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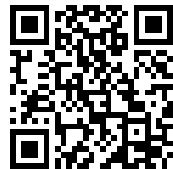
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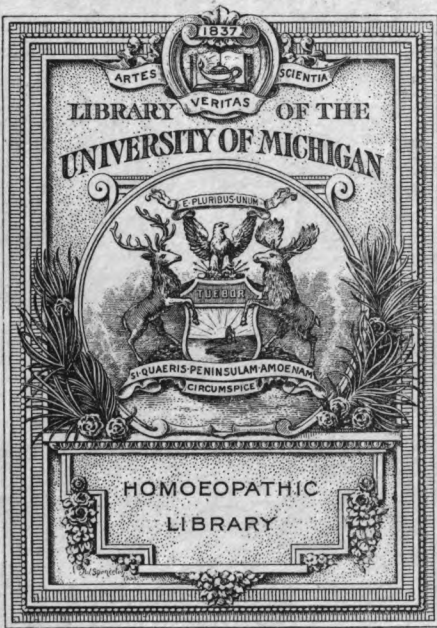
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JANUARY 1, 1904.

A MISSIONARY ENTERPRISE.

IN our last issue we called the attention of our readers to the initial phases, as we regarded them, in the evolution of a College of Homeopathy in these islands. As we wrote a month ago the programme for the year now opening was in germinal condition; we are now able to give it as completely worked out.

If anything were needed to prove that the British Homeopathic Association is working on right lines of evolution, we think it is to be found in the two circulars of the Association which we print on another page. And the feature which we regard as of the highest importance is perhaps the humblest in aim: we mean the plan for imparting to foreign missionaries, who are not medical missionaries (*i.e.*, missionaries with a medical qualification), and who will yet be called upon to exercise some medical skill where no professional medical aid is attainable—for imparting to them that little knowledge which is ten thousand times better than no knowledge at all.

The London Homeopathic Hospital has for many years given a welcome to missionary students, and the teaching they have there acquired has been of very great benefit to them in the scenes of their labours. We need only mention one of those who profited by the Hospital's clinics in years gone by, Dr. ROBERT SWALLOW, of Ningpo. Long before he went on leave from the scene of his labours in China to San Francisco to take out a

complete medical course, Mr. SWALLOW, as he then was, found his medical knowledge of the greatest use, and in that early time he commenced the medical school and hospital which he has since established on a firm basis at Ningpo.

The aim of the Association is to give, in a regular, systematic, and complete way, the training which the hospital has hitherto given only in a casual way. How complete the courses will be may be seen from the circular itself. It will aim at the practical first and foremost, and with the unrivalled facilities of the London Homeopathic Hospital at their service, the Association will be able to provide practical teaching as no other institution in this country can hope to do. One very important item of the courses will be the lectures on "Tropical Diseases and Tropical Hygiene," by Lieut.-Col. H. E. DEANE, M.R.C.S., of the Royal Army Medical Corps. Lieut.-Col. DEANE is only recently returned from India, where he obtained high honours for his work in reference to the Plague.

Another very important feature of the course is the section provided "for women only." For women missionaries, whether as wives or unmarried, a knowledge of nursing, of obstetrical subjects in diseases peculiar to women, is a most essential requisite to their mental outfit, and this the course will provide.

The therapeutics taught at the lectures will, of course, be homeopathic; but the practical recognition of disease will be the same as that taught in all schools all over the world. Only the homeopathic view of disease is more practical and more natural than that of the old school, as its therapeutics also is more natural and philosophic.

Every good thing in its right place has many aspects of advantage besides the principal one. With the missionary course of the British Homeopathic Association it is not otherwise. It will be the means of developing the teaching and lecturing talent of the homeopathic body, and it will give to the hospital the important

position of being a centre of medical teaching, whose influence will travel all over the world. This is the rightful position for the hospital to occupy; but hitherto it has not been recognised. Yet one other function the missionary course will fulfil: It will provide homeopaths with the germ of a complete school of its own whenever the time may come for it to assert its rights. It will thus do away with the stupid *non possumus* attitude which the bulk of homeopaths have hitherto adopted when some enthusiast has suggested that something ought to be done.

Something now *is being done*; and it is by *doing*, and not by arguing, that homeopathy will take its rightful place in the British Empire. We can invariably get the better of our opponents in argument; but both parties generally remain where they were when the argument is won. If we can put a new and beneficent power into the hands of foreign missionaries we are doing something for homeopathy which will tell more than all the wordy battles in the world. And this the Association is going to do.

We do not know who it was who originated the idea of this course, but the working out of the details has been largely carried out by Dr. EDWIN NEATBY; and the staff of the hospital have accepted with enthusiasm the work that has been severally allotted to them.

All of our readers who are interested in the training of missionaries will, we hope, see that the attention of students is called to this course. Mr. FREDERICK KING, the Secretary of the Association, at Regent House, Regent Street, W., will be pleased to supply any who may wish to have them with circulars ready for addressing.

SALICYLIC ACID IN PITYRIASIS VERSICOLOR.—Prof. Aufrecht recommends a 4 per cent. solution of salicylic acid in absolute alcohol in pityriasis versicolor. It is rubbed into the affected spots every evening. A cure is usually obtained in fourteen days.—*Therapeutische Monatshefte*, No. 4, 1903 (Frank H. Pritchard, M.D., in *Hahn. Monthly*).

NEWS AND NOTES.

DR. NEBEL ON ISOPATHIC REMEDIES.

WE are happy to announce that Dr. Anton Nebel, of Montreux, who is one of the ablest and most successful investigators of the action of isopathic remedies, or nosodes, has promised to contribute a series of articles on this subject to the pages of the HOMEOPATHIC WORLD. These articles will be illustrated by photographs of histological specimens.

“DO WE EAT TOO MUCH?”

WHEN Parliament is out of session even fiscal problems cannot be trusted to supply sufficient copy to fill the columns of the daily press. But our enterprising contemporary, the *Daily Telegraph*, is generally equal to the emergency. For some little time past its columns have been filled with letters, all seeking to answer a perfectly unanswerable question, to wit: “Do we eat too much?” This reminds us of the subject which Artemus Ward tells us his cousin selected to write an essay upon: “Is cats to be trusted?” The whole question—we mean the dietetic one—is either begged or given away in the little word “we.” It includes all and sundry, and the replies are naturally as varied as its individual components. But, without troubling to find any absolute solution of the problem, it is possible to extract no little amusement and some instruction from some of the letters. One writer, Mr. Calmour, pleads for one meal a day as quite sufficient; to this “John Strange Winter” (who is a great friend of Mr. Calmour’s) replies that this is all very well for Mr. C., who “leads a wholly sedentary life, joins in no form of athleticism, and has long made it his boast that he does the whole of his work in bed, from whence he does not usually rise till late in the afternoon.” Mr. Calmour replies that those used to be his habits before he reformed his dietary. He then ate four or five meals a day. Now on one meal he can do quite a lot of walking. “A Man of Fifty” is of another stamp, as will be seen from the following reply to his letter:—

“To the Editor of *The Daily Telegraph*.

“SR, — ‘A Man of Fifty,’ in your issue of to-day, says that he eats for breakfast a mutton chop, two poached eggs, two rolls, six slices of toast, butter, marmalade, three cups of coffee, and three bananas, and that he feels faint by eleven o’clock, and eats again heavily at one o’clock.

“It was my good fortune, as a civil engineer in India, to see the coolies of the North of India at work on irrigation and railway construction. They work hard and well ten hours a day in very cold and excessively hot weather, and are men of good physical development. It is not till their day’s work is finished that they take their first and only heavy meal. During the day they will now and then eat a few parched peas, their one real meal in the evening consisting of wheaten chepatties, dal (a food like the lentil), condiments, butter, milk, and, if available, a little vegetable or fruit. By the great majority no flesh food is eaten.

“It would appear that their great strength is due to the fact that they do not fritter it away in disposing of a lot of unnecessary food. They do not become faint at eleven o’clock.—I am, Sir, yours faithfully,

“Brighton, Nov. 30.

ALFRED C. NEWCOMB.”

Clearly the real thing needed by “A Man of Fifty” is a course of *Sulphur 30*! His appetite is psoric of the Sulphur type. “A Man of Sixty” gives a useful bit of personal experience:—

“‘What is one man’s meat is another man’s poison.’ Some three years ago, like your ‘Man of Fifty,’ I was in the habit of eating a big breakfast—meat, eggs, buttered rolls, &c., likewise a large lunch, afternoon tea, and a good dinner, and weighed over 12st. I took plenty of exercise, too, but found I was getting very short-winded, and was not much good going uphill at any pace. Since then I have cut my breakfast down to an egg or two, a couple of pieces of dry toast, and a little marmalade, one large cup of tea, no butter or sugar, and only about a teaspoonful of milk. For lunch a piece of toast and slice of lean meat, or small bit of cheese and a whisky and soda (weak), about five o’clock a couple of cups of tea and perhaps a piece of cake or a dry biscuit or two. Dinner, a little fish, and any meat, poultry, or game; no soup, no sweets, no potatoes; claret or a whisky and soda to drink. I hunt two days a week, sometimes three, and ride about every other day on different horses, sometimes giving them a training gallop. I fill up odd time bicycling, but don’t walk much if I can help it. Now I only weigh 10st. 8lb., and am as fit as a fiddle; before I used to get heartburn and indigestion. I may say I eat plenty of green vegetables, tomatoes, apples, &c.; generally get up about 7 o’clock and go to bed about 11.30 or 12, and smoke in moderation.”

DR. ALFRED RUSSEL WALLACE AND HIS ASTHMA.

WHILST on the subject of diet it may be interesting to note the experience of Dr. Alfred Russel Wallace recorded in the following article from the *Westminster Gazette* of December 11th :—

"DR. RUSSEL WALLACE'S CURE.

"Dr. Alfred Russel Wallace, the veteran scientist, has recently been enjoying much improved health. A *Christian Commonwealth* interviewer who recently paid him a visit explains the secret :

"After being a martyr to asthma Dr. Wallace was told by Mr. Bruce-Joy, the sculptor, of a certain cure which he had learned from a New York specialist. The doctor having discovered that rheumatism, gout, bronchitis, asthma, and similar disorders are caused by failure to assimilate a sufficient quantity of nutritious food, orders sufferers from these ailments to abstain as far as possible from starchy foods and to take plenty of well-cooked meat. Dr. Wallace immediately followed the prescription, took no potatoes, very little bread, but generous supplies of beef and mutton ; with the result that his asthma quickly left him and has never returned, and he is now in better health than he has been at any time during the last ten years.'

"This little piece of homely experience, our contemporary is not mistaken in imagining, will be quite as interesting to many people as conjectures about our relation to the Cosmos. The incident is the more striking in view of the fact that in principle Dr. Wallace is a vegetarian."

ARSENIC AND THE HAIR.

"XRAYSER" very well sums up the finding of the Royal Commission on arsenical poisoning in the following paragraph taken from the *Chemist and Druggist* of December 12th :—

"The Arsenic Royal Commission has dealt with the subject entrusted to it with unusual thoroughness. Not content with tracking down the arsenic in the Manchester beer to the glucose factory where arsenicated sulphuric acid was employed, and seeing to the safe disposal of the remaining stock of the poisonous stuff, the Commission set to work to follow the devious wanderings of the arsenic atom through the natural gates and alleys of the body. A series of experiments was made expressly for the Commission by Mr. R. F. Wood Smith, and these reveal the curious fact that the principal medium whereby arsenic is excreted is the hair. This observation suggests two or three medical reflections. First, arsenic is a cumulative poison ; bald persons must therefore be peculiarly liable to suffer from its cumulative effects. Second, it may be that baldness is due to a deficiency of arsenic. Nature in conducting the arsenic

atoms to the hair-follicles knows what she is about: the hair evidently requires the metal; *ergo*, arsenic is Nature's own hair-restorer. It happens to be also, we know, a depilatory, but this is only one more confirmation of the *similia* theory."

We are glad "Xrayser" recognises the homeopathic point.

RHUS TOXICODENDRUM NOT A GOOD DECORATION FOR
HARVEST FESTIVALS!

Country Life (December 5th), in a notice of the Earl Annesley's work on *Beautiful and Rare Trees and Shrubs* (Newnes), reproduces a beautiful picture of our old friend *Rhus*, and tells an interesting story thereanent. The plant depicted is the *Rhus radicans*. The specimen at Kew is labelled *Rhus Toxicodendron, var. Radicans*. The plant proved by Hahnemann was *Rhus Toxicodendron* (Poison Oak), the non-climbing shrub. The *Radicans* variety was proved by American provers, and is the usual culprit in the cases of "Ivy poisoning" so well known in the United States:—

"We are glad the author has described and illustrated the glorious, but baneful, poison ivy (*Rhus Toxicodendron*). This is one of the most pictorial illustrations in the book; it is shown veiling part of an old wall, and when its evil character is understood it may be tolerated for the splendour of its leaves in autumn. It is sold in nurseries and labelled in gardens under various names, and may be easily mistaken for a Virginian creeper. The author has reason to remember this plant of dashing beauty, and his words will serve as a warning to those who have suffered from a mysterious ailment without knowing its origin: 'It is so exceedingly dangerous and poisonous that I doubt whether it should be allowed in any garden, at least where ladies and children can have access to it. After touching the leaves, in a short time the victim becomes aware of an irritation in the eyelids, which rapidly increases until it is almost intolerable; they become so swollen that they are almost closed; the rest of the face becomes gradually involved, the eruption and swelling always moving from the forehead downwards. . . . Last autumn we had the usual harvest service in the church here, and the ladies and children helped to decorate it. Unfortunately, they chose the poison ivy, from the beauty of its colouring, to adorn the pulpit; one after another they became ill, some more and some less. The German governess was confined to her bed for more than a week, and suffered horribly. One lady consulted a specialist for skin disease, and was sent to Harrogate for three weeks for blood-poisoning. I was seriously alarmed about it, when one day three of the under-gardeners were laid up with it, though very slightly. That settled the matter; it was *Rhus Toxicodendron*, and not blood-poisoning at all.'"

We should like to know the result of the Harrogate treatment in the case sent to that resort, and we should also like to hear what the specialist thought of it all, if he ever had the explanation. Lord Annesley is not quite correct in saying it was "not blood-poisoning at all." *Rhus* does poison the blood, but the specialist evidently did not suspect what the poison was.

UNDERTAKER'S BAD TRADE.

UNDER this heading the *Daily Telegraph* of November 18th published the following:—

"Amongst the debtors at Lambeth County-court yesterday was a Lambeth undertaker, who pleaded his inability to pay on a judgment summons in consequence of bad trade.

"Judge Emden: 'Why is trade bad?'

"Defendant: 'Owing to the very low death-rate. I have had only one funeral during the last month. Things have been terrible in the trade. I have had the brokers in.'

"Judge Emden: 'When do you expect business to improve?'

"Defendant: 'I cannot tell, but we ought to get a bit busy soon.'

"An order to pay by small instalments was made."

This is bad enough; but we have often wondered what would become of undertakers if homeopathy were in the prevailing mode of practice. They would certainly have to appeal to Mr. Chamberlain to protect them against the dumping in this country of scientific ideas "made in Germany."

YET ANOTHER LONG SLEEP.

FROM the *Daily Telegraph* (Berlin Letter), November 17th:—

"The girl named Meyer, who has been plunged in a comatic sleep during the past eighteen years, was awakened yesterday in her native village, near Bremen, by the sound of bells pealing to announce a fire. She possesses all her faculties, remembering everything that happened previous to her illness."

MORE ABOUT FORESTRY.

FROM the *Daily Graphic*, December 5th :—

“ A COLONIAL LESSON.

“ The interest evoked by the afforestation schemes which are being supported by the Government in the Transvaal suggests that similar schemes, as outlined by Sir Herbert Maxwell, Lord Avebury, and others, should be promoted in the British Isles. We imported four years ago timber to the value of £21,000,000, and the world's supply grows less and less every year. They are feeling the decrease even in Canada, and both in France and Germany the science of forestry has been well learnt, and in the last few years has brought a very substantial profit to the owners of woodland. In England, as good a timber-growing country as one could wish, though many of the best trees are exotic, forestry is almost an unknown department of agriculture. Esthetically one would miss the beautiful undergrowth of our shire woods, for all the features most dear to game preservers are most abhorrent to the forester. But in many cases economy and beauty are not contradictory. It was argued by a scientific authority that if £10,000 a year—a tenth of the sum voted in the Transvaal—were spent in England, the State would soon be earning a revenue of over £90,000, even if timber did not go up in price; and one may safely prophesy that in fifty years it will have appreciated considerably. Perhaps in no single department is the neglect of applied science—and the science is of the easiest—more consistently conspicuous.”

WARE WATERCRESS !

SOME time ago we published a note cautioning readers to boil their vegetables. We must now add : “ Boil your watercress ! ” The *Westminster Gazette*, November 28th, published the following :—

“ In June, July, and August, a period of the year when enteric fever cases are usually below the average, the disease broke out with such unusual severity in the borough of Hackney as to cause Dr. King Warry, the Medical Officer of Health, to make a special investigation into the causes. He has now laid the result of his inquiries before the Council in the shape of a nine-page report which is anything but pleasant reading.

“ The outbreak of fever occurred in two epidemics—the first, during which forty-eight cases were notified in eight weeks, being located in a circle representing an area of one-third of a mile radius, and the second, during which sixty-two cases were notified in nine weeks, being located within a space represented by a circle of half a mile radius. This localisation of the disease led Dr. Warry to seek for a special cause for the outbreaks, and while examining the known media by which enteric is spread—*i.e.*, water, milk, shell-fish, ice-cream, fried fish, and sanitary defects—he was struck by the large number of watercress-eaters among those affected. This led him to

suspect that watercress might be the agent by which the enteric was spread. As his inquiries proceeded suspicion became conviction, and as the result of following up this clue it was discovered that the incidence of enteric during the epidemic was: Watercress-eaters, sixty-four; non-watercress-eaters, thirty-six.

"Dr. King Warry's next step was to obtain samples of watercress exposed for sale and have them conveyed, together with a sample of water, to the Lister Institute for bacteriological examination. Of the samples there examined, six and the sample of water came from West Ham, three from Spitalfields Market, one from Covent Garden, one from Crooked Billet Yard, three were said to come from Gomshall (in Surrey), and two others from sources which could not be ascertained. All were found to be polluted with organisms.

"Still guided by his suspicions, Dr. Warry visited the West Ham watercress beds—of which there are twenty-five, each about sixty feet by twenty feet—and found that they were fed by water pumped into an adjoining ditch as required from a sumpt-hole about six feet deep adjacent to one of the most polluted branches of the Lea (the Channelsea branch), so that, to quote the Medical Officer of Health's own words, 'practically the West Ham beds are fed by almost undiluted sewage.'

"These facts, Dr. King Warry says, show that the bulk of the watercress supplied to the Metropolis is cultivated under such polluted conditions as to be liable at any time to become specifically polluted and give rise to outbreaks of enteric fever, and he feels convinced that an extended inquiry should be made as to the conditions under which all watercress supplied to the Metropolis is cultivated."

MERCURIUS CORROSIVUS POISONING.

WE understand that it is no uncommon thing for nurses entering a maternity hospital to be poisoned by corrosive sublimate through having to "disinfect" their hands so thoroughly with solutions of it. We have heard of some cases of quite severe poisoning through this, and in one hospital we have heard of we are told that few escape altogether without mercurial symptoms. An instance of poisoning from external application is recorded in the *British Medical Journal* of November 21st:—

"CORROSIVE SUBLIMATE POISONING.

"J. R. C. writes: In reference to the case of corrosive sublimate poisoning recorded in the *British Medical Journal* of November 7th, the following passage from Poore's *Medical Jurisprudence* (second edition, p. 115), is of interest:—

'One day a man was admitted into my ward who had been poisoned by the application of corrosive sublimate externally to a raw eczematous surface, and he had acute dysenteric diarrhea, and was very bad. The then house physician, who was a very able and highly-educated man, for whom I have great respect medically, had given

this patient white of an egg with a view of its acting as an antidote to the mercury. It could not possibly do anything of the kind, because the mercury was not in the man's stomach, where it could meet the white of egg; the poison was in his blood, and, being in his blood, it had albumen enough there. I mention this to you because it was a revelation to me as to what a sensible man could do."

If this clever house physician had been a homeopath he would have known how to meet the difficulty with *Hepar sulph.*

MILK EPIDEMICS.

IN May, 1902, the City of Lincoln was visited by an epidemic cases of which were variously diagnosed by the medical men in attendance as scarlatina with or without rash, diphtheria, or some new disease. The source of the disease was thought to be found in the milk supply, and Dr. Klein was sent to examine the cows which supplied the milk consumed by the victims. But he found nothing was wrong with the cows or their udders. The matter was referred to the Local Government Board expert, Dr. Darra Mair, whose report has only just been issued. The *Lincolnshire Chronicle* (November 27th), gives lengthy extracts from this report, which summarises the facts, but for the rest is a long drawn-out "no savvy." Dr. Mair agrees with those medical men who say the disease was *not* scarlatina, but as for what it *was*, he has nothing but guesses to offer. The experts will now have another chance of finding out, for it seems (*Westminster Gazette*, November 30th), there has been a similar outbreak at Woking:—

"Several persons in Woking and the neighbourhood have recently been attacked by a mysterious throat disease of an infectious nature, and several deaths have occurred. As the result of inquiries by Dr. Pierce, the medical officer of health for the district, information was obtained of ninety-eight infected houses, and out of this number it was found that no fewer than seventy-six obtained their milk from two particular milk firms. Bacteriological examination of samples of milk taken at the farm whence these firms obtained their supply are stated to have yielded overwhelming evidence of the infectiousness of the milk in question. The Woking Urban District Council is taking active measures to stamp out the epidemic, and the Local Government Board, whose attention has been called to the subject, has called on Dr. Pierce to submit a report on the outbreak."

THE PATHOGENESY OF X-RAYS.

WE published last month an extract from the *Medical Press* giving instances in which X-rays had caused cancer. The *Daily Telegraph* (Berlin Letter), December 10th, supplies further instances of this pathogenetic potency:—

“Experiments made by Dr. Heineke, in Leipzig, have shown that the Röntgen rays, now often employed in medicine, exercise a harmful effect on the internal organs. Young rabbits exposed to the action of the rays from two to six hours daily die in five to ten days. Emaciation, loss of appetite, fear, languor, and prostration herald death. Hitherto it was believed that only the skin suffered from the action of the rays, but it is now proven that the internal organs, and especially the spleen, are very considerably altered, and that the brain also suffers, even though only the body has been directly exposed to the action of the rays.”

COWPOX AND THE SPREAD OF CANCER.

THE *Vaccination Inquirer* of December contains a report of the recent Congress of the National Anti-Vaccination League held in Glasgow in the autumn under the presidency of General Phelps. Among the papers read and discussed was one by the president himself, entitled “Growing Cancer.” In this paper General Phelps marshals the many facts which point to vaccination as the most potent factor in the appalling increase of deaths from cancer throughout the civilized world. Modern bacteriologists are quoted to show that neither cancer nor vaccinia is a microbic disease, but that both are probably due to a protozoon. In support of this he quotes the “Note concerning the Pathology of Cancer” by J. Jackson Clarke, F.R.C.S., in the *Medical Press* of March 11, 1903, to which we alluded at the time in these pages. Mr. Clarke contends that “vaccinia bodies” and “cancer bodies” are indistinguishable. General Phelps also points to the remarkable case related in the HOMEOPATHIC WORLD of June last by the late Dr. R. T. Cooper.

HOMEOPATHY IN THE HOBART CITY COUNCIL.

FROM the *Mercury* of Hobart, Tasmania, of October 27th, we learn that our former colleague, Mr. Gerard Smith, late of the London Homeopathic Hospital, has been appointed Medical Officer to the Hobart City Council. Mr. Gerard Smith saw a good deal of active service in sanitary official life during the period that he assisted the Health Officer of Hackney. There were two other applicants for the post, both allopathic medical men. The present acting Mayor of Hobart is Alderman H. T. Gould (one of the leading homeopaths of the colony), who was elected to the post in the absence of the Mayor through family bereavement.

THE *DIRECTORY*, 1904.

CIRCULARS for the *Homeopathic Directory* of 1904 are being sent out, and we notice that a special appeal is being made to recipients to return the same either initialled or corrected. This is a very proper request; and it seems to us it is as little as any one with the interests of homeopathy at heart can do, seeing the postage is already prepaid. The names of those who omit to return the circular year after year will be marked with a double asterisk in the 1904 issue. We are glad to learn that our go-ahead ally, Japan, is no longer without a homeopathic representative, and this country will find a place in the next issue.

REVISTA HOMEOPATICA CATALANA.

THE November issue of our young and spirited contemporary, the *Revista Homeopática Catalana*, contains a very sympathetic biographical sketch of the editor of the HOMEOPATHIC WORLD, with portrait, from the pen of Dr. Angel Olivé of Barcelona. We make our acknowledgments to Dr. Olivé for this courtesy; and we are very glad to note the steady progress homeopathy is making not in Spain only, but in all the Spanish-speaking countries of the New World.

ORIGINAL COMMUNICATIONS.

THE PRESENT POSITION OF HOMEOPATHY:
OUR HERITAGE AND OUR RESPONSIBILITIES.

By THOS. SIMPSON, M.D.

THE question of progress in the art of medicine must often engage the attention of the conscientious physician, especially when he looks around upon the ever-increasing number and variety of nostrums and the eagerness with which they are appropriated by the profession. According to the admission of a recent writer (himself a gentleman in large practice near London), "we lay hold of a vaunted new remedy for a common ailment like influenza, we ride it to death, and *then throw it overboard*," and so with many other so-called specifics. Now the fault must lie in one of two causes. (1) The indolence and the ignorance of the populace, or the failure of the profession to satisfy the needs of suffering humanity by the administration of remedies which can be shown to influence diseased states favourably, without injury to vital organs or functions. We know how much modern medicine has benefited by the renunciation of drastic methods which prevailed fifty years ago. Indirectly homeopathic principles have given the quietus to "heroic treatment;" and yet so much bigotry and intolerance exist towards that despised section of men who are convinced of the superiority of the humane methods, that they instinctively recoil from the humiliation of being regarded and described as "irregular," "eclectic," or "homeopathic." Hence "the new generation" discard the appellation, and disown any association or sympathy with any who insist on flying their flag and declaring to the world under what banner they sail. It is humiliating to know that so few are found willing to pay the modest penalty for consistency which is entailed whenever a man has the courage of his convictions and dares to stand alone for truth and right. Herein is found the chief reason of the stationary condition of homeopathy in Britain. Intolerance and bigotry have done so much to retard progress on every avenue of human effort for the betterment of the race, and the progress of medical science, that its stag-

nation can scarcely excite surprise. It appears to us that no other argument can be urged for the truth of the homeopathic law but the eloquent argument of fact and proofs of its utility in daily practice of hundreds of faithful followers in this and other lands who are honourable enough to admit the sources of their inspiration, and the grounds of their faith. Having practised myself for over thirty-five years to my delight and constant satisfaction along the lines initiated by Hahnemann, I joyfully bear my testimony to the immense advantages which are acquired by a knowledge of homeopathic principles in the daily demands which are made upon the resources of an ordinary practitioner in combating the multiform varieties of disease and distress which he is expected to relieve and remove. The indications for the selection of the remedy are so minute, the immunity from uncertainty which is so often felt in empirical prescribing, the speedy response to the correctly chosen drug, the gratification which follows amelioration of grave conditions by specific restorative stimulation, which the similimum supplies, all combine to entrance the beholder. The solid utility of the methods adopted surely commend them to every ingenuous and earnest physician, and inspire him with enthusiasm to make his own experience felt and adopted by all whom he can instruct and influence.

Let us all be impelled by the dearth of enthusiasm which is manifest—be inspired to lay to heart our bounden duty, and having found a treasure discover it to all we can influence.

Waterloo, December 9, 1903.

ISOPATHY AND INFLUENZA.

By DR. ERNEST NYRSSENS.

Translated for the HOMEOPATHIC WORLD by Miss GLADYS COOPER.

THE resources of isopathy increase with the progress of bacteriology. The first homeopaths who had recourse to isopathy contented themselves with potentialising morbid secretions. To-day the tendency to administer dynamisations of pure cultures of pathological bacilli becomes more and more marked.

In March, 1903, Dr. Kirn, of Pforzheim (Germany), published the result of his researches in this respect. Being himself very subject to attacks of influenza, he wished to find a preventative against the disease. He procured a pure culture of the bacillus of Pfeiffer, the micro-organism of influenza. With this he made an attenuation up to the thirtieth decimal dilution, and gave it the name of "Pandemicum" to distinguish it from Influenzine, which existed already and was only the attenuation of morbid secretions.

He took this as a prophylactic, and was, in consequence, during the winters of 1902 and 1903, free from influenza, although in other years he had been attacked at each epidemic.

After having tested these good preventative effects on himself, he administered it as a remedy to his patients, either as a prophylactic or to counteract the serious complications of influenza.

He obtained good results in these complications, such as catarrhal pneumonia and cerebral troubles. He frequently obtained a favourable result from the remedy in cases of insomnia.

Dr. Nebel, who tried this remedy, made the following observations:—

"The remedy has a rapidly curative influence on the headaches, fever, and cardiac symptoms; The catarrhal symptoms are but little influenced, except in so far that they do not appear when the remedy has been previously administered as a prophylactic. Phthisical patients under the influence of 'Pandemicum' support the attacks of influenza remarkably well."

It would be useful to prove "Pandemicum" upon the healthy organism. Dr. Nebel has made some experiments upon himself, and has observed, after taking the remedy, intense frontal cephalalgia, in every respect closely simulating the cephalalgia of influenza, and a weakness of the lower limbs, lasting fifteen minutes and forcing him to sit down. There have been no other experiments.

In spite of the very few pathological and curative indications, I procured the remedy with a view to testing it when the occasion presented itself.

My observations sufficiently coincide with those of Dr. Nebel. "Pandemicum" has given me no results in the

catarrhal affections, bronchitis, or broncho-pneumonia of influenza, but it has had remarkable results in the after-effects of influenza in which a nervous element predominates. I have seen persistent cephalalgia, pains in the nape of the neck, and lumbago rapidly disappear. The subjective symptoms which the remedy seems to characteristically prevent are pains in the back, passing into the arms, and from there into the hands.

As to the dose, I have obtained the best results with "Pandemicum" in the thirtieth dilution, administering the doses at intervals of eight days.

MATERIA MEDICA RHYMES.

BY MARGARET L. TYLER, M.D.

X. HEPAR.

For HEPAR, remember, he's *sore to the touch* :
He prevents suppuration, or hastens it, much.
Mind and body, alike, share his "touchiness," see?—
And he'll all the way round *over-sensitive* be.
Skin unhealthy :—eruptions, they're horribly *sore* :
Sore ulcers that "smell like old cheese" : on this score,
Remember, SORE, FETID, and EASILY BLEED,
And let them suggest to you *Hepar*, at need.

In lymph-glandular system, he finds his occasion :
He enlarges, makes sore,—to complete suppuration.
He resembles *Silicea* in many ways, note !—
With his "fish-bone," or "splinter," impacted "in
throat."
And in poisonings by *Merc.* he's a grand antidote.

When *Hepar* you think of for croup and catarrh,
Keep touch with his touchiness still :—there you are !—
He's excessively sensitive, now, to the air,
And the least little draught drives his soul to despair.
With profuse easy sweatings and rigors he'll cope :
And whooping-cough, phthisis, provide him a scope.
He is sensitive, also, to odours, to noise :
And so touchy, the veriest trifle annoys—
So outrageously cross with self, others, d'you know,
He could *murder* the person who angers him so !

XI. CHINA.

CHINA is *worse every other day* ;
 And he can't even bear to be looked at, they say.
 Everything—water !—tastes bitter : the fellow
 's anemic, and sallow, and dingy, and yellow.
 His tongue wears a coat, dirty, yellow, and thick :
 He has weakening night-sweats, is inclined to Hectic.
 He dreams, the impression persists all the day ;
 Is confused ; cannot think ; feels " played out " every
 way.
 There's a horrible hunger, and hunger at night,—
 Or—complains of the loss of all good appetite.
 No pain, but much flatus, with much diarrhea,
 In which food undigested is apt to appear.
 He gets hammering in temples, and ringing in ear ;
 Sight dims, and he deafens. A headache accurst !—
 With congestion and throbbings, the head's like to
 burst !

There's weakness of heart ; there's impaired circula-
 tion :—
 Congested, and bleeds :—to collapse, relaxation.
 Asthma, wheezing : cheeks puff with each fresh expira-
 tion.
 Big spleen, tender—aches : liver, tender and big :
 Big abdomen ; in ribs he gets many a dig !—
 He for alcohol craves, and is dropsical, very :—
 " Fixed delusions," and suicide, keep him unmerry !

In his fevers, three stages you'll easily trace,
Chill ; the long-lasting *heat*, with the fiery red face—
 But thirstless : *sweat* follows, is weakening, profuse :—
 In every such fever, *Quinine* is of use !

XII. BELLADONNA.

BELLADONNA you'd be learning ?—
 Bear in mind HEAT, REDNESS, BURNING.
 Every kind of local "*Itis*,"
 The popular appendicitis—
 Enteritis—meningitis—
 Little matter what the site is !—
Belladonna always right is.

In active hyperemia; here
Is *Belladonna's* special sphere ;
And head, brain, sense, its lawful prey :—
But idiots are immune, they say.

Poisonings with this drug, when seen, are
Diagnosed as *scarlatina*.
Eyes are brilliant, pupils wide,
Mouth and throat are parched and dried,
Skin dry, red, and hot as fire
[Covered parts, tho', may perspire !]
Face red-hot, or purple, state ;
Or, red and pallor alternate.
Then *rabies* it may simulate !—
There's mania, rage ; tears, scratches, bites :
On closing eyes, fantastic sights :
Twitch—spasm, convulsion : senses are
Distressed by light, noise, motion, jar.
Then semi-stupor, starts, and jumps :
The headache, burning ; throbs and bumps.
Movements are quick : and pain also
Will quickly come and quickly go.
There's dry, short, tickling cough :—again,
“ Like water swashing through the brain.”
“ Hand gripes intestines ” ; constipation :
Stitches in chest ; great palpitation.
'Tis of *Calcareo* the acute :—
Caused *deafness*, almost absolute :
Right side, blue eyes, fair hair, 'twill suit.

XIII. BRYONIA.

BRYONIA is bound to bring improvement,
Where ailments cannot stand the slightest movement.
A pleurisy he quickly will decide,
Provided patient lies on suffering side—
[If not, 'tis *Belladonna* must be tried.]
All kinds of fever own his potent sway ;—
Takes up the case when *Aconite* gives way
[That is, when blood's disorganised, well, say !]—
Remittent, bilious, typhoid, and rheumatic—
Only, his *worse from movement's* most emphatic.

All serous membranes at his touch inflame,
 And exudate. He loves to cure the same.
 Profoundly he affects lungs, livers, hearts,
 Kidneys—makes tender and inflamed these parts.
 Synovial, dropsical effusions wane ;
 Red joints he cures, that dare not move for pain.
 Hemorrhages ; nose-bleed (worst at summer dawning !)
 Craves foods he instantly rejects with scorning.

As gourmand and coarse feeder he is known :
 Food lies 'neath epigastrium "like a stone."
 Headache intense, and *must be kept at rest* :
 All kinds of pain for which *east wind* is blessed.
 Mouth dry, lips cracked and dry, with bitter taste :
 Tongue coated, dry :—the edges may be clean.
 Thirst, for large quantities, and long between.
 Head raised means vomit, fainting, sickness :
 Stool dry, hard, "burnt"—(with *Platina* there's sticki-
 ness).
 Anger, fright, chagrin, stand him for causation :—
 Chlorosis cures—vicarious menstruation.

RADIOLOGY.

As we like to keep our readers *au courant* with the march of events in what may almost be termed the new science of Radiology, we subjoin some items from the daily press. First of all we will give an article from the *Daily Telegraph* of November 28th, devoted to Madame Curie, who, it appears, is a Polish lady by birth :—

I.—THE HEROINE OF RADIUM.

"On Monday M. Pierre Curie, the distinguished Frenchman, whose name is identified with radium research, will be present at the anniversary meeting of the Royal Society to receive, at the hands of Sir William Huggins, the 'Sir Humphry Davy' gold medal. Madame Curie, his gifted wife, will be associated in this recognition of brilliant discoveries, since the Royal Society has conferred its honorary reward, for the first time in its whole history, for work conjointly conducted with that lady. This is in itself a peculiarly interesting and attractive circumstance, and henceforth will form an indissoluble part of the history of chemical science,

linked, too, it is pleasing to think, with the name of one of our great national chemists. Madame Sklodowski Curie, who is by birth a native of Poland, has already received unique distinctions from France, her adopted land by marriage with M. Pierre Curie. In 1898 the Paris Academy of Sciences awarded her its Gegner Prize of 3,800*l.*, a foundation intended to reward researches of a fruitful nature, and likely to promote the progress of science, however abstruse and apparently barren in outlook. The singular privilege was accorded Madame Curie of being designated as the recipient of this annual prize on three occasions, namely, in 1898, as aforesaid, and in 1900 and 1902. In the last-named year, and simultaneously with the allocation of the Gegner gift, she also received the newly-instituted Berthelot gold medal of the Academy, established in honour of that eminent chemist. It was accompanied, under the terms of the trust, by a copy of his *La Synthèse Chimique*. Hence, it is all the more gratifying to find that English science knows how to honour laborious and difficult negotiations at the proper stage of inquiry."

II.—THE PRICE OF RADIUM.

The question of the price of Radium has exercised some of our contemporaries not a little. The *Daily Graphic* (December 5th) seeks to put this right:—

"A good deal of misapprehension exists as to the price of the mineral radium, which has been variously quoted at £750,000 an ounce, '£50,000 for one-fifteenth of a grain,' or £360,000,000 an ounce, and at other equally absurd prices. Side by side with these wild estimates, there appear in the scientific journals advertisements offering the 'Spintharoscope'—which is the instrument devised by Sir William Crookes for showing the effects of radium rays on a barium platino cyanide screen, and which contains a tiny speck of radium bromide—for prices ranging from £3 3*s.* to £5 5*s.*, and the dealers in this rare mineral are willing to sell small quantities of radium bromide at a guinea a milligram.

"These discrepancies are accounted for, as a representative of the *Daily Graphic* finds, partly by the ignorance of the writers making them, and partly by the fact that there are various kinds of radium, or of radium bromide. When people speak of radium, they usually mean radium bromide, because, as a matter of fact, there are not half a dozen grains of pure radium in the world. An ounce of it would be a wonderful possession, and might conceivably be worth millions of money; but it would occupy many years before an ounce of it could be

collected by any method at present known to science. The form of radium used in experiments with it is radium bromide, which is prepared, or is refined to several states of radio-active efficiency, and it is accordingly worth varying amounts. The amount of it necessary to conduct scientific experiments with would be, in linear dimensions, rather larger than a comma in the *Daily Graphic*, and the value of that would have been, a few months ago, about £35. But Sir William Ramsay informed the writer that owing to the large demand that there is now for the best kind of radium bromide, a demand which is largely due to the desire of the medical profession to experiment with it, such a speck of radium bromide would now be worth about £80. Radium is found chiefly in pitchblende, and pitchblende exists in Cornwall as well as in Austria. But a piece of pitchblende of the size of a suburban villa would not yield more than a grain of pure radium, and the reasons for its cost are therefore evident. In Utah, U.S.A., a mineral called 'carnotite' has been discovered, from which it is hoped to derive radium bromide more easily, and therefore more cheaply."

III. RADIUM AND THE PERIODIC LAW: LECTURE BY SIR W. RAMSAY.

Sir Wm. Ramsay lectured on Radium at the London Institution on Thursday evening, November 26th (*Daily Telegraph*, Nov. 27th):—

"The full title of the lecture was 'On Radium and the Periodic Law in connection with recently-discovered Elements.' Hardly any scientific work of the last century was more remarkable than Mendelieff's Periodic Law. The great Russian chemist ranged the elements—hydrogen, oxygen, carbon, nitrogen, sodium, the metals, and the other substances—of which all things are composed in the order of their atomic weight. Thus arranged, he showed that substances which came in certain classes had certain properties in common—as, for example, fluorine, chlorine, iodine, and bromine. But there were gaps in this scheme, and Mendelieff predicted that new elements would be discovered to fill the vacant spaces. The fulfilment of that prophecy was one of the greatest scientific achievements of recent years—and each new kind of atom has fallen into and fitted an empty place. In 1894 Lord Rayleigh and Sir W. Ramsay detected argon in the air. Next year Sir William discovered helium, which had been revealed in the sun by the spectroscope before it was found on earth. Two years later, in 1897, when the British Associa-

tion met in Canada, Sir William Ramsay ventured on the prophecy that other elements like argon and helium would be discovered. He and a scientific colleague justified the forecast. They searched high and low, and finally by means of liquid air they isolated three new elements in the atmosphere—krypton, neon, and xenon—belonging to the same class as helium and argon, and like them inert bodies with no discoverable affinity for others. The professor showed what gases of these substances were like by sending through them an electric current. The spectra were thrown on the screen, that of xenon, or 'the stranger,' showing in its entirety the remarkable number of 2,000 distinctive lines. These, it has been said, are inert elements. Their discovery has been followed by the revelation of a class of elements that are remarkably energetic. In 1896 Röntgen discovered the X-rays, and Professor Ramsay showed a radiograph, the first he believed taken in London by the Röntgen rays. Simultaneously Becquerel, in Paris, discovered that uranium would discharge the electroscope. Madame Curie, following up the investigation, revealed the existence of polonium in pitch-blende, and in the same mineral Monsieur and Madame Curie made the momentous discovery of radium—now universally known as the most energetic of all radio-active bodies. But not the only one; there seem to be six in all—uranium (found by Becquerel, polonium and radium (M. and Madame Curie), thorium (Schmidt, of Breslau), tinium, and an unnamed element by Gresel. Radium is continually giving off gas, which the professor showed can be captured and condensed by the cold of liquid air. When the element is brought near the electroscope it instantly discharged the electricity. It also throws off ceaselessly emanations. Sir W. Ramsay showed that a radium salt gave off what are called Beta rays, which passed through a florin; these are probably infinitely minute corpuscles of electrified matter. Another class, the Gamma rays, traversed five or six inches of lead, these emanations presumably being waves in the ether, resembling light or electricity. What becomes of the radium ultimately? The infinitely small particles that it threw off eventually lost their radio-activity, and then they gave the spectrum of helium. It seemed as if this intensely active element at last, when all its energy was spent, would be helium. If there was only helium—and it was slowly changing into that element—the life of radium would last two million years. Who could say if other elements were not in a minor degree radio-active, and changing into others that were inert?

"Incidentally Sir W. Ramsay stated that radium was getting more and more precious. It now cost five times as much as it did six months ago, and was in increasing demand by medical

men and chemists. It had been found in some of the waste products of the Joachimstahl mines, which were the property of the Austrian Government, and that Government would not now allow the exportation of the residues from which it is extracted. In pitch-blende it formed only one-part in ten million, and its extraction was a most costly process. The present price of radium is about £50,000 for about the fifteenth part of an ounce ! ”

RADIUM AMONG THE HOMEOPATHS.

THE following extract from an editorial article of the New York Journal of Homeopathy shows how some homeopaths have been testing the therapeutic power of *Radium*. Professor Wm. Harvey King is dean of the New York Homeopathic Medical College, and one of the best-known electro-therapeutists of New York :—

“ Prof. Wm. Harvey King, of New York, has been experimenting with radium along with Mr. Hammer, and the two seem to have discovered a phenomenon that may prove of inestimable benefit to the medical profession. They have found that radium is capable of imparting some of its energy to water, that if a tube of radium is immersed in water for a time, the water becomes radio-active to a certain degree ; it is capable of affecting a photographic plate wrapped in sunlight proof paper. Prof. King is applying the knowledge thus gained to therapeutics. He is feeding two patients suffering from cancer of the stomach with water that has been subjected to the action of radium. Teaspoonful doses are administered. In one case there seems to be no change ; in the other there appears to be some improvement. To rule out the possibility of imagination the patient has, on more than one occasion, been given water that has not been acted upon by radium ; but he has been able to detect the difference.

“ If water can be thus made to partake of the properties of radium it is obvious that a great stride has been made in the usefulness of the metal from the physician’s standpoint. A substance that is worth several thousand dollars an ounce is not likely to find its way into every doctor’s office ; but water is inexpensive, and the energy of radium is practically inexhaustible, so that water with varying degrees of radio-activity ought to be able to be furnished for a nominal sum.”

THE DICTIONARY OF MATERIA MEDICA.

By DR. CLARKE.

DR. LAMBERT points out to me that in the "Relations" of *Cactus*, p. 325, I have given this:—

"Neuralgic and other forms of pain which are sure to appear when an accustomed meal is missed, *Ars.*" And he remarks that I have not given this modality under *Arsenicum* itself. This is quite correct; and I find that the "*Ars.*" must be expunged from the passage, as it is misleading. The particular modality is not found under *Arsenicum*.

My authority for this symptom is Farington; and it is under his description of *Arsenicum* that the symptom is given (p. 535), but it is given as belonging to *Cactus*, the neuralgia of which corresponds with that of *Arsenicum*. But Farington does not say that the modality belongs to *Arsenicum*; only that the two remedies correspond in the types of intermittent and malarial neuralgias.

Another question Dr. Lambert asks me in regard to *Cactus* is in reference to a symptom given under *Limbs* on p. 327:—

"Rheumatic pains in shoulders, upper and lower arm, in hips down to feet; < in rest and in motion, and in all positions."

Dr. Lambert queries if "< in rest and in motion and in all positions" can be correct. My reply is that I have taken the symptom exactly as it stands from Hering's *Guiding Symptoms*. It is there marked with a bar as having been verified. The *Cactus* is a very uncomfortable plant to handle; and the pains produced by *Cactus* are of the most severe and varied types. It is quite possible to have pains which are made worse whatever one does or does not do, and it appears that *Cactus* will be a remedy for such.

Under *Calcarea caustica*, p. 352, five lines from the top, is "< from motion." Dr. Lambert asks if that should not be "> from motion"?

The reply is Yes; for though some of the symptoms (stitches in hip) appear when walking, the symptom specially referred to is this: "Pain in small of back; on

waking, > by moving about." Therefore "< by motion" on p. 352 must be "> by motion." At the same time it will be well to add "Pain in hip < when walking about."

I am very much obliged to Dr. Lambert for drawing my attention to these points.

BRITISH HOMEOPATHIC ASSOCIATION.

Syllabus of Educational Work under the auspices of the British Homeopathic Association, from January to July, 1904, in conjunction with the Medical Staff of the London Homeopathic Hospital.

WINTER SESSION, JANUARY—MARCH, 1904.

I.—PROFESSIONAL LECTURES.

Materia Medica.—A course of lectures on *Materia Medica* will be given in the rooms of the British Homeopathic Association, 233A, Regent Street, W., on Mondays and Thursdays in January, February, and March, 1904, commencing January 11th.

Dr. J. H. Clarke and Dr. T. G. Stonham are the appointed lecturers. The lectures will commence at 5 o'clock p.m.

Each lecture will consist in part of an exposition of the nature and range of action of a drug, and in part of further elucidation on points of detail as invited by those present.

Homeopathic Therapeutics.—A course of lectures on *Homeopathic Therapeutics* will be given in the Board Room of the London Homeopathic Hospital on Tuesdays and Fridays during the months of January, February, and March, 1904.

Dr. D. Dyce Brown and Dr. J. Galley Blackley are the appointed lecturers. The lectures will commence at 5 o'clock p.m.

These lectures, besides being expositions of homeopathic therapeutics, will be planned so as to afford opportunity for personal conference between Lecturer and auditory on practical matters connected with the subject of the lecture.

Secretary of the Lecture Sub-Committee,

BYRES MOIR, M.D.

II.—TUTORIAL WORK.

Dr. T. G. Stonham has been appointed medical tutor at the London Homeopathic Hospital for the purpose of imparting

to each professional student of homeopathy a detailed and thorough clinical knowledge of the homeopathic treatment of disease. Dr. Stonham attends at the hospital three days weekly, and any inquiries as to this course may be addressed to the medical tutor direct, at the hospital.

III.—SPECIAL “WEDNESDAY” LECTURES.

These will be given by specially appointed homeopathic physicians, dealing with particular topics or problems in the science and art of homeopathy.

The lectures will be delivered on each Wednesday evening (excepting the first Wednesday in each month) during the months of January, February, and March, 1904, in the Board Room of the London Homeopathic Hospital, at 5.30 o'clock p.m.

The lecturers and lectures for January, February, and March will be specially announced at the commencement of each month.

Homeopathic physicians and all qualified medical men and women are invited to these lectures.

IV.—A MISSIONARY COURSE.

A separate course of training for foreign missionary students and missionaries, including Medical Subjects, Tropical Hygiene and Tropical Diseases, Surgical Subjects, First Aid to the Injured, Eye and Ear Diseases, Skin Diseases, &c., with a special course to ladies on Nursing, Elementary Obstetrics, &c., The Diseases of Children, will be given at the London Homeopathic Hospital on Mondays, Wednesdays, and Fridays during the months of January, February, March, May, and June, 1904, by a staff of specially appointed lecturers.

The curriculum is designed to impart to missionaries knowledge essential for the maintenance of their personal health, and to enable those who reside in regions where qualified medical aid is unobtainable to deal intelligently with common ailments, whether arising amongst themselves or the natives.

A special syllabus is issued giving fuller information and detail regarding this course.

Secretary of the Sub-Committee for the “Missionary Course,”

E. A. NEATBY, M.D.

V.—PRIZE ESSAY.

Subject: “On the Best Means for the Organisation and Development of Homeopathic Professional Education in Great Britain.”

The Executive Committee of the British Homeopathic Association hereby offer a prize of *Twenty Guineas* for the best

essay on the above subject. The following are the instructions given by the Executive Committee for the information of intending essayists:—

(1) The object of the prize is to obtain a clear account (a) Of the most desirable and practical methods of utilising the Homeopathic Clinical Institutions in Great Britain for instruction in homeopathy; (b) Of the most desirable and practical methods whereby efficient systematic teaching in homeopathic materia medica and therapeutics can be conducted in Great Britain; (c) The most desirable methods for the effective testing of the acquirements of professional students in homeopathic theory and practice.

(2) The plan and detail of the essay must be so constructed as to include both a commencement of educational organisation at this time, as well as desirable developments in the future.

(3) All essays sent in to be the property of the British Homeopathic Association.

(4) Essayists must be residents in the British Empire.

(5) Essays must be delivered to the Secretary of the British Homeopathic Association not later than March 31, 1904, and must be designated by a motto, and *not* the name of the essayist. The name and address of the essayist to be contained in a sealed envelope, on the outside of which the motto must be inscribed.

(6) All essays must be typewritten.

VI.—THE PROVING OF DRUGS.

A sub-committee has been formed, and arrangements are being made in order to re-commence the essential work of proving drugs, both new and old. This work is considered as of vital importance to homeopathy, and ranks high in the plan of operation of the Association. So soon as the arrangements have been concluded the details will be announced in the Journals.

The Secretary of the sub-committee will be glad to receive from colleagues any communications or suggestions relative to this most interesting and necessary work.

Secretary of sub-committee for drug-proving,
WASHINGTON EPPS, M.R.C.S., &c.

VII.—ORIGINAL RESEARCH.

Research-work for the investigation of problems connected with the homeopathic practice of medicine is to be subsidised by the Association under specified conditions. Much and important work lies in hand in this department, and it is anticipated that, as the finance difficulty is removed, the

stimulus to investigation among original workers will be immediate and considerable.

The secretary of the sub-committee invites inquiries and applications concerning research-work, and the conditions under which the Association is prepared to subsidise the workers.

Secretary of sub-committee for research,
DUDLEY WRIGHT, F.R.C.S.

VIII.—WORKS ISSUED BY THE ASSOCIATION.

There will be prepared and issued, under the auspices of the Association, an entirely new and "up-to-date" Handbook, setting forth the homeopathic basis and tendencies of modern medical science. This Handbook is being prepared by Byres Moir, M.D., and James Johnstone, F.R.C.S., and is intended for circulation mainly among the younger members of the profession.

Dr. Dyce Brown's congress paper on "Homeopathy among Allopaths," and since published in an amplified form in the *Monthly Homeopathic Review*, will be issued by the Association under the title "The Permeation of Modern Medicine by Homeopathy." Medical practitioners will be supplied with copies free of charge on application to the Secretary.

SUMMER SESSION, 1904.

This Session will include the months of May, June and July, 1904.

Besides such of the foregoing work as is continued over the Summer Session, the ensuing special courses will be held during these months.

I.—POST-GRADUATE MONTH.

During the month of May a series of Post-Graduate Courses will be given on (1) Medical Subjects; (2) Surgical Subjects; (3) Gynecology; (4) Other Specialties.

These courses will be so planned that professional men may take the medical course only, or the surgical course only, or follow the demonstrations and practical work in any other single course given, or attend the whole series of courses.

The main object in this post-gradual course is to convey and exemplify by lectures, demonstrations, and practical work, the most modern and most reliable work in diagnosis and treatment. Thus the medical course is planned to include, beside other subjects, the modern methods of blood examination; modern methods of examination of gastric secretion; modern methods

in cardiac work, &c. ; with especial bearing on the deductions for treatment to be drawn from them.

The course will be conducted at the London Homeopathic Hospital, will occupy all the working hours of each academic day in each week of May, and will be divided into sections of subjects according to a time-table to be issued later.

Secretary of the Post-Graduate Sub-Committee,
JAMES JOHNSTONE, F.R.C.S.

II.—SYSTEMATIC COURSE OF LECTURES ON MATERIA MEDICA.

A systematic course of lectures on the Homeopathic *Materia Medica* will be delivered by J. H. Clarke, M.D. and T. G. Stonham, M.D., at the rooms of the British Homeopathic Association, 233, Regent Street, W., on each day (excepting Saturdays and Sundays) in the months of May, June and July, 1904. The lectures will be given at 9.15 a.m., and will be the same in number as those of the University summer course, *i.e.* 50.

