR several years past—indeed, we may say, from the time when the discussion on the *Odium Medicum* occupied the columns of *The Times* for nearly six weeks, and in the opinion of unprejudiced persons, and by the confessions of the periodicals of the dominant school, allopathy had the worst of it—we have been favoured with a period of silence with regard to homeopathy on the part of the old school and its exponents in the periodical press. Attacks on homeopathy, which used to be of considerable frequency, ceased entirely, and our colleagues of the other school treated us in a friendly way by adopting many of our remedies and praising them highly. To be sure, they forgot to mention where they got these new and efficacious medicines, but that little omission was motived by the conviction that if they had said they obtained them from the homeopathic materia medica their prejudiced colleagues would not have looked at them, their periodicals would not have noticed them, and they themselves would have been deprived of the *éclat* which they would certainly receive if they introduced them as new remedies discovered by themselves.

But something has occurred—can it be the opening of the new London Homeopathic Hospital?—which has stirred the enemy to say something offensive about homeopathy. *The Lancet* began it when it recommended the summary expulsion from medical, pathological, obstetrical, and other established non-homeopathic societies, of all

members who might be tainted with the homeopathic heresy. This little outburst of allopathic spleen fell flat on the profession, and did not meet with the cordial response *The Lancet* hoped, so it lapsed again into silence about homeopathy.

The latest display of anti-homeopathic zeal is that indulged in by that fortunate recipient of court favour and a hereditary title, Sir WILLIAM BROADBENT, Bart. He was selected—by whom or for what reason we know not—to deliver the Address on Medicine at the annual meeting of the British Medical Association this year. It was a very commonplace sort of address, such as we are generally favoured with at these meetings, with some notable exceptions, among which may be mentioned the really interesting and liberal address by Dr. BRISTOWE at the meeting held at Ryde a good many years ago. But Sir WILLIAM BROADBENT'S address was distinguished, not enviably, by a very vulgar sneer at homeopathy and its adherents, medical and lay. The former were held to be, after the well-known but now rather antiquated allopathic formula, either knaves or fools; the latter were described as "the more foolish and credulous old ladies of both sexes." Not much originality here, and the taste of the phrase is on a par with its truth. But this piece of insolent vulgarity would not have called for any notice, its enunciation is its own refutation, for every one knows as well as Sir WILLIAM BROADBENT that the facts are the exact opposite of what he states *ad captandum vulgus*. The expression in this anti-homeopathic tirade which especially interests us is this: "Homeopathy still, like a belated ghost, haunts the dawn of scientific medicine." This is a bit of attempted fine writing and metaphorical tropes, but such attempts, when made by orators of Sir WILLIAM'S mental calibre, usually miss the sublime and become ridiculous. Let us examine the expression a little closely. Ghosts, as a rule, vanish at the advent of dawn, as Shakespeare and other competent authorities assure us. Sir WILLIAM acts the part of the cock which

announces the appearance of dawn, and he crows in good style about the anticipated coming of "scientific medicine." Thus much we learn from this medical chanticler, that "scientific medicine" has not yet come, but that there are hopes that it may come; it is at its dawn. But how is this? Ever since homeopathy was first promulgated the partisans of the allopathic school have protested that homeopathy could not be true, because it was opposed to "scientific medicine." HECKER, the earliest and one of the most distinguished of the professors of traditional physic who entered the lists against HAHNEMANN, in his criticism of the *Organon* on its first appearance in 1810, says that the acceptance of homeopathy as the truth in therapeutics would be "to degrade scientific medicine, to reduce it to the level of the crudest empiricism of the lowest domestic practice"; and HUFELAND, the greatest authority in medicine, a few years later declared that if homeopathy triumphed it would prove "the grave of scientific medicine." Now, if "scientific medicine" was so much in evidence at the beginning of this century that it ran the risk of being degraded and even buried, how is it that at the end of the century it is only beginning to "dawn" on an expectant world? Sir W. BROADBENT is hopelessly at variance with those stout champions of his school, HECKER and HUFELAND, who were, as they believed, basking in the full sunshine of "scientific medicine," whereas he, fourscore years later, is only jubilantly cock-crowing its anticipated rise, of which he thinks he sees the dawn. Is it possible that "scientific medicine," like the sun, rises and sets periodically? Or is it the case that real "scientific medicine" has never yet risen, that what passed for "scientific medicine" in former years was only a sort of meteoric illusion, like the mock-suns sometimes seen in the sky? Evidently the "scientific medicine" that was rampant at the beginning of the century cannot be the same as that which is still below the horizon, and only just giving a forecast of its advent by the streaks of dawn which have set Sir WILLIAM

a-crowing. But what if the "scientific medicine" which he thinks is about to rise should prove illusory like the "scientific medicine" our fathers boasted of? There have not been wanting eminent men, like WILKS, MOXON, and a host of others, who have openly asserted that they did not believe there was any such thing as "scientific medicine," just as BETSY PRIG doubted the existence of Mrs. HARRIS. Even Sir W. BROADBENT does not think there is any sun of "scientific medicine" in the firmament of physic; he only thinks he sees the dawn of what when it rises may prove to be as great an imposture as he hereby tacitly confesses was the so-called "scientific medicine" of the past. As, then, homeopathy has always hitherto been condemned on the ground that it was opposed to "scientific medicine," if, as the most modern exponents of traditional physic assert, there is, and has hitherto been, nothing of the sort, it is evident that homeopathy has been condemned on false pretences, for it cannot be opposed to what is non-existent. It is hardly likely then that the "belated ghost," homeopathy, will be scared by the dawn of what may prove, like its predecessors, to be a phantasmagoria, a pure imposture. At all events, homeopathy will wait tranquilly until this the latest version of "scientific medicine" shall have passed from the period of expectation to that of realisation. Perhaps Sir WILLIAM BROADBENT at his next public appearance will kindly tell us when we may look for the actual arrival of that "scientific medicine" whose dawn the "belated ghost" of homeopathy is so inconveniently haunting.

Sir WILLIAM BROADBENT knows and acknowledges that homeopathy is the only extant therapeutic rule (he says "theory," but that is only an instance of his slipshod inaccuracy) "of universal application," and by classifying it with the various theories and systems which have each in their turn for a short time fascinated the medical profession until their futility was exposed, he insinuates that it is destined to the same fate as theirs. But he is perfectly well aware that homeopathy bears no resemblance

in respect of its course and progress to any of the systems that preceded it. Founded on a rule, "*similia similibus curentur*," which has always been acknowledged as of partial application by eminent exponents of medicine from the time of HIPPOCRATES; since HAHNEMANN enunciated in 1796 his conviction that it was a therapeutic rule of universal application, and a few years later rendered its practical application possible by his wonderful self-denying provings of medicines, it has gone on increasing every year its tale of zealous adherents, has founded hospitals, colleges, societies and periodicals, has at present under its banner more than fifteen thousand legally qualified practitioners, and by the force of its example and teaching has transformed the whole practice of medicine, abolished blood-letting, and swept away the unscientific and cruel treatment by mercurialisation, blisters, setons, issues, cauterising, in which the profession revelled and under which the patient world groaned and howled. Evidently the "belated ghost" metaphor is not applicable to homeopathy, for it goes on daily increasing in substantiality and influence. It is rather "scientific medicine" that has a ghost-like character, for it has no substantial existence and is as palpable as a spook.

CAUSTICUM.—The thirtieth of *Causticum* cured a case of constipation in a woman eighty years old who was affected by senile tremor. The remedy was given continuously.—Dewey in *Medical Century*.

CALCAREA FLUORICA.—Two cases of ganglionic enlargement are reported in the *Berliner Zeitschrift* as being cured by this remedy, one being a young woman of twenty-five years who had a bunch of enlarged glands on the right side of the neck, which had existed several years. The tumour consisted of an agglomeration of four or five glands which were swollen and indurated; the tumour was painless and non-inflamed, but the pressure of it on the jugular vein caused continual headache. She had employed various ointments without success. *Hepar* and *Silicia* were prescribed at first, but no amelioration was produced. *Calcarea fluorica* 5x was given, one powder a day. After two months of this treatment the size of the tumour had diminished considerably; the glands became isolated and had the form of small kernels. At the end of seven months the cure was complete. The second case was in a young man of twenty, and was very similar. Cured by the same remedy.—Dewey in *Medical Century*.

NEWS AND NOTES.

A LOURDES "MIRACLE."

A most extraordinary case of malingering was reported in the daily papers of August 14th, the following account of which appeared in *The Daily News* :—

"A more extraordinary case of malingering has probably never been heard than the one which came to-day before the Paris Assizes. For ten years Delannoy has deceived the greatest French doctors, Dr. Charcot and others; and his 'miraculous cure' at Lourdes is on record as one of the most irrefutable proofs of the supernatural virtues of that shrine. It baffled the critical mind even of M. Zola, who mentions this, to him, inexplicable case, in his book on Lourdes. Delannoy was from 1877 to 1881 a warder in the Paris hospitals. His experience of hospital life led him to the conclusion expressed in *Little Dorrit*, that the ideal state of happiness in this world is that of a patient in a hospital. He had become acquainted with the symptoms of many diseases, and he determined to sham some infirmity. After some consideration he selected paralysis. He was admitted to the Salpêtrière Hospital made famous all the world over by Dr. Charcot, and he played his part so well that Dr. Charcot himself diagnosed without hesitation a case of incipient locomotor ataxy. In January, 1884, he entered Dr. Callard's ward at the Hôtel Dieu. In 1886 we find him at the Necker Hospital, where Dr. Rigal gave him blisters with red-hot irons on both sides of the backbone."

After visiting many of the hospitals he became a patient of Dr. Dujardin-Beaumetz at the Cochin Hospital, where he underwent the "hanging treatment" on fifty-eight occasions in two months.

"At length the tormented patient fled. He seems to have been disgusted with doctors, so he bethought himself of a new profession, that of the sick man healed by miracle. On August 19, 1889, at nine a.m. (*vide* Zola *op. cit.*), he arrived at Lourdes in the most pitiable condition. He was carried to the Virgin Mary's Grotto, kissed the ground, and remained a long time prostrate before the Holy Sacrament displayed at the altar. Suddenly, as he related a few hours later to the beaming Fathers of the Grotto, he had an extraordinary feeling of an inner force that impelled him, almost in spite of himself, to stand, walk, and drop the crutch with which he was hardly able to crawl. The pilgrims accompanied him, singing hymns of praise. In the evening one of those stirring sights—a torchlight procession of pilgrims was seen threading its way up the zigzag paths of Massabielle in rejoicing for the miracle. Delannoy was placed in the foremost rank. The day following he was medically examined in the presence of Mgr. Berchiolla, Archbishop of Cagliari and Primate of Sardinia, and by the Bishop of Hebron. The symptoms described by the healed man were found to be those

of locomotor ataxy, and it was found that they had disappeared. The annals of Notre Dame de Lourdes duly recorded this miracle, to which M. Zola has attached permanent celebrity. Delannoy returned to Paris as an honoured guest of the national pilgrimage. The chaplain of the Charité Hospital in Paris telegraphed a few days later to the Fathers of the Lourdes Grotto: 'Doctors here staggered by cure of Delannoy. Have seen him four times this week. Walks like a country postman.' In 1890 the Fathers of the Grotto appointed Delannoy overseer of a home for invalids awaiting miraculous cures at Lourdes. The reputation of his miraculous cure had spread over Europe, Asia, Africa, America, and Australia. From all these parts of the world Delannoy received rich presents with prayers that he would intercede with the Virgin (he being a *persona grata*) for the recovery of the donors."

If Delannoy had not been stupid enough to add robbery to his frauds, he might have been still enjoying the fruits of his cunning. He is now trying another public institution—the prison—for four years. Perhaps he will find it at least as agreeable as Dr. Rigal's treatment.

A BUSHMAN'S CURE FOR SNAKE-BITE.

A CORRESPONDENT sends us the following interesting items *apropos* of Dr. Clarke's letter in *The Westminster Gazette* :—

"Farini, in his book *Through the Kalahara Desert*, gives a description, at page 367, of a Bushman's antidote against the African cobra's bite. The Bushman voluntarily allowed himself to be bitten, and cured himself by drinking a drop of the venom of the same snake and rubbing into the wound and other incisures near to it the powdered dried poison sacs of other snakes.

"Farini also mentions another 'specific' for any snake-bite or for blood-poisoning, used by the Bushmen. It is the powdered body, after drying, of a lizard called 'N'anboo' (*see p. 374*). This powder is rubbed into the wounds."

A COBRA VENOM CURE.

A RECENT issue of *The Bombay Gazette* published the following letter on a new (but as yet unnamed) antidote to cobra bite :—

"To the Editor of THE BOMBAY GAZETTE.

"SIR,—Since the publication in your paper of my letter on this subject, applications for the newly-discovered remedy have been pouring in from far and wide. But the plant being very rare and

slow of growth, it is impossible to meet the heavy demand, and although I have taken the necessary precaution to distribute it only among medical men and a few others in small quantities, yet the stock in hand has been almost exhausted. I shall, therefore, thank your readers to wait until its properties (and it seems to possess more than one) are verified authoritatively. As soon as it passes successfully through the ordeal of medical test (of which a due notice will be given to the public) its cultivation on an extensive scale will be taken in hand, and your readers may rest assured that their applications for its supply will be scrupulously attended to.—
Yours, &c.,

“N. M. KHORY, Sailana, C.I.”

In an editorial note *The Gazette* adds that “those who have tried it speak highly of it, not only as an antidote to snake-poison, but also to the effects of an overdose of *Opium* and other narcotics.”—We shall be interested to learn what it is.

A HOMEOPATHIC EXHIBITION.

AN International Homeopathic Congress has recently been held in Hamburg, and the exhibition of relics is thus described in *The Chemist and Druggist* of August 17th:—

“In connection with the International Homeopathic Congress held at Hamburg, there was an interesting exhibition of Hahnemann relics and of modern homeopathic medicines. Thus there was a reproduction of the first pharmacy which was fitted up in accordance with Hahnemann’s principles, and this proved very interesting when contrasted with the splendid exhibits of such firms as Dr. Wilmar Schwabe and Täschner & Co., of Leipzig, or the Société homeopathique de France, of Paris. The first-named firm showed a number of Hahnemann’s letters, some tiny cylinders containing globules, and small phials fitted with ivory stoppers, these having actually been used by Hahnemann. Dr. A. L. Simon, who is homeopathic physician to Queen Isabella of Spain, also exhibited. Several gold and silver medals were awarded, viz.: gold to Dr. Werner, of Wilster; Dr. Wilmar Schwabe, Täschner & Co., and Marggraf, of Leipzig; and to the Société homeopathique de France, Paris; silver to the Dutch Society for the Promotion of Homeopathy; Société de homeopathique de Belgique, Brussels; Dr. Levinsohn, Berlin; and C. Munninghaus, Lennep.”

SCLEREMA NEONATORUM.

THE BRITISH MEDICAL JOURNAL of June 22nd contains the following note on this rare disease:—

“Hermann Schmidt (*Zeitschrift f. Geburtsh. u. Gynäk.*, vol. xxxii.,

Part II., 1895) relates three cases. As in those already recorded, the integuments were tense and swollen, the affection beginning in the lower extremities and extending to the trunk and arms. The skin of the chest was scarcely affected, and the face involved only to a trifling extent. The temperature always fell, and could not be kept up by artificial means; hence the patients all died; they were already sickly, and one was premature. The difficulty in moving the limbs and the trouble experienced in feeding them added to the causes of death. There were hemorrhages in the muscular substance of the heart, and also in the pulmonary vesicles. Partial atelectasis was observed in both lungs. Schmidt detected bacteria in the blood of all the cases, and found that these microbes blocked the capillaries of the skin and the subcutaneous fat, which was increased, or at least thicker, owing to edema and thrombosis of its vessels. The blood effused in the lungs and heart also contained bacteria. Schmidt admits that he could discover no specific type, but believes that the evidence confirmed Runge and Baginsky's opinion that sclerema neonatorum is to be traced to infection from germs."

A case of recovery from this condition under mercurial inunction was recently reported.

HYDRASTININ.

HOMEOPATHS will be interested to read this note from the same issue of the same journal:

"PERMANENT EFFECT OF HYDRASTININ IN METRORRHAGIA."

"Kallmorgen (*Zeit. f. Geburtsh. u. Gynäk.*, May 29, 1894) remarks that, while no doubt can remain as to the value of hydrastinin in metrorrhagia, reports are hitherto wanting as to the permanency of the results. He kept eighty-six patients of the Berlin Gynecological Polyclinic under observation during one and three-quarters to two and a quarter years after treatment with the drug. The best results were obtained in cases of simple menorrhagia and of hemorrhage connected with retro-uterine hematocoele, previous abortion, or disease of the appendages. The success was less marked in chronic endometritis, very doubtful in hemorrhage during pregnancy or due to myoma, and *nil* in carcinoma."

MEDICAL ETHICS.

In another part of our present issue will be found some excellent remarks on "Medical Ethics" from our contemporary, the *Chemist and Druggist*, which we commend to the notice of our readers. Why trades-unionism in medicine should be dignified with the name of "ethics" we,

like our contemporary, fail to see. Trades-unionism may be perfectly legitimate (though in medicine it very often means persecution of homeopaths), but why not call a spade a spade?

THE WESTMINSTER GAZETTE ON THE MEDICAL TRADES UNION.

THE following paragraph appeared in *The Westminster Gazette* of August 1st, apropos of a discussion before the British Medical Association :—

“The discussion at the British Medical Association, yesterday, on the employment of unqualified medical assistants, raised some interesting points. It rested on precisely the same combination of arguments that we are familiar with in the case of an ordinary trades union :—

“ (1) It is dangerous to the practitioner who employs them.

“ (2) It is wrong to employ unqualified assistants while so many qualified men are out of work.

“ (3) Leaving these qualified men out of work compels them to open cheap dispensaries and to become officers of medical aid societies [which are exceedingly injurious to other practitioners].

“ (4) The employment of the unqualified is ‘ a direct fraud on the public and highly immoral from that point of view.’

“ Now, a clever trade-union secretary would have concentrated upon No. 4, and left Nos. 2 and 3 to be inferred. One might have supposed, indeed, that No. 4 would have made Nos. 1, 2, and 3 superfluous. We are glad, however, that they should have been stated, for they raise in a very interesting manner the question of the unemployed as it presents itself to one of the very strongest and most exclusive trade unions in the country.”

LECTURE IN SYDNEY.

DR. WALLACE, of Sydney, N.S.W., and formerly of London, gave a lecture on Homeopathy to the Chemist's Assistants' Association of New South Wales on May 29th. A report has reached us from Mr. Fredk. Kopp, who was present at the meeting by invitation, and we are glad to find that the audience evinced deep interest in Dr. Wallace's admirable account of the only system of medicine which has successfully stood the test of time.

VARIOLIN AMONG THE ALLOPATHS.

The Medical Envoy of August contains the following:—

“VACCINATION THAT PROTECTS.—Dr. L. Hoopes, of West Chester, Pa., in June *Homeopathic Physician*, contributes his testimony on the vaccination question, and also incidentally quotes some testimony of value on that vexed question. It is that of three allopathic physicians who, in a very fatal small-pox epidemic in which their usual medicines did no good towards curing, prescribed a dilution of the virus, and with that their patients made rapid recovery. This is simply in a line with ‘homeopathic vaccination,’ with the remedy *Vaccinum* and its use in the actual disease. One dose a year will fully protect against small-pox, and thus avoid all the dangers and discomforts of vaccination. It is unfortunate that a barbarous and brutal law compels little children to be vaccinated in the old blood-poisoning way. In this respect Dr. Hoopes quotes from a report to the Italian Government, showing that in a small town in that country forty-six little children were syphilitised, and twenty of their mothers through their syphilitised suckling, by means of vaccination. This latter is not from an anti-vaccination tract, but an official report.”

SPENCER'S WEEKLY.

WE have received a copy of the first number of the above-named journal (price 3d.), published in Sydney, N.S.W., and to be had in London of E. W. Allen, 4, Ave Maria Lane, E.C. The journal is ably edited, and bids fair to take an important place among Colonial journals. It adopts a very fair and liberal tone in matters medical.

NURSERY ETHICS.

THE editor of *Childhood*, widely known as “Florence Hull,” has written a book upon child training which promises to be as popular as it is valuable. *Nursery Ethics* is the title, and it is to be issued through The Merriam Company, of New York.

URIC ACID.—Dr. Mersch reported before the Homeopathic Society of Flanders a case of a subcutaneous lipoma, situated on the left side between the abdomen and breast, as large as a man's head, only lengthened, cured by *Uric acid* 3x. *Sulphur* was given at first, and then *Arsenicum*, finally *Uric acid* 3x. The last remedy produced an immediate relief and a complete disappearance of the tumour in a month's time.—Dewey in *Medical Century*.

ORIGINAL COMMUNICATIONS.

THYROIDIN.

By JOHN H. CLARKE, M.D., Physician to the London Homeopathic Hospital.

(Continued from p. 348.)

[*Brit. Med. Jour.*, March 30, 1895.]

II. CASES OF INSANITY.

37. **EASTERBROOK.** (Case of chronic insanity cured.) Single woman, 24, admitted to Edinburgh Asylum suffering from puerperal mania. History of migraine and asthma in family. Patient was herself subject to very severe migraine from childhood, during adolescence manifested signs of mental instability, was vain, extravagant in dress, and over religious. At 19 had an "hysterical attack from fright." After this she became idle. At 21 had an illegitimate child, after which she had puerperal mania, for which she was thirteen months in the Edinburgh Asylum, recovering somewhat suddenly. After the birth of a second child in 1892, she had a second attack of puerperal mania of the grandiose type. This condition lasted half a year, and was followed by stupor. She was in this condition a year after the illness began, and during the next year and a half she slowly developed the symptoms of secondary dementia. On December 12, 1894, being in good bodily health, weight ninety pounds, she was put on Thyroid treatment—twelve tabloids a day for seven days. Moderate fever resulted, but she was up in a fortnight, having lost six pounds in weight. A complete mental change had now set in. She said, "I feel as if I had now come out of a long dream." She looked bright and cheery, smiled pleasantly, and began to work. A few days later she was dancing joyously at the New Year's Ball, and singing merrily at her work. The improvement continued to date of writing (March 9, 1895), by which time she had gained three stones in weight.

[*Lancet*, March 9, 1895.]

38. **BRUCE** (summarised in *Lancet* leading article, from the *Journal of Mental Science*) treated at Royal Edinburgh Asylum, Morningside, twenty-three cases of insanity, eight men and fifteen women. Two of the men and thirteen of the women recovered. The cases included

mania, melancholia, syphilitic insanity, puerperal insanity, lactational insanity, climacteric insanity, and general paralysis. Dr. Bruce's idea was that as *Thyroidin* had caused rise of temperature and quickened pulse in myxedema cases, and as in many cases of insanity there was low temperature and slow pulse, the Thyroid treatment might do good.

That this is not the true account of the curative action may be seen from the symptoms collected by me on p. 251 and 252 of HOMEOPATHIC WORLD, vol. xxix, where it is shown that *Thyroidin* produces as well as cures mental disturbance. This is also shown from some of Dr. Bruce's own observations. But, whatever the *rationale* of the action may be, I am concerned only with the actual effects.

The drug was in most cases administered until a feverish condition was produced. Other effects were:—

Tendency to faint when in upright position.

One patient actually did faint.

The pulse showed the first indication of the drug's action—increased rate and volume; lessened tension.

Later there was—irregularity, intermission and compressibility.

Respiration rate increased in proportion to the pulse-rate.

The following observation is one of great importance:—

In five patients who had traces of *dormant phthisis*, symptoms and signs pointing to a *lighting up of the activity of the disease were induced.*

Tongue became furred.

Appetite diminished.

Thirst usually increased if the temperature rose, and nausea and vomiting occurred in several cases.

The blood showed reduction of number of red corpuscles and in the amount of hemoglobin in seven out of eight cases in which the drug was given alone. When *Iron* was given as well, in two there was a gain of hemoglobin, in three a loss; in four a gain in corpuscular richness, in two a loss, and one neither gained nor lost.

It is clear, however, that *Thyroidin* causes, and hence will cure, conditions of anemia.

Skin—became moist; at times perspiration was profuse.

Flushings frequent.

Pigmentation diminished.

Complexion became soft and delicate-looking.

Desquamation occurred to a greater or less degree in every case after the treatment was stopped.

Nervous symptoms: Fine tremors in tongue, lips, facial muscles and limbs.

This is important as bearing on the cases of tetany to be next related.

Headaches frequently complained of.

Mind: [Here the homeopathicity of the action is to be noted.]

Some became depressed.

Some emotional.

Others irritable.

On the other hand: The irritable, morose, and bad-tempered became placid and amiable.

In some the improvement in the mental condition was noted whilst the *Thyroidin* was being administered; in others this was only noticeable when the process of reaction was well advanced.

(To be concluded.)

CASES OF NEURALGIA CURED.

PULSATILLA N.—*DIOSCOREIN.*—*KALI HYDRIOD.*

By E. D. SHIRTLIFF, L.R.C.P. (Lond.), M.R.C.S. (Eng.).

1. *PULSATILLA NIGRICANS.*

A CHILDREN'S nurse, age 23, came to me on July 11, 1895, in the evening, crying with faceache, of right side. She is a brunette, black hair, with a high colour; of very amiable, though energetic, persevering, and lively disposition. The pain had come on in the morning, and continued all day. Pain was remittent; that is, she would get spells when pain was less severe, then it would come on very acutely. It had not ceased at all since beginning. She commenced to menstruate at 19. Menses very scanty and painful. She described the toothache pain as "pulling." It was aggravated by eating her dinner; by hot things; cold things made no difference. The pain was *better in the open air*; worse indoors. Warmth over ear relieved. One upper right molar was hollow. The pain shot from this

to right ear, and to ante- and post-aural regions. Tongue pretty clean. Appetite poor.

Taking "amelioration in open air" as key-note, adding to it the fact that the pain was "pulling" (*Puls.* "as if a nerve stretched (*pulled*) out and suddenly let go")—perhaps the "pulling" alone was not very characteristic—and remembering the late commencing, scanty, and painful menses, *Puls.* seemed indicated, so she received *one* dose, *Puls.* 30 (*Puls.* has also aggravation from partaking of anything warm). Pain was very severe when she took the dose (though not in a paroxysm); in a few minutes the pain was completely gone for the first time since she had it. Getting up in the night to attend to a child she had it slightly, and all the rest of the night.

July 12th.—No pain in morning. Came on again when out. No pain in evening. No more medicine.

July 13th.—No pain.

July 14th.—No pain.

July 18th.—Has had no pain. Cured.

A great deal, if not most, of my prescribing is on the single dose system. I was stimulated thereto by Dr. Robert Cooper's article on the single dose in THE HOMEOPATHIC WORLD. I believe it was Hahnemann's practice.

Another girl came to me with neuralgia sometime ago. I forget the details of the case, but I know I cured it with one dose. I think it was *China* 1x, a drop or two, given because the girl looked worn and ill.

2. DIOSCOREIN IN ENTERALGIA.

HERE is another acute pain case treated without *Morphia*. A woman, young, with several children, sent for me for acute abdominal pain. She was lying on bed upstairs, but sat up to tell me her symptoms. The pain came on at 5 a.m. I saw her about 10. She had tried various things, including ginger. After the ginger she was sick, but with no relief to pain.

Pain was remittent, never entirely ceasing. As far as I could judge by where she placed her hand (patient was dressed) it was in the umbilical region. It was relieved by bending double, and by lying on abdomen.

She had had an attack two years ago, which lasted four days.

The pain in this present attack was not relieved by stool, which was dark and pappy in consistence. Pain was eased by hot external moist applications. She described the pain as "dead aching"; sometimes like pins and needles, and sometimes griping. Head swims. Feels weak from pain. Eyes feel weak. Lips parched. Tongue furred, yellowish. Nape of neck sore. Thighs ache. Small of back aches. Pulse 83, soft. Is suckling a baby 9 months old.

Dioscorein.—First trit. a small pinch. Immediate vomiting, with relief to pain (vomiting hadn't eased it before). In half an hour pain quite easy, and it gradually went, to return no more.

Next Day, July 14th.—No pain. Up doing her work. Abdomen very sore. Feels very weak. No medicine.

July 15th.—Soreness quite gone. Not so weak. Feels much better; but a bit weak in the limbs, for which she received *China*.

This is another case cured with the single dose. Another thing it shows: I think the medicine was probably absorbed in the mouth, for it hardly had time to reach the stomach, as vomiting was immediate. (I have, however, known powders of *Sac-lac* do the same. I think it is the moistened powder in the mouth that causes the vomiting.)

I gave the *Dioscorea* because I thought it was a good colic medicine, and the pain was *umbilical*; and in the form of *Dioscorein* because I had no tincture.

I gave it the same day in a case of *hypogastric* griping, as it is given in *Hart's Repertory of New Remedies* as having cured colic-like pains there, and caused (I suppose *caused*, as no mark (°) is prefixed) griping pains there (hypogastrium) with no result. I think it is indicated chiefly when pains are *umbilical*.

In the case where the *Dioscorein* failed, on my second visit I gave *Ars.*, because the patient was covered *all over* (veratrum cold sweat on *forehead*) with cold sweat (*Lippe's Repertory*). There was also faintness, and it was a cancer case (of upper sigmoid). The *Ars.* relieved each time it was given, and gave the patient sleep (the good, without the bad effects of *Morphia*).

I meant to have said the woman benefited by the

Dioscorein, had an acute attack of pain when I was there ; she turned pale, and sank back on to the bed.

3. *KALI-HYDRIODICUM* (*IODIDE OF POTASSIUM*)
IN NEURALGIA.

A YOUNGISH woman, dark, with silver threads among the dark, plump, suffers with excessive loss at the monthly periods, also has had neuralgia. This consisted of dreadful pain in a decayed tooth (left upper molar) ; extraction was attempted, but one fang was left in, the pain continuing very severe. At this stage I was called in. (Patient had already tried *Quin. ars.* 3x tinct., which had done her neuralgia good twelve months ago ; but this time it had no effect). I gave *Acon.*, with some benefit ; however, the next day or so after my visit the pain came on again tremendously, and the patient had the remaining fang extracted, notwithstanding which the pain became worse than ever. The patient was very much worn out and weak, and took *China* with apparent benefit, which, however, was only temporary, the pain becoming as bad as ever. Pain was worse lying in bed, better if she got up and ate and drank, and especially relieved by drinking *hot* things ; pain was better during eating. The patient could get no sleep, and was better up and about.

Lippe's repertory of characteristics gives "toothache with relief from anything warm : *Kali-hyd.* and *Nux.-m.*" Patient had pain in neck, too (nape, I think), and this condition is given in the same repertory under *Nux.-m.* *Nux.-m.* is also recommended in Lippe's text-book for women and children ; so she received it, but no benefit resulted.

I therefore gave the other remedy given under "relief from anything warm"—*Kali-hyd.*—in low dilution, which gave marked relief in a few minutes. It was ordered every four hours. Before the four hours were up pain came on again somewhat badly ; however patient waited the four hours, when it again gave complete relief, and so she continued getting better till she was quite well.

Dr. Clarke, in his most valuable book for beginners (and always useful to keep and add to in interleaved copy), *The Prescriber*, gives under neuralgia—*Kali-iodatum* (same thing as *Kali-hydriodicum*) 30. Indications : "Excessive sensitiveness of surface, diffused sensitiveness." Dr. Burnett has a book on neuralgia, but I don't remember *Kali-hyd.* being mentioned.

I may say I have seen this drug written as *Kali iodatum*, *Kali-hydriodicum* (*Kali-jod* or *Kali-hyd.* for short), *Kali-hydro-jodicum*, *Jodkalium*. They are all the same thing—*Iodide of Potassium*. I think there was a case some time ago in the HOMEOPATHIC WORLD of a neuralgia about the eye, cured by this drug related by Agricola in his Practical Keynotes. I am glad to say I never use *Morphia* in pain cases, and hope I never shall, though I was told of one case of cure of neuralgia by it. The subject of it told me. He is a man of extreme excitability, and many years ago had a most maddening neuralgia of head. The doctor injected *Morphia* at the seat of pain, and he never had the pain any more or since. In my opinion, as a rule in pain, *Morphia* only makes the patient more sensitive to pain after, and only gives temporary relief at the time.

I think I have noticed early greying of the hair in patients who suffer in nervous system.

Holmwood, Cowleigh Road, Malvern.

[* * * The case referred to by Dr. Shirtliff will be found on p. 356 of the HOMEOPATHIC WORLD for 1892 (August number). The indication, "diffused sensitiveness" for *Kali-iod.*, which we have found of great value, we owe to Dr. Cooper. Ed. H.W.]

REMARKS ON DR. COOPER'S "ARBORIVITAL MEDICINE" — *VIOLA TRICOLOR* — *VIOLA ODORATA*—*CHEIRANTHUS CHEIRI*.

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

(Continued from p. 351.)

II. *Viola-odorata* (Nat. Ord. *Violaceae*) is considered by Dr. Cooper to act specifically upon the middle ear, the retina, and the lateral sinus, and the inferior cerebellar veins. *Viola* acts best upon dark-haired, anemic, or neuralgic (or both) patients, and has the peculiar property of restoring an otorrhea which has been suppressed by cold, fever, or other morbid condition. "A tendency to pain above the eyebrows and affecting both sides of the forehead; the knitting of the brow, burning of the forehead, tension above the eye, and prickings in the sinciput point to this" influence over the circulation at the base of the brain. We all can learn from Dr. Cooper something fresh about *V. odorata* and *V. tricolor*, for we do

not make much use of the 70 symptoms of the former, nor of the 182 symptoms of the latter, recorded in Allen.

Case 1.—Deafness of both ears, left the worst, of six years' duration, dating from influenza, in a pale, young woman of twenty, with roaring in both ears, frequent headache through temples and behind the eyes, anemic tympanic membranes, &c., H.D. right 1 inch, left off contact. After seven doses of *Viola-od.* ϕ_A , given between May 21st and December 3, 1892, the conversation-hearing became good, and the watch-hearing distance improved to right 9 inches, left 4 inches.

Case 2.—Deafness of both ears after chicken-pox five years ago, with otorrhea and increasing myopia and violent headache, in a dark-haired girl aged thirteen. Large perforations in membranes. Treatment began May 21, 1892, and was still being continued in July, 1893; the watch-hearing, voice-hearing, and every other symptom much better. "There remains an ulcerated condition of both ears, kept up by unhealed mastoid cells."

Case 3.—A girl of twenty-one, deaf in both ears for twelve years after typhoid; rapidly becoming worse. Has when tired a headache across the upper forehead; membranes dry and anemic; used to have tinnitus, but not now: H.D. right 15 inches, left 13 inches. One dose *Viola-od.* April 29, 1893; a second dose June 10th; was "in every way well, hearing splendidly" by July 1, 1893.

Not to take up undue space, I may state that *Viola odorata* ϕ_A relieved or greatly improved nine other cases of deafness and otorrhea.

A remarkable cure of chronic choroiditis, as diagnosed by both Dr. Cooper and "an eminent oculist" in a middle-aged lady, the daughter of a Welsh rector, is detailed rather minutely by our author, and should be published separately in the HOMEOPATHIC WORLD. For twenty years this lady had suffered from increasing feebleness of sight—the total loss of which was threatened, despite appropriate glasses, constitutional tonics, &c.—and from "fearful headaches." Beginning with a dose of *V. odorata* ϕ_A on September 13, 1893, this patient at once improved. She seems to have had *only two* more doses of *Viola*, yet she was able to discontinue glasses in November, 1893; and she wrote, May 11, 1894, "I am quite well, and my sight is in splendid order."

III. *Viola tricolor* is not worked out by Dr. Cooper, but a case is cited of a man of forty, presumably deaf, whose ear had not discharged for seven months. After one dose of *V. tricolor* $\phi\Delta$ a pain came in the left eustachian-tube, the left ear discharged for three days, and then dried up. More details are wanted; but we see a tendency to *act on the left ear* in the provings in Allen, illustrated by this case, which Dr. Cooper casually mentions to show the analogous action of the two species of *Viola*.

IV. *Cheiranthus Cheiri* (Nat. Ord. *Cruciferae*), our common dark-brown and yellow wallflower, seems to have remedial properties.

Case 1.—A young man, aged twenty, suffers from deafness and otorrhea of left side. He is cutting three of his wisdom teeth. Watch heard on contact only. The single dose of *Cheiranthus* $\phi\Delta$, given April 30, 1892, improved him up to June 11th. A second dose, given June 25th, seems to have cured him, for we find the watch-hearing is now 25 inches, and "hearing in every way satisfactory."

Case 2.—A girl of twenty-two, deaf after measles, who was cutting her wisdom molars, was greatly improved by *Cheiranthus*. Dr. Cooper shrewdly gives this symptom—"the lower wisdom teeth came through"—No. 240 of *Magnesia Carbonica* as a possible "keynote" for the choice of *Cheiranthus*.

Case 3.—*Cheiranthus Cheiri* $\phi\Delta$ took away at once a pain in the lower back, with jaundiced appearance and bilious feeling, accompanied by sickness of the stomach, for which the patient, a girl of twenty, used to take purgative pills.

51, Cannon Street, Liverpool, July 11.

(To be concluded.)

REMARKS ON THE "MATERIA MEDICA."

IPECACUANHA.

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

IPECACUANHA.—The prefatory remarks state that the following list of symptoms, which is by no means complete, shows that this powerful drug has not been created merely for the purpose of bringing about a violent evacuation of the stomach (a proceeding which is, in most cases, an

unnecessary cruelty), but for more noble and important ends. It was originally introduced into Europe as a remedy against the fall dysentery, and has therefore been called dysentery root. It is now one hundred and twenty years since it has been thus abused upon the recommendation of Leibnitz. It was falsely supposed that because *Ipecac.* cures some kinds of diarrhoea, it must likewise cure dysentery, which is, however, the very contrary of diarrhoea, that is, of too frequent and thin evacuations. It has lately been abandoned as a remedy against dysentery, after an experience of many years had shown that it was ineffectual. These numberless failures might have been avoided if the genuine properties of the drug had first been ascertained by proving it upon healthy persons. It would then have been seen that *Ipecac.* is simply capable of diminishing the quantity of blood, and some kinds of colicky pains in dysentery, but that it is incapable of curing the more characteristic symptoms of dysentery, inasmuch as it is incapable of producing similar ones in healthy persons.

On the contrary, the following list of symptoms shows that *Ipecac.* is capable of curing certain forms of inclination to vomit, certain kinds of paroxysms of spasmodic asthma and suffocative spasms, and some kinds of tetanus, provided the other symptoms correspond. Certain kinds of intermittent fever are likewise cured by *Ipecac.* If the drug should not have been entirely homeopathic, it generally changes the character of the fever in such a manner as will make it correspond to *Arnica*, and in some cases to *Cinchona*, *Ignatia*, or *Cocculus*. *Ipecac.* removes certain prejudicial effects of *Arsenic* and *Cinchona*. Small doses of *Ipecac.* are sufficient in all these cases. I have likewise given the millionth part of a grain of *Ipecacuanha* at a dose; but in many cases the dose ought to be much smaller. In a case of violent poisoning by *Opium*, 30, 40, 60 drops of the strong tincture of *Ipecacuanha* are required to counteract the poison; unless coffee or *Camphor* should answer better. *Ipecac.* has a very short duration: large doses act a couple of days, small doses a few hours. Under detailed symptoms we have—*Moral*: he does not speak a word; his ideas flow very slowly; nothing gives him pleasure; *peevish humour, despising everything and requiring that others should likewise despise everything*; he is awkward, and stumbles against everything; *extreme impatience*; the child screams and howls violently, and without interruption,

inserts his little fists into his mouth, the face being pale and the body somewhat cool (a. 1 hr.). *Head*: headache as if the brain and skull were bruised, penetrating through all the bones of the skull down to the root of the tongue, with nausea; pain at a small spot, now in the temples, now over the orbit of the eye, pressing from within outwards, and almost boring; disappearing by external pressure, and diminishing by closing the eyes (a. 1 hr.); vertigo, as if he would stagger hither and thither, with momentary vanishing of thoughts, only when walking and when turning round (a. 2 hrs. in the evening); when walking in the open air staggering of the body to and fro, as if intoxicated, with stupefaction of the head (a. 10 hrs.); heaviness in the head with drowsiness. *Eyes*: dry eyelids, with drowsiness; pale face, with blue margins around the eyes, and great weakness, as after a long and severe illness. *Ears*: aching pain extending from the concha to the tympanum, and reaching even the occipital protuberance (a. 28 hrs.). *Nose*: bleeding at the nose. *Face*: feeling of heat in the cheeks, which is perceptible to others, without redness (a. 3 hrs.); smarting in the margins of the lips, the tip and sides of the tongue, with conflux of watery saliva in the mouth and some pain in the abdomen (a. $\frac{1}{2}$ hr.). *Teeth*: pain in the teeth as if they were being torn out, in paroxysms (a. 8 hrs.). *Mouth and pharynx*: he is constantly obliged to swallow saliva (a. 1 hr.); dull stitches transversely through the throat and the inner ear; pain in the fauces as if they were too dry, rough and sore, the pain is relieved for a short time by swallowing saliva or any common beverage (a. 1 hr.). *Appetite and gastric*: absence of thirst; during deglutition there is a taste in the throat as of rancid oil (a. $\frac{1}{4}$ hr.); nauseated and heavy in the abdomen; nausea out of the stomach immediately after the usual smoking, with hicough, disappearing only after having had several stools, which finally became papaceous (a. 14 hrs.); nausea, as if coming out of the stomach, with empty eructations and conflux of a quantity of saliva (a. $\frac{1}{2}$ hr.); vomiting of ingesta, yellow mucus, fetid mucus, green, jelly like, as green as grass. *Stomach and abdomen*: sensation as if the stomach were hanging down, relaxed, with loss of appetite (a. 1 hr.); griping pinching in the abdomen, as if one were griping with the hands, in such a manner as if every finger were spread out and a sharp impression were made into the intestines with the end of every finger, the pain is allevi-

ated by rest, but excited to the highest pitch by motion; *pinching colic in both hypochondria and in the scrobiculus cordis* (a. 3 hrs.); *cutting pain around the umbilicus with shuddering*; cutting colic around the umbilicus, as if the monthly courses would appear, with chilliness and coldness of the body, accompanied by rising of internal heat to the head (a. 2 hrs.); indescribable sick feeling in the scrobiculus cordis. *Stool*: lemon-coloured, fetid, covered with red bloody mucus, grass-green; *diarrheic, having the appearance of being fermented*; frequent liquid diarrhea with qualmishness in the abdomen. *Urinary*: scanty red, urine, bloody, straw-coloured; *turbid, with brickdust sediment*. *Genital*: writhing drawing pain in the testicles (a. 8, 10 hrs.); suppression of menstrual discharge as a reaction of the organism; primarily it produces hemorrhage from all the orifices of the body, especially from the uterus, all of which it is capable of curing homeopathically.

(To be continued.)

NAT.-SULPH. IN ASTHMA—A POSSIBLE KEY-NOTE SYMPTOM.

By R. H. BELLAIRS.

I HAVE an interesting cure of chronic asthma to report in a man of about 35, with *Nat.-sulph.* 3x trit.

He had been under many homeopathic and allopathic physicians, and had taken at different times *Arsenicum*, *Antim. tart.*, and many other remedies without any great relief.

The only symptom that led to *Nat.-sulph.* was "looseness of the bowels" at each attack of asthma.

No other subjective or objective features of any importance could be elicited.

The one real aggravation was from aerated waters and alcohol. The cure is complete and brilliant, general health being vastly improved.

I could not find any traces of sycotic dyscrasia, such as "decay at roots of teeth," or "marked improvement at the sea-side," both of which are, in my opinion, most important indications.

The case is an agreeable puzzle.

KEY-NOTES—PRACTICAL ONES.

CARBO PYROLIGNEUS.

By AGRICOLA.

NAUSEA, pharyngeal neuralgia, constant continuous inclination to vomit, aversion to animal food, and a *penchant* incontrollable for vegetable diet, sensation of gastric putridity (pyloric-duodenum), sense of putridity in nostrils, and an expression on *countenance as if the patient was cognisant of* a repulsive odour emanating from those with whom he was conversing; these were the leading symptoms detailed to me by a poor fellow of whom his club doctors had long ago become tired, his frequent presence in their purgatories having worn out his welcome. Now it so happened that at that time I had had my attention directed to the probable powers of the above drug, *Carbo pyroligneus*, as an antiseptic chemically speaking, and as I knew from my own proper personal experiences the value of the drug in several symptoms dyspeptic, I handed him a phial of 6x, and making with a clean steel pen stuck point inwards into a wooden holder an impromptu two-grain scoop and measure, I directed him to take a dose there and then.

Almost instantly he exclaimed, "That's gone straight to the seat of mischief, sir," placing his open right hand just below the right breast, "it has set something in motion *there*." His countenance cleared, and he went away confident of receiving most unexpected and permanent relief. My instructions were to allow that *one single dose* to continue its action, and when the old symptoms reappeared then to take another.

I conclude he will pay me other visits; the result of further treatment will, if interesting to the editor, etc., be communicated in due course. Probably I may, privately through the editor, or publicly, in these pages be modestly requested to—well, "*make a proving*" of this agent—to this I should reply that chemistry has already published sufficient as to its components and their properties to give them a guide as to its probable action; while the several and numerous analogues of the drug joined to their experiences in diseased conditions should afford them, *i.e.*, would-be inquirers, ample information therapeutic.

SIR WILLIAM BROADBENT AND HOMEOPATHY.

A NEW *TIMES* CORRESPONDENCE.