III.—SYSTEMATIC COURSE OF LECTURES ON HOMEOPATHIC THERAPEUTICS.

A systematic course of lectures on homeopathic therapeutics will be delivered by D. Dyce Brown, M.D., and J. Galley Blackley, M.B., in the Board Room of the London Homeopathic Hospital, on each day (excepting Saturdays and Sundays) at 5.30 o'clock p.m., during the months of May, June and July, 1904. These lectures will also correspond in number and consecutiveness to those of a University summer course.

Further particulars may be obtained from the secretaries of the sub-committees, or from the secretary of the British Homeopathic Association—

Mr. FREDK. KING, Regent House, 233A, Regent Street,
London, W.

THE MISSIONARY COURSE.

The following circular of the missionary course has been issued :—

“ . . . There was no medical man within 1,200 miles, and we were sometimes compelled to act whether we knew or not, and we found a small smattering of information . . . was of the utmost advantage to us. . . . I hope that all missionaries who go where there is no doctor at all, will get as much knowledge as they possibly can.”—
Rev. JAS. CALVERT, from Fiji Islands. *Report of the Centenary Conference*, 1888, vol. ii. p. 25.

SYNOPSIS OF AN ELEMENTARY MEDICAL COURSE TO FOREIGN
MISSIONARY STUDENTS AND MISSIONARIES,

Including medical subjects, surgical subjects, first aid to the injured, tropical hygiene and tropical diseases, eye diseases, &c., with a special course to ladies on nursing, elementary obstetrics, and the diseases of children, to be given at the London Homeopathic Hospital, Great Ormond Street, W.C., under the direction of the British Homeopathic Association.

MEDICAL TRAINING FOR FOREIGN MISSIONARIES.

A course of training in the elements of medicine and allied subjects has been arranged for foreign missionaries and *bond fide* accepted missionary students.

The curriculum, comprising lectures and clinical teaching, is designed to impart to missionaries knowledge essential for the maintenance of their personal health, and to enable those residing in regions where qualified medical aid is unattainable to deal intelligently with common ailments, whether arising amongst themselves or the natives.

In all cases the practical side of the subjects will be emphasised and needless technicalities avoided.

The course extends over five months, and it is believed that it can be grafted on to the theological course without materially prolonging missionary training, and at a minimum cost.

Part of the lectures will be given in the winter, from January to March inclusive, and part in the summer session. In association with these full opportunities will be afforded to students of seeing actual cases of disease, both in the wards and in the out-patient department, of personally examining them and of suggesting treatment. Where possible they will be allowed to undertake, under supervision, dressings or minor surgical manipulations.

The hours of attendance are so arranged that the lectures are immediately followed by the practical work, thus involving a minimum expenditure of time to the student.

From two to three hours, on three afternoons weekly, are thus filled up. Extra hours for practical work for the specialities will be arranged as may be necessary.

The subjects dealt with are mentioned below, tropical hygiene and diseases occupying a conspicuous place.

Examinations of the students will be held, and prizes awarded to the most successful candidates.

Application to be made through the secretary or official representative of the missionary society with which the student is connected, to—

THE SECRETARY,
Missionary Medical Course,
Homeopathic Hospital, Great Ormond-street, W.C.
The hospital possesses 100 beds, and its out-patient department averages 40,000 attendances annually.

Every department of medical and surgical science (save midwifery, infectious and mental diseases), is represented in the hospital, which has an exceptionally complete equipment.

This course does not entitle students to assume the position of a medical missionary, nor does it compete in any way with medical missionary societies or work. It is intended to supply to the non-medical missionary elementary knowledge which is, however, vastly better than none.

<i>Subjects.</i>	<i>Lecturers.</i>	<i>Dates.</i>
Anatomy	J. JOHNSTONE, M.B., F.R.C.S.Eng.	January.
Physiology	T. MILLER NEATBY, M.A. ..	January.
Surgical Subjects ..	{ DUDLEY WRIGHT F.C.S. C. GRANVILLE HEY, M.B., C.M. }	.. Feb. and Mar.
"First Aid"	E. J. HAWKES, L.R.C.P. & S. ..	.. Feb. and Mar.
Medical Subjects ..	{ J. G. BLACKLEY, M.B.Lond. T. G. STONHAM, M.D.Lond. }	.. Feb. and Mar.
Tropical Diseases } and Tropical Hygiene }	Lieut.-Col. H. E. DEANE, M.R.C.S. Royal Army Medical Corps.	May and June.
Diseases of the Eye	C. KNOX SHAW, M.R.C.S.Eng. ..	.. March.
Diseases of the Ear } and Throat }	A. SPIERS ALEXANDER, M.D. ..	.. May.
Diseases of Children	J. ROBERSON DAY, M.D.Lond. ..	.. May.
Principles of Prac- } tical Surgery }	A. A. BEALE, M.B., C.M. ..	.. February.
Skin	J. G. BLACKLEY, M.B.Lond. ..	.. June.
Dentistry .. ..	.. .. ..	.. May and June.
Dietetics	JAS. SEARSON, M.D. ..	.. ..

FOR WOMEN ONLY.

Nursing	{ Mrs. L. CUNARD HARRIS, L.R.C.P., L.M. }	.. May and June.
Obstetrical Subjects	Miss EDITH NEILD, M.B.Lond. ..	.. May.
Diseases of Women	EDWIN A. NEATBY, M.D. ..	.. June.

FEES (PAYABLE ON REGISTRATION).

Composition fee for the whole course .. ..	.. ..	12 guineas.
Clinical (practical) work only .. ..	.. ..	5 "
* Lectures on medical or surgical work only .. ..	.. ..	3 "
* " " dentistry only .. ..	.. ..	2 "
* " " other single subjects .. ..	.. .. each	2 "

The course commences on Monday, January 11, 1904, at two o'clock prompt.

* Including two months' clinical work.

OPINIONS OF MISSIONARY AUTHORITIES ON THE PROGRAMME.

The Bishop of London writes:—"I believe that such a course of medical training for foreign missionaries would be most useful.

"(Signed) A. F. LONDON."

The Reverend R. F. Horton, M.A., D.D., writes:—"My Dear Dr. . . . ,—Your prospectus quite delights me. I rejoice in the thought that our missionaries should have these advantages, and that kind of elementary training in medical treatment which will be a constant aid in commending the work of the Great Physician.

"Yours very truly,

"(Signed) ROBERT F. HORTON."

James E. Mathieson, Esq., writes:—"This proposal for an elementary medical course for missionary students and missionaries must prove, in my opinion, most valuable.

"(Signed)

JAMES E. MATHIESON,

"Chairman Medical Missionary Association."

R. Broomhill, Esq., late secretary, China Inland Mission, writes:—"Dear Dr. . . . ,—In great countries such as India, China, and Africa, where missionaries are often many days' journey from the nearest medical man, a short course of training in the elementary knowledge of medicine, and the treatment of common ailments, would be to the missionary of priceless value, first of all to the preservation of their own health, and next for enabling them, by the use of simple remedies, to benefit greatly the people among whom they labour. *No missionary who may have it in his or her power to obtain such help should go out without it.*

"(Signed) B. BROOMHALL."

HYDRASTIS AND HECLA IN OTOSCLEROSIS.—Dr. Perry Dickie had a valuable paper upon this subject in the *Homeopathic E., E. and T. Journal* for September. The author said that in every branch of the domain of medicine we find its especial complaint beset with greater obstacles than that of the others, in our efforts to combat its evil tendencies. In the special field of the otologist, otosclerosis can lay claim in every way to filling the bill in these particulars. The writer claims that in this condition uric acid, retained in the system, is the primary causative factor. When this uric acid diathesis has been overcome by eliminants, followed by the proper diet and mode of life, then our remedies may do good. *Hydrastis canadensis*, 1-3 drops, three times daily, has proved itself a great remedy, both in the incipient and early stages, and as a prophylactic to the extension of the morbid process. It seems to have the power of increasing the hearing power, and, at times, will relieve the tinnitus. *Heclæ lava 3x* is also mentioned as a promising remedy for study.—*Hahn. Monthly.*

SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

THE third meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thursday, December 3, 1903, Dr. Herbert Nankivell (President) taking the chair.

Robert Hume Fallon, M.D., C.M.Aberd., of 1, Thistle Villa, Green Point, South Africa, was proposed for membership by Thos. D. Nicholson, M.D., and C. Knox Shaw.

Robert Montagu Le Hunte Cooper, M.D., having been duly proposed by John H. Clarke, M.D., and George Burford, M.B., was elected a member.

The following specimens were exhibited:—

1. Large fibroid growing in left broad ligament, removed by enucleation, leaving the uterus intact: Abdominal section: Recovery. DR. BURFORD.
2. Large sub-peritoneal fibroid, with thick pedicle, removed from the serous surface of the uterus, leaving the organ intact: Abdominal section: Recovery. DR. BURFORD.
3. Multiple myomata of the uterus, removed from a woman aged 49: Hysterectomy: Recovery. DR. BURFORD.
4. Ruptured tubal gestation, of two months' growth, removed from the right side on account of sudden intraperitoneal hemorrhage and collapse: Abdominal section: Recovery. DR. BURFORD.

The meeting was held under the auspices of the Section of Materia Medica, and after the preliminary business Dr. Goldsbrough read the notes and showed a case of locomotor ataxy which had greatly improved under *Ign.* 3 and 12, *Nux* 30, and *Atropine* 12, which latter especially helped the pains.

Dr. Stonham then showed a case of Bazin's disease, of which he gave a short *resumé*. These cases considerably curtailed the principal business of the evening, which consisted in the exhibition of a static electrical machine, the action and uses of which was demonstrated by Dr. Ashton, and excited great interest and amusement. Dr. A. H. Croucher (Eastbourne) then read a very

interesting and able paper on "Röntgen Ray Therapeutics in General Practice," in which he gave a description of apparatus, and discussed the nature of X-rays, their effects on the tissues, the method of using them for therapeutic purposes, and the indications for their application, concluding with several cases illustrating the treatment. The discussion on this paper, owing to the late hour, had to be postponed to a future occasion.

INSTITUTION.

LEICESTER HOMEOPATHIC DISPENSARY AND COTTAGE HOSPITAL.

ANNUAL MEETING.

THE annual meeting of the Leicester Homeopathic Provident Dispensary and Cottage Hospital was held on Tuesday afternoon, December 15th, in the Mayor's Parlour at the Municipal Buildings. The Mayor (Ald. Sawday) presided, and among others present were: Dr. Clifton, Miss Fullagar, Miss F. Fullagar, Rev. W. Bishop, Mr. Albert Pickard, Mr. W. L. Salusbury, Mr. G. Wheeler, Mr. W. H. Orton, Mr. John Milne, Dr. Mason, Dr. Capper, Mrs. Clifton, Miss Hazlerigg, Mrs. C. S. Robinson, Miss Rokeby, Miss D. Salusbury, &c.

Dr. Clifton, in stating the aims and objects of the institution, said that they as homeopaths were handicapped, as there had been no hospital nearer than Birmingham or London where those requiring special homeopathic treatment could have such hospital treatment. The dispensary had done, he believed, good work for over 30 years, but he thought for over 50 years there had been a Homeopathic Dispensary in the town. The larger question of their hospital, where the poorer and middle-class patients could have skilled and trained nursing, with medical and surgical attention, became so imperative that a small beginning was made some 17 months ago, and by the statistics which would be given the benefit of this institution would be shown to the community at large. Their General Infirmary was and had been doing a glorious and good work for many years for suffering people, but all must ask themselves this question — Why should a large number of the thrifty and upper middle-class people be dependent on that which is purely a charitable institution, or, if not that, go to a private nursing home, where they must pay from

three to five guineas a week? What they aimed at was to make their institution as much as possible self-supporting, where with this skilled nursing away from the worries and anxieties of their own homes, with probably not the best surroundings, yet having a quiet haven of rest which was not possible in a large institution, they may feel that they are not having this as a charity. To do this they had fitted up one room for special private cases, and two other rooms for ordinary cases. Taking the average cost per week per patient, including the necessary dressings, &c., would average 25s. to 30s. Therefore, they must charge from one to three guineas a week. The very poor, by getting a subscriber's ticket, and payment of a small sum themselves, could thus be properly treated. After they had heard the report of the good work which had been done, they would not, he thought, let it lack for funds. He had received the following letter from Lord Dysart, who subscribes £25 per annum to the institution—“Dear Dr. Clifton,—I regret that I shall not be able to be present on the occasion of the annual meeting in connection with the Homeopathic Cottage Hospital and Dispensary, but I hope you will have an entirely satisfactory meeting. I should like to take this opportunity to congratulate all concerned, not only on the inception of the scheme, but on their success in having carried out the practice of it to the present time; and I sincerely hope that the efforts that have been made afford grounds for thinking that a permanent foundation now exists on which the advance of homeopathy in Leicester may rest with some security, and that the progress in the next few years will be such as to satisfy all supporters of homeopathy, and convince the majority of those who are not yet aware of its benefits.” Continuing, Dr. Clifton said he had received many expressions of gratitude from patients who had been in, acknowledging the kindness and attention of nurses, and the bright and home-like feeling by which they were surrounded. He hoped the Ladies' Committee would organise some scheme for the collection of such a sum as would put it on a sound financial basis. What he should like to see would be that sufficient means would be found to still further enlarge this work by taking the next house, and so enlarging the usefulness of such a work. (Applause.)

Dr. Capper presented the annual reports.

The committee, in their report of the Cottage Hospital, stated that, as was anticipated, the hospital had abundantly vindicated the need for its existence. Sixty cases had been treated as in-patients during the eleven months.

The Rev. H. E. Brierley moved the adoption of the reports. He spoke from personal knowledge of the good work that was

being done by the institutions, and said he knew of none which had more adequately justified their existence. Both were worthy of the generous support of the public.

Mr. A. Pickford seconded.

The Mayor, in putting the resolution, also commended the work of the institutions.

The resolution was carried unanimously.

The whole of the officers were re-elected, and Mr. A. C. Waites was added to their number. The Ladies' Committee was also re-elected.

Votes of thanks to Drs. Clifton, Mason, and Capper for their services were passed, and the Mayor also was thanked for presiding.—From the *Leicester Daily Mercury*, Dec. 16th.

REVIEWS.

LIFE AND WORK OF DR. BURNETT.*

THE appearance of this volume must rank as one of the many items which redound to the credit of the British Homeopathic Association. If it had not been for the formation of this Association it is more than likely that the effort to found a memorial to the late Dr. Burnett would not have taken practical shape. The present volume is at once an outcome of that effort, and a means for bringing it to a successful issue. The compiler has to a large extent let Dr. Burnett paint his own portrait—the portrait of the most dogged, persevering, resourceful *curer* of modern times. No one realised more than Dr. Burnett the truth of the opening dictum of Hahnemann's *Organon*—the sole object of the physician is to *cure*.

Among old-school physicians of the present day there is none who is more deservedly popular than Dr. Goodheart. At the opening meeting of the Physical Society of Guy's Hospital in October last, Dr. Goodheart (*Med. Press*, October 20th) defined the doctor's place in the com-

* *Life and Work of James Compton Burnett, M.D., with an Account of the Burnett Memorial.* Compiled by Dr. J. H. Clarke. London: Published for the Burnett Memorial Committee by the Homeopathic Publishing Company, 12, Warwick Lane, E.C. 1904 Pp. 144. Library edition, half Persian, 4s.; cloth, 2s. 6d.

munity. He was discoursing on "Pitfalls." One of the pitfalls he warned his hearers against was the idea that they could cure. "The expression, 'I cure this or that,' heard so often on every side, is not a nice one. We *cure* hams! Disease *gets well* while we look on and assist as best we can." Here we have an honest description of what orthodox physic can do, and what it aims at!

Dr. Burnett's whole professional life is a mighty practical protest against this therapeutic nihilism; and the volume before us may be commended to doctor and layman alike as an inspiration and an encouragement. We trust every reader of the HOMEOPATHIC WORLD will buy a copy. We think it will be found to be readable as well as instructive. For the benefit of medical readers a portion of the compiler's preface may be reproduced:—

"There is no homeopathic writer whose clinical work is more frequently quoted at the present day than is that of Dr. Burnett; and there is none whose influence is more constantly visible in the writings of others. But whilst this is the case, there are many who have not clearly apprehended the working of Dr. Burnett's mind, and many who have failed to master the methods by which he obtained his ends. By means of the data given in the following sketch medical men will, I think, be able to put themselves in Dr. Burnett's standpoint and to work out for themselves problems such as those he solved. Students of Dr. Burnett's works—and every medical man and every medical student ought to study them—will find in this volume a key to simplify their studies."

"Physicians," said Dr. Burnett, "must be firm, and not allow themselves to be sneered or jeered away from their duty, but always *try to cure everything*; I do not mean pretend, but *try*." The methods by which he achieved success are detailed at length in this volume. His motto was "keep pegging away." But "pegging away" would have been useless without the guiding light of homeopathy, which he used in an original way with signal success.

The work of Dr. Burnett in the therapeutic world—in spite of all that he achieved in his lifetime—is only just beginning. The compiler hopes that this little volume will serve to hasten the spread of therapeutic enlightenment and power, and at the same time to keep the memory green of him to whose efforts and genius it is due.

It may be added that the cost of printing and publishing the volume is borne by the Burnett Memorial Fund; and any profits there may be after expenses are

paid will go to the Fund. The compiler has no proprietary interest in the book.

A word may be said, in conclusion, for the printers, binders, and publishers, who have done their share towards producing a very handsome volume.

HINDRANCES TO TRUTH.*

OUR readers have already had the privilege of reading this scholarly address, which Dr. Wilde has done well to reprint.

Dr. Wilde maintains that it is by recognising the limits of the human powers of conception that science has led to the accomplishment of those things which were previously inconceivable. The failure to recognise these limits constitutes one "hindrance to truth." By "hindrance to truth"—a rather clumsy phrase quoted from Sir James Paget—Dr. Wilde means hindrance to our perception and acknowledgment of truth. "When a phenomenon does present direct evidence to the senses it is difficult to conceive that it is not a truth, but only an apparent truth. Thus the fact that the sun rises in the morning, and sets at night, is about the best observed fact in nature, yet it is not a truth."

Still greater hindrance, says Dr. Wilde, is the perfectly human instinct to always associate every phenomenon with a cause, and, in the absence of a true knowledge of cause, to assume the knowledge, "and if the assumption seems good, to use it as a basis of principles, and mistake this for science."

The reason why truth has no chance in the orthodox medical profession is that the physician "has pleaded the interests of his profession as a reason for suppressing the natural evolution of knowledge." Herein lies the necessity of the forward movement now being taken by homeopaths. The fact that British homeopaths have been content hitherto to lead a hole-and-corner existence is perhaps a greater hindrance to the acceptance of truth than any of those mentioned by Dr. Wilde in his admirable address.

* *Hindrances to Truth: Being the Presidential Address at the British Homeopathic Congress, Oxford, 1903.* By Percy Wilde, M.D. London: E. Gould & Sons, Ltd. Price Sixpence.

THE NEED OF A RATIONAL AND HUMANE
SCIENCE.*

THIS important pamphlet consists of a lecture delivered by the author before the Humanitarian League. Mr. Carpenter tells how, after reading mathematics for some four years at Cambridge, and for ten years thereafter being engaged in the study of the physical sciences, he was led to be dissatisfied, during the latter part of the time, with the current methods and conclusions. Modern science, he says, is an attempt to survey and classify the phenomena of the world by the dry light of the intellect uncoloured by feeling. This attempt, in itself, is a very grand one, and an enormous advance on old-time science with its fancies and prejudices. But for all that the attempt is an impossible one. This science is not a true science; and it leads to dogmatism and narrow-mindedness as bad as the old. Ours is a mechanical age and takes a mechanical view of nature which is not true. A watch or other machine may be completely described, but not a tree or an animal. A machine is an aggregation of parts put together to fulfil certain definite actions and no others. A sewing machine sews and a watch keeps time. But *no* object in nature fulfils just one action. The human eye may be regarded as an optical instrument; it is this, but it is also vastly more—the chief instrument of human expression among other things. Science, in order to investigate the eye as an optical instrument, must regard it as that and that alone. Science is bound to ignore much in order to advance; it must proceed by what Mr. Carpenter calls the “Method of Ignorance.”

This is very important, and explains much. It is the great hindrance to the advance of true ideas at the present day. This Method of Ignorance has been of enormous service; but there is need of something more. Mr. Carpenter contends that in order to attain a really rational and humane science man will have to *feel* his true relation to other creatures and to the whole of which he is a part, and will have to use his brains to further this. “Science *is*, as we all know, the search for unity. That is its ideal. It unites innumerable phenomena under one law; and then it unites many laws under one

* *The Need of a Rational and Humane Science.* By Edward Carpenter. London: Humanitarian League, 53, Chancery Lane. Price 2d.

higher; always seeking for the ultimate complete integration. But (is it not obvious?) man cannot form that unity of the whole until he feels his unity *with* the whole." The science which Mr. Carpenter looks forward to is "something more organic to Humanity—which shall combine Sense, Intellect, and Soul; which shall include the keenest training of the Senses; the exactest use of the Brain, and the subordination of both of these to the finest and most generous attitude of man towards nature."

This is a brief summary of Mr. Edward Carpenter's argument; but the pamphlet is full of interest from beginning to end. There is one more passage which we cannot forbear quoting: "When Galileo turned his newly made telescope on Jupiter and saw it circled by satellites he saw in this an image of the Copernican system of the planets circling round the central Sun; but when he asked others to share his observation and his inference, they would not. 'Oh, my dear Kepler,' he writes to his fellow astronomer, 'how I wish we could have one hearty laugh together! Here at Padua is the principal Professor of Philosophy, whom I have repeatedly and urgently requested to look at the moon and planets through my glass; but he pertinaciously refuses to do so. What shouts of laughter we should have at this glorious folly!'" Hahnemann was acquainted with a folly no less glorious than this; and the folly has not diminished by lapse of time.

REPERTORY FOR UROGENITAL DISEASES.*

EVERY work which makes the individual symptoms of the *materia medica* more accessible to the prescriber deserves to be heartily welcomed. The history of the excellent Repertory before us is given in the preface thus:

"Realising the necessity of a classified index to the homeopathic *materia medica* for urogenital and venereal diseases, Dr. Coles, some years ago, compiled from the standard works of Hahnemann, Allen, Hale, Jahr, Hering, Farington, Cowperthwaite, and many others, the symp-

* *A Classified Index of the Materia Medica for Urogenital and Venereal Diseases.* By Bukk G. Carleton, M.D., and Howard L. Coles, M.D. New York: Boericke and Runyon, 11, West 42nd Street. London: Homeopathic Publishing Co., 12, Warwick Lane, E.C. Cloth, 7s. 6d.

toms pertinent to those diseases upon a somewhat new repertory plan.

“During these years Dr. Carleton has used the index, verified many of its symptomatic indications, and in practice demonstrated its efficacy in selecting the remedy most homeopathic to the case.”

It would have been convenient if the authors had told us more about the distinctive features of the classification and supplied a contents table. The main basis of the arrangement is anatomical. Each organ and each part of the organ constitutes a chapter, and under it are given, in alphabetical order, a list of the symptoms observed in it with their varieties. By this arrangement it is possible to find, in a very short space of time, whether any wanted symptom exists in any part. But functional, as well as anatomical, regions are represented, such as Urination. Under this heading are included abnormal conditions of the function and symptoms accompanying, preceding, and following the act.

The concluding part of the work deals with distinctly morbid conditions — masturbation, gonorrhoea, chancre, &c. Under this first heading we miss *Origanum*, *Gratiola* (especially valuable in masturbation in girls), and the nosodes *Medorrhinum*, *Syphilinum*, and *Tuberculinum*, all of which are valuable. Under “Condylomata and Warts” we miss an important symptom given by Hering under *Antim. tart.*, “warts behind the glans penis, with ulcers elsewhere.” The first part of this—“Warts behind the glans penis”—we have verified.

But perfection is not to be looked for in a Repertory—though it should be striven after. We congratulate the authors on the work they have done; it will materially lighten the labours of the prescriber who requires a remedy in this sphere. It must be noted that only the male genital sphere is included. A very good index concludes the volume.

PHYSICIAN'S DIARY AND CASE BOOK
FOR 1904.*

WE have received a copy of this ever-welcome annual from Messrs. Keene and Ashwell. In every respect it fully maintains the high reputation it has achieved, and we can confidently commend it to all physicians who have not yet made its acquaintance. To those who have ever used it, it needs no commendation.

NOTIFICATIONS.*

. Under this heading we shall be happy to insert notices of appointments, changes of address, &c., and holiday arrangements.

DR. CLIFTON HARRIS, *Brighton*.—Dr. Clifton Harris has commenced practice at 14, Norfolk Square, Brighton. His hours of attendance are 8.30–9.30 a.m.; 2.30–3.30 p.m. (except Wednesdays and Saturdays); Monday, Tuesday, and Friday, 7 to 8 p.m.; Thursday, 9.30–10.30 p.m.

MRS. CLIFTON HARRIS (*née* CUNARD CUMMINS), *London and Brighton*.—Mrs. Clifton Harris, L.R.C.P., L.R.C.S.I., L.M., attends at 89, Great Russell Street, W.C., daily (except Saturdays), 12–1, and Wednesday evenings, 7–8; at 14, Norfolk Square, Brighton, Thursday evening, 7–9, and by appointment.

Obituary.

JOHN WILDE, L.R.C.P. Edin., M.R.C.S. Eng.,
L.S.A.

WE greatly regret to record the death of another homeopathic veteran. Dr. John Wilde, of Park House, Weston-super-Mare, passed away on December 10th, after a protracted and painful illness. He died from malignant disease of the ethmoid cells at the age of seventy-six. He was educated at King Edward the Sixth's Grammar School, Birmingham. After qualifying for the medical profession in 1851, he practised for a short

* *The Physician's Diary and Case Book for 1904*. London: Keene and Ashwell, Ltd., 74, New Bond Street.

time in Islington, London, and then migrated to Winchester, where during the greater part of fourteen years he practised as an allopath.

It was during his residence in Winchester that he happened one day to pick up one of Sharpe's *Tracts on Homeopathy* from the counter of a bookseller's shop, and he commenced reading it forthwith. Becoming interested he took the book home, and this led to his reading other books on the subject until at last he decided to give the new system of medicine a trial.

At this period of his life he was a district medical officer, and he made his first experiments with homeopathy on his parish patients. Finding the results far exceeding his past experience as an allopath as regards the alleviation and cure of disease, he finally determined to give up allopathy altogether, and proclaimed himself a homeopath. The consequence of this conscientious and courageous act was that he lost nearly all his private patients. After a time, however, they gradually returned to him, and he made many converts of them.

In 1872, owing to the vacancy at Weston-super-Mare caused by the death of Dr. Cochrane, Dr. Wilde moved to that watering-place, where he remained for thirty-one years up to his decease. Dr. John Wilde leaves a widow, four daughters, and six sons. Four of his sons are in the medical profession practising homeopathy.*

His son, Dr. Rowland Wilde, succeeds him in practice. Dr. Stanley Wilde (to whom we are indebted for the above details) represents homeopathy at Cheltenham; Dr. Percy Wilde practises at Bath, and Dr. Herbert Wilde at Brighton. To the bereaved family we offer our sincere condolence. Dr. Wilde was well known in the homeopathic community as an excellent practitioner. He was an occasional contributor to our journal, and was the author of several tracts bearing on homeopathy.

GRAPHITES IN ZONA.—Writing in the *Journal Belge d'Homœopathie*, Dr. Boniface Schmitz, of Antwerp, strongly recommends the use of graphites in zona. He believes that every case requires it sooner or later before a cure is effected. If rhus and arsenicum can be used successfully at the beginning of the disease, particularly for the eruption, graphites is specially applicable to the concomitant neuritis. Outside of its action on the disease itself it seems to have marked constitutional effects.—N. A. J. H

GENERAL CORRESPONDENCE.

CHINA B. H. P.

To the Editor of THE HOMEOPATHIC WORLD.

DEAR SIR,—Homeopathic chemists must feel indebted to Dr. John McLachlan, of Oxford, for bringing before their notice the subject of *China*, as he clearly shows the uncertainty of the kind of bark used by Hahnemann in his provings, and no amount of investigation will, I fear, clear up the point; and he is quite right in stating that *C. officinalis* should be applied to the pale, not the yellow bark.

It appears to me that what we should decide is the kind of bark to be used in the future, and the amount of alkaloids it should yield. The account given by Messrs. E. Gould & Son in the last number of your journal is a useful contribution on the subject. They state, however, that during the last forty years it has been their practice to use *Cort. Cinchonæ flav.* of the finest quality, and guaranteed to yield six per cent. of quinine sulphate, and that it is obtained from *C. Calisaya* var. *Ledgeriana*. Turning to the preface of the last (3rd) edition of the *British Homeopathic Pharmacopeia*, I find that Mr. Wyborn (of the firm of E. Gould & Son) placed his services at the disposal of the British Homeopathic Society, and that he made calculations and experiments that were needed to make the work as perfect as possible, &c. This was in 1882, just twenty-two years ago, yet under "*China*" we are directed to use yellow *Cinchona* bark, and the characters and tests are simply copied verbatim from the 1867 edition of the B. P. The characters describe the bark as usually in flat pieces, deprived of periderm, rarely in coated quills, and the test demands not less than 2 per cent. of Quinia, which would be equal to about $2\frac{1}{2}$ to 3 of sulphate. Why not have given us the benefit of his experience of the previous eighteen years?

The question is, are we or are we not to follow the B. H. P. directions for making *China* ϕ .?

The following replies to an inquiry as to the amount of alkaloid in the bark from well-known firms will, I am sure, be interesting to homeopathic chemists:—

(1) The quills of yellow (cultivated) *Cinchona* bark are

the best. The flat *Cinchona* of the present day contains little or no alkaloid. We can supply you with yellow quill *Cinchona* yielding quinine equal to 7.6 per cent. of sulphate.

(2) Can supply *Cort. Cinchonæ flav.* quill yielding 8 per cent. of sulphate of quinine. The flat *Cinchona* yields less than 5 per cent.

(3) Cannot obtain a bark which will yield 6 per cent. of quinine; the best is 4 per cent. (quinine, not sulphate).

(4) Cannot guarantee anything.

(5) We have some quilled yellow *Cinchona* bark which is fairly rich in alkaloid. We have not in stock any flat yellow bark rich in quinine, neither have we been able to obtain any in the London market for a considerable time past.

(6) The percentage of quinine in yellow *Cinchona* bark varies very greatly. The old cultivated *Calisaya* bark of the best quality yielded about 3 per cent. of alkaloid, that is, 4 per cent. of sulphate. Six per cent. of sulphate is a very high test for *Calisaya* bark, but where carefully cultivated it is quite possible.

Some of the cultivated *Calisaya ledgeriana* of Java tests over 10 per cent. of quinine sulphate.

(7) We do not think that it is possible now to obtain yellow bark of such quality (that is, 6 per cent. of sulphate). We have seen very fine cultivated *Calisaya ledgeriana* which yielded even more than 6 per cent., but none has come into our hands lately testing more than 3 or 4 per cent. at the outside of quinine sulphate. Most of it is much poorer.

The last two extracts are from very eminent firms, and can be relied upon.

I think, however, the B. H. P. should be revised, and more original work contributed, for, as it stands, it chiefly consists of matter copied from the old edition (1867) of the B. P., now out of date.

Yours faithfully,

L. T. ASHWELL.

(For Keene & Ashwell, Ltd.)

74, New Bond Street, London, W.

Dec. 16, 1903.

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET,
BLOOMSBURY.

HOURS OF ATTENDANCE:—Medical (In-patients, 9.30; Out-patients, 2.0), Daily; Surgical, Monday, 2.0; and Saturdays, 9 a.m.; Thursdays, 10.0 a.m.; Diseases of Women, Tuesdays, Wednesdays, and Fridays, 2.0; Diseases of Skin, Thursdays, 2.0; Diseases of the Eye, Mondays and Thursdays, 2.0; Diseases of the Throat and Ear, Wednesdays 2.0; and Saturdays, 9 a.m.; Diseases of Children, Mondays and Thursdays, 9.0 a.m.; Operations, Tuesdays, 2.30; Diseases of the Nervous System, Thursdays, 2 p.m.; Electrical Cases, Wednesdays, 9.0 a.m.

MEDICAL AND SURGICAL WORKS PUBLISHED
DURING THE PAST MONTH.

- Bell (Robert).** *Cancer. Is it Curable?* Yes. Cr. 8vo, sd., pp. 31. (Cameron, Glasgow; E. Wilson. 1s.)
- Brearily (Harry).** *The Analytical Chemistry of Uranium.* 8vo. (Longmans. Net, 2s.)
- Carter (Robert Brudenell).** *Doctors and their Work; or, Medicine, Quackery and Disease.* Crown 8vo, pp. vi-316. (Smith, Elder. 6s.)
- Case Book for Private Nursing.** 4to. sd. (Scientific Press. Net, 3d.)
- Cooke (J. B.)** *A Nurse's Handbook of Obstetrics.* Cr. 8vo. (Lippincott. Net, 9s.)
- Coulter (J. M.) and Chamberlain (C. J.)** *Morphology of Angiosperms; Morphology of Spermatophytes. Part 2.* 8vo. (Appleton. Net, 10s. 6d.)
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- Hall (J. Walker).** *The Purin Bodies of Food Stuffs and the Role of Uric Acid in Health and Disease.* 2nd ed., revised. Cr. 8vo, pp. 216. (Sherratt and Hughes. Net, 4s. 6d.)
- Ince (Joseph).** *The Latin Grammar of Pharmacy. For the Use of Medical and Pharmaceutical Students.* 8th ed. Cr. 8vo, pp. 380. (Bailliére. Net, 5s.)
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- Lake (Richard).** *Handbook of Diseases of the Ear. For the Use of Students and Practitioners.* With 3 Coloured Plates. Cr. 8vo, pp. 242. (Bailliére. Net, 6s.)
- Manual of Medicine (A).** Edited by W. H. Allchin. Vol. 5. Cr. 8vo, pp. 700. (Macmillan. Net, 10s.)
- Metcalf (Richard).** *Essays and Notes on Hydrotherapeutics.* Cr. 8vo, pp. 260. (Simpkin. Net, 3s. 6d.)
- Shambaugh (George E.).** *The Distribution of Blood-Vessels in the Labyrinth of the Ear of Sus Scrofa Domestica.* 3 Coloured Plates. (Univ. of Chicago Bicennial Publications.) 4to, pp. 20. (Wesley. Net, 6s. 6d.)
- Stephens (J. W. W.) and Christophers (S. R.).** *The Practical Study of Malaria, and other Blood Parasites.* Illust. 8vo, pp. 378-xxxv. (Longmans. Net, 10s.)
- Transactions of the Edinburgh Obstetrical Society.** Vol. 28. Session 1902-1903. 8vo. (Oliver & Boyd, Edinburgh; Simpkin, 10s. 6d.)
- Transactions of the Medico-Chirurgical Society of Edinburgh.** Vol. 82. New Series. Session 1902-1903. 8vo. (W. F. Clay. 8s. 6d.)
- Vaughan (G. T.).** *The Principles and Practice of Surgery.* 8vo. (Lippincott. Net, 15s.)
- Wakefield (H. Rowland).** *Experimental Hygiene.* Illust. Cr. 8vo, pp. 298. (Blackie. 2s. 6d.)
- Watson (John B.).** *Animal Education. An Experimental Study on the Psychological Development of the White Rat, Correlated with the Growth of its Nervous System.* Illust. 8vo, pp. 123. (Univ. of Chicago Press, Chicago. Net, 6s. 6d.)
- Watson (J. K.).** *The Examination of the Urine.* 32mo, pp. 30. (Scientific Press. 1s.)

TO CONTRIBUTORS AND CORRESPONDENTS.

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

Letters to the Editor requiring personal reply should be accompanied by stamped directed envelope.

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.

Dr. Burford, London.—Messrs. E. Gould & Son, Ltd., London.—Mr. Fredk. King, London.—Dr. H. A. Clifton Harris, Brighton.—Mr. Davies, Johannesburg, S.A.—Dr. Hy. Kruger, Nimes, France.—Mr. L. T. Ashwell, London.—Dr. Nebel, Montreux.—Dr. Olivé, Barcelona.—Miss E. C. Harvey, Brighton.—Dr. T. Simpson, Liverpool.—Dr. Stanley Wilde, Cheltenham.—Gen. Phelps, Edgbaston.

BOOKS AND JOURNALS RECEIVED.

Hom. Review.—Zoophilist.—Mind.—Revist. Hom.—Calcutta J. of Med.—Med. Times.—Allg. Hom. Zeit.—H. Monatsblätter.—La Propaganda Homeopatica.—Maanedsk. f. H.—H. Maandblad.—La Homeopatia.—Amer. Physician.—Hom. Envoy.—The Individualist.—Medical Century.

—Rev. Hom. Française.—H. Recorder.—Wjestnik H. Med.—N.A.J. of H.—Clinique.—New Eng. Med. Gaz.—L'Art Médical.—Jour. Belge d'H.—Amer. Med. Monthly.—H. J. Obst.—Jour. B.H.S.—Med. Adv.—Annaes de Med. Hom.—Lo Nuevo.—Hom. Eye, Ear, and Throat J.—Hahnemannian Mon.—Pacif. Coast Journal of H.—Ind. Hom. Rev.—Med. Brief.—Revist. Hom. Catalana.—Leicester Daily Mercury.—Vacc. Inquirer.—Consideraciones a cerca de las estadiscas del Hospital Nacional Homeopatico. By Dr. Juan Antiga.—El fracaso de los Microbicos. By Dr. Juan Antiga.—Algunas Reflexiones sobre La Homeopatia. By Dr. Juan Antiga.—Cartilla Popular die Cólera Epidémico.

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Materia Medica Rhymes. By Margaret L. Tyler, L.R.C.P., and S. Ed. Cases I have Come Across. By Frederick Kopp, Greenwich, N.S.W.

BRITISH HOMEOPATHIC ASSOCIATION.

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THE
HOMEOPATHIC WORLD.

FEBRUARY 1, 1904.

AN ANGLO-AMERICAN *ENTENTE CORDIALE*.

EVERY year the world grows smaller and the partition walls of parochialism and provincialism are becoming more and more thin. With increasing facilities of travel and intercommunication it becomes increasingly difficult to keep up sentiments of insular pride and national antipathy. A century ago it was part of the Britisher's creed that our neighbours across the Straits of Dover were chiefly created and designed by Providence to be our "natural" as well as our "national" enemies. In spite of the craving of some politicians for a state of isolation (splendid or squalid), the world is moving on to a time when Patriotism—which Dr. Johnson, good old Tory that he was, described as "the last refuge of a scoundrel"—will disappear in universalism, and international animosities will exist no longer in countries which claim to be called civilised.

We have been prompted to these remarks by an event of no little importance in the history of the British Homeopathic Association. It will be remembered that one of its acts of last session was to appoint a Travelling Scholar to visit the schools (or as many as it was possible for him to do in the time at his disposal), and there to devote himself to the study of homeopathy, and also to investigate and report upon the methods of instruction in homeopathy carried on in the colleges of the United States. Dr. SEARSON, who was chosen to represent the

Association, has now returned, and an interesting account of his doings, written by himself, will be found in another part of this issue.

That the Association were eminently happy in the choice of their first Travelling Scholar will, we think, be conceded by every one. At any rate, we offer to the Association and to Dr. SEARSON our warm congratulations on the result of his tour. To them and to him the profit has been great, and will be lasting. But we are sure Dr. SEARSON will understand us when we say that the special importance of his visit to America is something more than a personal one: we allude to the cordial reception given by our American *confrères* to the representative of British homeopathy. Wherever he went, from the moment of his landing, hands were stretched out to greet him; and actually before he landed the hospitable home of Dr. WM. HARVEY KING, Dean of the Homeopathic College of New York, was placed at his disposal. Our American friends may take it for granted that the significance of this will not be lost on homeopaths on this side of the Channel.

To the homeopaths of America the world owes it that there is anything to speak of left of homeopathy at the present day. For generations past America has been the nursing-ground of homeopathy and the breeding-ground of homeopaths. In this country, at any rate, we cannot breed homeopaths. If a homeopathic doctor is misguided enough to make a doctor of his son, nine chances to one he comes out of the mill a full-blown allopath, stuffed with orthodox scorn for his poor benighted parent. Happily for the world, America does things differently; and Britishers are at last taking their example to heart, and are seriously thinking of following it.

Germany little knew what she was about when she persecuted homeopaths and hounded them over to America. Certainly English-speaking peoples have no cause to complain of her action: it has made English the mother-tongue of homeopathy. Dr. CARTIER well re-

marked that his answer to any (French) student who asked how best to study homeopathy would be—"learn English." But for Hering, Hempel, Lippe, and numbers of other great Germans who found a home in America, we should possess neither Allen's *Encyclopedia* nor Hering's *Guiding Symptoms*, and we do not like to think where homeopathy would be without either of these colossal works. But neither should we have had these great works if American homeopaths had not taken in hand solidly the work of founding schools of their own. Without the co-operation of these schools, and the favourable atmosphere they created, neither of these works, not to mention others, would, it seems to us, have seen the light.

Therefore it is natural and fitting that British homeopathy should look in the hour of its awakening to America for inspiration and guidance; and everything which makes for a closer drawing together of the homeopathic body in the two countries is a matter of the highest importance to therapeutics.

Americans and Englishmen naturally like each other. If anybody disputes it, we call to witness any one of either nation who was present on a certain festive occasion at the Frascati Restaurant in 1896. But it doesn't always happen that people who are really very fond of each other are aware of the fact. One of them fancies that the affection is all on his side, but nothing would persuade him to show it, lest it should be mistaken for gush! However, as our good friend Dr. SHELTON remarked, at that same Frascati gathering, all this shyness (often mistaken for pride) disappears round a dinner-table "before you get to the fish."

It seems to us that American and English homeopathy is now long past the "fish" stage; the reception given to Dr. SEARSON is one more proof of it, if proof were needed. The next thing is, How can the sentiment be consolidated and organised for the furtherance of homeopathic interests throughout the world? That is a matter

for the thoughtful consideration of homeopaths on both sides of the water. For the last year or two there has been a slender strip of meeting-ground in the *International Homeopathic Directory*. Through means of this American homeopaths have been able to find the addresses of their brethren in Great Britain and elsewhere; and British and other homeopaths have been able to find the addresses of such American physicians as have entered their names. We hope this list will be largely extended as the years go by.

But something more than this is needed to keep alive the intercourse between the homeopaths of Great Britain and America. Would it be possible, we wonder, for the British Homeopathic Association to establish an International Bureau where any homeopath from America could find information he wants about homeopathic interests, and could at once be put in touch with all whom he might wish to see? Perhaps our American friends might like to join the Association, and thus feel that they have a substantial, as well as a moral, claim to its services.

Another means of intercommunication between these two branches of the homeopathic family might take the form of interchange of teachers. When our College is fully organised and our chairs fully endowed, we shall have an opportunity of offering one or more of the Professorships to teachers from the New World, which we hope they might see their way to accept.

Whatever may come of the *entente cordiale*, in whatever direction it may grow and develop, in the name of British homeopathy we sincerely thank our American colleagues for the renewed proof of its existence which they have furnished in the more than kind reception they have given to the first Travelling Scholar of the British Homeopathic Association.

NEWS AND NOTES.

THE BURNETT FUND.

THE following new donations to the above Fund have been received by the Hon. Secretary since the publication of Dr. Burnett's *Life*. We give them in the order of the dates:—

			£	s.	d.
Dec. 30, 1903,	Mrs. von Stralendorff	...	1	1	0
Jan. 4, 1904,	Mrs. Drew	... ..	1	1	0
" 4, "	Edwin Ashdown, Esq.	... ..	5	5	0
" 13, "	J. Bradley Smith, Esq.	... ..	1	1	0
" 21, "	Mrs. Clarke	... ..	1	10	0

The *Life of Dr. Burnett* has been very well received by the public and the Press. The *Times*, *Scotsman*, *Public Opinion*, *Dundee Advertiser*, and other leading newspapers have given encouraging notices of the book. We hope the *Life* will be not less warmly welcomed in the United States, where Dr. Burnett has many warm admirers and appreciative readers. If any of Dr. Burnett's American friends would like to contribute to the Fund, their help will be gratefully acknowledged by the Hon. Secretary, Mrs. Helen Clarke, 30, Clarges Street, London, W.

MR. GERARD SMITH AND THE MEDICAL OFFICERSHIP
OF HEALTH OF HOBART.

MR. GERARD SMITH is a lucky man. He has not only been appointed by the City Council Medical Officer of Health to the City of Hobart, Tasmania; he has been persecuted by the medical majority on the Central Board of Health, who have refused to confirm the appointment; he has been made the subject of laudatory leading articles in all the newspapers in the district; furthermore, his interesting case has been the occasion of a deputation to the Premier of the Colony in reference to certain clauses in a new Health Bill at present before the Tasmanian Parliament, such clauses having reference to the powers of the Central Council, which is determined to oust Mr. Smith. We are not quite sure now whether Mr. Smith is or is not Medical Officer of

Health after all ; and we doubt if he knows himself. But this is certain, in consequence of the boycott by his brother medicals he is about the best-known and most highly-respected medical man in the Colony. Our congratulations to Mr. Gerard Smith !

The full details of the case are given in the leading article of our contemporary the *Homeopathic Review*, to the courtesy of whose editor we are indebted for a perusal of the advance proofs.

DR. H. C. ALLEN ON THE PROGRAMME OF THE B. H. A.

IN a kindly letter to the editor of this journal, Dr. H. C. Allen, of Chicago, well known to our readers as editor of the *Medical Advance*, and teacher of materia medica at Hering College, gives a bit of advice to British homeopaths which we make no apology for reproducing. Among the letters presented by Dr. Searson to American homeopaths was one from ourselves introducing him to Dr. Allen, and Dr. Allen's letter to us is an acknowledgment of this. It is pleasant to know that our American colleagues were not disappointed in the British representative. But the part of the letter which concerns us at present is the following. Says Dr. Allen:—

“ I hope to hear of a charter granted for the ‘ London School of Homeopathy,’ or ‘ London Homeopathic College,’ at the next Session of Parliament. Why not begin now? You have a goodly list of able men left to man a faculty. Why not begin now to recruit the ranks before more are called hence? If you delay till everything is ready, and all you could wish is in hand, you will never have a college.”

This is how it strikes an American observer. We have sent our representative to America to learn “ how to do it ”—and this is the gist of all that Americans have to advise. Will British homeopathy take it? It will either take the advice, or it will have to take the consequences of not taking it.

PROOF POSITIVE—BERI-BERI AND ARSENIC.

A CORRESPONDENT has sent us a cutting from the *Daily Mail* of October 2, 1902, which, if of somewhat

ancient date, is certainly not devoid of point. The writer of the article, which is entitled "Beri-beri; The Cause and Nature of a Mysterious Illness," dilating on the cause of it, makes the following remark:—

"So closely does beri-beri resemble some cases of arsenical poisoning, that arsenic has been cited as the cause of the disease, a theory seemingly *finally disposed of by the fact that arsenic does beri-berics good.*"

The writer appears to be quite unconscious of the fact that his disproof of the arsenical cause of beri-beri is at the same time proof of the homeopathic doctrine. If arsenic relieves patients suffering from a disease whose symptoms cannot be distinguished from those of arsenic, this is homeopathy indeed!

X-RAYS CAUSE CANCER.

HERE is more *Daily Mail* homeopathy—this time of more recent date, December 9, 1903:—

"RÖNTGEN RAY DANGERS.

"The risks run by the operators of Röntgen rays is shown by the fact that both Mr. Addyman, who is in charge of the department at St. George's Hospital, and one of the operators at St. Bartholomew's, are at present suffering from inflammation of the eyes induced by the rays. Operators who neglect to wear gloves pay immediate penalties in the shape of sore hands and split finger-nails.

"The death of Dr. Barry Blacker some months ago was directly attributable to the creation by the Röntgen rays of the very disease which he, as operator at St. Thomas's Hospital, had often cured by the application of the rays—namely, epithelioma.

"His widow has been placed upon the Civil List in recognition of the way in which her husband lost his life in saving that of others."

AN ALLOPATHIC HEALTH OFFICER IN CALCUTTA.

THEY want a homeopathic Medical Officer of Health in Calcutta. Messrs. Berigny & Co. have sent us a cutting from *The Bengalee* of December 16th, from which it appears that an attempt is being made to suppress homeopathic dispensing because they have no "certificated compounders"—whose "qualifications" would be absolutely useless in such an institution, though they would

no doubt be of service in allopathic dispensaries. The Health Officer, Dr. Cook, who opposed the registration of the homeopathic dispensary of Dr. G. L. Gupta, made some astonishing statements:—

“Dr. Cook in his deposition before the court said that he did not recognise homeopathy, that homeopathic medicines were very poisonous, and that homeopaths used large doses of poisonous medicines. He further stated that the Government never recognised homeopathy, and, therefore, every place wherever any drug was sold, be it a homeopathic dispensary or a Kabiraji firm, should and must have a ‘certificated’ compounder passed from any Government Medical School.”

Dr. J. N. Majumdar and others gave evidence disposing of the amazing untruths about homeopathy and homeopaths, and the magistrates reserved judgment. We trust it has been in favour of Dr. Gupta. If the action of Government is to be swayed by culpably ignorant medical fanatics in official posts, the liberty of homeopaths will receive a most serious blow. Dr. Majumdar observed that homeopathic pharmacy is a distinct art from the crude “compounding” of the allopathic drug stores, and that the dispensers employed by homeopaths have all the special training needed.

TABLETS V. “TABLOIDS.”

WE think there can be no reasonable doubt that Mr. Wellcome has enriched the English language by inventing the word “Tabloid,” and as he succeeded in getting it registered as a trade mark before he divulged it, his rights in it must be respected. At the same time it cannot be denied that the English language got on very well without it before it was invented, and the invention has not increased the clarity of public thought. Everything in the drug line fashioned in the shape of a tablet *was* a tablet aforetime. Now, thanks to the business energy of Messrs. Burroughs and Wellcome, it is more often than not a “tabloid.” This is very hard on homeopathic chemists who make many tablet preparations. The chemists call them “tablets,” the public call them “tabloids.” Messrs. Burroughs and Wellcome have done a great deal towards familiarising practitioners of the old school with homeopathic remedies and homeopathic

preparations, and we suppose we ought to take this as a compliment. We might, perhaps, do so if their able representatives impressed on the doctors whom they canvass that the drugs whose virtues they sound were introduced by homeopaths. But this, apparently, does not come within their instructions. The judgment which confirms Messrs. Burroughs and Wellcome in their rights in the unlovely hybrid, "tabloid"—the tail of it, "oid," is Greek; it is hard to say what the head of it is, certainly it is not Greek—should secure a return to the well of English undefiled. The homeopathic public must ask for tablets when they want them, and leave "tabloids" to Burroughs and Wellcome and the allopaths. Messrs. Thompson and Capper have our sincere sympathy in the action they fought; though the judgment was against them they have done a great public service by contesting it, and deserve the thanks of the community.

DR. MAHENDRA LAL SIRCAR.

"REIS and Rayyet" ("Prince and Peasant"), of November 28th, gives a most interesting account of the celebration of the seventy-first birthday of Dr. Mahendra Lal Sircar. There was a great gathering of relatives and pupils, some of whom recited poems composed for the occasion. They do well to be proud of their venerable master. He has fought a great fight and has done a great work for medical education and medical freedom. We present our heartiest congratulations to him and to those who assembled to do him honour.

HELODERMA.

DR. MINTER has sent us a cutting from the *Tatler* of January 13th, containing an illustrated article showing how the poison of the "Gila Monster" and of the rattlesnake is obtained for medicinal purposes. The article mentions that Dr. Charles Belden, of Phoenix, Arizona, who introduced the remedy, had "noticed that persons who were bitten by a gila monster almost invariably showed all the symptoms of paralysis or locomotor ataxia, hence he thought that in diseases of the nature of paralysis the

poison of the snake [*sic*—*Heloderma* is, of course, not a snake but a lizard] might act on man the same way as vaccination does towards small-pox." This is a very neat way of attempting to hide the homeopathic point. Of course Dr. Belden is a homeopath, and this is the reason why he thinks useful homeopathic thoughts. But he would not inoculate patients with the venom, he would give it in the 30th potency or higher. The *Tatler* editor didn't know this or he didn't like to say it.

HAHNEMANN CONVALESCENT HOME FOR OPEN-AIR TREATMENT.

WE understand that a bazaar is to be held early in February in the Hotel Mont Dore in aid of the funds of the above institution. The sum of £1,000 is required, of which £523 18s. has already been contributed.

STRYCHNINE AND EMPEROR PENGUINS.

IN Lieut. Shackleton's account of his journey towards the South Pole, reported in the *Daily Graphic* of January 5th, he says that Emperor Penguins were often 4 feet in height and weighed 63 lbs., also that they were very difficult to kill. "They tried strychnine, *but the birds seemed to like it, and were none the worse for it.*" This is a point to be noted.

A NICE MATERIAL FOR UNDERWEAR.

THE following paragraph from the *Daily Telegraph* of January 2nd shows that seals provide not only fashionable outer garments for people in the south, but useful underwear for the Arctic natives:—

"One of the most interesting features of *Toilers of the Deep* is the letter which frequently appears from Dr. Grenfell, who is on the Strathcona hospital ship, cruising in Labrador waters. Dr. Grenfell ministers not only to our fishermen and the Canadians and other visitors to those wild regions, but also to the native Esquimaux. In the latest of his letters he tells of an ingenious garment used as a substitute for oilskin by these primitive people. It is made of the bowels of seals, stretched and dried, and then sewn together with strips of the same. The merits of the garment are that it costs next to nothing, that it keeps its wearer perfectly dry, even if it rains for a week, and

that it is far lighter than any oil clothing. It is only in the method of wearing it that any trouble is found, for before putting it on the wearer must put it in water, or it will crack and tear. It has, therefore, to be put on wet, and allowed to dry on the body. This it does much quicker than any oilskins of the ordinary type."

PROVINGS BY THE LATE DR. BURNETT.

AMONG the papers of the late Dr. Burnett the MS. of his provings of *Condurango* has come into our possession. This has already been published in the *British Journal of Homeopathy*. But with it are two short provings, one of "Sal Poluchrestus" and one of "Galium verum." We do not think that either of them has been published before. We hope to give them in our next issue.

CLINICAL REPERTORY TO THE *DICTIONARY OF MATERIA MEDICA*.

OUR readers may be interested to know that the Clinical Repertory is now completed as far as the author is concerned. The MS. is in the printer's hands. The work will include, in addition to the Clinical Repertory proper, repertories of Causation, of Temperaments, of Clinical Relationships, and of Natural Relationships.

STROPHANTHUS.—George Royal, M.D., says this remedy, like cactus, must be used cautiously and only upon indication. It acts in valvular affections where you have cardio-vascular sclerosis, associated with interstitial nephritis, especially if the nephritis be secondary to the heart affection. The cause of the lesion I believe to be a valuable guide in the selection of this drug. The patient must have been addicted to the excessive use of tobacco, alcohol, tea or coffee; or he must have had rheumatic heart affection, and as the result of any or all of these the heart muscle must have lost its elasticity and have become brittle—if I may use the expression. As a result the heart fails to do its work properly, and you have scanty urine, some edema of the lower extremities, pain about the heart accompanying dyspnea, and, as a rule, a dull, stupid frontal headache. Do not give this drug in 5, 10, or 15-drop doses of the tincture. Do not use it even in the 1st x if you have pneumonia as a complication. Just bear in mind that the heart muscle is brittle and must not be unduly stimulated. Use it in the 1st, 2nd, or 3rd x, and you will get prompt relief, which, in a certain proportion of cases, will go on to a permanent cure.—*Amer. Hom.*

ORIGINAL COMMUNICATIONS.

NOTES OF A VISIT TO SOME OF THE
HOMEOPATHIC COLLEGES AND HOSPITALS
OF AMERICA.

By Dr. JAMES SEARSON, Assistant Physician to the London Homeopathic Hospital.

I ACCEDE with pleasure to the request of the Editor to present to the readers of this journal a brief account of my recent visit to America.

Having been appointed by the British Homeopathic Association to visit that country in the dual capacity of Travelling Scholar and Special Commissioner, I sailed on September 19th on the s.s. *Minnehaha* (Atlantic Transport line) from Tilbury, and arrived at New York on September 28th.

The way had been previously paved by letters of introduction kindly sent by the Editor of this journal and other colleagues.

On arriving at New York after a very pleasant voyage, I found, amongst the letters brought on board, one from Dr. W. Harvey King, the Dean of the New York Homeopathic Medical College, inviting me to his house, where I spent the first week of my stay. Dr. and Mrs. King were, if I may say so, exceedingly kind and hospitable, and not only during this week but also throughout the entire period of my stay in America, made me look on their house as a home.

The dual purpose of my mission was, in brief, not only to add to my own personal knowledge by attending courses of lectures and demonstrations on homeopathic *materia medica* and therapeutics, but also to observe and report on the matter and methods of teaching adopted in the homeopathic colleges and hospitals of America for future guidance in our own country.

As the medical colleges did not resume work until the week following my arrival, I was free to devote my first week to gathering general information regarding homeopathy as a movement in America. For this I found my stay at Dr. King's house peculiarly helpful, not only because of the long conversations, now recalled with pleasure, which it enabled me to have with him, but because I

was brought at his house and through his introduction into personal contact with a large number of the homeopathic physicians and surgeons of New York, and indirectly with the homeopathic leaders in many other cities of the United States.

Thus during my first week I learned general facts regarding the numerical strength of American homeopathy. I gathered that there are about 15,000 homeopathic practitioners in the United States, about 100 homeopathic hospitals containing approximately 8,000 beds, and about 20 homeopathic medical colleges, from which about 650 students are graduated each year.

During this week I also visited the Hahnemann Hospital, 100 beds; the Flower Hospital, over 100 beds, adjoining the New York College, and where much of the clinical teaching is conducted; the New York Ophthalmic Hospital; the Laura Franklin Hospital for Children; and the Metropolitan Hospital (1,300 beds)—all under homeopathic management.

Work at the New York College began first week in October. During this week I attended not only the lectures on materia medica and therapeutics, but also as many other lectures and demonstrations of the general medical curriculum as I could work in. The teaching in every department appeared to me to be generally up-to-date and of high class; strong points are made of pathology and chemistry; anatomy and physiology are excellently taught, and the more clinical subjects, such as practice of medicine, surgery, and gynecology are in the hands of able professors.

An exceptional amount of attention appeared to me wisely to be devoted to instruction in materia medica and therapeutics; these subjects are taught by several lecturers whose aim appeared to be not so much to deliver a lecture as to *teach*; one therefore found the courses very practical, lucid, and instructive.

The lecturers invariably started by "quizzing," that is, asking questions based on preceding lectures. As the lecture proceeded the students had no hesitation in asking questions and offering comments, and even criticism—indeed the happy freedom of relationship which obviously existed between the professors and the students was both striking and gratifying.

The *Organon* is taught at New York College by Dr.

Edmund Carleton ; each student possesses a copy. Portions are read, commented, and questioned on. Dr. Carleton also conducts, on Saturday afternoons, a homeopathic therapeutic clinic, where the homeopathic remedy is selected with care and precision.

Clinical therapeutics are taught quite separately at the Flower Hospital ; a section of, say, four senior students is taken by the physician to a series of cases in the wards. Histories are read of the cases, questions are asked, and the diagnosis in each case is given ; adjournment then takes place to another room, where the students are asked to name the remedy for each case seen and give reasons for proposing it.

Wednesday afternoons are devoted to clinical teaching at the Metropolitan Hospital.

The first six weeks of my tour were naturally spent in New York. I stayed for the most part at the Chapter House of the Alpha Sigma fraternity, 431, East 58th Street, and I am glad to have this opportunity of thanking the President and members of the fraternity, all of whom are enthusiastic students of homeopathy, for their great kindness and friendship ; nothing could exceed the manly courtesy and consideration of the " boys " of the fraternity, and I shall always look back with pleasure and gratitude to the happy times spent, and the friendships fostered there.

I was much impressed, and most favourably, by the whole body of students. I found them keen workers and ardent homeopaths, and I could not but feel that the present strong position of homeopathy in America must be largely due to the after practice and influence of the students trained in the various colleges.

Later, I spent one week at Philadelphia. There, there is a very strong college with a large class of students and an excellently equipped hospital ; the work done and the instruction given are of the highest kind, and one felt that the movement has just reason to feel proud of the College at Philadelphia. I was much struck, there and elsewhere in America, by the way in which the younger men are brought to the front ; and no better evidence can be afforded of the excellent teaching which the Philadelphia College is imparting than is to be found in the cases of the young men, of whom there are several, trained in the college, and who are now in their turn able

members of the teaching staff, and whose lectures are solid, lucid, and a positive pleasure to hear.

The kindness and hospitality shown at Philadelphia were simply overwhelming, and I feel I cannot adequately express my indebtedness to Dr. Clarence Bartlett (editor of the *Hahnemann Monthly*), Dr. Van Lennep, Professor of Surgery, and the numerous other colleagues who showed me so much courtesy.

I spent nearly three weeks at Chicago. There are three homeopathic medical colleges there—the Hahnemann, the Chicago Homeopathic, and the Hering. At each of these colleges there is a large class of students. At the last-named college great stress is laid on the teaching of materia medica and therapeutics, the lecturers being Dr. J. T. Kent, Dr. H. C. Allen, and Dr. Tomhagan. The members of the Hering staff were good enough to invite me to luncheon, and all appeared much interested in the account which I was asked to give of British homeopathy. I also attended lectures at the two other colleges named. The Chicago colleagues were invariably most kind, and in addition to attending the lectures, clinical evenings, &c., I had interviews and conversations with many of them—amongst others with Dr. Gatchell, secretary of the American Institute of Homeopathy. There were, I should also add, at Chicago many colleagues possessing honoured names whom from one cause and another I was prevented from meeting personally. I thus missed seeing the President and Dean of the Chicago Homeopathic College, much to my regret. I had, however, several opportunities of meeting both socially and professionally several of the staff of the Hahnemann College, including the President, Dr. Shears, and the Dean.

This college appears to be giving, as indeed are all the colleges there, a most excellent training to the large number of students in attendance. Co-education (male and female students) is a feature at the Chicago colleges. By a number of the students of the Hahnemann College I was invited to dinner at their most comfortable fraternity house.

Probably one of the most interesting experiences in the tour was the visit paid to Michigan University, Ann Arbor. Here I was received most kindly by Dr. Hinsdale, the Dean of the homeopathic department of the University; Dr. Dewey, editor of the *Medical Century*

and Professor of Materia Medica; Dr. Copeland, Professor of Ophthalmology; and Dr. Westphall, and by them shown round the University. One here witnessed the unique spectacle of homeopathic and allopathic students engaged in their studies side by side; and friendships, I gathered, were formed and recognition afforded that the homeopathic students, while remaining loyal to the special teaching of their own school, were quite abreast of their allopathic comrades in the general branches of professional education.

On the return journey I visited Washington, a charming city where in transatlantic phraseology the homeopaths "ring the silver doorbells." Here there is an excellently equipped hospital doing large out- and in-patient work, which is to a great extent supported by a direct grant from Congress. A site has been secured for a new and larger hospital which is shortly to be erected. Here, too, one saw and admired the beautiful statue of Hahnemann which, artistically conceived, adorns that city.

The last days of my too brief tour were spent in New York, where calls remained to be paid and a large mass of accumulated correspondence with American friends required clearing up.

On the 11th of December, the night before my departure for home, a reception was held at the Chapter House of the Alpha Sigma fraternity to wish the representative of the British Homeopathic Association *bon voyage*. Mr. Shedd presided, a large number of the students were present, and the professors were represented by Dr. Norton, whose name is so well known in England, and to whose great kindness the writer owes more than he can say; Dr. Roberts, registrar of the New York College; Dr. Eugene Porter, editor of the *North American Journal of Homeopathy*; Dr. Dieffenbach, Dr. Rankin, Dr. Wilson, Dr. Austin, Dr. Hutchinson, and many others. Kindly speeches were made expressive of the most friendly interest in the welfare of British homeopathy. One felt most sorry when the time came to say farewell, and one sailed for home next morning with the most cordial greetings from American homeopaths to their British brethren.

This paper would be incomplete if I failed to acknowledge the great and invariable courtesy extended to me by the President of the New York County Homeopathic

Medical Society (Dr. Irving Townsend); and by the Secretary, Dr. Walter Sands Mills. On the joint invitation of these two gentlemen I had the privilege of presenting a brief statement to the Society regarding the present condition and aims of British homeopathy.

I feel assured that any of our own colleagues who may in the future visit America will be most cordially welcomed, and that they will derive inspiration and profit from their visit; and I also felt justified in assuring our brethren across the Atlantic that we should all be happy to do our best if they should come amongst us, to reciprocate to the fullest extent their kindly hospitality and good feeling. Such intercourse cannot fail to emphasize and strengthen the ties which already bind us brethren in a common cause.

Of the educational advantages of the experience to myself, personally, I cannot speak too highly. I feel strongly convinced that in this branch alone of its useful programme there is sufficient *raison d'être* for the existence of the British Homeopathic Association. A yearly visit to America by some properly accredited representative of British homeopathy cannot but result in increased knowledge and great personal good to the one selected, and in resultant advantage to our movement, not alone in this country, but also, I venture to believe, to the cause of homeopathy in its wider aspect.

REMARKABLE CURE OF HEMORRHAGE IN AN ANIMAL WITH THE RESIN OF EUCALYPTUS.

By ERSKINE C. WHITE.

A FILLY, age 2 years, staked in udder, and adjacent parts: blood pouring from wound in thin streams.

Dissolved 1 oz. of resin of *Eucalyptus tereticornis* in quarter of a pint of hot water.

Hastily dashed *warm* mixture *upwards towards* wound.

In 10 seconds only rapid *drops* fell.

A similar application, some 30 seconds after, and in less than two minutes the bleeding entirely ceased.

With three more applications in three days, wound

healed, as beast roamed the paddock. No other means used.

Has since reared fine colt.

Resins of other *Eucalypti* equally astringent, as blue-gum, box, iron-bark, blood-wood. That of box- and blood-wood even more astringent than the resin of *E. tereticornis* (local name *red gum*), but I prefer the latter.

Some years ago the same resin, in *two* minutes, arrested dangerous protracted hemorrhage of my wife's gums after thirteen teeth had been extracted; usual homeo. remedies external and internal had no effect. (Dentist afterwards puzzled to know why the gums had shrunk and hardened so wonderfully and rapidly.)

Eucalpt. resin sworn foe of *all* forms of *pus*, administered externally.

Gonorrhœa, *Ophthalmia*, *Diphtheria*, *Dysentery* yield rapidly to it—bad cases.

Would consider it a sheet-anchor in *Hemoptysis*, or *any* hemorrhage.

It will prove, I feel certain, invaluable in *Diabetes*, where *Uranium* fails.

The resin appears to take up the running when *Hydrastis can.* fails.

Arrested dangerous hemorrhage of uterus (chronic) after *Secale*, &c., failed,—given internally (No. 3).

My daughter, æt. 13, found resin superior to all other gargles (except *Capsicum*) in diphtheria—fauces, &c., remained clean and healthy under it alone.

HOLDSWORTH, N. S. W.

[Mr. White adds, in a letter to the Editor, the following particulars about the gum: "I consider the resin miraculous in hemorrhage from all organs as well as veins. It is non-poisonous. I have used it for twenty-five years. It must always be inexpensive, as the trees exude resin more or less all the year round, but especially in spring. A stranger to the Australian fauna, standing beneath the 'Blood-wood tree,' could not but feel certain that a ghastly tragedy had been enacted, so exactly does the liquid gum on the grass resemble human gore"—which is another point for the signaturists. Mr. White has kindly offered to send us a supply of the gum, an offer which we shall gratefully accept.—ED. H. W.]

MATERIA MEDICA MISCELLANY.

By J. R. P. LAMBERT, M.D.

Kali Carb in Insomnia.—Dr. Goullon recommends this drug in 12x or 9x dilutions for sleeplessness. Alluding to a case in point, he says: "*Kali carb.*, as is well known, is one of our homeopathic cardiac remedies; it is a specific in palpitation of the heart after over-exertion; among its symptoms are a quick, 'intermittent' pulse, but it is also effective in the sequelæ of organic diseases of the heart, among which insomnia is one of the most tormenting symptoms.

"It will be found that in very many cases where insomnia is complained of, either in its chronic or its subacute form, there is an abnormal activity of the heart. We mostly find that those who complain of insomnia are people of a sympathetic, sentimental and pessimistic nature, for the heart and the feelings may be said to have an organic connection. In such cases *Kali carb.* should at once be given, though *Sepia* sometimes is found to be its equivalent. But *ceteris paribus* I always prefer *Kali carb.* if I desire at the same time to make recourse to *Morphine* unnecessary.

"The patient had a *Kali* constitution. She was prepossessed, imagined an unfavourable prognosis to all her ailments, but has also been depressed by the strokes of fate, and thus has had reason for her dejection. There are many reasons which cause women to need *Kali* more than men, *i.e.*, they are more exposed to prostrating insomnia leading to a despondent state of mind. Any one who may be disappointed in the effects of *Kali* may also try the other excellent soporifics, such as *Coffea*, *Sepia*, *Ignatia*, *Zincum* and *Zincum valerianicum*; the latter remedy should be used in a low trituration."—*Hom. Recorder* (from *Leipsiger Pop. Z. f. Hom.*).

Hyoscyamus in Toxic Gastritis.—Dr. Golden, of Philadelphia, in a paper on this subject defines toxic gastritis as an acute inflammation due to taking food or drink undergoing changes of fermentation or decomposition.

He mentions three cases in which *Hyoscyamus* gave more or less prompt relief after such medicines as *Ars.*, *Nux.*, and *Verat. a* had failed.

He sums up the characteristic symptoms as follows:—

1. Persistent nausea and vomiting, which may be intense.

2. Thirst, but does not drink, because vomits immediately, pains in abdomen varying in character, with tenderness below epigastrium.

3. Hiccoughing, which may at times be persistent and exhausting.

4. Marked exhaustion, going on to a collapsed condition, with cold, clammy, sweat, cold extremities and cardiac weakness.

5. Marked restlessness of body, cannot keep quiet, turns from side to side with some anxiety of mind.

6. History of indigestion of some irritating food or drink,—liable to contain toxic products,—and may be well to mention, in passing, these cases of said character occurred during the warm summer months.

In this group the hiccough seems to be the most characteristic symptom, but all the other symptoms except the restlessness are found *Hyoscyamus*. Dr. Golden gives 15 min. of the tincture in 4 ozs. of water, a teaspoonful every hour.—*Hahn. M.*

Calcarea Fluorica in Chronic Mastitis.—In a paper on *Calcarea*, in the *North American Journal of Homeopathy*, Dr. Clapper recommends the use of the fluoride in cases of hard and nodulated enlargement of the mammary gland with severe neuralgic-like pains, and the discharge of thin serous fluid. He says: "I have used it in a number of cases of this kind with fine results. In the case of an elderly lady who thus suffered, and whose mammary enlargement at first had been believed to be malignant, two and a half months' treatment with *Calc. fluoride* 3x cured the case entirely, and there was no return after five years."

Calcarea phos. in Traumatic Cases.—In the same paper the writer recommends *Calcarea phos.* in traumatism, where fractured bones are slow in uniting; the temperature is slightly elevated; the patient complains of a dull pain, the fracture seems weak and not firmly united, or if has been a flesh wound, and the wound has healed, but continues tender and sensitive, *Calcarea phos.* will do good service. Something over a year ago, he had a patient whose arm had been mangled in a corn shredder. The surgeon seemed to have done his work well; the wound was entirely healed, but the arm was tender and

weak, and continued to give him pain, and according to his own statement, he could use it but little; the surface was covered with pimples as large as a pin head, and some larger, part of which was filled with an albuminous fluid, pain at night so severe that he would get up at times and walk the floor. *Calcarea phos.* 3 cleansed the surface and relieved the pain greatly, so much so that he could rest well at night and does a fair day's work.—*N. A. J. H.*

Calcarea Iodatum in Goitre.—Dr. Arthur J. Huselton reports the following interesting experience in the treatment of swelling of the thyroid gland. A woman complained of enlargement of the thyroid. The left lobe of the gland measured two and one-half inches in width, and two inches in length. There was slight involvement of the right lobe. The enlargement was quite soft, giving almost the sensation of fluctuation. This patient complained of pulsation over the left lobe. She would waken from sleep with a sense of suffocation and choking, relieved by assuming the erect posture or sitting up in bed. There were no cardiac symptoms further than rapidity of action upon exertion. She was given *Calcarea iodatum* 1x, one grain every two hours. This remedy was continued for a period of four months. The left lobe has decreased until it was of normal size, and she no longer has annoying symptoms.—*Hahn. M.*

Cuprum Met. in Morning Vomiting.—Dr. Berlin of Guben, relates, in the *L. P. Z. f. H.*, a severe case of morning vomiting in a merchant. The patient seemed to have been a sufferer from the complaint ever since his youth. The diagnosis was chronic catarrh of the stomach and fauces, the cause was, doubtless, too much beer. The doctor prescribed *Cuprum metallicum*, fourth trituration, three times daily. It cured the man. Another case had been a bountiful drinker up to the time of his marriage, at which time he began to limit himself to five glasses each day. After the wedding, his young wife was much astonished at her husband's wonderful performances of retching and gagging and vomiting each morning, and suggested that he needed a doctor badly. *Cuprum met.* also cured this case, and without necessitating his abstaining from the accustomed beer. The author says this remedy has always helped the morning vomiting of beer-drinkers.—*Trans. in Recorder.*

MATERIA MEDICA RHYMES.

BY MARGARET L. TYLER, M.D.

XIV. CHAMOMILLA.

CHAMOMILLA—Doctor's bane!—
 Cannot, will not, bear her pain :
 Pain with (often) numbness in it :
 Must be cured this very minute !
 Rude to Doctor in her woe—
 “ Rather die than suffer so ! ”

Chamomilla, wretched elf !
 Is thirsty, hot, beside herself :
 And the *Chamomilla* state
 Heat will always aggravate.
 Hot and thirsty, can't restrain
 Anger, crossness, in her pain :
 To be looked at cannot bear—
 [This with *China* will compare.]

Ill effects of anger, will a-
 ssuage when met by *Chamomilla* :—
 Jaundice, diarrhea, convulsion—
 When the fetus risks expulsion :—
Chamomilla's amply regnant
 O'er the Babe, the Nurse, the Pregnant.

Babes, in bed they will not lie ;
 Will be carried, else they cry.
 Sweat, *hot* sweat, in head is seen :
 Stool is hot, and yellowish-green :
 Baby's cross, and will not frolic,
 Draws its knees up, gripped by colic,
Chamomilla's called, by some,
 The “ Homeopathic Opium.”

[*Chamomilla* tea, they cry up,
 Phthisical night-sweats to dry up.]

XV. MERCURIUS.

CONSIDER, now, mercurial woes :—
 His *odour*, first, assails your nose—
 Fetid alike in mouth and clothes !

He's worse at night (like *Syph.*). Forget
Not *Merc.* when patient plains of *sweat*
Which never has relieved him yet.

By *Mercury*, too, this tale is told,
He's sensitive to heat *and* cold—
A change to either makes him scold.

Merc.'s tremor—here your trained glance lingers?—
Tremor of head, tongue, hand and fingers :—
Weakness, paralyses, neuroses :—
Merc. for Disseminate Sclerosis ?

Mind, body, tremulous and weak ;
Hastily, hurriedly, he'll speak :—
Or, answers slow ; lost memory ;
Lost will—to abject imbecility.

In *Bone, Gland, Skin*, his inflammation
Slow—surely leads to induration,
(Like *Syph.*) thence on to suppuration
(For *Mercury*'s great at pus-formation !)
If *Syphilis* you really know,
You know your *Mercury* also,
So curiously alike they show :—
Eruptions of all kinds produceth he ;
Of inflammations, every kind, degree :
Pus—bloody pus, calls loud for *Mercury*.

Merc.'s a great solvent :—cart's away
Tissues low-organised, they say :
With ancient dropsies, too, he'll play—
For all absorbments own his sway :—
Don't overdo him, by the way !

And now for *Mercury*'s sensations queer :
Head in a vice, grows big : there's ice in ear ;
Or, from the ear, cold watery stream outflows ;—
A wedge driven in. A weight hangs from the nose :—
Sparks, feathers from the eyes : teeth loose, mayhap,
Or only loosely set in mass of pap.
“ Hot vapours,” “ Worms,” rise in the throat (he'll swear)
And must be gulped : “ An apple core ” sticks there :—
Cracklings in head, from metal plates. He'll sigh
That everything in all his chest, is dry.

CASES I HAVE COME ACROSS.

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

LVII.—*POPULUS TREMULOIDES* IN CATARRH OF THE
BLADDER.

AN elderly gentleman (aged 68) suffered from catarrh of the bladder, in which there was great irritation of that organ and the urethra, accompanied with a copious discharge of urine of a pale colour. He had been given *Uva ursi*, *Buchu* (*Barosma crenatus*), *Asparagus officinalis*, *Acidum nitricum*, and *Acidum muriaticum* without effect. He was also greatly troubled with indigestion, accompanied with acidity and flatulence, and great debility. He had been suffering from these symptoms for several weeks, and, in spite of the medicines he had been taking, he felt no better. I at once placed him on *Populus tremuloides* (powdered bark), 2 grains three times a day. The relief he obtained from this medicine was very prompt, as in a few days the discharge of the urine had greatly diminished in quantity. The dyspepsia also was not so bad. He persevered with the remedy, and at the end of a month was completely cured. *Populus tremuloides* is a prime remedy in diseases of the urinary organs, and is just as effectual in suppression and retention of urine, even if accompanied with symptoms of scalding and painful urination, as it is in cases where there is, as in the case quoted above, a copious discharge of urine. It is, moreover, of great use in cases where the indigestion is attended with torpidity of the great hepatic gland, or where there is an unhealthy secretion of bile. It is a remedy that only requires to become better known to be more widely made use of in the treatment of urinary troubles.

LVIII.—*SANGUINARIA CANADENSIS* IN A CASE OF
HEADACHE.

This was the case of a young man (aged 32) who complained greatly of a paroxysmal headache, occurring once a week, although sometimes it would not return for ten or twelve days. These pains usually came on in the morning, increased in violence during the day, and lasted till the evening. The pains were of a digging, throbbing, sometimes piercing and lancinating character, as if

through the brain, and were situated on the top of the head and the forehead. They were decidedly worse on the right side. Sometimes there would come like a flash of lightning a pain through the back of the head. The head seemed at times as if it would burst. The headache was followed by an attack of chills, accompanied with nausea and vomiting. The only thing that seemed to relieve him somewhat was sleep. Mostly on account of one symptom that he mentioned, viz., "like a flash of lightning, a pain through the back of the head," I prescribed *Sanguinaria canadensis* 1x 3m every two hours. The symptom mentioned above is one of the leading indications for *Sanguinaria*, and in this case I was not disappointed. He took the medicine for the first few days as above, then a dose every four hours for a week, and finally a dose night and morning for a fortnight. The result was that these attacks of headache never returned.

LIX.—*RUMEX CRISPUS* IN A CASE OF COUGH.

A child (a boy, aged 11) suffered from the following symptoms: A frequent and continuous dry, paroxysmal cough, accompanied with a sense of soreness and rawness of the bronchia and trachea, with a tickling sensation in the pit of the throat; the symptoms were aggravated in the evening, after retiring to bed, on irregular respiration, cold air, and upon talking. There was an accumulation of a large quantity of mucous, of a tough consistency, in the larynx, with a continual desire to hawk it up: but this did not give any relief. These symptoms strongly indicated *Rumex crispus*, and I thereupon put him on the following:—

R̄ *Rumex crispus* 1x ʒi.
Ad Aqua dest. ʒviiij ʒ.

One teaspoonful to be taken every three hours.

Within a few days there was a great improvement. The tickling was not so persistent and annoying, the cough was less dry, and not so frequent and continuous, although still troublesome. At the end of the week, however, there was a marked difference, with a great amelioration of all the symptoms. The medicine was persevered with, and the patient rapidly improved, and

was quite rid of his cough at the end of the fifteenth day after commencing treatment. *Rumex crispus* has, undoubtedly, a potent curative power in cases like the above, in which the *Rumex* symptoms are strongly marked. The symptom, "cough aggravated by taking an irregular breath," is one that should not be lost sight of in the treatment of a cough, and is one that is always met by *Rumex crispus*.

(To be continued.)

BRITISH HOMEOPATHIC ASSOCIATION.

DECEMBER 18, 1903.

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SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

THE fourth meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thursday, January 7th, Dr. Johnstone, vice-president, taking the chair.

Dr. Robert Fallon, of Green Point, South Africa, having been nominated by Dr. Nicholson and Mr. Knox Shaw, was elected a member.

The following specimens, &c., were exhibited:

1. New and improved transfusion case containing instruments (1) for subcutaneous transfusion; (2) for intra-venous transfusion.—Dr. Johnstone and Dr. Burford.
2. An uterus, showing cervical epithelioma: removed by vaginal hysterectomy: recovery.—Dr. Edwin A. Neatby.
3. A solid ovarian tumour undergoing necrotic and malignant changes, removed from a woman, aged 64: recovery.—Dr. Edwin A. Neatby.
4. White and Wright's new catgut storing box.—Dr. Edwin A. Neatby.
5. Cystic kidney successfully removed from a boy, aged 15.—Mr. Dudley Wright.
6. Large kidney undergoing carcinomatous changes successfully removed.—Mr. Dudley Wright.
7. Mammoth calculus contained within the above.—Mr. Dudley Wright.
8. Hydronephrotic kidney successfully removed.—Mr. Dudley Wright.
9. Renal calculi.—Mr. Dudley Wright.
10. Gall-stone removed from bowel in a case of intestinal obstruction.—Mr. Dudley Wright.
11. Meningo-myelocoele from the sacral region: it was associated during life with talipes equino-varus and a hair field on the loin.—Dr. Watkins and Mr. Knox Shaw.

Under the section of surgery and gynecology, the evening was devoted to the study of the pancreas.

Dr. Macnish first read a paper on "The Pancreas: its Structure, Relations and Physiology," and Mr. Dudley Wright followed with an interesting clinical paper entitled: "Cases Illustrating Pancreatic Diseases calling for Surgical Treatment." His cases included acute and chronic pancreatitis, cyst of pancreas, carcinoma of pancreas. In the case of the pancreatic cyst, the cyst filled the whole abdominal cavity nearly and was opened through the abdominal wall, and being found to be firmly adherent was drained through the loin.

The two papers were discussed together, and the lengthy discussion was opened by Dr. Dudgeon, and Drs. Blackley, Byres Moir, J. H. Clarke, Goldsbrough, Madden, Day, Neatby, Green, Stonham, Watkins, Bodman, Burford, Thomas, Knox Shaw, Hay, and Eadie, also took part. Some important practical points were brought out in the papers and discussion, principally the facts that fats in the food stimulate the action of the pancreas, and also that acid acts chemically in the same way. It was also shown that the colouring matter of the stools is due not to bile only, but to a substance resulting from the action of the pancreatic juice and the bile, and that the absence of either biliary or pancreatic secretions will produce pale or colourless stools. Dr. Macnish and Mr. Dudley Wright replied.

LOBELIA INFLATA.—Dr. Edward R. Snader has found the lobelia a very useful medicine in a condition that is not always readily ameliorated. He prescribed it a number of times when the entire chest of his patient seemed upon auscultation to be completely full of râles. In the resolving stage of pneumonia, when this feature is prominent, and much wheezing and rattling and many râles are present, the presence of some pulmonary edema would not, by any means, contraindicate the medicine. On the contrary, this observer has found great relief from lobelia in actual cases of severe pulmonary edema. This state of lung, in which auscultation reveals the entire chest apparently full of râles, is one that obtains in many pulmonary complaints. We may meet it with antimonium tart., with ipecac., and other remedies, according to our prominent indications; but the addition of lobelia to our rather scanty armamentarium for this condition will doubtless be welcome.—*Amer. Hom.*

INSTITUTION.

LONDON HOMEOPATHIC HOSPITAL LADIES'
GUILD.

THE second annual meeting of the Ladies' Guild of the London Homeopathic Hospital took place in December in the Board Room of the Hospital, Mrs. Perks presiding.

In spite of the most unfavourable weather there was a large attendance of ladies, who first visited the wards and afterwards gathered in the Board Room for their meeting. Mrs. Holman, the Secretary of the Council, having read the minutes of the first annual meeting, held in December, 1902, Mrs. Perks addressed a few words of welcome to the meeting, and the second annual report was then read by Mrs. Holman, as follows:—

“The year has been marked by much activity in every branch of the Guild, and by the formation of three new branches, namely, the South Kensington, the Crouch End, and the Bloomsbury Branches. The centres, four in number at the date of the last report, are therefore now increased to seven. While, however, much has been done, much yet remains to do, and it is hoped that the year 1904 may, with the co-operation of medical men and the present members of the Guild, see other new branches formed for this excellent work. The branches are as follows:—

“The Hampstead Branch, August, 1901. President, Mrs. Fellows Pearson; Honorary Secretary and Treasurer, Mrs. Kimber; Membership, 107, the new members being 26.

“The Highgate, Finchley and Muswell Hill Branch, May, 1902. President, Lady Tyler; Honorary Secretary and Treasurer, Mrs. Holman; Membership, 66.

“The Tulse Hill, Streatham and Denmark Hill Branch, June, 1902. President, Mrs. Hahnemann Epps; Honorary Secretary and Treasurer, Mrs. Carter; Membership, 40.

“The Kensington Branch, July, 1902. President, Mrs. Perks; Honorary Secretary and Treasurer, Mrs. Spencer Cox; Membership, 48.

“The Crouch End and Crouch Hill Branch, April, 1903. President, Mrs. Pugh; Honorary Secretary and Treasurer, Mrs. Algie; Membership, 30.

"The Bloomsbury Branch, March, 1903. President, Mrs. C. Whateley Willis; Honorary Secretary and Treasurer, Dr. L. Cummins Harris; Membership, 102.

"The South Kensington Branch. President, the Lady Ida Low; Honorary Secretary and Treasurer, Mrs. Gordon Fellowes.

"The total membership is 413 as compared with 237 last year.

"Membership of the Guild implies either a subscription to the hospital through the Guild, £1 1s., and 2s. 6d. to the Guild Funds; or a subscription of 5s. to the Guild funds, and the providing of at least two garments.

"The report of the results in each of these ways is highly satisfactory, but it must be borne in mind that the figures, both as regards work done and financial aid given, are not for the same period of time in all cases. The Hampstead, Highgate, Streatham and Kensington Centres show a full year's work. The new branches show part of a year's work, and that part not comprising the season of the year when working parties meet. Thus the Bloomsbury Branch held their first working meeting in October, and have a large number of garments in preparation. Last year the number of things in preparation was reported, but it is thought better, in future, to give the figures only of the garments actually sent in. The following is the list:—

	Sent in 1902.	
Hampstead	211	76
Highgate, Finchley and Muswell Hill ...	66	26
Tulse Hill, Streatham and Denmark Hill ...	49	12
Kensington	100	54
Crouch End and Crouch Hill (in preparation)	21	...
Bloomsbury	12	...
South Kensington	14	...
Total	473	168

"This represents very much work, and it must always be remembered that these things are made to patterns supplied by the Lady-Superintendent of Nursing, many of them being large garments involving much detail in the cutting out and the making up.

"The subscriptions to the hospital through the Guild have been as follows:—

	£	s.	d.
Hampstead	77	4	6
Highgate, Finchley and Muswell Hill ...	81	1	0
Tulse Hill, Streatham and Denmark Hill ...	12	12	0

	£	s.	d.
Kensington	25	4	0
Crouch End and Crouch Hill	10	10	0
Bloomsbury	86	0	0
South Kensington	18	7	0
	<hr/>		
	£205	18	6
	<hr/>		

“The amount paid by the Guild to the hospital last year was £109 13s. 6d., and here it will be noted that the new branches have most energetically done their share of the work.

“The Hampstead Branch subscribes £50 per annum for a bed named ‘The Hampstead Bed.’ The Highgate Branch subscribes £35 a year for a cot in the children’s ward named ‘The Highgate Cot.’ The Board have now consented to the naming of ‘The Kensington Cot,’ the ladies of that branch subscribing the necessary amount. The Board have also, responding to the offer of the Bloomsbury Branch, consented to the naming of ‘The Bloomsbury Cot,’ the members of that branch subscribing the necessary amount. Thus three of the original branches and one of the new branches have carried out the full programme of the Guild, to increase the income of the hospital, to support one or more beds, to provide clothing for the patients, and to visit the wards.

“The Bloomsbury Branch also proposes to institute a novel feature, namely, the collection of a penny fund, collected by means adopted at some of the hospitals with success.

“It is felt that this report will be regarded as highly satisfactory. The Ladies’ Guild is still a young organisation, and the report of the year 1902, and this report for the year 1903, show a widespread interest in the hospital and its patients, and a very great amount of work done in the most self-sacrificing and kindly spirit. It is impossible that a Guild so begun, so energetic and so successful, should not have a most helpful and beneficial effect in the future of the hospital and the welfare of its patients.”

On the proposition of Mrs. Perks, seconded by the Lady Ida Low, the report was unanimously adopted.

The meeting then, on the proposition of Mrs. Whateley Willis, seconded by Mrs. Blackley, elected a Central Council of the Guild, consisting of the presidents and honorary secretaries of each branch, Mrs. Perks to be President of the Council and Mrs. Holman Secretary to the Council.

It will be seen that the organisation has practically doubled itself in membership, subscription to the hospital and the amount of other practical help given to the patients.

EXTRACTS.

A STRIKING CURE WITH *RHUS TOXICODENDRON*.

By DR. GOULLON.

(Translated from *Leipziger Pop. Z. f. Hom.*, July, 1903.)

MISS Z., about forty years old, had very acute attacks after eating cold apple-sauce, the attacks consisting of nausea, vomiting, prostration, complete insomnia, a thickly-coated tongue, thirst, and violent fever. When I first saw her, at noon on February 11th, I was first struck with the deep red colour of her face, causing the brother of the patient to exclaim, "I hope it is not scarlatina!" The pulse was wild, but full and soft.

There had also been violent cutting colic. A clyster had been followed in the morning by a slight evacuation without relief. There was evidently not only an acute catarrh of the stomach, but there were also previous rheumatic influences, as appeared from the abundant perspiration which had followed. *Aconite* given in alternation with *Ipecacuanha* (on account of the acid involved) failed to improve, and in spite of the *Belladonna*, given the second day, there appeared to be some typhoid or gastric fever. There was also a renewal of the pain in the ileo-cæcal region, a feeling of grievous sickness and entire lack of appetite. The coating of the tongue, already mentioned, consisted of large white, insular blotches or spots. Thursday, February 12th, I was called up late in the evening, and the progressively aggravated state gave cause for serious uneasiness; the patient lay bathed in perspiration, tormented with unrest, and still no trace of sleep. Burning thirst and lack of appetite, only some weak tea being taken.

What was to be done? The attack had now lasted since Sunday, February 8th. In spite of the frequent pulse I discontinued *Aconite* and *Belladonna*, also *Ipecacuanha*, and depended solely on *Rhus*, which was clearly indicated, especially by the great restlessness and by the rheumatic symptoms of the case.

Nor had I cause to rue it. Expecting to be called up that night, this expectation was not only *not* realised, but I found the patient on Friday, the 13th, quite changed.

Cheerful, without fever. Her sleep, though it lasted only an hour at a time without using any sedative, had manifestly refreshed her, and she reported that even after the first dose of *Rhus* a manifest improvement had set in. Four drops of the 4 D. dilution had been given her in half a wineglassful of water; every two hours a teaspoonful. Those around her emphasised the immediate change following on *Rhus*. It was really a cure according to the ideal motto: *Tuto, cito, jucunde*. In such cases the real blessing of homeopathy manifests itself. For no other method could boast of equal efficiency in such a situation. The moist and sloppy wrapping in sheets, also frequently practised by our school, proved themselves entirely unnecessary.—*Homeopathic Envoy*.

A SINGLE-DOSE *BRYONIA* CURE.

By FRANK A. GUSTAFSON, M.D., Mason City, Ill.

S. W., female student, aged 28; slim, frail, dark complexion; family history of phthisis; father and two sisters died of consumption. Caught cold last spring; went to an old-school physician for relief of resultant cough. Went the rounds, no relief other than temporary suppression; worse, not better.

This young woman lived in my home and came under my care only because of my invitation to prescribe for the cough. I asked her one evening why she did not do something for that cough. She replied that she had been taking something for it for more than eight months and was about ready to quit. I suggested that she allow me to prescribe. "Your little pills won't do any good," was her answer. However, she consented to try them.

At this time the cough was dry, hacking, worse at night, almost incessant—pains in the chest, little appetite, flesh failing. I gave *Bryonia* 6c, six pellets night and morning, and saw that she got the first dose. She forgot to take them in the morning; had coughed all night as usual. At six o'clock of first day after beginning treatment she reported that the cough actually seemed easier. I advised her to take no more medicine unless the cough became worse. The second night she had the first full night's sleep in months. The cough disappeared

within three days. Within thirty days we were obliged to leave B—— for the West and heard nothing further from the case until four months later, when I received a letter in which she stated that she had not coughed since the third day after taking the single dose of *Bryonia*; had taken no more medicine; had gained twelve pounds of flesh; had not felt so well in years; was a thorough convert of homeopathy, and begged to be forgiven for her disparaging remarks concerning "the little pills."—From *Medical Advance*.—*Hom. Envoy*.

A *CALCAREA CARBONICA* CURE.

By DR. GOULLON.

MRS. T. had become very low in consequence of child-birth attended with violent puerperal fever, the cure of which required several months. She now complains of a very painful pressure in the region of the left lobe of the liver. She looks ill, though not icterical; her tongue is coated; she is ill-humoured, of anxious mood. This is attended with vertigo, which has the peculiarity that she feels better when up, while the vertigo returns when she lies down.

This was the more strange since the patient is anemic, and the vertigo of anemic patients usually passes away while lying down, while it is generally aggravated when the patient is up, as there is then less blood found in the brain.

My task then consisted of removing the two chief symptoms, the vertigo and the pressure on the liver. I should also observe that repeated and most careful examinations of the abdomen gave no positive results, except a little more painfulness about the spot, which would probably correspond to the gall-bladder and its environs, radiating, therefore, into the cardiac region or into the pit of the stomach.

No curative effect was obtained from *Lycopodium* (six powders of the twelfth decimal attenuation taken one at a time in the morning on an empty stomach), nor did *China* or *Avena* give any relief. My idea was that, by improving the general state of her constitution, the ail-

ments resulting from anemia would be relieved. It is true that these remedies—giving in the morning five drops of the tincture of *China* and in the evening five drops of *Avena*, for fourteen days—made some improvement in the general health, without, however, materially affecting the cardinal ailments (pressure on the liver and vertigo).

Then I turned my attention to *Calcarea carb.* (given in the same way as noted above of *Lycopodium*), of which Heinicke, in his *Materia Medica*, says: "The mental states exhibit most prominently the impression of depressed energy, excited states being quite transitory, while the fundamental features are a peevish, vexed, depressed mood, with a tendency to weeping, despondency, and melancholy."

Furthermore, we find the almost more important symptoms: "The abdomen distended, thick and hard, a *pressive pain in the liver.*"

Thus the local and the general image of the disease indicated *Calcarea carb.*, while *Lycopodium*, which seemed equally suitable, proved ineffectual. The result was striking, for, after using the little *Calcarea* powders—I poured three or four drops on sugar of milk—not only the pressure on the liver, but also the vertigo (both of which were becoming chronic) vanished, and with it the fear of having to go to Karlsbad, of which the patient was quite afraid.

Any one studying the correlative symptoms, viewing the vertigo as the chief ailment, might take the other symptom of pressure on the liver as a correlative symptom or as pointing to *Calcarea carb.* Such leading correlative symptoms are of great use in practice in discovering the right remedy. I would, therefore, like to direct attention here to the meritorious work of Dr. Dahlke, in Berlin, concerning correlative symptoms, as printed in the *Journal of the Berlin Society of Homeopathic Physicians.*

In conclusion we would call attention to the "sensation of attacks of vertigo," which is characteristic of the effects of *Calcarea carbonica.*—*Hom. Envoy*, August, 1903.

ADRENALINUM MURIATICUM IN THE TREATMENT OF PURPURA.

Dr. A. E. BLACKBURN, of Philadelphia, in the *Journal of American Medicine*, July 11th, communicates the following case of the treatment of purpura by *Adrenalin chlorid* :—

W.N., aged twenty-seven, single, an instrument maker by occupation. His father and two brothers died of heart disease and kidney disease, two sisters are living and well. Patient was under observation at the time of attack for a cardiac lesion. Urine was normal. He was working when bleeding began.

Without known cause, he was seized on February 12, 1903, at 11 a.m., with severe epistaxis; the bleeding was continuous and free. When first seen at 1 p.m. he showed perceptibly the loss of blood. A 4 per cent. solution of *Cocaine hydrochlorate* was applied on cotton at intervals until 6 p.m., but gave no relief. The nares were then packed with gauze, saturated with the same solution, and *Calcium chloride* 0.65 grm. (10 grs.) was given every hour. At 9 p.m. the bleeding was still free, but diminished.

The nasal cavity was now packed with gauze saturated with *Adrenalin chlorid* 1-2,000. The following morning free bleeding had ceased, but oozing continued. Thirty-six hours after the onset blood was passed in the urine, and ecchymoses appeared on the tongue, mucous membrane of the mouth, and over the entire surface of the body.

From 6 a.m. February 14th to 6 a.m. February 15th the patient passed fifty ounces of very dark bloody urine, and was in a state of semi-collapse. Pulse was rapid, of low tension and fair volume. Skin was clammy. When the general bleeding appeared the *Calcium chloride* was stopped, and *Adrenalin chlorid*, 0.6 c.cm. (10 minims) 1-1,000, was given every two hours.

The subsequent favourable course seemed to indicate that the *Adrenalin* had been given to good effect. The ecchymoses did not increase, the circulation improved, the quantity of blood in the urine gradually decreased until at the end of a week it had entirely disappeared.

There was no previous tendency to excessive bleeding in the patient or in his family.—*Therapist*.

VARIOUS CASES OF ASTHMA.

Translated for the *Homeopathic Recorder* from the *Leipziger Pop. Z. f. Hom.*, May, 1903.

CLINICAL experience in the treatment of asthma serves especially to illustrate the rule that patients should not be treated by routine according to the name of the disease, but according to the symptoms in question, which point out the true remedy. I have had in the last years a number of very interesting cases which were cured with one simple homeopathic remedy, after the allopathic medicines used had proved ineffective; but almost every case needed for its cure another remedy in agreement with the varying symptoms. I had cause to observe also in these cases that the diagnosis formed by physicians cannot in all cases be depended on.

I. *Lobelia inflata*.—About two years ago a large herculean man came to my room and solicited my advice. He was a blacksmith from the large railroad foundry at G., and after having passed through pneumonia he has now for several weeks been suffering from dyspnea. He looked to be sound and vigorous, but he said he could not lift his hammer any more, for as soon as he did so his breath was caught and stopped; if he did not let his arm sink he would have to suffocate. No physician had been able to help him, and, unless he received help, he would be unable to work, though still in the most vigorous manhood, and thus his family would be impoverished. In a similar case the *Leipziger Pop. Zeitschrift* some time ago had recommended *Lobelia*. So I gave him that remedy in the third potency, three times a day, so much as would lie on the point of a knife. In a few weeks he wrote me that he was at work again, and if I would be so kind as to send him another supply of this powder he hoped soon to be entirely cured of his asthma; and so it proved to be.

II. *Natrum sulphuricum*.—Prof. O., of L., wrote to me that his mother, a matron of nearly sixty years, was suffering from asthmatic ailments, adding that these distressing attacks, strange to say, only appeared in wet, rainy weather, while during a clear sky she was always free from them. For years she had been trying various remedies, but, sad to say, without any benefit. According to Dr. Grauvogl, *Natrum sulph.* seemed to me to be indicated in this case, and it proved excellent, the professor writing to me, after using up his supply, that the remedy had acted excellently, as it had not only removed the asthmatic trouble, but also the stool troubles, from which his mother had always suffered. I had sent him the sixth potency, directing him to give a few pellets in the morning and in the evening.

III. *Natrum sulphuricum*.—Quite a similar case was that of a lady-superintendent of a large children's asylum, who wrote to me that she was suffering from asthmatic attacks, and requesting my aid, if there was any aid from this trouble; she added that she could not see why her trouble always came on rainy days. I had known the lady for a long time, she is now past fifty; I met her again not long ago, and she told me that since she had used these *Natrum sulph.* pellets she has not had any more attacks.

IV. *Arsenicum*.—A woman of F., the wife of a locksmith, over forty years of age, called on me and asked me for help from her asthmatic, convulsive attacks, from which she had been suffering for seventeen years. She said that these attacks were worst when going to bed and generally by night. Sometimes these attacks were so severe that she had her windows open even in midwinter, in order to get air so she could breathe. At the same time her mouth and throat were so dry that she continually wanted to drink. It was impossible for her to lie in bed, she can only sleep while sitting. Several times her case had been so serious that the physician had declared she could not live. The choice in this case was easy for a homeopath, for *Arsenicum*, even the 30th potency, soon gives the desired effect. On the use of this remedy the patient soon recovered, and as often as she felt a trace of her former ailment the little pellets so despised by allopaths were to her of the greatest service.

V. *Apis*.—Last summer I received a letter from a lady whom I had not seen for years, requesting me to help her to a homeopathic remedy for her ailment, if such a one could be found. She was already over fifty years old, is unmarried and well-to-do, living in a large provincial town. I knew her formerly as a healthy and well-nourished person, but now she wrote me that she had to cough, ejecting a tough, yellowish mucus, was suffering from constipation, and had always to use artificial means as a remedy. But her worst trouble consisted in her asthmatic attacks, on account of which she had often to sit at the open window for hours at night to get some air. At the same time she was nervous, frightened at every noise, though she, at the same time, was continually getting more corpulent. Up to this time she had followed Kneipp's method, using a partial wrapping up in wet sheets. But neither this use of cold water nor the use of medicines had given her any relief worth mentioning. I sent her, in a letter, homeopathic pellets, namely, *Apis* 6 and *Fluor. calcium* 6, directing her to use the first remedy for one week, taking three pellets three times a day, dry upon the tongue, and if not relieved to take next week the other remedy in the same way. At the end of

September she wrote me that her asthma and cough had both disappeared and, indeed, from the use of the *Apis* pellets alone, so she had no need at all to take up the pellets No. 2.—By A—m, Prior.—*Homeopathic Recorder*, June, 1903.

REVIEW.

MÉMORIAL DE THÉRAPEUTIQUE HOMŒOPATHIQUE.*

THE alphabetical order is steadily conquering the domain of scientific and practical literature. In these pressing times the double trouble of looking up an index and then looking up the text of a work puts too great a demand on the reader. One who wishes to consult a practical work must be able to find his place at the first attempt or the work is of little or no use to him. There are many works which we could name full of valuable matter, but practically useless from mere defect of arrangement.

The Doctors Jousset, both well-known practitioners of Paris, and equally well-known writers, have recognised the value—nay, the necessity—of the alphabetical arrangement in their latest work. This may be best described as a French *Prescriber*. It was in recognition of the same necessity that the *Prescriber* was compiled, and the *Homeopathic Therapeutics* of the Drs. Jousset follows the same lines. Beginning with *Abscès* and ending with *Zona*, it gives the appropriate treatment most generally needed for each, giving the appropriate doses in each case. Throughout the *Mémorial* frequent acknowledgments are made to the author of the *Prescriber*. In order to give our readers an idea of the scope of the work we cannot do better than translate a passage from the preface:—

“This is an absolutely practical work; it is a miscellany containing, in alphabetical order, the treatment of all diseases and of a

* *Mémorial de Thérapeutique Homœopathique*. Par les Drs. P. Jousset et M. Jousset. Paris: J. B. Baillière et Fils, 19, Rue Hautefeuille. London: Homeopathic Publishing Company, 12, Warwick Lane, E.C. Price 4s. 1904.

certain number of symptoms. The majority of the treatments are homeopathic—that is to say, inspired by the law of similars; but as the authors are not exclusives, as they have had at heart the desire to keep themselves abreast of all that is progressive in therapeutics, in order to give the sick the advantage of it, there will be found, whenever it may be necessary, empirical treatments, and even treatments borrowed from the law of contraries, chiefly in surgical affections, or in order to obtain their palliative effect. Finally, the authors give, with details, the local treatments useful in a large number of affections, appropriate *régimes*, and hygienic prescriptions—for instance, water treatment, electric and thermal."

This passage accurately describes the position of the authors in the therapeutic world, and their book faithfully reflects it. From this it may be gathered that whilst the work professes to be a "Miscellany," it is also to a large extent original. We have no doubt that as a practical work it will have much popularity; and the possessors of other works of the kind may add this to their reference libraries with advantage. For whilst homeopathy is in no way tied up to nosological lists of diseases and remedies, such lists may be of the greatest service. There are more ways than one of finding the indicated remedy.

NOTIFICATIONS.*

. Under this heading we shall be happy to insert notices of appointments, changes of address, &c., and holiday arrangements.

DR. SEARSON, London.—Dr. Searson will in future practise solely in London. Up to February 8th he will attend as usual at 27, Harley Street, W., daily, from 11 to 1 o'clock. On and after February 8th he will practise at 86, Wimpole Street, W. (formerly occupied by the late Dr. Compton Burnett), where he will attend daily for consultation from 11 to 1 o'clock.

DR. MINTER, Brighton.—The partnership between Dr. Searson and Dr. Minter has been dissolved, and Dr. Minter has removed to 36, Silwood Road, Brighton. His at-home hours are 12.30–2 p.m. and 6 to 7 p.m.; Tuesdays and Fridays, 2 to 3 p.m.

Obituary.

MR. WILLIAM BUTCHER.

WE record with deep regret the death of one of the veterans of homeopathic pharmacy, Mr. William Butcher, of Blackheath. The last time the writer saw Mr. Butcher was at the annual meeting of the British Homeopathic Association, in which he took a warm interest. This was shortly after his return from his voyage. He appeared to be rather frail, but there was nothing to suggest the approaching breakdown in his health. Mr. Butcher had been suffering from nervous breakdown, and had been taken to St. Leonards in the hope of recruiting. That hope was not realised. In the momentary absence of his nurse he jumped from the lavatory window and died from the effects of the shock. The *Lewisham Borough News* (December 24th) gives the following account of the sad occurrence, together with a sketch of the deceased's career:—

“DEATH OF MR. WILLIAM BUTCHER, OF BLACKHEATH.

“WE regret this week to announce the death of Mr. William Butcher, of Balholm, the Glebe, Blackheath. For about three months the deceased gentleman had been in a somewhat indifferent state of health, and was staying on the South Coast. The trouble seems to have been with the brain. On the night of Monday, December 21st, he was found outside the house at which he was staying—43, Eversfield Place, St. Leonard's—and where he had apparently fallen. His sudden death necessitated an inquest, which was held on December 23rd. The deceased gentleman was sixty-three years of age.

“Mr. Butcher had been a resident at Blackheath for many years. As a keen business man he opened a rather small establishment as a chemist over thirty years ago, in premises now occupied by the Victoria Wine Co. Later he removed to the large premises where the firm of Messrs. Butcher and Sons still carry on business in Blackheath Village. His commercial enterprise did not end here, for Mr. Butcher, with his sons, opened up a large concern in the City for the manufacture of photographic

apparatus, and so on. Fifteen years ago his sons joined him in the Blackheath business, whilst the City house, in St. Bride Street, is entirely under the management of two of his sons.