WE have dwelt at sufficient length on Sir William Broadbent's address at the British Medical Association in our leading article, but it has also proved the subject of a discussion in *The Times* which recalls the famous controversy of 1887-8. In an excellent letter which appeared in *The Times* of August 8th, Dr. Dyce Brown pertinently referred to an article by Dr. West recommending our old friend *Uranium nitrate* as the best remedy in diabetes! Dr. West replied, on August 10th, that he did not "explain" the action of the drug as homeopathic, and added that homeopathy "states an opinion" merely, and does not and cannot explain anything. On August 13th appeared another letter from Dr. Dyce Brown, in which he effectively disposed of Dr. West's assertions, quoting from *The Lancet* the following passage from a pretty full abstract of Dr. West's paper:—

"A short account was first given of the physiological action of *uranium*, of which, however, little is known except that in poisonous doses it acts as an irritant poison, and ultimately produces albuminuria and also glycosuria. Diabetes having been selected as the disease in which to try the effect of the drug' (the italics are mine), 'it was administered to a number of out-patients,' &c. Why, may I ask, was this disease of all others selected for trying the drug?"

In his reply on August 16th (which is merely a clumsy performance in running-away), Dr. West discreetly leaves this passage untouched.

In a final paragraph Dr. Dyce Brown deals with the "explanation" argument adduced by Dr. West, and he shows that the business of homeopathy is to "cure," and not necessarily to "explain."

In a sense, of course, Dr. West is right in saying that homeopathy does not explain anything: so long as life in its essence remains a mystery, so long will the phenomena connected with life remain at bottom inexplicable. But biology is a science for all that, and the bringing together of related phenomena supplies as much in the way of explanation as is required for immediate practical needs. This is what Hahnemann has accomplished for the science

of drug administration. So far from stating an "opinion," the homeopathic doctrine resolutely discards opinion and concerns itself only with demonstrable facts. Homeopathy was first enunciated not as an "explanation" of drug-action, but as "a new principle for ascertaining the curative powers of drugs." *Ipecacuanha* causes vomiting, and cures cases of vomiting like those which it causes. Corrosive sublimate causes dysentery and cures cases of the same disease. *Drosera* causes a cough like whooping cough and is a recognised remedy in this disease. Homeopathy does not attempt to explain these facts, but it has shown how they may be utilised; and in these and numberless other instances allopathic writers have so far acknowledged homeopathy as to adopt its discoveries. In science priority of observation counts for much, and we claim that homeopathy shall not be denied the honour of priority where it is clearly established.

But to the most superficial observer is it not evident that the whole trend of modern medicine is in the direction of homeopathy? What is the new treatment of diphtheria now heralded by Sir W. Broadbent and his British Medical confrères as inaugurating "the dawn of medical science" but an instance of homeopathy? One of the heroes of *Antitoxin*, M. Pasteur's chief assistant, Dr. Roux, has himself admitted that it is so to an interviewer, adding that "there is truth in the Hahnemann method of curing like by like."* That is what we contend for, and all we ask of the profession is that instead of attempting to brush it aside with stupid and ignorant sneers like that of Sir W. Broadbent, it shall honestly investigate the method and help us to determine just how far the truth that is in it is applicable to the cure of disease; and we also claim that it shall not omit to give credit where credit is plainly due.

J. H. C.

* In a note to Aphorism lvi. of his *Organon of Medicine*, Hahnemann forestalled the modern methods thus: "A fourth mode of employing medicines in diseases has been attempted to be created by *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*."

NEW REMEDIES.

A NEW MILK-CURE.

READERS of THE HOMEOPATHIC WORLD like to know the latest intelligence in the way of cures, and we therefore hasten to present them with the last that has come under our notice through the kindness of a correspondent.

Milk-cures we have heard of before, but these have consisted in the internal use of the nutritive fluid. "Lactopathy" (as its author, Dr. W. Byron Sampson, somewhat barbarously calls it—"Galactopathy" would be more correct, keeping to pure Greek roots; if we are to mix the roots, why not call it "Milkopathy," which would at least be "understood of the people"?), relates to its use externally. But we will let Dr. Sampson speak for himself, quoting from his letter which appeared in *The English Mechanic and World of Science* of Jan. 11, 1895.

"LACTEOPATHY, OR THE TREATMENT FOR PAIN AND DISEASE BY NEW MILK PACKS AND COMPRESSES.

"Some years ago it was discovered that a large number of persons were attacked with typhoid fever from drinking milk which had been in buckets that had been washed in water from an impure well. I reasoned thus:—If milk will so absorb poisonous germs from a bucket, why should it not also absorb poisonous germs or gases from the human body? I soon put the idea to the test, and got wonderful results from the local application of milk-cloths to bad sores, erysipelas, &c. But the time soon arrived when I was able to put it to a more definite test. The smallpox broke out in Kimberley in 1884, where I was then practising, and I determined to try the efficacy of sheets soaked in fresh milk in *aborting* that terrible disease. Accordingly I visited several houses whence smallpox patients had been removed to the lazaretto, and I left word that if any other member of the household were attacked, I should be sent for at once, as I could apply an *abortive*, or preventive, treatment. I then succeeded in treating some eighteen or twenty cases attacked with the *symptoms* of smallpox, which (especially when raging in an epidemic form) are so marked as hardly to be mistaken.

"In one or two instances the sanitary physician visited every morning to remove the patient to the lazaretto as soon as the eruption appeared; but in every case which I thus treated, the milk-sheet applied for an hour every four hours night and day

drew the smallpox poison so completely out of the body that the patients were nearly all convalescent on the fifth day, no eruption having appeared on any of them. In one case, in a bad subject for the disease, pronounced severe, *not attended by me*, where the milk-sheet was applied at night by a friend for two hours, and where the eruption had already appeared over the whole body, the milk drew the eruption so entirely from the skin that the physician in attendance was amazed the next morning to find the eruption gone and the patient convalescent. In four days afterwards this man was up and about, and thanked me for having been the cause of saving his life.

“If these statements be doubted, the experiment can easily be tried. Take a patient with the initiatory symptoms of smallpox; put him into a milk-pack or sheet for an hour every four hours night and day, and I guarantee that the disease will be stopped and the patient convalescent, generally on the fifth day, and not have a single spot on his body.

“Moreover, the virtues of the milk-sheet are not confined to the cure of smallpox; it will *abort* all kinds of fevers and inflammatory conditions. In scarlet fever, measles, typhus, typhoid, malarial, puerperal, and all blood fevers, the effect of this milk treatment is simply wonderful. It lowers the temperature, stops delirium, promotes sleep, and generally puts the patient into a comfortable condition. Rheumatic ailments soon yield to this treatment, and the milk-sheet is only to be used intelligently in most diseases to prove its marvellous efficacy. The relief given to syphilitic and leprosy patients must be experienced to be believed; and if my premises are correct, it will not astonish any one to credit that these diseases are curable. I know that they are.

“In most chronic diseases, while medicine acts on the disease, the use of the milk-sheet, by eliminating the poison from the blood, prevents the disease, so to speak, from being *fed* with impure matter, and in such cases as phthisis, cancer, skin diseases, and serofula of all kinds, a vast field of usefulness is opened up.

“I have experimented with milk for several years, and, understanding most symptoms of treatment, I boldly affirm that of all agents used for the prevention or for the cure of disease, nothing can at all compare with it in its results. The treatment is gentle, soothing, and wonderfully recuperative. I have never known patients complain of any weakening or other ill effect from using the milk-sheet (and I have prescribed it once a day, or once every two days, hundreds of times); but, on the contrary, it adds to their flesh and strength.

“It may be thought that there is little or no difference between the action of the milk-sheet and that of the ordinary

hydropathic wet-sheet packing; but I have tried the two side by side, and the milk-sheet will do what the water-sheet cannot. The milk-sheet has the power of absorbing or drawing out disease to a degree not possessed by the water-sheet; and to prove what it does, I may say that if, after use in some cases, the sheet be not immediately washed, the poison which is absorbed in it will destroy the sheet in a very short time. On one occasion, where it was used in a case of smallpox, and was not immediately cleansed, in a few days it was found crumbled to pieces, thus proving that the milk in the sheet retains the poisonous germs of disease. I have known the effluvium from a milk-sheet, which had been used in a chronic case from the effects of scarlet fever, to be so offensive, that the room in which it had been used was uninhabitable for twenty-four hours after.

"I have just sent home cured my fourth case of insanity. The doctor who was consulted said that the man must go into a lunatic asylum for at least six months. I laughed at it, and asked to be allowed to treat the case. The friends agreeing, I ordered milk-sheets morning and evening—result, cured in a month.

"I am now treating two interesting cases, one of kidney disease from England, the other an American from the States, with chronic indigestion. In both cases I promise a cure. I am curing a lady who was suffering from spinal disease, and who had been in bed five months. In the first week I took away all her pains, and she can now walk about easily. In her case I apply milk bandages all along the spine every night. I was called in to attend a young man attacked with malignant scarlet fever; the rash was out from head to foot, and the throat so much affected that swallowing was impossible. I ordered a milk-sheet to be applied for an hour every four hours day and night. At the end of the third day the patient was sitting up as usual, and eating a hearty dinner of roast beef and vegetables. There was no desquamation, therefore no infection. In cases of diphtheria I have had the best results from bandaging the throat with a milk-compress.

"My mode of treatment is this:—Lay three or more blankets on a mattress, and take a single sheet, only large enough to envelop the body, and if the weather be cold, first warm the sheet, then saturate it with about a quart of warm milk (not boiled), and open out the sheet, without wringing it, and lay it on the top of the blankets. Then pack the patient in the sheet tightly round the body, under the arms, covering the shoulders on each side with the top of the sheet, the arms resting bare on the sheet. Then pack the blankets, one by one, over the body on each side, and let the patient lie in this pack for, say, an

hour. When taken out, he can either be sponged all over with warm water, or take a warm bath.

“Any further information on this new system of treatment I shall be happy to afford.

“W. BYRON SAMPSON, M.D.

“Post Office Box No. 1363, Johannesburg,

“Transvaal, South Africa.”

To say the least of it, the remedy is innocent enough, and deserves a fair and thorough trial.

BRITISH HOMEOPATHIC CONGRESS, 1895.

The following circular has been issued :—

BRITISH HOMEOPATHIC CONGRESS, 1895.

OFFICERS FOR THE YEAR.

President—EDWARD M. MADDEN, M.D., Bromley, Kent.

Vice-President—S. H. RAMSBOTHAM, M.D., Leeds.

Hon. Secretary—D. DYCE BROWN, M.D.

Hon. Treasurer—J. W. HAYWARD, M.D., Liverpool.

Hon. Local Secretary—H. G. STACEY, M.D., Leeds.

COUNCIL.

THE PRESIDENT.

THE HON. SECRETARY.

THE HON. TREASURER.

RICHARD HUGHES, Esq., M.D.

A. C. CLIFTON, Esq., M.D.

29, SEYMOUR STREET, PORTMAN SQUARE, W.

July, 1895.

DEAR SIR,—The Annual Congress of Homeopathic Practitioners will be held this year in Leeds, at the Great Northern Station Hotel, on Thursday, the 19th of September, at 10 o'clock punctually.

The Presidential Address will be delivered by Edward M. Madden, M.D., Physician to the Bromley Homeopathic Hospital, on “Recent Pathological Investigations and Theories, with special reference to certain points which seem to bear on the doctrine, ‘*similia similibus*,’ and on Hahnemann’s speculations as to its *modus operandi*.”

Any strangers, ladies and gentlemen, who may desire to hear the President’s address, will be welcome. A short interval will then elapse to allow the Hon. Treasurer to receive subscriptions.

A paper will then be read by George Burford, M.B., Physician to the Gynecological Department, London Homeopathic

Hospital, on "A New Therapeutic Treatment of Sub-involution of the Uterus with Salts of Potassium and Gold."

A synopsis of this and the other papers will be found on the third page of this Circular. Discussion is invited on all the papers. After the conclusion of the discussion the Congress will adjourn till 2 o'clock for luncheon.

At 2 o'clock punctually, the Congress will reassemble and will fix the place of meeting for 1897 (as the International Congress will take place in London in 1896), elect officers, and transact any other business which may be necessary.

A paper will then be read by Charles W. Hayward, M.D., Physician to the Hahnemann Hospital, Liverpool, on "Albuminuria."

The last paper will be read by W. Theophilus Ord, M.R.C.S., L.R.C.P., Visiting Surgeon to the Bournemouth Homeopathic Dispensaries, on "Hindrances to the Action of the Homeopathic Specific."

The members of the Congress, with their friends, ladies as well as gentlemen, will dine together at the Great Northern Hotel, at 7 o'clock. The subscription to the Congress is Ten Shillings, which includes the Dinner Ticket. The Dinner Ticket alone, *for guests only*, will be Seven Shillings.

Dr. H. G. Stacey, 28, Park Square, Leeds, the Hon. Local Secretary, will be happy to secure rooms at the Hotel for Members of the Congress, if they will communicate with him. 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 at all possible) than the 14th of September.

I am, dear sir, yours faithfully,

D. DYCE BROWN, *Hon. Sec.*

SYNOPSIS OF PAPERS

DR. BURFORD'S PAPER.

In the Life History of the Uterus, its normal function is gestation, and its quiescent period is that of a resting-spore. After child-birth the uterus undergoes entire re-creation; and aberrations are due to the defective genesis of new muscular tissue, and not to arrested dissolution. The forces of nature for the post partum regeneration of the uterus are easily perturbed. The first defect is a vasomotor defect. The second defect is a trophic defect. Sub-involution is a preventible issue. Potassium Salts have a specific affinity for non-striped muscle; and Kali Bromatum electively upon the uterus. Gold has a controlling power over exudates, and the hypergenesis of new connective tissue. But these drugs are indicated for different elements in the condition of sub-involution; and their chemical combination in the later stages of this lesion.

(*The Paper will be illustrated by Diagrams and Lantern demonstrations of Microscopic Slides.*)

DR. HAYWARD'S PAPER.

The varieties of Albuminuria; pathological, functional, dietetic, nervous.—Tests for Albumen.—Causes of Albuminuria.—Acute Nephritis.—Scarlatinal Nephritis.—Chronic Nephritis.—Granular Contracted Kidney.—Waxy Kidney, &c.—Diagnosis.—Prognosis.—Treatment, with Notes of Cases illustrating each of the more important varieties. The Relation of Albuminuria to Life Insurance.

DR. ORD'S PAPER.

Removal of hindrances often essential to successful treatment.—In what pathological conditions does the correctly chosen remedy most often fail?—What are the obstacles to its success?—Infective bacilli, morbid products, chemical and other *blood-poisons*.—Special hindrances to homeopathic treatment exhibited in diseases characterised by their presence.—The specific fevers, ptomaine poisoning, diphtheria, gout, medicinal, dietetic, and accidental poisons.—The hereditary dyscrasia.—Hahnemann's "Chronic Diseases" and old-school "diatheses."—Unhealthy environments and super-position of morbid types.—Perversions of nerve-force, epilepsy, pertussis, and tetanus.—Permanent alteration of tissue in vital organs, advanced phthisis, the neoplasms.—Conclusions arrived at.

INSTITUTIONS.

TORQUAY HOMEOPATHIC DISPENSARY.

THE forty-seventh annual meeting of the Committee of the Torquay Homeopathic Dispensary was held at 76, Fleet Street, Torquay, on Friday, April 26, 1895. Present: W. B. Fortescue, Esq., J.P., in the chair, Dr. Midgley Cash, Dr. W. F. Edgelow, and Mr. Rendall.

The following is the medical report for 1894:—

Patients remaining from 1893	117
Admitted during 1894.....	832
	949
Cured.....	307
Relieved	341
No Change	29
No Report.....	127
Deaths	7
On Books	188
	949
Number of Attendances during the Year.....	6,082
Average per Dispensary Day.....	58

The Torquay Homeopathic Dispensary has now been established for forty-seven years, and the number of poor people that have been treated during that period is very large. The number of attendances for the year 1894 was 6,032, or over 100 a week.

LADIES' AID AT THE MELBOURNE HOMEOPATHIC HOSPITAL.

THE Ladies' Aid Association, formed with a view of aiding both the nursing staff of the Homeopathic Hospital and the patients in the numerous ways which come more particularly within a woman's province, held its fifth annual meeting at the Town Hall yesterday, the Mayor of Melbourne (Sir Arthur Snowden) presiding. The report showed that the work of the association had been carried on with great success during the year, and the committee, knowing that pleasant and comfortable surroundings of an invalid have much to do with that cheerfulness of spirit which is such an aid to recovery, had endeavoured to make the wards as bright and homelike as possible, and in this work they had been greatly assisted by former patients and by outside friends. The cot maintained by the Ladies' Aid Association had been occupied during the year by several little sufferers—some of the cases being very long and trying—and all had been successfully treated. The committee desired to state that the subscription which entitles ladies to become associates is 5s. per annum, and as this will allow them to recommend a child for the cot, the committee hope that many will join the association. The balance sheet showed that the receipts for the year were £39 19s. 6d., leaving a balance in bank for the year of £9 6s. 11d. For the cot fund, the receipts were £67 2s. 4d., leaving a balance in hand of £29 19s. 4d. Dr. Cooke moved the adoption of the report. Dr. Bouton seconded the motion, and suggested that donors of sums above £5 should be made honorary members. The report was adopted, and the following office bearers were elected:—President, Mrs. D'Arlot; vice-presidents, Lady Snowden and Mrs. C. Hudson; hon. treasurer, Mrs. J. M. Templeton; hon. secretary, Mrs. E. G. Snowden; committee, Mesdames Adderley, Bruce, Bouton, Jack, Jones, Hunt, Halley, Hildreth, Hendy, S. Harding, Reid, Ray, Rennick, Sinnott, Pickells, and Misses Adderley, Brookes, Ferres, and Reid.

EXTRACTS.

MEDICAL ETHICS.

THE British Medical Association which met in London last week seems to have been a great success, at all events from a social point of view, and it was generally agreed by those members who attended the gathering that, however superior the attractions of provincial centres may be, London is still good enough for an enjoyable week's holiday. The Association was originally a "Provincial" Medical Association especially. It was so named, and the older members clung with gallant faithfulness, until only some twenty years ago, to the antimetropolitanism which was the corner-stone of their foundation.

There is no evidence that the 1895 session of the Association will be famous for the announcement of any great medical discovery, or will, indeed, leave any mark whatever on the very sandy surface of medical history. The meetings of the British Medical Association serve admirably as a stage for the great consultants to put themselves in evidence, and as a forcing-house for the budding ones. In this respect the London meeting was probably unusually successful. But the feature of the meeting which was particularly characteristic was the inauguration of a section for the consideration of ethics. It is in this department that medical science shines with the most lurid glare. Ethics in medical practice means income; so, at least, a disinterested person would interpret the resolutions adopted by this Section. The first was directed against the employment of unqualified assistants for visiting patients, which was declared to be "injurious to the interests of the public, as well as those of the profession." A simple statement that the practice is dishonest would not, we suppose, have been sufficient. Next, it was resolved that "any practitioner who wilfully violates generally received rules of professional ethics be not met in any professional intercourse whatever, save in a case of very urgent danger to an individual patient." That is probably directed particularly against cutting-doctors, but it would be used against everybody who did not agree with the special doxy of the practitioner concerned. Then followed the familiar platitude "that advertising in any shape is highly derogatory to the profession, and that the Council be requested to use every effort to suppress it." As a comment we quote from *The Times* the statement that "every facility was afforded to reporters." The Council was further requested to take steps to prevent members of the British Medical Association accepting posts in medical-aid and kindred societies; and it was the opinion of the Section that no practitioner who accepts office in any society of this kind ought to be

eligible for membership of the Association. These medical-aid societies are a terrible trial to the general practitioner. They formed the staple of much of the discussion in the Section. They are the "stores" of the profession. Three or four other resolutions were directed against them, and the great object seemed to be to find some way of suppressing them. We do not by any means defend the doctors who accept appointments with such institutions, for it can hardly be considered that this penny-a-week doctoring is the ideal condition for the community. But the general practitioner's objection to it is the mercenary one: he is quite justified in expressing his commercial objection, and in forming a trade-union to suppress the competition if possible. But he need not describe his irritation as "ethics."

In another discussion Dr. G. W. Potter is reported to have denounced the cheap dispensaries, "the keepers of which were little better than thieves." This may be true of some of them, but we are quite disposed to think that the proportion of thieving is as large in the two-guinea circles as it is among the sixpenny dispensaries. There are educated and honourable men who are doing a sixpenny or shilling "advice-and-medicine" business conscientiously, with credit to themselves and with benefit to the masses around them. Thieving is, we imagine, in medical ethics only another term for competition.

Perhaps the richest item from this Section which has reached the public was in a speech by Mr. R. W. Doyne, in a discussion on "The Ethics of Gratuitous and Cheap Contract Practice." This gentleman, dilating on the crimes of the medical-aid societies generally, said the working classes could afford reasonable payment to the doctor, "and employers should be asked to make such additions to wages as would render this possible." The audacity of this suggestion was sublime. Wages to be raised all over the land—for the benefit of the doctor! It does not appear that Parliament is at present to be asked to enforce this simple conception.—*Chemist and Druggist*, Aug. 10th.

EMPRESS CARLOTTA'S INSANITY CAUSED BY POISON.

ACCORDING to a story now going (*New York Medical Times*) the rounds of the press, and credited to "General Rudolfo Gunner, commander of Maximilian's body-guard during his brief and troubled reign as emperor," it was not adversity that drove his empress insane. She was poisoned by an old Indian woman who had been hanging around the palace begging alms, and in this way gained the opportunity of giving her the decoction of Talavatchi, a poison described as "more dreadful in its effects

than anything in the sinister pharmacopeia of the medicis." Given with skill, it kills the mind and leaves the body to live on unimpaired. In large quantities it produces hallucinations, followed by unconsciousness and death. The Talavatchi given to the empress was judged to a nicety. It wrecked her mind, but left her body healthy. Outside of flowers the world to her does not exist. The love of home, country, and friends passed away after the draught of the Indian witch's decoction.

"The administration of this poison," says General Gunner, "formed one of the sciences of the Aztecs. Their descendants, who are the peons of Mexico, have preserved the knowledge, and in their hands it becomes a dangerous and subtle weapon. It can be given in coffee in small quantities day by day, and the victim will gradually become insane or an epileptic, or both."

Here is a hint for our homeopathic alienists.—*Medical Argus*.

DEATH FOLLOWING VACCINATION.

BY REGINALD FARRAR, M.D. OXON.,

Public Vaccinator, Barnack and Ryhall Districts, Stamford Union.

E. C. was one of a family of delicate though not specifically diseased children, the mother being a feeble woman who has had a large family very rapidly. I have no reason to suspect either syphilis or tubercle in the parents, nor do any of the children bear marks of constitutional syphilis.

This child was brought to me on October 10, 1893, for vaccination. She struck me as being rather small and thin for her age—five months—but otherwise had nothing obviously amiss. I did not, therefore, at the time see sufficient cause to postpone the vaccination, though in view of the poor development of the child I should have done so had the mother desired it. I vaccinated in four places, using a carefully cleaned lancet, and Dr. Renner's calf lymph. Other children vaccinated at the same time, and from the same supply of lymph, did perfectly well in all respects.

On inspecting the arm a week later I found three vesicles of perfectly normal aspect; neither at this, nor at any subsequent date, was there any inflammatory area round the vesicles; nor did the ulceration at any time spread beyond their limits. Instead, however, of the scabs drying up and separating in the usual time they persisted unduly, and from the intermixture of clotted blood, presented a "limpet shell" aspect, resembling rupial scabs. When at last they separated the ulceration was found to have penetrated the whole skin, exposing the muscles

beneath, and leaving holes which looked as if they had been punched out. There was no oedema of the arm, and the skin round the vesicles appeared perfectly healthy throughout.

The child "dwindled, peaked, and pined," and finally died, from no very obvious cause, on November 29, 1893, six months old, seven weeks after the vaccination, and about a week after the separation of the scabs.

I consider her death to have been due to a constitutional *malaise*, induced by vaccinia in a poorly nourished child; for vaccinia is, after all, a specific constitutional fever, though most children take it very mildly; and I publish the case, partly as a warning to vaccinators to avoid weakly children even though presenting no obvious disease, for I cannot but think that I should have acted more wisely in postponing the vaccination in this instance, and partly because I hold it to be our duty to place on record any untoward effects of vaccination (and they are fortunately extremely rare, considering the universal prevalence of the custom), even at the risk of causing the enemy to blaspheme.—*British Medical Journal*, October 13, 1894.

THE DEPRESSING EMOTIONS AS A CAUSE OF DISEASE.—The fact that "fret," "worry," and similar emotions induce disease, mental and physical, and shorten life, is well established by observers, both professional and non-professional. That such emotions, rather than work, disable and kill, is also generally accepted. But the mechanism by which these results are reached is still not fully made clear to all. The *Boston Medical and Surgical Journal* gives the following explanation of this process, by Huchard. He affirms that such emotions tend to the development of cardiopathies, and particularly of arterio-sclerosis. He gives the order of morbid events thus: spasm of the arterioles (due to the emotion), hypertension of the arterioles and capillaries, sclerosis of the arteries, sclerosis of the viscera. The existence of arterial spasm under the influence of even trivial emotion has been demonstrated by the experiments of Mosso. If the worry be protracted from any cause, there arises a condition of almost permanent vascular spasm and arterial hypertension. It is easy to understand, if this be admitted, how the nutrition of the arterial coats may be disturbed, and organic disease of the same result, especially arterio-sclerosis. Among the steps leading to this end are the disturbances in glandular activity, by which secondary as well as primary digestion is rendered imperfect, and the blood more or less defiled with the imperfect products of secretion and excretion. Constantly passing along the lining membrane of the arterioles, the blood-current affects these vessels mechanically as well as vitally. Of the poisons thus originating in the body the chemist does not yet speak in detail, but that they must constitute a factor in the result cannot be doubted. The writer says that in his observation arterio-sclerosis is a frequent condition among members of the medical profession, because their life is pre-eminent for entailing overwork and worry.—*New York Medical Times*.

REVIEWS.

THE PHYSICAL LIFE OF WOMAN.*

A RE-ISSUE of this standard work will be widely welcomed. In dealing in a straightforward way with delicate questions of procreation and heredity the author has conferred a boon on all communities of English readers. The day is gone by when ignorance in these matters could be looked upon as a charm. Woman is steadily asserting her rightful place in the social organism, and one of the privileges to which she is entitled is certainly that of knowing all about herself.

THE ACCOUCHEUR'S EMERGENCY MANUAL.†

THE author of this little work has put all homeopaths to practise midwifery under an obligation which we hope they will not be slow to acknowledge in the most practical way, namely, by making themselves possessors of the volume. Dr. Yingling belongs to the stricter school of homeopathic practitioners, and has compiled this little *materia medica* and repertory with conscientious care. He knows what can be accomplished by the administration of the *simillimum* in most unlikely conditions, and this work is an endeavour to make his knowledge available for other practitioners. It is compiled on the model of *Bell's Diarrhea* and other standard manuals with which it will at once take rank. The first 200 pages are taken up with *materia medica*, and these are followed by 110 pages more of repertories. A separate repertory being devoted to each of the following headings: Labour, Abortion, Hemorrhage, Retained placenta, Convulsions, After-pains, and finally, The Baby. The work also contains a valuable Introduction, and is provided with an Obstetric Table and an Index. It is very well got up in flexible leather covers and occupies a very small space.

PUBLIC CONTROL OF HOSPITALS.‡

In this pamphlet the author makes out a strong case for

* *The Physical Life of Woman. Advice to the Maiden, Wife, and Mother.* By George H. Napheys, M.D. London: Homeopathic Publishing Company, 12, Warwick Lane, E.C. Cloth, 5s.

† *The Accoucheur's Emergency Manual.* By W. A. Yingling, M.D., Ph.D., Philadelphia: Boericke and Tafel. London: Homeopathic Publishing Company, 1895.

‡ *Public Control of Hospitals.* By Harry Roberts. Humanitarian League's Publication, No. xvi. London: Wm. Reeves, 185, Fleet Street, E.C., 1895.

taking hospitals out of private hands and putting them under the control of the State or municipalities. There is only this to be considered in the matter—that the State and the municipalities will have to pay for their control, and the hospitals will then cease to be charities and become national institutions.

PREPARATIONS.

BARILLA ASH SOAP.

THERE has lately been some difficulty in obtaining the above-named soap, which we have had occasion to mention favourably as a skin-soap. It may now be had at homeopathic pharmacies as formerly, and also at Whiteley's, in Westbourne Grove, who can supply it in large quantities if desired.

LA LIMOUSINE.

BY an error the name of the above was printed as Limonsine last month.

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 homeopath practitioners and chemists.

DR. CALL WEDDELL, *Sunderland*, has removed from Carlton Terrace to 1, PARK PLACE EAST.

CONIUM VERTIGO.—A good case of the vertigo suitable for this medicine is translated from the *Populäre Zeitschrift*, in the *Hahnemannian Monthly* for May. The attack began like one of Menière's disease, but no tinnitus aurium is mentioned. When seen, the patient (a man of 50), had had vertigo for four days, and could not get up or even turn in bed without bringing it on. Conium 3, five drops three times a day, was given, and in twenty-four hours he was able to walk unaided.—*Hahn. Monthly*, May (J. B. H. S.)

Obituary.

STEPHEN YELDHAM, M.R.C.S. ENG., L.R.C.P. ED.

It is with extreme regret that we announce the death of one of the best known and most universally respected of British homeopathic practitioners—Dr. Stephen Yeldham. Dr. Yeldham's practice was principally identified with the city of London, where for many years he carried on a large consulting practice at his rooms in Moorgate Street. As a writer he is well known by his excellent works, "Homeopathy in Acute Diseases," and "Homeopathy in Venereal Diseases," each of which has passed through four editions, and still retains its place in homeopathic literature. Dr. Yeldham studied at Guy's and St. Thomas's Hospitals. His earliest qualification (L.S.A.) dates from the year 1882. The following year he became M.R.C.S. of England, and the year after L.R.C.P. of Edinburgh. In the last few years he has been in retirement, but for upwards of half a century he continued in the active discharge of professional duties.

Nowhere will his loss be more felt than in the councils of the London Homeopathic Hospital of which institution he has been a wise and steadfast friend for the last forty-six years, and of which he may be said to have been the Nestor at the time of his death. From 1849 to 1869 he was surgeon to the hospital, and from 1869 to his death he was its consulting surgeon.

Since his retirement, Dr. Yeldham has resided at Highfield House, St. Nicholas Road, Upper Tooting, S.W., and it was there that he died on Saturday, August 10th. He was buried at Ore cemetery, Tuesday 13th.

Among the flowers were—wreath from Board and Medical Staff; cross from Mr. and Mrs. Alan E. Chambre; wreath from Mr. Hugh Cameron; wreath from Mr. G. A. Cross; wreath from Matron and Sisters. Mr. Cross represented the hospital at the funeral in the unavoidable absence of Mr. Stilwell.

A kindlier man than Stephen Yeldham never lived.

ENURESIS.—Dr. Kraft has in the April 1 number of his own journal, the *American Homeopathist*, an interesting paper on the remedies of incontinence of urine. Cina when the urine turns milky, chamomilla when its inevitable mental condition is present, causticum in cases resulting from overstrain of the bladder, lycopodium in neurasthenia and where there is red sand, and staphisagria where there is genital excitement either by thought or act—these are the medicines on which he mainly depends; and their indications are graphically presented (*J. B. H. S.*).

GENERAL CORRESPONDENCE.

THE LIME WATER CURE.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—Would you allow me to say in connection with the lime water case published in your last issue that I saw the patient yesterday. She said she was still better—that although the chilliness was not completely gone, she felt a new creature. She hesitates whether to put the benefit experienced down to the *Aranea* or to the lime water. Of course it might be either or both. But seeing the improvement followed in less than twenty-four hours after taking the lime water, I feel I must put it down to the lime water, or else to the latter in some way enabling the *Aranea* to act, which it could not do before, because the improvement was so sudden and marked.

Yours very truly,

E. D. SHIRTLIFF.

Malvern, Aug. 1, 1895.

LACHESIS.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—In a note on “A Snake Venom Romance,” published in THE HOMEOPATHIC WORLD for August, 1895, a remark is made to the effect that the late Dr. Constantine Hering, assisted by his wife, had prepared all the *Lachesis* since used by the profession.

Will you allow us to point out that this is not the fact. Some twenty-seven years ago we obtained through a friend a supply of this venom from a specimen of the viper of which we still possess a photograph, and low triturations of this have been supplied from time to time to practitioners who have expressed their entire satisfaction with its action.

In the *Monthly Homeopathic Review* for April, 1892 (p. 211), some excellent results are reported by Dr. E. M. Madden, which were, through a misapprehension, attributed to a preparation obtained from Dr. Haywood, of Liverpool, but on subsequent inquiry we found that the identical preparation above described had been dispensed by Dr. Madden's chemist, who obtained it direct from us.

We may add that for many years we avoided recommending

this preparation, because it had been obtained after killing the serpent outright instead of merely stunning it, but we have now ample testimony to convince us that its activity has not been impaired in the least degree by the method of extraction.

When carefully guarded from moisture it appears to keep perfectly well.

Yours faithfully,

E. GOULD & SON.

59, Moorgate Street, London, E.C.

August 3, 1895.

ANTI-TOXIN AND DIPHTHERIA.

To the Editor of the HOMEOPATHIC WORLD.

SIR,—Sir J. Russell Reynolds, in his presidential address before the British Medical Association (July 30th), speaks of “the magnificent prospect before us of a new field of therapeutics in the serum treatment of disease.” May I in this connection draw attention to the recent statistics of the Registrar-General? In his return of London mortality for the week ending July 6th we read: “The deaths from diphtheria in London, which had been forty-seven, thirty-seven, and thirty-eight in the preceding three weeks, rose last week to fifty-three, which is higher than the number in any week since last December, and twenty-three in excess of the corrected average.” For the week ending July 13th, he has: “There were fifty deaths from diphtheria last week, a total which, though smaller by three than in the preceding week, was twenty in excess of the average for the same week in the last ten years.” The increase of diphtheria in the fatal form of the disease began in the week ending April 20th, in which the deaths were thirty, and the last public health return to hand shows that for the week ending July 27th it has caused forty-eight deaths, which, compared with those of July 6th, show a decrease only of three. There is no proof here that *anti-toxin* is of any value. If there is a shade of a shadow of proof anywhere that it is of any value, I should be glad to have it pointed out.

The inventor of *anti-toxin*, Dr. Roux, claimed that he had conquered diphtheria; that if you were anti-toxined you need no longer fear that dangerous disease. His fellow-countrymen said that he had achieved “exceptional services to science and humanity,” and created him a commander of the Legion of Honour! Where is the evidence of these “exceptional services to science and humanity” to be found? Not in the Registrar-

General's returns, that is clear. Sir Joseph Lister pioneered the anti-toxin business for the Pasteur people over here, and in his appeal last November to "an ignorant and gullible public" for money for its adoption, he described it as an "almost infallible" cure. It would be interesting to have a public expression of what he thinks now.

Faithfully yours,

JOSEPH COLLINSON.

Humanitarian League,
79a, Great Queen Street, Lincoln's Inn, July 31st.

THE SPREAD OF LEPROSY IN SOUTH AFRICA.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—The first volume of the Minutes of Evidence of the Leprosy Commission of the Cape of Good Hope of 1894 has recently been issued, and is painful reading for those who are concerned for the public health and the future well-being of our South African colonies. This commission, consisting of seven medical practitioners, was appointed by Sir Henry B. Loch, Governor of the Cape of Good Hope, in August, 1893, "to inquire into the origin and spread of leprosy in the Cape Colony, and to report thereon for the information of Parliament." Previous to this a Select Committee had been appointed by the Legislature in 1883 and another in 1889, but their recommendations, which entirely ignored one of the chief factors in the spread of leprosy, proved to be worse than useless.

The members of the Commission and the legislative committees alike appear to have been selected mainly for their orthodox views on the benefits of vaccination, and much experience has shown us what to expect from tribunals so constituted. The forms of questions submitted in this as in other similar inquiries (as I have shown in my evidence before the Royal Vaccination Commission in London) were calculated rather to conceal than to elicit the true facts. The chairman, Dr. Murray, in examining Dr. P. E. Todd (Q. 4,147), said: "Is it possible to convey the disease (leprosy) in that way (arm-to-arm vaccination), assuming that you vaccinated from a presumably healthy subject?"

Answer: "I should imagine that, adopting the usual precautions, the risk would be infinitesimally small." The facts being that in practice all precautions are notoriously absent, and leprosy in a vaccinifer is often difficult to detect. Dr. S. P. Impey, the Superintendent of the Leper Settlement, in answer

to Q. 1,249, said: "In this country very often a person is vaccinated and sent into the country, and then others are vaccinated from such person. In this way syphilis may be spread to an enormous extent, and probably leprosy."

In a special report to both Houses of Parliament for 1891, Dr. Impey said: "It is a noteworthy fact that since the introduction of vaccination leprosy is spreading with rapidity. I am a firm believer in the efficacy of vaccine, but consider arm-to-arm vaccination a most dangerous practice, and one which has led to untold misery."

In my volume on "The Recrudescence of Leprosy" (Swan Sonnenschein & Co.), I have furnished proofs of the reckless manner in which vaccination is carried on in South Africa, with the result of spreading leprosy, syphilis, and other disgusting and incurable diseases.

In the report before me, Dr. Landsberg (Q. 1,871-4) testifies that in 1882 he vaccinated 550 children in one morning, and in ten days he vaccinated 5,000 children and others! There is no pretence that the lancets were disinfected or any sanitary precautions adopted whatever, yet this zealous official declares that he never came across a case of leprosy vaccinated through this or any other form of vaccination.

Commenting upon this important inquiry, the *British Medical Journal*, July 20th, observes: "A definite increase of leprosy in South Africa appears to be well established, and the belief in medical quarters that the disease has increased by inoculation from person to person is as strongly maintained as ever." The writer omits to state that the only universal method of inoculation in vogue is by the vaccinator's lancet. It is obvious that the scourge of leprosy cannot be stamped out in our colonies as long as this mode of propagation is practised and enforced by law.

Yours faithfully,

WILLIAM TEBB.

Devonshire Club, St. James's, London, August 8, 1895.

VARIETIES.

COLLINSONIA.—Dr. Jousset is able to concur in the praise others have given to this drug as a remedy for constipation. He gives the 1x trit. Weight in the rectum, dull pains at the anus, are the only differential indications he specifies.—*L'Art Médical*, May.

CHENOPODIUM.—Dr. Villers relates a case of chronic headache, characterised by marked aggravation from the noise of passing vehicles; other sounds having little effect. Chenopodium 6, administered upon this indication, not only removed the special sensitiveness, but up to the time of the report had completely averted the headaches.—*Hom. Physician*, April (*J. B. H. S.*).

VERATRUM IN COPROPHAGIA.—A child had a craze for eating its own feces or dung lying in the street. *Veratrum 2*, three times a day, cured it of this propensity in a month.—Goullon, *Zeitsch. d. Berl. Ver.*, xix., 156 (*J. B. H. S.*).

IGNATIA.—Dr. Heber Smith has much confidence in *ignatia* when the excessive use of tobacco is the cause of nervous symptoms. He gives one case in which, besides general "nervousness," there was tachycardia and sensation as if the roof was falling.—*New Engl. Med. Gazette*, March.

ZINCUM.—An anemic but vigorous woman suffered every ten to fourteen days with pressive headache on vertex and forehead, sometimes leading to vomiting, but always accompanied with amblyopia. *Zincum met. 3*, once daily, cured in a month.—*Hom. Recorder*, April, p. 153 (*J. B. H. S.*).

TUMOURS CURED BY THUJA.—Dr. Sarah N. Smith gives two cases, one of ulcer, one of vascular tumour, on the hand. Setting down both as "sycotic," she gave *Thuja* in Dunham's 200th; and either got well in a couple of months.—*Hom. Physician*, April.

Dr. Candy was consulted by a lady who presented a verrucous tumour of the neck attached by a small pedicle. It was of the size of one's thumb, and if pulled caused a pain to shoot through that side of the head. She suffered occasionally from lancinating pains commencing in the growth and radiating into neck and head or down into chest. It was impossible to rest on that side. *Thuja 6* was given internally, and a one-tenth solution of the tincture in almond oil applied locally. After a few days the growth became flaccid and pale, and after a fortnight it fell off, without pain, together with several smaller tumours of the same character. The pains also left her.—*Hahn. Monthly*, March.

A youth, aged 17, otherwise sound in health, has had for the last two years on the left side of the scalp, about posterior edge of the parietal bone, a white spot 4 cm. in diameter, somewhat resembling a bean and raised about 2mm. above the surface; the spot is quite insensible, the hair has all disappeared from it, making the white elevation very conspicuous. I first gave arsenicum for six weeks without any result. Then I prescribed *Thuja 30*, a drop every twenty days. In four months he returned and was almost cured. The spot was now no bigger than a pin's head, the hair had grown completely on it, and in four more weeks the skin was quite normal. Villers, *Arch. f. Hom.* iv., 117. (*J. B. H. S.*).

COR ADIPOSUM.—Schott (*Deut. med. Woch.*, July 5th and 12th, 1894) observes that, although there are no certain signs of this condition, there are several symptoms, such as the general state of the patient, the condition of the heart sounds, rhythm, &c., which make the diagnosis very probable. Often this fatty deposit in and about the heart cannot be distinguished from fatty degeneration. The author gives some account of the physical and dietetic treatment of the disease. The object of the dietetic measures is to diminish the amount of fat. There is no means of making collections of fat disappear from certain parts of the body. The fat round about the heart disappears last in starving animals. Thus the improvement in the patient's condition cannot be brought about in this way. Purgative

measures are harmful, and the doubtful effects of iodides are often further obscured by other symptoms produced by them. If anemia, diabetes, gout, and especially arterio-sclerosis, be present, dietetic treatment must be adopted with great caution. Any considerable loss of weight must be carefully guarded against. Patients who have lost weight in consequence of treatment by mineral waters and dietetic restrictions may develop signs of cardiac weakness. As regards limitation of fluids, the amount of alcoholic beverages must be lessened. It is probable that the loss of weight which may occur when fluids are diminished is really due to the impaired appetite. The author's method of treatment consists in methodical exercises, bath treatment, &c. He thinks his treatment may be carried out with benefit, and without the risks attending other methods recommended. He quotes cases to show that unpleasant symptoms may be removed without the patient losing weight. It is only when the heart has gained strength and is not to be distinguished from a normal heart that any thinning treatment should be adopted. Any rise of temperature is also a contra-indication to it. Moderate exercise in the fresh air, which may be increased later, is useful, but over-exertion may produce unpleasant symptoms. Mental over-excitement must be avoided. Dietetic treatment should be used judiciously. He concludes that—1. The reducing treatment should be adopted cautiously and only in young individuals. 2. Too rapid loss of weight must be avoided. 3. General diseases, senile manifestations, are at least at first a contra-indication to the reducing treatment. 4. The fatty heart may often be treated successfully without loss of weight; and—5. The dietetic mechanical treatment is the best.—*British Medical Journal*.

SKIN DISEASE FOLLOWING SHOCK.—Welander (*Hygiea*, April, 1894) reports the following case: A man, aged 24, who had never had a day's illness, and of healthy stock, was on board a steam launch which capsized, and was only saved with difficulty. On being pulled out of the water he was seized with violent trembling, and since the accident similar fits have recurred on the slightest provocation, often lasting an hour, and the patient's disposition has entirely changed, becoming nervous and irritable. A month after the accident he noticed a white spot on his left hand, and since then similar spots have developed on various parts of his body, so that when seen (eighteen months after the accident) they were pretty generally distributed. They were of varying size and shape, had a symmetrical distribution, and in some parts—for instance, the arms—they were surrounded by healthy skin; in other parts, as the scrotum, popliteal spaces, and neck, the surrounding skin was almost blackish-brown. The hair covering the patches was white; on other parts black. There was no itching, insensibility, or infiltration. The affection was undoubtedly vitiligo. A year after the accident the patient began to feel an intense irritation over a circumscribed patch on the right leg. Soon after, characteristic changes were noticed over this patch; the surface was raised, infiltrated, and intensely itching; the middle part was covered with strongly-marked furrows running in all directions; these, as well as the other parts, were desquamating, the scales being small, white, and adherent. There was no trace of "weeping." Some brownish papules were scattered irregularly over the surface,

and around it; they were independent of the follicles. The patch was 12 cm. by 6 cm. in size, and surrounded by vitiligo spots and blackish-brown blotches, which, according to the patient's statement, had only developed lately. A patch of similar character was also present over the sacral region. The above characters agree in every detail with the description of "neurodermite chronique circonscrite" of Brocq and Jaquet (lichen simplex chronicus of Vidal). Thirdly, the patient presented distinct signs of a past and present lichen ruber planus; yellowish-red, hard, flat, glistening papules of polygonal shape, and dark pigmented stains on various parts of the body. Here the itching followed the development of the papules, never preceding it, as was the case with the patch on the leg. The last affection improved under *Arsenic*, but the "neurodermite circonscrite" remained stationary.—*British Medical Journal*.

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, Wednesdays, 2.30; Diseases of the Throat, Mondays, 2.30; Operations, Tuesdays, 2.

MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

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| <p>Brown (A. Crum). The Relation between the Movements of the Eyes and the Movements of the Head, being the Fourth Robert Boyle Lecture, delivered May 13, 1895. 8vo. (Clarendon Press. Net. 1s.)</p> <p>Browne (Sir James Crichton). The Cavendish Lecture on Dreamy Mental States. Delivered before the West London Medico-Chirurgical Society on Thursday, June 20, 1895. 8vo, sd., pp. 32. (Baillière. 1s.)</p> <p>Doudney (G. H.). Maladies of Old Age and their Treatment. 18mo, sd., pp. 100. (Wright & Co., Bristol; Simpkin. 1s. 6d.)</p> <p>Dutton (T.). Sea-Sickness (Cause, Treatment, and Prevention) Voyaging for Health, Health Resorts. A Concise Practical Treatise. 4th ed. Cr. 8vo, sd., pp. 141. (Hirschfeld. 1s.)</p> <p>Guy (W. A.) and Ferrier (D.). Principles of Forensic Medicine. 7th ed., Revised by W. R. Smith. 8vo, pp. 848. (Renshaw. 16s.)</p> <p>Hamilton (A. Mc. L.), Godkin (L.), and Babcock (J. F.). A System of Legal Medicine. Illust. 2 vols. 8vo. (Rebman. 60s.)</p> | <p>Hobhouse (E.). The Scientific Basis of Medicine: Its Prospects and Limitations, A Dissertation. 8vo, sd., pp. 56. (B. H. Blackwell, Oxford; Simpkin. 1s.)</p> <p>Hutchinson (J.). A Smaller Atlas of Illustrations of Clinical Surgery, consisting of 136 Plates with descriptive Letterpress. 8vo, pp. 552. (West, Newman & Co. Net. 31s. 6d.)</p> <p>Napheys (George H.). The Physical Life of Woman. Advice to Maiden, Wife, and Mother. New ed. Cr. 8vo., pp. 328. (Homeopathic Publishing Company. 5s.)</p> <p>Nocard (E.). The Animal Tuberculosis and their Relation to Human Tuberculosis. Translated by H. Sourfield. Cr. 8vo, pp. 144. (Baillière. 4s.)</p> <p>Partridge (S.). Practical Ambulance Tablets. 4th ed. 16mo, pp. 70. (Churchill, 1s.)</p> <p>Snell (S.). Eyesight and School Life. With numerous Illusts. 8vo, pp. 86. (J. Wright & Co., Bristol; Simpkin. 2s. 6d.)</p> <p>Styrup (J. de.). A Code of Medical Ethics with General and Special Rules for the Guidance of the Faculty and the Public. 4th ed., Revised and Enlarged. 8vo, pp. 104. (H. K. Lewis, Net. 8s. 6d.)</p> |
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Quain's Elements of Anatomy. Edited by E. A. Schafer and G. D. Thane. In 3 vols. Vol. 3, Part 2: The Nerves. By Professor Thane. Illust. by 103 Engravings. 10th ed. Roy. 8vo, pp. 130. (Longmans. 9s.)
Smyth (W. W.). A Baneful Popular Delu-

sion on the Subject of Motherhood. 8vo, pp. 18. (Simpkin. Net. 6d.)
Westland (A.). The Wife and Mother: A Medical Guide to the Care of her Health and the Management of her Children 2nd Ed., Revised. Cr. 8vo, pp. 296 (C. Griffin & Co. 5s.)

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 the "MANAGER" of the Homeopathic Publishing Company, 12, Warwick Lane, Paternoster Row, London.

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. Dudgeon, London; Dr. Mahony, Liverpool; Mr. Fred. Kopp, Greenwich, N.S.W.; Mr. Joseph Collinson, London; Dr. Burns, Margate; Dr. Ridpath, Sunderland; Mr. Wm. Tebb, London; Mr. W. J. Spencer, Sydney, N.S.W.

BOOKS AND JOURNALS RECEIVED.

Homeopathic Review. — Zoophilist. — Chemist and Druggist. — Family Doctor. — Allg. Hom. Zeit. — Hom. Monatsblätter. — Pacific Coast J. of H. — Southern Journal of Hom. — Hom. News. — Med. Advance. — Jour. of Orif.

Surgery. — Calcutta Jour. of Medicine. — La Homeopatia. — Hom. Maandblad. — Archiv. f. Hom. — Rev. Hom. Belge. — Hom. Recorder. — Medical Century. — N.Y. Med. Times. — Maanedskrift f. H. — Med. Visitor. — Habnemannian Monthly. — Hom. Jour. of Obstetrics. — Clinique. — American Homeopathist. — Monthly Mag. of Pharmacy. — Med. Argus. L'Art Médical. — Ziet. Berl. V. h. A. — Spencer's Weekly. — Indian Hom. Review. — N. A. J. of Homeopathy. — Herbal Simples. By W. T. Fernie, M.D. — Causes of the Neglect of Suppurative Ear Disease.

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THE
HOMEOPATHIC WORLD.

OCTOBER 1, 1895.

DR. MADDEN'S ADDRESS.

IN another part of our present issue will be found a report of the recent Congress at Leeds, with an account of Dr. MADDEN'S presidential address on "Recent Pathological Investigation and Theories, with special reference to certain points which seem to bear on the doctrine of *similia similibus* and on HAHNEMANN'S speculations as to its *modus operandi*." We are glad to see that Dr. MADDEN has adopted the contention we have repeatedly put forth in these pages—that the boasted developments of modern scientific medicine are nothing more nor less than developments of homeopathy, and are all discounted beforehand in HAHNEMANN'S *Organon*. The thing we complain of is the barbarity of the methods of the modern school, and their unsatisfactory results, together with the refusal of the neo-homeopaths (with one honourable exception) to give the credit of the principle they make use of to HAHNEMANN, who first enunciated it. So long as this is the case we cannot credit them with quite so much "honesty," as Dr. MADDEN is inclined to do. Nor are we as charmed as he seems to be with some of their results. He admits that, as far as human beings are concerned, these are not very cheering. But he goes on—

"On the other hand, there had been magnificent results obtained among the lower animals by PASTEUR'S inoculations for the warding off of several most fatal and widespread epidemic or endemic diseases, results which were said to have saved thousands, if not millions, of lives, and which, even if they stood alone, were a

sufficient answer to those who doubted whether experiments on living animals were justified by the ends attained."

Waiving the Jesuitical doctrine of ends justifying means, we would rather take the opinion of Drs. KOCH and KLEIN on these "magnificent results" than that of our friend Dr. MADDEN. The homeopathic art has been founded and developed hitherto without cruelty, and we believe that the introduction of cruelty would do nothing but spoil the possibility of all its finer developments.

We will conclude by quoting a passage with which we thoroughly agree :—

"Whether HAHNEMANN, with his intense humanitarian sympathies, whose proudest boasts were that he had given to the world a system of therapeutics which had robbed the healing art of the terrors it had hitherto possessed for the sick and the suffering, and that he had been one of the first to recognise the wicked cruelty and uselessness of the system of treating the insane universal in his day, and to put into practice the humane system universal now—whether he could ever have looked with approval on experiments which necessarily involved the deliberate infliction of disease, pain, and death on a large number of our dumb fellow-creatures, might well be doubted. Still less could they think of him as taking part in them."

THE INFINITESIMAL END OF THE WEDGE.

HAVING discovered and adopted homeopathy in numberless instances, the allopathic fraternity are now on the high road to discover the infinitesimal dose. We have on previous occasions put before our readers instances in which allopathic authorities have admitted the power of the infinitesimal, notably that of Dr. STOKVIS, of Amsterdam, at the International Medical Congress at Rome. The latest discoverer in this line is Professor SCHÄFER, of University College. He held forth to the assembled members of the British Medical Association at their recent forgoing in London on "Internal Secretions," and this is what he said on the subject of dose :—

"One of the most interesting and important facts regarding the material which is yielded by the suprarenals is the minuteness of the

dose which is necessary to produce these results. As little as 0.0055 g. ($\frac{5}{2}$ milligrammes) of dried suprarenal is sufficient to obtain a maximal effect upon the heart and arteries in a dog weighing 10 kilogrammes. For each kilogramme of body weight, therefore, all that is necessary to produce a maximal effect is 0.0055 g., or little more than half a milligramme.

"Now we have shown that the active principle is contained only in the medulla of the gland, not in the cortex, and the medulla in all probability does not form more than one-fourth of the capsule by weight. Of the dried medulla certainly not less than nine-tenths is composed of proteid and other material which is not dialysable, and which otherwise does not conform to the chemical properties which have been ascertained to belong to the active substance of the gland. So that, if we take these facts into consideration, we find that in order to produce a maximal effect a dose of not more than fourteen-millionths of a gramme per kilogramme of body weight is all that is necessary. Now it is certainly true to say that one-fourteenth of this dose will produce some effect, although not perhaps a very large one. We thus arrive at the astounding conclusion that the active principle of the suprarenal capsules, taken in the proportion of not more than one-millionth part of a gramme per kilogramme of body weight, which would be equivalent to $\frac{1}{13333}$ g., or less than $\frac{1}{333}$ grain, for an adult man, is still sufficient to produce distinct physiological results upon the heart and arteries."

This is all very innocent and interesting; but if the experience of homeopaths had not been voted out of "science" by the bell-weathers of the medical profession, Dr. SCHÄFER would not have had to affect so very much surprise in enunciating the results he obtained. He doubtless felt that he was introducing the infinitesimal end of the homeopathic wedge into the case-hardened minds of his hearers, and perhaps he was afraid of serious results.

But if Dr. SCHÄFER can obtain such powerful *positive* effects from infinitesimal doses administered to animals in their normal state of equilibrium, where would he be likely to find the limit of sensitiveness when the body is thrown into the excessively unstable equilibrium induced by disease, the drug being homeopathic to the disorder? In this case there is no forcible, health-disturbing action of the drug sought, but what has been termed by Mr.

PICKEN *a negative* and indirect action, the sensitiveness of the body to the drug's action being indefinitely multiplied.

Professor FRASER, in the course of his paper on snake-venom, read at the same meeting, alluded to the much smaller dose of a drug required to neutralise a given effect than that required to produce it. He said:—

“No doubt the probability of thus producing immunity [by introduction through the alimentary canal] is opposed by the fact[?] recognised even at the time of CELSUS, and corroborated by such modern observers as LACERDA, WEIR MITCHELL, FAYRER, and BRUNTON and CALMETTE, that serpent's venom is altogether inert, or nearly so, when it is introduced into the stomach or any other part of the alimentary canal.”

We pause to remark that this observation is extremely defective: serpent-venom, though very much less active when introduced into the alimentary canal than when injected into the tissues, is anything but “inert”; and especially if it is introduced in the potentised form of the homeopathic attenuations.

Professor FRASER proceeds:—

“Even assuming that venom so introduced is inert, or nearly so as a poison, it does not necessarily follow that it is incapable of producing protection” (italics ours).

Of course not. But in so saying Professor FRASER, without apparently knowing it, admits the principle of homeopathic dosage, and helps his brother Professor of University College to drive home the infinitesimal end of the wedge. By this admission he shatters at a blow all the silly offers of ignorant allopathic doctors to prove there is nothing in homeopathy by swallowing any amount of globules. It does not at all follow, as Professor FRASER shows, that because a medicament cannot poison in a certain form or method of administration that therefore it cannot protect (or cure).

The scientists do not see it, of course; but the public

are not so blind as the doctors and professors. The intelligent laity will see plainly enough, even though they themselves may not, that the direction in which the professors are working is straight towards homeopathy and the infinitesimal dose. As LUTHER found to his astonishment that he had been a Hussite without knowing it, they will be "astounded" some fine morning to find that they are homeopaths in spite of themselves, and high-dilutionists to boot. When that day comes let us hope they will be, like LUTHER, honest enough to admit it.

CUPRUM IN PSORIASIS.—Dr. Mackechnie records the case of Kathleen S., aged 10, a school girl, who had for two years suffered from psoriasis. There were patches on elbow and knee, the latter being in a ring. They were covered with dry crusts, and the usual pink areolæ surrounded them. Her bowels were regular and general health good. He ordered *cuprum metallicum*. In a week there was an improvement, the patches having lost their areolæ, and one or two had come off and were not being renewed. *Cuprum* was continued. Next week there was still further progress effected, but some swelling and tenderness of cervical glands had appeared. For this *rhus tox* was ordered every night, a dose of *cuprum* every morning. Next time the glands were normal, and the psoriasis nearly well. *Cuprum* was continued alone. The following week—a month after commencing treatment—she was cured.—*Monthly Hom. Review*, May 1, 1895 (*Hahn. Monthly*).

LEMNA MINOR IN RHINITIS ATROPHICA.—Mr. Thomas L. Shearer recommends *lemna minor* in cases of atrophic rhinitis where the crusts and the muco-purulent discharge are very abundant, with fetor. Its action is wonderful, but it must not be administered in too low a dilution, as it then produces a sensation of intense dryness in the pharynx and the larynx. Possibly, if it were exhibited in a much higher dilution it would be applicable to cases which have only a slight amount of discharge. It seems best to stop the remedy as soon as its action upon the secretions is marked, and then to wait awhile before returning to its further employment. Dr. Cooper, of London, was the first to investigate the action of *lemna minor* upon the upper air-passages, but it is not known that he has tried it in cases of atrophic rhinitis. There is a great future for this new addition to our therapeutic resources, and it certainly deserves further investigation. It modifies the secretions to such an extent that we can more readily improve the condition of the nasal chambers with the aid of local measures. Whether it has the power to prevent or even retard the actual process of atrophy remains to be seen.—*Hom. Eye, Ear and Throat Journal*, May, 1895 (*Hahn. Monthly*).

NEWS AND NOTES.

THE POWER OF SMALL PARTICLES.

THE French chemist, Jacques Passy, has for years been engaged in determining the quantity of odorous matter that will affect our sense of smell. His method is very simple. He dissolves a certain weight of the odorous matter in a certain quantity of alcohol, dilutes an accurately ascertained quantity of the solution, until he can say that it contains a millionth of a millegram or less of the matter. Of this diluted solution he drops into a vessel that holds exactly a litre until the observer who smells at the mouth of the vessel can perceive the odour. Of camphor 5-millionths of a millegram suffice, of vanilla 500-millionths are enough to perfume a litre of air. Five billionths of a millimetre of musk are sufficient to perfume a litre of air.

THE LATE DR. BRISTOWE.

WE learn with much regret the death of Dr. John Syer Bristowe, one of the best known of London physicians of the old school, and one of the most enlightened. It may be well to recall his notable address delivered before the British Medical Association in 1881, in which the following passage in reference to homeopathy occurred:—

“The whole history of the movement and its present position are amply sufficient to prove that those at any rate who take the intellectual lead in it are men who believe in the doctrine they profess, and in their mission, and who practice their profession with as much honesty of purpose, and with as much confidence in their power to benefit their patients, as we do. That all homeopathic practitioners are men of ability and education, it would be absurd to maintain; but it is absolutely certain that many men of ability and learning are contained within their ranks. If you care to dive into homeopathic literature, you will find in it (however much you may differ from the views therein inculcated) plenty of literary ability. . . . Again, I will not pretend that even a considerable portion of homeopaths are deeply versed in the medical sciences; yet they have all been educated in orthodox schools of medicines, and have passed the examinations of recognised licensing boards, so that it must be allowed that they have acquired sufficient knowledge to qualify themselves for practice, and some among them possess high medical attainments. . . . When homeopaths are honest and well informed and legally qualified practitioners of medicine, they should be dealt with as if they were honest and well-informed and qualified. . . . It is more conducive to

the maintenance of true dignity, to treat with respect and consideration, and as if they were honest, those whose opinions differ from ours, than to make broad our phylacteries and enlarge the borders of our garments, and wrap ourselves up, in regard to them, in Pharisaic pride."

Alas! alas! Dr. Bristowe sadly underestimated the depth of pharisaic pride in his auditory. His innocent remarks (which were nothing more than the promptings of common courtesy and common sense—though none the less creditable to him, considering his environment) raised up such a storm of bigotry and spite in the British Medical camp, that from that day forth no one within the fold has attempted to question the righteousness of the medical scribes and Pharisees. Generous spirits of Dr. Bristowe's type have little room for the exercise and development of their finer qualities in such an atmosphere.

THE LANCET ON MEDICAL REUNION.

THE dear old *Lancet*, which we could ill spare—the "Mrs. Gamp" of medical journalism—much more accurately voices the sentiment of the average British medical than men of the stamp of Dr. Bristowe—as witness the following reply to a correspondent (Sept. 21):

"THE 'REUNION' OF MEDICINE.

"*General Practitioner*.—Our correspondent finds in the discussion on the Reunion of Christendom a suggestion that there is also schism in medicine needing to be healed. We recognise his liberal sentiment, and we share it. But there are some reunions that would be greater evils than disunion. This is certainly so in Christendom, and not less clearly so in medicine. The homeopaths isolate themselves by adopting an exclusive theory of medicine, which, after a hundred years, and in the broadest age of medicine, is as far off recognition as it ever was. It is permissible for a medical man to read homeopathic literature and attend homeopathic congresses, or to do anything he pleases to arrive at a knowledge of the system."

How very generous! We trust the foster children of the worthy dame are duly grateful to her for the permission she amiably extends to them to play with homeopathic fire.

THE MEDICAL PRESS ON THE TRADES UNIONISM OF THE BRITISH MEDICAL ASSOCIATION.

In a leading article entitled, "The Recrudescence of the

British Medical Association," *The Medical Press* of August 14th congratulates the rank and file of the Association on their zeal in medical affairs, and the success of their work against the "Council oligarchy." But it adds this significant note of warning:—

"It is right to warn the general practitioner members of the Association against using their new-born influence for selfish purposes, and against the danger that the British Medical Association may become a monster medical trade union. We shall not, we hope, be suspected of want of sympathy with the needs and desires of the general practitioners when we say that no greater mistake than this could be committed, but it is impossible for any one who heard the debates upon midwife registration, direct representation and quackery, to avoid seeing that the monetary interest of the general practitioners as a class was, largely, the motive power of the agitation. The opposition to the registration of midwives and to the toleration of quackery and to the development of medical aid contract doctoring was obviously not wholly philanthropic, and the demand for increased direct representation in the General Medical Council was sustained by the belief that, if a larger number of general practitioners had seats on that body, much greater attention would be devoted by it to the suppression of illicit competition with the qualified practitioner. We are by no means surprised that the working members of the Association should feel strongly against the letting loose upon them of a multitude of half-educated women as competitors for practice, or against the legal authorisation of quacks to practise as they please, and if any inconvenience arises in practice, to cover their offence against the law by employing an out-at-elbows practitioner; but when the Association proceeds to create a legislative remedy for this condition of things, it ought to bear in mind that the House of Commons cares very little for the trade interests of doctors, and that no association can hope to obtain any modification of existing law unless it is prepared to show Parliament that what it asks for is for the advantage of the people. In this there ought to be no insuperable difficulty. It ought to be easy to show that it is pernicious to allow persons to practise medicine and surgery who can scarcely pretend that they know anything about these arts; nor need there be much trouble in persuading the average mind that it is unwise to increase this evil by giving State authority to such practice by ignorant women. It may, however, be taken for granted that in forming the Parliamentary mind on such a matter the monetary losses of general practitioners by reason of the competition of such illicit traders will have no influence at all. If we are right in the belief that the rank and file of the Association are at length getting the power of the organisation into their own hands, we hope their leaders will have discretion in the use of that power and will not demand impossibilities."

AN EPIDEMIC OF ST. VITUS'S DANCE.

THE following account of an epidemic of nervous disease

appeared in *The Westminster Gazette* of August 13th. It proves that it is not only "microbes" that are "catching."

"A 'St. Vitus's Dance' epidemic has seized upon the school children of Rehlingen, a village near Trier, on the Moselle. It began suddenly on July 25th with Katharina Schnubel, a girl of twelve. During a violent thunderstorm in school hours she trembled and quaked as if in a palsy, and then threw out her arms and legs, sprang from her seat, and danced hysterically. The sight of Katharina's involuntary motions had so powerful a physical influence on her fellow-scholars, that all will-power in them seemed to be destroyed by a sort of wild, irresistible desire to imitate her. In the first class of the girls' school twenty-nine of the children began dancing, and four in the second class. In the upper boys' school, four of the lads were seized, and three in the lower school. The attacks were repeated on the following day, and in the cases of some of the children lasted from one and a half to two hours, and in a few cases even longer. It seems that the St. Vitus's dance has appeared in isolated cases amongst the Rehlingen school children several times during the last few years. The schools were ordered to be closed for three weeks."

SNAKE-BITE ANTIDOTES.

A CORRESPONDENT has sent us a cutting from the *Times of India* of August 16th, summarising the result of Dr. Cunningham's experiments with some of the latest snake-bite "cures." He has tested strychnine, chloride of lime, and many others, and here is what it all came to:—

"The Florida tincture, on the other hand, was found to have no value whatever against the action of cobra-venom, even when introduced into the same site. The drug forwarded by Surgeon-General Harvey, like the chlorides, gave uncertain results, but when introduced into the same site as the venom the drug seems to possess a certain amount of remedial power, but its action is wholly unreliable. The drug is made from the dried roots of *Pericampylus mianus*, and is the particular remedy, it is said, which is used by snake charmers. The Natal and Amritsar remedies had no effect whatever in checking the action of venom, nor was Honiball's Cape Colony remedy received through Lord Lansdowne of any greater efficacy. The theory that opium-eating gives immunity from snake-venom Dr. Cunningham disproved by a sufficiently convincing experiment, and he has thrown grave doubt upon the hypothesis of auto-inoculation, a non-poisonous snake showing itself completely immune from the consequences of injections of dried venom. The net result of the whole matter is that we are as far off as ever from a remedy for snake-bite; the only re-agent which seemed to promise hopeful results being now found to be wholly unreliable."

MELBOURNE HOMEOPATHIC HOSPITAL.

WE have received a copy of *The Australasian* of July 20, by favour of Messrs. Martin and Pleasance, of Melbourne, containing an admirable illustrated article by Jennings Carmichael on the Homeopathic Hospital of that city. We regret that we have not space to reproduce the entire article, but our readers will be glad to have the following quotation :

"It is just ten years since the first wing of the Melbourne Homeopathic Hospital was finished, the foundation-stone having been laid three years before that by the Marquis of Normanby, then Governor of Victoria. The new wing, which is the gift of 'An Unknown Donor,' was completed in 1890, the finished building now being one of the most imposing structures on the St. Kilda road. A great many people regard the Homeopathic Hospital as the institution of a few harmless theorists, never realising that within its walls the same momentous warfare with disease and death is carried on as in other hospitals. There was an increase by more than a thousand last year in the number of patients treated. This, in connection with the fact that the large building is always well filled, proves that the institution supplies a permanent want.

"*Similia similibus curantur*, the homeopathic motto, greets the visitor on entering the hall. The line is inscribed on a fine arch, supported on Corinthian columns, just within the door. To the left a marble slab on the wall testifies in letters of gold to the number of donors who have contributed handsomely to the hospital funds. Among the names I noticed Mr. Robert Reid, M.L.C., who gave £1,000 and the trustees of the estate of Mr. T. J. Sumner, who likewise contributed £1,000. Mr. J. W. Hunt, J.P., chairman of the board of management, an enthusiastic homeopathist and one of the main supporters of the institution, subscribed £250; also the hon. treasurer, Mr. G. G. Crispin, J.P., £100. Many others also gave this amount, the list being a fairly long one."

DR. F. A. BOERICKE'S APPOINTMENT.

WE are glad to learn from the *Philadelphia Ledger* of Sept. 3rd that Dr. F. A. Boericke, senior member of the well-known firm of Boericke and Tafel, has been appointed a member of the State Pharmaceutical Examining Board. Dr. Boericke was appointed as a representative of Homeopathic Pharmacy.

"THE BLOODSHOT EYE"—AN INTERESTING RECRUIT.

FROM the following, which appeared in *The Family*

Doctor of August 10th, it is seen that the editor has been browsing in homeopathic preserves.

"The bloodshot eye may arise from a blow or fall, the act of retching, vomiting, or violent coughing or crying. The eye presents a bright scarlet appearance, in most instances, at the commencement, but usually assumes a more livid hue afterwards. The affection generally disappears of itself; but, as it is liable to prove exceedingly obstinate, the subjoined treatment may be required.

"*Arnica* should be employed, internally and externally, when this derangement has been caused by external injury, such as a blow or fall, and does not disappear spontaneously; in which case this remedy will quickly promote absorption and remove the unsightly appearance. A dose (internal) every four or six hours. Application (external)—To two tablespoonsful of water add six drops of the concentrated *Tincture of Arnica*, and bathe the eye or eyes freely with this lotion three times a day.

"*Belladonna* is preferable when bloodshot eye is associated with symptoms of fulness and throbbing of the vessels of the neck, flushing of the face, oppressive pain in the head, and the like, even in cases in which the cause has been a blow, fall, or other external injury; or, again, in cases in which the bloodshot eye is a symptom of cerebral derangement, as evinced by the associated symptoms and conditions. A dose every four hours.

"*Nux Vomica* should be preferred when the bloodshot eye arises from derangement of the stomach, or, more especially, when it is directly traceable to over-indulgence in fermented or spirituous liquors. A dose three times a day.

"*Chamomilla* is more particularly indicated when this affection owes its origin to violent excitement, to a fit of passion, or to exposure to cold, or to the effect of air upon the eyes, and more especially applicable to children. A dose three times a day."

LITERATURE.

WE are glad to welcome the first number of the *Australasian Homeopathic Medical Gazette*, which hails from Dunedin, N.Z., under the editorship of Dr. R. S. Stephenson, now residing in that city. Dr. Stephenson is already well known to our readers by his contributions to THE HOMEOPATHIC WORLD. Homeopathy is certainly strong enough in Australasia to support a journal of its own, and we wish this new product of Colonial enterprise a long and prosperous career.

We have received and marked for early notice, Dr. C. E. Fisher's important work on *Diseases of Children*. In Veterinary Homeopathy we understand that Messrs. Boericke and Tafel have in the press Mr. Hurndall's work on *The Horse*, which he has now completed. The first part

of a translation into Hindustani of Dr. Clarke's *Homeopathy; All About It*, appears in the *Indian Homeopathic Review* of July.

BRITISH HOMEOPATHIC CONGRESS.

ASSEMBLY IN LEEDS.

THE annual Congress of homeopathic practitioners was held on Thursday, September 19th, at the Great Northern Hotel, Leeds. There was a numerous attendance of members, many of whom had come from distant parts of the country. At the morning session, the President, Edward M. Madden, M.D., Bromley, Kent, delivered his address, the subject of which was "Recent pathological investigations and theories, with special reference to certain points which seem to bear on the doctrine, 'Similia similibus,' and on Hahnemann's speculations as to its *modus operandi*."

THE PRESIDENT'S ADDRESS.

The President, having welcomed the members, said they had this year to mourn the loss of two leaders, who had both filled the presidential chair at former Congresses with honour and dignity. Early in the year they lost Mr. Henry Harris, whom to know was to love and trust, and now, quite recently, they had lost Dr. Stephen Yeldham, who was president when the Congress was last held in Leeds.

It was always a difficult matter to fix upon a suitable subject for such an address as that which must be given at the opening of a medical congress, and the difficulty was increased when the responsibility of the choice fell upon one who, like himself, had made no special subject the object of prolonged research or study. He felt that he had nothing new to teach them, and further, that there was no need, even if he had the power, to attempt to strengthen their trust in the truth and practical usefulness of their rule "similia similibus."

Looking round for some suitable subject for the theme of his address, he turned to the addresses given in former years by the occupants of the presidential chair, and was struck by the prominence which, especially of late, had been given to the importance of pathology, for the fullest

practical developments of our therapeutic doctrine. Such a prominence was all the more noticeable when they remembered that it had for long been one of the popular fallacies accepted by the public at large and by professional opponents in particular, and unfortunately more or less adopted by some of their own apologists, that homeopathy not only could be, but was, practised with a sublime disregard to pathology, and that it might safely be practised by those wholly ignorant of it. Against this belief they could not too often nor too strongly protest. It neither was nor ever could be true.

In saying this, however, one must always guard himself against misapprehension by drawing a clear line of demarcation between pathological facts and pathological theories. It was one of the boasts of homeopathy that while the self-styled "rational" practice shifted and changed with every new theory put forth from the pathologist's laboratory or the professor's study, it had in all essentials remained the same as when first given to the world by Hahnemann, the reason for which was clearly that it was founded solely upon observed facts on the one hand of the effects of disease, both objective and subjective; and, on the other, of the effects of poison, and those two series of observations, if carefully and honestly carried out, and accurately reported, could not possibly be falsified by any change of theory, however radical. They might, however, be, and constantly were, being extended in both fields of observation, especially in the microscopical and biological directions, to an extent almost inconceivable, and therefore undreamed of in the days of Hahnemann.

On reperusing the "Organon," he was struck by the remarkable parallelism of thought between some of the latest conclusions of pathological workers and the line of reasoning followed by Hahnemann, especially in that part of his work which he had devoted to the explanation of how and why drugs should act according to the law of similars in curing diseases. It was to that parallelism rather than to the larger comparison that he wished to draw their attention. Having dealt in chronological sequence with the views put forward by Hahnemann explanatory of the cure of disease by drugs chosen homeopathically, he pointed out that these ideas of the founder of homeopathy were fundamentally the same as those which underlay much of the work and thought of modern

pathologists. Vaccination was clearly claimed by Hahnemann, as an example of *similia similibus*, and it was openly confessed that the work of Pasteur and his followers was only the carrying out into other departments, and with infinitely varied detail, of the work of Jenner already done in regard to smallpox. So much was this the case that it was quite common, though etymologically absurd, to talk of "vaccinating" for hydrophobia, charbon, or cholera.

In the production of an artificial immunity against any specific disease, great care was taken in various ways to modify, and not alone in strength, the original virus, so that the artificial disease produced was never an exact full production of that against which it was intended to protect; and except in a few cases, perhaps, it could not fairly be claimed that where true immunity was produced it was because the man or animal operated upon had practically had an attack of the original disease, but it might very fairly be claimed that he had had an attack sufficiently resembling it to be called a *simile*, if not a *similimum*. Thus in vaccination itself either the virus of an idiopathic case of cowpox was employed, or the true smallpox virus was modified by being passed through the calf, and no one who had ever seen smallpox could pretend that vaccination produced anything but a very mild imitation of it. Yet there were very few practical physicians who even now, in spite of the vigorous anti-vaccination crusade, doubted that so long as the system was affected by the one, it remained practically immune to the attacks of the other. In Pasteur's inoculations again, not only was the original virus passed through the system of another animal, which, by experiments, had been proved to develop the disease in a less virulent form than others, but the poison itself had been first most carefully diluted and exposed to various modifying influences before these intermediate "subjects" were inoculated. It must be admitted that hitherto this line of work, so far as it related to disease already begun, at all events in the human subject, had not been crowned with the success hoped for and expected. Probably before we could get the full benefit of this treatment of disease we should have still further to modify the doses given in the manner familiar to all who practised homeopathically. Already there were a sufficient number of thoroughly competent and honest observers who had published satisfactory

results from the use of disease viruses, administered in somewhat infinitesimal doses to make them look for a great development in this direction. The universal use since Hahnemann's own time of the venom of insects, serpents, &c., was all on the same plane. On the other hand, there had been magnificent results obtained among the lower animals by Pasteur's inoculations for warding off several most fatal and wide-spread epidemic and endemic diseases, results which in themselves were a sufficient answer to those who doubted whether experiments on living animals were justified by the ends attained.

Quite recently, too, they had read of experiments still more exactly following out Hahnemann's line of thought—the production of an artificial drug disease holding at bay one of the most violent and fatal natural diseases; and it seemed to him that “Mithridatism” might fairly be called an example of pure, though certainly crude, homeopathy. Glancing at the work achieved by modern investigators into the causes of disease, and how they may be prevented or resisted, the President alluded to the interesting experiments made by Metchnikoff, Lukomsky, Koch, Fehleisen, and others, chiefly with the infection of erysipelas, the well-known streptococcus.

One point arising out of these experiments which was of especial interest to homeopaths was that it had been found that the protective inflammation and arrest of the poisonous effects of the micro-organisms was much more powerful and certain when a small dose only of the poison was introduced—a large dose often apparently paralysing the leucocytes in their endeavours to arrest the progress of the invading force. It had come to be accepted that the acute symptoms of fever and inflammation were in many cases to be looked upon as an evidence of the strength of nature's struggle against the disease rather than the product of the disease itself, and that it was in the highest degree detrimental to the patient to attempt to arrest them, even if we should not rather encourage, and, if possible, increase these natural efforts; the latest expression of which others might be found with almost unqualified approval in the opening address to the Section of Medicine this year by Sir W. Broadbent at the meeting of the British Medical Association, though in another part of the same address he spoke with the utmost contempt of homeopathy as “still haunting, like a belated ghost, the dawn of scientific medicine.”

The last example of modern research to which the President invited attention had reference to the production of an artificial immunity to diphtheria and the use of *Antitoxin* diphtheria in the treatment of the acute disease. The most important and sensational discovery was that made by Behring and his fellow-workers, namely, that the blood or blood serum taken from an animal thus made immune to either diphtheria or tetanus, and injected in certain proportions into other animals, made them also immune to the same disease, or acted as a curative agent in those already affected by it. And from these experiments there had arisen the whole theory and practice of treatment by the so-called *Antitoxin* injections for the cure of diphtheria, tetanus, and some other diseases.

It had been suggested by some that these injections of lymph taken from immunised animals acted curatively, because they contained attenuated doses of the original *Toxin*, and not in virtue of any anti-toxic element it was supposed to contain, and that they were thus examples of unconscious homeopathic practice. Such a conclusion, however gratifying it might be to his audience, could not, he feared, be maintained, as it had been shown that the *Antitoxin* lymph destroyed the vitality and morbid power in the bacilli which were introduced into it outside the body as well as within; so it was no longer possible to doubt that a real anti-toxic element did exist in such lymph.

The parallelism presented by some of these investigations to Hahnemann's later speculations as to the resistance of nature to the onslaught of disease, and their duty therefore to endeavour to assist this resistance rather than to oppose the disease *per se*, was so self-evident as to need no emphasising on his part.

Whether the precise methods by which their allopathic brethren were endeavouring to put these indications into practical use would stand the test of time or not was no part of his present purpose to discuss, though there were not wanting indications that they would have to be considerably modified to avoid the manifold dangers with which they were at present accompanied; but the conclusive evidence these investigations afforded of the manner in which such diseases attacked the organism, and the way in which nature attempted to free itself from their invasion, would remain for all time, being as they were, the result of the surest of all methods for arriving at truth, careful

inductive experiments. Whether also Hahnemann, with his intense humanitarian sympathies, whose proudest boasts were that he had given to the world a system of therapeutics which had robbed the healing art of the terrors it had hitherto possessed for the sick and the suffering, and that he had been one of the first to recognise the wicked cruelty and uselessness of the system of treating the insane, universal in his day, and to put into practice the humane system which is universal now—whether he could ever have looked with approval upon experiments such as they had been considering, and which necessarily involved the deliberate infliction of disease, pain, and death upon a large number of their dumb fellow creatures might well be doubted; still less could they think of him as taking part in them.

For all this, it could only be a matter of congratulation to see that these researches, conducted by the most highly-trained scientific experts of the present day, and by methods impossible and undreamed of in his lifetime, did, so far as they bore upon the subject at all, entirely confirm Hahnemann's conclusions based only upon his observations of disease and its cure; nor, indeed, could this be a matter of surprise, but rather the contrary, for they knew that he was one of the most careful and accurate observers of nature, and had one of the keenest intellects, trained as highly as was possible in his day; they believed, too, that the physiologists of to-day were the same, and knowing that Nature through all her many phases yet remained the same, working on the same plan, by means of the same laws, and using the same forces to all her varied ends, it would be impossible for any true students of the workings of Nature to reach conclusions out of harmony with one another—

“ For knowledge is of things we see
And yet we trust it comes from Thee,
A beam in darkness—let it grow.”

It depended upon them, on their work and enthusiasm, to quicken and extend the growth of that beam of light thrown by Hahnemann across the chaotic blackness of the therapeutics of his day; for though it had done much already, much still remained to be done by them and their followers before they could claim to have reduced that chaos to order, and turned the darkness of chance or tradition into the clear light of a fixed law. (Loud applause.)

A vote of thanks to the President was accorded on the motion of Dr. Hughes, Brighton, seconded by Dr. Blackley, Southport.

During the rest of the morning sitting, and again in the afternoon, the Congress devoted its attention to papers read by Dr. George Burford, of the London Homeopathic Hospital; by Dr. Charles W. Hayward, physician to the Hahnemann Hospital, Liverpool; and by Mr. W. Theophilus Ord, M.R.C.S., visiting surgeon to the Bournemouth Homeopathic Dispensaries.

Next year there will be no British Congress, but an International Congress in London to celebrate the centenary of homeopathy. Of this Dr. Dudgeon (London) was elected honorary president; Dr. A. C. Pope (Grantham), president; Dr. Dyce Brown, vice-president; Dr. Galley Blackley (London), hon. treasurer; Dr. Hawkes (Liverpool) and Mr. Dudley Wright (London), hon. local secretaries. In 1897 the British Congress will meet in Bristol. Dr. Proctor, of Birkenhead, will be its president, and Dr. Williams, of Bristol, vice-president. Dr. Dyce Brown was re-elected general secretary, and Dr. Madden will now resume the office of hon. treasurer.

THE ANNUAL DINNER.

The annual Congress dinner was held in the evening at the Great Northern Hotel. The President occupied the chair, and there were present about fifty ladies and gentlemen. After the repast had been served a short toast list was gone through. "The Queen and Royal Family" having been duly honoured, the President gave "The Memory of Hahnemann," and Dr. Pope (Grantham) proposed "Prosperity to Leeds," to which Dr. Ramsbotham replied.

TYPHOID BACILLI CONVEYED THROUGH THE AIR.—Various experiments and observations have been made by Uffelmann (*Wien Med. Presse*), with a view to ascertaining whether typhoid bacilli are capable of being transferred through the air. The researches previously carried out lacked two important considerations, namely, the positive identification of the typhoid bacilli, and the duration of their vitality in a dry atmosphere. The author fulfilled these conditions scrupulously, and arrived at the conclusion that typhoid bacilli are conveyed to the air in a dried state from garbage and clothing, and that the bacilli retain their vitality for from several days to two weeks.—*N. Y. M. T.*

ORIGINAL COMMUNICATIONS.

CASES ILLUSTRATIVE OF THE APPLICATION OF THE RULE *SIMILIA SIMILIBUS CURENTUR*. —NUX VOM., KALI-CARB.

By D. RIDPATH, M.D., C.M.

CASE I. (Dec. 28, 1887). Male, *æt.* 63. Complains of *severe* dry cough, which occurs very frequently; aggravated by movement, by going from a warm room to a cold one, and after going to bed at night until he gets warm. Tickling in the throat as from a feather. Anorexia.

About 12 years since was confined to bed with what he states his medical attendant called bronchitis. Well nourished.

SELECTION OF REMEDY.

Dry cough, aggravated by movement.—*Arn.*, *Ars.*, *Bell.*, *Bry.*, *Calc.-c.*, *Carb.-v.*, *Dros.*, *Ferr.*, *Ipec.*, *Lach.*, *Lyc.*, *Merc.*, *Natr.-m.*, *Nux-v.*, *Phosp.*, *Sepia.*, *Sil.*, *Spong.*, *Stan.*, *Squi.*

Tickling in throat.—*Dros.*, *Nux-v.*

Sore pain in epigastrium on coughing.—*Dros.*, *Nux-v.*

Cold air aggravates.—*Nux-v.*

He was therefore given *Nux Vom.* 3, two drops three times a day.

On December 31st his wife came to see me, and reported that her husband was so much better that he had gone to work, and as for the cough at night, that had entirely ceased, and there was only a slight cough in the morning. After continuing to take the same drug for another three days he reported himself as being quite well.

CASE II. (April 27, 1892). Male, *æt.* 22. Grocer. Complained of sticking pain in lower part of left chest below nipple, worse after getting warm in bed. Wakes every night at 3 a.m. with a severe cough, which troubles for the remainder of the night. Tongue coated, swelling of cervical glands, warts on body; has been getting thinner lately. Expectoration viscid. Cannot lift a weight from the ground without severe distress from the sticking pain in chest. Great weakness. Fat disagrees. The cough has lasted about two months.

SELECTION OF REMEDY.

Cough at 3 a.m.—*Amm.-c.*, *Bapt.*, *Cupr.*, *Kali.-c.*, *Mag.-c.*, *Mur.-ac.*, *Nitrum*.

Tickling in throat excites or aggravates the cough.—*Amm.-c.* *Bapt.*, *Kali.-c.*, *Mag.-c.*

Sticking pain left lower chest.—*Amm.-c.*, *Kali-carb.*, *Magn.-carb.*

Worse on becoming warm in bed.—*Kali-carb.*

Kali-carb. also has swelling of cervical glands, fat food disagrees, warts, emaciation and expectoration viscid.

I therefore gave *Kali-carb.* 6, two drops three times a day.

April 29th, reported to me that the cough was now entirely gone, and that he sleeps all through the night without being disturbed.

I frequently met this patient afterwards, and am able to state that the cure was permanent.

CASE III. (Jan. 24, 1893). Female, *æt.* 23. Mill worker. Since 19th inst. has had a severe cough, which wakes her at 3 a.m. and continues for an hour or two. Expectoration purulent and tough. Wheezing respiration. Perspiration excessive with slight exercise. Sticking pain in chest. Dyspnea. Starting during sleep. Cold feet.

SELECTION OF REMEDY.

Cough 3 a.m.—*Amm.-c.*, *Bapt.*, *Cupr.*, *Kali-carb.*, *Magn.-carb.*, *Mur.-ac.*, *Nitrum*.

Startings during sleep.—*Kali-carb.*, *Magn.-c.*

Perspiration with slight exercise.—*Kali-carb.*

Kali-carb. has also wheezing respiration, purulent and tough (viscid) expectoration and cold feet.

I therefore selected this drug, and gave the patient one dose of *Kali-carb.* 1m. (F.C.) and prescribed one powder of *Sacch. Lact.* to be taken three times a day.

On the 27th—three days later—the patient reported to me that on the night of the 24th she had slept all night without cough, but that the following two nights she had awoke at 3 a.m. with a cough, which, however, was much less severe. The wheezing respiration is now gone, and there is no expectoration.

Altogether she feels much improved. I gave her another dose of *Kali-carb.* 1m, and ordered her to continue to

take the powders. I saw her in about a fortnight, when she told me that there had been no return of the cough, and that she was quite well.

Comments.—(1) Cases II. and III. are very good illustrations of the curative powers obtained by the potentiation of a substance—*Carbonate of Potash*—which in the crude state is devoid of such medicinal powers.

As bearing on this subject, I quote here from the *Organon* of Hahnemann, par. 128, "The most recent experiments have taught that crude medicinal substances, if taken by an experimenter for the purpose of ascertaining their peculiar effects, will not disclose the same wealth of latent powers as when they are taken in a highly attenuated state, potentiated by means of trituration and succussion. Through this simple process the powers hidden and dormant, as it were, in the crude drug, are developed and called into activity in an incredible degree. In this way the medicinal powers even of substances hitherto considered as inert are most effectually developed by administering to the experimenter daily from four to six of the finest pellets of the thirtieth potentiated attenuation of one of these substances; the pellets having been previously moistened with a little water, should be taken on an empty stomach for several days."

(2) It has been objected by many that clinical symptoms are inadmissible in the selection of remedies for diseased conditions. Pathogenetic symptoms are those which are produced when drugs are given to healthy persons, the symptoms and conditions being carefully noted. Clinical symptoms are such as have not hitherto been noted as having occurred when drugs have been proved in the healthy, but which have been noted in sick persons, and which, during the exhibition of certain remedies for the other existing conditions, have been cured. These cured symptoms, when properly verified by repeated observations, are clinical symptoms. As bearing on this subject I quote par. 134 of *Organon*—"All noxious agents, and especially drugs, possess the property of producing a particular change in the health of the living organism. But not every symptom peculiar to one drug occurs in the same person, neither do all become manifest at once, nor during a single experiment. A prover first experiences certain symptoms, and others during a second and a third

trial. Other persons may perceive certain symptoms of another kind, while perhaps the fourth, eighth or tenth experimenter experiences several or many of the same symptoms which had been already perceived by the second, sixth, or ninth person. Neither do these symptoms appear at the same hour."

The *Homeopathic Recorder* for July, 1895, p. 132, has a few remarks on this subject, and I quote one paragraph therefrom as expressing very well the views of many on this topic: "Not even Hahnemann himself claimed that all the symptoms of the drugs he proved had been elicited; and may it not be reasonably taken for granted that these well-established curative or clinical symptoms, that are not in the pathogenesis, are among these, and therefore properly belong to the drug?"

(3) With regard to the question of potency of dose, it will be noted that Cases II. and III. were similar as to their characteristic cough. In the former the drug was given in the sixth centesimal potency, while in the latter the one thousandth potency was administered. In each case cure was obtained. I cannot say what induced me to give the lower potency in the one case and the high in the other. All I shall say, however, is that, according to my observations, the more similar the symptoms, the higher may be the potency given. Also when patients can only be seen at rare intervals, the higher potencies may be more convenient.

8, Grange Crescent, Sunderland.

BELLADONNA IN CHILDREN'S COMPLAINTS.

By E. D. SHIRTLIFF, L.R.C.P (Lond.), M.R.C.S. (Eng.).

I HAVE come to look upon *starting* in sleep or even if awake as a very strong indication for *Belladonna* in children's complaints. Yesterday, July 18th, I was called to see a strong, healthy looking boy of 14 months; dark eyes, fair auburn hair; had 14 teeth through; could walk a few steps, and say a word or two. It was driving on July 18th in rather a keen wind. On 14th was hoarse with croupy sound on inspiration and cough. On 16th and 17th nose and eyes ran much. On 18th I was sent for, child was crying and coughing, coughing and crying, very irritable, fell into short dozes in which it *started*.