“ Upon local public bodies Mr. Butcher has done, in a quiet way, some useful work. Not only in the days of local Vestries, but also since the constitution of the Lewisham Borough Council, has he given for the common weal his time and ability. After his election as one of the three members to represent the Blackheath Village Ward on the Borough Council, he was elected Chairman of the Libraries Committee. Here he took an active part in connection with the erection of the Central and Forest Hill Libraries. Last year, although retaining his seat as a member of the Council, he relinquished his chairmanship of the committee in order to make a tour to Australia and New Zealand with Mrs. Butcher, whose health rendered a sea voyage necessary. As a member of the Blackheath Congregational Church, Mr. Butcher served in the office of deacon, was president of the Temperance Society, and at one time Superintendent of the Band of Hope. Religious and philanthropic demands invariably awakened his practical sympathy, but any help was always given quietly and without the slightest ostentation. He leaves a widow, three sons, one of whom is in Birmingham, and four daughters to mourn their loss.

“ The funeral took place on December 24th, when the body was brought from Hastings to Hither Green, and interred at Charlton Cemetery.”

MR. GEORGE CHEVERTON.

WE regret to announce the death of another homeopathic chemist in the person of Mr. George Cheverton, who has been now some time on the retired list. The following notice appeared in a contemporary :—

“ CHEVERTON.—On January 2nd, George Cheverton, chemist and druggist, formerly of Tunbridge Wells. Mr. Cheverton, who died at his residence, 23, Hillyfields Crescent, Brockley, S.E., was a Justice of the Peace, and at one time took a prominent part in the public life of Tunbridge Wells.”

GENERAL CORRESPONDENCE.

CHINA B. H. P.

To the Editor of THE HOMEOPATHIC WORLD.

DEAR SIR,—In reference to the letter from Mr. L. T. Ashwell published in your January issue, will you allow us to point out that we did not state, as suggested by Mr. Ashwell, that during the last forty years it had been our practice to use bark guaranteed to yield six per cent. of quinine-sulphate.

We are fully aware that by careful cultivation of cinchona an increasing yield of alkaloids has been in progress during that period. In reply to the question "What can be done by the homeopathic chemist of the present day and of the future?" after intimating that during the period referred to we had employed yellow bark of the finest quality, we proceeded to state that "the kind we use is guaranteed to yield at least six per cent.," &c., and though the word "now" might have been introduced to prevent misapprehension, the phrase does not justify the inferences which have been drawn from it, and the somewhat reproachful remarks based upon it, by Mr. Ashwell.

Until the third edition of the *British Homeopathic Pharmacopeia* was published no test for alkaloid had been given in that work under "China." When our Mr. Wyborn urged the introduction of such test it was considered by the Committee that only a minimum quantity, such as that named in the *B. P.*, should be required. In spite of the strange and contradictory replies to Mr. Ashwell's inquiries, and especially that of the "very eminent firm" he numbers "7," we can undertake to supply bark yielding six per cent. of sulphate of quinine in any quantity likely to be required, and we have had no difficulty in obtaining it for many years past.

With regard to Mr. Ashwell's remark in reference to the *B. H. P.* that "as it stands it chiefly consists of matter copied from the old edition (1867) of the *B. P.*, now out of date," only those who have laboured on the compilation and revision of the several editions of this work could fully appreciate the injustice and inaccuracy of such a statement. There are many articles contained in it on the subjects of which no published information

could be obtained at the time, and original research had to be undertaken in order to complete them.

Apart from "General Rules" and the special processes in Part I., there are five hundred and fifty-two articles on individual medicines, only one hundred and seventy-five of which can be said to contain quotations from the *B. P.*, and the "characters and tests" in these were either corrected or added to in many instances. In those instances in which quotations have been made, as stated in the preface, "it seemed to be a work of supererogation to go over again the ground which had already been worked so well and at so much cost of time and labour."

Of much more importance to the progress of homeopathy than even tests for chemical substances are the identity of the processes by which they are prepared, seeing that all impurities are more thoroughly attenuated than the drug itself in the preparation of the various potencies. Obviously, therefore, the preservation of these processes and those by which the substances used in the provings were prepared is highly desirable, and the deviation from this rule in the latest editions of the *B. P.*, leaving the way open for the introduction of the ever-changing methods of manufacture incident to trade, is, from the homeopathic standpoint, much to be deprecated, as new groups of impurities are introduced thereby.

Throughout the work the Committee endeavoured to give characters and tests contemporaneous with the substances used in the provings.

Mr. Ashwell would do well to point out the articles in which lapse of time has made revision desirable, at the same time bearing in mind the facts we have referred to. It would, *e.g.*, be very undesirable that "Calcium carbonate" of the latest edition of the *B. P.* should be substituted for that which in Hahnemann's time was regarded as the same thing, *viz.*, *Calcarea carbonica*.

Yours faithfully,

E. GOULD & SON, LTD.

59, Moorgate Street, E.C., Jan. 14, 1904.

RAINFALL AND PUBLIC HEALTH.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—The lowering of the infantile mortality and the

total death-rate in wet and cool as compared with hot and dry summers has led some physicians and meteorologists to regard excessive rainfall as advantageous to public health. As, however, the official meteorologists cannot suggest the *cause* of the wet summers of 1902 and 1903, it would be premature to arrive at any such conclusion. Moreover, 1849—when cholera was epidemic in this country—a wet and cold year, contradicts the theory, and so does 1879.

The fact is that the perihelion and aphelion of the planet Jupiter correspond in a very remarkable manner with the periods of low death-rate, as shown in the *Journal of the Statistical Society*, March, 1879.

Jupiter is now again approaching his perihelion, reaching it on the 1st of June next.

Then, it can be shown that wet periods under the pluvial and salubrious influence of Venus (as in 1902 and 1903, when Venus was culminating at the summer solstice in each of these years) are healthy; but, on the other hand, wet periods under Saturn's influence are unhealthy, as in 1849 and 1879. The bad weather and sickliness of 1849 and 1879 can be shown to have been foretold.

We must look to the *causes* of wet seasons before we can arrive at any safe conclusion as to the effect of excessive rainfall on the public health. While prejudice deters meteorologists and physicians from inquiring into the astronomical causes of abnormal seasons, notwithstanding the positive testimony of the great astronomer Kepler to the fact of planetary action on the atmosphere, &c., the true causes will remain undiscovered by them.

It is really absurd to say that the next nine or ten years will be worse for England than 1903 has been, on the sun-spot theory, as has been predicted by a certain spectroscopist. The major planets, especially Jupiter, have a marked influence on sun-spots—the average sun-spot, magnetic, and auroral periods are of the same length as is Jupiter's anomalistic year.

Trusting that many homeopathic physicians will inquire into this important question,

Yours obediently,

ALFRED J. PEARCE.

20, Foulser Road, Upper Tooting, S.W.

December 18, 1903.

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

HOURS OF ATTENDANCE :—Medical (In-patients, 9.30; Out-patients, 2.0), Daily; Surgical, Monday, 2.0; and Saturdays, 9 a.m.; Thursdays, 10.0 a.m.; Diseases of Women, Tuesdays, Wednesdays, and Fridays, 2.0; Diseases of Skin, Thursdays, 2.0; Diseases of the Eye, Mondays and Thursdays, 2.0; Diseases of the Throat and Ear, Wednesdays 2.0; and Saturdays, 9 a.m.; Diseases of Children, Mondays and Thursdays, 9.0 a.m.; Operations, Tuesdays, 2.30; Diseases of the Nervous System, Thursdays, 2 p.m.; Electrical Cases, Wednesdays, 9.0 a.m.

MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Anders (James M.). A Text Book of the Practice of Medicine. Illust. 6th ed. Thoroughly Revised. Roy. 8vo, pp. 1,326. (Saunders. Net, 24s.)
 Baruch (S.). The Principles of Hydrotherapy. 2nd. ed. 8vo. (Baillière. Net, 16s.)
 Brass (Arnold). Atlas of Human Histology. 4to. (Baillière. Net, 10s. 6d.)
 Brown (E. A.) and Others. Squint: Occurring in Children. An Essay. Cr. 8vo. (Baillière. 2s. 6d.)
 Carillo (Carlo). Cancer. An Exhaustive Treatise and an Appeal *ad populum* to accept Nature's own and Only Remedy. Cr. 8vo, pp. 304. (Sonnenschein. 5s.)
 Da Costa (John Chalmers). Modern Surgery. General and Operative. 4th ed. Rewritten and Enlarged. With 707 Illusts. Roy. 8vo, pp. 1,100. (Saunders. Net, 21s.)
 Dickie (Dr. P.). Hay Fever: Its Prevention and Cure. Fcap. 8vo, pp. 173. (Homeopathic Publishing Co. Net, 5s.)
 ———. Uricacidemia: Its Causes, Effects, and Treatment. Cr. 8vo, pp. 148. (Homeopathic Publishing Co. Net, 5s.)
 Ewing (James). Clinical Pathology of the Blood. 2nd. ed. 8vo. (H. Kimpton. Net, 21s.)
 Fenwick (E. Hurry). The Value of Ureteric Mesostopy in Obscure Diseases of the Kidney. A Study in Clinical and Operative Surgery. 8vo, pp. 230. (Churchill. Net, 6s. 6d.)
 Hillier (Alfred). The Prevention of Consumption. Revised by Prof. R. Koch. With Illusts. Cr. 8vo, pp. 242. (Longmans. Net, 5s.)
 Hirst (Barton Cooke). A Text-Book of Diseases of Women. With 655 Illusts. Roy. 8vo, pp. 684. (Saunders. Net, 21s.)
 Jellett (Henry). A Short Practice of Gynecology. 2nd ed., Revised and Enlarged. With 233 Illusts. 8vo, pp. 420. (Churchill. 10s. 6d.)
 Lymphatics (The) General Anatomy of the Lymphatics by G. Delamere.

Special Study of the Lymphatics in different parts of the body by P. Poirier and E. Cuneo. Authorised English ed. Translated and edit. by Cecil H. Leaf. With 117 Illusts. and diagrams. Imp. 8vo, pp. 314. (Constable. Net, 18s.)
 Macleod (Herbert W. G.). Methods and Calculations in Hygiene and Vital Statistics. Including the Use of Logarithms and Logarithmic Tables. Illust. Cr. 8vo, pp. 158. (C. Griffin. Net, 5s.)
 Melland (Charles H.). A Pocket Book of Clinical Methods. 12mo, pp. vi-88. (J. Wright (Bristol); Simpkin. Net, 1s. 6d.)
 Mitchell (A. B.). Diseases of the Urinary Organs. Including Diabetes Mellitus and Insipidus. Illust. Cr. 8vo, pp. 716. (Homeopathic Publishing Co. Net, 16s.)
 Shaw (James). The Physiognomy of Mental Diseases and Degeneracy. Cr. 8vo, pp. 96. (Simpkin. Net, 3s.)
 Sims (David). Rabies: Its Place amongst Germ Diseases, and its Origin in the Animal Kingdom. Roy. 8vo, pp. 304. (Camb. Univ. Press. Net, 10s. 6d.)
 Stengel (Alfred). A Text-Book of Pathology. With 394 Illusts. and 7 Full-page Chromolithographic Plates. 4th ed., thoroughly revised. Roy. 8vo, pp. 934. (Saunders. Net, 21s.)
 Storey (Emily A. M.). Practical Points in Nursing. For Nurses in Private Practice. With Appendix. 3rd ed., thoroughly revised. 8vo, pp. 466. (Saunders. Net, 7s. 6d.)
 Treatise on Diseases of the Eye (A). Edited by W. C. Posey. Being Vol. 1 of a Treatise on Diseases of the Eye, Nose, Throat, and Ear. 8vo. (H. Kimpton. Net, 21s.)
 Woodward (Dr. A. W.). Constitutional Therapeutics. "The Patient: Not the Disease." 8vo, pp. 557. (Homeopathic Publishing Co. Linen, net, 17s. 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.

Letters to the Editor requiring personal reply should be accompanied by stamped directed envelope.

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.

Dr. Burford, London.—Messrs. E. Gould & Son, Ltd., London.—Mr. G. A. Cross, London.—Messrs. Berigner & Co., Calcutta.—Dr. Tyler, London.—Dr. Dyce Brown, London.—Dr. Minter, Brighton.—Dr. Searson, London.—Mr. Erskine White, Holdsworth, N.S.W.

BOOKS AND JOURNALS RECEIVED.

Hom. Review.—Zoophilist.—Mind.—Revist. Hom.—Calcutta J. of Med.—Med. Times.—Allg. Hom. Zeit.—H. Monatsblätter.—The Chironian.—La Propaganda Homeopatica.—Maanedsk. f. H.—H. Maandblad.—La Homeopatia.—Ind. Hom. Rev.—Hom. Envoy.—The Individualist.—Medical Century.—Rev. Hom. Française.—H. Recorder.—Wjestnik H. Med.—N.A.J. of H.—Clinique.—New Eng. Med. Gaz.—L'Art Médical.—Jour.

Belge d'H.—Zeit. Berl. V. h. A.—Amer. Med. Monthly.—H. J. Obst.—Jour. B.H.S.—Med. Adv.—Annaes de Med. Hom.—Lo Nuevo.—Hom. Eye, Ear, and Throat J.—Hahnemannian Mon.—Pacif. Coast Journal of H.—Ind. Hom. Rev.—Med. Brief.—Daily Paper.—Public Opinion.—Reynolds' Newspaper.—Revist. Hom. Catalana.—Leicester Hom. Provident Dispensary and Cottage Hospital Report.

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The Present Position of Homeopathy: Our Heritage and our Responsibilities. By Thos. Simpson, M.D.

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Materia Medica Rhymes. By Margaret L. Tyler, M.D.

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THE HOMEOPATHIC WORLD.

MARCH 1, 1904.

DEADLY ANTISEPSIS.

THE notion which prevails among medical men that a drug can only do the particular bit of work for which it is prescribed is responsible for untold damage to patients and for no small item in the general bill of mortality. In a general way unintentional poisonings by medical men are regarded by themselves and their victims as mysterious dispensations of Providence; but occasionally the truth does "hit them in the eye"—if we may be allowed the expression—in a way that cannot be mistaken.

That blessed word "antiseptic" and that equally blessed word "aseptic" suggest to the medical and surgical mind all that is pure and sweet and healthful and conducive to happiness and longevity. The widespread damage occasioned to patients and surgeons by the famous carbolic spray—which was never known to kill a single germ—did at last bring its long career of mischief to an end; but it left the word "antiseptic" no less "blessed" than of yore. And now the life-preserving, germ-killing substance to which the hope of surgical salvation is pinned is no longer carbolic acid but corrosive sublimate.

Numbers of "accidents" with this antiseptic have been reported from time to time. As a matter of fact they are not accidents at all, but simple poisonings. It is true the preparation may have been prescribed to kill

germs only, and when a drug exercises its natural properties irrespective of the object for which it has been prescribed, this is regarded as an "accident" in the orthodox medical world, which knows nothing whatever of a drug's powers taken as a whole. But there is no more accident in it than there is in deliberate poisonings with the same substance.

The truth of this is at last beginning to dawn on the orthodox mind, as will be seen by a note which we quote below from the *British Medical Journal* of February 20th. In the case there related serious poisoning occurred from the use of a solution of *Mercurius corrosivus* in the strength of 1 to 8,000. Some of the typical mercurial symptoms were present, and among them the bladder and urinary symptoms should be well noted by homeopaths. "Accidents" of this kind are especially instructive to us. We have known of severe cases of poisoning in nurses who have had to "disinfect" their hands with solutions of this most popular antiseptic of the present day.

We will now let the *British Medical Journal* tell its story:—

"PERILS OF SUBLIMATE SOLUTIONS.

"In midwifery and operative surgery antiseptic solutions and solids are so freely used that it is important to bear in mind that their use requires caution. Hence it is advisable that all cases where toxic effects are observed should be published. MM. Boissard and Coudert recently reported before the Société d'Obstétrique de Paris a bad case where anuria and sore mouth followed the administration of a weak solution of perchloride of mercury in the puerperium. On the tenth day, after a normal labour at term, there was a rise of temperature, so three and a half pints of a one in eight thousand solution of sublimate were injected into the uterus, the same amount of pure water being thrown up immediately afterwards. Hemorrhage following, the uterine cavity was swabbed and the intrauterine injection repeated, just as before, a few hours later, except that over five pints of pure water were injected after the sublimate solution. The flooding continued, and caffeine and artificial serum injections were administered. Vomiting and diarrhea with tenesmus and bloody stools followed. For five days the patient was very ill, complete suppression of urine existing throughout that space of time, excepting when a few drachms of highly albuminous urine were

drawn off on the third day. On the sixth the gums and buccal mucous membrane appeared ulcerated, but the vomiting, which had been severe until that date, ceased after free washing out of the stomach. Under appropriate treatment the patient recovered, but it was not until the tenth day that she could pass urine without the catheter, and the soreness of the mouth increased, the breath growing foul. The diarrhoea did not cease until the thirteenth day, and it was not until the end of a fortnight that the patient began to rally from the severe debility caused by the poisoning. MM. Boissard and Coudert attribute the very rapid toxic effects of the weak sublimate solution to direct entrance of the fluid into the venous sinuses patulous on account of detachments of fragments of placenta. They believe that with stronger solutions accidents of this kind are rather frequent[1]. The evidence in this case is not very conclusive, but the danger is one which certainly exists when perchloride solutions are imperfectly prepared. This is especially likely to be the case when compressed drugs are hurriedly dissolved in boiling water, the nurse occasionally hastening the process by crushing the solid with the handle of a toothbrush or some other appliance at hand. When an imperfect solution thus prepared is thrown into the uterine cavity minute solid particles of perchloride of mercury may enter the circulation with disastrous results. The anuria in the above case was significant."

A PREMONITORY SYMPTOM OF MUMPS.—Miechamp describes an early symptom of mumps (*Journ. de Méd. et de Chir. Pratiques*, April 25, 1903) which he considers of value as enabling a case to be isolated with a view to preventing an epidemic. Patients frequently complain of preauricular pain when some sapid substance comes in contact with the mucous membrane of the tongue. The writer employs the following method: Some substance, such as vinegar or dilute acetic acid, is applied to the tongue. This causes a painful reflex secretion of saliva, which is most marked on the side which first shows the swelling. This symptom is present in all cases, including those which do not begin with parotid inflammation, those attended with simple angina, and in cases beginning with orchitis, whether followed or not by parotitis. On the other hand, in a case of facial erysipelas, with swelling in the neighbourhood of the parotid, and in two cases of preauricular adenoids, there was no painful reflex secretion of saliva on stimulating the tongue. It is necessary that the patient should swallow after the application of vinegar, as then the reflex is much more marked. The writer is of opinion that this symptom will allow a diagnosis to be made in many cases that would otherwise remain uncertain; and even should it not actually demonstrate the nature of the disease, it is sufficient to warrant the isolation of all cases that show painful secretion.—*Brit. Med. Jour.*

NEWS AND NOTES.

THE BURNETT FUND—WANTED, £2,000.

WE are pleased to acknowledge the receipt of the following donations to this fund:—

	£	s.	d.
Mrs. Pole (second donation)	1	1	0
Edwin H. Laurie, Esq.	1	1	0
Major Lester (third donation)	1	0	0

In addition to these Mr. Mazzini Stuart, of Liverpool, has promised £50. The cause of homeopathy in Great Britain owes much to the Stuart family, who are the happy possessors of many interesting relics of the Master, not the least interesting of which is the red morocco arm-chair in which he passed much of his time during his career in Paris. Mr. Stuart's donation brings the amount already secured to about £560. This, of course, leaves much still to be raised before the £2,000 aimed at is complete, and we trust that all who can will give their help. We shall have some definite proposals to make on this subject next month. (Another sum of £16 has been contributed to the Fund by Mr. C. W. A. Stewart, but this is not to be reckoned as part of the £2,000, but as part of the General Fund.)

THE DIRECTORY.

THE tenth number of the *International Homeopathic Directory* of the present series will soon be in the hands of subscribers. In the future the editorship of the *Directory* will be undertaken by Dr. Roberson Day, who will have the assistance of a committee. Dr. Day proposes to give in future issues a summary of the year's doings in the homeopathic world, which will doubtless add to the usefulness and attractiveness of the little volume.

THE CLINIQUE.

OUR old friend the *Clinique* comes to us in a new shape, with a new cover, and under a new editor. At

least, the editor, though by no means new to editing, is new to the *Clinique*. Dr. Charles Gatchell, the well-known editor of the *Medical Era*, in taking over the *Clinique* has merged the *Era* into it. Formerly the *Clinique* was the organ of the Hahnemann Medical College and Hospital of Chicago, and it still retains the former staff on its Advisory Board. We hope, therefore, that in acquiring the brilliant talents of Dr. Gatchell for the editorial chair the *Clinique* will still be able to present its readers with clinical observations and materia medica notes from the pens of Dr. Halbert and the other members of its former staff. Our cordial greetings to Editor Gatchell, and congratulations on his first interesting number!

APIS.

THE symptoms recorded in the following note from the *Medical Press* of January 13, 1904, are nearly all well-known *Apis* symptoms. It not unfrequently happens that honey partakes of the properties of the bee-virus; and there is no need for far-fetched solutions of the problem founded on a hypothetical discovery of particular flower-poisons. Bees are wiser than some people give them credit for.

“POISONING BY HONEY.

“From a case narrated in the *Guy's Hospital Gazette*, it would appear that honey is not always the delectable article which it is supposed to be. Shortly after partaking of some fresh country honey a lady was affected with urticarial symptoms, the larynx becoming edematous and the respirations hurried. Fortunately, the condition cleared up after a prompt purgative. From time to time there have been reported instances of severe poisoning from the consumption of honey, the fact of which was known to and described by Xenophon, who relates how that certain Greek soldiers were seized with vomiting and sickness after partaking freely of the honey gathered in the neighbourhood of Trebizonde. In a paper read by Dr. J. C. Thresh before the Pharmaceutical Society, some information was given with regard to the nature of the poison. According to Dr. Stockman, of Glasgow, who examined an ethereal extract of this honey physiologically, the active substance was stated to be ‘a narcotic poison, acting very markedly on the respiratory centre.’ In other cases, gelsemium has been found impregnating the honey, the consumption of which has given rise to all the symptoms of poisoning by that drug, such as giddiness, cardiac weakness, and temporary amaurosis. Death has even occurred under these circumstances, though, happily, such an

event is extremely rare. Severe pruritus has also been observed to follow the eating of honey culminating in the outbreak of an erythematous or urticarial eruption. The obvious explanation of these untoward manifestations is that the particular sample of honey has been gathered by the bee from a poisonous flowering plant, for, notwithstanding the gaudiness of the bloom and its richness in the syrupy liquid, the melliferous insect can hardly be expected, even by M. Maeterlinck, to possess sufficient powers of discrimination always to abstain from gathering its spoil from such sources. Only rarely, however, does it err in this respect."

CONIUM MACULATUM.

"XRAYSER" in the *Chemist and Druggist* of February 20th gives the following items about *Conium* :—

"Hemlock, the subject of Messrs. Farr and Wright's latest investigations, is one of the famous drugs of history. It was for ever consecrated by the deaths of the great Athenians Socrates and Phocion, and it was one of the instruments by which Seneca tried vainly to shuffle off this mortal coil at the command of Nero. Christison did not believe that the hemlock of the Athenians was our hemlock, but his doubts have not been widely shared. The most remarkable story concerning hemlock is told by Valerius Maximus, who, however, is not regarded as a trustworthy narrator. He relates that in his time (which was in our first century) the public authorities of Marseilles kept a preparation of hemlock, which they doled out to the wretches who could satisfy them that they had sufficient reasons for putting an end to their existence. As a remedy hemlock has had a chequered career. The Greeks and Romans used it in medical practice externally only. It became popular with Ambrose Paré and his contemporaries in the sixteenth century, but then it dropped out of use for about two hundred years. In 1760 Storck, of Vienna, who was then the Dean of the medical world, created intense interest throughout Europe by reporting that he had cured many cases of cancer with it. In England, France, Italy, and Germany a controversy raged for years, but the ultimate verdict was against Storck's claims. Since then various medical writers have commended hemlock in gout, tumours, and venereal affections. Just now Mr. Hills said in the discussion on Messrs. Farr and Wright's work, 'there is a tendency to exclude it from modern materia medica.' Very contradictory are the book statements about hemlock. Linnæus and subsequent authorities have stated that its poisonous properties only develop in the South of Europe; Messrs. Farr and Wright now show that English hemlock yields about twice as much alkaloid as foreign. I find from various sources that it increases the appetite, and diminishes the appetite; that it dilates the pupil, and contracts the pupil; that it acts on the spinal marrow, and on the brain; that it is an aphrodisiac, and that St. Jerome recommended it to priests as an aid to chastity; and lastly, that animals poisoned by it become mummified, and that their bodies promptly putrefy."

“FATAL HEADACHE POWDERS.”

A CORRESPONDENT has sent us the following paragraph with the above heading, from the *Daily Mail* of February 6th :—

“The *Lancet* calls attention to the effects upon the public health of the sale of such remedies as headache powders.

“In New York the deaths from heart failure increased from 4,069 in 1900 to 5,461 in 1902. Last year it was discovered that articles sold as headache powders were largely adulterated. Chemists were warned against the practice, and there was at once a decline in the death-rate from heart failure.”

It is a mistake to suppose that “adulteration” accounts for the trouble: exalgine, antifebrine, antipyrine, phenacetin—all are capable of producing fatal effects in sensitive persons.

“MEDICINE AS SHE IS PRACTISED” IN ASYLUMS.

THE same correspondent draws our attention to the following paragraph from the same journal :—

“Four female patients have died at Portsmouth Lunatic Asylum in an extraordinary manner that is to be investigated by the coroner. As they showed violence they were given the customary sleeping draughts. During the night, however, they developed unaccustomed symptoms, to which they succumbed.

“It was on Wednesday evening that five of the patients, all women, began to be noisy, and it was deemed advisable to give them a draught composed of bromide of potash and chloral. They had had such doses before. On this occasion the compound was taken from a newly made-up bottle.

“One woman refused to drink the draught, but the other four duly swallowed it and retired for the night.

“It was about ten o'clock at night that an attendant reported to a lady doctor that one of the patients, Emily Cooke, was ‘looking peculiar.’ The doctor at once went to the patient, and afterwards looked at the other three women. It was seen that something was amiss, and Dr. Merry, the acting superintendent, and Dr. Henderson were summoned. Restoratives were applied, but at 1.30 on Thursday morning Cooke died. An hour and a half later another patient, Emma Chaffe, also succumbed.

“WORKING IN DARKNESS.

“Before this the electric light installation broke down, the place being left in darkness and causing considerable confusion and inconvenience to the doctors and their assistants in their efforts to restore the patients to consciousness.

"However, they persevered throughout the remainder of the night and all day on Thursday, and throughout the whole of Thursday night, applying every possible kind of restorative. But all failed. Harriet Blackwood died at a quarter to eight yesterday morning, and at five minutes past nine Elizabeth Cummings expired.

"Dr. Merry stated yesterday: 'It is customary for us to administer drugs to violent patients who wander about and cause a great noise. In fact, they cannot get sleep without them. The opiate administered to these four patients was composed of the same ingredients as they have had on previous occasions without any untoward effect.

"An unused portion of the mixture from the same bottle is in the hands of the authorities for the purpose of analysis. The inquest will be opened on Monday."

On the question of the composition of the draught we must leave the coroner's jury to decide; but the method of practice admitted seems to be most objectionable and unscientific. To keep lunatics quiet with narcotic drugs is not one scrap better than keeping babies quiet with "soothing syrups." The incident shows the need of asylums being put under the care of homeopaths, as has been done with enormous advantage with some of the largest and best equipped asylums in the United States.

SUICIDE (?) BY *SULPHONAL*.

FROM the *Westminster Gazette*, February 3, 1904:—

"A Westminster jury to-day returned an open verdict in the case of a dressmaker who poisoned herself by *Sulphonal*—an unheard of mode of death."

MICROBOPHOBIA.

THE grandmotherly *Lancet* is always trying to make our flesh creep, and here is one of its last shockers unearthed by the *Daily Mail* (February 6th):—

"Generally speaking, people do not realise the fatal connection which exists between microbes and Mammon. This week, however, the *Lancet* sounds a warning note suggesting that banks should make a point of washing all money that passes through their hands.

"The two-shilling piece is the happiest hunting-ground for bacilli," said a West End doctor yesterday. 'The shilling is nearly as bad, and any coin that is milled round the edges has additional hiding-places for germs.

"Such diseases as erysipelas and pityriasis versicolor may readily be transmitted through coins, and a well-known French physician has obtained in this way cultures of every known bacillus from anthrax to typhoid fever.

"As to precautions, the average person cannot do better than fill his purse with powdered boracic acid. The coins enter the powder in a greasy condition, from contact with the glands and pores of the hands. The powder adheres to this and turns the dirt into a mildly antiseptic mixture which will preserve its qualities for weeks after being removed from the purse.

"When one sees the way coins are placed in the mouth by ladies, omnibus conductors in search of change, and children, it is really surprising that coins are not responsible for more diseases than they are.

"There is another fact that may be accounted for by the germ-laden coin. Men are more liable to skin diseases of the face than women. This might well be attributed to their habit of carrying coins in their trousers pocket. The bacilli remains on the lining of the pocket, and every time the hand goes into it it becomes infected, and carries the mischief to the face."

If the vital human organism itself were not the most potent microbe-resister known, not all the coin-washing nor all the disinfecting in the world could save the body from putrefaction.

EDITOR'S CHANGE OF ADDRESS.

ON and from March 25th all communications to the editor of the HOMEOPATHIC WORLD should be addressed to 8, Bolton Street, Piccadilly, W., on which date he will move to that address from his present house in Clarges Street.

VEGETARIAN DIET IN GOUT AND NEPHRITIS.—In a dietary intended for patients of this class, meat, especially of the red varieties, is excluded on account of the large amount of extractives which it contains. Vegetables are given, however, in large variety. J. W. Hall (*Berl. Klin. Woch.*, 1903, No. 38: *Med. News*) has shown by chemical analysis that the purin contents of the ordinary vegetables varies within large limits. White bread, rice, tapioca, lettuce, cauliflower, and potatoes come within the limits of safety, but peas, beans, onions, oats, and asparagus are among those which should be avoided. Malt liquors also show a large percentage of purin bodies, and should be avoided.—*Medical Times*.

ORIGINAL COMMUNICATIONS.

PROVINGS OF *NATRUM NITRICUM* ("SAL
POLUCHRESTRUM"—LEEWEHNOEK) AND
GALIUM VERUM.

By the late DR. JAMES COMPTON BURNETT.

[We give these provings exactly as they have come into our possession—leaves from Dr. Burnett's Day Book. *Natrum nitricum* should find a place in the treatment of cases of colica mucosa.—ED. H. W.]

May 28, 1875, 7 p.m.—Feel well; took a piled-up teaspoonful of sodæ nit. pur. dissolved in half tumbler aq. pur. It has a very strong salty taste, with a sweet after-smack.

10.15 p.m.—Took ditto.

May 29th, 9.30.—Took ditto.

May 30th.—Thus far I perceive no effect from the *Natrum nit.* beyond the passage of a little flatus and very insignificant tingling ad anum.

May 31st, 11.35 a.m.—Took ditto.

May 31st, 10.30 p.m.—Took ditto.

June 1st.—I seem to walk with a firmer and more elastic step than usual, and the exercise is more refreshing. I was very thirsty yesterday, and drank three tumblers of water at my dinner. I usually drink half tumbler, or less.

June 1st., 7.30 p.m.—Took ditto.

June 2nd.—While on my round this morning I was suddenly seized with great desire for stool, with a feeling of very great uneasiness at the hypogastrium; cold sweat stood on my face; stool copious, large, solid, and one part nearly two inches in diameter, was covered by an entire skin of something which looked like mucus.

June 4th, 10.30 p.m.—Took ditto; immediate and long-lasting nausea, with eructations, which prevented me from sleep for some time.

June 5th.—Very thirsty; three tumblers of water quenched it.

June 10th, 8 a.m.—Took a bit of sod. nit. of about the size of a horse-bean on my tongue; its taste is very much like ordinary salt. It at once began to create heaving of

the stomach, that I had to spit it out to prevent vomiting. I will get some scales, and take it by weight.

GALIUM VERUM (γάλα)—CHEESE RENNET (OUR
LADY'S BEDSTRAW).

June 25th, 1875.—Took a couple of little stems, with roots and flowers, into my mouth, and chewed them. The taste is bitter. This, with the constant inhalation of the odour of the flowering plant (lying in my study), seems to have produced extraordinary heaviness and sleepiness. At any rate, I have not felt so sleepy for a long time.

[The *Galium* which has found a place in the *Dictionary of Materia Medica* is *Galium aperine*, "Cleavers," "Goose-Grass."—ED. H. W.]

ACTION OF *PSORINUM* IN AN INTERESTING
MENTAL CASE.

By J. R. P. LAMBERT, M.D., Assistant Physician, London
Homeopathic Hospital.

ON May 28, 1903, I was called to see Mrs. S., a German woman, aged 45 of dark complexion and very forbidding countenance, looking daggers most of the time.

She had been ill for six or seven months and had been an in-patient at the German Hospital, where a diagnosis of nervous dyspepsia was made. She was at that time suffering from bitter risings after food, and some gastric pain > by food. Two weeks before I saw her mental symptoms developed, since which the gastric symptoms had somewhat abated, and at times alternated with the mental.

She was now complaining of being afraid to sleep because when she sleeps she gets vivid dreams, which she afterwards thinks are real. She thinks she is being punished for her sins, and that she is really dead (having dreamt that she died), and that her case is hopeless, and that it is no use treating her; the idea of treating her she scoffed at. She also complained of a sort of faintness which supervened on falling asleep. Her mental state of apathy and hopelessness and her defective knowledge of English made it rather difficult to get a clear knowledge of her state, but on these symptoms I prescribed *Lach.*

1m, a divided dose, and *Sac. L.* On June 2nd the husband reported that she was much better the day after I saw her, and the catamenia, which had been absent for some time, came on on the 30th. Since then she has been worse at times and complaining of great pain in the temples at times. Still takes no interest in anything, and wishes some one would kill her or throw her from the window with this object, but is afraid to do it herself. Has been dreaming less. *Lach.* 1m, o.n.

June 5th.—Rather better; still says she can't live. Says it's nobody's fault but her own. She is the worst woman in the world. Very little sleep last night, but previous night very good. *Lach.* 30. b.i.d.

June 10th.—Night before last very bad. Still great pain in the head, says her nerves are torn and cannot be healed. She has always been very constipated till the last week or so, since commencing treatment, but regular now. Catamenia still continues, but scanty. The mental symptoms being, however, practically unaltered, I gave her *Act. r.φ*, 5 mins. in half a tumbler of water, a dessert-spoonful to be taken thrice daily. This had, however, no effect, as the next note shows.

June 15th.—About the same, varies considerably; still apathetic, thinks every one is talking about her, and consequently is afraid to be seen out of doors. Appetite good, frequent hunger. Repeat *Lach.* 1m.

June 22nd.—Yesterday and two previous days was much better and went down stairs, having previously kept her bed most of the time. To-day she is worse. Pain in head still. Same ideas, wishes for poison. *Aur.* 12 t.d.s.

June 29th.—Has been bad on the whole. Yesterday fairly well, but no sleep in night. Says she has no pain now. During the week has slept better till last two nights. At this point she refused to see me any more, saying it was no use, nothing could do her any good. I now sent her husband six powders of *Psorinum* 30, and told him to give one each night for three nights and then wait a few days.

July 10th he reported first powder made her sleep i 4 a.m. and the next till 5 a.m., and she was better in the daytime. The third night she slept all night and was better in the day. Then was worse again the next night and following day, so he gave a fourth powder and a fifth, but not much sleep resulted. Yesterday she was very

bad, talking incessantly and wanting poison to kill herself. No sleep at all at night. Complaining of pain in the left arm and side; salivation and a sort of choking; micturition every few minutes. She is rather better to-day since catamenia came on. Her appetite is good and if she takes no food she is sick. The bowels are now acting well. Hereupon I gave him one dose of *Lach.* cm and *Sac lac.* pils., with instructions not to give the powder so long as the improvement lasted.

July 23rd.—Presumably the improvement did not last, as I learnt on the 28th that he gave her the powder the same evening, *i.e.*, 20th, and she slept all the following night. Three days later she became worse and has been bad since. If she gets sleep she is better, and as a rule sleeps better alternate nights. Is worse when lying down, and when bad is very hungry. At times she is violent and wants to take poison. I then sent three powders, No. 1 being *Psor.* 30, No. 2 *Lach.* cm, and No. 3 *Sul.* 1m.

August 1st.—She had No. 1 on 23rd and slept well following night, and was better the next day. On the 3rd day, *i.e.*, 26th, she had No. 2, and slept very fairly, and all through the week slept better till last night. Has less pain in the head, which she says feels like a drum. On the 30th she had No. 3. Is now quiet but not quite so well. Catamenia appeared again after interval of only two weeks. I now sent seven powders, all *Sac. lac.* except Nos. 2 and 6, which were *Psor.* 30.

August 19th.—Her husband reported that she was decidedly better than she has been and sleeps well. She still thinks people will see she is a bad woman. When awake she is now quiet and considerate of her husband, and has no more any pain in her head. I now gave her husband three more doses of *Psor.*, to be given only when required by any signs of relapsing. I have since seen her husband, who told me that the improvement continued, that she is now quite well. I have no doubt that the medicine to which the cure must be attributed in this case was the *Psorinum*, which has in its pathogenesis "*inability to get rid of ideas which first came to him in sleep,*" which symptom was really the keynote in the case, though *Lachesis* also helped to some extent. Also I have no doubt that if *Psorinum* had been given earlier and allowed more time to act, the cure would have been considerably hastened.

5, Alfred Place West, Thurloe Square, S.W.

TWO AUSTRALIAN REMEDIES—*DIPODIUM PUNCTATUM* AND *XANTHORRHŒA ARBOREA*.

By ERSKINE C. WHITE.

DIPODIUM PUNCTATUM (ORCHID.).

HABITAT, secluded valleys. Appearance notable from its tall, handsome stalk, which is richly spotted with purple blotches or spots. The stalk, when carelessly chewed, renders unconscious, or produces mild stupor and delirium almost precisely similar to that of chloroform. Appears to be a close ally of *Dioscorea villosa*. Acts rapidly in curing symptoms the latter cures.

[“*DIPODIUM*.—A genus of terrestrial leafless orchids of Australia and New Caledonia, belonging to the tribe *Vandea*. They have thick branching roots, and stems one to two feet high furnished at intervals with brown scales, and terminating in large racemes of numerous rose-coloured, nearly regular, flowers, about an inch across. The oblong clawed lip is two-eared at the base and slightly bearded at the apex. There are two pollen masses, each with a separate candicle, whence the generic name signifying two feet. There are three known species. A beautiful figure of *D. punctatum* will be found among the illustrations to Dr. Hooker’s *Flora of Tasmania*.”—*From the Treasury of Botany.*]

XANTHORRHŒA ARBOREA (LOCAL NAME, “GRASS TREE”).

Horned cattle in neighbourhood that devour tender parts of spear-like fronds when grass is scarce, develop symptoms of congestion of kidneys, become paralysed in hind quarters, as I have personally observed. *Xanthorrhœa* is invaluable in severe and chronic paralysis, intense pain in small of back, when unable to turn or move, intense congestion and pain in kidneys. Appears to prevent return of above.

Tincture made from the white tender part by which frond adheres to parent stem.

Resin of above has a delightful incense-like odour when burned.

HOLDSWORTHY, N.S. WALES.

[“*XANTHORRHŒA*.—The Black-boy, or Grass Gum-trees of the Australian Colonies, form a most remarkable genus

of *Liliaceæ*, differing widely in general appearance from the other genera of that order; most of the species having thick trunks like those of palms, covered with a dense coating formed of the persistent bases of old leaves glued together by the yellow or red resin with which these plants abound, and usually burnt and blackened outside by bush-fires. In some, however, the trunk is extremely short. Their leaves are long, wiry, and grass-like, and are borne in a dense tuft at the top of the stem, and hang down gracefully all round it; their long flower stalks rising out of the centre, and sometimes growing as high as fifteen or twenty feet, bearing at the top a dense cylindrical flower-spike, resembling that of the *Typha*, made up of a mass of scales out of which the flowers protrude. These have a calyx of six pieces conniving at the bottom, where the six stamens are inserted, the latter having long projecting filaments and loose swinging anthers, and their three-celled ovary bears a long straight style, and ripens into a woody capsule, which splits when ripe into three valves, and contains a few black seeds.

The tall-growing species, *X. arborea*, *X. hastilis*, &c., form conspicuous features in some Australian landscapes, and when denuded of leaves have been compared to, or even mistaken for, black men holding spears—hence their common Colonial name. Their leaves afford good fodder for cattle, while the natives eat the tender white centre of the top of the stem. Two kinds of fragrant resin—one of a yellow colour, called Botany Bay or Acaroid resin, and the other red, like Dragon's-blood, and called Black-boy Gum—are obtained from them."—*Treasury of Botany.*]

EXPERIENCES WITH UNIT DOSES.—

CHELIDONIUM.

By M. L. H. COOPER, M.D.

As there still seem to be many who doubt that any benefit whatsoever can follow the administration of single doses, especially when not highly potentised, I propose from time to time to give examples of cases which occur in my own practice, so that these may be added to the large mass of evidence already existing on the subject.

It is with great diffidence that I bring forward the

following case, as the action of the remedy can be open to severe criticism, owing to the fact that other remedies, which the patient had been taking for some time past, were continued in spite of my efforts to prevent this. Still, such evident relief followed the administration of the single doses, that I think the case is worthy of publication; for although the results herein noted may now be of little value as evidence, standing as they do alone, yet if another case of a similar character were later on to be recorded, in which the same remedy gave equally marked relief under similar circumstances, the importance of the facts in this case would be greatly enhanced.

On December 3, 1903, a lady wrote to me from France on behalf of her husband, age 65, who was suffering from cancer of the œsophagus. She stated that she had written to my late father (Dr. Robert T. Cooper) last summer with a view to obtaining his opinion as to the likelihood of her husband being benefited by his treatment. The growth was then in an early stage of development, and my father gave her hope that treatment might relieve the condition. However, the treatment was never commenced, owing to the absolute refusal of the patient to try it, in spite of his wife's attempt at persuasion. Thus, she went on to say, the time passed, and in August she brought him to England, where gastrotomy was performed, as the growth entirely prevented him from swallowing. He recovered from the operation wonderfully well, and in the beginning of September they went to an hotel in Kensington, where the patient had some tolerable weeks.

As the weather was becoming foggy and wet, they were advised to go South again, but nine days before leaving, the patient began to complain of pains of a rheumatic character, and these became steadily worse, so that by November 2nd, a day before starting, she did not think he would be able to travel, as it had developed into acute sciatica. (The pain, which is like red-hot irons, is in the right hip and extends down to the knee; it compels him to constantly change his position and move the pillows, as he cannot rest in any position; it is rendered worse by his cough, which jerks him, and is always present even when at rest.) In the summer he had twitches of rheumatism, but these were very slight and of quite a different character. The present sciatic pain came on quite suddenly. During the last few days he has had pain

in the left hip, which is thought to have been due to the necessity of having to sit on that side.

However, she goes on to say, both his medical attendants thought the change to a dry, hot climate might remove the pains; but alas! this has not been the case, and he is now almost crippled, and can only walk from his bed to his easy chair supported on both sides. Turning him in bed is very difficult, as every little movement causes pain, and though he still gets up every day to sit in his easy chair, it is getting more and more difficult for him to do so. His former craving for food has long since left him. He gets choking fits at times and brings up a quantity of frothy mucous. *Bowels*: For several months have needed *Ol. Ricini* or enemas, and now he is given syrup of figs followed by an enema, as they will not act without such measures.

Previous History, Disposition, &c.—He had always been of a gouty disposition, which showed itself in lumbago, the pain being of a very different character from that which he now has, and very often uric acid deposits were present in the urine. He has frequently suffered from influenza, and she thinks that the cancerous condition began in January, 1903, after two attacks of this disease. These attacks always took a feverish character and were apparently malarial in type, he having contracted this latter disease when serving in India. Has been vaccinated several times, the last occasion being ten years ago. In physique he is tall, and has always been thin, though wiry and energetic.

Family History.—Eldest brother died of cancer of the throat at 70 years old, another brother of aneurism, and a sister of galloping consumption.

I will quote the words with which the first letter concludes: "I do not think that anybody can cure him, if it ever was possible; now, I fear, it is too late; but I heard that your father had been able to stop pain in the case of Miss G——, who died quite peacefully and painlessly after using his remedies, whilst before this she was in agonies which, from the description, must have been like my husband's neuralgic sufferings. These the doctor here himself now believes to be influenced by the cancer, whilst in the beginning we had hoped it was just an attack of rheumatism, which might wear off after a little while. He has to take a good deal of *Morphia* injected under the

skin, and he gets some *Quinine* and some *Varalettes* mixed with his food, which are all given by the tube into his stomach. Besides these he has occasional doses of *Urotropine* and *Strychnine*, all of which drugs are administered by an allopathic physician in attendance.

"He can hardly swallow at all, and his œsophagus is so full of mucous that it is impossible to give anything by the mouth."

A description of the diet follows, and the statement made that on the whole he is much better during the day than at night, and the letter winds up by asking if I would undertake the treatment, viz., "the calming down of his sufferings."

To this I replied that I would do so, but that the *Morphia* and other drugs must be discontinued, and at the same time I sent a dose of *Chelidon. maj.* ϕ A.

Note.—I was led to the selection of this remedy by its well-known powers over rheumatic conditions, and especially over right-sided sciatica, by the throat symptoms which have appeared in the provings (e.g., "Sensation as if larynx were pressed on œsophagus impeding deglutition; sensation of choking in throat, as if too large a morsel had been swallowed"—extract from Dr. Clarke's *Materia Medica*), and also because it seemed suited to the patient, who, no doubt, suffered from enlarged liver and the general cachexia which is the usual outcome of attacks of malaria and a life spent in the tropics. Then with regard to the pains themselves—the slightest movement causing severe aggravation—and the stiffness, all pointed to the same remedy; while, finally, the fact that it had a past reputation in cases of malignant disease added additional weight to the selection.

Report on December 20, 1903 (by letter dated December 16th).—"For a day or two after the powder, in half a tumbler of water, was administered through the tube, nothing particular occurred; the pain in the small of the back and down the right thigh from the hip to the knee remained, and he continued bringing up mucous and phlegm. Now for the last three days we find a change. *The mornings are decidedly good, with much less pain; it is not so incessant, and he can get rest in his easy chair. To-day he was eleven hours without needing Morphia, but every evening at about 5-30 or 6 o'clock for the last three days a regular fit of ague has come on him*

with shivering, feeling of cold water down his back, and also a certain amount of nausea. High temperature, pulse over 100, and slight delirium, then after an hour (to-day longer) it eases off again, leaving him very tired. His cough is very troublesome, especially directly after getting into bed, though expectoration is somewhat less; still, on the whole, *he says he has suffered very much less pain during the past three days.* Dark green brown stuff, which was formerly only occasionally seen, now bubbles up from the stomach the moment the plug is removed from the tube, often half a wineglassful comes away at a time." The letter concluded by saying that the local doctor had ordered more *Quinine* for the ague, but asked me to send something for this condition. This I did, but as this was fortunately never given, the fever having passed off without it, it will not add further complication to the case. I sent another dose of the *Chelidon. maj. φA*, to be given when all signs of fever had abated, directing that the *Strychnine* which he was taking was to be discontinued for two days before administration.

Report (letter dated December 17th).—After saying that the cough had been troubling him, rendering him restless at night, the letter says "that *the pains in the loins and hips are decidedly better.* Liquid still bubbles up from the tube, but is not so dark as it was. Amount of mucous coughed up varies. The coughing used to produce retching and often vomiting, but does not do this now, though he often suffers from nausea and retching whilst at stool. Bowels very constipated.

Letter dated December 22nd.—"The ague did not return, so the medicine for this was not given. *The lumbago and sciatic pains have absolutely gone.* There is, however, increasing weakness now and somnolence. The coughing continues, and sometimes causes retching, which exhausts him. Bowels very constipated. Has not yet taken the second powder, as the local doctor would not leave off the *Strychnine.*"

I then wrote saying that the dose had better be given in any case, and now we come to the final scene, as described in the last letter, dated January 11, 1904: "The powder was given on December 30th, and certainly brought on a reaction of some sort, for 3-4 hours after taking it he passed a large motion, a thing which had not occurred for months without medicine or an enema, and in

the night following he had diarrhea. It came on so quickly that we could not get him up promptly enough; the weakness then increased rapidly, and at noon on January 4th *he passed away painlessly and peacefully.*" The letter continues as follows: "I feel that I owe you great gratitude for having rid him of those awful sciatic pains, and I believe, with deep sorrow and regret, that your father might still have saved him if my husband had been willing to take his remedies in July."

Notes.—It may be well to state that the patient had no knowledge that my remedies were being given him, so that the action of his mind cannot have influenced his condition.

If it is allowed that the evidence given above shows that the single doses of *Chelidonium* acted and did so beneficially, then it must be admitted that this case is of importance as demonstrating the fact that a single dose can act in spite of the fact that other medicines are still being administered. Had any remedies been given by the local doctor other than those with which his system had become soaked for months past, the contention that the *Chelidonium* had any influence in relieving his sufferings would not have a leg to stand upon, but this was not so.

It seems extremely probable to me that both doses, besides relieving the pains, acted on the liver. It is certainly remarkable that a definite attack of ague followed so soon after the first dose; and might this not have been due to the setting free of the malarial parasites by hepatic disturbance? The occurrence also of the natural motion after the second dose suggests an increased flow of bile. The colliquative diarrhea seen in this case quite coincides with similar reactions noted by my late father as following the administration of arborvital doses in cases of malignant disease.

18, Wimpole Street, W.

MATERIA MEDICA MISCELLANY.

By J. R. P. LAMBERT, M.D.

Coccus cacti—its Action on the Kidneys.—The symptoms of *Coccus cacti* in connection with the kidneys are pains, dull, heavy; lancinating-like cramps, < by pressure and movement; spasmodic pains in the kidneys with vesical tenesmus and frequent emission of high-coloured urine; lancinating, sharp, prolonged pains extending from the left kidney along the ureter, the urine passing drop by drop. In women the urine excoriates the lips of the vulva. The urine contains mucous filaments, and has a whitish and granular sediment; the odour is ammoniacal.

Coccus cacti can be used with success in acute desquamative nephritis, in nephritic colic, and in catarrh of the bladder. It resembles *Cantharis* in its action.—Quoted anonymously from *La Homeopatia de Mexico* by the N. A. J. H.

[I have found the presence of uric acid in the form of brick-dust sediment a good indication for *Coccus cacti*.—J. R. P. L.]

Viscum Album in Asthma.—Writing on the treatment of asthma, Dr. Pinart, of Barcelona, recommends *Viscum* ϕ as the remedy of choice; the results of it are described as rapid, almost mathematical. It has, he says, a decided action on the nervous system, and in its pathogenesis there is paralysis of all respiratory muscles and stertorous breathing. If the remedy does not cover all the symptoms it can be alternated with *Phosphorus*, if there is pulmonary congestion; with *Adonis v.* if there is cardiac weakness with irregular beats; with *Strophanthus 2x* if there is arterio sclerosis and cardiopathy. When the asthma is accompanied by emphysema *Viscum* will be alternated with *Naphthalinum 3x*; or with *Ipecac.* if there is bronchitis.—Quoted by N. A. J. H.

[The writer's explanation of the action of the drug would indicate it to be an antipathic rather than homeopathic action. In any case its action on the respiratory system is interesting. Its use in asthma is not mentioned in the *Dictionary of Materia Medica*.—J. R. P. L.]

Antipyrine for Chronic Cyanosis.—The *Hahn. Monthly* quotes Osler (from the *American Journal of Medical Sciences*, August, 1903) as follows:—

“Chronic cyanosis is met with—(a) In organic disease of the heart, particularly congenital malformation, in chronic myocardial and tricuspid lesions in children and in adults, and in cases of adherent pericardium.

“(b) In certain diseases of the lungs, particularly emphysema, and in long-standing pulmonary tuberculosis of the fibroid type. Practically, there are only two conditions in which patients walk into the office with extreme cyanosis, viz., congenital heart disease and emphysema.

“(c) In the methemoglobinemia of chronic poisoning with coal-tar derivatives, as antipyrine, acetanilid. In this condition the patient may startle one by his cyanotic hue.”

[To this I would add from the *Dictionary of Materia Medica*, under *Antipyrine*, Cheyne Stokes breathing; dyspnea; tightness of chest; inability to lie down; pulse feeble, rapid; fainting spells. From all these symptoms *Antipyrine* is a medicine which should be thought of in any case presenting marked cyanosis unless it be due to congenital heart disease.—J. R. P. L.]

Eruptions from Codeine.—Dr. Wolters describes three cases of skin eruptions due to *Codeine*. A man suffering from bronchitis, after 3 cgms. a day, commenced to complain of redness and swelling of his hands and face. The rest of his body was covered with roundish, reddish spots, with intense itching and mental excitement. Three weeks later, for the sake of experiment, the drug was repeated, when the same untoward effects appeared.—*Berliner Klinische Wochenschrift*, No. 29, 1903.—(*Hahn. M.*)

Allium cepa in Flatulent Colic.—Dr. Kent, in an interesting study of this drug, in *Medical Advance*, gives us the indicating symptoms in the complaint above mentioned. Cutting, rending, tearing pains, drawing the child almost double. Screaming from violent cutting in lower abdomen. Stitching pains in the abdomen. Colicky pains beginning in the hepatic region and spreading over the whole abdomen, worse around the navel; worse when sitting. Wind colics. *Allium cepa* is a wonderful remedy in whooping-cough also. When it is indicated, the child will often have indigestion, vomiting, and flatulence; will pass offensive flatus; will be doubled up with colic.—*Hahn. M.*

CASES I HAVE COME ACROSS.

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

LX.—*AMMONIUM BROMIDUM* IN A SEVERE CASE OF
WHOOPIING-COUGH.