The startings only came on to-day. It was a nasty hard cough. The child seemed to try and repress it as if it was painful, and cried when it coughed. It was throwing itself about. The mother said it had been very hot, but the hands did not feel very hot to me. As a rule the child is a very good amiable child, showing how irritability is sometimes a sign of disordered health. The child was too irritable for me to take the temperature or make any examination. ("Never use force with a child," Hohenheim). It refused milk and the breast (it was accustomed to have the breast at night). Tongue white. The mother said it was not so thirsty or hot as in the morning. Keeps crying out as if in pain. I was afraid the child was going to be seriously ill. It had vomited with the cough, throwing up white phlegm. Respirations 64. The child's paternal grandmother died of consumption, so the mother thinks. Taking the *startings* as the key-note, thinking also of the cough, I gave *Bell.* 30, 1 pilule every 4 hours; if better omit medicine. This was about 5 p.m. The child had a pilule then, and again at 9 p.m., when it seemed better and fell asleep. No more medicine.

July 19th, 12.30 p.m.—Child sitting up playing with toys; quite amiable; allowed me to take the temperature (which was 98.5°) and examine lungs. Cough better. Takes milk better. No more startings. Give no more medicine as long as child improves. To send for me if they want me again. I was not sent for again, and heard to-day (August 14th) the child was well but for teething troubles.

CASE II.—I was sent for one night to see a little girl about 2, very fair, and found her lying on her mother's lap in a semi-comatose condition. Temperature 104°. *Skin burning hot*, almost pungent in heat (Dr. Guernsey notes this as indicating *Bell.*). *Startings*.

The mother thought she was not quite as bad when I saw her as she had been before I came.

The startings again led me to *Bell.*, and the burning hot skin still further recommended it, so *Bell.* 30, 1 pilule at once. No more to be given if any improvement. I ought to say that when this child is only slightly ill it is impossible to take the temperature, as it is so exceedingly irritable (even when well) and fractious.

Next Day.—Child sitting up on mother's lap having a

meal. Too irritable to take temperature. Got quite well. It only had the one dose of *Bell.*, and, as far as I remember, no other medicine after.

CASE III.—This was a very grave case. A little boy of 3 or 4, fair, found him unconscious, lying on his back with staring glassy eyes. Diarrhea. Motions run from him. Arms twitch. Pulse 170 regular, soft. *Pupils dilated.* *Startings.* Temperature 104.7°. Delirium. Jumps out of bed. Corners of mouth drawn down. Respirations 54. Sighed once. Couldn't eat any tea yesterday, otherwise seemed quite well and slept till 3 a.m. this morning. At 6.30 a.m. to-day complained of sore tongue and thirst. Has seemed strange in head, and talked of pigs and horses and of some one beating him. *Has complained of noise outside house affecting him.* Very restless all day. Complains of soreness of nape of neck. Had very bad convulsions as a baby, from 9 to 15 weeks old. *Bell. φ*, I think this was given in water, 1 drop in a tumbler, a teaspoonful for a dose. I gave ϕ because that was all I had with me. I forget the frequency, but I think he only had the one dose all that night.

I was fetched again at 11 p.m. I went down and thought the child a little better. Temperature 102°; pulse 176, very soft and quick; respirations 64. Still diarrhea. Throws arms about, and appears to take no notice of any one. Breathing something like Cheyne Stokes respiration.

As far as I can recollect he had no more medicine, only the first dose.

Next Day, June 8th.—Conscious, and knows me. Tongue white, quite moist. Little internal strabismus. Pulse 150, very weak. *No more startings*, and very little twitching. Respirations 50, very quiet; temperature 101.5°. Very little sleep in night. He didn't know his parents. Motions green now, not pink as at first. His mother thinks he has some control over the bowels now. To take no more medicine.

Urine.—In appearance like light pea soup. S.G. 1026. Small quantity of albumen. Urates.

6 p.m.—Pulse 135, soft; respirations 38; temperature 100.9°. Complains of pain in mouth, and also, when lifted, in nape of neck. Still diarrhea.

June 9th, 10.30 a.m.—Pulse 110; respiration 26; temperature 97.8°. Complains of pain in epigastrium

and in mouth; right side (where he has a decayed tooth). He says he ate unripe gooseberries, and was knocked on head by a boy. Sun has been hot. His mother says some gooseberries passed per rectum. Motions loose, but more natural—very scanty. Thinks he wants to go to stool, but passes very little. Urine clearer. Fretty. No sleep since 2.30 a.m. Wants to be nursed. Asks for things, and when given doesn't want them. Right cheek hot, left cold, both flushed. Mother says sometimes he goes as pale as death. Eyes sunken. Had two doses *Cham.* ϕ to-day.

June 10th, 1 p.m.—Worse. Pulse 109. Motions appear to be involuntary. Complains of outside noises. Seems to be listening as if he heard something. Temperature 99·7°. Constant thirst for small drinks. Motions like blood and matter. Throws himself about, and right out of bed, clothes and all. One dose *Bell.* 30, 4 drops.

8 p.m.—Not so thirsty since the dose of *Bell.* 30. Restlessness better; lies quiet, although no sleep. Complained of no pain. Tongue cleaning from tip. Pulse 104; temperature 99·8°. Two motions since 1 p.m. (white mucus, with a little blood in it). No more medicine.

June 11th.—Temperature 97·2°. No medicine. Three motions to-day.

June 12th.—Bowels had acted once when I called. Motions not natural yet. Poor appetite. *China.* From this point the patient got well, and is now (July) running about as formerly. Kept pale, with sunken eyes, for some time.

Here was a case very grave and getting worse. From one dose (I feel sure it was only one dose) of *Bell.* ϕ patient steadily got better till the relapse of June 10th, when one dose of *Bell.* 30 commenced a complete recovery. The startings chiefly decided me to give the *Bell.*

CASE IV.—My own little boy, fair (used to be dark), suffers much with teething (age now 14 months). In some of his bad turns has had startings, showing great cerebral irritation, I think, and *Bell.* (generally 30) has always relieved and stopped the startings, and generally only one dose. I got the idea from "The Homeopathic Treatment of Disordered Dentition," by Henry N. Guernsey, M.D., reprinted from *Hahnemannian Monthly*, November, 1869. He also gives *Cham. Borax* and *Sul.* as having "starting." The efficacy of the one dose is seen in these cases.

Holmwood, Cowleigh Road, Malvern, July 19, 1895.

THYROIDIN.

III.—CASES OF TETANY (OPERATIVE AND IDIOPATHIC) CURED.

By JOHN H. CLARKE, M.D., Physician to the London Homeopathic Hospital.

(Concluded from p. 398.)

[*Brit. Med. Jour.*, June 1, 1895.]

39. BRAMWELL. Cure of tetany. *Appropos* of the "tremors" noticed in the foregoing observation (38, p. 398), the following case becomes of additional interest, so I will quote largely from Dr. Bramwell's article.

It should be noted that *aggravation from cold* appears to be a leading indication for the Thyroidin treatment.

"About a year ago I was asked by Professor Annandale to see a patient in whom tetany had developed after removal of the thyroid gland. The case was being treated with small doses of thyroid extract. The spasms were very severe, and the small doses of thyroid extract had not produced any apparent benefit. Professor Annandale's object in asking me to see the patient was to ascertain what quantity of the thyroid extract it was advisable to give in such a case. I advised that the remedy should be pushed in much larger doses. This was done. In the course of a short time the tetany and other serious symptoms disappeared, and the patient made a rapid and complete recovery.

"Now, it is well known that after complete removal of the thyroid gland tetany not infrequently develops, and that the patients in whom this form of tetany is developed often die. Gowers, for example, says: 'When the whole thyroid is removed tetany supervenes in about one-sixth of the cases. This is the average of a series of cases reported by various surgeons, which have varied from 7 in 70 (Wölfler) to 12 in 53 (Billroth). All the patients have been young females still in the developmental period of life. The symptoms of tetany set in during the first ten days after the operation. It does not follow partial extirpation. It has been observed in association with atrophy of the thyroid and myxedema. This remarkable relationship to thyroidectomy will be considered further in connection with the pathology of the disease.' And, in speaking of the pathology of the disease, he says (p. 707): 'The frequent occurrence of the disease after excision of the thyroid gland is a pathological fact of great importance, but not yet of clear significance, although most observers consider that a toxic mechanism is the probable explanation. The malady has been thought to be the first result of the process which leads to myxedema and the 'cachexia strumipriva,' and to be due to the accumulation in the blood of

some material, as mucin, which it is the function of the thyroid to change. With the admission of the possibility of this we must at present be content.'

"My own view of the pathology is that this operative tetany, as it may be called, is merely one manifestation of acute myxedema, and that it is the result of the arrested thyroid secretion. The fact that this form of tetany, which, if left to itself, is apt to terminate fatally, can be arrested and cured, as Professor Annandale's case shows, by the administration of thyroid extract confirms this view. And here I should state that it is not the tetany which is fatal, but the acute myxedema—that is, the arrested thyroid secretion—of which the tetany is only one manifestation.

"The striking and prompt benefit which was produced in Professor Annandale's case made a profound impression upon my mind, and I said to myself mentally, 'If arrest of the thyroid secretion can produce operative tetany, and if the administration of thyroid extract can cure operative tetany, may it not be the fact that ordinary (idiopathic) tetany is due to a deficient thyroid secretion, and that ordinary (idiopathic) tetany can be cured by the administration of thyroid extract?' I mentally determined to try the remedy in the first case of idiopathic tetany which came under my notice.

On March 20th, 1895, Dr. Young, of Dundee, wrote me as follows: 'Would it be too much trouble to tell me if anything more might be done for the little fellow W., who was in your ward suffering from tetany last April? He has been taking large doses of bromide of potassium without any effect, and, although fairly well during last summer, he is now much as he was when you saw him.'

"The patient, a boy aged 8, was under my care in the Edinburgh Royal infirmary from April 5th to 25th, 1894. The case was a highly typical and characteristic one. The disease was of some six months' duration. The spasms were very frequent and severe; they affected the muscles of the hands and feet, arms and legs, chest and larynx. The pain which resulted from the spasms was so great that the patient frequently cried out. The temperature was subnormal. Cold induced and aggravated the spasms. There were no indications of rickets.

"During his stay in hospital he was treated with bromide of potassium and chloral hydrate, and was kept in bed and protected from cold. Under this treatment he improved considerably, and was sent home relieved but not well.

"During the summer of 1894 he remained fairly well, but, as Dr. Young's letter states, a relapse occurred and the spasms again became severe during the past winter and great frost of the present year.

“ And here let me say that the fact that cold seems to aggravate the spasms and to produce relapses, and that the disease is much more frequent in winter and in spring than in summer or autumn, is another important point of relationship between tetany and myxedema. Every one knows that cold predisposes to the production of myxedema. Professor Victor Horsley's experiments illustrate this most forcibly. He excised, for example, the thyroid gland of a sheep; it remained well until it was shorn; it then manifested the symptoms of acute myxedema and died. Further, in cases of myxedema and sporadic cretinism, the symptoms are almost always aggravated by cold and relieved by heat. In some cases of tetany, too (my experience of the disease is insufficient to allow me to make a more definite statement on this point), as in almost all cases of myxedema and sporadic cretinism, the temperature is subnormal.

“ In reply to Dr. Young's letter, I advised him to try the internal administration of thyroid extract; and I explained to him my reasons for recommending this plan of treatment. These reasons were as follows :—

“ 1. Total extirpation of the thyroid gland is followed in a considerable proportion of cases by the development of tetany. This form of tetany is often fatal.

“ 2. In some cases at all events (as Professor Annandale's case shows) this operative tetany can be promptly arrested and cured by the internal administration of thyroid extract,

“ 3. Operative tetany is in all probability merely a manifestation (symptom) of acute myxedema and due to arrested thyroid secretion.

“ 4. Idiopathic tetany, like idiopathic myxedema, seems to be induced and aggravated by cold.

“ 5. It is not improbable, therefore, that idiopathic tetany may be the result of defective thyroid secretion.

“ 6. If this is so it is probable that idiopathic tetany can, like idiopathic myxedema, be cured by the administration of thyroid extract.

“ In my letter to Dr. Young I asked him to let me know in the course of two or three weeks what the result of the treatment was. On April 11th, 1895, he wrote me as follows :—

“ It is now three weeks since the little fellow W. began to take thyroid extract, and the success seems almost phenomenal. His spasms have quite ceased and he is much brighter and more active. He has been taking three tabloids (Burroughs, Wellcome and Co.) for the last fortnight. Shall we continue the thyroid still? His parents wish me to say how very much

obliged they are for your kindness in suggesting this "wonderful cure."

"On receipt of this letter I again wrote Dr. Young asking him to give me in his own words a further statement of the case. On April 16th he wrote me as follows:—

"I am glad to be able to give you the particulars you wish regarding the tetany case.

"J. W., aged 9 years, has suffered from tetany since November, 1893. In 1890 he suffered from a very severe attack of whooping-cough. In 1892 he had an attack of influenza with bronchitis. In July, 1893, he was knocked down by swinging jute. His parents are healthy; his father exhibits unilateral sweating. He has two sisters alive and healthy; a sister died at the age of 13 from pernicious anemia. The disease (the tetany) was excited by cold, and always worse in cold weather. He rarely missed a day without an attack; the spasms were very severe, affecting the arms and legs and the muscles of the chest and larynx (laryngismus). Between the attacks he complained of pain in the wrists and ankles. He also suffered from headache, breathlessness, and palpitation on the least exertion. Before the thyroid treatment was commenced his mental activity was much impaired; he had no desire to look at pictures, or to go out or play. His temper was wicked; he was easily angered, and would attack other children. The tetany has been treated by the usual drugs, arsenic, chloral, antipyrin, bromides (15 to 45 gr. daily), cod liver oil, &c., but without marked improvement. In May, 1894, he had an attack of pneumonia, preceded by a convulsion; for some weeks after this attack the spasms were less severe.

"The thyroid treatment was commenced on March 22nd, 1895. For the first three days he took one tabloid (Burroughs, Wellcome and Co.) a day; for the next three days two tabloids daily, and then three tabloids daily, in accordance with your recommendation. At the end of three weeks (on April 13th) the thyroid treatment was stopped as you advised.

"There was no marked change until the three tabloids were given; since then the symptoms have gradually passed off. Since then there have been no spasms, no crowing, no pain, no breathlessness, no headache, and no palpitation. He is going out every day, is much brighter, and, his mother says, in every way a "different boy." There have never been any symptoms of thyroidism.

"On May 15th Dr. Young again wrote me as follows:—

"The tetany case is still doing well. There has been no

return of the spasms, and the mental condition seems very much better. He is now at school, and is interested in his tasks, and has lost that stupid look which he previously had. He is altogether a "different boy," his mother says."

In a further communication on the subject in *The British Medical Journal* of June 22, Dr. Bramwell says that Gottstein had put on record independently a cure of idiopathic tetany temporarily relieved by thyroid grafting, and most markedly improved by internal administration of *Thyroidin*. Dr. John Thomson had used *Thyroidin* with little or no apparent success in infantile idiopathic tetany.

REMARKS ON DR. COOPER'S "ARBORIVITAL
MEDICINE" — *LEMNA MINOR* — *ARBUTUS
ANDRACHNE*.

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

Author of *Common-Sense Homeopathy*.

(Concluded from p. 404.)

V. Lemna Minor (Nat. Ord. *Lemnaceæ*), the common duckweed, which forms the green scum on stagnant ponds, and is the smallest of all phanerogamous plants, has been well worked out by Dr. Cooper; and I therefore quote the *Lemna* cases in detail, for it is probable that it may become a desirable addition to our *Materia Medica*. *Lemna* "acts with vigour on the nostrils." Dr. Cooper's cases, along with those of Drs. Clarke and Burnett, go to show that *Lemna* markedly relieves ozena from post-nasal ulcerations; chronic nasal catarrh, with excessive mucous flux; anosmia and cacosmia; putrid taste in the mouth in the morning; and that it has a singular power of decreasing the size of, but not curing, nasal polypi, which swell up in damp weather. Also it improves spasmodic asthma, arising from damp alone. Its only "medicinal aggravation," or rather, pathogenetic symptom, hitherto noted, is "diarrhea with borborygmi and flatulence."

Dr. Cooper gives us these "keynotes"—"*Lemna's* symptoms are specially aggravated in heavy rains; *Calendula's* when heavy clouds are about; *Rhododen-*

dron's in thunderstorms; and *Dulcamara's* in damp surroundings and in foggy weather."

Case 1.—An old woman, aged seventy-four, admitted September 24, 1892, has been deaf for eight weeks, the watch not being heard even in contact; can't smell properly; has unpleasant breath and obstruction of the nose as if by cold. One dose greatly improved all these symptoms by the 22nd of October.

Case 2.—A boy of fourteen, whose nostrils were full of polypi, the nose itself being broadened, and who never remembered having smelt anything, was treated by fortnightly doses of *Lemna* φΔ, from November 26, 1892, to March 4, 1893, and again from April 8, 1893, to March 14, 1894, when the report is, "his nose is quite clear, with none but small polypi visible: he can breath freely, and his sense of smell has completely returned."

Case 3.—A girl of sixteen, with ozena of thirteen years' standing, was very much benefited by three heliosthenic doses of *Lemna*, given at long intervals, from December 30, 1893, to May 19, 1894. The catamenia seem to have become regularly established while taking the *Lemna*.

Case 4.—A married lady, aged twenty-six, suffered from post-nasal ulceration and catarrhal pharyngitis, also with dryness and unpleasant taste in the mouth every morning. In less than six weeks all this cleared away under *Lemna* φΔ.

Case 5.—A man, aged forty-seven, was relieved of vascular deafness, snoring, and unpleasant dreams at night.

Case 6.—A woman, aged twenty-six, had great relief from *Lemna*, from the following symptoms: "Crusts form in the right nostril, and pain like a string extends from that nostril to the right ear which is deaf."

Case 7 (Dr. Clarke).—A lady of forty-seven, after an accident to her head, suffered for two years from nasal catarrh, with sneezing attacks. After treatment by other remedies—not proving very effective—*Lemna* 3x, four times a day, cured her in a month.

Case 8 (Dr. Clarke).—Capt. B., aged forty-four, was cured of a very severe coryza in ten days by *Lemna* 3x.

Case 9 (Dr. Burnett).—A gentleman, sixty years old, with nasal polypus moderately developed, was much troubled with the aggravation of the nasal obstruction in wet weather. *Lemna* 3x, twice daily for a month.

made him "feel quite comfortable" in his nose, and enabled him "to breathe through it quite well."

Case 10 (Dr. Burnett).—A lady of forty-five, was troubled with nasal polypi, which in wet weather swelled out so large as to protrude from the nostrils, and thus seclude her from society. Several times her polypi had been removed by operation, but they grew again. *Lemna* 3x, twice daily, very greatly reduced them all, and enabled the patient to resume her social duties.

Case 11.—A lady, aged fifty-eight, with a sickly and pallid complexion, suffered from pains in her eyes during heavy rain; from pains flitting about her head and legs; and from drowsiness by day and restless sleep at night: had all these symptoms removed by a single dose of *Lemna*, the face also becoming natural and healthy in colour.

Cases 12 and 13.—Chronic recurrent spasmodic asthma, brought on by damp, not from dust; greatly improved by *Lemna* $\phi\Delta$.

VI. *Arbutus Andrachne* (Nat. Ord. *Ericaceae*), the strawberry-tree of the Levant, has cured the following cases:—

Case 1.—Chronic eczema in a plethoric man of forty-two, on arms and legs. Commenced treatment, in September, 1892, with *Arbutus* $\phi\Delta$. The improvement not being so marked as expected, Dr. Cooper gave *Rhus*. for three weeks at patient's second call, but without effect, and then *Arbutus* was resumed. A third dose after two months, and a fourth dose two months later, completed the cure by the end of January, 1893.

Case 2.—Miss C., aged thirty-five, is of a gouty family, and is subject to autumn and winter attacks of eczema. On October 24, 1892, she began treatment for eczema on the hands. *Arbutus Andrachne* $\phi\Delta$ being given, was followed by acute gouty arthritis of fingers and toes, which, along with the eczema, disappeared within fourteen days. Each of two subsequent attacks was cured by one dose of *Arbutus*.

Case 3.—Mrs. L., a stout plethoric woman of fifty, suffers from acute eczema of the left ear, offensive leucorrhoea, and irritable hemorrhoids that sometimes bleed. After one dose of *Arbutus* $\phi\Delta$ the eczema spread over to the right auricle (medicinal aggravation), and then the entire condition improved. But the complete cure had to be effected by other remedies.

Dr. Cooper points out the resemblance of *Arbutus An-drachne* to *Uva Ursi* (also of the *Ericaceæ*) in its action on the bladder.

Case 4.—A tailor, aged sixty-two, whose constitution was much broken down, came to Dr. Cooper October 30, 1893, with the following troubles: "Dysuria, with pain in the back; backache for eighteen months past: the pain about the neck of the bladder, when urinating, is very severe . . . the strain of urinating invariably starts the bowels aching." *Arbutus* ϕ a relieved all these symptoms in a week, and until November 25th the patient felt well. Then a relapse took place, and the patient died eventually from strangury, caused, in Dr. Cooper's opinion, by malignant disease of the prostate gland.

Case 5.—A working man of seventy, a bed-ridden invalid from partial paraplegia, had his backache relieved promptly by *Arbutus*. *Arbutin* is used by the allopaths in vesical disease.

To sum up, in Dr. Cooper's words, "Arborivital Medicine differs from homeopathy in exalting the utility of the single dose; in never repeating medicines in chronic cases at less intervals than a week or ten days for each dose; in discarding as unnecessary the infinitesimal dose, though insisting upon a small one; in permitting the very free prescription of single doses of herbs of whose action we have no certain knowledge; in preparing our tinctures from the living budding-stalk, and not from the roots, seeds, or fruits of plants; and in not aiming at the development of artificial powers in our preparations of drugs."

In these two articles I have condensed, from sixty-seven pages of print, whatever in Arborivital Medicine I deemed would be interesting and useful to readers of the HOMEOPATHIC WORLD. But I have avoided criticism of the conglomeration of nebulous ideas which constitute the *theory* or *theories* of this "System." Dr. Cooper's culture and wide reading should not lead him to adopt, as his own, such Hahnemannian—Brahmanistic notions as pervade his latest brochure, *The Problems of Homeopathy Solved*. It would be no difficult task for me, in a third contribution, to correct these fallacies, and to show how the author seeks to *explain* his clinical successes by impossible conclusions based upon inadmissible premises. But, having received much personal kindness from, and having profited

by the surgical skill of our only homeopathic aurist, I am not in a sufficiently severely-critical frame of mind to perform this, to me, ungracious task. Let us assimilate the new remedies Dr. Cooper has given us into our practice, and verify (or confute) his results. There can be no doubt as to the ability, industry, originality, and I will say *honesty* of Dr. Cooper, even though Arborvital Medicine may vanish like a snowflake falling into a river. The motto for the true scientific homeopath (the most open-minded of all medical men) is that given by St. Paul to the Christian, "Prove all things: hold fast that which is good." Homeopathy is, emphatically, the "Medicine of Experience."

51, Canning Street, Liverpool, July 11, 1895.

REMARKS ON THE "MATERIA MEDICA."

IPECACUANHA (continued)—*LEDUM*.

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

(*Ipecac. continued from p. 407.*)

Respiratory: coryza, with drawing pains in all the limbs; rattling noise in the bronchial tubes, when drawing breath; oppression of the chest in the forenoon, and short breathing as if he were in the midst of a quantity of dust, and this prevented him from breathing. *Asthma*: suffocative cough, the child becoming quite stiff and blue in the face (a. 10 hrs.); *dry cough produced by a titillation in the upper part of the larynx* (a. 2, 3, 5 hrs.); cough accompanied by colic as if the umbilicus would be torn out, heat in the face and sweat on the forehead, pain in the abdomen as if there were pressure in the bladder as in retention of urine; spasmodic asthma with violent contraction in the throat and chest, a peculiar kind of panting being heard; cough with expectoration of thick mucus, having a repulsive metallic taste; hemoptysis; suffocative, extremely exhausting cough at 7 o'clock in the evening, with coldness of the extremities. *Extremities and back*: pinching pains in the right arm (a. 3 hrs.); one of his hands is cold; herpetic eruption on the wrist-joints and at the arms; itching, especially in the evening, after lying down; twitching and creeping in the gastrocnemii muscles, as when a limb has gone to sleep; cramp pain during

motion between the scapulæ. *General*: pricking pains in different parts of the body, excited by motion, and terminating in burning pains; *bruised pain in all the bones* (a. 3 hrs.); *pain in the joints, as when the limbs go to sleep* (a. 3 hrs.). *Weakness, fits, and sleep*: sleep with the eyes half open (a. 6 hrs.); when about to fall asleep she feels shock in all her limbs; anxiety in the blood in the morning when waking, as if he had great heat or had perspired a good deal, or waked up from anxious dreams, although he was neither hot nor felt sweaty, at the same time he felt a heaviness in the head as if the brain were pressed upon; vivid dreams which he is unable to recollect, he had previously waked several times in the night as if he were too wakeful. *Fever*: shuddering when yawning; constant chilliness under the skin, increasing when sitting near a warm stove; excessive sensitiveness to cold and warmth; hands and feet are icy cold and dripping with cold sweat, one of the cheeks being red, the other pale, mind and body feeling wretched and faint, and the pupils dilated (a. 10 hrs.); external coldness and internal heat; heat and redness in the face, without thirst; towards 4 o'clock in the afternoon, sudden attack of heat all over, with sweat on the arms and back (a. 16 hrs.); shuddering and coldness in the limbs, as if one had started with fright, violently increasing almost burning heat in the head and the whole body, hands and feet being cold; night sweat; sour-smelling sweat; profuse sour sweat with turbid urine. *Remarks*.—It will be noticed in the general remarks that there is discrimination pointed out between *different kinds* of diarrhea, and also that the action of *Ipecac.* in dysentery is an instance of what may be called partial homeopathy, that is to say, a covering of some symptoms only of a disease, and those not the characteristic ones, a kind of treatment that is frequently mistaken for part of the genuine totality of the symptoms, and those the *characteristic* ones; then come "certain kinds" of asthma, "some kinds" of tetanus, "certain kinds" of intermittent fever, all thus continuing to emphasise the importance of discriminating between species of diseases and symptoms of medicines as against mechanical and routine treatment of names. The remark that *Ipecac.* has a very short duration of action is justified by the repeated observation that certain symptoms occur so many hours after the administration of the drug. Coming to detail, we may observe that one of the characteristic

head symptoms is accompanied by nausea ; this is interesting, as continued nausea in a variety of complaints calls unmistakably for *Ipecac.*, and we see now why nausea should be a characteristic symptom of *Ipecac.*, which also is one of those medicines which causes "pain at a small spot"; under eyes is the peculiarity of drowsiness accompanying dryness ; the heat in the face without redness should be compared with the symptoms of fever, and note under throat that the stitches are transverse, and pain is relieved by swallowing saliva, as differences of this sort in throat affections, *e.g.*, pain on empty swallowing, difficulty in swallowing liquids rather than solids, &c., may make all the difference in the selection of the remedy in such an urgent and grave disease as malignant diphtheria, and correct selection versus error may make all the difference between life and death, because here as everywhere the individual and the combination of presenting symptoms are to be treated, not the name and theoretical pathological speculations as to whether the inflammation is sthenic or asthenic, and the characteristic bacillus present or absent. Note under appetite the locality of nausea, as this, though a simple point, is often one of great clinical value in differentiating between two or more medicines otherwise greatly resembling each other; the shuddering which accompanies some abdominal and several symptoms in other localities will lead to inquiry as to the character of fever present in any given case: hemorrhage, it will be observed, is frequently produced by *Ipecac.*, and this may lead, by careful examination of the symptoms, to many an arrest, *curatively* of the severest hemorrhages, and avoid both the difficulties, dangers, and disagreeableness of plugging, for a drug that "*primarily produces hemorrhage from all the orifices of the body, especially from the uterus,*" offers a door of both safety, cure, and comfort in these most distressing and dangerous cases. The symptoms of the respiratory organs should be carefully compared with those of other drugs used in asthma, bronchitis, and bronchial catarrhs. Among the general symptoms, the bruised pain in all the bones will remind us of its value in intermittent fevers, when, of course, other symptoms correspond, as also the variously disturbed sleep and the distinctive fever symptoms themselves, noting especially the remarkable one of chilliness under the skin, increasing when sitting near a warm stove.

LEDUM.

Our next medicine is *Ledum palustre*, which, from the symptoms, it is stated will be especially suitable for chronic affections characterised by coldness and want of animal heat. (In this connection it is interesting to remark that the habitat of this plant is in cold regions, e.g., Canada, Sweden, and Lapland.—E.M.) Large doses act 4 weeks. A small portion of a drop of the fifteenth potency is sufficient at a dose, as I know from long experience. *Camphor* antidotes the bad effects of *Ledum*, either when given in too large a dose, or when not homeopathic to the disease. *China* is a bad remedy to use against the weakness produced by *Ledum*. Some brewers in Germany impart to the beer strongly intoxicating qualities by mixing it with *Ledum*; this is criminal. Detailed symptoms—*Moral*: dissatisfied with his fellow-beings the whole day; he finally hates them; feverish mood, with much restlessness and inconstancy, he was unable to think about anything calmly or perseveringly; out of humour, he withdrew to some solitary place and desired to die, almost with tears in his eyes; vehemence; very serious the whole day, he considered everything which occurred to him a very serious event. *Head*: tearing pain in the head and eye, the sclerotica and conjunctiva are swollen and inflamed; the tearing pain in the eye becomes worse when lying down, and is relieved by sitting; the eyelids are agglutinated in the morning, and a foetid fluid flows from between the lids, accompanied by evening shuddering followed by heat; nightly thirst, rumbling in the abdomen (with good appetite), more internal than external heat of the head, sweat in the back and hairs of the head (a. 24 hrs.); pimples on the forehead as in drunkards, and smarting itching of the chest, with red spots and an eruption of rash; *vertigo*, the head inclines backwards; vertigo, with a feeling of heat in the whole body, especially in the face, without thirst, with pale cheeks and forehead (a. 5 hrs.). *Eyes*: extreme dilatation of the pupils; luminous vibrations before the eyes, he saw nothing in a steady position; acrid lacrymation; contracted pupils (a. 1 hr.). *Ears*: Hardness of hearing of the right ear, sensation as if it were obstructed with cotton, and as if he heard distant sounds; *roaring in the ears as of the wind*. *Face and nose*: paleness of face but no chilliness; burning pain as of hot coal in the interior of

the nose, the nose feeling sore when pressing on it or blowing it (a. 24 hrs.). *Jaws and teeth*: after a few severe stitches in the tooth he feels an intolerable tearing pain in the outer part of the right side of the face, head, and neck, the whole night; the pain disappears again after a few stitches in the tooth, but returns from time to time, the attacks finally terminate with shuddering and deep sleep, and absence of hunger and thirst (a. 96 hrs.); *hard pressure in the lower jaw from without inwards* (a. 1 hr.); swelling of a gland under the chin aching when touched. *Mouth and pharynx*: sore throat with fine stinging pain; stinging in the throat between the acts of deglutition only in the forenoon, when sneezing the stinging was changed to a pressure in the back part of the throat. *Appetite and gastric*: want of appetite; a sort of sick and qualmish feeling in the stomach, accompanied by a bad and musty taste in the mouth; *sudden flow of water from the mouth resembling saliva*, with colic, waterbrash; bitter eructations after a meal; nausea when walking in the open air, with sweat over the whole body, especially on the forehead; great desire for cold drink, especially water (a. 4½, 8, 28 hrs.); constant absence of thirst; frequent attacks of hic-cough. *Stomach and abdomen*: colic as if the bowels were crushed and weakened, resembling the sensation which is felt after having been purged by drastics (a. 6 hrs.); colic as if diarrhea would set in, from the umbilicus to the anus, accompanied by loss of appetite and cold feet, the taste being otherwise natural; pressure in the region of the upper brim of the left side of the pelvis, and in the muscles, extending as far as the last false rib, more violent when walking. *Stool*: constipation for several days; the stool is mixed with blood; red humid spot over the anus, in the region of the os coccygis, affected with a smarting and sore itching, when sitting or walking (a. 48 hrs.); papescent stool resembling diarrhea without any pain; diarrhea, feces with mucus. *Urinary organs*: yellow urine with a white lime-like sediment; the urine frequently stops during emission, after emission a stinging is felt in the urethra; reddish urine (a. 24 hrs.). *Genital*: swelling of penis, urethra seems closed up with swelling, he has to press very hard to emit urine, the stream being very thin and painless (a. 3 days); so faint after nightly emission, he could scarcely drag his limbs along; menses a few days too soon; increased menstruation. *Respiratory*: spasmodic double

inspirations and sobbing (as in children who have wept very much, becoming very angry); *oppressed painful breathing*; *asthmatic constriction of the chest, aggravated by motion and walking*; *fetid breath*; *violent cough with expectoration of bright-red blood*: pain of the sternum, as if the pain were in the cartilage, in sudden attacks, a sort of digging-up, rubbing and scraping in the part, without cough.

A CARDIAC CASE.

A. H. BURNS, L.R.C.P.I., L.S.A.

ON Saturday, the 3rd of September, 1892, I was called in to see a middle-aged American lady, who on the previous Wednesday had dismissed the medical attendant under whose care she had been for two months.

Upon examination I found that the heart was extensively diseased. Auscultation disclosed aortic *regurgitant* and *obstructive*, and mitral *regurgitant* murmurs. There was also severe paroxysmal dyspnea.

The liver was slightly enlarged and tender on pressure.

Both legs were much swollen and edematous, and there was *ascitic fluid* in the abdomen.

Diarrhea "fifteen or sixteen" times a day, serous, but highly offensive.

Urine, s.g. 1025; scanty, lithatic.

Temperature 99.5.

Gave one dose of *Acon.-N.* 1x, and prescribed *Merc.-Sol.* 3 alt., *Bry.-A.* 1x, every two hours; also *Strophanth.* 1x three times a day, for the heart. Enjoined strict abstinence from alcohol.

Sept. 4. Temperature normal. Diarrhea seven times. Patient had not taken any alcohol, neither did she during my attendance.

Sept. 5. Diarrhea four times.

Sept. 6. Diarrhea three times. Urine more copious.

Sept. 7. Diarrhea twice. Patient much concerned about her legs "getting thin," but was reassured when the cause was explained.

Sept. 8. Diarrhea twice. Patient went out in a bath-chair for three hours.

Sept. 9. Diarrhea twice. Patient out in chair for six hours. As the dyspnea was trying, I prescribed *Moschus* 1x with benefit.

Sept. 14. Bade farewell. The patient embarked, on the following day, on one of the Transatlantic liners from Liverpool to New York, and reached home in safety.

Sweyn Road, Margate.

AMMONIC-NAPHTHALINE NITRATE.

By AGRICOLA.

AN artisan, 40, of a mental capacity superior to his class, came to me in September last year complaining of an intense pain of many years' existence in the epigastric region, extending through to the back, and for which he had received medical treatment from a number of doctors, the last of whom frightened the poor fellow almost out of his senses by telling him that the pain was probably due to a tumour in course of formation or growth—this led to the patient having recourse to my aid; while a previous M.D. had pronounced that his lungs were badly affected—for which dictum I, by the bye, could see (for I am now deaf to sound) no one single symptom warranting any such opinion.

Those medicines whose sphere relates chiefly to the disordered stomach-process of digestion improved his general condition, while he was positively loud in his praise of *Nux-vom.* in his troubles of constipation and of hernia, but the old pain still continued almost unaffected.

One day my eye happened to rest upon a phial 3x of the explosive called *Ammonite** (see HOMEOPATHIC WORLD, former numbers), from the occasional use of which 3x to 6x trit. during many previous weeks, I myself, to whom dyspepsia had from birth been even more my *bête noir* than as described by a fellow sufferer, the late Professor Huxley, had personally derived quite marvellous benefit.

Shaking out some 10 grains of the powder into a paper, I told the patient in an off-hand manner (for I was tired) to dissolve one-half of the powder in a teacup of water and to take a teaspoonful dose some four or five times daily. A few doses removed the pain, never again, I hope, to return.

* This explosive, manufactured, I believe, by "The Miner's Patent Safety Explosive Company," Newport, Monmouthshire, is one of the many "ventures" of the late Sir George Elliot, whose commercial career began as a North-of-England pit-boy, earning 2s. 6d. a week of very long hours, and ending as a millionaire and M.P.

The enthusiasm which the cure created in this poor fellow led to his bringing his friend, the lead-poisoned patient; and such means and such cures, I venture to say, are those best calculated to advance and to spread a knowledge of the Grand Art of Homeopathy.

MATERIA MEDICA—MISCELLANY.

ÆTHIOPS ANTIMONIALIS—MERCURIUS PRECIPITATUS ALBUS—MERC.-CORR.—CINNABAR—CENANTHE CROCATATA—SAW PALMETTO ERYNGIUM AQ.—TARTAR EMETIC—FERRUM PHOS.

Collected and Arranged by J. R. P. LAMBERT, M.D.

Æthiops Antimonialis.—This drug, which is a chemical compound of *Antimony*, *Mercury*, and *Sulphur*, is highly recommended in various scrofulous conditions, and especially in scrofulous ophthalmia. A case is reported of otorrhea of three years' duration in a boy of ten, the disease being a sequel of scarlet fever. There was a fetid discharge from both ears. *Æthiops Antimon.* 3x grij q.d.s. was ordered, and syringing with borax and water. In six weeks he was nearly well, and syringing was discontinued; six weeks later he was quite well, and had gained twelve pounds in weight.

Another case is reported of an eczematous eruption of herpetic character in a scrofulous patient. The eruption, which had existed for five months and followed a fright, affected a large part of the face, specially the lower lip, nostrils, and root of the nose. It began as small spots, which became pustular, and finally formed thick fissured scabs, and was accompanied by very copious discharge and pain, which was described as itching, sometimes tensive, and often indescribable, coming and going suddenly, and < by scratching. *Æthiops Antimon.* 2x trit. was given, and in five days the discharge and pain completely ceased, and the patient appeared to be on the high road to recovery.

The remedy is also highly recommended for eczema of the face with ichorous discharge in scrofulous children.—*Hom. Recorder* and *Hom. News*.

Mercurius precipitatus albus in Skin Affections.—Dr. Mossa, of Bromberg, has reported a case of chronic facial eczema of several years duration in which the skin was red and swollen with the formation of blisters which dried up into exfoliating scabs. The eyelids and lachrymal caruncles were swollen, and there was profuse lachrymation. Several remedies such as *Sulph.* and *Sarsap.* failed, but *Merc. precip. alb.* 3 gr.i every third day effected a complete and permanent cure.

The same writer reports a case of a vesiculo-squamous eruption of the palm and inner sides of fingers, with much itching, cured by the same remedy and dose in four weeks. No history of syphilis could be obtained in either case. He also reports a case of eczema of the face and head in a child of two years, with thick yellow crusts exuding offensive matter, and swelling of the cervical glands, in which an equally satisfactory result was obtained in the same way.—*Hom. Recorder.*

Mercurius Corr. in Small-pox.—This remedy has been used with gratifying success in cases where the localisation of pustules on the mucous membrane of the mouth occasioned dangerous symptoms.

It was also found useful in several cases of angina faucium, occurring during a small-pox epidemic in which a thick yellow watery welt appeared at the entrance to the fauces, and there was present stabbing pain hindering deglutition.

Cinnabar.—This remedy cured a case of greenish mucous diarrhea in a child of six months, with a suspicion of hereditary syphilis after *Merc.-sol.* had failed. The 3rd cent. trituration was used.—*Hom. Recorder.*

Enanthe Crocata in Epilepsy.—Two cases of epilepsy, one of ten years' and the other of six years' duration, are reported as cured by this remedy, after the preliminary use of such remedies as *Sulphur*, *Thuja*, and *Psorinum*. The author recommends the use of such remedies for nine months before giving *Enanthe*. In a third case reported he did not follow this rule, but began the treatment with *Enanthe C. φ.* mx t.d.s, which was followed in a week by marked permanent aggravation and imbecility, till the patient died of pneumonia four months later. He never saw permanent benefit in any case where the preliminary treatment with remedies of the antipsoric class was not carried out.—*Hom. News.*

Saw Palmetto for Paresis of the Vesical Sphincter.—A case is reported by Dr. Kershaw of a young lady, aged 23, complaining of inability to control the urine. Any undue exertion, laughing, &c., caused the urine to dribble. She also had to rise several times at night to prevent enuresis. She could only control the urine by the exercise of great will-power, and she had suffered thus from childhood, and been under the best allopathic treatment. *Saw Palmetto* in drop doses four times a day cured in two months. The writer says: "I have used various remedies in enuresis and allied difficulties, but few have given such general satisfaction as *Saw Palmetto*."

Eryngium Aquaticum in renal colic.—Dr. Leonard, in the *Medical Century*, reports a severe case of recurrent renal colic, in which twelve attacks had occurred at intervals of from two to four weeks, lasting from one to three days each time. *Eryngium Aq.*, five drops three times a day was given, and the patient had no more attacks from that day forth.

If it will always do this it will be a very welcome remedy.

Tartar Emetic in functional dropsy and pregnancy.—This drug in material doses (1x m v) is highly recommended in this affection, even in the most serious and apparently hopeless cases by Dr. A. P. Davis. He mentions two cases, in one of which the effect was marvellous, for the patient's life was one day despaired of, and the next day she was up and engaged in her household duties.

Apropos of this affection Dr. Curtis regards Merc. Corr., high, as almost a specific in albuminuria in pregnancy.—*Medical Century* and *H. J. of Obstetrics*.

Ferrum Phosphoricum in febrile conditions.—Dr. Moser, in comparing this drug with our old friend *Aconite*, claims that *Ferrum Phos.* has, according to Schüssler, a much wider field of usefulness. It is indicated in the first stage of all cerebral fevers. In rheumatic fevers it is worthy of great confidence, being characteristically indicated in these cases by a neutral or alkaline reaction of the urine. It is more useful than *Aconite* during the period of development, especially in women. It is particularly adapted to the fever accompanying tuberculosis, where *Aconite* is not indicated at all.

As distinguishing marks he gives the absence of the sensation of agony characteristic of *Aconite*, and the pre-

sence of a harder pulse than *Aconite* has, and he regards a tendency to hemorrhage as characteristic.

INSTITUTION.

CHELTHENHAM HOMEOPATHIC DISPENSARY.

WE have received the thirty-ninth Annual Report of the above-named Institution, which is situated at 5, The Promenade, Cheltenham. The following are the medical officers:—*Consulting Physician*, C. B. Ker, Esq., M.D.; *Physician*, F. G. Stanley Wilde, Esq., L.R.C.P., L.R.C.S., Edin.; *Secretary and Chemist*, Mr. Joseph James, M.P.S.

The medical report is as follows :

“ During the past year (ending April, 1895), 297 new patients have applied for relief at the Dispensary, whilst 391 visits have been paid to patients at their homes.

“ The total number of attendances amounts to 1,810.

“ The Institution now enters upon its fortieth year, a sufficient proof of its usefulness, of its appreciation by the poor, and of its worthiness of recognition and support.”

REVIEWS.

THE DISEASES OF THE LIVER.*

WE have already favourably reviewed the first edition of this book in our pages. It now appears considerably enlarged, the additions consisting of a section on the author's views on organo-therapy, which forms a kind of introduction, and also a section in which he introduces three new liver medicines, with good testimony in their favour, rendering this addition decidedly valuable. The author tells us in his preface that the book is not an *omnium gatherum* of hepatic odds and ends. At the same time, it is nothing after the style of a systematic treatise ; but this is one of its charms, for it is eminently interesting, and every reader will find numbers of very valuable practical hints and suggestions.

* *The Diseases of the Liver*. By J. C. Burnett, M.D. Second edition, revised and enlarged. 236 pp. Price 5s. Philadelphia : Boericke and Tafel. London : The Homeopathic Publishing Company, 12, Warwick Lane, E.C.

A PATHOGENETIC MATERIA MEDICA.*

AMONG our many books on the materia medica this one holds quite a unique place, being compiled on a new system altogether, which the authors designate "a method of *analysis* and *synthesis*." It is based, with very few exceptions, on the provings in the Cyclopædia of Drug Pathogenesis, which have been critically analysed and all doubtful material rejected, and also all symptoms which occur only in one proving, and, as a rule, also all generalisations, though some of these sections are used as footnotes. Unfortunately all Hahnemann's provings are thus rejected.

The synthetic method consists in summing up all symptoms which have practically the same meaning under a single expression which covers the whole, and to each symptom a figure is attached which indicates the number of provings in which that symptom is recorded. Forty-seven drugs are thus treated, mostly medicines in common use; each account containing remarks on the provings, followed by a section on the general sphere of action, then the schema, and lastly the therapeutic applications—a section which contains in many instances valuable suggestions.

The book will prove useful in studying individual drugs, and the reader has always the satisfaction of knowing the exact pathogenetic value of each symptom according to the method adopted, but as a book of reference it is quite unreliable, for the exclusion of single symptoms may mean the absence of some which are characteristic of the drug; moreover, valuable matter is omitted in the generalisations. Thus, under *Carbolic Acid* we find no mention of actual nephritis, though in the cyclopædia there are recorded in a generalisation three well-marked cases attributed to the action of *Carbolic Acid*.

The book is published to match the cyclopædia, and will doubtless be welcomed by those who desire a complete revision of the materia medica. For our own part we are very doubtful as to the necessity for this, for somehow those pioneers of homeopathy whose names are familiar to us all, obtained excellent results by means of it, such as are seldom equalled nowadays; so perhaps, after all, our ignorance of the materia medica is more often the cause of our failures than is the unreliability of a few symptoms in our materia medica.

* *A Pathogenetic Materia Medica*. Based upon Drs. Hughes' and Dake's Cyclopædia of Drug Pathogenesis. By the Medical Investigation Club of Baltimore, MD. Philadelphia: Boericke and Tafel, 1895. London: Homeopathic Publishing Company, 12, Warwick Lane, E.C. 388 pages. Cloth, 10s. net.

EXTRACTS.

ULCER OF THE CORNEA CURED BY *CHININUM*
MURIATICUM.*

By ALTON G. WARNER, M.D., Brooklyn.

Mrs. A., aged 35, called upon me a few weeks ago suffering as she said, from "pink eye." The right eye had been inflamed and painful for a month, and for a week past the pain had been very distressing. She had been treated by an old-school physician who discovered the ulceration, but told her that he would cure the "pink eye" first and then attend to the ulcer. As she only grew worse, she concluded that something else must be done and came to me.

Upon examination of the eye I found intense conjunctival injection, and at the inner and lower quadrant of the cornea a sloughing ulcer about two lines in diameter surrounded by a zone of haziness. The iris was sluggish and the ciliary region sensitive to touch.

Upon questioning the patient I learned that the pain and photophobia was much greater every second day. On the alternate day she was fairly comfortable. Her general condition was not good, as she had been overtaxed in long care of a sick relative. Upon the symptom of marked periodicity, I prescribed *Chin.-mur.* 1 cent. trit. every two hours, and told her to report in two days. At the end of that time she was very much improved. Had suffered *no* pain. The congestion was much less, and the ulcer cleaner. The remedy was continued every three hours. At the next visit the congestion had nearly disappeared and the ulcer filled in, and in a week from first seeing the eye it was well except for a slight macula at the seat of the ulcer.

This case is reported only to show the homeopathicity of the remedy.

* Read before the New York State Homeopathic Medical Society, Oct. 5, 1892.

A NEW TEST FOR BILE PIGMENT IN URINE.—H. Roe proposes the following: a portion of urine is poured into a test-tube which is held inclined. Two to three cubic centimetres of a solution of ten parts of tincture iodi and ninety parts of alcohol are poured in so as to be on the surface but not mix with the urine. If bile be present a grass-green ring forms at the junction almost immediately; if no bile is present the ring is colourless or of a light yellow colour. This is said to be the most delicate and reliable test for the bile pigment which has yet been proposed.—*Am. Med. Surg. Jour.*

GENERAL CORRESPONDENCE.

To the Editor of THE HOMEOPATHIC WORLD.

FACILITIES FOR THE BUISSON TREATMENT OF HYDROPHOBIA.

SIR,—In view of the fearful death of the boy Benjamin Howard from hydrophobia in its worst form, after a twenty-one days' course of Pasteurian treatment, it may be as well to draw attention to the fact that Dr. Buisson's safe and simple treatment of the fell disease, by vapour bath, can be procured at nearly every hydropathic establishment in England. For certain it can be had in London, Richmond, Chester, Manchester, Southport, Hastings, Bristol, Bath, Matlock, Bournemouth, Worcester, Birmingham, and Harrogate, and I will with pleasure give full addresses of the bath establishments in these places to any one who may apply to me at the address given. I should add that through the kindness of a philanthropist needy patients will be treated in these establishments free of charge.

Believe me to be, courteously yours,

FRED. E. PIRKIS.

The High Elms, Nutfield, Surrey, Sept. 8, 1895.

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, Wednesdays, 2.30; Diseases of the Throat, Mondays, 2.30; Operations, Tuesdays, 2.

MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

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| <p>A Pathogenetic Materia Medica Based upon Drs. Hughes' and Dale's Cyclopedia of Drug Pathogenesy. By the Medical Investigation Club of Baltimore. 8vo, pp. 847. Cloth. (Homeopathic Publishing Co. Net. 10s.)</p> <p>Beck (—). A Manual of the Modern Theory and Technique of Surgical Asepsis. With 65 Illusts. and 12 Plates. (Saunders' New Aid Series.) Cr. 8vo, pp. 308. (Kimpton. Net. 7s. 6d.)</p> <p>Butcher (A. H.). Materia Medica Tables</p> | <p>Designed for the Use of Students. Cr. 8vo, sd. (Livingstone, Edin.; Simpkin. Net. 1s. 6d.)</p> <p>Donaldson (Henry Herbert). The Growth of the Brain; A Study of the Nervous System in Relation to Education. (Contemporary Science Series.) Illus. Cr. 8vo, pp. 874. (W. Scott. 8s. 6d.)</p> <p>Giffen (Grace Haxton). The Student's Practical Materia Medica. Cr. 8vo, pp. 86. (E. & S. Livingstone, Edin; Simpkin. 2s.)</p> |
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Stirling (W.). *Outlines of Practical Physiology; Being a Manual for the Physiological Laboratory.* Including Chemical and Experimental Physiology with Reference to Practical Medium. 3rd. edition, Revised and Enlarged. With 289 Illusts. Cr. 8vo, pp. 418. (Griffin & Co. 12s. 6d.)
 Yinging (W. A.). *The Accoucheur's Emergency Manual.* Fcap. 8vo, pp. 323. Flexible leather, gilt edge. (Homeopathic Publishing Co. Net. 6s. 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 the "MANAGER" of the Homeopathic Publishing Company, 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. Mahony, Liverpool; Dr. Murray Moore, Liverpool; Messrs. Boericke and Tafel, Philadelphia; Dr. Clifton, Northampton; Mr. Bellairs, Reading; Mr. G. A. Cross, London; Dr. Dudgeon, London; Dr. Ridpath, Sunderland; Capt. Pirkis, Nutfield; Dr. Burns, Margate; Mr. Crespi, Darlington; Dr. Williamson, London.

BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Animals' Friend.—Chemist and Druggist.—Homeopathic Review.—Family Doctor.—Hom. Envoy.—N. A. J. of Homeopathy.—Southern Journal of Hom.—New Eng. Medical Gazette.—Australasian Homeopathic Med. Review.—Hom. Jour.

of Obstetrics.—La Homeopatia.—Calcutta Journal of Medicine.—Allg. Hom. Zeit.—Med. Visitor.—Minneapolis Hom. Magazine.—Clinique.—Jour. of Orif. Surgery.—American Homeopathist.—Medical Century.—Healthy Life.—N. Y. Med. Times.—Archiv. f. Hom.—Maanedskrift f. H.—Hom. Monatsblätter.—L'Art Médical.—Argus.—Vaccination Inquirer.—Hahnemannian Mon.—Diseases of Children, Dr. C. E. Fisher.—Diseases of the Liver. 2nd ed., Dr. Burnett.—Eyesight and School Life, Dr. Snell.—De la Tubaculine, Dr. Mersch.

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THE
HOMEOPATHIC WORLD.

NOVEMBER 1, 1895.

SIR EDWIN ARNOLD AND OTHERS ON THE
MEDICAL PROFESSION.

Mrs. GAMP (*L****t*): "There's no denijin' of it, Betsy, it wos a most bewtiful address. That dear, good Sir Edwin, 'e do understand our wirtues, that 'e do. But wot I liked best of all wos wot 'e said about wiwisectors. Betsy! only let me ketch one o' them wiwisectors a 'urtin' a pore little ginnea-pig an' I'll drum 'im out o' the perfeshun, that I will. But, bless yer, they never does!"

Mrs. BETSY PRIG (*B*****h M*****l J*****t*): "My wery own sentiments, Sairey, my dear; which *I* calls 'is address a *serming*. Wen you thinks, Sairey, of the ign'ent, vulgar worses that there Tennyson and that Brownin' 'as wrote about our wiwisectors (enough to make yer flesh creep!)—which you knows they never 'urts a fly, leastways not in England—'ow 'eavingly it wos to listen to the perlite an' poitical words of that dear, good man, Sir Edwing Arnold."

THE 1st of October is the New Year's Day of the medical schools, and affords an interesting occasion for the outlet of medical oratory—an occasion which may be, and sometimes is, turned to the very best advantage. For those who come to their medical studies for the first time to be brought in contact with a master mind may mean for them a powerful impetus in the right direction which is felt throughout the whole of their subsequent careers. But the medical orators, as a rule, seem to have forgotten this aspect of the case, and to have chosen the opening orations as an opportunity for airing their own particular hobbies. Others, who have attempted to play the part of "guide, philosopher, and friend" to the new-comers, have not always succeeded in being very inspiring. Take, for instance, Mr. GEORGE D. POLLOCK's remarks to the students

at St. George's Hospital: "Gentlemen," said he, "your work must be stimulated by honest purposes and rightly directed ambition—ambition for success and a good name, ambition to succeed, if not to excel, in whatever department of your profession your future may be cast." He next went on to advise his hearers to let their ambition be tempered with common sense. Some caution, we find, was not unnecessary, for he proceeded to inform these aspirants for medical fame that they need never expect to achieve such a thing as a "cure":

"LORD BYRON, in his reported conversations with the Countess of BLESSINGTON, remarked to her that 'medical men do not sufficiently attend to idiosyncrasies on which so much depends; and often hurry to the grave one patient by a treatment that has succeeded in another. The moment they ascertain a disease to be the same as one they have known they conclude the same remedies that cured the first must remove those of the second, not making allowance for the peculiarities of temperament, habits, and disposition, which last has a great influence in maladies.' These remarks are simple exaggerations of feeling and fact. BYRON was not one enamoured of the medical profession more than he was of professors of divinity, but he was an acute observer, and it was interesting to me to read his views respecting idiosyncrasies. He judged rightly, very rightly, of their importance in connection with the practice of medicine. Observe, gentlemen, that he makes use of the word 'cure' to denote 'treatment'—a word too frequently used without reflection by the world generally, and quite inapplicable to the circumstances of our successful attendance on the sick. The empiric proclaims that the administration of certain drugs, or a combination of them, is essentially a 'cure' of such and such a complaint: but the rightly thinking and experienced medical man will tell you to bear in mind that 'cure' is not a term to be used by the educated practitioner. What can or do we 'cure' in disorders or disease? Nothing, I fear. We treat, and watch with care, 'all the ills that flesh is heir to.' By judicious treatment we may sometimes shorten an attack of illness, and probably do so in many cases of sickness; but the mysteries and course of disease are influenced much more by causes over many of which we have absolutely no control. Take, for instance, the eruptive diseases of childhood or mature life. Do we by treatment cut short the progress of scarlet fever or typhoid fever, or other disorders which need not be enumerated? The late Dr. WILSON, physician to this hospital, a great scholar and a man of great observation and reflection, was ever strongly opposed to the use of the word. It was he who first impressed me

with the importance of discarding it as incorrect in all our views with respect to the action of medicines. Patients, he would observe, may recover. 'Recover' under treatment, but we do not 'cure' them. 'Some credit must be given to Nature for her assistance in the recovery.' 'Cure' is the motto of the empiric."

It is all very nice and interesting, no doubt, from the doctor's point of view, to "treat" and "watch," but the patient wants to be "cured." Nothing will eradicate from the human mind the belief that cures are possible; and those who have learned the art of curing are not likely to be deterred therefrom by men who openly boast of their inability to cure screaming out after them—"Empiric!"

It is a good thing Sir EDWIN ARNOLD did not see this address before he delivered his own at the opening of the session at St. Thomas's Hospital. Evidently he believes in "cures," for he quotes Sir WM. BROADBENT as saying this, "an attack of small-pox has often cured phthisis." He takes a cheerful view of serums and antivenines; he speaks enthusiastically of a "therapeutic science," and he concluded by saluting the "gentlemen of St. Thomas's medical school as the young reserves of that army whose victories are the triumphs of all mankind, and whose enemies are all men's enemies." With this hopeful note running through it Sir EDWIN's address was a much more inspiriting affair than that of Mr. POLLOCK; and independently of this it was by far the most interesting of all this year's addresses. Sir EDWIN took the official view of most of the subjects he touched upon as was quite natural; but on one question he ventured to give a piece of polite criticism—the burning question of vivisection. The passage is a very fine one (except for the outrageous medical utterances it cites), and we will quote it entire:—

"I shall also take courage, since your kind attentiveness proves you convinced of the sincerity of my interest in your profession, to touch upon yet another topic, bristling, I know, with dangers for outside observers. I have read, in one of the able disquisitions already quoted, a paragraph dwelling upon HARVEY's grand discovery of the circulation of the blood, where, after mentioning that that splendid revelation was the result of experiments performed upon living animals, the talented

writer—a great living practitioner—goes on to say: ‘The whole fabric of modern medicine, the whole difference between the prospects of a sick man to-day and his prospects 200 years ago, rests absolutely upon vivisection.’ I shall not venture, in presence of knowledge and experience so much vaster and riper than mine can be upon such a matter, to dispute or qualify that assertion; nor shall I as an individual take on myself to deny to conscientious science, as many persons deny whose motives and arguments I most deeply respect, the right claimed to pursue essential experiments at the cost of the pain and death of innocent creatures. If to give my own life under torture would certainly lead to the saving of very many other lives, I should hate and scorn myself if I had not the will so to die; and as between men and beasts I suppose it is true that we are ‘more than many sparrows.’ But my private feeling, founded upon an ever-growing sympathy for the lower animals, an ever-increasing wonder at their gifts and capacities, and an ever-deepening sense of our human responsibility to them, was expressed in a phrase which I know was extravagant, used by me to a famous contemporary surgeon who said: ‘What, Sir EDWIN, may I not vivisect a cat to save the life of a bishop?’ And I replied: ‘Yes, Sir HENRY, on condition that you afterwards give the cat a public funeral in Westminster Abbey as a benefactor to the Church and to humanity.’ Of course that was paradox, but I am persuaded that all of you will understand me, and many will agree with me, when I declare that this solemn right to succour pain by inflicting pain has its best foundation upon an immense reluctance to adopt such a necessity, an anxious economy of anguish in the act; in fine, a feeling not of the heedless experimentalist but of the priest sacrificing victims for propitiation. I say again that I disclaim any pretension to teach mercy to you whose vocation has mercy for its watchword. I will not share with my age the fruit of patient physiological researches and then hastily reproach those who have laboriously acquired them for the general good. But as regards my own sentiments, that which chiefly led me to write ‘The Light of Asia’ was the boundless and beautiful tenderness of the Buddhist religion towards the lower animals, whose lives are so mysteriously related to our own, whose lot is so largely at our disposal, and who are to us much as we human beings are to that invisible Almighty Power at the feet of which we have sometimes little cause to wonder when we ask in vain for pity and clemency. Therefore I will be bold enough to-day to put in this humble plea for the dumb martyrs of vivisection, that they may be as few as possible, as mercifully dealt with as possible, and that it be held by the inner *religio medici* which every true doctor cannot but possess and profess, that the meanest living thing so sentenced to suffer and to perish for mankind derives from its very doom a certain enhanced regard and a

special consideration to which the conscience and honour of him who is a gentleman as well as a doctor will never be insensible.

Few things have given us more amusement of late than to see the way this passage was taken by the two leading orthodox journals of the profession. We have endeavoured to summarise their comments in the heading we have put to this article (with all due apologies to Dickens). We now quote the comments at length :—

“ We cannot forbear one allusion to his plea for consideration for the lower animals in the matter of vivisection. Our own views on this subject have never varied, and they do not differ from his. We should be ready to exclude from the profession the man who wantonly and in the name of medical science inflicted unnecessary cruelty on the meanest animal. While recognising that man is ‘ of more value than many sparrows,’ or even many dogs and many horses, we recognise the solidarity of all living things and the obligation of the greater to the less; and we feel sure that the profession will join with us in thanking Sir EDWIN ARNOLD for his exquisite gentleness in dealing with this great theme, and his generous recognition of the humanity of those who exist to diminish suffering and to prolong life.”—*Lancet*, Oct. 5th.

“ A LAY SERMON.

* * * * *

“ Next, as regards experiments on animals, we agree with him that these should be as few as possible; that every possible precaution should be taken to avoid the inflicting of pain; and that the use of such experiments should be allowed to those alone who are thoroughly qualified to make them. The Act of Parliament which enforces all these limitations, and others in addition to these, should be carefully studied by every person who wishes to know the truth as to experiments on animals in this country. And with the Act he should also study the inspector's annual reports, and observe that a very large proportion of these experiments are simple inoculations, and that in every experiment, where the initial operation is of such a nature as to cause pain, this must be done under an anæsthetic.

“ Any one who will read these reports will see that the sum of pain is indeed small when it is compared with such discoveries as the localisation of the centres of the cortex, the treatment of myxœdema with thyroid extract, or the preparation of the antitoxins. We agree also with Sir EDWIN ARNOLD that any experiment on animals should be made with a grave sense of responsibility, and, as it were, under compulsion; we believe that in England this is the spirit in which they

are made. Students, of course, do not make them. We are glad that Sir EDWIN has spoken on this subject with better judgment than the two great poets of our age, Tennyson and Browning."—*British Medical Journal*, Oct. 12th.

When we consider that the pages of these journals are constantly publishing accounts of vivisections, British and foreign, of the most painful description, not to mention experiments on patients, without a word of reprobation, to see their guileless editors taking the flattering unction to their souls in this style is something too exquisitely funny.

Sir EDWIN, in the course of his address, referred to "Mrs. Gamp" and "Mrs. Betsy Prig" as creatures of the past. We do not know if Sir EDWIN is a believer in the transmigration of souls, but we can assure him that the spirits of these worthies are very much alive still in the offices of certain orthodox medical journals. The self-sufficiency, selfishness, and vulgarity are all there, ready to overbear any luckless medical man who dares to run counter to what they consider professional interests (in other words, incorrupt selfishness) if he have not strength and originality enough to defy them. The crowning sin in their eyes is to be able to cure in unorthodox ways, and not to be ashamed to own it.

HOT WATER IN THE TREATMENT OF HERPES CIRCINATUS.—Dr. J. Noir, a French physician (*Le Progres Medicale*), having a large number of cases of herpes circinatus under his care in idiotic and epileptic patients, had a good opportunity to test the efficiency of various methods of treatment. He found the methods ordinarily employed very unsatisfactory. A patient suffering from the disease was attacked with bronchial pneumonia. He had a temperature of 102° F. for three weeks. One of the attendants contracted the disease in his right hand. On the patient's recovery, it was found that the skin disease had disappeared, but the eruption upon the attendant's hand resisted every measure of treatment which was applied, including frequent applications of tincture of iodine and cauterisation with nitric acid.

The disappearance of the disease in the patient suggested the application of heat as a means of combating it. The attendant's hand was accordingly treated with hot water at 50° C. (122° F.). After a few daily baths, the eruption disappeared. The same method was applied to two other nurses and forty-seven patients with equally good success.—*Mod. Med.*

NEWS AND NOTES.

HOMEOPATHY IN PUBLIC INSTITUTIONS—ALLOPATHY “DYING OUT.”

The *American Homeopathist* of September publishes the following interesting note:—

“Ten years of allopathic management compared with ten years of homeopathic management in the same prison hospital, Joliet, Ill.

ALLOPATHY.

Total average number in prison	13,709
Total deaths from general diseases	126
Percentage of deaths to inmates in prison	·913
Average deaths per year.....	12·6

HOMEOPATHY.

Total average number in prison	14,959
Total deaths from general disease.....	87
Percentage of deaths to inmates in prison	·595
Average deaths per year.....	8·7

Still dying out, eh, Dr. Gould of the *Medical News* !”

No; if death-rates go for anything it is allopathy that is dying out; on the principle of the “Survival of the fittest,” homeopathy is bound to supplant it in the end.

THE INFINITESIMAL IN METALLURGY.

A CORRESPONDENT has sent us the following from an abridged report of a paper read by the Rev. Professor Bonney, D.Sc., F.R.S., at the Norwich Church Congress:—

“Passing on to less treacherous ground, we must admit that recent scientific inquiry has demonstrated the extraordinary effects which may be produced by very slight alterations in the composition of a substance. I refer more especially to the marvellous results which rewarded the investigations of Professor Roberts-Austen and others. For instance, gold is malleable, and so is lead; yet if gold be alloyed with one-thousandth part of its weight of lead, it becomes, though unchanged in appearance, quite brittle. Again, the addition of one part in two thousand of aluminium to molten iron at once makes the latter almost as fluid as water. Another result is yet more surprising: manganese, as is well known, affects the properties of steel. If it be present in a proportion less than 2·75 per cent., the steel is toughened; after that amount the alloy becomes more and more brittle, reaching

a maximum when there is from 4 to 5 per cent. of manganese, but, when the latter varies from 7 to 20 per cent., the alloy again is strengthened and toughened. Other like cases might be quoted. Now these results are inexplicable, sometimes anomalous; the cause, if we may call it so, seems wholly disproportionate to the effect; they are really some of nature's miracles.

We have, then, learnt that small things may produce great effects; but we have also learnt that these small things may readily escape notice. The last two years have provided such lessons. If anything might be supposed to be well known, it was the composition of atmospheric air. Yet Lord Rayleigh and Professor W. Ramsay have shown that all the while there lurked in it a small quantity of a substance, probably new, which they have named argon. We may, then, say that science has emphatically declared, not only the effects which small things can produce, but also the ease with which they may be overlooked even by careful investigators. Are not these things an allegory? Is it not rash to assume that there is no variation in the physical conditions of a so-called miracle, and of an event of daily experience?"

TANACETUM VULGARE.

THE following observation from the *North American Journal of Homeopathy* will be read with interest in connection with Mr. Frederick Kopp's proving of the drug in another part of our present issue:—

"*Tanacetum for Epilepsy.*—A woman took a couple of drachms of *Oil of Tansy* to produce abortion; it failed, but throughout her pregnancy she suffered from convulsions, mixed tonic and clonic, characterised by frothing at the mouth and clenched hands with the thumbs in, and followed by exhaustion and a short coma. Since then I have treated every case of epilepsy in my practice with drop doses of fl. ex. *Tansy* on sugar four times a day with marked relief. Our young woman has had no relapse for a year and a half and has been able to resume work—bookkeeping."—DR. W. H. PIERSON, Brooklyn.

Tansy is one of the drugs which has the repute of curing hydrophobia.—See HOMEOPATHIC WORLD, 1891, p. 136.

THE MOON IN MEDICINE—EFFECT ON STAMMERING.

THE following item taken from the *Westminster Gazette* of recent date adds another independent testimony to the power of the moon over the tides of human affairs:—

"*The Moon and Stammering.*—*Nature* publishes from a correspondent a curious fact which it vouches for, and which is, moreover, in accordance with other observations. The correspondent says:—

'It was quite accidentally observed by a stammering friend of mine, during the months of May and June last, that on moonlight nights he stammered more than on dark nights, and when he slept exposed to the rays of the moon during the month of June he found that he stammered the most on days succeeding full moons, while a day just after the new moon, and a day before, he had not a single attack of the fit. Our scientific contemporary does not attempt any explanation.'

PASTEUR.

THE death of Pasteur removes from the scene one of the great notabilities of the century. An indefatigable worker and devoted scientist, he won for himself a very high place among chemical and microbiological investigators. His conclusions would have had more chance of enduring if he had been less inclined to jump to conclusions. As it is, we doubt if they will stand the test of time. In the fierce contest around the question of "spontaneous generation" he, with Tyndall, took the negative and Lionel Beale the positive side, and the victory was supposed to lie with Pasteur and Tyndall. But now Beale is again raising his voice, and it is not at all improbable that the battle will have to be fought all over again. Of late years Pasteur's sensational experiments in hydrophobia and other diseases, in which he has practised a very cruel and barbarous kind of homeopathy, have brought him before the general public as nothing else could have done. Here the looseness of his reasoning and his proclivity for jumping to conclusions have been most clearly exemplified, while his manipulation of statistics is beneath contempt. But he is "the vogue," so what does it matter? When he "oped his mouth," no dog might bark without incurring *odium scientificum*. The immorality of his methods cannot be better described than in his own words. When reproached with cruelty he replied: "I am naturally very kind to animals, but where science is concerned I know no scruples."

"TEACHING PRESCRIBERS TO PRESCRIBE."

Our contemporary *The Chemist and Druggist*, October 19th, has made an amusing discovery. *The Practitioner*, now edited by Dr. Malcolm Morris, lately gave a series of

prescriptions for liver complaint introduced with editorial notes, and presented as if published for the first time. Five of them *The Chemist and Druggist* recognised as its own private property, exactly identical ones having been published in its "Counter Practice" series on March 16th, 1895. *The Practitioner*, as is usual in such cases, omitted to supply the reference, but this omission *The Chemist and Druggist* repairs and adds the following pertinent remarks:—

"Presuming, however, as we do in the absence of further information that the formulæ were original with our contributors, it is interesting and highly satisfactory to find that these 'Counter-practice' prescriptions, devised by mere chemists and druggists, have been found good enough to serve as models for consulting physicians. It is worth noting in this connection that their publication in our pages was followed by threatenings of pains and penalties upon ourselves and our medical contributor by one medical journal, which suggested that the name of the latter should be ascertained and steps taken to have it removed from the Medical Register. The name still remains there, however, and perhaps the course taken by the other medical editor—namely, that of adopting the wisdom of chemists and druggists for the instruction of medical men—is the wiser one. We presume that the remedies quoted will be much more efficacious coming over the doctor's desk than when they are obtained at the chemist's counter."

THE HOMEOPATHIC DIRECTORY, 1896.

THE circular for the 1896 Directory will soon be in the hands of our medical readers. We trust it will be promptly filled up and returned to the publishers. The 1895 issue has proved itself most useful and welcome in many different directions. A London practitioner sends us an instance of the effect of the self-effacement of our Liverpool colleagues. An American gentleman landed in Liverpool recently in indifferent health, and wanted a homeopathic practitioner. He made inquiries, and could not find one, and at last, on the assurance of an allopathic chemist that there was not a homeopathic doctor in Liverpool, he came on to London, where he promptly obtained the assistance he needed. On the other side of the question, a practitioner who was regularly bothered every year, by patients staying out of town sending letters and telegrams inquiring the name of the nearest homeopathic doctor, is now left in peace—the patients are in possession of the *Directory* and are thus independent. Any practitioner who may not receive a circular should send a card to the publishers, The

Homeopathic Publishing Co., 12, Warwick Lane, E.C., and he will promptly receive one.

WE learn from a Liverpool paper that Dr. Chas. W. Hayward, of that city, has obtained the diploma in Public Health of the University of Cambridge.

ORIGINAL COMMUNICATIONS.

IDIOSYNCRASIES.

In an article contributed to the *Berlin Homeopathic Journal* Dr. Bojanus gives some cases of idiosyncrasies, chiefly from his own observation.

1. There are persons in whom, when they are searching for anything, be it an object, a word in a dictionary, a passage in a book, &c., urging to make water immediately comes on, even when micturition had been performed shortly before; this urging increases in proportion to the zeal with which the search is made, so that the search has to be abandoned until the bladder is emptied.

2. A stream of water poured slowly into a vessel from a certain height, so that the splashing noise shall be distinctly heard, immediately relieves the retention of urine in hysterical women and children, if it is of nervous origin.

3. My friend, the late Dr. Weisenthal, could not bear to hear any one making a smacking noise when eating. A mixture of anxiety and anger took possession of him, and this feeling was so intense that he could be wakened out of his sleep by any one making this smacking noise.

4. I know a lady who could not bear *Iodine* in any, even in the 30th, dilution. This I often proved in various ways and under various conditions.

5. General Murawieff, Governor-General of Nishni-Novgorod, who has now been dead thirty years, could not bear *Lycopodium* in any, even the 30th, dilution. Immediately after taking it a characteristic toothache set in. There could be no doubt as to this, for the medicine was given him often without his knowledge, or under another name, and yet the toothache invariably occurred.

6. I know several persons who cannot eat any fruit

whatever on account of their repugnance to it. In one young friend the repugnance to apples is so great that the mere smell of them causes nausea; the only fruit he could eat was gherkins, fresh or preserved. Another person I am acquainted with has a loathing at all fruit with the exception of apples. Some have a disgust at onions and garlic, others at beetroot. Many get nettlerash after eating strawberries and crayfish. I know a man of athletic frame who got profuse perspiration on the upper lip on eating salt herring. No other salt fish had this effect.

7. An English lady who has lived in my house for twenty years cannot bear olive oil, not even the best. I have repeatedly given her food cooked with olive oil without her being aware of it, and which she has liked very much; but even when she took the oil in this way she had soon to vomit it.

8. The son of a Russian nobleman, a friend of mine, a young man of 20, could not bear fish—he vomited it immediately. He often ate fish at parties, disguised by cooking, without knowing it; and though he relished it, he had to throw it all up, and then only he knew that he had been eating fish.

9. I remember a gentleman who often used to visit us in my boyhood, a highly accomplished man, who on coming into a room would stop and suddenly exclaim, "There is a cat here!" and he was always right, though the animal was often invisible, and had to be routed out of its hiding-place. I remember playing a trick with this gentleman, for which I got well punished. I put a kitten in my pocket and came near him. He was so much affected that he nearly fainted.

10. Many persons cannot do any manual work, write, &c., if any one near them is looking on. This is more frequently the case with men than with women. Others cannot urinate if any one is standing near, or if they think any one is looking.

11. There are persons who cannot bear the sight of blood, who even faint at the sight of their own blood flowing from an insignificant cut.

12. There are persons who are very unwilling to bathe, and have, as a rule, a great horror of water; and, persons are filled with anxiety if in a boat, even close to the lake or river bank. They dare not undertake a sea voyage. Others feel very comfortable in the water.

13. My good friend the late W. Duhl, the well-known author and lexicographer, who was a physician and a zealous homeopath, could never turn from right to left without getting giddy, but turning from left to right caused him no inconvenience.

14. In Maryland the negro goes a-courting with his nose. He seeks a wife that will suit him by the smell; if the smell pleases him he makes the woman his wife.

15. I know some women who, after a fright, get an attack of nettlerash which, however, never lasts longer than twenty-four hours.

DENTITION—BORAX.

By E. D. SHIRTLIFF, L.R.C.P. Lond., M.R.C.S. Eng.

A LITTLE girl, aged four months, had symptoms of commencing teething—much dribbling, fretfulness, &c. Child is fair, and fat. Has been brought up on cow's milk. After a few weeks the fretfulness increased, and the poor little thing was not able to sleep for long in the daytime, as it was accustomed to, but would wake up and cry piteously. Then a further symptom was noticed, namely, a seeming desire for its bottle, but when the teat was put into its mouth it would commence to suck, and then burst out crying. In this way it took less milk than usual, and began to lose flesh, and muscles became flabby. The pitiful crying and inability to take its bottle were beginning to distress the parents.

One peculiar symptom had been noticed for some months, and that was that, when carried downstairs, the child would cringe; on stopping on the stairs the cringing would cease, and on going on again it would recommence. This cringing was more noticed if the child was carried downstairs in a sitting posture than in a lying, and did not appear to be so bad if the child was held firmly against the breast of the person carrying it. No other symptoms noticed.

The crying, when it began to suck the teat, made me think the gums were tender, but I tried rubbing my finger firmly on the edges of the gums, and this did not seem to cause any special pain. The roof of the mouth looked normal, and nothing abnormal noticed about the tongue. This I thought peculiar. Perhaps the firm pressure was

more easily borne, or perhaps the projecting edges of the leech-bite apertures in the teat caused slight scratching of the gums; I cannot say. The nurse-girl said that the day I saw the child when she lowered it into its cradle it threw its head back in a start as if frightened.

The dread of downward motion made me think of *Borax*, so I consulted Dr. Henry N. Guernsey's *Homeopathic Treatment of Disordered Dentition*. Under *Borax* he gives this fear of downward motion as a symptom and sensitiveness of the gums; so one pilule of *Borax* 30 was administered, and not repeated. Before the pilule was given the child was crying, and would not go to sleep. After the pilule the child was immediately quiet, slept well all night (pilule was given 6-7 p.m.), and has taken the bottle readily ever since. Not only that; since the pilule the cringing on being carried down stairs is hardly noticeable, while before it was quite painful to see the little thing cringe.

The dose was not repeated, and the next day the child seemed it its usual good health.

Dr. Guernsey says under *Borax*, "Apthous condition of the gums, and so sensitive as to shrink from the least touch, even of the nipple, when hungry, in many cases. I never use *Borax* lower than the 200th potency or dilution; one dose of which will often be sufficient to produce a long and refreshing sleep, after which the child will take the nipple with avidity, and without shrinking, so much will the morbid sensibility be improved, normal dentition will now be accomplished in due time."

He also gives as other symptoms indicating *Borax* in teething. "Very sensitive to the least noise; such as the rumpling of paper, of a silk dress, or the click of a door-latch, &c. While sleeping it will sometimes start, cry out, and hold on to things—its nurse, for instance, or the sides of the cradle or crib—as though it were afraid of falling. Stools watery, yellow, green, or brown."

None of these later symptoms were noticed in the above-related case, nor were the gums noticed to be apthous at all; but the action of the remedy could not have been more perfect or decided, so far as one can judge by the symptoms.

Malvern, October 8th, 1895.

P.S.—October 12th. Child has got quite well, and flesh is now as full and firm as ever. 30th potency, one dose.

I have known several patients who think the tincture more efficacious than pilules. I think the pilules are quite as reliable. I read a case once where some globules ever so many years old cured an apparently dying man.

CASES ILLUSTRATIVE OF THE APPLICATION
OF THE LAW OF SIMILARS—GANGLION—
DIPHTHERIA.

By D. RIDPATH, M.D.

CASE IV. (Feb. 2, 1893), GANGLION. Male, æt, 53, consulted me concerning a ganglionic tumour the size of a thrush's egg on the back of the left wrist. There were rhagades on the skin of the hands, and the nails were yellowish. I could not obtain any subjective symptoms whatever. The tumour had been present for many months.

SELECTION OF REMEDY.

In Lippes' *Repertory* I find under—

Ganglion of back of hand, *Amm.-c.*, *Phosp.-ac.*, *Plb.*, *Sil.*
Rhagades of hands, *Sil.*

Nails yellow, *Sil.*

I therefore gave *Silicea* 1m., one dose. In a month the tumour had disappeared, and up to the present time there has been no return.

CASE V. (Feb. 12, 1893), DIPHTHERIA. Female, æt. 17. The patient, who was engaged in housework, had had slight chills on the 10th, since which time she has suffered from malaise, and has felt out of sorts.

She complained of a sensation of a lump in the throat, which appeared to her as if it were closing up, and as if she would choke. Temperature, 10 a.m., 100°. Throat symptoms aggravated on swallowing. Throat painful to the touch.

On examination both tonsils were observed to be swollen, the right, the larger of the two, being about the size of an average Barcelona nut. The whole of the fauces were covered by a dirty leathery membrane; perspiration sour-smelling.

SELECTION OF REMEDY.

Swelling of tonsils—*Apis*, *Bel.*, *Canth.*, *Hep.*, *Ign.*, *Kali-*

b., *Lac.-can.*, *Lach.*, *Lyc.*, *Merc.*, *Merc.-iod.-rub.*, *Merc.-dal.*, *Nitric-ac.*, *Phyt.*, *Sulph.*

Sensation of plug in throat—*Apis*, *Bel.*, *Hep.*, *Ign.*, *Kali-b.*, *Lac.-can.*, *Lach.*, *Merc.*, *Phyt.*, *Sulph.*

Membrane dirty-looking—*Apis.*, *Lac.-can.*

Throat painful to touch—*Lac.-can.*

Perspiration sour-smelling—*Lac.-can.*

At 11 a.m. I gave one dose of *Lac.-can.* 3m.; to be followed by *Sacch.-lact.* gr. ii. every three hours.

13th. Feels very much better generally, and the throat is very much less painful. The exudation membrane is very much less, and the swelling of the tonsils is much reduced.

14th. The tonsils are quite free from membrane, and the swelling of the tonsils has nearly gone.

16th. So very much improved that she feels quite well and is following her usual household avocations.

CASE VI. (May 1, 1894), DIPHTHERIA. Schoolboy, æt. 12. This patient had been feeling ill, and away from school for some days. At the time of my visit he was in bed; the temperature was 100·5; the throat was painful, and there was a thin bluish exudation on the arch of the palate and on both tonsils.

SELECTION OF REMEDY.

Diphtheritic membrane bluish—*Carb.-ac.*, *Lach.*, *Merc.-cy.*, *Merc.-iod.-rub.*

Diphtheritic membrane thin—*Merc.-cy.*

Diphtheritic membrane on arch of palate—*Merc.-cy.*

I immediately (noon) gave him *Merc.-cy.* 7, two drops to be taken every hour.

At eight p.m. I found the patient much improved, the diphtheritic membrane being much less.

2nd. This morning the temperature was normal: the throat was entirely free from membrane, of which there was none to be seen. The denuded surface was rather red, swollen, and raw looking. I gave *Apis* 6, two drops every four hours, and on the 9th he was out of the house and going about quite well.

Comments.—(1) In Case IV. we have to deal with a condition which, according to the old-school teaching, requires surgical treatment for its cure. Mr. Holmes, in his *Principles and Practice of Surgery*, says, "The treatment

[of ganglion] consists in freely dividing the ganglion subcutaneously, squeezing out the contents and applying pressure. This method succeeds in the great majority of cases, but in some the tumour refills, even after it has been subcutaneously divided with all possible care, many times. Such cases may usually be cured by a seton of two or three threads run through the sac, and kept in till suppuration is set up, when it can be withdrawn. If this also fails, the chance is between laying the ganglion open and dressing in the cavity till it fills up; or dissecting it out."

In the preceding extract we have a recital of various interesting operations, or tortures, with the possibility of failure, or at least deformity, after all.

How much better is the method of cure discovered and elucidated by Hahnemann and followed in the treatment of Case IV. In spite of the great paucity of the symptoms obtainable in this case, I was enabled to select the suitable remedy from objective symptoms alone.

(2) Cases V. and VI. are of especial interest at the present time, when the old-school members are groping about in the dark, turning their heads in any and every direction but that where light is to be derived. The latest craze is the much-vaunted *Antitoxin* treatment of diphtheria. They will grasp at any vague shadow rather than avail themselves of the one certain law of cure.

I now give you two brief extracts from two allopathic medical journals:

"*Antitoxin in toxic Diphtheria.*—Save in a few exceptional instances, says M. Variot, of the hospital Trousseau, where death takes place with lightning-like rapidity, the powerful action of the serum, in the way of opposing membranous exudation, suffices to relieve the throat. The glandular swelling and the infiltration of the neck are reduced, the general condition is ameliorated for the time being, and the child takes food and retains its vivacity. But this is a deceptive remission; at the end of two or three days the face becomes pale, general prostration supervenes, and the pulse intermits and then is altogether imperceptible. The pulselessness often persists for two or three days, although the heart, of course, keeps on beating to the last. The limbs are cold but not cyanotic. M. Variot says that certain features of the child's condition remind one of the algid phase of Asiatic cholera."—*New York Medical Journal.*

Another periodical says, "It was first alleged that if the serum was employed sufficiently early, say the second day, the disease would be checked and the child saved. Koerte tells us that he killed all his cases by his early treatment."
—*Medical Press.*

In the preceding two extracts we have very strong statements.

In THE HOMEOPATHIC WORLD for August last Mr. Ernest Bell summarises a most valuable and carefully compiled paper contributed by Dr. Lennox Browne to the May number of the *Journal of Laryngology*, in which he gives the results of his observations on one hundred cases treated at one of the hospitals of the Asylums Board.

In concluding his paper Dr. Browne says, "When drawing attention at a meeting of the Clinical Society last December, to what cannot but be considered as increase under the use of serum of the most grave complications of diphtheria, viz., anuria, nephritis and cardiac failure, I took occasion to express a hope that further experience might prove that the disadvantages of serum would be more than outweighed by its benefits. I deeply regret to be obliged to record facts which, if confirmed—and they are easily capable of being checked by parallel observations of others who may elect to make use of the opportunities which I have embraced—cannot fail to carry a contrary conviction."

After this we have Sir J. Russel Reynolds, in his Presidential Address before the British Medical Association (July 30, 1895), speaking of the "magnificent prospect before us of a new field of therapeutics in the serum treatment of disease."

It is truly astonishing to stand by and witness the gropings and blunderings of educated and well-meaning gentlemen in their search for cures, when they have for their adoption the one infallible law of *similia similibus curantur*, which would enable them to cure where at present they cannot prevent death.

In our materia medica we have a large number of remedies which, when intelligently selected, enable us to cure this (and other diseases), and make diphtheria a comparatively innocent disease.* Every case of diphtheria which

* The same remark applies to infantile diarrhoea, which of late has been so fatal in the hands of the regulars, but which, treated by homeopathy, is easily cured.

I have treated since I adopted the Hahnemannian law has been cured *tuto cito et jucunde*. There has been none of the barbarous tearing away of membrane, swabbing the fauces with iron solution or caustics, no spraying, no necessity for tracheotomy.

Meanwhile the teaching corporations look on, but do not adopt the curative plan, while to their admiring alumni they barefacedly proclaim homeopathy to be a fraud or a delusion. So of course such a pronouncement, coming from such shining lights, settles the matter with the busy youths who, parrot-like, repeat what they have heard without putting to the proof a *method* of cure which has been adopted by thinking men who, by years of thoughtful experience, have proved the worse than uselessness of the old way.

(3) In the two cases of diphtheria narrated above, two entirely different remedies were used, and in the next dozen cases it might be that different remedies would be required for each.

Homeopathy does not treat a disease as an entity or by name, but we treat the collection of symptoms existing in each individual. By this means we are enabled to find the *simillimum*.

(4) One more remark may be made concerning the rapid disappearance of the diphtheritic membrane after the administration of the proper remedy. In one case I observed the membrane disappear entirely in one hour (while I waited) after the dose of medicine.

8, Grange Crescent, Sunderland.

REMARKS ON THE "MATERIA MEDICA."

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

LEDUM (concluded)—*MAGNES ARTIFICIALIS*.

LEDUM (concluded). *Back and extremities*: a sort of varicella on the chest and upper arms, peeling off in five days; small red, constantly itching, pimples on the back; bruised pain below the left scapula; spasmodic cramp-like pain under the short ribs and directly over the hips, towards evening, so violent that his breathing was arrested, and he was not able to rise from the chair without assistance (a. 18 d.); *pains in the loins after sitting*; tearing

from the small of the back to the occiput, the left hemisphere of the brain and the left jaw, especially in the evening, the cheeks being hot and bloated, and the eyes red and inflamed; *painful stitching in the shoulder when lifting the arm*; sweaty palms of the hands in daytime; sweat of the knees in the morning; pain, apparently in periosteum of femur, when walking, sitting, or feeling the parts, as if bruised, sore, or as if the flesh were detached from the bones; *swelling and tensive and pricking pain in the knee, when walking*; when sitting he has a cold sensation in the legs, although they do not feel cold to others; *obstinate swelling of the foot*; *pain of the bottom of the feet when walking, as if ecchymosed, the ball of the big toe feels soft, thick, and painful when treading*; drawing pain in the small of the back when standing, going off when pressing upon it; *pressure in the left shoulder joint, more violent during motion*; *tearing, with pressure*; also in both shoulder joints; *pressure*; pressure between the metacarpal bone of the right thumb, and the carpal bones, more violent during motion (a. 7 d.); *tremor of the hands when seizing something, and when moving the hands*; violent trembling of the hands as if from old age, especially when moving them (a. 5 h.); pain in either hip joint and in the small of the back when rising from the seat; *pressure in the region of the right hip joint, more violent during motion* (a. 4 d.); fine stinging-itching, gnawing of both upper arms, relieved by scratching, but returning soon with greater violence; fine itching-stinging and itching-gnawing in the region of the hip joints, somewhat relieved by scratching, but returning so much more violently; *pressure in the posterior region of the left thigh, sensation as if the muscles had not their proper length, with pain as if sprained in every position, but especially violent when touching the parts and when walking* (a. 12 d.); *tremor of the knees and hands when sitting or walking*; *weakness in the knee-joints, and tearing with pressure, when walking*; *pressure above the left internal malleolus, more violent during motion*; *excessive gnawing-itching of the dorsum of either foot, increasing after scratching, and not abating till the feet had been scratched sore, much more violent in the bed*; *pressure in the region of the internal border of the left foot* (a. 5 d.); *general symptoms*; *heat of the hands and feet in the evening*; *long-continued warm sweat on the hands and feet: the gout reappears*; eruption, small blotches, resembling red millet

seed over the whole body (except the face, neck and hands), with itching in the daytime, and sometimes in the night, not much relieved by scratching; after a walk in the open air a sensation of pressure and tension is felt moving from the side to the shoulder, thence across the chest, accompanied by a grasping sensation in the sternum, he loses hearing and sight, has to lie down, and remains pale for a quarter of an hour, is anxious, and has cold hands and diarrhea; painful hard tubercles and tophi in the region of the joints; *he cannot bear the warmth of the bed on account of heat and burning in the limbs*; the limbs are numb and *go to sleep*; dry extremely itching herpes with anxiety; drawing along all the long bones in the body, during motion; only the pains in the joints became more violent during motion, not the pains in the other parts of the body, *weakness and sleep*, fainting, in the morning he has a great desire to lie down, he feels drowsy, nauseated and anxious (a. 4 d.); she is unable to sleep, and starts constantly, when closing her eyes, she raves, almost in a waking state; shameful dream, and sweat the whole night; dream full of anxiety of conscience, with profuse sweat; *sleeplessness, with restlessness and tossing about*: troublesome uneasiness and faintness when sitting, standing, or walking; after having been seated for some time he feels a pain in the os coccygis; inclination to stretch the upper limbs; sleepless until midnight; deep but restless sleep, at night he lays himself upon the side upon which he does not usually rest, in the morning he is unable to get warm; *restless dreams, he dreams that at times he is at one place, at times at another, at times he is busy with this, at times with that object*; *fever*: general coldness and chilliness; chilliness as if cold water were being poured over this or that part of the body; shaking chills with trembling towards evening, without thirst and without any subsequent heat; shuddering and chilliness for twenty-four hours, with goose skin, without any external coldness; when sweating while walking, the sweat on the forehead has a fœtid, sourish smell; when walking he becomes immediately warm and hot and sweats on the forehead; fetid sweat over the whole body, even the hairs of the head were wet; he sweats and cannot bear being covered; heat all over without thirst; slight sweat all over when waking (a. 22 h.); *slight sweat all over when waking, with itching of the whole body, obliging one to scratch*: much thirst in the daytime,

and feverish chilliness in the evening shortly before going to sleep ; *chilliness without any subsequent heat* ; the rest of the body was warm, only the extremities were cold (a. 3 h.) ; *chill over the whole back, with somewhat hot cheeks and hot forehead, without redness of face and thirst, with cold hands* (a. $\frac{3}{4}$ and $2\frac{3}{4}$ h.). *Remarks* : in the moral symptoms it may be observed that there is *nothing cheerful*. This depressed state, combined with the stupefying and tearing headache, gives a key to the character of symptoms to be found throughout the body, the sphere of the drug ; under eyes the lachrymation is acrid, the ophthalmia accompanied by tensive pain, in the nose the burning is as of a hot coal, under jaws and teeth an *intolerable* tearing pain, and so on ; in the mouth the sudden saliva-like flow is accompanied by colic ; in the bowels is a crushing pain ; continuing through the organs we find *frequent* intermission during micturition. In the respiratory sphere we see the *species* or conditions of asthma, which would lead one to think of this drug ; in the back and elsewhere the eruptions have their peculiarities and importance, as likewise the kind of fit mentioned under the rubric of the back ; the swelling, soft feeling, pains and tremor found in the extremities differentiate a form of paralysis in which *Ledum* would be curative, even in old age, then the frequency of aggravation of pressure and other sensations from motion indicates a characteristic of this drug, as any condition which recurs repeatedly points to such, and cautions us as to the importance of distinguishing the difference in value between an occasional and slight symptom, and one which obtrudes its presence frequently, persistently, and severely ; this is one of the points on which the pioneers in homeopathy insisted as shown by their published writings, and an overlooking and even distinct refusal to recognise, as in some repertories, has hindered and thwarted the student and practitioner of homeopathy far more than is usually supposed. Under general symptoms, gout reappears, indicates its power to bring out latent miasm, and is another reminder of the importance of being clear, when old conditions return, whether the complaint is advancing or there is a favourable action from the medicine, *retracking* and so bringing out a combination which can be treated, and at the same time the importance, as all advanced writers on homeopathy maintain, of not being in too great a hurry to seek to combat every fresh

array of symptoms, as in many such cases, if simply left alone they will prove to be what has been well expressed as "fitting images." Further points to notice are the peculiarity that though causing so much cold sensation, warmth is avoided, the character of the dreams and sleep, which indicate considerable disturbance of the feelings and mental faculties, and, under fever, the predominating coldness.