My youngest daughter, when an infant two months old, contracted whooping-cough, and it turned out to be about the severest case I have come across during all my years of experience. Myself, as well as the attending physician, had very little hope of her recovery, and thought that every day would be her last. The paroxysms were very violent, six or seven times a day; the child's face turned black, the eyes protruded, and several times it was on the very verge of death through suffocation. Had it not been for the watchful care of my wife, it is a certainty that the child would not now be alive, as day and night she hardly ever rested, taking the child up as soon as a fit came on, and placing it in a favourable position. On several occasions the child gave no sign of the fit, but the mother's watchful eye detected the blackness of the little one's face, and at once came to its rescue. The child refused the milk, and for four days was kept alive on *brandy* and water, weakly diluted. I administered in turn *Aconitum napellus*, *Drosera rotundifolia*, *Cuprum metallicum*, *Antimonium tartaricum*, *Castanea vesca*, *Ipecacuanha*, *Bryonia alba*, *Spongia marina tosta*, and *Nux vomica*; but the disease got worse rather than better. The physician (an allopath, no homeopath being available) prescribed *Ipecacuanha* and *Scilla*, given in *Syrup of Tolu*. As a last resource, one day, when we seemed to be completely baffled, I said to the doctor, "Well, doctor, what do you think of trying one of the *Bromides*, such as that of *Ammonium*?" "I have been thinking about that myself," he replied, and he thereupon sat down and wrote out the following prescription:—

R. *Ammonium bromidum* gr. xxiv.
Syr. *Tolu* ꝑiv.
Aqua ad ꝑiv.

One teaspoonful to be taken occasionally.

The medicine acted like a charm, and the child improved almost from the first day of taking the medicine.

Accessory means were the hanging of a handkerchief, saturated with a few drops of *Kreasotum* ϕ , over the child's head when asleep, and the rubbing of a liniment, composed of *Camphorated Oil* and a little *brandy*, over the child's chest, stomach, and along the spine every morning. The progress of the disease was arrested, the paroxysms gradually became weaker, and took place at longer intervals; the appetite returned, and the child made a good recovery, after having been under the spell of the disease for fully six months. *Ammonium bromidum* has for its indication irritation of both the organs of respiration and the stomach; this is accompanied with a *spasmodic* cough, having a *distinct whoop*, very much simulating the symptoms of whooping-cough. The cough of *Ammonium bromidum* is very distressing, hoarse, dry, spasmodic, and exceedingly exhausting. After seeing the beneficial action of *Ammonium bromidum* in the case of pertussis mentioned above, I have every confidence in recommending it in those severe cases where other prominent remedies fail to arrest or to create any improvement in this distressing and often dangerous disease—the more especially dangerous when attacking children in their infancy.

LXI.—*LOBELIA INFLATA* IN DYSPEPSIA.

A young man came to me suffering from tightness of the chest with a sense of great oppression, and laborious breathing. The sense of oppression was so great that it caused him to be constantly taking a deep breath. There was a sensation as of a lump in the pit of the throat, and a feeling of oppression and weakness at the epigastrium. Judging by the symptoms, I at once concluded that the patient was suffering from dyspepsia, and, as the indication for the *Lobelia* form of that complaint is that it is always accompanied with a feeling of oppression in the chest, I told him to take a dessertspoonful of the following every four hours:—

R̄ *Lobelia inflata* 1x ʒi.
Ad *Aqua dest.* ʒviiij.

The effect of the medicine exceeded my most sanguine expectations, as at the end of three days the symptoms

were only very slight, and by the fifth day had entirely disappeared. *Lobelia inflata* is a prime remedy in dyspepsia, especially the *chronic* form, in which tightness of the chest, laborious breathing, and a feeling of oppression, causing a deeply-drawn breath to be taken, are prominent symptoms. Even in asthma, for which it is a well-known remedy, it is of the most use in those cases where the attacks are brought on by indigestion.

(To be continued.)

BRITISH HOMEOPATHIC ASSOCIATION.

SUBSCRIPTIONS AND DONATIONS TO THE GENERAL FUND OF THE ASSOCIATION SINCE THE LAST PUBLISHED LIST.

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SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

The fifth meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thursday, February 4th, Dr. Johnstone, Vice-president, being in the chair.

Miss Margaret Lucy Tyler, M.D. Brux., L.R.C.P., L.R.C.S. Edin., L.F.P. & S. Glasg., of Linden House, Highgate Road, N.W., was proposed as a member by Giles F. Goldsbrough, M.D., and C. Knox Shaw.

The meeting commenced with a paper by Dr. Speirs Alexander, on "Colica Mucosa, or Pseudo-membranous Colitis."

The following were the principal points touched upon:—

Etiology—Sex—Temperament—Relationship to other diseases—Symptomatology—(a) Constipation—(b) Membranous discharge and its characteristics—(c) Pain—(d) Abdominal condition—(e) Pelvic disorders in females—(f) Gastric derangements.

Pathological considerations:—Reasons for attributing the condition to errors of innervation rather than to inflammatory disturbance—Treatment—Analogy between serum-therapy and homeo therapy, and its bearing on the treatment of colica mucosa—Management of the paroxysm, and remedies—Management of the chronic condition—(a) Remedies and their indications, with illustrative cases—(b) Diet—Comparison between that adopted by the French and German schools respectively—(c) Thermal and other treatment at Plombières and various watering-places.

Dr. Alexander agreed with the theory that this disease is purely of nervous origin. In the homeopathic treatment thereof he mentioned for the acute symptoms *Dioscorea*, *Magnesium Phos.*, *Colocynth*, and *Chamomilla*. For the chronic condition the most likely remedies are *Graphites*, the pathogenesis of which corresponds closely; *Colchicum*, which has "masses of plastic exudation" in its pathogenesis; also *Hydrastis*, *Plumbum*, *Alumina*, *Kali carb.*, *Ammon. mur.*, *Magnes. mur.*, *Sepia*, *Sulphur*, &c.

On the subject of the dietetic treatment of this condition he referred to the method adopted by Langenhagen as representing the French school, based on the catarrhal theory of the disease. He allows his patients milk, soup, white fish, minced beef and mutton, potatoes and haricot beans; no raw fruit or vegetables with husks or fibre; with a daily purgative and intestinal irrigation with a long tube; he advocates exercise short of fatigue, and that rest in bed should be avoided. On the other hand, Von Noorden, representing the German school, bases his treatment on the nervous origin of the malady, and orders food of a coarse type, brown bread, leguminous plants with husks, fruits with seeds, and food which contains cellulose, which digests slowly, so that flatulence should be produced and the stools should not form scybala. He also recommends mineral waters and abdominal massage. This diet he continues for six weeks, when the bowels will have become regular and ordinary diet can be resumed. By this method he claims permanent cure in 50 per cent. of cases.

The discussion was opened by Dr. Dyce Brown, who thought the disease was neither purely neurotic nor catarrhal in origin, but a mixture of both, and that catarrh of a gouty type predominated. He found *Mercurius. cor.* and *Bell.* the most useful remedies, also *Lycopodium*, *Hydrastis*, *Ignatia*, *Nux vom.*, and *Magnesium mur.*, which has a marked uterine action.

Dr. Dudgeon mentioned a case which no medicine helped except *Colchicum*.

Dr. Byres Moir agreed with Dr. Alexander that the disease was not of catarrhal origin, but a secretory disturbance. Nearly 80 per cent. of the cases he thought were women. He mentioned also that a somewhat similar condition had occurred frequently in men who

had had dysentery in South Africa and then developed obstinate constipation. He asked how these cases were to be distinguished from the disease in question.

Dr. Goldsborough said that one must consider whether the patient was neurotic or neurasthenic, the latter being a gradually acquired condition. He recommended *Plumbum acet.* 6th to 30th potency when the descending colon seems to be the seat of the trouble.

Dr. Beale mentioned the fact that cases of this kind often develop in neurotic patients when under the Salisbury diet. The attacks occur suddenly, with abdominal pain.

Dr. Barlee (visitor) mentioned a remarkable case of a girl of sixteen who became hysterical and gradually got worse till she developed the grand crise of Charcot, and was at death's door. At last enemata were given, and brought away two large enteroliths, after which she got quite well for a time. She then relapsed and came into his hands, and he relieved the grand crise with *Opium* 30, and cleared up the case with *Plumb.* 200.

Dr. Watkins mentioned the fact that *Mercurius corrosivus* has produced a membranous colitis, and also that mercury is excreted by the intestines even when given by inunction.

Mr. Dudley Wright thought the condition to be a catarrhal one, and essentially toxemic in origin. He had once performed colotomy in such a case, and the patient subsequently died, and there was found *post mortem* an inflammatory condition of the bowel.

Dr. Madden and Dr. Johnstone, from the chair, also took part in the discussion.

Dr. Alexander, in reply, said that there was confusion in the minds of the speakers between two diseases, one of neurotic origin, which was the one under consideration, and an inflammatory disease such as in the cases referred to by Dr. Moir as following dysentery. The inflammatory cases would be relieved by *Mercurius cor.*

Dr. Searson then gave a very interesting extempore address on the subject of his visit to some of the homeopathic colleges and hospitals of America.

INSTITUTION.

BOURNEMOUTH HAHNEMANN CONVALESCENT HOME.

ANNUAL MEETING.

THE twenty-fifth annual meeting of subscribers to the Hahnemann Convalescent Home and Dispensaries, Bournemouth, was held at the Home on Wednesday afternoon, January 27th. The Earl of Malmesbury, who had been announced to preside, wrote regretting his inability to do so. He had been obliged to give up all his present engagements, having accepted an invitation to stand for the Stepney Division of the London County Council, which was entailing an enormous amount of work day and night, attending meetings, &c., in the division. Sir Edward Durning Lawrence was thereupon voted to the chair, he being supported by Messrs. H. Nankivell, M.D., B. W. Nankivell, M.R.C.S., L.R.C.P., W. T. Ord, M.R.C.S., L.R.C.P., Giles, the Rev. E. G. Phipps Eyre, Mr. J. A. B. Williams, Mr. A. Peach, Mr. Langley Taylor, Mr. J. T. Snell, Mr. J. Berry, Mr. W. Fisher, Mr. W. J. Meredith (secretary), and Mr. A. Clement Brown (treasurer). Other apologies for absence were announced from Colonel Day (Southampton), the Rev. Frederick Young (acting chaplain), and the Rev. F. E. Toyne (chaplain of the Home).

The Annual Report was presented.

MEDICAL REPORT.

Dr. B. W. Nankivell read the report of the Medical Officers (Drs. H. Nankivell, W. G. Hardy, W. T. Ord, and B. W. Nankivell), which stated that owing to the prolonged closure of the Home during necessary structural alterations there has been a falling off in the number of patients received. In the in-patient department 66 men and 73 women have been admitted during the past twelve months, making a total of 139; including those remaining in the Home at the beginning of the year, the grand total is 171. The average stay of patients was 50 days; reckoning, however, special extensions, it amounted to 73 days. The last year, though unusually wet, has on the whole proved a very healthy one, which is shown

by a decrease in the number of gratuitous patients and the small mortality (viz., 3 against 13 in the previous year) in the dispensary work. At the Western Dispensary 594 persons have sought relief, with a total of 1,892 attendances. The number of patients at the Eastern branch was 467, with 1,312 attendances; 331 persons were visited at their own homes and at the Cottage Home, and 1,389 visits were paid to them. The deaths occurring in the dispensary practice were three.

In moving the adoption of the report the Chairman observed that to-day hospitals and convalescent homes largely occupied the minds of all. Surgery and physics were advancing with giant strides, so that hospitals before deemed perfect now seemed to be anything but perfect. The great hospital at London, established eight hundred years—he meant St. Bartholomew's—was asking for any sum up to one million to enable it to continue to be what it had been for many hundred years past—one of the greatest hospitals in the whole world. He (the speaker) was connected with the Children's Hospital, and they were asking for money. He wanted to know where there was a hospital that was not asking for money, but if they were asking for money the generosity of the people was being extended towards them. Guy's Hospital asked for two or three hundred thousand pounds, and they got it. They were asking for a comparatively small sum in order that that useful institution might carry on its work free from debt. Sir Edward, in speaking of homeopathy, remarked that when he was a boy the doctor had no right to charge except for bottles of medicine, therefore he delivered those bottles by the pint, quart, and gallon. He had been speaking with a great doctor, who had said, "We doctors do not take much medicine; I have not taken any for the last fifteen years." If they referred to the life of any great physician they found these words attributed to him, "He threw discredit upon the profession he had ornamented by refusing to take any medicine whatever." Homeopathy was started not to give gallons of medicine, but to try and see if something could not be found to affect some part of the human body.

The report was adopted.—From the *Bournemouth Guardian*, January 30th.

SILVER DRESSING FOR WOUNDS.—A sheet of silver is the dressing applied by Dr. Reboul, a French physician, to wounds. It has remarkable antiseptic properties, and a fresh wound heals quickly without suppuration, while a chronic ulcer becomes gradually covered with healthy skin.—*Science Siftings*, Feb. 18, 1904.

EXTRACTS.

THE ACTION OF RADIUM RAYS ON TISSUES, EGGS, AND ANIMALS.*

THE action of the Becquerel rays emitted by radio-active bodies has, owing to their effect on the skin, attracted the attention of the medical world. Walkhoff, in 1900, showed that those who worked with radio-active substances were liable to suffer from a form of dermatitis like that produced by the Roentgen rays. Becquerel describes how he suffered from carrying in his vest pocket for two hours a very active preparation of radium. Fourteen days afterwards the skin corresponding to the position of the radium showed signs of inflammation; the area gradually increased, and ultimately a large and deep ulcer formed, and did not heal for months.

Danysz found that the action of radium on the skin is never immediate. At first nothing is felt, but on the eighth, fifteenth, or even twentieth day there is some congestion. This long latent period is one of the most interesting and mysterious facts about the action of Becquerel rays on living tissues. A sample of barium chloride containing about 50 per cent. of pure radium is, according to M. Curie, 500,000 times more powerful than metallic uranium, and produces an appreciable congestion of the skin in a few minutes. If placed in contact with the skin of a guinea-pig for twenty-four hours, it causes complete destruction of the epidermis and dermis. Contact for forty-eight hours does not produce any deeper ulceration. The deeper connective and muscular tissues are little affected. If the radium be placed under the skin a relatively feeble effect is produced on the epidermis, and even less on the connective tissues and muscles. The epidermic tissues seem to absorb the rays that produce the pathological effects. The skin of the guinea-pig is much more sensitive than that of the rabbit; indeed, an exposure that produces alopecia in the guinea-pig may cause a growth of hair in the rabbit. A tube of radium placed for one to four months in the peritoneal cavity produced no lesions comparable to those on the skin, and the intestines and serous membranes seem to be very slightly sensible to these radiations.

The nervous system is much more sensitive than the epidermis. A tube of active radium placed under the skin over the vertebral column and part of the cranium of a young mouse 1 month old causes at the end of three hours paresis, and ataxia after seven to eight hours, tetaniform

* *British Medical Journal*, February 13, 1904.

convulsions and death in twelve to eighteen hours. Mice, 3 to 4 months old, died with the same symptoms in three to four days, and those 1 year old in six to ten days. Guinea-pigs, 8 to 12 days old, similarly treated for twenty-four to forty-eight hours, but with the tube applied to the lumbar region, suffered in one to three days from complete paralysis of the hind-quarters, and tetaniform convulsions. Death ensued in six to eight days. Adult guinea-pigs and rabbits treated in the same way did not show any nervous troubles immediately, but died with skin lesions some weeks or months afterwards. An adult rabbit in which a tube was placed under the dura mater for eight hours showed nothing abnormal for two days, but on the third it had hemiplegia. It would seem, therefore, that the nerve centres sensible to these rays are very effectively protected by the bone in adults, while the cartilaginous tissues of young animals do not afford much resistance to the passage of the rays.

The larvæ of insects kept in a tube with radium for twenty-four hours died in two or three days; in them, too, the nervous system was most affected. When soluble salts of radium are dissolved in distilled water the emanations are dissolved by the water, and act on insect larvæ much like the substance itself. They also make the cuticle brown on its dorsal surface.

Becquerel's rays affect microbes in varying degrees. In all development is interfered with, but some—and notably those that produce proteolytic autodigestion—are killed under certain conditions. The bacilli of anthrax fail to develop if they are placed for twenty-four hours in contact with these emanations.

The effect on animals so far described were produced at close range, but the rays emitted by radium can also kill at a distance. London has found that if 30 mg. of radium be placed over a cage of mice for one to three days the animals become ill on the third day, and die on the fourth or fifth. The first effects are redness of the ears and blinking of the eyelids; then follow drowsiness, refusal of food, slowness of movement, and feeble response to mechanical stimuli. At the fourth day there is coma, with paralysis of the hind legs. In deepest coma the spinal reflexes may be exaggerated, and the respirations slow and even scarcely appreciable. There is thus marked depression of the cerebral nervous system and exalted excitability of part of the cord. The respirations finally cease, and death occurs. After death the hairs on the back could be pulled out in masses, and often the epidermis came with them. The subcutaneous tissue was greatly congested. The chief histological changes were produced in the skin and cortex cerebri.

The effects of radium on the blind are interesting. Blind persons slightly susceptible to light get a sensation of light when radium is placed over one or other eye. Persons who can just distinguish light from shade, but cannot distinguish form, when placed in a dark room, can distinguish the outlines of an object projected on or placed in a screen illuminated by radium.

Radium rays exert a marked influence on the eggs of sea-urchins, which in the course of development pass through the three stages—ciliated blastula, the hollow gastrula, and the pluteus larval stage. If blastulæ are exposed to radium rays for forty minutes the gastrula is not formed, though the ciliary movements become more intense. If gastrulæ are exposed, the pluteus is small and atrophied. Spermatozoa are rapidly enfeebled and killed by these rays, while ova may be more readily fertilised. Ova exposed to radium rays may develop irregular embryos by parthenogenesis without the action of a spermatozoon. These results may be due to the action of the rays on the chromatin of the nuclei, augmenting its activity or destroying it according to the length of exposure—that is, the rays kill the spermatozoid, a mass of chromatin, but excite the ovum protected by its protoplasm, and cause parthenogenesis.

They do not seem to have a specific action on definite tissues. They act on the ectoderm of tadpoles and on the endoderm of gastrulæ of sea-urchins, probably because the cells are in a state of evolution and differentiation. In man the skin, which is always being renewed, is attacked, not the muscle.

The causes of these remarkable changes in normal and pathological tissues are not fully ascertained. Whether they be caused by ultra-violet light rays, by Roentgen or Becquerel rays, there is always a primary cell degeneration, followed by secondary inflammatory reaction. Professor O. Giesel states that paper in which radium preparations have been preserved for a long time becomes brown and brittle, the celluloid loses its solidity, and it is obvious that radium rays cause molecular disturbance. This may explain the results in animal and vegetable tissues.

G. Schwarz has made some experiments which show that the rays have a special effect on lecithin. He fixed a capsule containing 2 cg. radium on the shell of a fresh egg of a fowl for 144 hours in a dark protected place. The surface of the shell became brown in colour, but there was neither coagulation nor gelatinisation of the egg white. The yolk, however, became greenish-grey in a limited area, and more rigid, and had a peculiar taste and odour; the embryo did not develop.

The rays seemed to decolorise the organic body lutein both in the absence and presence of oxygen. The odour and taste of the altered and putrefied yolk was due to the decomposition of lecithin setting free trimethylamin. The importance of this action on lecithin is wide-reaching, for this substance is found in all rapidly-growing tissues, normal and pathological.

THE EMISSION OF BLONDLOT RAYS BY NERVE CENTRES.

PROFESSOR A. CHARPENTIER has continued his researches on the emission of n or Blondlot rays by active nerve tissue. The nerves and muscles of the lower animals emit n rays even more actively than those of man. The frog serves admirably to demonstrate the fact. Its temperature at this season can be kept considerably lower than the room temperature, and even then the general laws of the emission of n rays are not modified. The n rays and all similar rays emitted during physiological action act on all phosphorescent bodies. They increase even the luminence of the noctiluca and phosphorescent bacilli, such as photobacterium phosphorescens. Speaking generally, solids subjected to mechanical pressure generally emit n rays. A tendon—tendo Achillis, for example—does not cause any increase in luminosity of the test object when its attached muscle contracts. The points of insertion of the tendon, however, and the bony points of attachment of the tendon do emit rays copiously during muscular activity, which subjects them to tension and pressure. The tendons themselves contain few nerves, while the points referred to contain many nerve endings, and their presence seems to explain the emission of radiations. Compression of a nerve considerably increases its power of brightening luminosity, both above and below the point compressed. If the compression is prolonged the radiation from the nerve diminishes. Perhaps the most interesting observation is the physiological emission of n rays by the nerve centres. The whole spinal cord increases the phosphorescence of the test object, and the effect is greater opposite the cervical and lumbar enlargements of the cord. If the person examined contracts his arm the effect is expressed in greater activity of radiation of n rays in the cervical enlargement of the cord. It increases also from the cord to the brain. If the muscles of one arm only are contracted the illumination is increased most on the same side of the cervical enlargement, and higher up the effect can be traced on the opposite side, where the nerve impulses cross. To study these radiations

straight tubes of lead 5 to 10 cm. in length are used. One end is applied over the nerve centre; the other end contains a small piece of wood or card covered with a phosphorescent sulphide. M. Charpentier was able even to localise the so-called "motor centres" of the cerebrum by the rays emitted when they are called into action. Even the centre for speech in the region of the third left frontal convolution was found to emit more *n* rays when the person spoke either in a high or a low voice. In right-handed people there was no corresponding action of the right frontal convolution. It seems that even the act of attention or mental effort is attended by the emission of rays which increase the phosphorescence. Other centres, for writing, movements of arms, and sensory nerves behave similarly. Thus it would appear that all nerve centres in action give off more *n* rays than during repose.—*British Medical Journal*, January 16th.

HELLEBORUS NIGER POISONING.

THE following appeared in the *Medical Press* of January 6th :—

A CASE OF HELLEBORE POISONING.

A good deal of scientific interest is attached to the case of an old army pensioner named Davis at Sackville College, East Grinstead. An inquest was held on December 22nd last by Mr. G. V. Benson, the East Sussex coroner, and resulted in a verdict of accidental death through poisoning by *Hellebore*. Deceased was suffering from pains in the stomach and went to his room with the intention of taking some liquorice powder. Half an hour later—at seven in the evening—he returned saying he had taken *Hellebore* in mistake for liquorice powder. He then went to a chemist, whose shop he reached about 7.30. He was advised to go to a doctor, and walked away looking "as if nothing were the matter with him." Shortly afterwards he was found in a helpless condition in the road and taken home, where, after violent pain and convulsion, he died at a quarter-past eight. Unfortunately medical aid was not available. In October last deceased bought the *Hellebore* at a local chemist's for the purpose of making an ointment to allay an irritation of the skin. The *Hellebore*, liquorice powder, and some Epsom salts were kept together in a tin. Black hellebore or Christmas rose is used by horticulturists as a vermifuge and insect killer. Although so deadly a poison it is not on the schedule, and the chemist who sold the drug acted

in a praiseworthy manner in entering the sale in his poison book. His wisdom in selling the *Hellebore*, however, may be called in question, as well as the casual way in which the old man was referred to a doctor on stating his mistake. Poisoning by *Hellebore* is extremely rare, so that the data of the above case will be of value to toxicologists.

In the next issue appeared an additional note on poisoning by *Helleborus Niger* :—

POISONING BY BLACK HELLEBORE.

By JOHN C. THOROWGOOD, M.D., F.R.C.P.

Interest attaches to the Black Hellebore as being the first recorded purgative. Melampus, 1400 years B.C., is said by its use to have cured the daughters of Prætus of madness.

As an emmenagogue and purgative the tincture of *Hellebore* has often been used in past years, and this tincture found a place in the last issue of the London *Pharmacopœia*, the dose being 30 to 60 minims.

Morgagni has recorded a case where half a drachm of the extract was taken, causing death in sixteen hours. The patient, a man æt. 50, had been under treatment for melancholia, and on departure from the hospital he took half a drachm of extract of *Hellebore*. Active purgation with vomiting and abdominal pain came on somewhat later; he then laid down for a few hours and died quietly.

The *post-mortem* showed some amount of inflammation of stomach and intestine, the spleen was large and very soft, and the gall-bladder full of green bile.

The fatal result was attributed to the patient not having drunk freely of whey, a precaution it was customary to advise for all who took the *Hellebore*. There is also a record of two persons who took *Hellebore* root in cyder by the advice of a quack. Three-quarters of an hour after taking this dose violent symptoms came on without exciting suspicion as to the cause, so that one man took a second dose of the cyder; vomiting, delirium, convulsions and death soon followed. The *post-mortem*, sixteen hours after death, showed the lungs engorged with blood and the mucous membrane of the stomach and intestines blackish and almost in a state of gangrene.

These cases were communicated many years ago by M. Ferary to the Société Médicale d'Emulation at Paris.

KÖPLIK'S SPOTS IN MEASLES. *

MEASLES is a disease to which the public are apt to attach but scant importance. It is exceedingly common and widely distributed; generally of mild and of low fatality. Almost everybody has had measles in childhood, and most people regard it as one of the inevitable incidents of the early years of life. To them it ranks with teething and vaccination as one of the drawbacks to the pleasure of having children. And yet measles demands an annual toll of human life as great as all the scheduled dangerous infectious diseases put together. The promoters of Public Health Acts did not urge its inclusion among the compulsory notifiable diseases, presumably because of the hopelessness of taking any steps to limit its spread, although the mere fact of making it notifiable would have had a considerable influence in drawing attention to its being something far more serious than a mere puerile ailment. But the disease has proved so refractory to preventive measures that one large town, in which compulsory notification had been in force for some years by special order, decided the other day that the amount of good that resulted from notification was so problematical that they withdrew the obligation to notify. Now, in what does this difficulty in dealing with measles consist? There are two contributory factors. One is the extremely generalised character of the influences that tend to produce the disease in individuals, and the other is the difficulty of early diagnosis. The first of these is beyond our ken at present, but to the second we would like to direct attention. The first symptoms of measles are no more than those of a feverish cold—a little bronchial, nasal, and conjunctival catarrh accompanied by pyrexia. Unless he has particular reason to suspect measles, the practitioner hesitates to turn the house upside down and isolate every case of febrile catarrh that he is called on to attend; such a procedure causes great domestic upset, and does not tend to enhance his reputation when it turns out (as it frequently does) that his suspicions are unfounded. The usual plan is to wait till the fourth day to see if a rash appears, though if it does it generally happens that the harm has been done, and the other children in the house have been infected. The early diagnosis of measles, then, is a great *desideratum*. It seems curious in this connection that the lesions of the buccal mucous membrane known as Köplik's spots should not have received wider recognition than has been accorded to them. These spots were first definitely described by Filatow in 1895, although it is possible that Flindt may have indicated the same changes in his paper pub-

* *Medical Press*, January 20, 1904.

lished in 1880. The subject was not taken up till 1896, when Köplik, of New York, wrote in the *Archives of Pediatrics*, an account of them, which differed somewhat from that of Filatow, but was undoubtedly intended to apply to the same lesions. At all events Köplik's name came to be associated with the discovery, and for good or evil Köplik's spots seem likely to take rank with other eponymous pathological phenomena in the nomenclature of the future. These spots are described by different observers as white, bluish-white, and bright red, the truth seeming to be that they are all three colours at different stages; red at first, then white with a red areola around, and finally bluish-white in the centre, while in the periphery, and surrounded by a ring of injected mucous membrane. As to their site there is no dispute. Most commonly they are found in the buccal mucous membrane opposite the molar teeth, but they may also occur in the inside of the lips and on the palate. The area they cover varies from a mere point to the size of a silver penny-piece. Now the important clinical point with regard to these spots is that they appear, as a rule, within twenty-four hours of the initial catarrhal symptoms, and thus are visible two, three, and sometimes four days before the appearance of the rash. They are peculiar to measles; they are not found in scarlet fever, röheln, or any other disease. They are characteristic in appearance and position; they can be easily differentiated from thrush, stomatitis and adherent milk-curd. Here, then we have a most valuable means for aiding early diagnosis. Observers who have systematically watched for these spots have seen them in 90 to 100 per cent. of the cases that subsequently proved to be measles, and this has been the case in England, America, Germany, and Austria. The latest to publish his results, M. Marvesse, in *Die Heilkunde*, discovered them in forty-five out of forty-eight consecutive cases, and this is rather below than above the average of previous observers. We think that this clinical phenomenon cannot be too widely known, for its early recognition may save many a case from the personal infection of measles. It certainly adds a weapon of great power to the practitioner's armamentarium, a weapon that has been sadly needed in the past.

A CASE OF PLAGUE.

By DR. HEM CHANDRA RAY CHAUDHURI, L.M.S.

ON the 27th of March, 1903, I was called to assist Dr. M. L. Jelovitz in a case of convulsions with suspicious symptoms of bubonic plague. Previous to this occurrence two other cases

of bubonic plague had happened among the servants in the same house, of whom two were known to have died.

The patient was a Parsi girl, aged about $2\frac{1}{2}$ years. She was apparently all right till the morning of the 25th March, when she had her usual bath. Since then she felt a kind of lassitude which prevented her from moving about in the house. Her usual habit was to go several times to her grandfather and ask for lozenges. During the day she kept rather quiet, and was dull. In the evening she vomited twice, and the fever appeared at about 8 p.m. She had a dose of *Cham.* 6 during the night. The convulsions came in from the early morning of this day.

The convulsions were terrible and almost unceasing. The application of the ice bag to the head diminished the violence to a slight extent. The fever was very high. It was more than 105° F. Three small inguinal glands could be felt on the left side. *Aco.* 1 and *Bell.* 6 in alternation, every two hours, three doses each.

It should be noticed that one of her sisters had that kind of frightful convulsions last year, which ended her life. She was under the old-school treatment of reputed physicians.

At about 10 a.m. the ice-sheet packing was resorted to for twenty minutes. It reduced the temperature one degree, and the number of the pulse beats, as well as the violence of the convulsions. After an hour the temperature again increased to 105.6° F., but not the convulsions. At about 12 noon the ice-sheet packing was again applied for half an hour. This time the temperature did not sensibly diminish, though the convulsions became less forcible. They ceased from 3 p.m. *Aco.* 1, three doses, and *Placebo pills.*

March 28th. From early morning a bubo on the right inguinal region was perceptible. The three small inguinal glands on the left disappeared. The range of the temperature during the day was from 105.6 . *Bell.* 6, two doses, and afterwards *Bell.* 30, three doses.

In the evening she was in the same state. *Gels.* 1, every two hours, four doses, and *Placebo pills.* From our previous experience we applied hot bags of common salt over the bubo. It was curious that the half-unconscious girl did not feel any unpleasant sensation from the application. She only shrank a little when the bag was very hot.

29th. In the morning the temperature was 103 F., but it soon rose to 105 . *Loimine* 30 did not produce any sensible effect. The bubo was more than two inches in length. The application of the hot salt bag was maintained. In the evening *Merc. viv.* 12, three doses, were administered. It reduced the temperature to 103.6 , but later on at night the fever rose to 105 .

30th. The temperature came down to 101·6 in the morning. *Ars. 24*, three doses, were given. At about 10 a.m. the temperature rose to 104. The hot salt bag was applied as before.

In the afternoon *Merc. viv. 12*, three doses, were administered. The temperature came down to 101, the bubo seemed to be in the same state.

31st. The morning temperature was 99·6. *Ars. 24*, two doses, were again given. In the afternoon the fever rose to 105. *Nux 30*, two doses. The bubo was perceptibly smaller. The hot salt bag was applied at long intervals. During the day and night the child was placed under an electric punkha.

April 1st. The temperature again rose to 103. Ascribing the rise to the electric punkha it was stopped from that day till her full recovery. *Merc. viv. 12*, three doses. Suppuration was not at all perceptible in the bubo. *Placebo pills* at night.

2nd. The temperature ranged during the day between 103 and 104, the right inguinal bubo was more perceptible externally. *Chin. 1* every three hours.

3rd. Morning temperature 98·6. In the evening the fever was up to 99·4 for a short time and again reverted to 98·4. *Chin. 1* every four hours, four doses. It was the eighth day of the fever; from this day the child was fully conscious, the vacant look disappeared, the bubo was much reduced in size.

4th. The temperature was 98·4 during the day and night. *Chin. 1*, three doses.

The bubo did not subside as it was expected, though several other medicines were given. It suppurated, and was operated by Dr. Jelovitz on the 7th April. Under *Sil. 12* the wound healed up.

REMARKS.

The marked feature in this case was the attack of bubonic plague commencing with terrible convulsions. *Loimine* had no effect whatever. The action of *Merc. viv.* was marked on the fever, but its effect was not durable. *Chin.* was selected owing to our previous experience on account of the sweat on the covered parts. The application of the warm salt bag alone had produced marvellous effect in many cases of bubonic plague where the fever was not high. Last, not least, was the soothing influence of the ice-sheet packing, which was a relief to the girl during convulsion. It cannot be said that the ice bag to the head had not its beneficial influence; the curious fact is that, though the ice-sheet packing at first reduced the temperature, the effect was not lasting. The second application had no influence on the temperature. During the illness of the girl another case of bubonic plague occurred in the house among the servants, who died after removal from the house.

The dilutions of the medicines used were all in the decimal scale, except those marked 30, which were in the centesimal scale.—*Calcutta Journal of Medicine*, July, 1903.

THE THERAPEUTIC AND DIAGNOSTIC VALUE OF TUBERCULIN.*

ADLER gave a long account of his experience in tuberculosis with "Tuberculinum *versus* Koch." During the past year he had treated twenty cases with it, but admitted that in its use a few precautions were necessary, and he gave an example of a female, *æt.* 43, who had suffered for fourteen years from severe hemorrhages arising from bronchial catarrh, which finally would not heal. Having first seen it at this stage, he found infiltration of the right upper lobe with fever, night-sweats, uncontrollable cough, and offensive sputum, in which were found tubercle bacilli. The breathing and palpitation were very troublesome, while her weight had rapidly diminished. After a short confinement to bed the first dose of tuberculin was given, it being 0.0001, and the treatment repeated for nineteen weeks, during which time 13 grammes of the tuberculin had been injected, the six last doses being 1 gramme each. After a few weeks from the beginning of the treatment the patient gradually improved till finally there was only a little dulness over the right apex without any vesicular râles being observed. All subjective symptoms had disappeared, her former weight had been restored, cough *nil*, and in every respect she felt perfectly well.

Three months later, however, the pause was disturbed by a repetition of the phenomena which have just been described. The same treatment was repeated, but fever being present some time had to elapse in bed before commencing the injections.

The first dose was commenced with 0.00001 gramme, gradually increasing to 0.00005 gramme.

He is inclined to believe that considerable judgment must be exercised in the quantity prescribed under different conditions. This, he tells us, was the reason of reducing the quantity from 0.0001 gramme. The first six weeks one injection was given weekly, but never before the reaction of the former injection had disappeared. The temperature usually rose to 37.4 Centigrade, with headache, uneasiness and loss of appetite, although sometimes it was much higher with the increase of the dose. The greatest dose injected on this occasion was 1 gramme. The local reaction was confined to the points of injection over

* *Medical Press* (Vienna Letter), October 7th.

the extensors of the forearm. This varied from a slight reddening to phlegmonous swelling leaving tubercles behind, which would persist for some time. The patient can be allowed to move about when this treatment is proceeding if the doses administered be small, and the subject confined to bed the following day.

REVIEWS.

LECTURES IN PHYSIOLOGY*.

DR. BIGLER is Professor of Physiology and Pediatrics, of Hahnemann Medical College, Philadelphia. He dedicates the work to "My Students—Past, Present and Future." The view taken by the author is the right one, namely, that it is the business of a teacher of physiology not to make scientists of his students, but to provide them with such physiological knowledge as shall give them a good foundation for future medical studies. The object of the present book is to furnish the student with a guide "by which he can with the least expenditure of time and energy review the subject, and fix on his memory its salient points in a form most easily recalled." We heartily congratulate Dr. Bigler on the successful manner in which he has carried out his aims. He has done more than provide a "syllabus"—he has given us a text-book of physiology with all the convenience of syllabus-arrangement, and he has actually made it readable and interesting.

PATHOGENIC MICROBES.†

THIS is the English translation of the excellent brochure by Dr. P. Jousset which we reviewed in the

* *Syllabus of Lectures on Physiology.* By William H. Bigler, M.D. 2nd edition revised and enlarged. Philadelphia: Boericke and Tafel. London: Homeopathic Publishing Co. 1903. Pp. 205. Flexible. Price 6s. 6d., or interleaved 7s. 6d.

† *The Pathogenic Microbes.* By Dr. P. Jousset. Translated by Horace P. Holmes, M.D. Philadelphia: Boericke and Tafel. London: Homeopathic Publishing Co., 12, Warwick Lane, E.C., 1903. Cloth, pp. 192. Price 5s.

Homeopathic World in March, 1902. We are very glad to see this important contribution to micro-biology in an English dress.

WHO'S WHO, 1904, AND
WHO'S WHO YEAR-BOOK, 1904.*

THAT indispensable compendium of national contemporary biography, *Who's Who*, grows steadily in bulk from year to year. We are not sure whether this means that the country is growing yearly richer in notable personalities, or that a larger proportion of notables are discovered every year. This year's issue of *Who's Who* contains over 17,000 biographies; which may be almost regarded as autobiographies, since "every biography is submitted for personal revision." With *Who's Who* is incorporated *Men and Women of the Time*.

Of the origin and scope of *Who's Who Year-Book* the publishers give the following account:—

"In response to numerous suggestions and requests, we have decided to issue in book form, under the title of the *Who's Who Year-Book*, the tables which were formerly incorporated in *Who's Who*, and which have been deleted from time to time in order to make room for the ever-increasing number of biographies. Those who have already made acquaintance with the tables will not need to be reminded that the information is given entirely in tabular form, and is therefore much more readily accessible than when embedded in masses of matter as in some of the already existing year-books."

The *Year-Book* contains all that any one ordinarily wants of the information found in the various year-books; Parliamentary Annuals; the Foreign Office, Colonial, and Indian Lists; besides including much miscellaneous information usually only to be gathered from very many different sources. Among the contents are tables of Pseudonyms, Peculiarly Pronounced Proper Names, Professors, Societies, Academic Degrees, Government Officials, and many others. The book, in short, combines in itself the gist of the information given in many other publications.

* *Who's Who*, 1904. London: A. and C. Black, Soho Square. Price, cloth, 7s. 6d. net. Full limp leather, gilt edges, round corners, 10s. net. *Who's Who Year-Book*, 1904. London: A. and C. Black. Price 1s. net.

THE ENGLISHWOMAN'S YEAR-BOOK, 1904.*

THE present issue of the *Englishwoman's Year-Book* is the twenty-fourth of the series. It now runs to 352 pages and covers the greater part of the ground of women's activities in this the opening of the twentieth century. The editor says of the work, "It aims at giving some idea of the extent of women's work and interests, and giving guidance to those who want to help their fellow creatures, whether as individuals they live lives of which their own home is the centre, or take a wider view of their opportunities and responsibilities." The *Year-Book* is a striking evidence of the advance that has been made during the last quarter of a century in popular ideas about the sphere of woman's activities. It is also an excellent means of fostering the advance.

FIRST AID.†

THIS is a thoroughly serviceable and handy guide to the subject it treats of. It contains information which every intelligent and well-educated person ought to possess, and all in the space of an ordinary pocket-book. It ought to sell by the million.

RATIONALISM AND MEDICINE.‡

THIS interesting pamphlet constituted the presidential address delivered before the Liverpool Branch of the British Homeopathic Society. It is reprinted from *The Journal of the British Homeopathic Society*, January, 1904. It is an eloquent plea for the supreme authority of reason on all questions of science.

* *The Englishwoman's Year-Book*, 1904. Edited by Emily Janes. Twenty-fourth year. London: Adam and Charles Black, Soho Square, W.C. Cloth, 1s. 6d. net.

† *First Aid in Accidents*. By R. J. Collie, M.D., and C. F. Wightman, F.R.C.S. London: George Gill and Sons, Ltd., 13, Warwick Lane, E.C. Price 6d. net.

‡ *Rationalism and Medicine*. By Charles W. Hayward, Barrister-at-Law, M.D., C.M. Edin., D.P.H. Camb., M.R.C.S. Eng., L.R.C.P. Lond.

VARIETIES.

FATAL EFFECTS OF VERY SMALL DOSES.—Some years ago Dr. Andrew Balfour, now director of the Wellcome Research Laboratories of the Gordon Memorial College, Khartoum, Egypt, made some investigations into the toxic properties of dye stuffs, and found that methylene blue and chrysoidine, in particular, were fatal to fishes in very small quantities. Fishes placed in a solution of chrysoidine, 1 to 500,000, were speedily killed, and were found post-mortem to be stained through and through, the brain and spinal cord being most deeply coloured.—*N. A. J. H.*

KÖPLIK'S SPOTS IN MEASLES AS AN EARLY DIAGNOSTIC MEASURE.—Dr. Monrad, of Copenhagen, at a recent meeting of the medical society of that city, reported his experience with this sign in the diagnosis of measles before the eruption would appear. He examined seventy-three children, and in forty-three (60 per cent.) he detected the characteristic appearance of the mucous membrane of the mouth. *He held it to be pathognomonic of measles.* There have been writers who have examined tens of thousands of children with all possible diseases, and neither in scarlatina, grippe, smallpox, exanthematic typhus, septic nor serum-exanthems was it noted. Köplik's spots were only found in measles. Only one writer, Widowitz, of Graz, Austria, claimed to have observed them in rubeola—in ten out of 135 cases. Monrad has never seen them in this disease. In the greater number of the cases he noticed them from twenty-four to forty-eight hours before the appearance of the eruption. In ten of his cases they were the only sign of measles, thereby enabling one to isolate the patient, a fact of importance in children's asylums and hospitals. These spots are found on the mucous membrane of the cheeks and lips. In the beginning there are small, vivid red spots, in whose centre there is a whitish or greyish-white point which projects above the mucous surface, and which may be better felt than seen. They are found in groups of a few to several. If very prominent, the whole vividly red mucous membrane seems to be strewn over with fine sand. Though the hyperemic areas may run together, yet the whitish spots never confluence to form a false membrane. At first hardly to be rubbed off with the finger, later they are easily removed without bleeding or injury of the mucosa. Very careful inspection by daylight or electric light is necessary to find the spots at first. He thinks it well worth the trouble to look for them where measles is suspected.—*Hospitalstidende*, No. 29, 1903 (Frank H. Pritchard, M.D., in *Hahn. Monthly*).

A CASE OF RECURRENT VARIOLOID RASH FOLLOWING VACCINATION.—R. W. C. Pierce reports an interesting and very puzzling case of eruption following vaccination. The subject was a boy of fifteen, who was vaccinated on December 5, 1901, along with a large number of other boys in the same school. One other boy was vaccinated with lymph from the same tube, yet no other similar case devolved. The vaccination was successful, and on returning home, on December 18th, he became ill with the mumps. On December 24th, or nineteen days after the vaccination, he had what was considered to be a typical attack of smallpox. He returned to school on February 22, 1902,

quite well, but on March 4th became again ill, this time with what was diagnosed by four experienced physicians as varioloid, because of the typical character and distribution of the lesions. By April 1st all of the pocks had "peeled" out, and he was discharged. As the boy had travelled about a good deal, and several cases of smallpox of unknown origin had appeared in neighbouring towns, the possibility of exposure to infection could not be completely excluded. On the other hand, against the authority of this being varioloid, were the facts that he had been ill two months before with what was taken to be smallpox, and had been successfully vaccinated three months previously. Apparently the two illnesses were identical. The case differed from the recorded ones of generalised vaccina in that there was no recrudescence at or near the site of the original vesicles, and that the rash did not appear until nearly three weeks after vaccination. The behaviour of the mother's vaccination points to an unusual family receptivity. The author suggests that the case may have an interesting bearing on the connection between variola and vaccina.—*American Medicine*, August 8, 1903 (William F. Baker, A.M., M.D., in *Hahn. Monthly*).

A COLCHICINE FATALITY.—Colchicine has become so popular a remedy in the treatment of rheumatism and gout that it is interesting to know that a maximum medicinal dose may be followed by serious—the most serious results. The following case reported to the *Société Médicale des Hôpitaux* is instructive.

A wine merchant, forty-three years of age, with fair history as regards health, though a heavy drinker up to three years ago, when an interstitial nephritis had been discovered, had suffered recently from gout. During his last attack his physician had prescribed 8 capsules of colchicine per day, each capsule containing a quarter of a milligram (approximately, $\frac{1}{10}$ gr.) of colchicine and 20 centigrams ($\frac{1}{2}$ gr.) of methyl salicylate. As patients will do, to expedite his cure he took in one hour's time 12 of these capsules. This was in the evening. He fell into a sound sleep, possibly a coma, waking in the morning in a state of extreme prostration, and vomiting blood-stained mucus. There was no pain either in head or abdomen. The stools were black with blood, and the urine red from the same cause; but during the five days of malaise and torpor, which elapsed before the patient entered the hospital, there was at no time the diarrhea or purging that might have been expected. The patient died on the tenth day after having shown some slight change for the better on the ninth.

Three milligrams of colchicine, only about $\frac{1}{10}$ gr., had apparently caused death, but in this case, of course, the pre-existing nephritis must be remembered. The autopsy revealed a general visceral congestion, especially marked in stomach and intestines, with bloody extravasations and a double nephritis, the left kidney cystic and reduced to a mere shell, the right kidney not much better. Colchicine had been found in the urine up to the tenth day, the day of death, and here we have the explanation of the slow elimination.

Let us be sure of our patients' kidneys before we venture to use any of these pretty colchicine pearls, or even the stronger alcoholic solutions of this valuable alkaloid.—*Hahn. Monthly*.

SCOPOLIA CARNIOLICA IN THE TREATMENT OF TREMOR IN PARALYSIS AGITANS.—Dr. Von. Ketley, of Budapest, advises (*Muench. Med.*

Woch., Nov. 15, 1903), in treating the obstinate trembling of paralysis agitans, the administration of the root of *scopolia carniolica*. This drug contains hyoscyamin and hyoscin, as well as scopolamin, and even if used for a long time does not cause any untoward effects. The tremor is usually rapidly and very considerably gotten under control, and in some cases may wholly disappear. The dose is 0.3 to 0.4 [gramme?] per diem, given in one dose in the powdered root.—*Medical Times*.

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MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Barlow (Walter Sydney Lazarus). A Manual of General or Experimental Pathology for Students and Practitioners. 2nd ed. Roy. 8vo, pp. 748. (Churchill. Net, 21s.)
- Brundage (A. H.). A Manual of Toxicology. 3rd ed. 12mo. (Baillière. Net, 6d.)
- Caspar (L.) and Others. Functional Diagnosis of Kidney Disease. Cr. 8vo. (Rebman. Net, 7s.)
- Davison (A.). Manubrian Anatomy. With Special Reference to the Cat. 8vo. (Rebman. Net, 7s.)
- Francis (Alexander). Asthma in Relation to the Nose. With Notes of 402 Cases. 8vo, pp. 140. (Adlard. Net, 5s.)
- Hansell (H. F.) and Others. Text-Book of Diseases of the Eye. 8vo. (Rebman. Net, 17s.)
- Jacobs (T.). Permanent Cure for Stuttering. Cr. 8vo. (Schloss Mayenfels, Pratzeln. Net, 5s.)
- Martin (Sidney). A Manual of General Pathology for Students. Illust. 8vo, pp. 522. (J. Murray. Net, 15s.)
- Medical Directory (The), 1904. 8vo. (Churchill. 14s.)
- Rabagliati (A.). Air, Food, and Exercises. An Essay on the Predisposing Causes of Disease. 3rd ed., greatly Enlarged and almost Entirely Re-written. 8vo, pp. 592. (Baillière. Net, 7s. 6d.)
- Rentoul (Robert Reid). Proposed Sterilisation of Certain Mental and Physical Degenerates. An Appeal to Asylum Managers and Others. 8vo, pp. v-26. (W. Scott. Net, 1s.)
- Sawyer (James). Insomnia: Its Cause and Cure. Cr. 8vo, pp. 66. (Simpkin. Net, 1s. 3d.)
- Scudder (Charles Locke). The Treatment of Fractures. With Notes upon a few Common Dislocations. 4th ed., thoroughly revised. Illust. Roy. 8vo, pp. 534. (Saunders. Net, 21s.)
- Smith (E. Noble). The Management of Lateral Curvature of the Spine, Stooping and Other Development of the Chest in Phthisis. Cr. 8vo, pp. 142. (Smith, Elder. 2s. 6d.)
- Spalholz (W.) and Others. Hand Atlas of Human Anatomy. Vol. 3. Roy. 8vo. (Williams & Norgate. Net, 22s. 6d.)
- Thomson (Alexis) and Miles (Alexander). Manual of Surgery. Vol. 1. Illust. Cr. 8vo, pp. 794. (Pentland. Net, 10s. 6d.)
- Transactions of the Pathological Society. Vol. 54. 8vo. (Smith, Elder. 25s. Ditto, Part 3. 7s.)

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.*; after Mar. 24, 8, *Bolton Street, Piccadilly, W.*

Letters to the Editor requiring personal reply should be accompanied by stamped directed envelope.

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.

Dr. Burford, London.—Dr. B. W. Nankivell, Bournemouth.—Dr. Colthurst, London.—Mr. C. W. A. Stewart, London.—Mr. Frederick King, London.—Dr. Dyce Brown, London.—Mr. Erskine White Holdsworth, N.S.W.

BOOKS AND JOURNALS RECEIVED.

Hom. Review.—Zoophilist.—Mind.—Revist. Hom.—Calcutta J. of Med.—Med. Times.—Allg. Hom. Zeit.—H. Monatsblätter.—The Chironian—La Propaganda Homeopatica.—Maanedsk. f. H.—H. Maandblad.—La Homeopatia.—Ind. Hom. Rev.—Hom. Envoy.—The Individualist.—Medical Century.—Rev. Hom. Française.—H. Recorder.—Wjestnik H. Med.—N.A.J. of H.—Clinique.—New Eng. Med. Gaz.—L'Art Médical.—Jour.

Belge d'H.—Zeit. Berl. V. h. A.—Amer. Med. Monthly.—H. J. Obst.—Jour. B.H.S.—Med. Adv.—Annaes de Med. Hom.—Lo Nuevo.—Amer. Phys.—Hom. Eye, Ear, and Throat J.—Hahnemannian Mon.—Pacif. Coast Journal of H.—Bournemouth Guardian.—Philanthropist.—Pathogenic Microbes, by Dr. P. Jousset, translated by Dr. Horace P. Holmes.—Vivisection, by Edward Carpenter.—Are we to have a United Medical Profession? Dr. Charles S. Mack.—Who's Who, 1904.—Who's Who Year-Book, 1904.—The Englishwoman's Year-Book, 1904.—Report Hahnemann Convalescent Home and Dispensaries, Bournemouth.

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HOMEOPATHIC WORLD.

APRIL 2, 1904.

THE EDITOR TALKS ABOUT THE BURNETT
FUND.

FOR once in a way the Editor of this journal will step out of his chair and talk to his readers *in propria persona*. With this month's issue the HOMEOPATHIC WORLD has completed nineteen years under its present editorship, the first number appearing under my name being that for May, 1885. I do not think I have unduly worried my readers with appeals—certainly not personal ones—during the past nineteen years; but I am going to make one now.

I need not remind my readers that I have undertaken the responsibility of raising a sum of £2,000 to found a professorship in connection with the British Homeopathic Association in memory of Dr. JAMES COMPTON BURNETT. The first subscription list, including the proceeds of Mrs. CLARKE'S Silver Sale, amounted to £470. Since the publication of the *Life of Dr. Burnett* subscriptions and promises amounting to about £70 (including a promise of £50 from an enthusiastic representative of an enthusiastic homeopathic family, Mr. MAZZINI STUART) have been received, bringing the present total to £540. But it will be seen that a goodly sum remains still to be secured. The appeal I am now making to my readers is to help me to raise it as speedily as possible. If this could be achieved by my twentieth editorial birthday—or even

my twenty-first—I should feel that the labours of the two latest editors of the HOMEOPATHIC WORLD have not been unappreciated by their constituency.

This appeal should come home to readers of the HOMEOPATHIC WORLD. There must be many among its present *clientèle* who have enjoyed the vigorous editorials and clinical acumen of Dr. BURNETT himself in the days of his editorship. And those whose acquaintance with the WORLD is of more recent date have at any rate entered into traditions he created.

Please let it be understood that I am not asking my readers to put any great tax on their resources. Any donation, however small, will be welcomed; and if readers like to give on a sort of “*Times System*” of deferred payments the Fund will gratefully accept any arrangement that suits the donor’s convenience. If any readers would like to make collections among their friends and acquaintances of unconsidered shillings or half-crowns, the Fund will undertake to supply them with collecting cards on which to enter the same, if they will send their names to Mrs. HELEN CLARKE, 8, Bolton Street, London, W., who acts as Honorary Secretary to the Fund on behalf of the British Homeopathic Association.

Among Dr. BURNETT’s colleagues, at home and abroad, I hope this appeal will meet with sympathetic response. They should note that the money subscribed is not to be spent on any personal object; it is to be devoted to the spread of therapeutic enlightenment—to the furtherance of the object for which every homeopathic medical man devotes the best energies of his life. There are thousands of medical men at home and abroad who have profited by Dr. BURNETT’s writings, and I ask them to join in the effort that is being made to honour his name and advance the principles for which he spent his life.

Great Britain has not yet done anything like its proper share in advancing the cause of therapeutic progress. Thanks to the British Homeopathic Association it is now

shaking off its long lethargy, and is preparing to take its proper place in the advancing line. The Burnett Memorial will be devoted to one part of the Association's work, and with the raising of the fund for this object the HOMEOPATHIC WORLD—Dr. BURNETT's own Journal—is identified in a peculiar way. I shall take it as a mark of personal confidence in myself, as their servant, if my readers respond heartily to this appeal. And I hope that no one—in whatsoever part of the globe the HOMEOPATHIC WORLD may find him—will think himself too remote for his help to be of any consequence. In the Colonies, in the United States, on the Continent in Europe, Dr. BURNETT has numberless admirers. They have now an opportunity of giving practical effect to their sentiments.