MAGNES ARTIFICIALIS.

In the opening remarks under the next medicinal agent, namely, *Magnes artificialis*, our author inveighs once more in his usual forcible and unanswerable style against the absurdity of materialism in the treatment of disease. Some of his observations I quote: To the ordinary, mechanical, material heads, believing in nothing but atoms, and they are innumerable, it not only seemed strange but even childish and incredible that the small portions of a grain of which we avail ourselves in our practice for the cure of such disease should be sufficient to effect that cure . . . if disease is looked upon as a material thing, in that case the curative power of a drug has indeed to be measured by the weight and quantity of the dose, but in such a case we ought first to ascertain the weight of the disease, in order to determine how much weight of the drug shall be necessary to outweigh the disease. . . . I cannot reasonably expect that men, accustomed to the routine of materialism, should look upon disease as an immaterial disturbance, and upon medicinal powers as dynamic or almost spiritual substances. . . . But how are they going to explain by means of their atomic views of the action and the curative powers of drugs, that the strongest man can be shaken by a simple imponderable spark from the bottle of *Leyden*, without any perceptible and ponderable substance having been introduced into his body? How can they account with their atomic notions for the great mesmeric power which a healthy man, with a strong determination of doing good, is capable of exercising over the weak nerves of a sick person by approaching the tip of the thumb to the praecordial region of the patient? How can they account with their atomic notions about the action of drugs, for the fact that a well-prepared magnetic bar, even when yet at some distance from the body, and covered with thick intermediate substances, such as cloth, glass, or a bladder,

should be capable of producing violent morbid symptoms, or that such a bar should be capable of curing speedily and permanently the morbid symptoms to which it is homeopathic, even when covered with other substances, and held at some distance from the body? . . . Is not the centillionth part of a grain (a fraction, the denominator whereof contains six hundred cyphers) much too heavy for the ponderable something, the kind of spirit which flowed into the living body out of the magnetic bar? Dost thou not feel disposed to be astonished at the centillionth, octillionth, decillionth of a grain, when the invisible magnetic power is so much more refined? Then follow some general remarks from which I extract the following:—The following symptoms have been obtained by persons of different susceptibilities touching magnets of different powers. Those symptoms which have no reference to either pole in particular have been obtained immediately during the course of experiments of six months' duration, the object of which was to find out the best and most effective mode of magnetising steel; a magnetic horse-shoe, carrying twelve pounds, being handled for hours in succession, and both hands being thus in constant contact with either pole. Thus symptoms which have reference to one pole in particular, have been obtained by means of a powerful magnetic bar being touched by persons in good health for eight or twelve minutes, seldom more than once. Although, as will be seen from the following symptoms, each of the two poles produces phenomena in a healthy person different from that of the other pole, nevertheless, the repeated contact of a pole seems to produce alternate effects analogous to those of the opposite pole. It is not advisable to apply the same pole a second time directly after the first, no more than any other drug should be repeated directly after the first dose without great caution. A new remedy should either be given in accordance with the modified series of symptoms, or else the opposite pole should be used in case the wrong pole had been applied first. If the symptoms of a case correspond to the general symptoms of the magnet, without having reference to any pole in particular, in this case that pole is to be chosen which seems to be closely homeopathic to the case. If the symptoms should then disappear suddenly, or if new symptoms should be elicited of half an hour, or even of a quarter of an hour's duration, this is a sure sign that the magnet has acted *enantiopathically*

(italics mine, E. M.), this would soon be discovered from the speedy recurrence of the symptoms in an aggravated form. This recurrence is not to be waited for, but the other homeopathic pole is to be applied immediately, for as long a time as the palliative pole had been. This pole will, in the first place, remove the new symptoms, after which a slight aggravation will probably occur, which will be followed by the complete and permanent cure of the original affection. A mild disposition and an inclination to chilliness indicate the north pole, if the symptoms to be cured are found among the general symptoms of the magnet. The action of a moderate quantity of magnetic influence lasts about ten days. Then follows the detail of symptoms arranged in the usual order and divided into, those produced by touching either pole, those caused by the North pole, and those caused by the South. *Magnes artificialis* (general symptoms produced by touching either pole indiscriminately while handling the magnet or by laying the whole of the magnetic surface flat upon the body). *Moral and general*:—while doing his business in the daytime, he talks aloud to himself without being aware of it (immediately, like one whose mind is affected); excessive exhaustion of the body, with feeling of heat, and cool sweat in the face, with unceasing and as it were hurried and overstrained activity; hurried zeal and afterwards a gnawing pain in the arm and in the head of the humerus (in the first hours); he endeavours to do things, and actually does things contrary to his own intentions; print seems to him very bright, but he has difficulty to comprehend what he reads; he inclines to be angry and vehement, and after he has become angry his head aches as if it were sore (immediately); phlegmatic, indolent disposition, he is not disposed to do anything, he feels lazy and drowsy (a rare alternate effect). *Head*:—vertigo in the evening after lying down as if he would fall (passing off soon); the objects of sight seem to be wavering; transitory headache, one single jerk, composed of darting and tearing sharp pain in the middle of one of the two hemispheres, like the pain which is felt at the moment when one receives a knock; headache occasioned by the least chagrin, as if a sharp pressure were made upon a small spot in the brain (the pain was immediately removed by *Ignatia* on account of its being homeopathic to it); the head feels dreary as if one takes opium; one beat in the head and right shoulder with shuddering.

Face and eyes:—sweat in the face without heat, early in the morning; cold hands with heat in the face and smarting sensation in the skin of the face; dilated pupils with cheerfulness of the mind and body; white luminous sudden vibrations, like reflections of light, at twilight, one side of the visual ray, all around; dryness of the eyelids and of the inner mouth, in the morning after waking; there was no dilatation of the pupils during the spasmodic attacks and the loss of consciousness; intensely painful stitches through the right eye, disappearing in the jaw, followed by a drawing through the right eye down to the neck, through the chest, abdomen, and hips toward the right lower limb; sensation in the eye as if the pendulum of a clock were moving in it. *Ears and nose*: the external ear feels hot but is not hot; itching pimple on the antehelix, this itching does not pass off by scratching, but the scratching brings on even pain; fine whistling in the ear coming and going like the pulse; illusion of smell, smell of manure before the nose. *Mouth and jaws*: little ulcer in the centre of the inner surface of the lower lip, painful to the touch; darting-tearing pain in the facial bones, especially the antrum Highmorianum, in the evening; pain of teeth from drinking something cold, from air resting in, from stooping; grumbling in the teeth, simple jerks, beating; pain in the velum pendulum palati as when a large mouthful has been forced down the throat; in the submaxillary gland, pain as if swollen, tensive, single dull prickings; frequent conflux of saliva in the mouth, almost like ptyalism, with pain of the submaxillary glands; bad smell from the mouth which he does not perceive himself, the tongue being clean especially early in the morning; swelling of the throat, redness of the face, and increased palpitation of the heart. *Taste and appetite*: hunger especially in the evening; he has a desire for tobacco, milk, beer, and he relishes those things, but he has scarcely commenced eating when he is immediately satiated and is only able to eat little (a. 16 h.); want of hunger without any loathing, repulsion, or bad smell (immediately). *Stomach and abdomen*: eructations, tasting, and smelling like the dust of sawed or turned horn; loud although painless rumbling especially in the lower intestines, extending as far as under the pubic bones and into the groin as if diarrhea would come off although nothing is passed except a short broken wind; putrid fermentation in the bowels, the flatulence has a

fetid smell and is very hot (a. 12, 24 h.) ; pain as if a band were pressing over the stomach with cramps in the direction of the upper parts, restlessness which did not permit her to remain at any one place, heaviness of the tongue, paleness of the face, and coldness of the body, the pulse being very small, hard and irregular (this series of symptoms appeared every day at the same hour, for ten days in succession in three females, decreasing more and more); crackling and cracking in the pit of the stomach as when a clock is wound up.

CASES OF TYPHUS.

By Drs. SICK and LORENZ, of the Deaconesses' Institution, Stuttgart.*

1. E. B., deaconess, *æt.* 27, caught the infection from attending typhus patients in Reutlingen, was after a week's illness, when she had been treated with *Phenactin*, brought to the Deaconesses' Institution in Stuttgart. Temperature taken in rectum always above 40°, on 10th and 11th August 40°9', pulse easily suppressible 120 to 130; great restlessness at night, dry tongue, spleen moderately enlarged, abdomen distended, lungs free. Cold compresses to the body renewed every two hours, *Acon.*, *Bry.*, *Bapt.*, *Ferr.-phos.*, all in the 6th dil., had no effect on the course of the disease, so that the morning temperature was generally over 40°. From the 15th baths at 25°, of ten minutes duration, the first day twice in twenty-four hours, but from 19th as the heat diminished, being 38° in morning and 39° in evening, only one bath a day. Under this treatment the patient improved rapidly, became clearer and quieter. But from the 16th the patient complained of great difficulty of swallowing, so that she took almost nothing. Besides moderate swelling and redness of tonsils and great dryness of mouth and throat no reason for this symptom could be discovered. *Bell.* 6, *Merc.* 30, afterwards *Arsen.*, *Lach.*, and *Rhus*, all in 6th dil., had no appreciable influence on this painful and debilitating condition. On the 26th the dysphagia began to diminish, and a sufficient quantity of liquid nutriment could be taken. Beginning of September, the disease having completed its fourth week, the thermometer remained continually under 38°. The appe-

* From the *Allg. Hom. Ztg.* vol. lxxx. p. 2 *et seq.* The first ten cases are by Dr. Sick, the last two by his colleague in the institution, Dr. Lorenz.

tite increased remarkably, but the food had to be fluid or semi-fluid, and solid food was only given in the middle of September. But this was too soon, as the evening temperature rose considerably above 38°, and only attained its normal state by the end of the month. A few doses of *Nux Vom.* 6 seemed to help. The recovery was henceforward uninterrupted; she was able to resume her nursing work before the beginning of the winter.

2. A. G., *æt.* 25, had to nurse typhus patients in Heilbronn. She is a strong sister, has large glandular cicatrices on both sides of neck since childhood. Had been ill three days before coming into the institution. 25th Oct., had taken no medicine. She came with great enlargement of spleen, moderate roseola, evening temperature 40°. Chief complaints, headache, bad taste, loathing of food. Got *Gels.* 6 and *Bapt.* 6, according as this or that morbid state was most prominent. Under this treatment and without any water appliances the temperature decreased, and on the 30th it was 38° in the anus in the morning. Always moderate diarrhoea. Peculiar pain in bowels, stomach effusions, dyspnea, though nothing wrong could be found in lungs or heart, troubled the patient and led to the administration of one dose of *Phos.* 30, *Cactus* 6, *Bry.* 30, *Carb.-v.* 30, *Merc.* 30. Complete deferescence on the 10th Nov.—end of third week, but convalescence was very prolonged. At first there was violent toothache which was allayed by *Puls.* 30 and 6, afterwards pains in left side of upper abdomen, the cause of which could not be detected. These came on after the least exertion, so that by the spring she could only be put to very light work.

3. W. St., *æt.* 25, took ill in the Cannstatt workhouse while attending typhus patients. She was only one day in Cannstatt, and then came on to Stuttgart. The first days the temperature in rectum was several times 40.4° in the evening, but there was always a considerable dulness in the morning. The patient complained almost exclusively of violent pains in head, for which she got several doses of *Gels.* 6, whereupon they rapidly went off. Towards the end of the second week there was a notable decline of the temperature, which reached the normal by the end of the third week without any more medicine having been given. Her recovery was rapid, and she could soon resume her duties.

4. F. K., *æt.* 30, took ill in the Besigheim hospital when she was nursing typhus patients. Though feeling ill she continued to work until she could do so no more. It was in the second week of her illness, during which she had had no treatment, that she came to the institution (Dec. 2nd.) At first the temperature in the rectum kept about 40°, with only slight morning diminution. Roseola and enlarged spleen were both very apparent. The patient herself complained chiefly of pains in head, for which *Gels.* 6 was given. When these declined, and the gastric symptoms, especially disgusting taste, became prominent, *Bapt.* 6 and one dose of *Arsen.* 30 were given. General amelioration followed, with permanent decline of the temperature. But as the latter rose suddenly on the evening of the 9th to 40·5°, and on the 11th to 40·7°, baths with compresses to the body were very soon employed, the first at 24° to 27°, from three to five in the twenty-four hours. Extreme pain on passing water led to examination, which showed on the inside of both small labia an ulcer the size of a shilling, with irregular borders but no decided diphtheric deposit. But the ulcer was evidently of that character, so *Merc. Cyan.* 6 was given, the local affection kept clean, and sterilized gauze soaked in a strong mixture of alcohol and water applied. Under this treatment the evening temperature, from the 15th, did not exceed 40°. But threatening heart and lung symptoms came on. The patient did not complain of anything but weariness; there was no cough worth mentioning; but the breathing and pulse became quicker, the former always above 40°, the latter always above 130. On the 16th of Dec. râles were observed all over the right lung, and dulness of percussion at base of lung and many singing noises; the heart showed no appreciable change except that its impulse was weak. I gave now *Phos.* 30. A good sign was that the patient could take strong Spanish wine and champagne, barley broth and milk in considerable quantities, that the diarrhea was moderate, and a very small quantity of albumen in the urine. The baths were continued when the temperature rose to 39·5°. But as, on the 17th, dulness and consonating sounds appeared in the upper lobe of the left lung, showing that there was double cross pneumonia, the breathing rose to 50, the pulse was difficult to count, and in the evening symptoms of collapse and a fall of temperature to 30° appeared, all hope seemed to be gone.

Phos. 6, 3dr. every two hours, was given, and next evening the temperature had risen to 39°. *Phos.* was now given less frequently, and from the evening of the 19th, when the temperature had again risen to 39·9°, was discontinued altogether. Soon after leaving off the *Phos.* the temperature fell to 39·5° evening, 38·3° morning. The baths were discontinued after the collapse. Immediate danger seemed past, but the patient lay, pale as a corpse, hardly able to move; respiration always over 40, pulse between 130 and 140. Besides a dose of *opium* for the somnolence and lethargy, no medicine was given; but the greatest attention was given to food and wine. The objective lung-symptoms gradually passed off without cough and noteworthy expectoration, and hopes of recovery were again entertained. But on Dec. 25th there came on suddenly and unexpectedly bleeding from the bowels. *Carb.-v.* 30 was given; on the 26th the hemorrhage returned more violently, so that about noon collapse and diminished temperature, 37·4°, came on. This, however, did not last long; the bleeding, too, stopped, and by the evening of the 28th the temperature was 40° again. A dose of *Lach.* 6 followed by a few doses of *Dig.* 3. The weakness increased, and soon afterwards a venous thrombus appeared in one leg, which swelled rapidly and assumed a bluish colour, but with little pain. Cotton wadding was applied, and *Lach.*, *Verat.* and *China* were given in succession. On the 1st and 2nd of Jan. the thrombosis increased; the temperature was 39·7°, then 39·4°, but after this fell, and remained after Jan. 14th under 38°. For the urinary trouble—the ulcers on the labia had long been healed—*Cannab.* 3 was given with good results. But the disease was not yet ended.

From the 21st of Jan. fever again came on, and on the morning of the 24th the temperature had risen to 39·4°, the cause of which seemed to be a periostitis at the lower end of the left tibia, which was at first very painful, but yielded to wadding. I refrained from giving any medicine, and from the 25th of Jan. the fever and pains rapidly declined, and in a few days were quite gone. The disease was now practically at an end, and from the second week of Feb., a quarter of a year since the beginning of the illness, the temperature hovered about 37°. The patient was emaciated to a skeleton. It was the beginning of April before the patient could be removed to the con-

valescent home at Oberesslingen, where she rapidly regained health, strength, and plumpness. Her hair, which had been long, fell off completely, and was replaced by a thick crop of curly hair.

(To be continued.)

POISONING BY *OLEUM TANACETI VULGARIS*.

By FREDERICK KOPP, Greenwich, N.S.W.

TANACETUM VULGARE (Tansy), natural order *Compositae*, is greatly lauded by herbalists as a spring medicine. "It," they say, "consumes the phlegmatic humours engendered by winter." It is also used largely by them in the form of a decoction in the case of worms, and for strengthening the kidneys, promoting urine, and curing strangury. They also speak highly of it as an anti-flatulent. The following symptoms, however, developed during a poisoning by Oil of Tansy, a volatile principle of the plant, of a greenish-yellow colour, having an aromatic and rather unpleasant odour, and a very bitter and pungent taste, plainly prove that the herb is not so harmless as herbalists would have us to believe, and that the plant in the form of decoctions and in other ways cannot be taken *ad libitum* :—

Great dryness of both nostrils, followed by a profuse accumulation and secretion of mucus in the nostrils, and a feeling as if there were a cold in the head. Dull and aching pains in both eyeballs. Both eyelids agglutinated on waking in the morning. Insipid and flat taste in the mouth. Roughness of the tongue. Frothing at the mouth. Sudden sensation as if both ears were closed. Stitches and roaring in the ears. Mind confused; unable to think. Mind fatigued on the slightest exertion. Extreme dulness of all the senses. Unable to cough, although there was a feeling in the throat as if he wanted to cough. The throat, like the tongue, felt very rough. Drawing pain in the epigastrium, sometimes of a cutting character. Eructations of sour air, strongly tasting of *Tansy*. Colicky pains, very frequent, in umbilicus. Stitching and sharp pains all over the umbilical region. Dull, hard, and aching pain all over the bowels. Very sharp pains in left hypochondria. Pains, somewhat dull, in right hypochondria. Great pain while evacuating, with constant urging; relief (temporary)

obtained after each stool. Diarrhea, preceded by cutting and sharp pains in umbilicus. Hard and drawing pains in groin (left). Urine very highly coloured, and smells strongly of *Tansy*. Constant urging to urinate, accompanied with heavy and dull pains across the small of the back. Respiration very difficult, accompanied with frothing at the mouth and irregular pulse. Constant tickling feeling in the fauces and larynx, with urging to cough, but could not do so. Respiration very laborious and impeded. Severe aching pains, very constant, in the lumbar region. Lameness and soreness of the left wrist towards morning. Contractions of the legs, of a spasmodic character. Pulse raised to 97; temperature slightly higher than normal. Gradual weakness of the heart. Violent clonic spasms (very frequent), with impeded and disturbed respiration preceded by a stiffness of the muscles of the neck and hips during motion, and a pain of a neuralgic character in a large number of the muscles of the body. Coma, and convulsions of a very severe and violent character. In cases which have proved fatal death has usually resulted from failure of the heart's action, no doubt accelerated by the extreme coma and violent convulsions, and the gradual weakening of the heart's action.

It will thus be seen that the action of the oil is very comprehensive, and that this drug, being of an undoubtedly poisonous nature, as the above symptoms prove beyond a doubt, its careless use cannot fail to be productive of highly injurious results. Yet herbalists, as a rule, appear to be totally ignorant of the poisonous properties of *Tanacetum vulgare*, or else they would not advise its indiscriminate use in the form of decoctions. In the current year's January number of the HOMEOPATHIC WORLD I published an article on "Herbal Drugging," and this practice on the part of those who hold that all diseases should be treated by herbal treatment only, fully bears out my statement therein that the herbal treatment is no better than the allopathic, as excessive drugging and the production of drug symptoms in the human system are common to both.

To us, as homeopaths, the above symptoms are of absorbing interest, as, by thus gaining a knowledge of the action of the drug on a healthy person, we are enabled to estimate its value as a curative agent in the treatment of disease. Thus it often happens that, through the misfortunes of others, we acquire fresh and useful information as

to the action of certain drugs, which prove very valuable and useful afterwards as remedial agents.

In the treatment of disease, *Tanacetum vulgare* should prove of great value in such nervous affections as St. Vitus's Dance (Chorea), as unnatural gesticulations and motions of a most extraordinary character are symptoms which are constantly developed during the proving of the drug. It should also be very effective in the treatment of lumbago, as will be seen by the above symptoms developed in the poisoning by the drug, namely, "severe aching pains, very constant, in the lumbar region." In rheumatism affecting the left arm, and more especially the wrist, it has proved very effectual. Its affinity for the left wrist especially is borne out by the above proving (or, more correctly speaking, symptom of poisoning by the drug), namely, "lameness and soreness of the left wrist." In acting on the urinary organs, it first (primarily) causes suppression of the urine, which is followed afterwards by a profuse flow. It is a useful remedy in those cases in which the urine is of a high colour, and where there is a heavy and dull pain across the small of the back, accompanied with a constant desire to urinate. It has also a special affinity for the umbilical region, in which it produces sharp, stitching, and colicky pains; it is, therefore, curative in cases in which these symptoms appear. The feeling in the throat of an inclination to cough, without being able to do so, is one of the peculiar symptoms of the drug, and is a very prominent and constant symptom throughout its proving. It has also a powerful action on the ears, in which it produces roaring, stitches, and a feeling as if both ears were suddenly closed up. In those diseases in which dulness of the senses, confusion of brain power, and fatigue of the mind on the slightest exertion, are prominent symptoms, *Tanacetum vulgare* is a very useful remedy.

The mother tincture may be made from the whole plant with strong alcohol, and the various dilutions prepared from this; or triturations may be made of various potencies from the oil.

[Mr. Kopp would enhance the value of his interesting provings if he would give particulars of doses given, repetition, and personal peculiarities of provers.—ED. H. W.]

KEY NOTES—PRACTICAL ONES.

BLOOD POISONING,

PROBABLY FROM INOCULATION OF ANIMAL MATTER.

By AGRICOLA.

THERE are several features in common between agriculture and homeopathy. Witness the minute dose of *Phosphorus* as *Calcic-phosphate* essential as a manure or plant food, and its intimate intermixture with the medium *Silica* (SiO_2), non-soluble, except and until in humid contact with the minute, extremely delicate *stomata* of the root fibrils.

Years ago I made a rough estimate that a teaspoonful manurial dose of *Superphosphate of Lime* spread over the square superficial foot of soil, and rendered soluble by the rain, when percolated through and "saturating" the said subjacent cubic foot of earth, was in a form of attenuation about equivalent to the 3x or 4x form of a homeopathic medicine or stimulant.

A recent Member of Parliament for the county of Hereford wrote, some twenty years ago, a pamphlet on its famous beef-producing pastures, in which he declared his conviction that in a remote (geological) period the said valley pastures had been washed by *Lime* (*Calcic-carbonate*) in a state of solution and suspension, &c.

Now it so happens that just after the publication of this pamphlet the Astronomer Royal of Ireland gave a lecture in the town hall of Birmingham, situated some 500 feet above sea-level, in which he declared that in past astronomical ages the tides attained a height submerging the very spot upon which Birmingham stood, and that their scour was enormous. Here, then, was the explanation of the lime-washed valleys of fertile Hereford, and the cause of the depth of the limestone valleys of the river Wye from Chepstow to Ross, the basin or depression above Tintern and opposite St. Briavels, some five miles in diameter and about 700 feet in depth, presenting a feature abounding with interest to all contemplative minds; while the cinder tumps of the ancient ironworks around St. Briavels Castle are sites of probably the very first primitive smelting furnaces to be found in Great Britain.

In this basin resides a gentleman whose bailiff, having

called upon me to-day (Aug. 16th) with view to purchasing one of my cows, recalled to my memory that some ten years ago he sought my aid in a remarkable case of blood-poisoning from which he had then been for four months previous *in agony*; to-day he presents a picture of roseate rural health not often met with.

On referring to my case-book, I read: "October 10, 1886. Philip Williams, 35, small farmer, has been under local doctor four months, who said the case was blood-poisoning; dressed a cow having a discharge of pus from hoof with blue-stone lotion; he had at the time an abrasion of the skin of his hands; soon noticed his finger and hand became inflamed and painful; in a month surface of whole body had become affected; glands swelled, discharged pus, reappearance from time to time, *pustules solitary over whole body*, gangrenous, in awful pain, sleepless.

"Treatment for four weeks:

"1st and 2nd week. *Mercuric-cyanide* 6x trit., dissolve size of a pea in a teacup of water, teaspoon doses every half-hour during night and until pain ceases, then at further intervals.

"3rd week. *Potassic-metasulphite* 6x morning and night, *Arsenious-acid* 6x after meals.

"4th week. *Bryonia* 3x tinct., single doses transferred from phial mouth with finger-tip on to tongue surface 6 times daily."

This form of dose was adopted in order to enable the man to carry the medicine in his pocket.

He now (Aug., 1895) says that "the second night he slept soundly all night, remained free from pain, and at end of the month was completely well, and has never had any symptom of a return of the malady. There is no doubt but that the case was little short of marvellous."

Cows are extremely delicately organised animals, and most rapidly succumb to disease; death of a parturient valuable animal, a few hours after delivery, from so-called milk-fever, the first noticeable symptom being rigors, having led to this gentleman sending his bailiff to me for a cow to replace his loss. I am of opinion that the abominable so-called cleansing drenches invariably given—in Gloucestershire at least—to cows after parturition often cause the very calamity which they are intended to prevent.

Personally I have never known *Pulsatilla* to fail in bringing about natural detachment, &c., of a retained *placenta*, but I am bound to say that in the disease (obscure in its various forms) Red Water, bright red clots from some or other part of the pelvic cavity, &c., I have hitherto invariably failed to cure or even to palliate; possibly my failures have been influenced by my inattention and my *laissez faire*.

Judging from the enormous annual percentage of bovine deaths throughout the whole world from this disease, known in its various forms as Red Water but which is of kidney origin so far as relates to the colour of the urine, it seems to me a subject offering much inducement for study to homeopaths generally.

MATERIA MEDICA MISCELLANY.

Collected and arranged by J. R. P. LAMBERT, M.D.

APIS IN "WHINING."

Two cases of infective fevers are related as cured by this remedy given on the indication of this symptom. The first was severe typhoid in which the chief symptom was moaning, "not the deep heavy moaning of muriatic acid, but a kind of whining without cause." A few years later the same patient was attacked with small pox, with complete suppression of urine, and had this same symptom—constant whining. The administration of *Apis* was followed by profuse secretion of urine, and a good recovery ensued without pitting.—*Hom. Phys.*

BELLADONNA IN MAMMARY TUMOUR.

An interesting case is reported in the *Monthly Homeopathic Review* of a woman, aged 50, who was admitted to the Birmingham Homeopathic Hospital, suffering from a tumour of the right breast, of six months' duration. It was hard, but movable, situated below the nipple, which was distinctly retracted. There was no enlargement of axillary glands, but she had great pain down the arm. A consultation was held, and removal of the breast decided upon as the growth was probably cancerous. Meanwhile, *Bell. lx* was given internally, and in two weeks the tumour and all symptoms had disappeared.

CYPRIPEDIUM FOR SLEEPLESSNESS IN YOUNG CHILDREN.

Cases are sometimes met with in infants or very young children who, without apparent reason, waken after a few hours' sleep, "wide awake," as the saying is, and who cannot be gotten to sleep again for a very long time. There seems to be no appreciable reason why they should do so, as they are apparently well. *Cypripedium* often banishes this tendency. When this occurs persistently about two or three a.m., *Nux Vom.* might be the curative remedy.—*The Clinique.*

ECHINACEA AND ITS USES.

A short account of this new remedy appeared in the April No. of *THE HOMEOPATHIC WORLD*. In addition to its uses there mentioned, it is said to be a splendid remedy in diphtheria, and it is highly recommended in cerebro-spinal meningitis, diarrhoea, dysentery, and cholera morbus. For the diarrhoea of typhoid Dr. John Henning says "it is almost specific, being very reliable."

Dr. Meyer, who introduced the remedy, says in intermittent and remittent malarial, and in typhoid fevers, it does what no other single remedy will do. Especially in chronic cases of malaria it only needs to be known to be appreciated.

PICRIC ACID—ITS SALTS AND THEIR USES.

Picric Acid is recommended by Oberholzer to be used after any undeniable effects on the central nervous system when softening is taking place, also in cerebral exhaustion from over-work or after typhoid. Also in neurasthenia with < from slightest effort; hysteria, with pain in the left ovary; leucorrhoea before menstruation; chronic deafness after prolonged cephalalgia; subacute and chronic nephritis with a tendency to acne and boils on the nape of the neck and behind the ears.

Ferrum-picricum has gained considerable reputation in chronic deafness, tinnitus, and vertigo. It is recommended in all stubborn affections of the organs of hearing.

Calcarea-picrata is recommended by Froes for boils, abscesses, and carbuncles in the initial stage; it is said to be far superior to *Hepar Sulph.* and *Silica* in these affections.—(*Univ. Hom. Ann.*) *Am. Hom.*

Picric Acid has the *Lachesis* < after sleep.

SILICA IN CHLOROSIS WITH "PINS AND NEEDLES".
SYMPTOMS.

Dr. Drake has recorded an interesting case of a girl of 16 suffering from severe chlorosis of three years' duration. The most marked symptom was a mania for pins and needles; she would spend much of her time playing with them and finally swallowing them. If she saw one on the floor she would stand as rigid as marble, and exclaim, "Pin, pin," so great was the attraction these objects had for her. *Silica* was the medicine selected for her, as other symptoms corresponded, and it was found to be accredited with the symptoms, "Fixed ideas about pins" and "Mono-maniacal ideas about pins, which she sees everywhere and dreads." It was given in the 200th potency, and gradual steady improvement set in, though previously she had been steadily getting worse. The "pin" symptom, which had appeared last, was the first to go, and the other symptoms followed in the inverse order of their appearance.—*Am. Hom.*

SOLANUM CAROL. AND ITS USES.

The use of this drug is purely empirical, there being as yet no provings, nevertheless it has shown itself a valuable remedy. Its chief sphere of action appears to be on the sexual organs, where it cures abnormal excitement. It is highly recommended in uncomplicated cases of satyriasis, and in spermatorrhea is said to be indicated in nine out of every ten cases. It is also said to be very valuable in all cases of epilepsy accompanied by a continual state of excitement of the sexual organs, also in cases of masturbation from this cause.—*Hom. News.*

STANNUM IODIDE IN PULMONARY AFFECTIONS.

Stannum Iodide promises to be a valuable remedy in phthisis and other pulmonary affections. Several cases illustrating its use are reported in *The Homeopathic News*, most of them cases of phthisis in all stages. Even in the last stages it gives very marked relief when indicated.

The chief indications for its use appear to be copious viscid expectoration and incessant cough; the expectoration may have a sweetish or flat taste.

·*STIBIUM ARSENICOSUM* IN BRONCHITIS AND PULMONARY
EDEMA.

A severe case of chronic bronchitis is reported as cured by this drug in a remarkably short time. The patient, a woman of 47, who had been given up by the allopaths, had been suffering for six years. She was greatly emaciated, had a pulse of 115 and temp. 103°, and suffered from severe night-sweats and incessant cough. *Stibium Ars.* was given, and in a week produced a most marked improvement, and a second prescription effected a cure. It is also recommended in cases of pulmonary edema, acute and chronic. The indications for its use are great rattling in the chest, scant or absent expectoration, and much restlessness especially at night.

It will be well to add that *Stibium* is simply another name for *Antimony*, which at once explains the efficacy of this new drug. Whether it has any properties of its own in addition to those of its two powerful constituents is doubtful, but the combination may prove of service.—*Hom. News.*

VESICAREA IN GENITO-URINARY TROUBLES.

Vesicarea is highly recommended for chronic cystitis and gonorrhoea. It is said to cure the latter affection in from three to fourteen days, if given from the outset.

No indications are given for its use, but it is said to be a diuretic, and to have a soothing influence over the mucous membrane of the urinary organs.—*Hom. News.*

SOCIETIES.

BRITISH HOMEOPATHIC SOCIETY.

THE first meeting of the Session (1895-1896) was held on Thursday, October 3, 1895, at the London Homeopathic Hospital, Great Ormond Street, W.C. Harald Valdemar Münster, M.B., C.M. Edin., of 77, Denmark Hill, London, and F. A. Watkins, M.R.C.S. Eng., L.R.C.P. Lond., of Stowe Park, Newport, Monmouthshire, were elected as members. Dr. Goldsborough then delivered his presidential address, entitled "Some

Prolegomena to a Philosophy of Medicine," of which the following is a synopsis:—

Considerations suggesting choice of subject—Circumstances of present meeting—A proposed Hahnemann address—Philosophical aspect of homeopathy—The possibility of "Scientific Therapeutics" depends on a theory of life—Current theory stated and its value estimated—Suggestions as to a uniform mode of the molecular movement of protoplasm—A bio-dynamic law—Evidence from the physiology of the cell—General physiology—Embryology—Psychology—Additional proof from pathology, bacteriology, and pharmaco-dynamics—Effect of such a law on the knowledge and practice of medicine—Inferences from it relating to the clinical history of disease, the *rationale* and application of the rule of similars, allopathy, antipathy, surgery, and hygiene—Practical conclusions for the future work of the Society.

LIVERPOOL BRANCH.

At the opening meeting of the 38th session of the Liverpool branch of the British Homeopathic Society at the Hahnemann Hospital on Thursday, October 10th, the president (Dr. Hayward, sen.) laid stress on the necessity that every medical student should, during his classes, be taught the homeopathic as well as the allopathic uses of medicines. He maintained that no man who has failed to learn the homeopathic uses of medicines was qualified for practice or fit to take medical charge of the health and life of her Majesty's subjects. He also, as a result of over forty years' homeopathic practice, emphasised the necessity that the drugs used shall be absolutely genuine and pure, and the preparations from them be faithfully made and up to standard. He feared that the competition amongst homeopathic pharmacists and the desire to undersell each other through ordinary druggists and co-operative stores would lead to careless or unfaithful preparations being supplied to practitioners as well as to the public, much to the damage of the health of the public and of the reputation of homeopathy. He paid an enthusiastic tribute to the early homeopathic practitioners, asserting that it was their practice with infinitesimal doses proving curative in the most serious diseases, such as cholera, dysentery, pneumonia, bronchitis, and the infectious fevers, that laid the foundation of homeopathy in this country and America, as well as on the continent, and he made the grave assertion that no medical man is justified in saying that everything has been done medicinally to alleviate suffering and prolong life unless the homeopathic use of medicines has been tried.—From *The Liverpool Mercury*.

REVIEWS.

FISHER'S DISEASES OF CHILDREN.*

THE author of this volume, of which we made mention last month, may fairly be congratulated on the success with which he has discharged the great task he set himself to perform. Steadily the homeopathic body is making itself independent of old school text-books, and Dr. Fisher has brought us sensibly nearer to the day of complete independence. It will henceforth be no longer incumbent on students of homeopathic colleges to learn the diseases of children in the works of allopathic specialists, and to waste their time in learning and unlearning allopathic therapeutics. Dr. Fisher has given us a work which is thoroughly up-to-date in all that concerns diagnosis and description, and his therapeutics is far in advance of what is usually to be found in even homeopathic text-books. No one knows better than Dr. Fisher that the repertory and materia medica are indispensable to the practice of genuine homeopathy; but for all that, concise descriptions of the leading indications of remedies most frequently called for in a given disease are of the greatest service for the generality of cases met with. In this respect the book before us will be found a real boon, not only to advanced students, but to practitioners young and old. In compiling this part of his work Dr. Fisher has had assistance from such well-known therapeutists as Prof. H. C. Allen and Prof. W. J. Hawkes.

There are one or two things Dr. Fisher has yet to learn in this department, and one is the use of *Bacillinum* and other nosodes and substances like *Pyrogen* and *Thyroidin*. Dr. Fisher says his experience with *Bacillinum* has been uniformly disappointing. That is quite possible; for it is not all at once that one catches the genius of a new medicine. But this proves nothing as to the virtues or otherwise of a medicine. *Bacillinum* is a potent remedy when properly handled, and we trust we shall see it in its proper place when Dr. Fisher brings out his next edition. The same may be said of *Pyrogen* in typhoid conditions. Dr. Fisher is a great believer in forms of disease, and he thinks that all specific fevers must run their course, though they may be modified by remedies. In our belief specific fevers are aborted, and would be oftener if we were only more skilful at spotting the simillimum. In the therapeutics of chorea we miss any mention of *Stramonium*, which, in our experience, is homeopathic to a large percentage of the cases. Among the diseases of the new-born, Dr. Fisher has omitted to mention that rare

* *A Hand-book of the Diseases of Children and their Homeopathic Treatment.* By Charles E. Fisher, M.D. Chicago: Medical Century Publishing Company, 31, Washington Street. London: Homeopathic Publishing Company, 12, Warwick Lane, E.C. 1895. Calif, pp. 905. Price 25s. nett.

form of disease, sclerema neonatorum, to which reference was made in our issue of September last. But these are trifles beside the great merits of the work, which have already placed it in the front rank of homeopathic text-books. The printing and general get-up of the work are excellent, and the illustrations, which are copious, materially assist the reader and student. We are glad to remark that Dr. Fisher has adopted the Anglified form of the word "homeopathy," discarding the diphthong, thus following our example. *The Medical Century*, over which Dr. Fisher so ably presides, and *The American Homeopathist*, have also adopted the advanced orthography.

HERBAL SIMPLES.*

IN the latest product of his pen Dr. Fernie has given us a volume marked by all the graces of his scholarly style and full of information about the friends we meet in the hedgerows whenever we take a country walk. Indeed, Dr. Fernie gives us a new introduction to our friends. A true naturalist, as well as a botanist and a physician, Dr. Fernie has something more to tell of wayside plants than a dry enumeration of their anatomical parts, and the alkaloids that can be extracted from them. He gives their natural history, their habits and characters, and has many interesting facts to tell about their names. Those which are used in homeopathy are mentioned with some of their indications. In his next edition Dr. Fernie will have to add to his chapter on the Nettle, Dr. Burnett's use of this "simple" in gout and intermittent fever.

The volume closes with an index of diseases, under the names of which references are given to the herbs which have been found of use in them.

BOOKS RECEIVED.

HOMEOPATHIC LEAGUE TRACTS. Vol. iii. Comprising Tracts 37-54, inclusive. London: J. Bale & Sons, 85-89, Great Titchfield Street, W. Pp. 291. Cloth boards, 2s. 6d.

CARRINGTON, EDITH. *The Dog: His Rights and Wrongs*. The Humanitarian League's Publications. No. 18. London: William Reeves, 185, Fleet Street, E.C. pp. 60. Stiff paper covers, price 2d.

An excellent booklet, copiously illustrated by A. Carruthers Gould, which should be in the hands of every lover and every keeper of a dog. The chapter on health and exercise may be especially commended to notice.

* *Herbal Simples Approved for Modern Uses of Cure*. By W. T. Fernie, M.D. Bristol: John Wright & Co. London: Simpkin Marshall, Hamilton, Kent & Co., Ltd. Hirschfeld Brothers, 82, High Holborn. 1879. Pp. 432, cloth, 5s.

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.

OPENING AT LANDPORT.

MR. T. BUTLER, of 31, Victoria Cottages, Queen's Road, Buckland, Portsmouth, writes:—"We are badly in want of a Homeopathic Doctor at Landport."

Obituary.

DR. JOHN YOUNG.

WE regret to learn from *The Bridgeport Evening Post* (New York) of September 14th the death of this homeopathic veteran. A striking article on "*Bacillirum*" from his pen appeared in our issue of January, 1893, taken from *The Homeopathic Recorder*.

"John Young, M.D., who passed away from this life at Milford on Tuesday afternoon, was born in Berne on May 3, 1818. He attended school in his native city, then took a course at the University of Heidelberg, and afterwards took up what became his life-work, the art of healing. He was an earnest student, a deep thinker, and very devoted to his chosen profession. His parents had destined him for the ministry, but he felt he must be a physician, and studied accordingly. In 1851 he came to this country. He had letters of recommendation to the Swiss Consul in New York city, and was appointed physician of the Swiss Benevolent Society. He served in this capacity for a year. He was made an honorary graduate of St. John's College at Fordham. He moved to Boston in 1852, where in a short time he established a lucrative practice. For various reasons he returned to what was then called Williamsburgh, now the Eastern District of Brooklyn, and practised homeopathy with great success. In 1854 he was one of a number of Brooklyn physicians who laid ground for a medical society at the Atheneum. From this small gathering rose the 'Homeopathic Medical Society of King's County,' organised in November,

1857. In the cholera crisis of 1854 he mastered the frightful disease in so skilful a manner that his services received recognition in honourable mention from the Brooklyn Board of Health.

“He spent several years abroad, returning to this country in 1865. Failing health necessitated his going to his native land in 1880. On his return to America he was associated in office practice with Dr. Simon Baruch in New York city. Dr. Young was very skilful and very conscientious in all his work. He was one of the first physicians to practice homeopathy in Brooklyn, and of the five who started at the same time he was the last to be taken. He had many warm friends in Switzerland, Italy, Germany, and England. Over forty-five years ago he associated himself with that religious body known as the Plymouth Brethren, and for years past all friends found a hospitable welcome at his home.”

GENERAL CORRESPONDENCE.

PREMATURE BURIAL AND DEATH CERTIFICATES.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—The correspondence and comments in the press indicate a considerable amount of public interest, coupled with anxiety in the public mind as to the danger of premature burial. From a recently issued Report of the Select Parliamentary Committee, it appears that in London between 1882-4 there were 3,020 burials without any death certification whatever, and presumably without actual medical examination as to the cause of death, or whether in point of fact death had really occurred. In the quinquennial period, 1886-90, in the city of Glasgow there were 3,533 uncertified deaths, while in England and Wales in 1891 there were 26,140 cases, or over 4 per cent. of the total mortality in which the cause of death was ill defined or unspecified. In Q. 2,552-83 remarkable evidence was produced as to the reckless mode of death certification. One medical witness testified that he saw a certificate of death, signed by a registered medical practitioner, giving both the fact and the cause of death of a man who was actually alive at the time, and who lived four days afterwards, with facts of a still more startling character described as “murder made easy,” the details of which would occupy too much of your valuable space. *The Lancet* of August 24th, 1895, commenting upon this remarkable official document observes: “As the law stands at present, no verifica-

tion of the fact of death is necessary, the practitioner being entitled to say, 'A. B. died, as I am informed.'"