The HOMEOPATHIC WORLD is now in the thirty-ninth year of its existence. It occupies a somewhat unique position among homeopathic journals in that it serves both flanks of the homeopathic army—the medical and the lay. The Editors of the HOMEOPATHIC WORLD have always recognised that the furtherance of homeopathic interests requires that the profession and the laity should work together. The homeopathic doctor depends for his support on the intelligent and independent classes of the public. With the allopathic body it is just the other way—ignorance is their greatest vested interest. They are compelled by instincts of self-preservation to keep both themselves and, as far as they possibly can, the public also ignorant of Hahnemann's great discoveries.

But although the HOMEOPATHIC WORLD has steadily maintained the interests of the homeopathic profession and the homeopathic laity alike, it has not been unfruitful in works which appeal mainly to the profession. To the HOMEOPATHIC WORLD and the facilities it has given me, during the past nineteen years, of keeping in touch with all that has been going on in homeopathic practice and homeopathic literature, I owe it that I have been enabled to produce my *Dictionary of Materia Medica*, and to keep

up to date the *Prescriber*—which also attains its nineteenth birthday in the present year.

I will conclude this digression from the ordinary routine of editorials by inviting my brother editors—in the United States, on the Continent, and elsewhere—to tell their readers what is being done to honour the name of JAMES COMPTON BURNETT, and to invite their participation therein. Subscriptions sent to the Editor or the Publishers of the HOMEOPATHIC WORLD will be gratefully acknowledged in its future numbers. I hope also to be able to chronicle a goodly list of applications for collecting cards.

JOHN HENRY CLARKE.

ELDER FLOWER AS A DIURETIC.—Dr. H. E. Randall draws attention to the usefulness of elder-flower (*sambucus canadensis*) in dropsical conditions. He has found it almost a specific in seven cases. A few years ago he tried nearly everything on a case of *anasarca* with abdominal dropsy. The patient finally asked if elder-flower was good for her condition. She was told that it might increase the flow of urine, but that permanent good was not likely from it. Her friends went to the woods, gathered some of the bark, steeped it, and gave it freely, and the woman got well. Dr. R. has seen it used in several cases with success. Most of the text-books do not mention it at all. The amount of urine passed does not seem to influence the amount of fluid in the tissues. If water is withheld, the patient is as bad as ever when fluid is retaken.

According to the author, fluid extract of *sambucus* in $\frac{1}{4}$ - to 1-teaspoonful doses, three or four times a day, comes as near being a specific as anything he has ever tried, whether the dropsy be due to heart, liver, or kidney disease.

Dr. Beverley Robinson says that in some instances elder-flower is more useful and less objectionable than nitro-glycerin and the nitrates. In interstitial nephritis, to diminish excessive arterial tension, accompanied by threatening or annoying symptoms, an infusion or decoction of the bark seems preferable to the fluid extract. In a fair proportion of cases in which the quantity of urine is lessened and the specific gravity low, elder-flower increases both with advantage to the patient; it wards off menacing uremia, and in a measure removes serous effusions in the cavities and edema of the extremities.

[Why not try it homeopathically?].—*Amer. Phy.*

NEWS AND NOTES.

THE *BRITISH MEDICAL JOURNAL* GIVES A HINT TO THE
B. H. A.

WHEN the editor of the *British Medical Journal* gets into a humorous mood he always reminds us of Milton's funny elephant, who "writhed his lithe proboscis" in the garden of Eden to make our first parents laugh. We have Milton's authority for it that the innocent souls of Adam and Eve were amused, and we suppose the scarcely less innocent members of the British Medical Association are no less amused by the elephantine wit of their editor. We will not trouble our readers with the wit, but the occasion of it supplies a useful illustration of how some well-meaning homeopaths waste their time and their words. This is the kind of reception which awaits the anti-sectarian homeopath who dreads to do anything which allopathic editors may disapprove (*British Medical Journal*, March 5th):—

"SIMILIA SIMILIBUS.

"Homeopathy is a subject which in England, at any rate, is so thoroughly dead that it might safely be buried without fear of rebuke from Mr. Tebb and the Anti-premature Burial Association; nor have we any desire to revive it. Nevertheless, in response to the wish of its American author, we give here the result of a study of a little pamphlet* entitled, *Are we to have a United Medical Profession?* Its main object is to show to the young professed homeopathist how he 'can fight for homeopathy to the death, if need be, and can at the same time pursue rational medicine with an enthusiasm not in the least modified by his enthusiasm over homeopathy.' The means by which this object is to be attained is the narrowing of the issues that lie between rational medicine and homeopathy by defining what the latter really is. Those who hitherto have not admitted the justice of its claims have failed to do so because, we are here told, they have not understood what the principles of homeopathy really are. Among such are notably Drs. Stillè, H. C. Wood, F. W. Headland, and Sir T. Lauder Brunton."

No, Dr. Mack; it is not because allopathic writers and editors have "not understood"; it is because they *are determined not to understand*. There is only one basis of union possible, namely, the resolution on the part

* *Are we to have a United Medical Profession?* By Charles S. Mack, M.D. La Porte, Indiana: Published by the Author. 1904. Pp. 44. 25 cents post paid.

of those who are now ignorant of it, to learn drug-action in its entirety as Hahnemann taught it. Appeals to the charity, broad-mindedness, or other high sentiments, of those to whose interest it is to be ignorant, and talks about "union," are sheer waste of energy. They only provoke funeral sermons and funereal wit. Homeopathy has had so many funeral orations pronounced over it that the thing is becoming monotonous. Still, the B. H. A. may take the hint. Its mission is to make the *electorate* see that it is very much alive, and not trouble itself about the allopathic medical sect. The editor of the *British Medical Journal* knows very well that homeopathy is anything but dead; but it is part of the political game of his journal to affect the other thing. If he really did believe it, why did he boycott a certain *Dictionary of Materia Medica*? The advertisement of a work on a system so dead as all that, could hardly have injured his innocent readers, and it would have swelled the finances of his association. And why does he take such an affectionate interest in the accuracy of the *Homeopathic Directory*? Only the other day the publishers of that work received a polite request from his office to remove the mystic letters "M.B.M.A." from the name of a homeopath who has ceased to honour the British Medical Association by being a member of it.

THE BURNETT FUND.

THE following additional subscriptions have been received by the Hon. Sec. up to March 12th:—

	£.	s.	d.
Union for the Promotion of Homeopathy in the Netherlands	5	0	0
Mrs. A. T. Cook	1	0	0
Dr. E. L. Compston	0	10	6
"Anonymous" (Worthing)	0	5	0
Miss E. A. Leslie'	0	5	0
	<hr/>		
	£7	0	6
	<hr/>		

The gift of £5 from the Netherlands Society is a very interesting and welcome contribution, coming as it does from a sister association to the B. H. A. At the present moment it is Great Britain which has to give the lead to

the Old-World Movement for medical progress, and success in Great Britain will soon be followed by success on the Continent. We are grateful to our Dutch brethren for joining their strength to ours; and we are sure our readers will like to see the letter of the Treasurer which accompanied this donation:—

“ ROTTERDAM, March 9, 1904.

“ To Mrs. Helen Clarke, Hon. Secretary of the Burnett Fund,
London, W.

“ DEAR MADAM,—The Committee of the Union for the Promotion of Homeopathy in the Netherlands, highly appreciating the efforts you are taking on behalf of the Burnett Memorial, both by the ingenious idea of the Silver Sale as in other manner; and responding to the appeal made to all friends of homeopathy to assist in doing honour to one of its brightest representatives, begs to tender you the enclosed small donation, trusting that all who have the benefit of homeopathic treatment will hasten to give you their assistance to this effect.

“ For the Committee,

“ T , Treasurer.”

DR. BURNETT'S PROVINGS.

THOSE who know Dr. Burnett best are well aware that his masterly knowledge of drug-action was not obtained without labour on his part. Dr. Burnett never spared himself. We give in this issue another of his provings—that of *Bellis perennis*, which he introduced to modern practice. It is easy to see, from this remarkable proving, how Dr. Burnett discovered its appropriateness in cases of acne, and also in tumours. The effect of the tincture on the little congenital excrescences was not great, perhaps, but it contained a great practical suggestion for Dr. Burnett. We have in our possession his notes of a “dietetic experiment” made on himself. It is of very great importance, and we hope to give it to our readers shortly.

WATERCRESS (*NASTURTIUM OFFICINALE*) FOR BERI-BERI.

THE following is from the *British Medical Journal* of March 12th:—

“ WATERCRESS IN THE TREATMENT OF BERI-BERI.

“ The Foreign Office has forwarded to us a copy of a dispatch on the subject of beri-beri from H.M. Consul at Noumea, New Caledonia,

together with a comment thereon by Sir Patrick Manson. The Consul reports that 'beri-beri is very prevalent on this island now among the natives of all nationalities working at the mines, but it seems to have been found out quite accidentally that watercress is an almost certain cure. Consequently all the mining companies are cultivating it largely.' In his comment Sir Patrick Manson points out that similar statements as regards the influence of various kinds of food on beri-beri have frequently been made on inadequate experience. It would seem that in the endemic areas many kinds of malnutrition predispose to the disease. It may be that there has been a deficiency of vegetables in the dietary at the mines in New Caledonia predisposing to beri-beri, and that this deficiency has been made good by watercress, but he questions whether this vegetable has any specific action on the germ of the disease in question. Nevertheless the experience seems worth following up. To this comment little need be added. Watercress is easily grown in most places where there is plenty of water, as is the case in the majority of the regions in which beri-beri is endemic, and it is also pleasant to eat. An extensive trial, therefore, of this plant as a remedy for a disease for which no satisfactory treatment is at present known should prove neither difficult nor expensive. There are clear precedents for the specific action of herbal remedies upon parasitic disease in the case of cinchona in malaria and salix nigra in rheumatism, while at one time watercress itself was held in high esteem in domestic medicine as a simple remedy for scrofula, pulmonary phthisis, and scaly eruptions about the body."

This paragraph affords a good example of how medicine is *not* advanced. An observation is made which can easily be verified if true. Instead of attempting to do this, or of seeking to obtain additional evidence as to the observation, an eminent authority "comments" on it, the comments being worse than useless—simply cumbersome, though regarded by the authority and his readers as of much more importance than the actual observation. The *Journal's* timid apologies for venturing to question the eminent authority are not a little amusing. "There are clear precedents for the specific action of herbal remedies upon parasitic diseases." Really! "Precedent," "authority," the medical Mrs. Grundy!—observations of facts loom very small in the presence of these mighty potentates. In fact, a poor, humble herb would hardly venture to cure anything, unless the editor of the *British Medical Journal* would oblige by finding a precedent for it!

BOURNEMOUTH HAHNEMANN HOME BAZAAR.

THE total proceeds of the Oriental Bazaar held in February in aid of the Hahnemann Convalescent Home amounted, we are glad to learn, to over £1,000.

PROVERS WANTED.

WE understand that the Proving Committee of the British Homeopathic Association are taking active steps towards the commencement of re-provings conducted with modern precision. They will be glad to hear of suitable persons willing to co-operate in the carrying out of this work. Communications to be addressed to—

The Secretary, Provings Committee,
British Homeopathic Association,
21, Regent House, 233A, Regent Street, W.

THE *DAILY GRAPHIC* ON PROVINGS.

THE *Daily Graphic* of March 1st devoted a leading article to the subject of "provings." It is interesting to note that the technical words of homeopathy are becoming understood of the people. The writer of the article does not pronounce the word "homeopathy," but he must be acquainted with it, for "proving" has no meaning in this sense apart from homeopathic philosophy. Of course, America did not invent the method: nor are we aware that the labours of the "Austrian Proving Society" were attended with fatal results. However, the article is interesting, and we reproduce it:—

"MEDICAL MARTYRS.

"In this country, when it is desired to ascertain the effects of some untried drug, it is commonly administered to a guinea-pig or a rabbit. In the United States, according to a leading New York newspaper, the practice has become established of administering it to a group of young doctors. Individual experiments of this kind have, of course, been known in every country, but our American friends seem to have organised them on a large scale with characteristic thoroughness. A guinea-pig cannot communicate its sensations, or co-operate in any way, except passively, in an experiment. A dozen young physicians, trained in exact scientific methods of observation, and armed with note-books in which to enumerate their symptoms, are able to supply

valuable data on which to base calculations in practice. Hence the practical American intellect prefers the physician to the guinea-pig, and establishes societies for the purpose of utilising his self-denying and often heroic services to the best advantage. So far, it is said, the tests made have not led to a single death—a more favourable record than that of an Austrian 'proving society,' which had a less felicitous career years ago. From the details given by our American contemporary the system appears to have been worked out very elaborately; but there is a legal side to it all, which, though not dwelt upon at present, would probably become painfully prominent if any of these devotees of medical science were to meet with an untimely end."

WILD GARLIC FOR GOAT TICKS.

THE following is from the *Daily Telegraph* of December 22nd. The botanical name of the "wild garlic" is not given. Possibly it is *Allium ursinum*.

"All who know South Africa are aware how greatly that country suffers from insect pests. Probably no other land is so terribly victimised. Of these foes the tick, which infests sheep, goats, and cattle, is the worst. A well-known Natal farmer is reported to have said, 'If the Government offered me to take away all the diseases, or the ticks, whichever I choose, I would say "Leave the disease and take the ticks."' Hitherto no remedy for this torment has been found, but one is reported in the Cape of Good Hope *Agricultural Journal*—an excellent publication—from Aliwal North. A farmer writes that he had a flock of goats badly infected, but 'happened to drop' on a cure in the shape of wild garlic. He gave the animals affected a small quantity; the ticks were not killed, but they dropped off the goats, and no further loss was suffered. Next year when the tick season came round his goats escaped injury. If this experience be confirmed it will be of high import to all South Africa. The Government of Cape Colony is enforcing additional stringent regulations to prevent the introduction of plant pests. Much is to be hoped from the importation of plants and seeds from other lands, but it is of the utmost moment that the germs of plant diseases shall not be imported with them. Certain plants are prohibited absolutely, among them stone fruits from the United States and Canada, and peaches from any foreign country. New plants are to be examined on landing and disinfected, and everything on which a dangerous pest is found is to be immediately destroyed. Costly experience has proved the necessity of these measures."

A WASP-PROOF MAN.

BEE-STING proof individuals are not uncommonly met with, but we do not remember hearing of a wasp-proof person until we came across the following paragraph in

the *Westminster Gazette* of March 12th. It is taken from an article giving the experiences of a number of auctioneers, related at a meeting of a society of that profession.

“The rostrum of one member was on a certain occasion placed over a wasps' nest. The wasps soon made themselves unpleasantly conspicuous. An adjournment was consequently made to another part of the yard. The wasps, however, were not even yet done with, for one hanger-on in the audience, announcing himself as ‘wasp out proof,’ placed his bare arm in the nest and then walked in and amongst the company with the wasps crawling by the hundred over his arm and face. He then commenced to swallow them *coram populo*, placing live wasp after live wasp on his tongue and washing them down with beer, much to the disturbance of the auctioneer's gravity and the sale proceedings generally.”

THE B. H. A. SUMMER COURSE.

As will be seen from the notice in another part of our present issue, the efforts of the B. H. A. are to be directed this season to the carrying out of a three months' post-graduate course. The main features of the course will be as described in the notice. The course will be open to medical graduates from all parts of the world. The working out of the details has been entrusted to a special Committee, and Dr. Searson has accepted the position of Dean of the Faculty.

WHAT IS CANCER? A SENSIBLE SUGGESTION.

THE suggestion contained in the second paragraph of the following letter (*Westminster Gazette*, March 9th) points out, we think, the only practically useful work the Cancer Commission is capable of achieving. It has access to all the materials necessary for classifying the many different diseases which come under the name of cancer, and describing the distinctive features of all. We are glad to see that Mr. Snow speaks hopefully of the therapeutics of cancer; but the Commission sterilises its efforts in this direction at the outset by ignoring the work of homeopaths in this matter. Here is Mr. Snow's letter:—

"THE PRESENT POSITION OF CANCER RESEARCH.

"To the Editor of the *Westminster Gazette*.

"SIR,—I am compelled to ask your aid in correcting a strange misapprehension of my recent address. Judging by the numerous letters I have received, many persons credit me with most pessimistic views on the treatment of cancer. As I commented on the radical cures wrought at the Cancer Hospital by surgical methods more or less original, and on the material arrest of inoperable cancer by the special medicinal treatment there carried out, it is obvious that nothing could well have been further from my contention or personal opinion.

"On the other hand, what I did urge was the impossibility of making still further progress without a tabulation of ascertained facts, and a classification of the host of maladies now vaguely termed 'cancer' by a World's Congress, or some similar authoritative body. And I endeavoured to show that just as our scientific work had not secured the recognition and utilisation which were its due meed, so also, in the absence of the above essential preliminary, must the best efforts of the various research schemes fail.

"Yours faithfully,

"HERBERT SNOW, Senior Surgeon, Cancer Hospital.

"14, Stratford Place, Oxford Street, W., March 8th."

EDITOR'S CHANGE OF ADDRESS.

WE ask our contributors and correspondents to kindly note that our address is now 8, BOLTON STREET, PICCADILLY, LONDON, W. All communications to Dr. Clarke, or to the Hon. Sec. of the Burnett Fund, should be sent to this address. We hope our Exchanges will do us the favour to take note of this.

POISONOUS EFFECTS OF BORAX.—The extensive use of compounds containing borax, which under various names are sold for preserving foods, lends a special interest to some observations of Dr. Ch. Féréé of Paris, who has used borax in the treatment of intractable cases of epilepsy, and with success in certain cases. It is true that for this purpose it was necessary to give large doses for long periods, but in the course of the trial he met with a considerable number of persons who were peculiarly susceptible to borax. In them, loss of appetite was succeeded by burning pain in the pit of the stomach, dryness of the mouth, and eventually by nausea and vomiting. Borax produces also a remarkable dryness of the skin, which is found to favour, if not to cause, various skin diseases, especially eczema. The hair also becomes dry, and may fall out, causing complete baldness. The most dangerous result of the use of borax, however, is its power of producing kidney disease, or of converting a slight disorder of the kidneys into a fatal malady.—*British Medical Journal*, Oct. 5, 1895.

ORIGINAL COMMUNICATIONS.

A PROVING OF *BELLIS PERENNIS*.

By the late DR. BURNETT.

DECEMBER 17, 1880, 10 a.m.—Feeling quite well, I take 20 drops of *Bellis perennis* 1 in a little water.

18th.—Yesterday, two hours after taking the 20 drops of tincture of daisy, I felt weary and disinclined for walking, so that instead of walking to the West End, as is my habit, I drove. At 2 p.m. I paid a visit, and was obliged to compel myself to go up the long, steep staircase (most unusual with me, for I am a good walker, and generally go up stairs with pleasure). At 5 p.m. this weary state passed off, and I felt as if impelled to run; this go-ahead feeling lasted about two hours and then passed off, and I felt very tired; went to bed early and had a wretched night, tossing to and fro and dreaming of passed events mixed up with those of the present. This morning I have a dull, obtuse feeling in the front half of my head. The bad night was beyond question due to the *Bellis*, as I did nothing else to cause it, and it is quite unusual.

10 a.m.—Take 40 drops in water.

20th.—After taking the 40 drops two days ago I had the taste in the throat for an hour or more; then I felt no apparent effect except that I was unusually alert and energetic, and even at bedtime felt still more inclined to work than to go to bed. The night was rather restless, and about 1 a.m. I felt a pain in the lower part of my right biceps, exactly like one feels after carrying a parcel in the bent arm for some time without changing the position. At first I thought I had lain on the bent arm and expected it to pass off, but did not. On rising, it pained me to dress. I examined it and found it painful, or rather tender, to pressure, and it was, perhaps, a little swelled. This tenderness on pressure and pain in the right biceps was quite bad all day yesterday, and in the course of the day the same occurred in the left; and now (1 p.m., 20th), fifty-two hours after taking the *Bellis*, the lower portions of both my biceps are still aching.

During the night from 18th to 19th I had a good deal of pain in the bowels; it began in the right side, passed

upwards and across above the navel to the left, then downward, and hot flatus was discharged; then the pain at the left side was better, but the other did not go, and there is still some pain in the bowels.

21st.—I omitted to mention that on the evening of the 19th I got all at once three large papular blotches in the face, one on the right temple, one on left side of nose, and one on left side of chin.

22nd.—Digestion slightly disturbed, some tormina; muscles of arms still tender.

23rd.—Still a little tenderness in the bicipital muscles.

24th.—Normal.

30th, 9.30 a.m.—Having got safely over Christmas, I take 50 drops of *Tc. Bellis perenn.* in about 2 teaspoonfuls of water.

31st.—Last night (in the night) some pain in the bowels, and slight frontal headache. To-day the headache persists, and I should describe it as bilious, and is, I believe, drug effect. Yesterday I had no appetite for my two o'clock lunch; this is unusual. Very slight pain in muscles of right upper arm yesterday afternoon.

The general effect of the *Bellis* is now slightly constipating; on two former occasions I found it decidedly laxative.

January 3, 1881.—At the pectoral margin of my right axilla I have a congenital cutaneous appendage of the size of a large apple-pip. Heretofore it has always been pale, lifeless, shrivelled, and unnoticeable. But I noticed this morning on rising that it is pink in colour, it stands out, is full, and appears like a tiny pink pear hanging by a very short stem. It has evidently taken on activity for the first time as far as I know; it tingles, or rather prickles a little.

4th.—The cuticle appendage is still pink and full; a very tiny boil (very large pimple or papule) has appeared over my right eyebrow; it itches and tingles; a number of blotches have appeared on my forehead; a large pimple on my chin, in the beard; and *in the middle* of my right cheek a blind boil has appeared of the size of a good-sized black currant; it looks purple, pains, is hot, and surrounded by a circle of redness of the size of a shilling.

5th.—The large papule over eye is larger, and is becoming pustular; the blotches on the forehead are

worse; the boil on right cheek is very hard, increased in size, and burns and pains a little. A tiny boil has appeared on the left side of my neck.

6th.—The pustule over my right eye has come to a tiny white head and discharged; the boil in cheek is filling with pus. The state of my face is such that I have to explain to people whence the boils and blotches arise.

7th.—Late in the day yesterday I punctured the boil on my cheek and let out some whitish pus; it bled thereafter a little. To-day it is a little lump of the size of a pea, and hard and tender to pressure. I believe the effects of the *Bellis* are wearing off, because the bowels that have been sluggish (most unusual) have begun to act copiously. I know this, because it happened so before when I took some of it.

As far as I can judge, *Bellis* effects muscle and the true skin; and the disturbance in the bowel points, I believe, to its action on the coats of the bowel.

The cuticule's appendage is less pink and less full.

February 10, 1882.

HOMEOPATHY AT THE MEDICAL CONGRESS OF THE NAME OF PIROGOW.

By DR. DRZEWIECKI, of Warsaw, translated from *Lekarz Homeopata* by
DR. JAGIELSKI.

At this Congress in St. Petersburg the allopathic doctors—most likely desirous of honouring the great name of Pirogow, the genial surgeon, who was known—as has been authenticated by a series of facts—to have always kept in his pocket a homeopathic medicine box, treating himself homeopathically—resolved to make it widely known, *urbi et orbi*, that “*they considered the teaching of Hahnemann a quackery, and that to have anything to do with it was not in harmony with medical ethics.*” Hence, to judge from this, Pirogow himself, outside his great speciality, was a quack. Still it is worth noting that this quackery has to-day its chairs in universities and schools, that it has numerous hospitals, asylums, laboratories, dispensaries, a great and rich literature, including statistics of hospitals, and above all the private practice of homeopathic doctors, which clearly

proves that this "quackery" not only cures diseases sooner and more effectively than allopathy, but cures even such infirmities over which even the allopathy of to-day has no power. Were homeopathy really such a quackery, it would be but right, that just in so far as it deals with the health and life of man it should *not* be allowed to be taught, and should, after its public and thorough condemnation, be disallowed by the law. Meanwhile, you cannot show one country in which homeopathy is forbidden by law, whereas in many countries it enjoys the support of the Government and of the public. Nobody has either up to the present time judged homeopathy scientifically, nor has any one proved that its most important principle, the law of similarity, has no scientific principle, but is merely some idle fancy, a chimera. What is more, the allopaths, in curing various maladies by means of to-day's fashionable inoculations, won't admit that such treatment is nothing else but a treatment according to the law of similarity—indeed is homeopathy; for surely the treatment of diseases by means of their own poison is by no means an allopathic principle on which allopathy rests. We repeat this is the purest homeopathy.

The allopathic gentlemen at the Congress of the name of Pirogow have declared "that to occupy yourself as a medical man with homeopathy is against medical ethics," but involuntarily they have proved by this declaration that medical ethics are quite foreign to them, because instead of taking refuge behind scientific proofs of facts and arguments, they resorted to insinuations, calling homeopathy quackery.

Besides, it is a serious thing to know who ought to occupy himself with homeopathy, if a medical man should not be free to do so without offending against his professional dignity. For surely, even if homeopathy really were a scientific heresy, the inquiry of this heresy does not belong to the duties of a lawyer, or engineer, or a chemist, &c., but remains the duty of the Doctor of Medicine. A clergyman not knowing or ignoring the researches of all other religious doctrines of heresy is not a proper theologian except in his own imagination; likewise a medical man, not knowing or ignoring his own medical heresies, especially of a scientific nature, has not attained the climax of his education, and therefore has

no right to publicly speak about that heresy, and thus the proceeding of the allopathic doctors at the Congress of Pirogow clearly proves nothing else but their bold and unjustifiable fanaticism.

In the present year a Congress of *homeopathic doctors* from All Russia is to take place in St. Petersburg, at which we would not wonder at all if it should be unanimously pronounced and approved of, that *allopathy is void and divested of philosophical principles, and a rotten fanaticism and barbarism*. If any one should want facts in support of this declaration he will find them on every page of medical history.

MATERIA MEDICA MISCELLANY.

By J. R. P. LAMBERT, M.D.

The Mental Symptoms of Aurum.—Dr. H. R. Arndt writes in the *Hom. Physician*: “*Aurum* has been to me a most interesting remedy, not indicated very often, but closely associated with striking phenomena. The mental indication most frequently and persistently taught me when a student was a strongly marked suicidal impulse; and writers on symptomatology still emphasise this symptom. There is nothing like an honest desire or a serious inclination to commit suicide under *Aurum*. But the mental condition is one of utter wretchedness, alternating with periods of considerable exhilaration—a true *mental hysteria*, nearly always associated with serious perversion in the sexual sphere, occurring in young, emotional persons, of rather active but shallow intellect. These persons are honestly wretched, and at times they wallow in a slough of deep despondency, dwelling with much gusto upon a wish that they might be dead to be out of their misery; a deep sense of humility, active and sincere for the time being, characterises this mental state; but they are too shallow, too changeable, too hysterical to warrant any uneasiness on the part of the observer. A genuine desire to end life must, for its execution, be backed by pluck and determination, and in these the *Aurum* patient is hopelessly deficient.”

The Mental Symptoms of Chamomilla.—The same writer says of *Chamomilla*: “The mental symptoms

under this remedy may be summed up under the trio of 'peevisshness,' 'impatience,' 'intolerance of pain.' Of the three, I consider the last even more characteristic of the remedy than the other two. I would scarcely mention this fact here were it not that I have of late years had my attention called to it in cases seemingly quite beyond the reach of the remedy. In a case of brachial neuralgia, in a vigorous man of middle age, of robust appearance, who seemed to me the most inveterate fault-finder I had seen in a long time, I was assured that unless relief was speedily afforded he would do 'something rash,' and he acted as though he meant it. I gave *Chamomilla* purely on strength of the mental symptoms, and had surprisingly prompt relief. In one case of epilepsy, in whom the same mental condition prevailed much of the time, the remedy was of distinct benefit, the patient affirming that it acted soothingly, like a narcotic, and frequent request was made for the 'quieting' medicine,' which very often, and especially near the menstrual period, when these mental symptoms were always most pronounced, aborted threatening seizures."—*Hom. Phys.*

Phosphorus Poisoning Simulating Diphtheria.—Dr. Henry D. Chapin, in the *Laryngoscope*, March, 1903, related the instance of a girl three or four years old, who was sent to the hospital the previous autumn. The house doctor was puzzled with regard to the case, and asked Dr. Chapin to see her. The child was weak, very pale, and in a very low condition, with a very bad breath. Upon examining the throat and mouth a large pseudo-membrane was observed upon the hard palate and extending to the base of the uvula. It did not involve the pillars of the fauces or tonsils. The picture presented was one of a bad septic case of diphtheria. He told the house doctor that he had never seen a case of diphtheria with the membrane situated exclusively in such a place. He refused to admit the child, and sent her home. On the following day a doctor was sent to investigate and take a culture, which proved negative; he learned that the child was suffering from phosphorus poisoning, contracted by sucking matches. The child was then admitted to the hospital, and the membrane came off, leaving a necrotic area. Recovery took place.—*N. A. J. H.*

Rhus as a Heart Remedy.—Dr. G. Royal recommends *Rhus tox.* in two classes of cases. First, where there is an organic lesion due to some violent exertion which has strained the heart, causing hypertrophy without the other lesion usually accompanying such a condition. It was of great service to a railroad conductor who got caught in a wreck, and who made almost superhuman efforts to extricate himself. When he came to me, about eighteen months afterward, he stated that he had never counted his pulse since that time and found it below 120. There was numbness of the left arm, a great deal of restlessness. There were sticking pains and soreness, which seemed to be worse when he was sitting still or thinking about them. The palpitation and dyspnea were also worse sitting and lying down. *Rhus tox.* 6x materially helped him for five years, the pulse much of the time being as low as 85 per minute. At this time he contracted pneumonia, and died after about fifty hours from failure of the heart, which nothing could stimulate. Secondly, it is useful for a rheumatic heart, with palpitation aggravated while sitting or lying down, with sticking pins and soreness aggravated while he is thinking about them, and the peculiar stiffness of the muscles, affecting mostly the sheaths and tendons. For these cases the 30th has often been more successful than the 6x. The cause of the rheumatism is getting wet.—*Ibid.*

Zincum in Gastritis.—Wm. Maclay Lyon, M.D., says in the *Medical Century* that *Zincum metallicum* is a valuable remedy not often thought of in gastritis. The patient is neurotic, either by temperament or as a result of disease, hasty in action, fidgety, arms and legs restlessly in motion, especially the feet. The morning is a dark experience for this unfortunate. He awakes with a nausea and burning sensation in the stomach, no appetite, tongue dry, teeth feel on edge, sweetish metallic taste in mouth. A mouthful of breakfast and he is gone to his work, then at eleven o'clock the old familiar canine hunger of *Sulphur* appears, but there is more disturbance with *Zincum*. There are tremblings of the limbs, with a horrible oppression in the stomach, empty eructations which continue until some bile rises to the mouth. The hunger does not cease with the ingestion of food, and for this reason the *Zincum* patient is very hard to control, as

he continually overloads his stomach, even though he experiences a distension therefrom. He is very thirsty in the mornings, while in the afternoons there are restlessness, heat in palms of hands, and sweetish eructations in mouth, together with a craving for beer which is not satisfied. There is an aversion to meat in any form, probably because the gastric juice is so weakened as to be unable to act upon it. Also fish, veal, warm or cooked foods and sweets are tabooed; even a small quantity of sugar causes a heartburn. Wine in any form aggravates, and sour eructations inevitably follow the ingestion of milk.

All the admonition obtainable about the injurious effects of rapid eating are disregarded by the patient. The nausea, which is often constant, is relieved by sitting bent over. The gastric pains are sharp and stitching, from both sides of the abdomen, worse on inspiration. A mental anxiety accompanies.

Indications for Strychnia Phos.—Dr. G. Royal thinks this is a remedy which ought to be proven. "When its sphere of action is clearly ascertained I am confident it will be one of the most frequently indicated remedies. I have found it most useful in those cases of active, worried, tired-out business men or women, such as are so frequently found in America; the digestion has become impaired because of their irregular habits of eating and their indifference to what they eat and drink. The nervous system is worn out by worry or mental labour, or both. As a result you have a weakened condition of the heart, sharp pains about the heart due to the least exertion; then there are acute attacks of angina whenever the stomach becomes filled with gas, the result of imperfect digestion. Like *Phosphorus*, you find that it is impossible for the patient to lie on the left side; often due to edema and scanty urine, the patient is unable to lie down at all. There is a heavy, dull pain in the head, and frequent attacks of vertigo. Give such a patient *Strychnia phos.* 3x. trit., a grain before each meal and bedtime.—*N. A. J. H.*

NOTES

By ERSKINE C. WHITE

HYGIENE IN THE SICK-ROOM

I HAVE long desired to draw attention to the need of using fresh air and the bath as warily as food, exercise, &c., are permitted, in *many low forms* of disease.

Personally, there is no greater luxury in life than revelling in the ozone of lofty mountains, or in the crystal wave of ocean; but for many years, under a semi-tropical climate, I have been compelled to admit that unless either the air or water is each the *Similimum* they not only retard the case, but serve to complicate and render it *fatal*.

As a result of ill-timed sponging, I have noticed patients racked with neuralgia, splenitis, peritonitis, &c. In peritonitis a patient shrieked with agony directly a fanlight was opened two inches, the screams ceasing the moment it was closed; and this on a calm day, thermometer 80° in shade. Another peritonitis patient shrieked when a door opening into another room was left ajar. Again, after excluding air from a patient's lungs with a fifth blanket, his cough ceased—one winter's night.

By excluding "*air and sponging*" I have saved numbers of lives; by only a *slightly* injudicious use of those necessaries I have lost cases, or else they have been protracted, and terribly complicated. I employ them only after the ceaseless vigilance with which I seek a *similimum* in drug or attenuation. Abundance of air and water make a magnificent display for me, but the undertaker too often gets in his fine work soon afterwards, whilst without them I can score a bull's-eye every time.

MACROZAMIA IN MAL-DE-MER.

The vomiting of sea-sickness closely resembles that of sunstroke, poisoning by snake-bite, and poisoning by Macrozamia nut. I would rely on snake-venom, —*Lachesis*, &c., *Ammonia*, and especially Macrozamia palm-nut—to cure mal-de-mer.

When there are no cramps Macrozamia is the *Similimum*. Its poison in action precisely imitates that of

snake-venom—its helpless, chronic, almost *momentary* retching, just as in the worst forms of sea-sickness and sunstroke.

AMMONIA.

A remarkable proof of this drug being a specific for snake-bite lies in the fact that it causes, like snake-venom, *desquamation*. I have met many cases where the spot bitten sloughs each year on the return of the date of the bite.

This drug is so remarkably the *similimum* in snake-bite, that I feel sure it must draw the blood away from the stomach, as Mr. Kopp proves snake-venom to cause death by over-charging that organ with blood. Of course, in over-doses the drug must surcharge the stomach with blood.

CASES I HAVE COME ACROSS.

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

LXII.—*KALI BROMIDUM* IN DIFFICULT DENTITION OF CHILDREN.

I HAVE had several cases of difficult dentition in children, all of which I have successfully treated with *Kali bromidum* 1x, 2m to 3m doses every hour till relieved. In the majority of cases there was a suspension of the salivary secretion, carpopedal involuntary motion, vomiting agitation, and diarrhea. Even in cases of threatened infantile convulsions it has acted like a charm, when administered in doses of $\frac{1}{30}$ gr. every hour. Its power of lessening reflex excitability, in which it is unapproached by any other remedy, makes it a valuable agent of cure in most of the disorders incidental to dentition. In my hands it has always acted beneficially in restoring the salivary secretion when suspended, and in causing the disappearance of the vomiting, diarrhea, agitation, and carpopedal involuntary motion. The gums, too, instead of being swollen, red, and turgid, soon assume their natural colour. It is, in fact, a remedy that could ill be dispensed with in our materia medica for combating the various disorders to which infantile life is subjected, and is safer and far more effectual than those after death-dealing "cordials," "soothing-syrups," and "preserva-

tives" with which the shops of most allopathic chemists are stocked, and to which mothers are too apt to resort to "quieten" their infants' cries, unconscious, perhaps, of the harm they are doing thereby.

LXIII.—*ACONITUM NAPELLUS* AND *MERCURIUS CORROSIVUS* IN PAROTITIS.

A mother requested me to see her little daughter (aged 8), who, she stated, was suffering, as she believed, from a severe attack of mumps. On seeing the child I discovered that the mother was correct in her diagnosis of the complaint, as the case was undoubtedly one of parotitis. There was great swelling in both parotid regions, accompanied with heat, stiffness, and great soreness. Mastication, on account of the swollen glands, was very difficult, and febrile symptoms were also present. I ordered warm fomentations to the parts, and the following to be taken alternately every three hours in tablespoonful doses:—

R̄ *Tinct. Aconitum napellus* 1x̄m̄xij.
Ad *Aqua dest.* ʒvj.
R̄ *Tinct. Merc. Cor.* 3x̄m̄xij.
Ad *Aqua dest.* ʒvj.

The result was that the febrile symptoms disappeared, and the swelling, at the end of a week, had also dispersed. The mother was naturally pleased with the treatment, and stated that she had been advised by a friend to paint the swollen glands with *Iodine* liniment. I pointed out to her that there would have been no need to further deform the appearance of her child by such means, as the homeopathic remedies administered were quite sufficient to affect a safe and speedy cure. I have on several other occasions found the above-mentioned two remedies to be of never-failing value in the treatment of parotitis. In addition to this I may add that, in all cases so treated, I have, so far, never come across any complications.

LXIV.—*PHYTOLACCA OCTANDRA* AND *ACONITUM NAPELLUS* IN APHONIA.

A young man came to me suffering from aphonia, or loss of voice, the effect of an acute inflammatory condition

of the mucous lining of the larynx and trachea, the result of a cold. His voice was very hoarse, and at times almost inaudible. There was a tickling sensation and dryness in the throat, accompanied with a short, dry cough. The following, taken in tablespoonful doses every three hours alternately, brought on a complete cure after a fortnight's treatment :—

- ℞ *Tinct. Aconitum napellus* 1x℥xxiv.
Ad Aqua dest. ʒvj.
℞ *Tinct. Phytolacca octandra* 1x℥xxx.
Ad Aqua dest. ʒvj.

Aconitum was administered as being homeopathic to the condition resulting from a cold, and *Phytolacca* has earned for itself golden laurels, as it has proved itself to be a prime remedy in the treatment of aphonia, even if the voice is completely gone. In chronic cases also it has often proved effectual in the most obstinate cases. The tincture made use of in the above case was prepared from the ripe berries, and not from the root.

(To be continued.)

CHINA AND PULSATILLA IN AMENORRHEA.

[FROM A CORRESPONDENT.]

A LADY, aged 28, during lactation, suffered much from neuralgia in the face and head, which always came on soon after getting to sleep at night, and recurred as often as patient slept. *China* and other remedies failed, until, the amenorrhœa being thought of, *Pulsatilla* (antidote to both Iron and Quinine) was given in alternation with *China*, and with the prompt restoration of the period the neuralgia disappeared. This patient was slightly anemic.

A girl, about 19, had been unsuccessfully treated for anemia by an allopathic physician (there is reason to believe with Quinine, Iron, and Potash). Not only was she not relieved, but the medicine made her very dull and stupid, so that she scarcely knew what she was doing. A few doses of *Pulsatilla* 6 and *China* φ alt. put matters right, and the patient declared herself perfectly well.

ARSENICUM IN DEAFNESS.

A CORRESPONDENT sends us the following: G. S., who recently died of senile decay and bronchial catarh, at the age of 87 years, was for several years before his decease so deaf that he could hear nothing of ordinary conversation. A few days before death *Arsenicum 3* was administered in frequent doses, for urgent symptoms, and had the effect of rallying the patient for a time, after which, improvement ceasing, *Ant. tart.* was exhibited with much benefit. After the *Arsen.* the *hearing became very quick*, and so remained to the end. The *Dictionary* has under *Arsenic*: "Hardness of hearing, especially to the human voice." Presumably this remedy might be employed with advantage in numerous cases of senile deafness.

FOR THE DICTIONARY.

By DR. CLARKE.

MORBILLINUM.

SEVERAL correspondents have pointed out to me that whilst *Morbillinum* is mentioned in the *Prescriber*, no account of it is found in the *Dictionary of Materia Medica*. I regret the omission, but as a matter of fact there was not much to write. *Morbillinum* is the nosode of measles. It may be prepared in the usual way from any of the virulent secretions obtained from a patient suffering from the disease. So far as I know no proving exists; but the symptoms of measles are well known, and any combination of them will serve to indicate the nosode. It has been used on the analogy of the other nosodes, as prophylactic against measles, and as curative in an attack. Also it has been given in coryzal states in general and obstinate coughs. My own use of the nosode has been confined to globules of the 30th. Any homeopathic chemist can supply it.

BRITISH HOMEOPATHIC ASSOCIATION.

SUMMER (1904) POST GRADUATES' COURSE, LONDON, ENGLAND.

ARRANGEMENTS have been made for a Summer Course consisting of lectures, clinical demonstrations, &c., in the months of May, June, and July, 1904, at the Great Ormond Street Homeopathic Hospital, London, under the auspices of the British Homeopathic Association.

Courses will be given in Homeopathic Materia Medica and Therapeutics; Practical Surgery and Medicine with Demonstrations of Cases in the Wards and Out-Patients; Lecture Demonstrations in Gynæcology; Clinical Microscopy, Blood and Urinary Analysis, Bacteriological and Practical Pathology; Electro-Therapy, High Frequency, Röntgen Ray, and Light Treatment; Neurology; Pediatrics; Dermatology, Ophthalmology, Otology, Laryngology, &c.

At the London Homeopathic Hospital, which is equipped up-to-date, there is abundant clinical material: over 1,100 in-patients treated yearly, and 40,000 out-patient attendances.

Practitioners may attend the entire Summer Session, or any separate courses may be taken.

Professional ladies and gentlemen visiting *Europe* during the summer will find in these lecture-demonstrations the only systematic homeopathic course given in the Old World.

Certificates of attendance and proficiency will be granted.

The course will be made as practical as possible.

A list of hotels and boarding-houses will be provided at the office, and facilities will be afforded for securing suitable accommodation at reasonable rates.

A reception-room will be provided for those taking the Course, and every effort will be made to make the visit sociably pleasant and professionally profitable.

Applications and inquiries should be made at once to Dr. Searson, Dean of the Post-Graduate Course, London Homeopathic Hospital, Great Ormond Street, London, England.

SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

THE sixth meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thursday, March 3rd, with Dr. Herbert Nankivell, President, in the chair.

Miss Margaret Tyler, M.D., L.R.C.P., &c., of Linden House, Highgate Road, N.W., having been duly nominated by Giles F. Goldsbrough, M.D., and C. Knox Shaw, was elected a member.

The following specimen was exhibited: Portion of bone from the throat of a child, aged 6½ months, who had been fed on mutton broth, Dr. Roberson Day.

SECTION OF MATERIA MEDICA AND THERAPEUTICS.

Dr. F. A. Watkins read a very excellent paper on "Acute Rheumatism and Allied Conditions."

This subject he discussed very fully under the following heads:—

Etiology.—1. Toxic excitant. (a) Auto-toxin—Lactic—Uric acid. (b) Bacterial toxin—Micrococcus rheumatica—Formic acid. 2. Predisposition. (a) Hereditary. (b) Acquired. 2. Genius epidemicus.

Pathology.—Historical sketch of bacteriology—Morphology—Chemistry.

Diagnosis.—Various forms of infective arthritis.

Treatment.—1. Prophylaxis. 2. Homeopathic medication. 3. Allopathic treatment by salicylates, alkalies, serum, arthrotomy.

Pharmacology and toxicity of salicylates.

Analysis of one hundred cases of rheumatic fever treated at the London Homeopathic Hospital compared with the results obtained by salicylates.

The writer's contention in the early part of his paper was to prove the bacterial origin of acute rheumatism, though he thought the bacteria were not the sole cause, as predisposition or peculiar circumstances are also necessary. On the subject of treatment, though he pointed out that salicylates give the most speedy relief from pain,

homeopathic treatment is safer and quicker in the long run, and accompanied by less cardiac complications.

The paper was illustrated by microscopic and macroscopic specimens.

Dr. Byres Moir then read a short paper on "Rheumatic Heart Disease in Children," and the two papers were discussed together.

The President, in opening the discussion, said that acute rheumatism is an article they don't keep at Bournemouth, and with which he had consequently had no experience. Dr. Galley Blackley thought that salicylic acid may still prove to be a specific. Dr. Goldsbrough said that it is important to give a single remedy, the result being preferable to that of alternating. The dose also is important. Some cases do better on the ϕ tincture, others on the 6 or 12 cent. He finds cases do better without any farinaceous food. He gives milk, oranges, and grapes without sugar; but it is possible to overfeed with milk. Hyperpyrexia is due, he thought, to a disturbance of the heat centre, and not a reaction of nature. He has never seen two cases in a house at the same time. Dr. V. Green asked how one could diagnose rheumatic from ordinary tonsillitis. He questioned if salicylates caused cardiac complications, and asked why formic acid should not be given in acute rheumatism. Dr. W. Thomas mentioned a case where *Bry.* 3 rapidly relieved after the ϕ tincture had failed. He finds steam baths to raise the temperature very useful (as advocated by Dr. P. Wilde). Dr. Lambert said it was a mistake to suppose that *Acon.* and *Bryonia* are the only remedies for acute rheumatism. In cases where the patient is restless, and constantly desiring to move, it is absurd to give *Bryonia*. *Rhus* would be the remedy, the primary aggravation from movement being too great to reach the stage of amelioration from continued movement. Other remedies may also be needed, such as *Apis* and *Bell.* He also agreed with Dr. Green's suggestion as to formic acid. Dr. Barlee (visitor) remarked *sub voce* that it is used in France for acute rheumatism. Dr. Granville Hey mentioned the case of a bee-keeper who suffered from subacute rheumatism, and Dr. Grantham-Hill said that in some parts of Australia bee-sting was the regular treatment of rheumatism. Dr. Burford spoke very mournfully of our *materia medica*. How could we

expect to do good work with the materials we have? He also spoke of the necessity of re-proving our drugs, and drew attention to the relationship of rheumatoid arthritis to pelvic lesions in women, especially its association with uterine hemorrhage. Colonel Dean and Drs. Eadie, Roberson Day, and Mr. Knox Shaw also took part in the discussion. Dr. Watkins and Dr. Byres Moir then replied. In his reply Dr. Moir said he agreed with Dr. Blackley, that we should not discard salicylates too soon. He thought sleeplessness and such conditions were the cause of hyperpyrexia. He also agreed with Dr. Lambert as to the necessity of individualising our cases.

INSTITUTION.

PHILLIPS MEMORIAL HOSPITAL.

FIFTEENTH ANNUAL MEETING. SPEECH BY THE MAYOR. THE PROGRESS OF HOMEOPATHY.

THE Fifteenth Annual Meeting of the Phillips Homeopathic Hospital and Dispensary for Bromley and the district was held at the Hospital on Monday night, February 29th. His Worship the Mayor (Councillor Frank Griffith, J.P.) presided, and the attendance included Dr. D. Dyce Brown (hon. consulting physician), Dr. G. H. Burford (hon. gynæcologist), Dr. E. M. Madden, and Dr. H. Wynne Thomas (hon. medical advisers), Councillors T. D. Grady and A. Lindsay Bell, Mrs. Madden, Messrs. W. Willett, John Churchill, W. R. G. Hay, J. G. Charles, Thos. Bennett, and A. W. Henly, members of the Committee; Mr. and Mrs. Baxeres de Alzugary, Mr., Mrs., and Miss Western, Miss Scott, Mrs. Churchill, Mrs. Wynne Thomas, the Misses Goodall, Miss Hyde (the valued matron), Mr. J. M. Wyborn (hon. sec.), and others. Letters regretting inability to be present were received from Messrs. F. C. Dobbing, J.P., J. Howard Moore, J.P., Alfred E. Beddow, B. C. Wates, and C. K. Rogers.

THE ANNUAL RETROSPECT.

The Committee presented the report, including the accounts for the year ended December 31, 1903.

The Mayor, in moving the adoption of the report and accounts, said: We are met together to-night with but one object in view, and that is to further the interests and do anything we can to enhance the prosperity of this great Institution, the Phillips Memorial Homeopathic Hospital and Dispensary. I am sure that to-night there will be one sentiment predominating our thoughts, and that is regret at the unavoidable absence of our President, Sir George Wyatt Truscott. (Hear, hear.) Personally, I have good reason to know what a debt of gratitude the new Borough owes to Sir G. W. Truscott for his kindly support, so ungrudgingly given in probably the most preoccupied year of his life, when on two occasions, notwithstanding his numerous engagements as one of the Sheriffs of the City of London, he made time to come over and identify himself with the inauguration of the new Borough of Bromley, thereby adding the approval of an influential and thoroughly educated man of affairs to the efforts of those whose enterprise in gaining for Bromley the individuality of a corporate body were brought to a successful issue last year. (Applause.) Sir George takes a keen interest in all good works, and any enterprise for the good of his fellow men has his encouraging support. (Applause.) Every annual meeting of this Hospital is a milestone marking progress in the realisation of a very high ideal which was conceived in the mind of a great man, a man whose work lived after him—who found in the ordinary routine of his daily work scope for a magnificent ambition, the aim of which was not personal advancement, but the amelioration of the conditions of life amongst the sick poor and the increase of their chances of restoration to health and strength. (Applause.) The growth and the success of this institution should be a great encouragement to all those whose sympathies are rather wider than the necessities of their own personal comfort to mark the cumulative power of all genuine and sincere endeavour to do some good to others. The life-work of the good man after whom this institution is named—though it was all too short from the point of view of those to whom he was at the time of his untimely death ministering—proved an inspiration to his admirers to found this Hospital (an enlargement of his own dispensary) as a means of commemorating his life's short work. As a youth I knew Dr. Phillips personally, but after twenty-three years' existence of this institution I welcomed the call to preside at the annual meeting of this institution, which keeps alive his memory, because in the representative

position I have the honour to stand to-day I hoped I might be the means of focussing more definitely the attention of the residents of the Borough on the strong claims which this good work and that of its elder brother the Cottage Hospital have on their sympathies. (Applause.) Once more I must emphasise the peculiar difficulties which in Bromley face all philanthropic and charitable enterprises. The close proximity of the great City of London has up to the present robbed the urban district of Bromley of any claims to individuality. The sympathies of the residents whose business affairs are mostly connected with London have been attracted to the support of the great central organisations of the Metropolis, but it is one of my great ambitions that as a borough of, I hope, increasing importance Bromley will achieve such an individuality that all the local efforts for the good of the community shall not in future stand second in the generous estimation of the residents, but shall command through the power of local sentiment a prior claim on the sympathies of the residents, and that the old proverb may be exemplified, "Charity begins at home." (Applause.) I make bold to appeal to the medical men of Bromley that in the conversation-opportunities which they have in the homes of their patients they may continually spread the doctrine that now Bromley is a borough it requires the intelligent support of the residents until the attraction of local enterprises becomes of greater weight. Since the time of the great founder Dr. Madden and Dr. Wynne Thomas have been eminent members of the medical profession who have worthily continued the great work, and they have been efficiently supported by the matron (Miss Hyde) and the members of the nursing staff. (Applause.) I must not omit referring in appreciatory terms to the work your Committee have done during the past year. Around the *personnel* of this Committee must rally all of our prospects—all permanent help comes through the individual help of the members of the Committee. Hospitals and similar good works cannot exist prosperously on the spasmodic and intermittent gifts of those whose sympathies are temporarily engaged. The sphere of usefulness of this Hospital will be limited to the extent of the regular income, as is indicated in the report. The accidental benefits from intermittent donations, however welcome, will only go to liquidating debts incurred from the inadequacy of the permanent income, and while this is not sufficient, extension is impossible. Financially, this Hospital has been equally fortunate in its friends. The late Mr. E. F. Duncanson, Mrs. Leishman, Sir Walter Murton, Mr. Beddoe, and Sir George Wyatt Truscott—these are a few of the names of the generous supporters whose assistance has considerably enlarged the

operations of this institution, and you have been equally fortunate in your honorary officers. (Applause.) The work of your excellent secretary, Mr. Wyborn, stands pre-eminent. Mr. Lindsay Bell is likewise a most valuable worker in the organisation of the annual concert. I remember, as you no doubt do, with pride that of all homeopathic hospitals yours has no equal. Therefore I express the hope that support will never fail, enthusiasm will never be wanting, and generosity will never fail to support the Bromley Homeopathic Hospital and Dispensary. (Applause.)

Mr. Wm. Walter had great pleasure in seconding the motion, which was carried.

THANKS.

The Mayor proposed that the best thanks of the meeting be given to the Committee, the Ladies' Committee, the hon. medical officers, the hon. solicitor, the hon. architect, and the hon. auditors for their respective services during the past year.

Dr. Madden acknowledged the compliment on behalf of the medical officers. Their services were always rendered with great willingness and they wished that they had more space to work in. Before long they hoped to see the room in which they were assembled filled with beds. (Applause.) In responding to this resolution he also wished to direct attention to the paragraph in the report dealing with the death-rate for the past year, which was a matter for great satisfaction to all adherents to homeopathy. Finally, Dr. Madden observed that he thought it was not quite fair that the Cottage Hospital should receive four times the amount of subsidy that they received from the Hospital Sunday Fund.

Mrs. Madden suitably returned thanks on behalf of the Ladies' Committee.

ELECTION OF OFFICERS.

The Mayor said he had very much pleasure in proposing that the President and the Committee, with the Medical Staff and other officers, be re-elected for the ensuing year according to the proposed alterations in the report. The removal from the neighbourhood of the Rev. Thos. Nicholson rendered it impossible for him to serve.

Mr. Western seconded the motion, which was carried.

Dr. Wynne Thomas returned thanks on behalf of the Medical Officers for their re-election. It was gratifying to them to know that they still retained the confidence of the subscribers to the Hospital, and he hoped that nothing would arise in the ensuing twelve months to cause them to regret their renewal of confidence. Those who had gone through the

report would have noticed that there was still a debt of £470 on the Building Fund. They wanted to see this debt wiped out, and in order to further this desire the ladies had decided to hold a bazaar in that room in the early part of the year. He also had great pleasure in announcing that he had that morning received a cheque from an old and very valued friend of that Hospital, to be spent in whatever way he thought most desirable. It was a cheque for £100 from Mrs. Leishman, and he thought he could not do better than hand it over to their treasurer, Mr. Charles. (Applause.)

THE PROGRESS OF HOMEOPATHY.

Dr. Dyce Brown, after alluding to the great pleasure it gave him to be present that evening, observed that if proof were needed of the way in which the late Dr. Phillips was beloved it was abundantly forthcoming in that admirable institution and in the way in which it had prospered. That Hospital ought not to be merely looked upon as a local institution, however valuable it might be. All the smaller homeopathic hospitals scattered about the country ought to be looked upon by them as parts of the great whole of the creed in Great Britain. The more united they were in that feeling the better it would be for homeopathy and for each individual hospital. The British Homeopathic Association had been formed with the object of carrying out the idea that unity was strength. It had also been formed with the view of bringing before the public in various important ways the necessity of teaching and propagating the doctrines and understanding the doctrines of homeopathy. Another object was to give young doctors a thorough course of training, besides which they desired to train the public, many of whom did not thoroughly understand their principles. The Association was intended to act as a focus for the spread of the law of homeopathy. They wanted their knowledge to be spread as fully, as widely, as completely as possible. (Applause.)

Dr. Burford said he had seen many hospitals, but never had he seen one so excellently arranged and so well equipped and managed as theirs in this country or abroad. (Applause.) Since they had removed into their present excellent quarters the Homeopathic Hospital at Tunbridge Wells had moved into more spacious quarters. Birmingham, too, had extended their accommodation and operations. Liverpool had recently built itself a nurses' home; Eastbourne had increased its receiving capacity; Bournemouth had done exactly the same; Plymouth had had to provide increased accommodation. At this point the lights were turned down, and the speaker, aided by some remarkably fine views of various homeopathic hospitals, includ-

ing the Phillips Memorial Hospital, proceeded to describe in an interesting manner the various improvements, &c., that had taken place. In conclusion, he thought Bromley had come well to the front in this progress, besides having contributed a considerable sum of money to the most desirable object the British Homeopathic Association had in view. (Applause.)

Mr. Charles proposed that a cordial vote of thanks be accorded the last two speakers, and Dr. Madden, in seconding, announced, amid applause, that he had the pleasure of handing to Dr. Burford the sum of £5 from his good friend, Mrs. Scott.

A similar compliment to the Mayor for presiding terminated the proceedings.—From the *Bromley Chronicle*.

EXTRACTS.

SAMUEL HAHNEMANN: MEDICINÆ MAGISTER.—JEAN PAUL RICHTER'S VIEW.

“Hahnemann, dieser seltene Doppelkopf von Philosophie und Gelehrsamkeit—dessen System am ende den Ruin der gemeinen Receptirköpfe nach sich ziehen muss, aber noch wenig von den Praktikern angenommen und mehr verabscheut als untersucht ist.”—*Jean Paul Richter, Zerstreute Blätter, II. Band, S. 297.*

“Hahnemann, that rare combination [double-head] of philosophy and learning—whose therapeutic system will finally annihilate the prescription-scrawlers of the common school, yet whose truths have as yet been little accepted, and are more detested than investigated by these practitioners.”

WE honour ourselves in presenting to *Chironian* readers a classical portrait of Hahnemann, the man of the eighteenth century, of the nineteenth, and of this twentieth cycle of time in the realm of medicine.

Born at Meissen, Saxony, April 11, 1755, the son of a porcelain painter, he died in Paris, July 2, 1843, in his eighty-ninth year, and was buried in Montmartre. The story of his life, the achievements of his indomitable genius, his profound love for humanity, the magnificence of his scholarship, the wealth of his learning must be traced in biographies of a wider range than this. Dr. Walton wove a wreath to his fame when he said: “Around the name of Washington clusters the sentiment of liberty; around the name of Lincoln clings the idea of emancipation; around the name of Luther hovers the

thought of reformation ; *around the name of HAHNEMANN gathers liberty of thought, emancipation from doubt, and reformation in medical practice.*"

The twentieth century will witness a humbling in the dust before the tomb of Hahnemann of the vanities of "regular" medicine, which is the archetype of irregularity, of practice governed by no law; for when from the gloom of centuries Hahnemann's clear voice enunciated and established the everlasting truth of a LAW in drug-therapy the doom of ignorance and arrogance was bespoken.

Hail Samuel Hahnemann, magister!—*Chironian*,
March, 1904.

CONSTANTIN HERING.

DR. HERING was born in Saxony, was educated there, and attended seven courses of medical lectures at Leipsiz, where he was engaged to write down homeopathy; his investigations led him to believe in the law of similars; later he was cured of a gangrenous dissecting wound by a fellow homeopath, which clinched the matter in his mind and made him a devoted follower of the system to which he owed his life; he graduated at Wurzburg, March 23, 1826, and publicly defended homeopathy in his inaugural thesis—"The Medicine of the Future."

Dr. Hering was a great naturalist and taught the natural sciences at the Blochman Institute in Dresden after his graduation in medicine; on the recommendation of Blochman he was sent by the King of Saxony to Dutch Guiana, where he remained six years; to that residence we owe *Lachesis* and its triumphs; he educated Dr. Bute in homeopathy and sent him to the United States to locate in Philadelphia; in 1833 he followed him and did mighty work for the cause, as is well known.

Dr. Hering never knew Hahnemann, although while a student at Leipzig he once saw him; he corresponded with him as long as Hahnemann lived. C. B. G.

[It is a singular coincidence that Dr. Carroll Dunham was cured by Constantin Hering in the same way of a dissecting wound and its sequelæ, and thereupon forsook allopathy and became the splendid homeopath we all know him to have been.—ED. A.P.]—*American Physician*,
January, 1904.

WHEN? WHERE? HOW?—A *SECALE* CASE.

By WM. P. WESSELHOEFT, M.D., Boston.

[In discussing a paper by Dr. Defriez, before the Boston Homeopathic Medical Society for November, upon "Application of the *Materia Medica*," Dr. Wm. P. Wesselhoeft, the well-known Hahnemannian member of that distinguished family of physicians, presented the following admirable homeopathic philosophy and helpful illustration of how to secure the fullest beauty of its exemplification in practice. We are sure it will be read with interest and profit by every student of pure homeopathy to whom *THE ADVANCE* may be able to carry it.—
EDITOR.]

The very able paper that we have just heard is most gratifying and encouraging evidence that not all the younger disciples of the *healing art* have abandoned the cardinal teachings of Hahnemann. Lost in the maze of pathology and morbid anatomy, many of us have confounded pathological tissue changes with *the disease*, instead of more carefully investigating the symptoms and conditions which lead up to these tissue changes.

A most important point upon which our essayist has dwelt is the statement that we homeopaths are not called upon to treat diseases, but to treat the individual man, woman, child (or animal) by probing and prodding the patient, and investigating until we discover characteristic symptoms of the disease, and these are to serve as the keynotes for the diagnosis of the remedy. Hahnemann once said, when asked what remedy he used in pneumonia, "I have nothing to do with names of diseases, but I have much to do with diseased persons."

In homeopathy there can be no such thing as a remedy for a disease. Any remedy in the *materia medica* may be the homeopathic simile or similimum to a case, no matter what the pathological diagnosis may be. Every new case should be approached as if we had never seen a similar one before. Nature in her endless reproductions never produces two things alike. No two human beings express themselves alike in health, any more than they do when their vital energy is in discordance. The physical diagnosis is of importance, chiefly for the prognosis and

hygiene, but with this alone we cannot cure. The selection of the remedy homeopathic to the case, *i.e.*, the diagnosis of the remedy, unhampered by the *name* we have given the *disease*, is the true and only method of securing the curative agent.

A remedy should never be selected according to loose generalisations which are considered by many more scientific. No pathological stilts should be used in our search for the remedy. We should be governed by the symptoms observed by the provers on the one hand, and on the other those observed in the sick. Let me elucidate this by an experience of which I am still somewhat ashamed.

Many years ago, called in consultation to a case of typhoid by a colleague whom I highly respected for his industry and sagacity in the selection of remedies, I sat by the bedside of a moribund patient. He was in the middle of the third week of his illness, which took on the gravest symptoms in the beginning of the second week. The collapse was plainly visible in his face, sunken eyes, livid skin, profuse cold perspiration, spasms and rigors, no response, strabismus with injected sclerotic, irregular respiration, pulse uncountable, inability to swallow, every now and then a faint shriek with the spasms. Everything pointed to an impending cerebral paralysis, which in my judgment was not far off. I told my colleague frankly that my presence might be a comfort to the family, but I certainly could not help him in the restoration of a moribund patient. Nevertheless I suggested *Hellebore* as a trial. Four or five days later, to my astonishment, I was asked to see the patient again. and there I found him lying quietly, perfectly relaxed in bed, while the nurse was given him milk by teaspoonfuls. It seemed to me like a resurrection, and I wondered and marvelled at the effect of the *Hellebore*. My colleague, after paying me a few compliments on my sagacity, which I absorbed like a sponge, very frankly told me he had not given *Hellebore*, as he thought it not sufficiently indicated after studying it. Instead, he went back to his patient with a bagful of repertories and materia medica, and continued observing his patient. He now found the following *characteristic* symptoms: Spasms always commence in the face first, then spread all over the body, and end in the fingers, which are stretched out and spread

wide asunder. After a diligent search he found this group of symptoms under *Secale*.

1. Spasms commence in face and spread over body.
2. Fingers spread apart in spasm.
3. Profuse, cold, clammy sweat; pale, sunken hippocratic face.

Here was a group of symptoms, a tripod, to stand upon. If ever a man was grasped from the jaws of death, *Secale* and nothing else was this man's saviour; but the selection was the work of an artist.—From *Medical Advance*, February, 1903.

BENZINE. A CASE OF POISONING.

ON January 15, 1902, a soldier drank two cups of coffee, with which (unknown to him) about 15 grams of benzine had been mixed by his comrades as a practical joke. During the day there was frequent nausea but no vomiting; headache, muscular lassitude and some shivering; general *malaise*.

January 16.—During the forenoon continuance of the same symptoms, stabbing in the eyes, which were ejected; much sneezing and running at the nose during the day; copious diarrhea; sleeplessness, restlessness, and somewhat frequent cough.

January 17.—To the general catarrh were added troublesome itching on the forehead, face, and neck. In the evening prostration and shiverings.

January 18.—A somewhat confluent maculopapular eruption with irregular borders was seen on forehead and face; on the neck a dark erythema. Catarrh still present. The patient was sent into hospital with the diagnosis: "measles." Temperature in axilla 39.5° C. Dr. Simonin saw him in the evening and found the usual puffy appearance of measles. The conjunctival, nasal, and bronchial catarrh were not very pronounced. The *velum palati* showed a vivid erythema similar to that of scarlet fever, but the moderate amount of swelling caused no dysphagia. The diarrhea continued, and the patient smelt somewhat perceptibly of acetone; tongue white in centre, red at the edges and somewhat dry: no hoarseness.

He complained of itching in various parts, where a polymorphous eruption was found. The axilla, bend of elbow, groins, under surface of thighs and scrotum were the seat of a vivid erythema. On the thorax the sternal region was free. At the base of the buttocks and round the navel were seen large spots with indented edges, also on the back of the forearm and wrist, where they were discrete, whilst those on the posterior side of the buttocks, the buttocks themselves, and back of thighs were confluent. The anterior and posterior folds of the axilla showed linear echymotic suggillations of a bluish colour.

No nausea or vomiting; urine scanty, dark-coloured, and free from albumin. Pulse 80, full and regular.

The eruption had nothing in common with measles, and poisoning by food or drugs was thought of, but the man himself, in spite of all questions, could at first think of nothing.

January 19.—Temperature, morning, 39·3°, evening, 38·1° The patient is constantly scratching the erythematous spots; the early catarrh has sensibly abated, whilst the eruption is still at its height. Has somewhat acute headache, knee-jerk considerably increased, no disturbance of sensation. Patient now bethought him of a can of benzine which stood in his room, and from which about 15 grams had been taken. A saline aperient and milk diet were given.

January 20.—No fever; feeling well; no more ocular and nasal catarrh, but the conjunctivæ have a slightly icteric tinge. Some mucous râles heard on auscultation, with now and then watery mucous expectoration. Skin beginning to wrinkle on all the erythematous spots.

January 21.—Desquamation in axillæ and groins, and on the genitals. Eruption much paler; oliguria continues.

January 24.—General condition very good; tongue rosy, stool normal; no catarrh; skin eruption has quite vanished and desquamation has nearly ceased.

Patient left the hospital on February 5, but still somewhat weak and anemic.—Dr. Marc Jousset, *L'Art Médical*.—*American Physician*, Dec., 1903.

REVIEW.

*THE HOMEOPATHIC DIRECTORY.**

THE *Homeopathic Directory* has now reached the 10th year of publication in the present series, and it is difficult to imagine how the homeopathic community could get on without it. One of the besetting sins of homeopaths, largely the result of circumstances, is the habit of mental isolation. But for the possession of some means of knowing who are our friends, and how they may be reached, this baneful habit would be much more serious in its consequences than it is at present. There are some homeopaths who are always hankering after union with the allopathic section. This is absurd. What is needed is union among homeopaths. The *Directory* is a potent means of keeping this union alive. All patriotic homeopaths should give it their support. We are glad to find that the present edition shows much improvement in many respects. The German list is, we believe, as perfect as it is possible for any list to be—thanks to the great kindness and great trouble taken by Dr. Richard Haehl of Stuttgart. Japan, Chili, and Hayti are new countries represented; and we are glad to see the list of the United States is largely augmented this year. We believe this department will increase in importance year by year.

In the British list there is a larger proportion of starred names—marked with an asterisk—than we care to see. This indicates, of course, that the owners of the names have not taken the very small amount of trouble entailed in returning the stamped circular which was sent to them. A few names are distinguished with a double asterisk, signifying that the circular has not been returned for two years or more. We hope that under the editorship of Dr. Roberson Day—who, we understand, is to undertake that office in future—the *Directory* will receive all the support hitherto accorded to it—and more also. We trust he will be able to eliminate those double asterisks.

* *International Homeopathic Directory*, 1904. New series. Tenth year of publication. London: Homeopathic Publishing Co., 12, Warwick Lane, Paternoster Row, E.C. Price 2s. net.

Obituary.

HENRY M. DEARBORN, M.D.

WE learn with very great regret that Dr. Henry M. Dearborn, whose most able treatise on *Diseases of the Skin* we had the pleasure of commending to the notice of our readers last year, has passed away. We take the following from the *Chironian* of March:—

The *Chironian* regrets deeply to announce to its readers the sudden death of Prof. Henry M. Dearborn, from pneumonia, February 16, 1904. Prof. Dearborn was an authority on dermatology, and had held that chair in the college since 1893. He also served as Secretary to the Faculty from 1895 to 1902.

The *Chironian* and its readers would extend sincerest sympathy to the suddenly stricken family.

IN MEMORIAM: PROF. H. M. DEARBORN.

The following resolutions were unanimously adopted by a meeting of the student body of the New York Homeopathic Medical College held on February seventeenth, nineteen hundred and four:—

Whereas, An all-wise Providence has chosen to remove from our midst Doctor H. M. Dearborn, Professor of Dermatology and former Secretary of the New York Homeopathic Medical College; and

Whereas, During his years of service Doctor Dearborn endeared himself to all the students with whom he came in contact, by virtue of his character, his energy and his faithful work in behalf of Homeopathy and the college; therefore, be it

Resolved, That the student body, realising the loss to Homeopathy and to the college, hereby expresses its keen sorrow and sincere regret in the death of Doctor Dearborn; and be it further

Resolved, That this tribute of respect and loving regard for the memory of Doctor Dearborn be published in the college paper, and a copy thereof signed by representatives of our classes be sent to the family of the deceased with the heartfelt sympathy of every student in the sorrow of their bereavement.

Signed,

M. W. MACDUFFIE, '04,
W. L. POTTER, '04,
LOUIS R. KAUFMAN, '04,
ARTHUR P. COUCH, '05,
OLIN J. FRYER, '05,

CHAS. F. HASTINGS, '06,
JOHN H. YOUNG, '06,
CHARLES COOMBS, '07,
CHESTER R. BROWN, '07.

MAHENDRA LAL SIRCAR, M.D., C.I.E.

WE learn with profound regret that the venerable Mahendra Lal Sircar has passed from the scene of his labours, leaving a void which it will be impossible for another to fill. But a few months ago we chronicled the happy celebration of his seventieth birthday. The happiness of a life spent in the pursuit of lofty ideals, of a work well done and warmly acknowledged on all hands, of a personal devotion of family, friends, patients, and pupils such as it is given few to command—all this happiness was his, and sustained him in the unsparing labours which he gave to the world, in spite of his waning bodily powers and the sufferings thereby entailed. We must reserve a full obituary notice until the details reach us, and in the meantime we will content ourselves with reproducing this paragraph from an Indian contemporary, and asking Dr. Sircar's relatives and friends to accept our most sincere condolence on their loss, in which we also claim no small share:—

“Dr. Mahendra Lal Sircar, C.I.E., died on Tuesday morning, Feb. 23rd, in Calcutta at the age of over 70. As a young man he had a distinguished career at college, and in after years developed into a profound scholar, both in science and literature. He acquired considerable reputation as a homeopathic physician, and founded the Indian Association for the Cultivation of Science. In public life he served on the Bengal Legislative Council, and was a member of the Municipality and Sheriff of Calcutta. Dr. Mahendra Lal was a connecting link between the old and new generations in Bengal, and, remarks an Indian paper, his death will be widely regretted, alike among the European and native communities, in both of which he had a wide circle of friends and admirers.”

NOTIFICATION.*

CHANGE OF WEST END ADDRESS.

DR. CLARKE, LONDON.—Dr. Clarke has removed from Clarges Street. His residence is now 8, *Bolton Street, Piccadilly, London, W.* His consultation days at Bolton Street are Tuesdays, Wednesdays, and Thursdays, from 11 to 3; at 38, Cornhill, Mondays and Fridays at the same hours. Telephone number “6681 Gerrard.”

. Under this heading we shall be happy to insert notices of appointments, changes of address, &c., and holiday arrangements.

VARIETIES.

CHIONANTHUS IN JAUNDICE.—Dr. J. T. Kent reports a case of jaundice cured with chionanthus. Symptoms:—

Pain and soreness in the region of the liver.

Stool like clay.

Nausea most of the time.

Vomiting of mucus and bile in attacks two or three weeks apart.

Sour eructations.

Dr. W. H. Leonard, remarking on the uses of this remedy, cites the following case:—

“A patient had jaundice for several weeks, being in bed much of the time; was under good treatment with chelidonium as a leading remedy. After patient was out of doors the skin and sclerotica were still yellow. He received chionanthus first dilution every three hours with marked effect; his skin cleared up and an itching anus, from which he had suffered for months and evidently connected with his liver trouble, as he had never been troubled with an anal eruption before in his life, was entirely relieved, and the patient restored to his usual good health.”

This remedy merits study in liver troubles, and seems to resemble chelidonium, and, as above, may often complete the cure, after the use of chelidonium. Symptoms from provings are few, and clinical cases where the remedy has been used with good results should be reported.—*Amer. Hom.*

CYPRIPEDIUM SPECTABILE.—The *Hahn. Mo.* (Feb., 1903) thus comments on a case of poisoning:—

We presume the variety of lady's slipper referred to in the article by R. K. Paine in *Medical Magazine* is the pink and white cypridium that is cultivated in our gardens. The cypridium pubescens, of which we have an incomplete pathogenesis, is the yellow variety, growing for the most part wild. There must be much in common in the effects of these varieties. In this article there appear some symptoms which are very suggestive of the possible value of the spectabile as an antidote for the poisonous effects of rhus. In the summer of 1889 Mr. Eggleston, of Rutland, collected an armful of the flowers from a swamp near his residence. He held the flowers to his face to inhale their fragrance. A week later his entire face was badly swollen, his features being distorted so that he could hardly see. The attack lasted two weeks. The gentleman repeated this experiment, with similar effects; but he was inclined to think that the dermatitis had been due to poison ivy, which also grew in the swamp. Mr. Ezra Brainerd, of Middlebury College, had several similar experiences, in which there was no possibility that the skin symptoms could have been due to ivy poisoning. A certain lady, whose name is not given, but who appears to have been a direct descendant of Mother Eve, determined to test the cypridium in such a manner as to preclude the possibility of its effects being mistaken for those of any other plant. She rubbed the leaves and stalks on her wrist, forearm, and upon the back of the hand. The effects were as follows:—First day—slight reddening and itching of the parts. Second day—swelling in blotches; these quite red; burning sensation in the

blotches; no fever. Third day—right hand and arm swollen, blotches dark red; great burning and itching; headache across the temples; blotches appeared also upon the opposite arm and hand, also upon the face and under arms. Vesication appeared in some of the blotches, followed, on ninth day, by desquamation. The experiments of this lady have given us valuable information regarding the pathogenic effects of this plant in the skin sphere; and it is hoped that she may be persuaded to continue her investigations for the benefit of science.—*North American Journal of Homeopathy*.

PHAGOCYTTIC ACTION OF ENDOTHELIUM OF TUNICA VAGINALIS ON SPERMATOZOA.—Widal and Ravant (*Bull. et Mém. de la Soc. Anat. de Paris*, June, 1902) have already published researches, demonstrated in December, 1900, before the Société de Biologie, on the action of the cells in the tunica vaginalis on fluids effused into its cavity. In a recent case some fluid was removed from the tunica vaginalis from an ordinary case of hydrocele which had been tapped ten days previously. The fluid contained endothelial cells loosened from the inner wall of the tunica. The majority of these free cells contained inside their protoplasm small oval bodies which stained like nuclei; some bore a filament which was coloured red by eosin, and was long enough to hang out of the cells. Some of the cells were stuffed with these bodies, which undoubtedly were spermatozoa; as many as ten of the latter were counted in one cell. The sperm cells probably indicated a slight wound of a seminal duct during the last tapping. Widal and Ravant added to some of the serum sperm cells from other subjects, but they were not digested by the free endothelium. It is clear, however, that endothelium has a phagocytic action on spermatozoa, a fact to be remembered in studying the pathology of fluid effusions and other morbid conditions in parts adjacent to the testes and their ducts.—*Brit. Med. Jour.*

ANALYSIS OF PYRETHRUM.—Ferdinand Jean (*Ann. de Chim Anal.* 1903, 285) gives the following results of analyses of several samples of this drug. The typical sample was powdered from the flowers by himself, and of the others only No. 1 was adulterated, chromate of lead and foreign woody fibre being found in it. He considered that a microscopic examination should always supplement the chemical analysis, and gives the following figures as (with the exception of those for sample 1) standards:

—	Type	1	2	3	4
	Per cent.	Per cent.	Per cent.	Per cent.	Per cent.
Ash	8·9	7·5	10	8·7	9
Acidity (as H ₂ SO ₄) ...	1	1	1·1	0·6	1
Alcohol-ether ext. ...	24	24·9	30·5	21·9	24·4
Resins	9·3	8	13·3	9·4	11·1
Water-soluble	14·7	16·9	16·7	12·5	12·3
Iodine-value	3·9	7·7	5·2	3·1	5·8

—*Chemist and Druggist.*

BILBERRY-JUICE FOR TYPHOID.—One of the latest medicines for typhoid fever is bilberry decoction. It is also said that both typhoid and colon bacilli are destroyed within twenty-four hours by the use of bilberries.—*Science Siftings*, Feb. 18, 1904.

MAMMARY CYSTS IN THE DIFFERENTIATION OF BREAST TUMOURS.—Abbe claims the gross appearance of cysts resemble malignant tumours, and that cysts are much more common than they are generally supposed to be. Out of ninety-seven cases of breast tumour forty-one were cases of mammary cyst. Cysts may be localised in any part of the gland; the scirrhus tumours are almost exclusively distributed between the nipple and the axilla. The localisation of a scirrhus tumour is on the axillary side of the nipple, and means a progressive advancing absorption of some infection having entrance at the nipple usually, and advancing by the main lymphatic channels. Cysts, on the other hand, are localised in any part of the gland. A tumour in the lower half is probably a cyst. A cyst is usually deeply placed, never dimpling the skin, and not drawing the nipple; in the majority of cases no fluctuation can be elicited.—*Medical Record*, August 15, 1903 (Bernard E. Bigler, M.D., in *Hahnemannian Monthly*).

VACCINATION IN WHOOPING-COUGH.—G. Cavaliere (*Gazz. d. Osped.*, June 1st) reports that in 1894 he had more than two hundred cases of pertussis under treatment. Almost all therapeutic measures proving useless, it occurred to him to try the effect of vaccination. He vaccinated more than a hundred children suffering from whooping-cough, but only in sixty-four of these did the vaccine take. Of the sixty four, only one, a baby of four months, died, whereas before the vaccine was used there had been many deaths. The vaccination had a favourable effect on the course of the disease, both diminishing the violence of the paroxysms and shortening the duration of illness, the vaccinated cases recovering in from three to three and a half weeks, while the unvaccinated cases either died within the same period or took eight or nine weeks to recover.—*British Medical Journal*, Sept. 28, 1895.

HOW TO ALLAY THE PAIN OF BURNS.—The immediate relief of the pain of burns and scalds is a matter of much practical importance to the surgeon as well as to his patients. Constitutional shock is thereby lessened, and one of the initial dangers of injuries of that class is avoided. The subject is one of widespread interest, and it is not altogether surprising to find the lay newspapers giving prominence to a means of stopping the pain of burns, said to have been lately introduced with great success by a surgeon of the Charité Hospital in Paris. The remedy, with which many readers are already doubtless familiar, is a solution of picric acid. That it is an altogether harmless application, as claimed by the Parisian surgeon, is a statement open to some question. Picric acid is toxic to man as to the lower animals, and when given internally causes gastric disturbance, rapid wasting, and universal staining of tissues, without elevation of temperature. If, then, a solution of the acid were applied to a large raw surface resulting from a burn or scald, absorption of a dangerous amount might readily take place. As every one knows, the pain of such injuries may be readily controlled by other means. Perhaps the best known is a solution of bicarbonate of soda, a teaspoonful to the pint of water, which often acts like a

charm. A weak solution of carbolic acid has an almost instantaneous action in controlling the terrible pain resulting from such wounds, and a similar observation is true of various other antiseptics, among them preparations of Sanitas fluid and oil. There could hardly be any more practical application of science than the relief of a distressing symptom of this kind by the modern surgeon.—*Medical Press.*

SALVIA OFFICINALIS.—In years gone by an infusion of the leaves of sage (*Salvia officinalis*) was highly appreciated in certain parts of Europe to combat the night sweats of phthisical patients, but its use has now given place to that of atropine, agaricine, and other anti-sudorifics of modern introduction. According to Dr. Krahn, a German physician, the oblivion into which sage has fallen was undeserved, for in some thirty-eight cases of hyperidrosis in which he employed this remedy, success rewarded his experiment in all but two. Most of his patients were tuberculous, but some of them were suffering from articular rheumatism, leukæmia, and typhoid fever. In eighteen of the cases the excessive perspiration forthwith disappeared, and in the remainder the effects were markedly favourable. He prescribed the sage at first in the form of an infusion containing about forty grains of the leaves to a pint of boiling water, of which the patient took a cupful three times a day, but he found subsequently that the tincture was far more active.—*Medical Press.*

FRUIT REMEDIES.—A recent investigation has shown (*Charlotte Med. Jour.*) that quite a number of functional diseases, as well as organic changes, are not only caused but greatly aggravated by gastro-intestinal disorders, also that many of these troubles are the direct results of auto-intoxication. This seems to be very marked in persons who eat large quantities of meat and who are reckless in their diet, and also in those who use spirits for their supposed tonic and nutritive effects. Rheumatism and gout are very often traceable to the toxic states caused by ferments in the stomach and intestines. In most of these gastro-intestinal troubles there is diminished alkalinity of the blood. The change of diet to fruit has produced remarkable effects in these cases.

A noted author has reported numerous cases of invalid children suffering from nightmare and excessive nervousness who were successfully treated by a fruit diet. Bread and cereals with ripe fruits were the sole remedies. In diabetes a recent author observes that fruit sugar can be taken to the amount of three ounces daily without increasing the output of sugar; whereas starchy food or sugar in the form of glucose always increases the amount of sugar eliminated. The ordinary diabetic prescription of meats, eggs, and milk, with exclusion of all vegetables containing starch, is found to be very advantageously supplemented by large quantities of fruits. They give variety to the diet and furnish the much-needed carbonaceous elements without increasing the sugar. They also diminish the gastro-intestinal decomposition, and hence take work from the kidneys, giving them better opportunity to store up sugar.

In Bright's disease the albumen is thrown off, while some of the poisons are retained. Medically, the effort is to diminish the loss of albumen and to get rid of the accumulated matters which the crippled kidneys are unable to take care of. By a fruit diet the ptomaines are diminished, and more acid and water are directed

toward flushing the kidneys. One author recommends giving the patient all the water he wants, together with all sorts of fruits, which increases the alkalinity of the blood, favouring oxidation of the sugar. There is evidently a great deal to be learned concerning the effects of fruit diet both in health and disease, and physicians should feel that the subject is worthy of a great deal of attention.—*Medical Times*.

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MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Barker (L. F.).** Description of Brain and Spinal Cord in Hereditary Ataxia. (Univer. Chicago Decennial Publications.) 50 pp. and 12 Plates. 4to, sd. (W. Wesley. Net, 9s.)
- Boericke (Wm.).** Pocket Manual of Homeopathic Materia Medica, Comprising the Characteristic and Cardinal Symptoms of all Remedies. 2nd. ed. Fcap. 8vo, 1r., pp. 682. (Hom. Publishing Co. Net, 17s. 6d.)
- Buchanan (R. J. M.) and Hope (E. W.).** Husband's Forensic Medicine, Toxicology and Public Health. 7th ed. Revised and Enlarged. Illust. Cr. 8vo, pp. xvi-724. (E. & S. Livingstone (Edin.). Net, 10s. 6d.)
- Celli (Angelo).** Malaria. According to the New Researches. Translated from the 2nd Italian ed. by John Joseph Eyre. With an Introduction by Dr. Patrick Manson. Maps and Illustrations. 8vo, pp. 300 (Longmans. Net, 4s.)
- Collie (Alexander).** The Infectivity of Enteric Fever. With Observations on its Origin and Incidence at Caius Coll., Camb., Festiniog, and Wicken-Bonant. 8vo, pp. 47. (J. Wright (Bristol); Simpkin. Net, 1s. 6d.)
- Cunning (Joseph).** Aids to Surgery. (Students' Aid Series.) 12mo. (Baillière. sd., 4s.; 4s. 6d.)
- Gadd (H. Wippell).** Drugs. Their Production, Preparation, and Properties. Cr. 8vo, pp. 192. (Baillière, Tindall & Cox. Net, 5s.)
- Gowers (Sir William R.).** Subjective Sensation of Sight and Sound, Abiotrophy and other Lectures. Cr. 8vo, pp. 250. (Churchill. Net, 6s.)
- Juler (H. E.).** A Handbook of Ophthalmic Science and Practice. 3rd. ed. 8vo. (Smith, Elder. Net, 21s.)
- Robinson (Mark).** A Guide to Urine Testing for Nurses and Others. 2nd ed. 32mo, pp. 56. (J. Wright (Bristol); Simpkin. Net, 1s.)
- Stacpoole (Florence).** Ailments of Women and Girls. Illust. Cr. 8vo, pp. viii-238. (J. Wright (Bristol); Simpkin. Net, 2s.; 3s.)
- Suckling (C. W.).** On Movable or Dropped Kidney. Its Relation to Diseases of the Nervous System. Roy. 8vo, sd. (H. K. Lewis. 1s.)
- Sutherland (Wm. G.).** Dispensing Made Easy. With Numerous Formulæ and Practical Hints to secure Simplicity, Rapidity and Economy. 12mo, pp. vii-102. (J. Wright (Bristol); Simpkin. Net, 3s. 6d.)
- Walker (E. W. Ainley).** The General Pathology of Inflammation, Infection and Fever. Being the Gordon Lectures for 1902. Cr. 8vo, (H. K. Lewis. Net, 4s. 6d.)
- Wiggins (W. Denison).** Midwifery for Midwives. Cr. 8vo, pp. 276. (Baillière. Net, 3s. 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, 8, *Bolton Street, Piccadilly, W.*

Letters to the Editor requiring personal reply should be accompanied by stamped directed envelope.

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.

Dr. Egbert Guernsey, Ranken, New York.—Dr. L. L. Danford, New York.—Dr. Richard Haehl, Stuttgart, Germany.—Dr. S. Vanden Baghe, Sheul, Belgium.—Dr. Jagielski, London.—Mr. E. L. Mitter, Sahebrye, Sakrighali, India.—Dr. Nebel, Montreux.

BOOKS AND JOURNALS RECEIVED.

Hom. Review.—Zoophilist.—Mind.—Revist. Hom.—Calcutta J. of Med.—Med. Times.—Allg. Hom. Zeit.—H. Monatsblätter.—The Chironian—La Propaganda Homeopatica.—Maanedsk. f. H.—H. Maandblad.—La Homeopatia.—Ind. Hom. Rev.—Hom. Envoy.—The Individualist.—Medical Century.—Rev. Hom. Française.—H. Recorder.—Wjestnik H. Med.—N.A.J. of H.—Clinique.—New Eng. Med. Gaz.—L'Art Médical.—Amer.

Medical Monthly.—University Homeopathic Observer.—H. J. Obst.—Jour. B.H.S.—Med. Adv.—Annaes de Med. Hom.—Lo Nuevo.—Amer. Phys.—Hom. Eye, Ear, and Throat J.—Hahnemannian Mon.—Pacif. Coast Journal of H.—Bournemouth Guardian.—Galway World.—Bromley District Times.—Bromley Chron.

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THE HOMEOPATHIC WORLD.

MAY 2, 1904.

PAUL FRANCIS CURIE.

Now that a revival is taking place in homeopathic affairs in these islands, it is of no little interest to recall the history of one of the missionaries who, somewhat over half a century ago, did more than any other single individual to spread a knowledge of homeopathy in England among the profession and laity alike. That interest is made all the more piquant by the fact that it is to his grandson of the same name—jointly with his wife—that the world owes the discovery of Radium. It is more than probable that the facts which are rapidly evolving in connection with the study of this metal will make the dense imaginations of the medical profession perceive the fact discerned by HAHNEMANN a hundred years ago, that there lies a potency in the infinitely little which the human organism responds to, though the relatively clumsy instruments and measures of science may not. It is even possible that the discovery of M. PHILIP CURIE may convince the physiological school of homeopaths that their brethren who use high potencies are not the fatuous dreamers some have deemed them to be. Therefore it may come about that CURIE, grandson, though a mere layman, may do for homeopathy as much as, if not more than, grandfather CURIE did.

For the last two years the HOMEOPATHIC WORLD has kept its readers well abreast of the doings of the scientific

world in respect to radium, so that little need be said on the subject here. On March 7, 1902, Professor HENRI BECQUEREL lectured at the Royal Institution on "Radio-active Bodies." BECQUEREL worked with uranium. In the course of his lecture he told how the occurrence of radiant bodies in other substances besides uranium, such as barium and bismuth, led M. and Madame CURIE to endeavour to isolate a general radio-active body from the several sources. They succeeded in extracting from a variety of pitch-blende containing barium a body called radium, and from another kind containing bismuth a body which they called polonium.

On June 19, 1903, M. PHILIP CURIE himself lectured on radium at the Royal Institution, and gave some remarkable demonstrations of its properties, an account of which will be found in the HOMEOPATHIC WORLD of July, 1903. It was only after four years' continuous work on the part of the CURIES that sufficient radium was obtained to determine its atomic weight.

The history of PAUL FRANCIS CURIE, M.D., may be found in Bradford's *Pioneers of Homeopathy*. It is taken mainly from the interesting obituary notice which appeared in the *British Journal of Homeopathy*, vol. xii. (1853). Dr. CURIE was born in 1799 in France. He studied medicine in Paris, where he had for his teachers BROUSSAIS, DUPUYTREN, BOYER, BÉCLARD, LISFRANC, and others. In 1820 he entered the Medical Military service, and continued to serve in various capacities till he was appointed field-surgeon to the National Guards of Mulhausen in 1830, and in that town he settled down to practice. Two years later he became a convert to homeopathy, and the year after, 1833, removed to Paris.

The name of LEAF is indelibly inscribed in the history of homeopathy in Great Britain, and happily there are still with us members of the LEAF family, as well as a Leaf Homeopathic Hospital at Eastbourne, to keep alive the work and memory of WILLIAM LEAF, to whom we

owe the transplantation of the burning energies of PAUL FRANCIS CURIE from Paris to London.

In 1835 Mr. WILLIAM LEAF, a London merchant who had business connections with France, was anxious to find a homeopathic doctor to open a homeopathic dispensary for the poor. Mr. LEAF was advised by one of his French friends to invite CURIE, and CURIE accepted the invitation. This required no little courage, as will be seen when it is understood that CURIE could not then speak a word of English. However, he soon got over that difficulty, and for the next eighteen years can hardly have talked anything else. He not only spoke it, but wrote English to very good purpose.

In 1837 appeared his *Principles of Homeopathy*, and in the following year his *Practice of Homeopathy*. The work which is best known to present-day readers—and which still commands its price as a live book in the second-hand book-lists—is CURIE'S *Jahr*. CURIE did an inestimable service to British homeopathy by translating and editing *Jahr's Manual of Homeopathic Medicine* in two parts—*Materia Medica* and *Repertory*. This has been the groundwork of some of the best work in homeopathy of half a century ago; and *materia medicas* of the summarising type—devoid of a Schema—which have been offered as substitutes to a lazier generation of homeopaths, have in no way improved on the old practice.

CURIE'S devotion to the work he was brought over to do is entirely admirable. He never lost sight of it in the days when his fame was established. He worked at his dispensary, and lectured at his hospital, with the double purpose of healing the sick and teaching others how to do likewise. Among the pupils who learned their practice from him, perhaps Dr. J. LAURIE—of *Domestic Medicine* fame—is the best known. Drs. FEARON, OZANNE, ENGALL, and CHEPMELL were also among his pupils.

Another feature of CURIE'S activity was his work in connection with the English Homeopathic Association,

founded in 1845, with Mr. SAMPSON as its chief promoter.

During the last few years of his life Dr. CURIE'S health had not been good, probably the result of his unremitting labours. He was frequently laid up with attacks of rheumatism. He was thus in no good condition to withstand an attack of typhus fever, which he caught from one of his patients in the hospital, and which proved fatal on October 5, 1853. He was buried in Norwood Cemetery in the presence of a large concourse of his relatives and friends.

Such was PAUL FRANCIS CURIE, and Great Britain has much to thank France for in the gift she made to us of CURIE'S life's work, and in the example he has left behind.

NEWS AND NOTES.

THE BURNETT FUND.

WE are pleased to say that the Hon. Secretary of the Burnett Fund has received the following donations since last report :—

	£	s.	d.
E. W.	5	0	0
An Old Patient	5	0	0
Mr. and Mrs. Hugh Ronalds	2	2	0
A Friend of the Cause	2	0	0
Mrs. Pole (8rd donation)	1	1	0
Dr. Lambert	1	1	0
A Grateful Patient of Dr. Clarke's	1	1	0

In addition to these Mr. J. Cliffe, of Newport (Mon.), has applied for a collecting card.

A FÊTE FOR THE B. H. A.

READERS will be glad to know that a fête is being arranged on behalf of the British Homeopathic Associa-

tion during the coming season. It is to be held at the Royal Botanical Gardens, on Thursday, July 7th, and it is anticipated that very high patronage will be obtained for the occasion.

THE EDUCATIONAL COURSE.

WE give on another page the Educational programme proposed for the coming session. It will be seen that an extensive bill of fare has been arranged. We hope that it will be largely utilised by graduates and senior students. Dr. James Searson, Dean, will be glad to answer all inquiries addressed to him, care of the London Homeopathic Hospital, Great Ormond Street, W.C., or at 86, Wimpole Street, W.

THE TREATMENT OF TUBERCULOSIS.

WE have pleasure in publishing this month a masterly paper on the management of cases of tuberculosis by Dr. Egbert Guernsey Rankin, of New York. We are by no means of those who despise the knowledge acquired by researchers into germ-life, or of the precautions their researches have shown to be desirable or necessary. We do not always accept the *relative* importance attached to the germ side of disease by bacteriologists; we think the vital side of greater importance from all points of view, and especially from that of therapeutics. This is where the curative value of homeopathy comes in, as Dr. Rankin points out. And homeopathy can take the utmost advantage of the work of the bacteriologists themselves. Dr. Rankin might have shown, if the purpose of his paper had led him thus far, how homeopaths had, both before and after Koch's researches, worked with infinitely greater success than he on the lines he laid down for himself. The cure of consumption in some form or other is an everyday matter for homeopaths, with or without the open-air adjunct. And homeopathy can act when it is not possible to obtain this most desirable condition.

AN INFINITESIMAL DISINFECTANT.

THE *Daily Telegraph* of April 12th has the following piece of news:—

“An expert of the Agricultural Department at Washington has discovered that typhoid and malarial fever mosquitoes can be exterminated absolutely. Experiments have been made with the water supply of New York, and have proved successful. They are still in progress. The water systems of great cities can be purified and stagnant and offensive pools be eliminated. It has been discovered that utilisation of the well-known Bordeaux solution, a mixture of copper sulphate and lime, will exterminate typhoid fever germs in drinking water and destroy malarial fever germs in stagnant pools and marshy places, as well as purify and clarify water supplies. The solution also destroys mosquitoes, and can be prepared practically at no cost. Only experts should use the solution in drinking water, as fatal results might follow the attempts of inexperienced persons. The expert has discovered also that the presence of Bordeaux solution in water has no bad effect upon the drinkers. Typhoid fever germs are destroyed within an hour. Watercress is not injured by the solution, as the amount used is so small that it could not be detected by chemical analysis.”

“Experts” have yet to learn that an amount may be so small that it cannot be detected by chemical analysis, and yet may be injurious to drinkers. It might not cause sudden death, or even immediate pains in the interior, but prolonged use of it might lead to serious injury to health without the cause being traced unless constantly looked for.

“MEDICINE AS SHE IS PRACTISED”—IN RUSSIA AND ELSEWHERE.

THE *Medical Press* of April 20th gave an interesting bit of self-revelation of allopathy in the following paragraph:—

“CONFESSIONS.

“The recent translation into English of *The Confessions of a Physician*, by V. Veresaëff (V. Smidovich), gives our profession the opportunity of reading a book that created a tremendous stir in Russia when it was first issued. Dr. ‘Veresaëff’ might be said to have ‘given the show away’ as far as the practice of medicine in Russia was concerned, and naturally the Russian doctors did not like it. Moreover, a large number of students were induced to give up reading medicine and take to other studies when it was brought home to them what their lot would be when they had attained their *desideratum*—a medical degree. The confessions divide themselves

into two parts, one a disclosure of what the lot of the Russian doctor dependent on his profession for a livelihood consisted in, and the second a rather jaundiced view of the potentialities of medicine to achieve any good at all. As to the first part, it may be said at once that the practice of medicine among the poorer classes of Russia seems considerably worse than the practice of medicine under Irish dispensary conditions, which are bad enough in all conscience. As to the second, there is much that is unfortunately true in great measure. Dr. 'Veresaëff,' after discussing the powers and applicability of medicine in various conditions, asks whether, as the knowledge of its operations is so empirical, medicine can really be learned at all. 'What,' he says, 'I could not reconcile myself to, and what shook my satisfaction in my life's work, was the utter fictitiousness of these powers in the face of modern reality.' Few of us have not felt the same at one time or another, but, if one looks at the alternative—surely, it is far better that the practice of medicine should be in the hands of honest men who work, as far as may be, on logical lines, than exploited by vicious and unscrupulous adventurers whose only object is to fill their own pockets. If Dr. 'Veresaëff' looked back a hundred years would he hesitate to say that the sufferer is in an infinitely better position with regard to relief and cure than he was before anesthetics, antiseptics, and Röntgen rays were thought of? Study, patience, and zeal will yet bring to light many other arcana of still greater benefit."

If this is all the extenuation the *Medical Press* can urge in the face of this tremendous indictment, we wonder where its dread of the homeopathic infection can come in. Surely the spread of homeopathy could not possibly make things worse! In serious fact there is nothing besides the science of homeopathy which can save the profession of medicine from the sting of such criticism as that of "V. Veresaëff."

ASEPSIS VERSUS ANTISEPSIS.

THE following letter appeared in the *Medical Press* of April 30th:—

"PALMAM QUI MERUIT FERAT.—A PROTEST.

"To the Editor of the *Medical Press* and Circular.

"SIR,—How often will it be necessary to protest against the statement—repeated in the current number of the *Medical Press* and *Circular*—that Lord Lister is the founder of aseptic surgery?

"It is not even correct to say that the aseptic system is the outcome of the antiseptic. That the former followed the latter is true, but it was as a protest against it, and a distinct advance upon it.

"The men who advocated the aseptic system under the name of *cleanliness* only met with abuse—as witnesseth my double rejection by a London society because of my views on this subject—and even now do not get the credit which is their due. This, too, in the face of the fact that in his address at Berlin Lord Lister renounced his system.

"The late Mr. Lawson Tait's record of 136 consecutive ovariectomies without a death, and my own of ninety—in a public hospital—still stand unrivalled. These operations were done under a system of simple *cleanliness*.

"I only ask for fair play, which is supposed to be a characteristic of the British mind. Is it too much to expect that this will be forthcoming?

"I am, Sir, yours truly,

"GEO. GRANVILLE BANTOCK.

"14, Upper Hamilton Terrace, N.W."

Is it *only* fair play you ask for, Dr. Bantock? This is indeed too much to expect! Fair play may be a characteristic of the British mind; but it certainly is not a characteristic of the British medical mind—or any other class of medical mind, so far as our experience goes. "Truth," they say, "is in a well." Fair play, so far as medicine is concerned, is at the bottom of the deep blue sea. To expect it shows an engaging degree of innocence which we should have thought Dr. Bantock would have outgrown by this time.

DR. MACK'S LETTER.

At the request of Dr. Mack we print his reply to the *British Medical Journal's* criticism on his pamphlet. We cannot, however, say that the good doctor's effort gets us any "forrader." Pleas for "unity" between allopaths and homeopaths are to our thinking simply futile; and when Dr. Mack talks about "*both* homeopathy *and* rational medicine," he gives his case away. Homeopathy *is* rational medicine. Medicine is the art of curing by medicaments, though the majority of medical men don't seem to know this; and the art of curing by medicaments is homeopathy. This is rational medicine. Other measures may be not irrational, but rational medicine is homeopathy, and homeopathy is rational medicine. We do not make this remark in the expectation that any allopath will accept it. The only argument we expect to prevail with is the *argumentum ad marsupium*.

An intelligent public will not be content to pay fees indefinitely to men who parade their inability to cure, and a time is coming when no educated person will accept a sentence of death, or a sentence to operation, from an allopath without first taking the advice of a homeopath on the matter. In the end, the faculty will be compelled to study homeopathy in self-defence.

PRUSSIC ACID IN MILK.

FROM the *Daily Telegraph*, April 1st :—

“At Brentford a Chiswick milkman, named Wier, was summoned for selling skim milk with 11 per cent. of added water.

“Inspector W. Tyler said that samples of the milk, which was machine separated, were taken, and the public analyst had declared it to have 11 per cent. of added water. It was, in any circumstances, only equal to water with an addition of chalk, and it was sold at one penny per quart.

“Defendant said they had been very short of milk lately, and a powder was used to make the milk.

“Inspector Tyler said he had a sample of the powder, and, producing a glass of water, proceeded to mix what was to all appearances milk. He said it had the smell of fresh milk, and to preserve it a small quantity of prussic acid was used.

“In answer to Mr. Montagu Sharpe, he said he would not care to sample it, whereupon it was suggested that a dog should be tried.

“In imposing a fine of £3, Mr. Sharpe said it was dreadful to think that poor children were forced to drink such unhealthy rubbish.”

STRYCHNINE PILLS.

THE lost art of prescribing is exemplified in the following item of news from the *Daily Telegraph* of April 23rd:

“Strychnine pills were prescribed by a doctor for one of his patients in the following vague manner:—‘Arseniate of soda, ten grams; sulphate of strychnine, five grams; for one pill, number twenty.’ The physician meant that twenty pills were to be made of the total fifteen grams. The chemist’s boy understood the prescription to be for twenty pills, each containing the above quantities, and made them up accordingly. Neither he nor his master apparently felt any misgivings at the large quantities ordered. Strychnine not being a medicine to trifle with, the unfortunate patient who took the pills very nearly died. He sued the doctor and the chemist for £1,000 damages, but has only been awarded £20. The physician has been sentenced to one month and the chemist to six days’ imprisonment, the benefit of the First Offenders’ Act being allowed to both, and two fines have been imposed of £4 each.”

"SHAKESPEARE AND PHYSIC."

WE have in type under the above title an article by Dr. Dudgeon, which will, we have no doubt, be read with great interest by all our readers. Rather than spoil it by division we are compelled to hold it over till next month.

ORIGINAL COMMUNICATIONS.

TREATMENT OF PULMONARY
TUBERCULOSIS.*

By EGBERT GUERNSEY RANKIN, M.A., M.D., Professor of Theory and Practice of Medicine, New York Homeopathic Medical College; Physician to the Metropolitan Hospital and Tuberculosis Infirmary, Department of Public Charities, and to the Flower Hospital, New York.

THE universal prevalence of tuberculosis and its appalling mortality, standing in marked contrast with the now fuller knowledge of the disease and more reasonable hope for its limitation, if not ultimate comparative eradication, lends an unremitting importance to its discussion.

In our earlier days we all can recall how in our hospital rounds the phthisis case was clinically passed by. Now, while the individual case may still be devoid of interest, no other subject is so prominently and so persistently brought before the profession as that of pulmonary tuberculosis. Whence this change? Obviously in part from the recognition of its infectiousness, and in part from a clear understanding of its management. The former characteristic may be said to really enhance the chances of prevention, for it opens the way for a more effective adaptation of prophylaxis, which is the first essential in the treatment of the disease, and which constitutes at the present time the main hope of its extermination.

Let us first consider this great question of prevention. It is well known that the dried sputum, which becomes disseminated in the atmosphere, is the chief source of infection. The use of infected articles, such as table appurtenances, towels, &c., constitutes another important

* Read at the meeting of the King's County Homeopathic Medical Society, Borough of Brooklyn, New York, February 16, 1904.

source, but one which is necessarily much more limited. Given a case of pulmonary tuberculosis, what should the physician do? Theoretically there can be no doubt that the patient should be removed from the presence of non-infected persons. That implies a sanatorium, hospital, or camp. At the present time, both from the standpoints of practicability and sentiment, such a plan can be carried out in only a limited number of cases. What shall be done with the man or woman dependent upon their own exertions for a livelihood, or worse still with a family to support, who has tuberculosis, but who is yet able to work? Shall such a person be forcibly removed and sent to a tuberculosis institution? What shall be done, again, with the patient who has a home where he can remain and be cared for after a fashion, but who cannot afford to go away; or what shall be done with the patient who having been in an institution leaves it worse and goes home to his family to end his days? These are certainly difficult questions. To attempt a rigid enforcement of quarantine would at the present time obviously arouse a storm of opposition. Again, any such plan would be utterly unfeasible, for there is not sufficient accommodation in the State for the effective segregation of tuberculous persons. Accepting the situation as it is, what then can be accomplished toward solving these difficult problems.

First, educate the public as to the nature of tuberculosis and the precautions to be taken when living in its presence. The efforts, therefore, which are now being carried on to educate the masses by free lectures and the distribution of literature should receive the hearty endorsement and co-operation of the profession.

In the household the following rules should be rigidly enforced. The patient should expectorate only in receptacles prepared for this purpose, namely, especially prepared paper sputum cups which should be burned after use. In the Metropolitan Infirmary tightly corked wide-mouthed bottles for ambulatory cases, and covered sputum cups for those confined to the bed are used. In both a small quantity of a 20 per cent. solution of carbolic acid is placed. Once in twenty-four hours these vessels and their contents are subjected to a temperature of 250° F. and then cleansed. Handkerchiefs for nasal discharges, &c., should be boiled, or better, the so-called Japanese napkin may be substituted and burned after

use. Male patients should be smooth shaven. When coughing patients should be enjoined to hold a handkerchief before the mouth in order to prevent the dissemination of fine particles of sputum. The patient, it is needless to say, should sleep in a room by himself, with the window open all the year round. Carpets and hangings should be removed. All table appointments should be washed separately and kept apart from those used by other members of the family. The clothing, bed linen, and towels should also be sterilized or washed separately. These details, it is well known, are now being completely ignored in many households in which there are tuberculous persons; partly through lack of full appreciation of their importance, but principally through ignorance.

Some may claim that all these precautionary measures are uncalled for, that there are many families where only one case of tuberculosis has occurred. True, but there are many others where there have been several, and every month brings to the Infirmary on Blackwell's Island from 150 to 160 new patients.

The care of children with tuberculous tendencies is very important. In the instance of a tuberculous mother, it is needless to say, both for the sake of the mother as well as the child, nursing should be forbidden, even when the disease is only suspected. The diseases of childhood which are prone to be attended with pulmonary complications should receive especial attention. Naso-pharyngeal catarrh and glandular enlargements should also receive treatment. Adults with hereditary tendencies should be careful to maintain the general health and nutrition at as high a standard as possible, and should never reside under the same roof with an infected person.

There is another side to this all-important question of prevention, namely, the public or legislative. Our laws in regard to the prevention of tuberculosis are still in the embryonic stage. The Board of Health of this city, it is true, has for several years recognised the infectious nature of the disease, and is doing a great work in its free examination of sputum, for which too much praise cannot be given, nevertheless each case is practically left free to follow its own inclination. The Department of Public Charities arose to the occasion, January 31, 1901, rather tardily but none the less effectively, under the administra-

tion of the Hon. Homer Folks, when it opened the now very successful Tuberculosis Infirmary on Blackwell's Island. There are at the present time in the Greater City of New York accommodations for about only 1,450 tuberculosis patients. When we compare these figures with the estimate of 25,000 tuberculosis patients said to be present in this city, the inadequacy of the present accommodations speaks for itself. It is gratifying to note, however, that more extensive municipal institutions are now contemplated.