The object of this communication is to point out the serious consequences of the present lax system, not of certification only, but, what is of vastly greater public concern, the examination of the dead before burial. This is usually of a very perfunctory description, and is practically no more than the momentary "view" which the coroner imposes on a jury when an inquest is held. It is known to close students of the human constitution that a percentage, small it may be, of persons of a nervous type, are liable to periods, of a longer or shorter duration, of attacks of catalepsy, trance, hybernation, and other forms of suspended animation where the suspension of life is so marked that the most experienced physicians have been deceived, and the unfortunate victims have only been restored either just before interment or have been buried alive. Dr. Franz Hartmann, an able and painstaking scientific observer, has collected over 700 authenticated cases of this description and has recently published the particulars of 108 of these cases as typical of the remainder, under the title of "Buried Alive: An Examination into the Occult Causes of Apparent Death, Trance, and Catalepsy," with suggestions based upon extensive research for the prevention of such terrible tragedies. Occasionally the public is startled by the published reports of persons medically pronounced dead who came to life before or while the last rites of burial were being performed. After burial we hear no more of them, they may have been buried in a death-like trance, but the medical certificate, no matter how inconsiderately given, consigns them to perpetual silence beyond appeal or escape. Family remonstrance is then unavailing, and except in cases of strong suspicion of poisoning, no Home Secretary would grant an order for exhumation. In the United States, owing to the expansion of towns, cemeteries are not infrequently removed and whenever the corpses have been examined cases of undoubted premature burial have been revealed. In New York, of 1,200 cases examined, six belonged to this most unfortunate category. In Holland the percentage of similar investigations was five in 1,000. It is said that the most hopeless of *cadavres* are those unfortunates who, after undergoing the examination of the police inspector and the State-appointed surgeon, are deposited in the Morgue in Paris for identification, but here also the records show that revivication occurs to about one in 300 cases.

Under the existing imperfect system of medical examination in this country, no thoughtful person can contemplate the burial of over half a million persons annually without mistrust and misgivings. A heart-breaking case of premature burial

having occurred in my own family over half a century ago, has led me to study the facts of this very painful subject, and to caution my friends against accepting medical certificates as clear proof of death. Hufeland, a recognised authority, says, "The appearance of decomposition is the only reliable proof that the vital energy has departed from an organism," and every prudent man will provide in his will for evidence of this change, or for a simple surgical operation before burial.

Yours faithfully,
T. W.

September 30, 1895.

VARIETIES.

SEPIA AND LILIUM IN PROLAPSUS UTERI.—Dr. Majumdar records three cures of this trouble in Indian women by internal medication alone. In the first sepia 30, in the second and third liliium tigrinum 3x and 6x, were the remedies. Leucorrhœa seems to have been the chief indication for the former, co-existent ovarian pain for the latter.—*Indian Homeopathic Review*, January (J. B. H. S.).

SYMPHORICARPUS RACEMOSA IN NAUSEA AND VOMITING OF PREGNANCY.—Dr. O. S. Haines records the case of Mrs. X., æt. 38 years. Blonde, stout, amiable, became pregnant with her second child October, 1893. Almost immediately she suffered from nausea, to which was added within the month vomiting whenever food was taken into the stomach. The only peculiarity noticed in her symptoms was the following modality: "As long as I am lying in bed, horizontal and perfectly quiet, I don't seem to feel the desire to vomit" Her appetite was diminished, and occasionally there was repugnance to the sight of food or to the odour of it while it was being cooked. Remedies prescribed by her medical attendant seemed to produce no amelioration; *cocculus*, *ipeca*, *kreos.*, *nux.*, *petrol.*, *tabac.*, *aletris*, *ars.*, *bry.*, *cuprum arsen.*, were each tried in turn. Her physician supposing that he had exhausted his homeopathic resources gave *ingluvin*, *cerium oxalate* and *subnitrate of bismuth*. It was expected that after the fourth month of pregnancy was past, she would be free from the nausea and vomiting, but when that period arrived he found her worse instead of better, confined to her bed much of the time. When up and about her room nausea and vomiting were almost incessant. About this time—while the family was discussing the propriety of inducing premature delivery—she was given *symphoricarpus racemosa* in the 1x dilution. Within a few days there was complete relief, so complete, indeed, that the lady ceased taking the remedy. Then the symptoms returned and were promptly checked by the same prescription. Whenever the remedy was laid aside, nausea and vomiting reappeared, only to cease on resuming the medicine, and so she continued the remedy until full term of pregnancy was reached, and she was delivered of a very healthy male child. The nausea and vomiting persisted, it will be noticed, the entire nine months; the

symphoricarpus acted perfectly as a palliative, allowing the patient to be up, out, and free from distress. The modality above mentioned is probably a true indication for *symphoricarpus* in nausea and vomiting of pregnancy.—*N. A. Journal of Hom.*, May, 1895 (*Hahn. Monthly*).

LONDON HOMEOPATHIC HOSPITAL, GREAT
 ORMOND STREET, BLOOMSBURY.

HOURS OF ATTENDANCE:—Medical, Daily, 2.30; Surgical, Mondays, Tuesdays, Fridays, and Saturdays, 2.30; Diseases of Women, Tuesdays, Wednesdays, and Fridays, 2.30; Diseases of Children, Mondays and Thursdays, 8.30 to 10 a.m.; Diseases of Skin, Thursdays, 2.30; Diseases of the Eye, Thursdays, 2.30; Diseases of the Ear, Wednesdays, 2.30; Diseases of the Throat, Mondays, 2.30; Operations, Tuesdays, 2.

MEDICAL AND SURGICAL WORKS PUBLISHED
 DURING THE PAST MONTH.

- Althaus (J.).** On Sclerosis of the Spinal Cord. 8vo. (Longmans, 4s.)
- Blackwell (Elizabeth).** Pioneer Work in Opening the Medical Profession to Women: Autobiographical Sketches. Cr. 8vo, pp. 276. (Longmans, 6s.)
- Carter (A. H.).** Elements of Practical Medicine. 7th ed. Cr. 8vo, pp. 568. Lewis, 10s.)
- Coats (J.).** A Manual of Pathology. 3rd ed., Revised throughout. 507 Illusts. 8vo, pp. 1,154. (Longmans, 11s. 6d.)
- Curiosities in Cures:** Being the Experiences of a Lady in Search of Health. With Illusts. from Sketches by the Author. Cr. 8vo, pp. 68. (H. Cox, 1s.)
- Duhring (L. A.).** Cutaneous Medicine: A Systematic Treatise on the Diseases of the Skin. Part 1. Illust. Roy. 8vo, pp. 230. (Lippincott, 12s.)
- Edinburgh Medical School Calendar and Guide to Students, 1895-6.** Cr. 8vo, ed., pp. 859. (Livingstone, Edinburgh, 2s.)
- Foster (J. E.).** Defects in Speech: Their Cause and Cure. 2nd ed. Fcap. 8vo, pp. 22. (Simpkin, 1s.)
- Gowers (W. R.).** Clinical Lectures on Diseases of the Nervous System. Delivered at the National Hospital for the Paralyzed and Epileptic, London. 8vo, pp. 280. (Churchill, 7s. 6d.)
- Giles (A. E.).** Moral Pathology. (Social Science Series.) Cr. 8vo, pp. 188. (Sonschein, 2s. 6d.)
- Haab (O.).** An Atlas of Ophthalmoscopy. With an Introduction to the Use of the Ophthalmoscope. Translated and Edit. by E. Clarke. Cr. 8vo. (Bailliére, 10s. 6d.)
- Husband (H. Aubrey).** The Urine in Health and in Disease: Together with its Chemical Examination. 8rd ed. Plates. 48mo, pp. 148. (Livingstone, Edinburgh, Net. 1s.)
- Ladies' Physician (The).** A Guide for Women in the Treatment of their Ailments. By a London Physician. New and Revised ed. Cr. 8vo, pp. 336. (Cassell, 3s. 6d.)
- Lang (W.).** The Methodical Examination of the Eye: Being Part 1 of a Guide to the Practice of Ophthalmology for Students and Practitioners. Cr. 8vo, pp. 118. (Longmans, 3s. 6d.)
- MacDowall (A. B.).** Weather and Disease: A Curve History of their Variations in Recent Years. Roy. 16mo, Limp, pp. 84. (Graphophone Co. Net. 2s. 6d.)
- Maisch (J. M.).** A Manual of Organic Materia Medica: Being a Guide to Materia Medica of the Vegetable and Animal Kingdoms for the Use of Students, Druggists, Pharmacists, and Physicians. 6th ed. Revised by H. C. C. Maisch. 285 Illusts. Cr. 8vo, pp. 510. (Kimpton, Net. 10s. 6d.)
- Medico Chirurgical Transactions.** Vol. 78. (Second Series. Vol. 60.) Part 3. April, May, June, 1895. (Longmans, Net. 5s.)
- Methods of Microscopical Research (The).** A Practical Guide to Microscopical Manipulation. 2nd ed. Enlarged and in great part Re-written by Arthur C. Cole. 8vo, pp. 216. (Bailliére, 6s.)
- Newman (G.).** On the History of the Decline and Final Extinction of Leprosy as an Endemic Disease in the British Islands. (The National Leprosy Fund. Prize Essays, No. 1.) 8vo, pp. 159. (Macmillan, Net. 2s. 6d.)
- Starling (E. A.).** Elements of Human Physiology. 2nd ed. Cr. 8vo, pp. 454. (Churchill, 7s. 6d.)
- Stewart (G. N.).** A Manual of Physiology. With Practical Exercises and with numerous Illusts., including 5 Coloured Plates. 8vo, pp. 796. (Bailliére, 15s.)
- Taylor (F.).** A Manual of the Practice of Medicine. 4th ed. Cr. 8vo, pp. 974. Churchill, 15s.)

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 the "MANAGER" of the Homeopathic Publishing Company, 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. Dudgeon, London; Mr. Meredith, Lydney; Mr. Frederick Kopp, Greenwich, N.S.W.; Mr. Wm. Tebb, Burslem; Dr. Ridpath, Sunderland; Dr. Shirliff, Malvern; Mr. W. Pumfrey, Wantage; Dr. Burnett, London.

BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Animals' Friend.—Chemist and Druggist.—Homeopathic Review.—*Allg. Hom. Zeit.*—*La Homeopatia.*—Med. Visitor.—*Hom. Recorder.*—Rev. *Hom. Belge.*—*Archiv. f. Hom.*—*Century.*—*Amer. Homeopathist.*—*Homeopathic Physician.*—*Hom. Monatsblätter.*—*Humanity.*—*Maanedsskrift f. H.*—*Calcutta Jour. of Medicine.*—*Vaccination*

Inquirer.—*Family Doctor.*—*American Jour. of Homeopathy.*—*Clinique.*—*Hahnemannian Mon.*—*Healthy Life.*—*Monthly Mag. of Pharmacy.*—*Indian Hom. Review.*—*Liverpool Daily Post.*

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Cases Illustrative of the Application of the Rule *Similia Similibus Curentur.*—*Nux Vom., Kali-Carb.* By D. Ridpath, M.D., C.M.

Belladonna in Children's Complaints. By E. D. Shirliff, L.R.C.P.(Lond.), M.R.C.S. (Eng.)

Thyroidin. By John H. Clarke, M.D., Physician to the London Homeopathic Hospital.

Remarks on Dr. Cooper's "Arborvital Medicine"—*Lemna Minor*—*Arbutus Andrachne.* By J. Murray Moore, M.D., F.R.G.S.

Remarks on the "Materia Medica."—*Ipecacuanha* (concluded)—*Ledum.* By E. Mahony, M.R.C.S., L.S.A.

A Cardiac Case. By A. H. Burns, L.R.C.P.I., L.S.A.

Ammonic-Naphthaline Nitrate. By Agricola.

MATERIA MEDICA—MISCELLANEA.

INSTITUTION.

Cheltenham Homeopathic Dispensary.

REVIEWS.

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THE
HOMEOPATHIC WORLD.

DECEMBER 2, 1895.

“THE SCIENCE OF MEDICINE”—GLEAMS OF
COMMON SENSE.

IN these days when the organs of the medical profession are perpetually holding forth on the superiority of the faculty in point of knowledge and wisdom to all the rest of the world, and claiming on the strength of this the right to domineer over communities and force upon all and sundry the latest medical theory that has succeeded in getting itself established, it is refreshing to find that some of the leaders of the profession are not involved in this organised hypocrisy. Witness the following wholesome confession by Mr. JONATHAN HUTCHINSON in his address at the University College of Liverpool (*Lancet*, October 5th):—

“Excepting a very few of us, we are all mere smatterers as regards almost all that we think we know. It is not possible to be otherwise excepting at the cost of being wholly ignorant in many directions, and as regards fitness for the affairs of life, better by far a general acquaintance with all that is around us, though it be not very deep, than slices of profound knowledge placed sandwich-wise between thick layers of utter ignorance. In the medical profession more especially is this alternating method of education to be shunned. We cannot afford to allow attainments in one direction to counterbalance vacuity in another.”

It is quite true, we cannot afford it; but, luckily for the profession, it is the patient-world that has to pay for it. We hope Mr. HUTCHINSON and his fellow-smatterers who have successfully resisted the entrance of true science into

orthodox medicine these hundred years will adopt a more chastened attitude in the future, now that they have commenced at the beginning of knowledge and begun to know their own ignorance.

In his recent Harveian oration (*Lancet*, December 26th), Dr. W. S. CHURCH pointed out, as others have done before, that Harvey's discovery had no effect on the practice of medicine, and that even Sydenham was uninfluenced by it. And he went on to point out that it is not ignorance alone (which Mr. HUTCHINSON so greatly fears) that we have to be on our guard against. The plethora of useless knowledge is just as dangerous.

"The very brilliancy of recent discoveries and the vast increase in our knowledge may for a time react prejudicially on the art of medicine. Are we not in danger of being carried away by our enthusiasm? And may we not fall into the predicament, described many years ago by BUCKLE, of our facts outrunning our knowledge and encumbering our march? More especially does this difficulty arise in the training of our students; so vast is the range of subjects bearing on medicine, and so important does each appear to those best acquainted with them, that there seems to me danger lest, in endeavouring to secure an acquaintance with them all, we may forget that the future life of the majority of those entering our profession is to be spent in ministering to the victims of accident or disease, and that for the due recognition and treatment of sickness and injury experienced and trained clinical observation is absolutely necessary; no amount of laboratory training will enable a man to recognise the nature and proper mode of reduction of a dislocation, or know scabies when he sees it, and the words of SYDENHAM to his dear friend Dr. MAPLETOFT, 'The art of medicine can be properly learned only from experience and exercise,' will always hold good. There is no need to urge on the Fellows of the College another of HARVEY's directions to the Orator of the day 'to search out the secrets of Nature by way of experiment,' for at no period during the existence of our College have they manifested greater activity in that direction than at the present."

There is surely a quiet irony in the last sentence of this passage!

The address by Professor T. ROSE BRADFORD, F.R.S., delivered at University College on October 1st, was the most remarkable of the introductory addresses in this

particular, that though its author is a physiologist, he did not cry up his own speciality.

"To the medical scientist extensive and sound physiological knowledge was essential, as without it the processes of disease were liable to be considered much more simple than they really are. . . . The value of physiological knowledge to the practitioner was not so great, since so much current physiological teaching ignored human physiology in its relation to medicine, and the science was taught from the standpoint of the pure physiologist. This method, although suitable in a University, was not adapted to the needs of the medical student. There was a certain amount of clashing between pure physiology and what might be called applied physiology. Just as the brewer and the dyer received special courses of chemical teaching, so the future medical practitioner should receive a more or less specialised course of physiology, differing in certain respects from that suitable to the pure physiologist. The burden laid on the student of medicine was so great and increasing that it was essential that too much time should not be spent in studies taking him away from the hospital wards. The student's principal aim should be to excel in clinical knowledge, and although medicine was daily acquiring more claim to be considered a science it was still largely an art, and no scientific training, however extensive and elaborate, would supplant clinical study and knowledge. There was a danger lest with the recent great progress in the more scientific side of medicine, its clinical study should be neglected. English physicians and surgeons had in the past been celebrated as keen observers of the natural history of disease and had excelled as clinicians. Clinical observation could be as sound and scientific a branch of knowledge as any science; that depended upon the capacity of the observer and not on the nature of the subject observed. The success or failure of the practitioner depended mainly on his clinical knowledge and judgment, the preliminary sciences only aided towards the attainment of this knowledge, it did not supplant it. No amount of biological—or, for the matter of that, of pathological and bacteriological—knowledge would make the capable physician or surgeon; that was only to be acquired in the hospital wards, and hence they should seize all opportunities for the clinical study of medicine and surgery."

But the most delightfully candid of all the candid friends who have recently come forward to lecture the medical profession was Dr. GEORGE DE'ATH, who opened the present session at Guy's. Here, for example, is what he said about the medical journals:—

"Our medical press bids fair to become the mouthpiece of the would-be successful traders and of the professional Pecksniffs and Chadbands. For instance, the contribution of cases is intended to advance knowledge, not to puff practitioners. We must look up to our press, but it should represent all that is most dignified and all that is best. Look at the view which is taken by the medical press (and of course I am only speaking of some papers) on any subject of general interest, such as vaccination. The coarsest, the rudest, the most insulting language, is considered too good for those who, though supported by men of science and undoubted honour, feel a conscientious objection to compulsory vaccination. Dictation is not dignity, and the policy of kicking your opponents to death should hardly be the characteristic of the wonderful and advanced medical knowledge of the nineteenth century."

As homeopaths have good reason to know, this masterly description of medical journalists' methods is not in the least overdrawn. Is it too much to hope that *The British Medical Journal* and *The Lancet* (both of which published Dr. DE'ATH's address in their issue of October 5th) will "Tak' a tho'ght an' mend"? We fear they will be too much occupied with dispensing their Pecksniffian and Chadbandic medical ethics to pay much attention to Dr. DE'ATH.

We will conclude this article by quoting from the same address a passage which gives an accurate account of the real condition of "scientific medicine" as known to the orthodox school.

"The false relationships of our public and our press and our patients to our profession are our own fault. Let us think less of our successes and more of our failures. Less of the possible glory of the future and more of the darkness of the present, less of our modern advances and more of our modern helplessness, less of the possibilities of science and more of its simplest theories. Are the foundations of our knowledge sure? Do we know for certain the functions of any organs of the body? Are we adding to or lessening human misery and woe? Is our science a tower of Babel? I believe we shall do best if we do right, and we shall do right if we recollect every hour of our professional lives not merely our advanced knowledge but our appalling and lamentable ignorance. I want to show that we should not fix our eyes only on the advancing waves, especially as waves have a knack of receding, that we should not be led away by our apparent popularity and power, that we should simply do what is right and not ostenta-

tiously act as if we knew so much more than we do. Our knowledge is vast but our ignorance is vaster. It is easier to explain away a symptom on the principles of a sort of 4 o'clock tea kind of physiology than to treat the conditions to which the symptom may be a guide. As a profession we must not puff nor be puffed up. We are getting too proud. The ruling monarch of the world—namely, ignorance—has ever had dogmatism and cocksuredness as his equerries-in-waiting permanently on duty. We rush like a lot of sheep at every new therapeutic fad, and sneer at the wary and wiser public for their indifference."

NEWS AND NOTES.

STATE RECOGNITION OF HOMEOPATHY IN MEXICO.

We are glad to learn that through the efforts of our Mexican *confrères* the official recognition of homeopathy in Mexico is an accomplished fact. A school of homeopathy is to be created forthwith with power to grant degrees after a five years' course of study. We wonder how long British homeopaths, now they have a hospital of qualifying strength, will be content with their present position? The demand for a charter should be made with persistence until the authorities are tired of refusing the demand; and every homeopath, both medical and lay, should join in making it.

THE HOMEOPATHIC DIRECTORY, 1896.

We again remind our readers that the new issue of the above is in preparation, and request that all homeopathic practitioners will do their best to help to make it as perfect as possible. Any practitioner who may not have received a circular will greatly oblige the publishers if he will communicate with The Manager, Homeopathic Publishing Co., 12, Warwick Lane, E.C.: and if any of our readers know of colleagues who have not received copies, they will also greatly oblige by sending word to the same address. The *Directory* comprises a complete list of Colonial and Continental practitioners in addition to those of the British Islands.

“GLONNOIN” AMONG THE ALLOPATHS.

It is a pity when allopaths adopt homeopathic medicines they do not adopt the homeopathic dosage as well.

“NITRO-GLYCERINE PASTILLES.

“A remarkable case of poisoning was the subject of an inquest at Poplar on the 2nd inst. A man, æt. 48, in a good position of life, died after taking some nitro-glycerine pastilles. He had suffered from heart failure, and had been prescribed these pastilles, of which he became so fond that he used to take an unknown number every day. It is supposed that he took a fatal overdose, but, on the other hand, Mr. Martindale writes to *The Standard* a specific denial that such pastilles, of which he was the inventor, are at all poisonous or even dangerous. A sapient juror at the inquest expressed his surprise that the deceased had not been blown up by them.”—*Medical Press*, October 10th.

With all due respect to Mr. Martindale, we cannot regard his notions of what is or what is not poisonous as altogether final. An indefinite quantity of *Glonoïn* 1 would certainly be dangerous in a critical heart case.

THE MANDRAKE.

THE following letter which appeared in *Nature*, of April 25th, will be read with interest:—

“With regard to Prof. Veth’s exhaustive account of the mandrake (referred to in *Nature* of April 11, p. 573), it may be useful to students of folklore to call their attention to the occurrence in the Chinese literature of a similar superstition, wherein *Phytolacca acinosa* (Shang-luh) takes the place of *Mandragora officinarum*. Sie Tsai-Kang’s ‘Wu-tsh-tsu,’ written about 1610 (Japanese edition, 1661, tome x. p. 41), contains the following passage:—‘The Shang-luh grows on the ground beneath which dead man lies; hence its root is mostly shaped like a man. . . . In a calm night when nobody is about, the collector, offering the owl’s flesh roasted with oil, propitiates the spirit of the plant until *ignes fatui* crowd about the latter; then the root is dug out, brought home and prepared with magic paper for a week; thus it is made capable of speech. This plant is surnamed “Ye-hu” (*i.e.*, Night Cry) on account of its demoniacal nature. There are two varieties of it: the white one is used for medicine; the red one commands evil spirits, and kills men when it is internally taken by error.’

“KUMAGUSU MINAKATA.

“April 16.”

The term “mandrake” is applied to several different plants. *Mandregora officinalis*, to which it most properly belongs, is a member of the Solanaceæ. It is also applied to *Podophyllum*, which belongs to the Berberidaceæ.

MEDICAL ETIQUETTE FROM ANOTHER POINT OF VIEW.

OUR contemporary *The Chemist and Druggist* has the following pertinent note in its issue of November 9th:—

“A correspondent of *The British Medical Journal* says:—‘The following letter received from a lady is interesting as an example of ideas of medical etiquette among the public’:—

“‘DEAR DR. —,—My maid's sister is lying very ill of typhoid fever at 56, Rue —,—, and I do not feel quite satisfied that she is being treated according to modern principles. I should be immensely obliged if you would look in at her as soon as you can, and see what you think of the case and the doctor's prescriptions.’

“We understand that an honest and sympathetic request such as this is regarded by medical men with amazement, and when there happens to be amongst them one whose humanity is superior to artificial ethical codes he is anathema to his colleagues. There is, perhaps, no desire more common than the one expressed in the lady's letter, and few requests can surely be more legitimate. What is there peculiar to medicine that prevents its fulfilment?”

MEDICAL ETHICS—HOW MANY?

THE immortal census-question, “Have you had the measles, and, if so, how many?” was recalled to our mind by a passage in the *Lancet* of November 9th. Says the worthy Mrs. Gamp, “The essence of *all* medical ethics is the recognition that the individual practitioner in the last resort is the custodian of the honour of the profession.” The dictionary says that “ethics” is a noun singular in spite of its plural form, but doubtless with “*medical ethics*” it is different. Only, will Mrs. Gamp kindly tell us *how many* there are? It will be observed the patient does not appear to have a place in “any of them”; but only “the honour of the profession,” which would seem to be in a pretty bad way, considering the amount of guarding and bolstering up it requires.

PROFESSIONAL ADVERTISING.

THE following letter by Dr. Campbell Black appeared in the *British Medical Journal* of November 16th:—

“Will you allow me to say that I entirely agree with the views expressed by Dr. D. S. Owens in the *British Medical Journal* of

November 9th on the above subject. I attended almost all the meetings of the Ethical Section at the last meeting of the British Medical Association, and I was much struck with the amount of illiberal nonsense ventilated by the various speakers. Especially did I notice the ridiculous fallacy on which Dr. Potter based one of his objections to professional advertising, which your correspondent justly exposes. Dr. Potter has no right to assume that an advertisement must necessarily be fraudulent, as it would certainly be 'to promise some definite cure or result.' There are myriads of advertisements which would not come under this category and to which no sufficient moral objection could apply. Dr. Potter's confusion arose from his mixing up violations of morality with violations of conventional usage. The former may be held to be unchangeable; the latter to be continually changing; and it is under the latter that the various forms of medical advertising fall. So far as I can comprehend, nothing that is straightforward and truthful can be considered in any sense a breach of morals; it may certainly be a breach of conventional usage; but on this point people have a right to and do judge for themselves in and out of professions. There is no profession that advertises more effectually than the medical in diversified oblique modes, and there is no section of the profession so notoriously guilty of oblique advertising as those who affect to maintain the so-called honour of the profession, and at the same time crush the junior members by arbitrary, unreasonable, and scandalously unfair enactments."

We are glad to see such a wholesome and vigorous outburst as the above. In these superior days, when the brass-plate and the directory are in danger of being declared improper advertisements, such plain speaking is particularly welcome.

COCULUS.—*Cocculus* is similar to *Cyclamen* in dysmenorrhea when there is flatulent colic at night which is relieved by getting up and walking about.—Dewey in *Medical Century*.

CHEKAN FOR CHRONIC COUGH OF AGED PEOPLE.—Dr. W. C. Manley, *Chicago Med. Times*, speaks as follows concerning the efficacy of *chekan*, or *eugenia chequen*, as a remedy in chronic catarrhal inflammation of the respiratory mucous lining. The plant is a native of South America, where it grows in abundance. Dr. William Murrell, of London, highly recommends it in the winter coughs, and it is in these cases, especially in aged people, that I have given it the most thorough trial, and in *chronic* cases it has given the best satisfaction. "It seems to be particularly adapted to those conditions following an acute inflammation of the air-passages, which take on the character and symptoms, except the elevation of temperature, of phthisis pulmonalis in younger subjects. I usually prescribe the fluid extract in half-drachm doses, from four to eight times a day, in a little simple syrup or the fluid extract of liquorice. It is especially beneficial in purulent bronchitis, and I have found it to act nicely in all chronic coughs, particularly when the bronchial passages *only* are involved. I would not use it in phthisis pulmonalis."—*N. Y. M. T.*

ORIGINAL COMMUNICATIONS.

RELIGIOUS MELANCHOLIA WITH CONSTIPATION CURED WITH *PLUMB. ACET.*

By F. LAYTON ORR, M.B.

A GIRL, aged about 20, was brought to the London Homeopathic Hospital by her mother, who gave the following account:—

Her daughter was in good health and spirits until about a week ago. She was a teacher in a Sunday school, very devoted to her class, and in the habit of studying books on religious subjects to a great extent. The mother thought she had read too much.

On the previous Sunday afternoon she was found sitting in her room at the time she ought to have gone to her class. When questioned she appeared dazed, and could give no explanation of her conduct. Since that time she had taken no interest in her surroundings, and did not appear to know her friends, but sat in one place, refusing to speak or eat. No sleep at night; never violent.

Examination showed the girl to be sallow, with a dreamy, expressionless look on her face. She could not answer a question, nor did she know where she was.

As there was a history of chronic constipation, and the bowels had not acted for six days, I gave—on the indication “Religious and other melancholy, with very obstinate constipation,” found in *The Prescriber*—*Plumbum Aceticum* 6 every three hours.

The mother returned with her daughter after the lapse of a week, saying that a change had come over the girl after the second dose, and that she was now all right in her mind. Examination confirmed this statement. Bowels had acted well.

An amusing point in this case was the fact, afterwards discovered, that the mother had brought the girl to the Homeopathic Hospital *by mistake!* She had intended to take her to the National Hospital for the Paralysed and Epileptic, Queen's Square.

27, Carlton Terrace,
Surrey Road, Norwich.

CASES ILLUSTRATIVE OF THE APPLICATION OF THE LAW OF SIMILARS.

By D. RIDPATH, M.D.

AFFECTIONS OF THE EYES.

CASE VII. (Feb. 28, 1893). Female child, *æt.* 23 months. For the last twelve months has suffered from subacute inflammation of the orbital and palpebral conjunctivæ of both eyes, agglutination of the eyelids, and falling out of the eyelashes. Her whole appearance was most painful to witness. She had been under allopathic treatment for a year without improvement. There was also constipation.

SELECTION OF REMEDY.

In Berridge's *Eye Repertory* I find under—

Eyelashes falling out—*Alumina, Apis, Bufo, Chloral.*

Swelling of eyelids—*Alumina, Apis, Bufo, Chloral.*

Adhesion of eyelids—*Alumina, Apis.*

Constipation belongs both to *Alumina* and *Apis*, but is more marked in *Alumina* than in *Apis*, which induced me to select the former.

I therefore gave one dose of *Alumina* 1m. In a fortnight the inflammation of the eyes had disappeared. In a month there was no appearance of there having been anything the matter with the child. The eyelashes had grown, and the constipation was cured also.

CASE VIII. Male, *æt.* 29. Diplopia. For some months he has been afflicted with the very inconvenient and troublesome condition, viz., that he seems to see two of everything he looks at. This condition was found to exist after a long railway journey during which he had been reading most of the time.

He has a burning sensation of the eyes and photophobia, aggravated by looking for any length of time and by looking at near objects. Right eye principally affected. He has dizziness, worse when sitting, and better when in a room than when in the open air. Made worse by natural light. Micturition is interrupted.

This condition of the sight has failed to be relieved by an ophthalmic surgeon of the old school.

SELECTION OF REMEDY.

In Berridge's *Repertory* I find under—

Objects multiplied—*Æthusa, Agar., Alum, Amm.-c., Aur., Bell., Bar.-c., Bryon., Calc.-c., Chelid., Cic., Clem., Cimic., Con., Gel., Graph., Hydrocyan.-ac., Lyc., Cycl.-dig., Nicc.-carb., Nitric-ac., Ntr.-m., Sulph.*, and many others.

Worse when looking at distant objects by right eye—*Agar., Calc.-c., Con., Gel., Graph., Lyc., Nitric-ac., Ntr.-m., Nicc.-carb., Sulph.*

Worse when looking fixedly (long exerting the eyes)—*Agar., Calc., Con., Gel., Graph., Lyc., Nitric-ac., Ntr.-m., Sulph., Nicc.-carb.*

Vertigo better in a room—*Con., Sulph.*

Interrupted micturition—*Con., Sulph.*

In Bœninghausen's *Repertory*, *Conium* is printed as being in the first rank for this last symptom, while *Sulph.* is found only in the second rank. I at once administered a few globules of *Con.* 800, and in less than a month he had recovered completely and his sight was normal.

CASE IX. (May 28, 1895). Male, *æt.* 17. For three years has suffered from a most painful sensation as if there were an eyelash or hair in the right eye. During these three years of suffering there have been frequent short intermissions from the pain. On examining the eye carefully I ascertained the absence of any foreign body therein. He feels the pain worse immediately on waking in the morning. It is aggravated by shutting the eye, by gas-light, and by reading.

He was a weakly child from birth. In early childhood he was rickety, and had profuse night-sweats on the scalp of the occiput, which left the pillow wet in the morning. There are now no visible signs of this constitutional condition.

SELECTION OF REMEDY.

In Berridge's *Eye Repertory* I find under—

Sand (dust, foreign body), sensation of, in right eye—*Allium.-c., Agar., Alumina, Amb., Amm.-cl., Amphis, Apis, Arn., Asclep., Assaf., Aur., Bar., Ber., Bry., Buf., Calc.-c., Calc.-ph., Cinnab., Carb.-an., Carb.-v., Cocc.-c., Chelid., Crocus, Phosph., Puls., Rhus.-v., Sulph., Sep., Thuja.*, and many others.

Worse on waking (after sleep)—*Agar.*, *Alumina*, *Bry.*, *Calc.-c.*, *Chelid.*, *Con.*, *Crocus*, *Digit.*, *Lycop.*, *Phos.*, *Puls.*, *Rhus-v.*, *Sulph.*, *Sep.*, *Thuja.*, &c.

Aggravation on closing eyelids and by gas-light—*Calc.-c.*, *Chelid.*, *Con.*, *Croc.*, *Lyc.*, *Phos.*, *Puls.*, *Rhus-v.*, *Sep.*, *Staphys*, *Stram.*, *Sulph.*, *Thuja.*

The constitutional condition in childhood pointed strongly to *Calc.-carb.* as the remedy most called for of those enumerated above. I accordingly gave him one dose of *Calc.-carb.* 10m. and S.L. three times a day. Before the end of June he was quite well, and remains so to the present time.

Comments.—(1) There is one argument used by many of the opponents of homeopathy, by whom I mean those ignorant of its principles. They often aver that the good effects of homeopathy are mostly or entirely due to the faith shown by its votaries in the efficacy of the remedies taken. At the same time they allow that in the treatment of children it undoubtedly is beneficial.

But these two statements do not agree. Children are entirely destitute of all ideas of "pathies" or of there being different methods of medical treatment. But children are admitted to be specially susceptible to homeopathic treatment. Where, then, comes in the efficacy of faith?

(2) As a matter of fact, I believe it is generally found that children are especially benefited by the treatment by similars. For this I venture to offer the following explanation: In their short lives they have not become saturated with any great quantity of the vast amount of drugs and poisons used by the allopaths, nor have they partaken so freely of the various pills and patent medicines of the quacks as is so generally the case with adults. Thus there are fewer effects of previous drugging to combat, and the treatment begins, as it were, on a clean subject.

(3) We hear now a great deal about people consulting "specialists" for diseases of one or other organ of the body. I always inform my patients that true and good homeopaths are specialists in the treatment of any disease of any organ, and that we are specialists in every case we meet with. Having the remedies that we possess and the law *similia similibus curantur*, we can obtain results such

as cannot be obtained by the crude and unscientific use of the drugs, poisons, and instruments of the old school.

In point of fact, by our remedies, carefully and skilfully selected, we can cure diseases and conditions such as cancer, cataract, &c, curable (?) only by the knife or other surgical operation by the old school.

8, Grange Crescent, Sunderland.

A NOTE ON *CONIUM* AND *NAT. SULPH.* IN URINARY DISORDERS.

By GUSTAV PROELL, M.D.

AGAINST very troublesome strangury and ischuria I have had excellent results from two remedies: 1. *Conium* 10 if the urine cannot be discharged from nervousness or swelling of the prostate. 2. *Natrum Sulphuricum* (Schüssler), 5 trituration, if the whole quantity of urine cannot be excreted or the bladder cannot be entirely emptied—if the patient is always obliged to use the catheter. After the use of *Nat. Sulph.* he no longer needs the catheter.

Every one should make a habit of urinating at least five times a day—morning on awaking and night before going to sleep, and before each meal, and as everybody eats at least three times a day, this makes up the five times. The reason why everybody should empty the bladder immediately before meals is in order that there should be enough room in the bladder for receiving new liquids taken with the meals; for if the bladder is full the new urine must return into the blood and cause uremia.

Graz in Austria (Styria), Nov., 1895.

REMARKS ON THE "MATERIA MEDICA."

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

"*MAGNES ARTIFICIALIS*" (*continued*)—"MAGNES ARTICUS."

"STOOL": Frequent but almost unsuccessful desire for diarrhea in the morning, alternating with rumbling of the flatulence in the abdomen; constipation with headache for several days as if there were something wrong in the

brain, the head is uniformly affected, the mind feeling vexed and impatient; *violent hemorrhoidal pain in the anus after stool (erosive) as if sore, and as if the rectum were constricted*; prolapsus recti when going to stool. *Urinary and genital*: Burning in the bladder, especially in the region of the neck, a few minutes after urinating; burning in the urethra, in the region of the caput gallinaginis, during an emission of semen; early in the morning when waking he feels a burning itching in the region of the vesiculæ seminales or of the caput gallinaginis, inducing a desire for an embrace—the burning in the latter place increases during an emission of urine; want of sexual desire, aversion to an embrace; increased metrorrhagia in a female advanced in age; the menses, which had ceased a few days ago, returned next day after imposing the magnetic surface, and continued ten days. *Respiratory organs and chest*: Coryza, which comes and disappears again suddenly; frequent fits of nightly cough which do not awake him; *mucus in the trachea which it is easy to hawk up*, evening and morning (a. 24 h.); asthma after midnight; when waking and reflecting, occasioned by mucus in the chest, it is diminished by coughing; violent fit of cough, with profuse expectoration of blood (a. 6 d.); pricking in the chest and a cold shuddering burning through the whole body; violent oppression of the chest, tearing in the stomach and bowels, and heating in the shoulders; four burning emanations from the middle of the chest toward either shoulder and side, back, and small of the back, with anxiety and sensation as if the parts were being dissected. *Extremities*: Cracking in the cervical vertebrae in the morning during motion; *pain in the sacro-lumbar articulation in the morning when in bed when lying upon the side, and in daytime when stooping a long time*; pain in the humeral articulation, as if the head of the bone were dislocated; tearing jerkings in the muscles of the arm when staying in a cold place; uneasiness in the sound arm; sudden bending and sensation, as if dislocated in the first and second joint of the thumb (a. 24 h.); sensation in the upper part of the calf when rising from a seat, as if it were the short; pain in the outer ankle as if sprained, or an arthritic pain when rising from a seat and commencing to walk—the pain disappears when continuing the walking (in a few hours); pain as of corns in the upper part of the tarsal joints; burning emanations from the stomach

through the abdomen and back—the emanations separate in the small of the back, and extend into the lower limbs; beating in the top of the shoulder, with sensation as if it were being torn; pain in the muscles of the arm, as if they were divided into fine parts; *drawing from the head down to the tip of the fingers*; burning and cutting in the arms and chest, with cold shuddering; burning in the elbow-joint, as if torn by hot pincers, with violent burning and sparkling of the eyes; painful going to sleep of the thighs and legs when sitting, disappearing when walking. *General symptoms*: Early in the morning when lying on the side he feels a continuous, intolerable, simple, or bruised pain in all the joints, where the cartilages of the two bones touch one another—the pain abates as soon as one turns to the back, the head bent backward and the knees bent and at a distance from one another; the joints are painful when moving the limbs, as if they had been sprained; the limbs go to sleep, especially when standing or walking after rising from a seat; the wound, which is almost healed, commences to pain again like a recent wound; boils break out on various parts of the body, passing off soon; corrosive pains in various parts—for example, below the ankle; itching of the affected parts, the pain is increased by scratching, it is like a sort of burning in a sore place; single jerks in the body previous to going to sleep; early in the morning after rising he feels a great faintness, with anxiety (a. 44 h.); burning emanations through all parts of the body in every direction; heaviness in all the limbs, and palpitation of the heart from omitting the usual imposition of the magnets; he moans on account of a sensation in all the parts, as if they were being cut up; red eruption in the palms of the hands resembling watery vesicles; deep lentil-sized ulcers at the place where the magnet lay; none of the convulsions excited by the magnet alter the pulse; paralysis for ten days, with loss of sensation, the limb having its natural temperature and being moist; during the loss of consciousness the fingers are moved one after the other, after the return of consciousness a profuse sweat broke out; long lasting swoons in which she retained her consciousness. *Sleep*: coma vigil early in the morning for several hours, after sunrise sopor or deep sleep set in full of heavy passionate dreams (for instance, vexing dreams)—the sopor terminates with a headache, as if the brain were

sore all over, disappearing after rising; dreams full of feasting, boasting, and bragging; he wakes at three o'clock in the morning, in a few hours he falls into a sopor full of dreams, *afterwards feeling of heat in the limbs without thirst, the limbs requiring to be uncovered at first, but afterwards covered carefully*; wakeful drowsiness in the night toward morning, after sunrise the drowsiness increases to a stupor, during which he hears or feels nothing, except violent pain as after a long journey on foot and a bruised feeling in all the joints, obliging him to change the position of the limbs all the time, accompanied by loud grunting in the abdomen, which is interrupted from time to time by emission of flatulence and a disagreeable feeling of warmth in the body, during which time he generally lies on the back with an open mouth; sweat without heat early in the morning while asleep, or mild copious exhalation of the whole body, which is not exhausting, and disappears after waking; he talks when asleep; when asleep he snores during inspiration, and wheezes through the nose during an expiration; in the evening before lying down he is attacked with symptoms of a catarrhal fever, the long bones are painful as if bruised in the middle, accompanied by a dull headache causing cloudiness, he is hoarse, and the chest (trachea) is lined with tenacious mucus (a. 4 h.); sleep interrupted by groaning. *Fever*: shuddering over the whole body, partly cold, partly burning, and causing an intense pain; profuse sweat, with shuddering; sweat in the region of the stomach; fever after midnight, no shuddering, disagreeable sensation of heat in the whole body, especially in the palms of the hands and bottom of the feet, with dryness in the throat and sweat in the face, nape of the neck or over the whole body; disagreeable troublesome warmth in the whole body, with sweat in the face without thirst (immediately); imperceptible exhalation of the whole body, having a strong pungent though not disagreeable smell, resembling the exhalation which is perceived coming from a healthy man while sweating; sweat over the whole body, especially in the back, early in the morning while asleep (from touching the centre of the magnetic bar). Before making any remarks, I will give extracts from the symptoms obtained from the separate poles distinctively, and first from the *North Pole of the Magnet*.

"MAGNES ARCTICUS."

Moral: Weeping mood, with chilliness and a chilly feeling (a. 2 h.); he felt in the evening as if it were difficult for him to commence the execution of his designs, and it was long before he made a beginning; but as soon as he had commenced, he carried out his designs with great promptness; indolent fancy he sometimes felt as if he had no fancy at all; when sitting he felt as if he had lost all powers of motion, and had grown fast on the chair; when in motion, however, he perceived that he was perfectly capable of moving; sleep ceased at three o'clock in the morning, and he became anxious; he became solicitous about his health as if he were dangerously sick, he became gloomy, he grudged every word which he was obliged to utter; *while doing his business he talks aloud to himself*; he is alternately sad and cheerful; calm, composed mood, devoid of care (a. 1½ h.); cheerfulness, and feeling of great strength, alternate with want of courage and weakness.

Head: Vertigo, as if she would fall in every direction; after having gone upstairs she feels a motion from the centre of the brain towards either ear, like the pendulum of a clock; he is not clearly conscious of himself, is unable to think correctly, sensation as if his understanding had become arrested, and as if something were pressing his brain down and were pressing the eyes out, a sort of fainting turn; weak memory, but he feels cheerful; two days in succession he wakes from his siesta with a violent headache, as if the brain were bruised and obtuse, the headache decreases after he is fully awake and disappears gradually after rising (a. 3 and 23 h.); sensation as if the head were being pressed down by a load; large tubercles on the hairy scalp, painful only when touched; he staggers to and fro when walking in the open air (a. 22 h.); rush of blood to the head and suffusion of heat in the cheeks; tension of the scalp as if it were too firmly adherent to the skull, causing an obtusion of the head for several hours.

Face and eyes: Paleness of face; cold movement as of cold breath in the eyes; staring look; *painful feeling of dryness in the eyelids in the morning when waking* (a. 14, 20 h.); *jerkings and drawing in the eyelids; drawing in the eyelids with lacrymation; itching of the eyelids; pricking in the eyelids; burning in the weak right eye*, it became red and filled with water (the magnet being held in contact with

the weak right eye for a quarter of an hour); *coldness of the weak eye as if the eye were a piece of ice*, as the coldness passed off a long-continued pricking was felt in the eye; *uneasy motion of the eye*; sensation as of a cobweb in front of the eyes; shine in the eye as of a shooting star. *Ears*: Whizzing and a drawing sensation in the ear; tightness of the tympanum; crackling in the ear as when burning dry wood, when holding the magnet in the ear. *Nose*: Illusion of smell, he imagined the room smelled of fresh whitewash and dust; violent bleeding from the nose for three afternoons in succession, increasing every afternoon and preceded by an aching pain in the forehead (a. 4 d.); redness and heat of the tip of the nose, followed by hot red circumscribed spots on the cheeks; bleeding from the left nostril at two o'clock in the afternoon (a. 46 h.). *Mouth, jaws, and teeth*: Clawing-aching pain in the left submaxillary gland (a. 2 h.) tearing pain in the cervical muscles as if they were too weary; slow, extremely sharp, and painful prickings in the lower lip; toothache as if the tooth were being torn out, it becomes worse after a meal and when sitting or lying down, but improves when walking; accumulation of saliva in the mouth (immediately); painful drawing in the articulation of the lower jaw when moving it as if it were being dislocated by force (a. $\frac{1}{2}$ h.); the teeth of the upper jaw feel as if they were loose (a. 28 h.). *Appetite and gastric*: Long-continued rancid heartburn; she felt so replete at dinner she was unable to eat; greedy appetite at supper; *frequent eructations of mere air*; aversion to milk; the stomach feels as if spoiled food weighs heavily in his stomach. *Stomach and abdomen*: She is waked in the night by a pressure in the abdomen as of a stone; sensation in the epigastric region and in the stomach as if the walls of the stomach were sensitive to pain; coldness in the abdomen immediately after touching the magnet; flatulent colic immediately after supper, sharp pressure in all parts of the abdomen from within outward as if it would burst, relieved when sitting, immovable (a. 30 h.); continuous aching-pinching pain in the whole of the hypogastric region, like a sort of colic, excessively increased by reflexion and mental exertions, and in that case accompanied by nausea; the colic is somewhat diminished by strict rest, but disappears entirely in the space of an hour by touching the zinc; in the evening and morning a pressure as of flatulence in various parts of the bowels, resembling a

pressure on a bruised spot, accompanied by a similar pressure in various parts of the brain; both the headache and colic disappear immediately after the emission of flatulence, the headache and colic return with the return of flatulence, which makes one, moreover, feel ill-humoured; the flatulence has a fetid smell (the south pole removed the painful uneasiness in the abdomen and the headache within the space of an hour); *gurgling in the abdomen as if a quantity of flatulence were incarcerated, causing a writhing sensation which rises up to the pit of the stomach, and causes eructations* (a. $2\frac{3}{4}$ h.). *Stool*: Drawing, almost dysenteric, pain in the epigastrium early in the morning, followed by difficult expulsion of very thick feces (a. 24 h.); blood comes off with stool twice a day (a. 4 d.); aching-pressing pain in the rectum (not in the anus) after midnight, while in a slumber lasting for hours, and disappearing after being wide awake. *Urinary and genital*: *Dark urine*; the secretion of urine decreases in the first hours, but increases after the lapse of 24 hours; relaxed condition of the neck of the bladder from one o'clock at noon until eight o'clock in the evening, the urine dropping out involuntarily (a. 3 h.); continuous smarting pain in the raphé of the prepuce after urinating; nightly involuntary emission, rousing him with a feeling of anxiety; moderate desire for an embrace; curative effect on insufficient menses. *Respiratory and chest*: Obstruction of one nostril with cold, the other secreting a thin mucus; he was obliged to breathe spasmodically in deep and intermittent inspirations, as if his breathing became arrested, while he felt a desire to inspire as much air as possible, he was at the same time covered with sweat over and over (immediately); oppression of the chest with anxiety; itching of the nipples (a. 1 h.); *pressure in the region of the heart* (immediately); the desire to cough is seated in the finest and most remote bronchial ramifications, where nothing can be got loose by the cough, the mucus which is thrown off is secreted in a higher region, the titillation remaining the same, inasmuch as it has its seat lower down—hence the cough is very fatiguing and racking, even the head is concussed, and the whole body becomes warm, after which a general exhalation sets in until morning, the cough abating in this case; discharge of an acrid fluid from the nose; complete obstruction of the left nostril at night, the right nostril being open but entirely dry, as in dry coryza. *Back and upper ex-*

tremities: Gurgling and creeping sensation between the scapulae; the left arm is much heavier than the other; weight in the upper arm (immediately); pleasant feeling in the arm joint, as if it enjoyed rest after great weariness; trembling of the hand which touches the magnet and of the foot of the opposite side; drawing in the fingers from below upwards, with creeping in the fingers immediately, directly after he felt somewhat desponding; heaviness in the upper limbs as if the viens contained lead (immediately); violent coldness in the arm over which the magnet had been moved (in a female in magnetic sleep, after being touched with the north pole of the magnet). *Lower extremities*: Great faintness in the lower limbs (a. 24 h.); weariness and numbness in the lower limbs, as if they had gone to sleep, without tingling; pain in the upper part of the toes, as if they had become sore by walking; great weariness of the lower limbs from four until eight o'clock in the evening (a. 1 h.); excessive weakness of the lower limbs when walking, as if they would break; rigid tension in the hamstrings when rising from a seat, as if too short (a. 3 h.); voluptuous itching in the bottom of the toes of the left foot (a. 27 h.). *General symptoms*: Stitching in the steatoma; crawling itching over the skin; continuous digging-up stitches in various parts, becoming sharper and more painful in proportion as they penetrate more deeply into the flesh; tremulous, vibrating, numb sensation; bruised pain in the neighbouring parts and as if one had carried a heavy burden; *tremor in the part touched by the magnet* (immediately); *sensation of coldness in the part which was touched by the magnet* (a. $\frac{1}{2}$ h.); burning pain in the existing herpes the whole day; drawing in the periosteum of all the bones, as is felt at the commencement of an intermittent fever (but without chilliness or heat) (a. 2 h.); sensation of dryness and tightness in the body, with want of strength; he is very faint, had to rest himself while walking in the open air, and was melancholy and desponding. *Sleep*: Excessive spasmodic yawning, with pain in the articulation of the left jaw, as if it were on the point of being dislocated; frequent yawning without drowsiness; sopor, several times he was attacked with a sudden sensation as if he ought to shut up his eyes, and as if he were going to fall into a pleasant sleep, an irresistible sensation which threatened to deprive him suddenly of consciousness; vivid but innocent and impassionate dreams about historical events, he is unable

to recollect them when waking; she saw a person in a dream, and the next day she saw that person in reality for the first time; vivid dreams the whole night about objects which are not disagreeable but have no connection with one another; when waking he is unable to recollect any of them.

CASES OF TYPHUS.

(Concluded from p. 511.)

By Drs. SICK and LORENZ, of the Deaconesses' Institution, Stuttgart.*

5. E. St., *æt.* 28, probationer, had nursed the last case. On the 10th of Jan. she went to bed with violent pains in head and fever, 39·4°. *Gels.* 6, with occasionally *Acn.* and baths, with *Bry.* 30, seemed to be doing good. The evening temperature was 40°, but not much less in the morning. Roseola and enlarged spleen came on in the second week. But towards the end of the week the evening temperature increased; on the evening of the 22nd, on which day there occurred violent shooting pain in the left thorax, it rose to 40·6°. *Bry.* 30 and *Rhus.* 30 were given, but as the pains returned *Canth.* 6 and compresses were applied every three hours. On the 25th of Jan. a considerable pleuritic effusion in the left thorax was found. But the pains and fever declined rapidly, and by the end of the third week they were quite gone. The exudation went off rapidly, and the patient made a good recovery.

6. L. M., *æt.* 25, employed as nurse in the Katharine Hospital, where she had to attend to typhus patients. On the 19th of Jan. she got three calomel powders which caused copious stools. But as the temperature rose she got lactophenin and baths. She came to the institution on the 23rd of Jan., when her evening temperature was 40·4°. The medicine was given, but as she stood the baths well they were continued. Up to the 31st of Jan. she had thirteen baths at 21°, as often as the temperature went above 39°, besides a dose of *Rhus.* for a smart attack of diarrhea. On the 3rd of Feb.—end of third week—the defervescence was complete. After a few weeks in the convalescent home she could return to her duties in March (*Ibid.*).

7. A. S., who had been long under treatment for an

* From the *Allg. Hom. Ztg.* vol. lxxxi. p. 2 *et seq.* The first ten cases are by Dr. Sick, the last two by his colleague in the institution, Dr. Lorenz.

obstinate conjunctivitis with granulation, for which she had taken, with good results, *Puls.*, *Acon.*, *Mer.*, and *Thuja* 30, after which the ophthalmia gradually subsided. She did some slight nursing of the typhus patients. In order to get the eyes quite strong she was sent in the beginning of Jan. to Oberesslingen. But she soon became ill there with pains in the bowels and diarrhea. Towards the end of Jan. fever came on, and she was brought to the Stuttgart Institution. Her evening temperature was $39\cdot7^{\circ}$. The eye disease showed a poor constitution, and her strength being diminished by disease and work, the case promised to be extremely grave. The morning temperature was seldom under $39\cdot5^{\circ}$, and she could not take any considerable quantity of nourishment. *Bapt.*, *Gels.*, *Bry.*, and *Rhus* were given in succession. But the disease went on, she vomited almost everything, and the severe diarrhea continued. On Feb. the 6th, when the evening temperature was $40\cdot4^{\circ}$, blood was first observed in the stools. The vomiting and diarrhea increased at the same time, even aerated water was almost all thrown up. *Natr. Sulph.* 6, *Ipec.* 3., and, later, *Arsen.* 6, were given without appreciable effect. The bleeding declined next day, but increased much on the 9th, the evening temperature being $40\cdot8^{\circ}$. The evening temperature fell on the 10th to $40\cdot1^{\circ}$, morning temperature $38\cdot5$, the pulse at wrist was nearly imperceptible, and the end seemed at hand. But after *Phos.* 6., followed by *Camph.* 2 in quickly repeated doses, the patient rallied, though she looked like a corpse and was incapable of moving in bed. The bleeding was modified; in place of being bright red it had a brownish colour. On the 12th the evening temperature was again $40\cdot1^{\circ}$, on the 13th and 14th $40\cdot2^{\circ}$, and then it gradually fell.

For the weakness *Phos.* 6 was given, and, on account of the vomiting, in alternation with *Cocc.* 6; but when the fever increased to the above height, and the frequent stools not free from blood persisted, *Arsen.* 30, *Apis* 6, and *Nitr.-ac.* 30 were given. The blood now disappeared completely, but the digestion did not improve; extremely little nourishment was taken, and even champagne and wine were often rejected, vomiting was frequent, and there were about five thin stools in the twenty-four hours. The case seemed desperate. She complained constantly of extremely disgusting taste and of complete dryness of the swallowing

apparatus, though next to nothing objective was observed. *Bapt.* 6, *Cuprum* 30, *Apis* 3, *Merc.* 30 had little or no effect. Nothing remained to be done but to trust to the small amount of nourishment and wine she could take without repugnance; if more was given vomiting immediately ensued. By the 27th of February the temperature had sunk to normal, and there was a slight improvement in the digestion and a slight increase of strength. Still there was extreme weakness, and the morning temperature on two occasions was only 36.5° in anus. This we might have thought was enough, but on March 3rd, without any assignable cause or any change of diet, fever again set in; on the 6th and 7th the morning temperature was up to 40° . The lungs were all right, and had been so during this whole illness, but the digestion became worse; the diarrhea continued in its former intensity, and the patient's life seemed to hang on a thread. At length, on March 18th, the fever began to decline permanently, no subnormal temperature appeared, and the morning and evening temperature differed only by a few tenths of a degree. In place of the diarrhea profuse sweating set in so that the linen had to be changed six or eight times in the twenty-four hours. In the last febrile attack the patient got *China* 30, *Arsen* 30, and *Baryta* 6 without appreciable effect. The patient could leave her bed in April, and by the middle of May was so far recovered that she could be sent to the Convalescent Home at Freudenstadt. The last traces of the eye affection had disappeared during the serious illness.

8. J. M., *æt.* 35, sister employed in the kitchen; never came in contact with typhus cases. Took ill beginning of February with symptoms of gastric fever, with evening temperature of about 39° . As the disease seemed to be quite gone after the administration of *Acon.*, *Nux. v.*, *Bry.*, she was treated in her private room, and only brought into the sick department on February 17th, when her morning temperature approached 39° and the evening temperature was 39.3° (in axilla). She got *Bapt.*, which seemed to act well, the temperature on the 19th being down to 37.2° . The following evenings it rose again to 38.4° , but the disease was checked, and under the continued employment of *Bapt.* she was on the 25th (end of third week) free from fever. Diarrhea now coming on *Bapt.* was discontinued. Though no change was made in diet—which was liquid—on March 4th the temperature, which in the morning was

subnormal— 36.9° —rose in the evening to 39.6° , and on the 7th and 8th subsided almost as quickly. I think this sudden temporary rise of temperature was owing to influenza, and I believe the same was the case with the previous case (No. 7), the secondary fever occurring about the same time in both patients. As the temperature was declining she became affected with difficulty of swallowing, and the soft palate and mouth became slightly reddened.

9. M. B., *et.* 23, probationer, had come into the Institution only a few weeks before being taken ill on March 12th. She had not been in immediate contact with typhus patients. Her evening temperature on the 13th was 39.6° , the following day 39.7 ; from that time it declined. She complained chiefly of violent pains in the head, for which she got *Acon.*, *Bell.*, and *Gels.* As these went off the gastric symptoms increased, and the spleen became greatly swollen; she got *Bry.* 30, one dose. The temperature from this time declined gradually for several days. On March 21st it was normal. Tongue thickly coated, little appetite, scanty dark urine, confused head and slight delirium at night continued for long during convalescence, which, considering the short character of the main disease, was very slow. In the middle of April she could leave her bed for a few hours, but it was the middle of May before she could be sent to the Convalescent Home at Freudenstadt.

10. G. W., *et.* 39, shopkeeper, a big, strong, well-nourished man, from the village of Schmiden, where typhus was prevalent. His wife and children and maid were all taken ill with the fever. He came into the Institution on the 22nd of Oct., after being treated for a week at home, chiefly with castor-oil and a great deal of wine. His evening temperature in axilla was 39° . He had repeated violent epistaxis, which led me to stop the wine. Pronounced roseola and swelling of spleen. He got first *Acon.* and *Bry.*, whereupon the bleeding quickly stopped; the following evening the temperature was $39^{\circ}4$. The morning temperature always showed a considerable fall. On account of the violent headache he got *Gels.*, and later *Bell.*, with good effect. He then got violent pains indicating severe inflammation of the middle ear, which yielded rapidly to *Ol.-tereb.* 3. From this time the evening temperature soon exceeded 39° ; from the 3rd of Nov. it remained under 38° ; from 5th to 9th—end of third week—the temperature was normal. In order to get up his strength quickly I allowed

him some soft-boiled eggs. But this proved premature. On the 10th of Nov. the temperature rose to $38^{\circ}4$, and on the 13th as high as $40^{\circ}2$. At the commencement of this increase of fever, which was attended by a moderate amount of albuminuria, great weakness, much sopor, *Ferr.-phos.* 6 was given every hour; after two days he got copious sweats, which made me leave off the *Ferr.-phos.* and to substitute *Arsen.* 30, followed by *Laches.* 6. But the fever began to rise again, so that on the 16th, when the morning temperature was not below 39° , I returned to *Ferr.-phos.* every two hours, whereupon the fever soon declined and then came on frequent very thin stools, seven times in the twenty-four hours, which I combated with *Rhus* 30 and *Arsen.* 30. The diarrhea passed off rapidly, the fever did not return, and convalescence was established by the 24th of Nov. Recovery was only disturbed by urinary difficulties (frequent painful micturition, a common result in the typhus of males). *Cann.* 3, 3 dr. three times a day, quickly relieved him; but he required a dose of *Canth.* 6 on the 7th of Dec. to take this entirely away. By Christmas he had entirely recovered and was able to go home.

11. F. E., *æt.* 27, a delicate, nervous woman, came under treatment, after having suffered for a week from anorexia and headache, on the 17th of Sept. Temperature in axilla between 40° and 41° , spleen enlarged, roseola, and diarrhea. Furious delirium, chiefly at night, temporary loss of consciousness. *Arsen.*, *Bell.*, and *Bry.* were given without much effect; bath at 25° was rather soothing. From the 26th of Sept. she got *Chloroform*, 10 dr. in 200 of water, a tablespoonful every two hours. After the gradual decline of fever, return of appetite, but the delirium lasted till the entire cessation of the fever, which took place on the 2nd of Oct., the end of third week. On the 28th of Sept. she was brought to the Deaconesses' Institution; here the temperature never got as high as 40° , but during the first days was above 39° . The *Chloroform* water was continued till the 2nd of Oct. When the convalescence had advanced considerably she still had slight derangement of the mind, which showed itself chiefly in abnormal cheerfulness. *Ign.* 6 was frequently given for this, and for occasional colic *Colocynth* 6, and for urinary troubles *Canth.* 6. Otherwise convalescence was undisturbed and was tolerably rapid.

12. F. H., *æt.* 26, a tolerably robust woman, came in the third week of her disease, on the 27th of Sept., in an apparently hopeless condition, with threatened paralysis of lungs and heart. Pulse weak and quick, over the whole lung numerous moist rales, great dyspnea, cyanosis, soporous state. *Phos.* 6 and *Bry.* 6, three drops alternately every two hours, quickly improved respiration and heart's action, the rales diminished, the consciousness returned, appetite returned. Severe nocturnal cough, which tormented her much, was removed by a few doses of *Tart.-em.* 6. The fever was very high, evening temp. 40·5°, falling to 39° in the morning. Besides the medicines she got baths at 25° for ten minutes, at first twice, than once a day. From the 3rd of Oct. marked diminution of fever, which ceased altogether from the 11th—about the end of fifth week. Convalescence proceeded undisturbed, but when she left in Nov. the rales in the base of lungs had not entirely ceased.

MATERIA MEDICA—MISCELLANY.

Collected and arranged by J. R. P. LAMBERT, M.D.

“EPHEDRA VULGARIS”—A PROVING.

DR. MOURAVOW relates some interesting symptoms obtained by proving this drug, of which the most remarkable was the production of exophthalmos. It also produced violent headache, nausea, and general weakness. The heart beats were accelerated and weakened, so that sometimes the systole failed to produce a perceptible effect at the wrist.

The following symptoms were also observed: Extreme apathy and great fatigue, stiffness of the neck, and backward pulling of the whole body on turning the head; left-sided hemicrania with numbness of whole left arm; heavy eyes starting from their sockets, as if pushed out, pain in the eye; respiration accelerated. It also produced a dull pain in the splenic region. The author concludes that the drug acts principally on the cervical sympathetic, and also causes a congestion of the spinal cord.

“CUNDURANGO” IN ULCER OF THE LIP.

The following case is reported by Dr. Goullon:—A hotel keeper, aged 56, had a suspicious-looking ulcer on the left

side of his lower lip, with irregular indented edges. It was about the size of a pea, had a purulent base, and a tendency to form crusts. At the beginning vesicles appeared and disappeared as such, and desquamation also occurred several times.

Cundurango in the second potency, mij daily, cured in two weeks.—*Indian Hom. Rev.*

The description does not suggest a malignant character.

“STANNUM” IN NEURALGIA.

The following case reported by Dr. Mossa is of interest, in that it gives periodicity as a clinical symptom of *Stannum*:—A man of 38 was attacked one morning by a violent hot throbbing pain from the sinciput to the vertex and occiput, with a sensation as if the head would split open with each throb; the skin of the forehead was swollen, and the eyelids almost closed. The pain lasted from 10 a.m. to 4 p.m. daily, and was worst at 1 p.m.; at 4 p.m. he was well; noise aggravated very much.

Stannum cured him rapidly on this occasion, and also a year later when the same condition recurred.—*Ibid.*

“CAUSTICUM” FOR VESICAL ATONY.

A writer in the *Homeopathic Recorder* speaks very highly of *Causticum* in the treatment of paralysis of the bladder, resulting from repeated over-distention, occasioned by being prevented from emptying the bladder at the call of nature. He has found the drug especially valuable in the case of shop assistants, school teachers and schoolgirls.

“ERYTHROXYLON COCA” IN NYMPHOMANIA.

Dr. Ghosh, of India, reports a very severe case of this affection occurring in a young married woman, which was rapidly cured by this drug. Previously to its use *Platina* had been given in low and high potency with marked temporary alleviation, but each time the trouble returned as bad or worse than before. The indications which led to the use of *Coca* were the following:—She had lost all sense of modesty, and when she was describing her symptoms she looked like a mad woman, and very anxious in appearance, though she answered questions sensibly, and her mind was quite clear. She was very active in her work, though she took little food or drink, and passed sleepless nights.

Coca was given first in drop doses of the 1x t.d. for three days with complete relief of her old symptoms, but some new ones developed, viz., weakness of the legs, giddiness, weak memory, palpitation with a constriction in the cardiac region; dyspnea with frequent need to take a deep breath, suffocating on lying down. The drug was then given in $\frac{1}{4}$ -drop doses of the ϕ tinct. for three days, and then in the same dose twice daily for a week, when the patient was practically cured, except for a feeling of weakness for which cod-liver-oil was ordered. An eczematous eruption on the mons and vulva also disappeared under this treatment. The writer adds:—"My belief is that in conditions of both excitement and depression of the nervous and sexual systems *Coca* is a very good medicine. When the patient is in an excited condition we have to use this drug in potentised doses; when in a depressed condition, in material doses, that is, in the mother tincture."—*Hom. Recorder*.

"CHELIDONIUM" IN INFANTILE PNEUMONIA.

In a very practical paper on pedology, in the *Southern Journal of Homeopathy*, Dr. Stearns says:—I wish to call your attention to one remedy which is as much a specific in infantile pneumonia as is Quinine in intermittent fever or Iodide of Mercury in diphtheria. The remedy is *Chelidonium*. Try it, stick to it, and success will follow you. I have proved this at the bedside for twenty-five years."

Unfortunately, he does not give us the indications for its use in preference to *Bry.*, *Phos.*, *Ant.* *Tart.*, etc.

"ENOTHERA BIENNIS" IN DYSPEPSIA AND DIARRHEA.

The Evening Primrose seems to be a very valuable remedy in distress after eating, and in diarrhea and dysentery.

Dr. Hurd, in the *Chicago Medical Times*, reports two cases illustrating its use. The first was a young man who had been troubled with diarrhea for three years. *Enothera* ϕ ν ν ν four times a day was ordered, and a few days later he reported that it worked like a charm, and he was well. The second case was a man, aged 65, who had been troubled with severe gastric pain after food for over two years, and had been treated by allopathic and homeopathic doctors without relief. In one of his attacks he was given twenty-five drops of *Enothera*, and was free from pain in an hour

and asked what he could eat, saying that he had been dieted so long, and had eaten so little, that he was nearly starved. He was told he might eat anything he liked, only take η xx-xxv of the medicine after meals. He was never troubled with the pain again.—*Hom. Recorder*.

This drug is highly recommended for summer diarrhoea in children, in doses of one drop after each evacuation.—See *Hale's New Remedies*, p. 467.

“GUAIAIACUM” IN RHEUMATIC AFFECTIONS.

Dr. Dewey thinks that one of the distinctive features of *Guaiacum* from its provings is its use in rheumatic affections. Thus we have lancinating pains in the extremities, producing contractions in the limbs; the pains are worse upon the slightest movement, and are accompanied by heat. Concretions form in the joints and distort them; this symptom distinguishes *Guaiacum* from *Colocynth*. *Ledum* has gouty concretions in the joints, but it pains move from below upward. These contractions of the tendons drawing the joints out of shape will at once distinguish *Guaiacum* from *Causticum*; it, however, follows *Causticum* well. Some of these symptoms may suggest its use in sciatica, in which disease it has often been found useful; in fact *Guaiacol* has been found a useful remedy externally for sciatica and intercostal rheumatism by our allopathic friends. Akin to its action in rheumatism is its usefulness in chest pains. It has stitches in the left side of the chest at its upper part. “It is,” Farrington says, “the best remedy for pleurodynia accompanying tuberculosis.” The location of the pain is characteristic, being under the upper three ribs on the left side.—*Hahn. M. (Med. Century)*.

HEPAR SULPHURIS IN MASTOID INFLAMMATION.—A girl of 20 had suffered from acute otitis, and had an otorrhea. After about a month the discharge had ceased; pain and fever had set in, and there was every indication of matter having formed in the mastoid process. Trepanning of this seemed inevitable, and was determined on for the next day. In the meantime Dr. van Berghe gave hepar sulph. 30x every two hours. By 10 a.m. improvement had set in, and the operation was first delayed and finally abandoned, as the case rapidly cleared up, and that without any evacuation of the pus.—*Hahn. Monthly*, March (*J.B.H.S.*).

SOCIETIES.

BRITISH HOMEOPATHIC SOCIETY.

THE second meeting of the Session was held on Thursday, November 7, 1895, at the London Homeopathic Hospital, Great Ormond Street, W.C., when the following gentlemen were elected as members:—William Greig, M.B., C.M. Aberd., of New Wells House, Wakefield, proposed by Dr. Dyce Brown and Dr. E. A. Neatby. Arthur Lestock Reid, M.R.C.S. Eng., L.R.C.P. Lond., of The London Homeopathic Hospital, Great Ormond Street, W.C., proposed by Mr. C. Knox-Shaw and Dr. Lambert. William Scott, M.D., L.R.C.S. Edin., of Melbourne House, Huddersfield, proposed by Dr. Proctor and Dr. Hughes. Frederick Whitfield Thornton, M.R.C.S. Eng., L.R.C.P.I., of 35, New North Road, Huddersfield, proposed by Dr. Galley Blackley and Mr. C. Knox-Shaw.

The following specimens were exhibited:—

1. A cystic kidney removed by abdominal nephrectomy (Dr. Burford).
2. A cystic uterine fibroid removed by abdominal hysterectomy (Dr. Burford).
3. A lung from a rapidly fatal case of pneumo-thorax (Dr. Washington Epps).
4. A specimen of uterine sarcoma with microscopic section (Dr. E. A. Neatby).
5. An impacted pessary and vesical calculus (Dr. Neatby).
6. A sub-involved uterus removed by vaginal hysterectomy (Dr. Neatby).
7. Specimens of calculus from four recent litholapaxies (Mr. Knox-Shaw).
8. Histological section of mammary fibro-adenoma, showing intra-cystic vegetations (Mr. Knox-Shaw).

SECTION OF MATERIA MEDICA AND THERAPEUTICS.

Dr. John H. Clarke read a paper on "Two rarely used Remedies, *Ocimum canum* and *Trombidium*," in which he gave on account of their action and leading indications, together with illustrative cases. The discussion which followed showed that few, if any, present were practically acquainted with these remedies.

Dr. W. T. Ord read a paper entitled "*Magnesium phosphoricum*, its value as an anodyne," which elicited an interesting discussion. The remainder of the evening was devoted to the consideration of the interesting specimens above mentioned.

INSTITUTION.

NORWICH HOMEOPATHIC DISPENSARY.

THE annual report for 1894-5 of the Homeopathic Dispensary, which is carried on at Guildhall Chambers, Market Place, sets forth that the number of patients attended during the year and the general character of the cases have not varied much from previous years. Nevertheless, the results obtained by treatment, and the fact that, as is usual, aid has been afforded successfully in cases previously under treatment elsewhere, fully justifies the existence of the dispensary, not only for the help of the sick poor, but also as affording an opportunity for demonstrating the value of the law of similars. The multiplication of evidence on all sides to the truth of this law, and constant advances upon the lines of inquiry and investigation indicated by Hahnemann are more and more striking. Dispensaries, however, are essential for the every-day work amongst the poor where they are unable to obtain for themselves efficient treatment, and in many places homeopathic dispensaries are, as here in Norwich, doing a steady and most useful work. About five hundred patients have been under treatment during the year, and with few exceptions have been of the class really needing such help. The value of tickets placed at the disposal of the medical officers and secretary is thankfully acknowledged, and many needy cases have thus been helped just when they most needed it. The thanks of the committee are heartily given for the valued aid received from the Hospital Sunday Fund. Thanks are due, and 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 again 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 latter part of the year. Early payment will greatly facilitate the working of the dispensary. The income for the year, inclusive of a balance from the previous year of £6 5s. 10d., was £114 12s. 5d., and after the year's expenses had been met there remained a balance of £7 16s. 4d.—*Eastern Daily Press.*

RHUS. VEN. IN ERYTHEMA NODOSUM.—Dr. Oscar Hansen reports a case of this disease, in which the patient—a woman of 42—had for eighteen years never been free from it save for the three summer months. There were shooting pains in the legs having the modalities of rhus, and causing much restlessness. *Rhus venenata* was given, 5 drops of the 3x three times a day; and a complete cure was effected.—*Hahn. Monthly*, May (*J.B.H.S.*).

EXTRACTS.

THERAPEUTICS OF SUPPURATION.*

"HEPAR SULPH."—The pus of this remedy is that known as "healthy" or "laudable pus"; bland, thick, cream-like and yellow, with redness of the skin beneath which the abscess is forming, attended with throbbing pain. Sometimes the pus degenerates into an unhealthy quality and the opening refuses to heal or even ulcerates. Injuries to the skin do not heal, but suppurate instead.

Mercurius produces suppuration on which the pus is unhealthy in colour and consistence, having a greenish tinge, being quite fluid, and most apt to occur in glands or glandular structures. It hastens the ripening and spontaneous opening of abscesses almost as promptly as *Hepar* does.

Calcarea carb. is another suppurative remedy, but the pus in this instance is slow in forming, usually confined to small areas, thick and yellow, sometimes thin and milky, but not attended with active inflammation.

Silicea presents a watery, pale green, sometimes sanious, occasionally corrosive pus, tedious in forming and reaching the surface through a fistulous opening, which refuses to heal afterward. Ordinary cuts or injuries suppurate instead of healing.

Arsenicum alb. controls the suppurative process and exerts its influence upon the production of ichorous, watery pus, putrid in character and involving large areas internally as well as superficially; there is intense burning heat in the part, with redness of the overlying skin; at the same time general emaciation is usually present.

Pulsatilla.—The pus of this remedy is similar to that discharged from its own mucous surfaces, viz., copious in amount and greenish yellow in colour, sometimes thick and orange yellow. The skin situated over the maturing abscess has a bluish red erythema, also resembling the hue of the chronically swollen *pulsatilla* mucous membranes.

Lachesis.—When an abscess calling for this remedy is in process of formation the skin over the abscess assumes a steel blue or violet redness, suggestive of a gangrenous inflammation; the pus discharged is thin, ichorous and offensive: painful papules surround the nonhealing opening, and there is a purplish coloured areola.

Phosphorus, like *Silicea*, presents an abscess which, having arrived at the surface through a very narrow channel, still continues to discharge through a persistent orifice. The pus

* *Therapeutical Notes and Suggestions*, by Dr. Charles H. Evans.

is yellow, either thin or consistent and quite free in amount, differing in these latter respects from *Silicea*, but resembling it in the osseous and glandular structures attacked. A ring of little ulcers surrounds the principal opening or ulcer, or several fistulous openings coexist.

Sulphur has for its sphere unhealthy pus, which continues to be discharged after tardy formation in the beginning. It is frequently useful as an intercurrent when improvement under another remedy ceases and the indications still present themselves. When the *Sulphur* constitution is present this remedy is called for at the outset.

Belladonna is not a remedy for suppuration, although it is sometimes considered such. Its inflammations often terminate in the formation of pus, but when this event has taken place the usefulness of this remedy is past.—*Clinique*.

IODIDES OF MERCURY IN DIPHTHERIA.

THE *Iodides of Mercury* are of frequent use in diphtheria when the glandular structures of the neck are especially involved. When the *Protiodide* is indicated the right side of the throat is more severely attacked. While both tonsils are swollen the tonsil of the right side is enormously enlarged; the membrane is greater in amount on that side, a free secretion of tenacious mucus is manifest in and over the entire throat, and a heavy, dirty yellow coating covers the posterior half of the tongue.

In those cases calling for the *Biniiodide*, the right tonsil is attacked first, or sustains the disease in greater force; it not only becomes immensely enlarged, but the swelling extends to the cellular tissue of the neck, and involves the submaxillary and parotid glands so that the entire contour of the neck is lost, and an unbroken surface extends from the lower maxillary to the clavicle. Tenacious mucus and salivation accompany this condition.—Dr. C. H. Evans in *Clinique*.

PHOSPHORIC ACID IN DISEASES OF THE BONES.

WHILE *Calcarea*, *Silica*, *Phosphorus* and *Mercurius* are excellent on these diseases, *Phosphoric Acid* should not be forgotten.

Lycopodium.—The essential course of *Lycopodium* is chronic in character, a slowly developing decay of vitality and functional activity, ending in organic change, a state arrived at only after a gradual but thorough exhaustion of normal energies. In consequence it is useful in diseases that

institute the same chronic decay of vitality in ultimate cells. From this slow and gradual diminution of function and tissue, *Lycopodium* is not a drug to be given in the early stages of disease, for as it produces its effects only after a profound modification of the vegetative system, it can only be of service when a corresponding diseased state has arrived in due time at the same stage.

It is not to be understood by this, that *Lycopodium* must never be given in acute or subacute disease, because it is not infrequently indicated in the course of some of these. Such cases, however, will sometimes be found upon careful examination to have been the subjects of a degenerative process, similar to that which *Lycopodium* is also capable of exciting, during a considerable period prior to the attack of the acute disorder, and that the latter has become engrafted upon the former.—Dr. C. H. Evans in *Clinique*.

EUCALYPTUS IN BRONCHITIS.

WHEN the fever has diminished and the second stage is present; the cough is obstinate, frequent and irritable and the expectoration is thin. It is also of service in chronic bronchitis or bronchiectasis with profuse secretion of offensive muco-pus. Elevation of temperature is another of its effects.—Dr. C. H. Evans in *Clinique*.

GINDELIA SQUARROSA.

THE *Gindelia Squarrosa* is worthy of a proving. It has caused intensely severe pains in the region of the spleen and liver, pains of all kinds in the left side from the mammary region to the iliac region, and respiration has been seriously interfered with, sometimes to an alarming extent. It has been used clinically and in a general way for various pulmonary diseases, in which paroxysmal and other derangements of breathing have been present. The eyes are decidedly affected by it, and conjunctivitis, neuralgic ocular pain, and soreness of the eyes are present, made worse by moving the eyes.—Dr. C. H. Evans in *Clinique*.

SEPIA IN UTERINE DISEASES.

THIS remedy is more frequently indicated in the treatment of such disorders than it receives credit for, and its persistent use will often reward the practitioner. This does not imply

a wholesale or indiscriminate employment of this remedy, for in order to cure it requires a correspondence between these ailments and its own pathogenesis. When these are ascertained to be present, some patience will need to be exercised in continuing this remedy, for just as the ovario-uterine symptoms have required time for their development, so will time be necessary for the pathological process to retrace its steps.—Dr. C. H. Evans in *Clinique*.

MAGNESIA PHOS. IN VESICAL IRRITABILITY.

THE symptom of constant urging to urinate whenever the person is standing or walking has been cured so frequently by the above-named remedy that it may almost be said to be characteristic. It has occurred, and been permanently relieved both in men and women without regard to associated disorders. This desire requires to be attended to at once, and temporary relief follows each act of urination; the amount is small, as might be expected, and there is pain in the neck of the bladder extending into the urethra.—Dr. C. H. Evans in *Clinique*.

REVIEW.

EYESIGHT AND SCHOOL LIFE.*

THIS little book deals with a subject of great importance in a very clear way, and is so written that it can be easily understood by non-medical readers, technical terms being avoided as much as possible, and explained in footnotes when used. Many practical points are dealt with, in connection with the instruction of children, bearing on the production and effect of errors of refraction. The value of the book is greatly enhanced by numerous illustrations, and the printing is excellent. We heartily recommend it to all who are engaged in the educational profession.

BOOKS, ETC., RECEIVED.

MESNY'S CHINESE MISCELLANY. Vol. i. No. 1. Shanghai, Sept. 26, 1895, printed at the *China Gazette* Office (Yearly, \$10.00; single copies, \$0.50), contains an interesting account of some of the contents of the Chinese pharmacopeia. *Pen Ts'ao Kang Mu* is the title of the great Chinese Herbal from which the information is taken.

ZADKIEL'S ALMANAC. London: Glen & Co., 328, Strand, W.C. (6d.), in addition to information about the future, gives an astrological explanation of the Legend of St. George and the Dragon, and tells how the saint came to be adopted as the national patron.

* *Eyesight and School Life*. By Simeon Snell, F.R.C.S.E. Bristol: John Wright and Co. Price 2s. 6d.

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.

DR. MARCH, *Watford*. Dr. E. G. March, formerly Resident Medical Officer at the London Homeopathic Hospital, has commenced practice at MAPLE LODGE, WATFORD, HERTS.

CITY CONSULTING ROOMS.

DR. C. WOLSTON, of Holmdene, Bickley, has opened consulting rooms at 5, West Street, Finsbury Circus, E.C. His hours are 10 to 3, Saturdays excepted.

GENERAL CORRESPONDENCE.

THE ACTION OF BORACIC ACID.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—In connection with the subject of *Boracic Acid* and of *Natrum Boracicum*, it must be of interest to know that for climateric flushings in women there is no remedy we possess that so frequently brings decided and permanent relief as *Acid. Boricum* (*vel Boracicum*) in the 3x dilution. This I have proved in the cases under me, where this symptom was present, during the last fifteen years.

Truly yours,

ROBT. T. COOPER, M.D.

30A, George Street, Hanover Square, W.

THE INFINITESIMAL IN METALLURGY.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—To the facts contained in the Rev. Prof. Bonney's paper, I beg to add one or two drawn from the annual report of The Mint, 1886. Pure standard gold has a tensile strength of 18 tons per square inch sectional area; it fractures after elongating 24 per cent. The presence of one four-thousandth part of lead reduces the tenacity to 7.7 tons, and the elongation is hardly measurable. The addition of another four-thousandth part of lead reduces the tenacity to 5.4 tons.

If, however, thirty-eight four-thousandth parts be added, raising the total amount of lead (from the previous .025 and .05) to 1 per cent., the breaking point remains the same; so that there would be a vast difference between the effect of 7 grains and 14 grains of lead added to 4 pounds of gold; but comparatively none between the effect of 14 grains and 280 grains.

Sir,

Yours very respectfully,

FERRUM.

PREMATURE BURIAL AND DEATH CERTIFICATES.

To the Editor of THE HOMEOPATHIC REVIEW.

SIR,—After the letter of your correspondent, T. W., in *THE HOMEOPATHIC WORLD* for November 1st, on the above subject, few of your readers, I think, will deny that a radical reform in the existing system of death examination and certification is peremptorily needed. In many cases no examination, worthy the name, of the supposed dead takes place, and certificates of death are given by medical practitioners in a haphazard sort of fashion. In this way terrible mistakes cannot but occur, and those who have investigated the facts tell us that burying alive is much more frequent than is generally supposed. From time to time we are startled by accounts in the English press of persons being discovered to have been prematurely buried, like the case recently referred to by Mr. Peverel Turnbull in *The Spectator*, also of narrow escapes from a doom of unspeakable horror. A remarkable case of a man struck by lightning, the details of which were received by Sir B. W. Richardson, in 1869, from Dr. Jackson, of Somerby, Leicestershire, is mentioned in "The Perils of Premature Burial," a pamphlet just issued by E. W. Allen, London. "The patient reached his home in a state of extreme prostration, in which he lay for some time, and then sank into such complete catalepsy that he was pronounced to be dead, and heard the sound of his own passing bell from the neighbouring church. By a desperate attempt at movement of his thumbs he attracted the attention of the women engaged about him, and being treated as one still alive, recovered, and lived for several years afterwards, retaining in his memory the facts, and relating them with the most consistent accuracy."

It would seem that, "the conditions most resembling actual death are syncope, asphyxia, and trance, particularly the last," and any one who will take the trouble to examine reports of sudden death will be astonished to find in how many cases syncope is declared to terminate fatally. In reality, syncope

is merely a symptom occasioned by some occult cause which in the majority of cases of sudden death is not sought for by the medical attendant. Recent investigations by Dr. Franz Hartmann and others, tend to show that many of these cases are rather *suspension* than *termination* of life, and could have been restored, but for prompt burial. As long as medical certificates of death are granted on the testimony of friends or relatives, without actual examination of "the corpse," premature burials will continue to occur.

Is it not the duty of the Government, without delay, to interpose stringent preventive laws with respect to this terrible and much-neglected abuse?

Yours faithfully,

W. R. J.

November 16, 1895.

THE COMPOSITION OF TABULES.

To the Editor of THE HOMEOPATHIC REVIEW.

SIR,—A short time back you kindly noticed our compressed tabules in THE HOMEOPATHIC WORLD, and we have to thank you for your courtesy.

It has recently come to our knowledge that many of the London medical men are under the impression that oil is used in their preparation, or comes into contact with them in the course of their manufacture.

You would be conferring an additional favour, and at the same time remove a wrong impression, if you would use your influence in making it known that no oil comes into contact with, or enters into the composition of, tabules of our make.

Thanking you in anticipation,

We beg to remain,

Faithfully yours,

CORFIELD & CORFIELD.

26, Bennett's Hill, Birmingham, November 15, 1895.

VARIETIES.

ALUMINIUM VESSELS.—At the meeting of the Academy of Sciences on Monday, M. Berthelot drew attention to a note by M. Bolland, army pharmacist, concerning experiments made by him regarding the use of utensils made of aluminium. He finds that each time they are cleaned with alkali they lose weight, apparently the loss amounting to about one-sixtieth. When, on the contrary, no alkaline substances are used, the aluminium utensils wear as well as those made of other metals, such as copper, &c.—*Chemist and Druggist.*

KALI BICHR. FOR COUGH AFTER EATING.—Dr. W. J. Pierce reports the case of James S., æt. 40 years. For the past four months, as soon as he swallowed food (not liquids), a tickling in the throat excited a severe cough, which stopped only upon vomiting, and was followed by a watery coryza. This was so distressing that he had for the past two months eaten but two meals a day. There was pharyngeal catarrh, with stringy mucus hanging from the naso-pharynx. On April 11th he was given *kali bichr.* 1, a tablet every two hours. Five days later he reported that he had coughed but twice after eating, and had not vomited since taking the medicine. He was kept track of for three months, and had no return of the symptoms. No local treatment or adjuvants of any kind were used.—*N. A. Journal of Hom.*, May, 1895 (*Hahn. Monthly*).

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MEDICAL AND SURGICAL WORKS.

- Barling (G.).** On Appendicitis; and on Perforation of Gastric and Duodenal Ulcer. (The Ingley Lectures, 1895.) 8vo, pp. 96. Cornish Bros., Birmingham. (Simpkin. Net, 2s.)
- Burt (W. H.).** Characteristic Materia Medica. Memorized demy 8vo, pp. 381. (Hom. Pub. Co. Net, 12s. 6d.)
- Davies (N. F. Yorke-).** Health and Condition in the Active and the Sedentary. 3rd ed. Cr. 8vo, pp. xx—250. (Low. 3s. 6d.)
- Husband (H. A.).** The Student's Pocket Prescriber. 3rd ed. 32mo, limp, pp. 152. Livingstone, Edinburgh. (Simpkin. Net, 1s. 6d.)
- Kaposi (M.).** Pathology and Treatment of Diseases of the Skin for Practitioners and Students. With 84 Illustrs. Translation of the Last German ed. under the Supervision of J. C. Johnson. Roy. 8vo, pp. 702. (Baillière. 25s.)
- Knies (Max.).** Relations of Diseases of the Eye to General Diseases. Forming a Supplementary Volume to every Manual and Text-Book of Practical Medicine and Ophthalmology. Edit. by Henry D. Noyes. Roy. 8vo, pp. 478. (Baillière. 18s.)
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- Sachs (B.).** A Treatise on the Nervous Diseases of Children. For Physicians and Students. Roy. 8vo, pp. 684. (Baillière. 21s.)
- Stocken (J.).** Dental Materia Medica and Therapeutics. 4th ed. Revised by Leslie M. Stocken and J. O. Butcher. 12mo, pp. 168. (Lewis. 4s.)
- Tallerman-Sheffield (The).** Patent Localised Hot-Air Bath: Being a New Invention for the Treatment of Rheumatism, Gout, Rheumatic Arthritis, Stiff and Painful Joints, Sprains, &c., &c., by the Local Application of Super-Heated Dry Air. With Notes of Cases Treated at St. Bartholomew's Hospital, North West London Hospital, Charing Cross Hospital, St. Mary's Hospital, The Royal Portsmouth Hospital, and Elsewhere. Demy 8vo, pp. vi.—51. (Baillière. 2s.)
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- Wheeler (A.).** The Student's Guide to Practical Therapeutics. Cr. 8vo, pp. 254. Bryce, Edinburgh. (Simpkin. Net, 5s.)

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 the "MANAGER" of the Homeopathic Publishing Company, 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 Mr. Proell Gray, Austria; Mr. L. Narain Mookerjee Wallair, Madras; Dr. Ridpath, Sunderland; Dr. Mahony, Liverpool; Mr. Joseph Collinson, Hendon; Dr. Orr, Norwich; Mr. Pumfrey, Wantage; Mr. Wm. Tebb, Burstow; Mr. Alfred J. Pearce, Upper Tooting; Messrs. Corfield and Corfield, Birmingham; Mr. Jas. R. Williamson, London; Dr. March, Watford.

BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Animals' Friend.—Allg. Hom. Zeit.—Jour. Brit. Hom. Soc.—Mon. Homeopathic Review.—Jour. Orif. Surg.—La Homeopatia.—Minneapolis Hom. Mag.—Amer. Homeopathist.—N. Y. Med. Times.—Med. Century.—Hom. Recorder.—Family Doctor.—Monatsblätter f. H.—Jour. Belge d'Hom.—

Maanedschrift f. H.—Medical Argus.—Homeo. Physician.—L'Art Médical.—Hom. Envoy.—Homeo. News.—Med. Visitor.—Chironian.—Mesny's Clinical Miscellany.—Jour. of Orifical Surgery.—Vaccination Inquirer.—Hahnemannian Mon.—Revista Homeopatica.—N. A. J. of Hom.—Zadkiel's Almanack.

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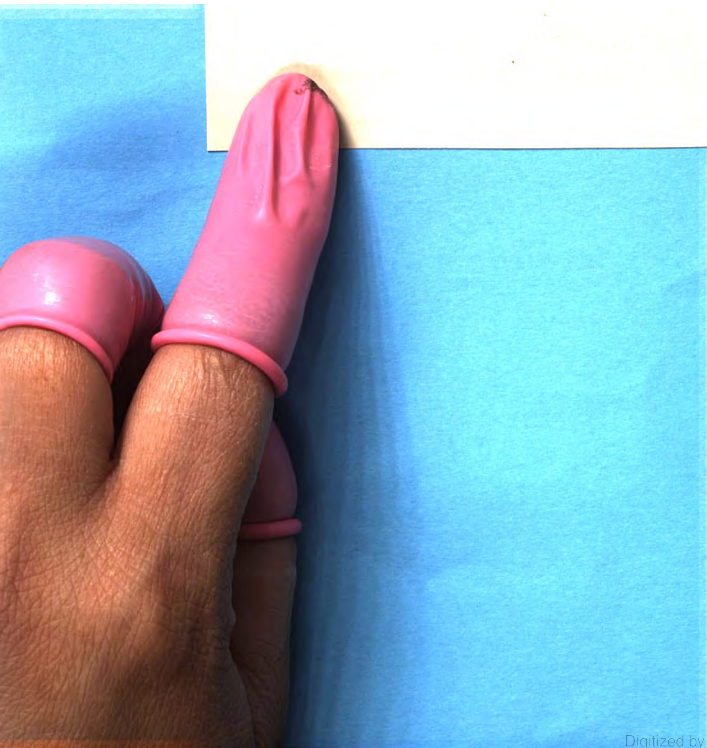
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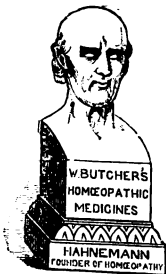
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