It is also gratifying to observe that the laws in regard to expectoration in public places are now being more rigidly enforced. Street railways' officials should be made to see the importance of the more rigid enforcement of the Board of Health law, a copy of which is posted in the cars.

The laws in regard to the sale of infected milk and meat, it may be said, are effective, and fairly well control the situation. It may not be amiss to recall in this connection that the statement that bovine tuberculosis will not infect man has been proved to be an error.

A summary of the essentials of prophylaxis of tuberculosis is as follows: First, a stricter application of preventive measures in the household; second, the active co-operation of the profession in the dissemination of a knowledge of the true nature of the disease; third, rigid enforcement of the law against expectoration in public places; fourth, the establishment of sanatoria and pay hospitals for tuberculous persons of moderate means, and a greater number of free institutions.

In the treatment of pulmonary tuberculosis there are three great factors, viz., fresh air, the maximum degree of nutrition and therapeutics. It is an accepted and undisputed fact that abundance of fresh air and super-alimentation are the first requisites in the management of the disease, and the chief agents upon which the hope of recovery depends. To obtain the benefits of the first implies life in the open air with proper hygienic surroundings, and the selection of a suitable climate. Generally speaking, fresh air, no matter its quality, is of decided benefit. This has been proved by the results on Blackwell's Island, where it must be admitted that the climate is not ideal. In determining the question of a climate for a given case, the condition of the lungs, the general

health, and, to a certain extent, the personal taste of the patient must all be taken into consideration. Those who are in the advanced stages of the disease, as indicated by hectic, emaciation, and extensive consolidation, should remain at home if the proper precautions can be carried out, or, at least, should not be sent away with the idea of improvement.

In selecting a locality on account of its climate, equability, the maximum amount of sunshine and the minimum of moisture are the essentials. Dryness, however, is not always imperative, as witnessed by the results obtained at the Metropolitan Tuberculosis Infirmary. Altitude is an important element, and must always be taken into account. The following is a general summary of the indications as to high altitude in the climatic treatment of pulmonary tuberculosis:—

1. Early and slight consolidations at the apex, with mild constitutional symptoms, are most benefited.

2. More advanced cases with consolidations but no cavities or serious complications also do well. When the apices are much involved, the pulse over 100, temperature about 100° F., a low altitude is better at first; a high altitude may be tried later.

3. Early cases with hemoptysis without fever or marked evidences of the disease are benefited. Likewise convalescents from pneumonia and pleurisy with tendencies to tuberculosis.

4. Advanced cases should not be sent to high altitudes, that is, cases with cavities or marked hectic symptoms. A small cavity is not a contra-indication.

5. The presence of active cavities, nervous palpitation, emphysema, fibrosis, empyema, albuminuria, and diabetes is a contra-indication. Laryngeal complications are generally considered as contra-indications, but such cases frequently do as well in high altitudes as elsewhere. The presence of a valvular murmur, with no evidence of enlargement, is not a contra-indication.

While altitude and climate are of great importance, a patient with a good family history, who is yet in the early stages of the disease, will do well almost anywhere if he lives in the open air. When the lungs are much involved and cavities have formed, a mild climate is the best. A permanent arrest of the disease in such cases, however, cannot often be obtained. An important detail, what-

ever locality be selected, is freedom of soil from dampness.

Having decided upon the place of residence, how is the patient to live? He should almost literally live out of doors. The most effectual method of obtaining the benefits of open-air treatment is camping. The patients for whom camp life is suited are those in the early periods of the disease who retain a fair degree of strength and vigour. One of the beneficial features of this novel method of living are the many little duties incidentally connected with it, in which the patient should be encouraged to participate. The best season of the year is the spring and summer. When winter approaches the patient should not return to city life, but should continue the open-air treatment at some sanatorium. To affect a permanent arrest of the disease, at least two seasons are necessary.

In selecting the site of the camp great care should be exercised as to dryness of the soil and protection from the wind.

Another important factor in treatment is life at sanatoria. These institutions are suited to a wide range of cases, and rank next after camping. Open-air treatment is practised at all. The patient has in addition the advantage of medical supervision and regulation of diet.

It is apparent that a very large number of persons cannot select the most suitable climate, or cannot leave home at all. What, then, is to be done? Let the patient live out of doors as much as he can wherever he is. In a town with residences with large yards, the requisites for open-air treatment can usually be obtained. A porch with southern exposure, protected from the wind and rain by sliding-glass windows, in which the patient should remain all day, both in winter and summer, will quite well fulfil the conditions. When the porch is not practicable the so-called sun-trap may be substituted. In a city with the buildings in close proximity, it must be admitted that the opportunities for open-air treatment are limited. A room with sunny exposure with the windows open is perhaps the most available substitute. In tenement houses a suitably located fire-escape may be used to good advantage.

An imperative rule in the open-air method is that the

patient should be kept perfectly warm, absolutely dry, and free from exposure to the wind.

Of equal prominence with fresh air is nutrition. The condition of the powers of assimilation exert a decided influence on the outcome of the case. A feeble digestion and loss of appetite, if persistent, are of unfavorable significance. When these symptoms are present in early cases, frequently a sea voyage will prove of benefit. Camp-life will also often act as an excellent aid to both appetite and digestion.

When the digestion is good the writer advises three regular meals daily at the usual hours, with the addition of semi-solid or liquid nourishment, three times a day, namely, at about 10 a.m., 2.30 p.m., and on retiring. The idea is to give the supplemental meal about an hour and a half after the regular meal, thus avoiding destroying the appetite for the next meal.

The food for those with good digestion should consist of ordinary articles, selecting those which are most nutritious, especially under-done red meats and fats. When the digestion is weak the diet should be semi-solid or liquid. Milk may be taken in liberal quantities, in fact, *ad libitum*. A very excellent plan is to give the patient a glass of warm milk in the morning on waking, the mouth being first cleansed. Eggs should be taken liberally. They may be used in all forms except fried, but are best raw. Vegetables except cabbage, fruits, especially grapes, simple milk pudding should also form part of the dietary. In public institutions lentils are recommended on account of their high nutritious qualities and small cost. Alcoholic drinks have their use. Generally the patient in the early period of the disease does better without them. A little red wine with the dinner will, however, often assist digestion and increase the appetite. Advanced cases are generally helped by small quantities of whisky. Milk punches of whisky or rum may be used. Porter or ale is frequently of very great benefit in early cases, especially the former when it can be assimilated.

The clothing should receive attention, and great care exercised to keep the patient warmly clad. Woollen underwear should be worn, but heavy chest-protectors are not commended. Care should also be exercised to keep the feet warm and dry.

Bathing should be by no means omitted. It should be practised daily, especially if there are sweats. Sponging should be the method of its application, using tepid water, except for the chest, where cold water may be used, followed by a brisk rubbing.

Allusion has been made to cleansing the mouth; this should be practised each time before taking food. The nose and pharynx should also be sprayed once daily. Some non-poisonous germicide may be used both for the mouth and naso-pharynx, such as a preparation of eucalyptus, boric acid, thymol, &c.

Occupation, exercise and rest must also be considered in detail. In early cases some outdoor occupation is of great advantage. It is well known how many opportunities of this nature camp-life affords, such as hunting, boating, fishing, and so on. Light gardening may suit some cases. Walking may also be allowed. A rule in regard to all forms of exercise, which should always be strictly adhered to, is that when there follows a rise of temperature of 100.5° , this elevation of temperature should be considered as a signal to discontinue or modify the exercise.

Rest is even of greater importance. When exercise is followed by a rise of temperature, the patient should go to bed, and remain there for at least part of the day, or better still, he should recline on a steamer chair in the open air. This repose should be maintained until the temperature falls below 100° and remains there. In many cases six or eight weeks will pass before this result will be attained. On beginning to go about the patient should do so gradually. It follows from this that patients with a temperature of 100° and upwards should spend a greater portion of the time in repose. An excellent plan in starting treatment is to keep the patient in bed or in a steamer chair for the first week.

Let us now turn to the third great factor in treatment—therapeutics. The unanimity of opinion which prevails in regard to fresh air and nutrition stands in contrast to that in respect to therapeutic measures. The long sought-for specific is as elusive as ever. Many times it has been thought to be within the grasp, and as many times has investigation shown its non-existence. These repeated failures and the consequent secondary position of drugs in the treatment of pulmonary tuber-

culosis have led many to discard them entirely, except for complications and as palliative.

Of the many drugs which have been used, *Creosote* is properly the most popular. The failure of the remedy to act as a bactericide when administered in medicinal doses is too well known to call for comment. It often proves, however, of decided benefit in some cases in stimulating nutrition. Those in which there is absence of gastric symptoms are best suited to its use. *Guaiacol*, its derivative, will sometimes lessen the cough and expectoration, but does not appear to have any real power in arresting the course of the disease.

Ichthyol, at one time the subject of favourable comment, has, like a host of other remedies, fallen into an indifferent position. The writer has used it in some forty odd cases, in some with apparent decided benefit, in others with none. The remedy was administered in capsules, beginning with three drops three times a day, and pushed to the point of tolerance, which in the writer's experience was reached when the dose was seventeen drops.

The *hypophosphites* are simply useful tonics. *Cod-liver oil*, it is needless to say, has long ceased to be regarded as anything more than a nutrient, and in pulmonary tuberculosis its powers in this respect have been somewhat over-estimated. Its acts as a rule rather better in children than in adults. In public institutions it constitutes a useful adjunct to the dietary.

Iodoform, on account of the beneficial effects obtained by its injection into tuberculous joints, was thought to be a remedy of promise, but the impracticability of bringing it in contact with the diseased pulmonary surfaces are evident. The writer a few years ago experimented with inunction of *Iodoform*, using an ointment in the strength of 2 drachms to 10 ounces of the base, a drachm applied daily after the manner of mercurial inunction. In some instances there was improvement. The method, however, is very disagreeable, and only suited to hospital cases.

Serumtherapy, which has held such a prominent position in the therapeutics of the disease in question, has never seemed to the writer to have gone beyond the early experimental stage, and the reports in regard to it have been so doubtful that it has never been used at the Metropolitan Tuberculosis Infirmary.

Experimentation with the use of the X-ray, inhalation of vapour impregnated with radio-activity, and thorium activity are now in progress. The X-ray has been used some months on ten patients, in some of whom improvement is marked, but the observations on this subject are not yet complete. The use of radium and thorium is every recent, and no conclusion has yet been attained.

Thus the search goes on; but with all our positive knowledge of the etiology and pathology of pulmonary tuberculosis, we are as far away as ever from the long sought-for specific bactericide. Whether or not radium, with all its wonderful and mystic powers, will open the way for something definite, remains to be seen. In the meantime while science is searching, what shall the practical physician do? Shall he abandon all medication and rely solely on hygiene and nutrition? The answer to this question in the writer's opinion is in the negative—patients with tuberculosis in many instances do better with medicines than without. Incipient cases can well be left to fresh air and super-alimentation alone, but those in whom the disease is well established are certainly assisted by remedies. While it is difficult to make claims for any one line of therapeutics, pending the discovery of some definite and practical anti-tubercular agent, if ever such is discovered, there is a class of remedies which, according to the experience of the Metropolitan Tuberculosis Infirmary staff, should receive especial attention. These are those administered according to the principal of similia, selecting drugs which act upon the whole system, especially the pulmonary tissues and nutrition, such as *Arsenicum* in its various forms, especially the iodide, *Stannum*, and *Antimonium* iodide, *Phosphorus*, *Silicea*, the several varieties of *Calcarea*, &c.

Again, there can be no doubt that remedies of this class are also valuable aids in the various complications of pulmonary tuberculosis, for their beneficial effects have been proved over and over again, as for example, *Arsenic* in the diarrhea, *Bryonia* and *Kali carb.* in the pleuritic complications, *Agaracine*, and *Pilcarpine* in the night-sweats, and *Millefolium* for hemorrhage.

In calling attention to the valuable assistance of these remedies, it is not intended to imply that they possess in any degree anti-tubercular properties—the absurdity of such an idea is manifest—but that carefully administered

according to their individual indications, they are useful adjuncts to the cardinal factors of treatment—fresh air and nutrition.

226, Central Park South, New York.

M. CURIE AND HIS GRANDFATHER.

BY DR. CLARKE.

WHEN Dr. Cartier's article in the *Revue Homeopathique Française*, entitled "*A Propos du Radium: M. Curie, fils et petit-fils de Médecins Homeopathes*," came under my notice, it occurred to me that it contained a point of no little interest to the British public, whether homeopaths or not. I therefore wrote eight letters to leading daily papers, and of these eight five were published. As all the letters were different, and as readers of the HOMEOPATHIC WORLD may not have seen them all, I give them below. The journals which refused to print letters on the subject are the *Times*, *Daily Telegraph*, and *Westminster Gazette*. I give the letters which did appear in the order of the dates:—

"M. CURIE'S BRITISH ANCESTOR.

"To the Editor of the Morning Post (April 6th).

"SIR,—Your readers may like to know that the discoverer of radium has a strong link with this country. His grandfather, Dr. Paul Francis Curie, came to England in 1835 in response to the invitation of Mr. William Leaf, a merchant who had extensive business relations with France, to practice and teach homeopathy. Some years before, Curie had embraced the system of Hahnemann, and practised it with great success in Paris. Thanks to his great skill as a practitioner and his ability as a teacher and writer, there was no better-known medical man in London than Dr. Curie, and though he died as long ago as 1853, there are many still living who cherish an affectionate remembrance of him. When he died a large number of his *confrères* and friends assembled at his grave in Norwood Cemetery.

"Dr. Curie's son was also a homeopathic practitioner, but he practised in Paris until his retirement. He still lives at Fontenay-aux-Roses, near Paris, and his wonderful son and daughter-in-law make their home with him.—Yours, &c.,

"JOHN H. CLARKE, M.D.

"Bolton Street, April 5th."

“ M. CURIE’S GRANDFATHER.

“ *To the Editor of the Daily Mail (April 6th).*

“ SIR,—Your readers may like to know that M. Curie, the discoverer of radium, has a link which binds him to this country.

“ His grandfather, Dr. Paul Francis Curie, lived and practised in London for the most active period of his life. He was born in 1799, took his M.D. of Paris in 1824, served in various capacities in the French army medical service until his conversion to the doctrines of Hahnemann, which took place in 1832. Soon after this he commenced practice in Paris. In 1835 he was induced to come to London by Mr. William Leaf to teach and practice homeopathy in this country. This he did with remarkable success. He died in 1853, and was buried in Norwood cemetery.

“ There are numbers still living who can testify to his great skill and kindness.

“ JOHN H. CLARKE, M.D.

“ Bolton Street, W.”

“ M. CURIE’S ANTECEDENTS.

“ Dr. John H. Clarke, of 8, Bolton Street, W., writes to us (*Daily Chronicle*, April 8th) as follows :—

“ I think there can be little doubt that the discovery of radium and radio-activity is the chief scientific event of modern times. Such being the case, no little interest attaches to the discoverer and all that concerns him.

“ M. Curie is not a medical man, and the claims of rival schools of medicine concern him not at all. But none the less, there is an interesting point in his ancestry connecting him with the medical profession—both his father and his grandfather were distinguished medical men, and both were practitioners of homeopathy.

“ Curie père still lives, and the Curies of radium fame make their home with him at Fontenay-aux-Roses, near Paris. He is now seventy-five years of age, and before his retirement practised homeopathy in Paris. He distinguished himself by researches on Gold, on Drosera, and on Bryonia. He always had a leaning to the scientific side of homeopathy.

“ The father of this Dr. Curie was scarcely less distinguished than his famous grandson, and he is especially interesting to our countrymen in that he lived and died and was buried in our midst. Paul Francis Curie, M.D., of Paris, and later, of Aberdeen, came to this country in response to lay invitation

to help to plant and spread the system of Hahnemann in these islands.

"It seems to me that there is much significance in the relationship between these famous Curies. All three have been pioneers in scientific thought. The discovery of Hahnemann, which the first Curie was quick to apprehend, that from so-called inert bodies potent therapeutic properties might be developed by a process of attenuation, may be paralleled by the discovery of radio-activity in bodies in which its existence was not suspected until the third Curie and his wife, no less famous than himself, revealed it to an astonished world."

"THE DISCOVERER OF RADIUM.

"To the Editor of the Daily News (April 9th).

"SIR,—An article by Dr. François Cartier, of Paris, in *Revue Homeopathique Française* of February last recalls a fact which may have some bearing on M. Curie's great discovery, and which is certainly not without interest to the English public. M. Curie's father and grandfather were both homeopathic practitioners, and a cousin, Dr. Depouilly, is at the present time a well-known homeopathic practitioner in Paris. The particular interest to English readers in this connection centres in the grandfather, Dr. Paul Francis Curie, who was M.D. both of Paris and Aberdeen, and who lived for the most active period of his life in London, died in London, and was buried in Norwood Cemetery. Little more than half a century ago there was no better known or more widely loved and respected medical man in London than Dr. Curie. Dr. Curie was induced to settle in London by Mr. William Leaf, who established a homeopathic dispensary in Finsbury Circus in 1837, over which Dr. Curie presided.

"Dr. P. F. Curie's son, the father of the discoverer of radium, is still living at the age of seventy-five, but is not now in practice. M. and Mme. Curie live with him at Fontenay-aux-Roses, near Paris. The discoverer of radium is not a doctor, but purely a chemist and physicist. But it is fair to ask, May not heredity have had some share in leading up to his discovery? His grandfather was a pioneer in medicine, as the grandson is in physical science. Both grandfather and father were by mental habit accustomed to work with infinitesimal quantities, and measure powers which made no appeal to the grosser senses. Happily for the grandson there is no heresy connected with radium, and up to the present neither school of medicine has made any exclusive claim to its use. But the discovery of radio-activity

in bodies supposed to be inert throws no little light on the therapeutic powers developed by the methods of attenuation invented by Hahnemann.—Yours, &c.,

“JOHN H. CLARKE, M.D.

“Bolton Street, W., April 3rd.”

“M. CURIE AND HOMEOPATHY.

“To the Editor of the Daily Graphic (April 12th).

“SIR,—A week or two ago you published an interesting leader on the ‘proving’ of drugs by means of experiments on healthy human beings. This method you rightly described as much superior to experiments on guinea-pigs. You are doubtless aware that this method is the foundation of Hahnemann’s system. The entire practice of homeopathy is founded on the experiments which Hahnemann and his followers have made on themselves.

“It is interesting to note in this connection that the father of M. Curie, the discoverer of radium, was a homeopathic practitioner in Paris, and his grandfather, Dr. Paul Francis Curie, was one of the best known of London’s practitioners little more than half a century ago. M. Curie is not a doctor, but a chemist and physicist. But he has so far followed the traditions of his father and grandfather that he has made experiments on his own body as to the physiological properties of radium. Dr. Paul Francis Curie practised homeopathy first in France and later in London, where he lived and died. He had a large share in the introduction of homeopathy into England, and published many valuable works. He died on the 5th of October, 1853, and was buried among a large concourse of *confrères* and friends at Norwood Cemetery.—Yours faithfully,

“JOHN H. CLARKE, M.D.

“Bolton Street, W.”

WHENCE? WHITHER? ODD THINGS IN
PRACTICE.

By DR. JAGIELSKI.

THE educated medical man of intelligence robs death of its sting and the grave of its victory, for he knows the secrets of the health that leads to success and happiness; he fosters our physical, mental and spiritual progress; he teaches us to avoid wrong-doing towards ourselves and towards others, and that “*self-control is*

the climax of the highest education," by which we learn the necessity to control desires, habits and passions for the sake of our own and others' happiness. He teaches us how our mental force and exercise will not only control physical matter and functions, but will also bring us to study and control the operations of our own and of others' minds, for mind gets the control over minds. Persuasion, of course, is very often difficult, and patients are often unable to follow their doctor's advice, and sometimes even misconstrue it. Each day we find patients more and more distrustful of medicines, because they hear now so frequently how cleanliness, pure air, pure food and water, together with regular exercise, benefit the health of sufferers, and how avoidance of worry and troubles, less eating, less sleeping, and earlier rising, with proper and adequate occupation (as in *Little Mary*) make life worth living. Try to forget your sorrow, and the company of kind thoughts will help to heal you of your diseases: if you would live long keep in the sunshine, be yourself sunny, cheerful, amiable and tranquil. The belief in the immortality of man demonstrates conclusively that "there is no death." By "each day doing better than ever before" in this earthly life man prepares himself best for the next life. Meanwhile it must not be thought that this paper is going to bring before its readers cases that have been cured by mesmerism or hypnotism, by suggestion, or by Christian Science, &c., nor need any fear be entertained that the writer should have the *medio-mistic* powers of diagnosing and healing which now so many appear to have by natural gifts, or that he should be *en rapport* with pre-deceased medical notorieties or have the privilege of being in communication even with the spirit of the medical genius of Samuel Hahnemann himself. Nor is it chaffing to say all this; far be it from me to doubt or deny any wonderful, marvellous or so-called supernatural cures by any means, for I know this world is a very great *curiosum* and *mysticum*, before which all minds are staggering; indeed, have we not at present to admit, that quite suddenly unexpected things are happening—the discovery, for instance, of the power of seeing now what formerly clairvoyance alone could see, and for which it was discredited, blamed, pooh-poohed and ridiculed; yet it is to-day proved by *ad*

oculos demonstration, in the form of skiagrams, that we can see, by means of Röntgen's light, the fractured, swollen and altered bones, and within these, or anywhere in the body, pieces of metal, such as bullets, swallowed coins, needles, and the like. How happy, for instance, would we have been had we been in possession of Röntgen's apparatus to detect at once and without difficulty the shot in Garibaldi's foot, for which so many consultations and soundings had to take place, and such a long time was wasted before the great Nélaton, of France, was consulted, and decided, by his special sound, that the ball was embedded in the inner ankle one inch from the outlet of the wound.

Seventeen surgeons, and perhaps more, were in consultation upon Garibaldi within about two months. After examining the poor hero with their fingers and sounds, and without any anesthetics, they could not positively prove the presence of the lead ball until Professor Zannetti, of Florence, extracted it, after Nélaton's indisputable diagnosis, on the 9th of November, 1862. Garibaldi was wounded in September, at the battle of Aspromonte, by his own countrymen, and he remained in bed all this long time, and bore the pains of the soundings with angelic patience. The present generation can hardly realise the blessings of anesthetics without such invidious comparisons of older days with the present time. But it is not in surgery alone that all the modern progress through science has been accomplished. We have to acknowledge in medicine almost equally great results. Think of the rapid pain-killing action of hypodermic narcotic injections, which enable you to accomplish duties and business appointments and transactions within a few minutes—never mind whether in many cases only temporary; the great success is attained. The microbic wonders are not less startling; bacteriology is developing in all directions. Diphtheria and other diseases are cured and prevented by serum-therapy, and electricity does its great work in its own department. Heat, light, and motion too are all subservient to our curative purposes, and massage in combination with vibration, electric heat, resistance exercises and manipulations accomplish incredible things. Of these latter I am going to give you my own experience, as I have exercised it as my speciality for many years past. One word, however, is first due to

you from myself on medicinal therapeutics, or the healing power of medicines. In the Old World, to which we here in England and on the continent of Europe belong, we are, in studying medicine and becoming doctors by State examinations, bound to be first allopaths before our own private studies and practical convictions lead us to turn homeopaths. In the New World, in the U.S.A., you can at once be educated in homeopathic colleges, hospitals and universities, without being hampered by allopathic teachings which afterwards have to be unlearned or forgotten. There they plunge at once into the real studies of *materia medica* as founded by our great genius, Hahnemann, in teaching us a proper pathogenesis of remedies and their applications based on the law of *similia similibus*, a law which is accepted as the guiding philosophical and practical principle in homeopathic therapeutics. Hahnemann himself and his followers have suffered a long and inveterate persecution from their colleagues in medicine all over the world for having exposed the defective and erroneous teaching of *materia medica* in the healing art, which they have in these long years succeeded in partly purifying from the old barbarous systems of bleeding, leeching, cupping, blistering, and all the other addenda of high old practices, but still in use in the middle of the last century, when all so-called "derivative" means of cure were in vogue (as they still are sometimes in "allopathy pure") in the form of systematic methods of cure by nauseating, vomiting, purging, hypnotising, narcotising, and burning by *Ferrum candens*, &c., &c. I have been myself the subject of persecution by my allopathic brethren here in London, when they found out that I treated my patients homeopathically with the remedies introduced by myself in the dispensary of the Margaret Street Infirmary for Consumption and Diseases of the Chest and Throat. That persecution has been recorded in the March number of the HOMEOPATHIC WORLD in 1887 under the title of "A Fight for Liberty of Opinion." From 1878 to 1887 the late Dr. Marsh and myself practised homeopathy here openly and without any interference, when suddenly our colleagues decided to stop us from doing so by getting the Executive Committee to protest against our innovation at this old institution. In an official letter they called upon us to desist from our homeopathic treatment, to remove our

names from the *Homeopathic Directory*, and to give up any appointments we might hold at any homeopathic institution (Dr. Marsh was one of the physicians to the London Homeopathic Hospital), or to resign our posts on the staff of the infirmary, as they (the Executive Committee) did not consider that such practice was conducive to the true interests of the infirmary, and it was entirely contrary to the practice hitherto pursued in it. To this we replied with a dignified refusal, whereupon a special general meeting of the Governors was called on December 20, 1886, "in order to ascertain their views on the subject," and Lord Grimthorpe presided at this meeting. Another meeting was called on January 19, 1887, in order to rectify a state of things which they (the accusing party) believed to be without parallel in any other medical charity in the United Kingdom. It was then that Dr. Cooper Torry, senior physician of the infirmary—and to his credit be it here said—loyally took the side of liberty of opinion and practice, and ably assisted in counteracting the manoeuvres of his intolerant colleagues on the Executive Committee in their endeavour to oust us two members of the medical staff from our posts. Dr. Torry had no practical acquaintance with homeopathy, but he was one of those liberal-minded men—so rare, alas! among members of the dominant school—who are perfectly tolerant of differences of opinion and who are heart and soul in favour of the utmost freedom in matters of science.

For the third time the Governors assembled for the Annual General Meeting on January 26th, in unusually large numbers. Lord Grimthorpe was again voted into the chair, and called attention to certain irregularities in this meeting, which necessitated its adjournment. Dr. Dudgeon then brought to the notice of the meeting what he considered to be an improper proceeding on the part of some members of the medical staff. This was followed by proceedings of the greatest interest to the meeting, which were—as the Chairman stated in affirmation of Dr. Dudgeon's expression—"irregular," as was confirmed by vote of hands, and the meeting was adjourned. The fourth adjourned Special General Meeting was held on February 13th, Lord Grimthorpe in the chair, when Dr. Dudgeon's amendment, "That any attempt to limit the liberty of opinion or practice of the medical officers was not sanctioned by the laws of the infirmary, was pre-

judicial to the interests of the infirmary and its patients, and was opposed to the spirit of the Medical Act of 1859," was brought forward. This was duly seconded and carried, under Lord Grimthorpe's chairmanship, by a majority of the Governors. Thus on both occasions the advocates for liberty of medical opinion and practice gained decisive victories over the partisans of exclusiveness and of the suppression of liberty of opinion in medical matters.

In 1896 there was a revival of the same animosity against us two by the new medical staff's executive committee, although meanwhile a great many subscribers to the infirmary had been lost; but this fight too ended in our victory, and afterwards the work proceeded again quietly until I resigned in 1899, after twenty-five years of honorary work as physician-in-ordinary. Not finding the necessary support from our homeopathic brethren to fill the vacancies occurring in the medical staff, the allopaths continue their noble work alone in this institution.

It is wonderful how differently my noble friend, the late Dr. Burnett, has fought for homeopathy in a quiet, scientific way. Amongst many other excellent works he has also brought forward his *Fifty Reasons for being a Homeopath*, translated into so many languages, and is still appearing in so many more, for instance in Polish, by Dr. Drzewiecki, in his *Lekarz Homeopata*, in which this month the thirty-seventh reason gets its turn. I wish these fifty reasons would be read by all our allopathic brethren, who, however, say they have their own and so many more unnumbered reasons against these fifty numbered ones, that it is quite enough for them not to waste any more time to get homeopathic reasoning into their brains. Well, what do you say to that? And how will you succeed in making them read what they object to? It would be very different if in the course of medical literature the young students of medicine could hear a word of recommendation to read such books from their own teachers in the old universities and in hospital schools. Then, *à la bonheur*, things would take a different turn for homeopathy in these old countries. In the New World or the new country of the U.S.A. they get equal chances on both sides, and homeopathy has not to fight such old orthodox passions and prejudices! Poor Dr. Burnett! He thought people would be greedy to

swallow his fifty reasons, and he certainly did not think to hear the answers I got. Anyhow, whether we fight in meetings, or in writing books and trying to spread enlightenment where there is complete darkness and ignorance, we shall always find it hard work; and even in hospitals and dispensaries, where the patients cured by homeopathy speak volumes for our science of therapeutics, the patients themselves find it a great difficulty to persuade others, however disgustingly treated by nasty medicines and large doses. They are accustomed to these old ways from childhood, and they won't know better even should you say "Crepa," which, I hope, you won't—for so many reasons. Dr. Compton Burnett's great perseverance and energy has left us a rich fountain of his studies, experience and tact in finding a useful application of what others had brought into such sparkling prominence before the whole medical world. Professor Koch's world-famed remedy, for instance, was lauded to the skies in 1890, when Koch was simply semi-deified for the imaginary results of his "Tuberculinum Kochii"; but we colder-blooded and quiet onlookers did not rush at once to Berlin like so many enthusiasts from all parts of the world; we got soon enough the news of the reaction that had set in here, and that the remedy was useless as a cure, and even "terribly dangerous."

Our friend Compton Burnett told us in 1890 that some practitioners of scientific distinction had long before that time occupied themselves with the poisons or viruses of the disease processes as a cure or prophylactic of the self-same diseases; more particularly was M. Pasteur best known to the world at large in this connection. When at that time homeopathic practitioners set to work in using the virus of consumption to cure consumption itself, the dominant leaders of the medical profession raised a hue and cry against these homeopaths, amongst whom was our Burnett himself. He had called his bacillic virus "*Bacillinum*," and had used it in his daily practice for the past five years (before Koch's *Tuberculinum* came out), and on the whole with great satisfaction. "The difference between the *Tuberculinum Kochii* and the *Bacillinum* we homeopaths use is this," says Burnett: "The homeopathic *Bacillinum* is the virus of the natural disease itself, while Koch's is the same virus artificially obtained in an incubator from volumes of bacilli thriving in beef jelly;

"ours," Burnett says, "is the chick hatched under the hen, Koch's is the chick hatched in an incubator." Burnett knew that Koch was on the right track, but Koch did not know that Burnett had already used his *Bacillinum* for years before, and successfully. Koch had still to prove that his results were satisfactory. Of course the modes of administering the remedy to the patient are different too. Burnett used his *Bacillinum* in high potency, which is not fraught with the palpable dangers of Koch's method of injecting material quantities under the skin, or in other words, straight into the blood. "If," says Burnett, in the first edition of his book on *New Cure of Consumption*, "Dr. Koch's dosage and mode of administration should give better results than we have obtained, then Koch's method will have to be adopted." In his second edition, 1891, he says: "What now bars the way to the further progress of Kochism is the awful admission that will have to be made of the therapeutic efficacy of the infinitesimally small: the *little* dose is the *great* barrier to its onward march; but this barrier will be knocked down in time, and then homeopathy is the winning horse at the Medical Derby of the world, and will presently be hurried past the winning-post by Orthodoxy itself as her rider." In his third edition, 1904, he maintains that "early taken we have in *Bacillinum* in high potencies a real remedy for phthisis pulmonalis in many incurable forms of tuberculosis, if Father Time will confirm it." I have not seen any further edition of his book, but I feel sure from my own experience meanwhile that this genial author had increased success with his new cure of consumption. I have had myself several very pregnant cases of success with *Bacillinum* 30; C.C.; and M. One patient, an engine-fitter, twenty-three years old, who was unable to do any work for six weeks, who had crepitation and dulness (on percussion), great cough, spitting and night sweats, loss of flesh and strength, temper. 102 to 104 morning and evening, cold air affected him very greatly; he took besides a dietetic, regimen of milk, no meat, tea, coffee, condiments, &c., and I gave him once a week *Bacillinum*, six globules. After three weeks the temperature came to 99.4 in the evening, and his breathing improved considerably; in two months he recovered his previous strength and was able to resume his work.

F. D. K., seventeen years old, lost his father five years ago through consumption, and also his younger sister two years ago. He had now been under several doctors for his persistent cough and great spitting, and from time to time he got diarrhea; his sleep was restless; he perspired much at night, and now his temperature had reached 104 in the evening; I put him first on Koumiss, but as his fever did not disappear I gave him *Bacillinum* 30, three globules first once a week, after two weeks one globule three times a week; his temperature decreased, he gained flesh, and in a few months he recovered completely.

In 1897 a stableman, forty-four years old, attended at the infirmary for consumption, and in his case too the increased temperature was a great obstacle, even after his expectoration had improved with all the other complex symptoms, principally of his digestive organs. I gave him *Bacillinum*, six globules, C.C., and it was surprising how greatly his fever diminished, although *Aconitum*, *Arsenicum*, *Quinine*, &c., had been of no avail. In very young children and twice in infants I had to resort to *Bacillinum*, and in all cases with very satisfactory results.

I merely give this experience of mine in order to show how right Dr. Compton Burnett was in recommending his new cure of consumption from his own practice with *Bacillinum*. It is very comforting in many cases to be able to fall back upon this remedy when there are proper indications for it.

(To be continued.)

MUSIC AS MEDICINE.—During the administration of an anesthetic a patient becomes unconscious more quickly if at the same time under the influence of music, and the after effects are inconspicuous.

But perhaps the strangest use to which music can be put is to stop the flow of blood from a wound. An army doctor noticed that when a wounded soldier was taken to within easy hearing of music hemorrhage was either greatly reduced or actually stopped. Neither he nor others who confirmed his observations could understand how this phenomenon was brought about, but it was believed that the vibrations of the air produced by the music causes the patient to become faint, in which case the action of the heart is so considerably lessened that the overflow of blood is reduced.—*Science Siftings*, Feb. 18, 1904.

BRITISH HOMEOPATHIC ASSOCIATION.

SUMMER (1904).

POST-GRADUATE COURSE.

MAY, JUNE, AND JULY.

LONDON HOMEOPATHIC HOSPITAL,
GREAT ORMOND STREET, LONDON, ENGLAND.

THE COURSE WILL BE MADE AS PRACTICAL AS POSSIBLE.

A strong feature will be made of the connected series of lectures in Homeopathic Materia Medica and Homeopathic Therapeutics. They will be conducted on practical lines, illustrated by citation of cases, and reasons will be given for the specific selection of the remedy.

A reception room, with reading and writing accommodation, will be provided for those taking the Course. Post-Graduates may have their letters addressed to the Hospital, and every effort will be made to make the period of attendance socially agreeable and professionally profitable.

On the notice board in the reception room the special arrangements, operations, &c., for each day will be posted.

A list of hotels and boarding-houses in the neighbourhood will be provided at the Office, and facilities will be afforded for securing suitable accommodation at reasonable rates.

The Hospital is connected with the National Telephone Exchange, so that post-graduates can receive messages by telephone when at the Hospital (Telephone 359 Holborn). Telegrams: Care of "Simillimum, London."

The Dean will be pleased to see ladies or gentlemen wishing to join the Course at the Hospital on Wednesday or Saturday mornings or Monday or Thursday afternoons, or at 86, Wimpole Street, any morning except Wednesday or Saturday, and in the afternoons of the latter-named days. He is also at all times pleased to give any information to any Post-Graduate regarding the Course, and he will be glad to receive any suggestion towards its development.

April, 1904.

JAMES SEARSON, M.D., *Dean.*

THREE MONTHS' SUMMER COURSE, COMMENCING MAY 2ND.
FEE FOR THE COURSE - - - THREE GUINEAS.
TIME TABLE.

Hours.	Mondays.	Tuesdays.	Wednesdays.	Thursdays.	Fridays.	Saturdays.
A.M. 9.15	Materia Medica lecture. Gynaecological clinic.	Materia Medica lecture. Medical clinic.	Materia Medica lecture. Surgical clinic.	Materia Medica lecture. Gynaecological clinic.	Materia Medica lecture. Surgical clinic. Medical clinic.	—
10.0	Medical clinic. Diseases of Children clinic.	Medical clinic.	Electro-Therapy.	Medical clinic. Diseases of Children clinic.	Medical clinic. Gynaecological operations. Minor Surgery O.P.	Medical clinic. Gynaecological operations. Minor Surgery O.P. Electro-Therapy.
11.0	Surgical clinic. Neurological clinic.	Surgical operations. Gynaecological clinic. Medical clinic.	Throat, nose, and ear clinic. Gynaecological clinic. Medical clinic.	Ophthalmology clinic. Neurological clinic. Diseases of Skin clinic.	Surgical operations. Gynaecological clinic. Medical clinic.	Medical clinic.
P.M. 2.30	Ophthalmology clinic. Medical clinic.	Homeopathic Therapeutic lecture.	Homeopathic Therapeutic clinic.	Homeopathic Therapeutic lecture.	Homeopathic Therapeutic lecture.	
5.0	Homeopathic Therapeutic lecture.	Homeopathic Therapeutic lecture.	Homeopathic Therapeutic clinic.	Homeopathic Therapeutic lecture.	Homeopathic Therapeutic lecture.	

N.B.—From June 6th to June 25th—fixed for the three weeks' Vacation Course—the following special Time Table will be followed.

THREE WEEKS' VACATION COURSE.

JUNE 6TH TO 25TH (INCLUSIVE).

FEE (to British Homeopaths) - - - ONE GUINEA.

DAILY TIME TABLE.

- 9.15 a.m. Practical Lecture on *Materia Medica*.
- 9.45 „ Clinics of Physicians and Surgeons of the day.
- 10.45 „ Special Clinical Lecture Demonstration (detailed list later).
- 11.45 „ Special practical work in Practical Pathology, Bacteriology, Clinical Microscopy, Urinary Analysis, Surface Anatomy, Electro-Therapy, Gastric Examination Technique, &c., &c. (detailed list later).
- 2.0 p.m. Clinical Lecture Demonstration on special subjects: Medical, Surgical, Gynæcological, Throat and Ear, Skin, Eye, Neurological, &c. (detailed list later).
- 3.0 „ In- and Out-patient Cliniques.
- 4.30 „ (Thrice weekly.) Lecture on General Homeopathic Therapeutics, with Practical Illustrations.
- 4.30 „ (Twice weekly.) Special Lecture on announced subjects.
- 8.15 „ (Twice weekly.) Lantern Demonstration on announced subjects.

SOCIAL.—It is proposed to arrange for an Initial Reception on Monday, June 6th; Saturday afternoon excursions to places of interest; a Banquet at the end of the Course, and other social amenities.

N.B.—An elaborated Time Table giving detailed particulars is in course of preparation.

THE INFLUENCE OF A SACCHARINE DIET ON GASTRIC ACIDITY.—A diet consisting largely of saccharine substances is commonly supposed to favour acidity of the stomach, but from certain experiments made by W. G. Morgan (*Archiv. fuer Verdauungs Krankheiten*, VIII., 1, 2; *Centralblatt fuer innere Medicin*, Oct. 11; *N. Y. Med. Jour.*) it seems probable that such acidity is not due to an actual increase of the amount of hydrochloric acid in the gastric juice; indeed, quite the opposite effect was observed. A healthy workman took for five days, together with his usual food, large quantities of sugar, between two and three ounces of cane sugar and twice that amount of maple-sugar syrup. The total acidity of his gastric juice fell from 50 to 25, and the free hydrochloric acid from 40 to 12.5. Acting on the knowledge thus acquired, Morgan has employed sugar successfully in the treatment of hyperchlorhydria.—*Med. Times*.

SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

THE seventh meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thursday, April 14, 1904, at eight o'clock, Dr. Herbert Nankivell, President, in the chair.

Clarence Granville Hey, M.B., C.M. Edinburgh, M.R.C.V.S. Edin., of Croft House, Altofts, Normanton, Yorks, was proposed as a member by George Burford, M.B., and Edwin A. Neatby, M.D.

The following specimens were exhibited:—

1. A large fibro-myoma removed by hysterectomy for hemorrhage : recovery.—Dr. Edwin A. Neatby.
2. Small multiple fibro-myomata of uterus removed by hysterectomy, for pain : recovery.—Dr. Edwin A. Neatby.
3. A large parovarian cyst (left) showing relation to ovary. A small parovarian cyst (right) from same patient, showing relations in earliest stages : recovery.—Dr. Edwin A. Neatby.
4. Carcinoma uteri, mainly of the scirrhus variety, removed by pan-hysterectomy : recovery.—Dr. Edwin A. Neatby.

SECTION OF SURGERY AND GYNECOLOGY.

Mr. Knox Shaw read a short paper on "The Operative Treatment of High Myopia." Dr. James Johnstone read a short paper on "Rheumatic Fever occurring during the Puerperium, with illustrative case." Dr. Edwin A. Neatby read a short paper on "Some Diagnostic Difficulties in Gynecological Practice, with illustrative cases."

INSTITUTIONS.

LONDON HOMEOPATHIC HOSPITAL.

THE fifty-fourth annual meeting of the Governors, subscribers, and donors of the Hospital was held on Thursday, March 24th, at the Hospital, under the chairmanship of the Treasurer, Earl Cawdor. There were also present Sir Henry Tyler, Mr. Stilwell, J.P., the Rev. E. C. Bedford, Dr. Washington Epps, Dr. Searson, Dr. Dyce Brown, Dr. Byres Moir, Dr. Goldsbrough, Mr. W. S. Cuff, Dr. Galley Blackley, and a number of

lady subscribers. A telegram regretting his inability to attend was read from Dr. George Burford.

The meeting was opened with prayer by the Chaplain, the Rev. E. C. Bedford, and the minutes having been confirmed, the Secretary-Superintendent (Mr. G. A. Cross) read the fifty-fourth annual report.

The Chairman (Earl Cawdor), who moved the adoption of the report, mentioned that the Duke of Teck had kindly undertaken to be the Patron of the Hospital. "Remembering," said the speaker, "as we do the good that his mother did for the Hospital for many years back, I am sure we are glad to see his name associated with so good a work." In proposing the adoption of the report—a very full report—the first obvious remark was that 1903 has been a very full year, with more patients, both in and out, and a very great amount of work in every department. The total of 43,000 attendances in the out-patient department is the highest ever reached, and it is increasingly difficult to cope with so large a work, even with our large and active medical staff, aided sometimes by outside doctors, some of them lady doctors. As to finance there was an increase on nearly every main item except donations. The noble chairman went on to point out the means that might be taken to remedy this state of things.

Mr. Stillwell, J.P. (Chairman of the Board of Management), in seconding the resolution, said the report was in some measure satisfactory, as it showed a gradual increase in the income of the Hospital. That, of course, showed an increase of interest in the institution itself. Unfortunately the income was not equal to the outgoings, and they had to ask the subscribers' consent to supplement the incomings by drafts upon capital. It was very satisfactory last year that they were able to replace a certain sum to capital, and he trusted that their subscribers and donors would come forward handsomely again this year and support them.

The report was then adopted.

LONDON HOMEOPATHIC HOSPITAL— BOHEMIAN CONCERT.

UNDER the presidency of J. P. Remnant, Esq., M.P. for the Holborn division of the borough of Finsbury, a Bohemian concert, in aid of the London Homeopathic Hospital, took place in the Throne Room, Holborn Restaurant, on Thursday evening, April 21st.

The concert was organised by two former patients, who,

with the aid of their friends, took this means of testifying their grateful thanks.

The musical arrangements were under the direction of Mr. Carl Cremer. The artistes were Miss Ethel Jackson (mezzo), Miss Lavine Good (reciter), Madame Alberta Bianchi (contralto), Miss Constance Salvesen (soprano), Miss Kate Bowditch (contralto), Mr. Lewis Blackburne, Mr. W. C. Holden, Mr. James Godden (humorous songs), M. Carl Brandt (bass), Mr. Algernon J. Hicks (character sketches), Mr. Harold F. Payne, Mr. Albert West (baritone), Mr. Walter Walter (musical sketch), Mr. P. Williams (violin), Mr. H. W. Pike ('cello), and Mr. Wharton Wells (accompanist). The piano was kindly lent by Messrs. Erard.

In the course of the concert the chairman said it gave him a great deal of pleasure to preside at that concert in such a good cause. The excellent hospital they were met to support was a great example to them all of the way in which they could help others. To have an annual deficiency of income appeared to be the chronic state of most hospitals at the present moment, and this hospital was no exception. Fortunately it was very seldom that an appeal to the public for so good a cause was made in vain, and although he could hardly expect his audience to equal the sum which the hospital supporters contributed when Lord Cawdor took the chair at the festival dinner in June last, and the gifts reached £5,000, he hoped they would all try to do something to wipe off the deficit of this hospital. That deficit was, unfortunately, about £3,000 a year, and after the handsome result of the festival dinner there still remained some £10,000 due to the capital account of the hospital. What he wanted people to feel and realise was the nature of the work done by the hospital staff, and particularly by those excellent friends of the sick, the nursing sisters (applause). He would like to see a more regular support of such institutions, so that instead of depending, as they very often did, upon the large gifts of a few, the regular annual subscriptions should be the main basis of income.

The programme was a rather lengthy one, but very varied and exceptionally good, the musical sketches, humorous songs, and recitations being well received as well as the more serious music. There were many encores, but as so much talent was displayed by the

vocalists and performers, it would hardly be fair to particularise any without mentioning all.

It appears that about £30 was realised, a distinctly gratifying result.

LEAF HOMEOPATHIC COTTAGE HOSPITAL, EASTBOURNE.

SIXTEENTH ANNUAL REPORT.

WE have received the Sixteenth Annual Report of the above Institution presented at a meeting of subscribers and friends held at the Town Hall, Eastbourne, on February 27th, at four p.m. Subjoined is the report :—

The Committee of the Leaf Homeopathic Cottage Hospital in presenting their Sixteenth Annual Report to the subscribers and donors who have so kindly supported them, are glad to be able to send a satisfactory account of the year's work. The number admitted into the Hospital was 81. The subscriptions and donations amounted to £1,048 4s. 8d. The subscriptions show an increase of £38 1s., and the donations an increase of £543 19s. 9d., as compared with last year. The increase in the donations is due largely to sums given specifically towards the fund for the enlargement of the Hospital. The following are the donors of several of the largest of such sums to whom the Committee desire to tender their sincere thanks, viz., Misses Leaf, £100; The Eastbourne Fishermen's Compensation Society (per Mr. S. Allchorn), £50; Sale of Work (per Miss L. M. Cooper), £63 17s. 9d.; Sale of Work (per Miss Annie Savage), £70; Messrs. Miller and Selmes, £25; Mrs. Crump, £20; and numerous other kind friends of smaller sums. The sum of £294 3s. 1d. has been brought from the Building Enlargement Fund Account into the General Fund. The Committee regret they are unable to carry forward a balance to its credit this year; but they again confidently appeal for further help, as at least an additional £200 per annum is urgently needed to meet the increased expenses of maintaining the Hospital, consequent upon the enlargement thereof; an appeal which it is hoped will receive a ready and willing response, as the benefits of the Hospital are known to be much valued by the poor of the immediate neighbourhood.

There are four wards in the Hospital, containing nine beds and one cot. Patients are admitted by letters of recommenda-

tion, which can be obtained from subscribers, who are entitled to one letter for each guinea subscribed. Letters are only available for the current year. Patients are admitted by payment of a guinea, if applicants have not a Letter of Recommendation.

The total number of patients treated at the Hospital during the year (notwithstanding the Hospital was closed for alterations for over two months) has been 305, of whom 81 occupied beds in the Wards and 224 were out-patients; against 307 cases in 1902, of whom 94 occupied beds in the Wards and 213 were out-patients; 2,263 cases have been treated at the Hospital since its opening in 1888.

The Hospital has only a small share in the large official Hospital Sunday and Saturday Collections made in the town, but the Committee wish to express their best thanks to those incumbents who have set apart a portion of their offertories on their behalf, the amount being £84 2s. 2d. against £76 19s. 3d. last year. The donations received for Hospital Sunday and Saturday amount to £82 1s. 9d., against £68 10s. 2d.; this includes proceeds of collection by the Friendly Societies, £25 8s., against £38 5s. for 1902, and the amount collected by Cards, £42 13s. 6d., shows an increase of £5 4s. 1d. The Hospital Boxes have produced £16 0s. 9d., against £11 10s. last year.

No charge of any kind is made to patients, the supply of necessaries, medicine and advice being entirely gratuitous.

The Committee wish again to return their best thanks to Dr. Croucher, Mr. Swanseger, Mr. Turner, and Mr. Dudley Wright, F.R.C.S. Eng., Consulting Surgeon, for their kind and skilful treatment of the patients, gratuitously bestowed; and to Miss Bevis (the Matron), and Nurse J. B. Forster for their devoted attention, whilst at the same time exercising due economy in the regulation of the House expenditure; also to the kind donors of various articles throughout the year, which have afforded additional comfort to the patients. The Committee regret the resignation of Mr. Swanseger owing to ill-health, and Dr. C. P. Husband has succeeded him on the Medical Staff.

The Misses Leaf have kindly given the premises situate at Nos. 1 and 2, Marine Road, to the Committee, in trust, for the furtherance of Homeopathy, which have been adapted for Hospital purposes, furnished, completed, and paid for during the year.

Signed on behalf of the Committee,

R. C. LAMBERT, *Honorary Treasurer.*

EXTRACT.

MENDELEEFF'S CLASSIFICATION OF THE ELEMENTS.

By XRAYSER.

MENDELEEFF'S CONCEPTION OF ETHER,

as presented in a treatise which has only recently been published in English (see *Chemist and Druggist*, March 5th, p. 389), is a new, bold, and very striking theory of the material universe. What do the leaders of science think of it? So far I have not seen any definite expression of their opinion, though the views of their Russian contemporary must have been before them for more than a year. According to Mendeléeff, the ether, in old times the material of the upper air, now the subtle, imponderable, elastic fluid which fills all space and permeates among all the molecules of substantive matter, whose waves transmit light and heat, and whose disturbances create magnetic fields and convey electric effects—this ever-present mystery which evades the keenest tests and whose very existence is only known to us on circumstantial evidence, is indeed, as the ancients named it, the first of the elements. One of the hymns of Orpheus apostrophises the ether as

THE FIRST ELEMENT

of the world, and Plato and Aristotle held it to be the pure essence of the other elements. Mendeléeff's notion of an element is much more precise than theirs, but perhaps his views are not farther removed from those of the Greek philosophers than Crookes's and Oliver Lodge's are from his. These modern scientists have tired of the unvarying atom. They are beginning to trace its development and to watch its disintegration. Sir William Crookes imagines an original protyle, Sir Oliver Lodge shows the atoms of radium splitting up into electrons, Ramsay sees them converting themselves into helium, and Lodge guesses that the other elements may be likewise transmigrating, though infinitely more slowly. These speculations are not attractive to Mendeléeff, though it cannot be denied that they owe their genesis largely to his classification of the elements. He prefers the firm rock of eternal individuality of the separate atom to the dream of the unity of matter. And I think

Mendeléeff's world, made up of a number of independent entities, is a more interesting one than Sir William Crookes's single substance with gradually acquired various characteristics.

IT WAS ARGON,

as was suggested in the *C. & D.* comment, which first disturbed Mendeléeff. Until that lifeless element appeared the periodic law was triumphant all along the line. Fulfilled predictions in the discovery of new elements and the correction of the old atomic weights had testified to its truth, and chemists all over the world had accepted it as one of the fundamental bases of their science. But when argon came there was no vacant place ready for it in the periodic table. To use Sir Oliver Lodge's metaphor, the new fact was born and no cradle was prepared to receive it. Mendeléeff says when he first heard of argon in 1895 he was disposed to doubt its elementary nature. He thought it might be a polymeride of nitrogen, a triatomic nitrogen deprived of heat, and thus more inert than the gas as we know it. Berthelot subsequently published a similar view. But this idea had to be discarded. Helium, neon, krypton, and xenon followed argon, and none were wanted by the periodic law. That is to say, they fitted into none of the groups. Mendeléeff surmounts this difficulty easily enough by the simple process of creating for these inert elements a new group which he designates

THE ZERO GROUP.

This is how the periodic table stands with the new group and series. I only quote the first five series (numbered 0 to 4), and I omit Group VIII., as it only begins with iron, 55·9, at the end of Series 4. Remember that the horizontal lines give the series and the vertical lines the groups :

Series	Groups.							
	O	I.	II.	III.	IV.	V.	VI.	VII.
0... <i>x</i>	—	—	—	—	—	—	—	—
1... <i>y</i>	H 1·008	—	—	—	—	—	—	—
2...He	4·0	Li 7·08	Be 9·1	B 11·0	C 12·0	N 14·0	O 16·00	F 19·00
3...Ne	19·9	Na 23·05	Mg 24·1	Al 27·0	Si 28·4	P 31·0	S 32·06	Cl 35·45
4...Ar	38·00	K 39·1	Ca 40·1	Sc 44·1	Ti 48·1	V 51·4	Cr 52·10	Mn 55·00

It will be seen that helium, neon, and argon take their places in proper order. Krypton, 81·8, starts Series 6, and xenon, 128, leads Series 8. For Series 1 there is a vacancy for an element with a lower atomic weight than hydrogen, and

Mendeléeff thinks coronium, whose spectrum has been found in the solar corona, may fulfil the conditions of this position. Then he has reserved a place, x , for another element of much lower atomic weight than hydrogen or coronium, of immensely greater molecular velocity, all-permeating, and all-penetrating. There is only one possible candidate for this vacancy. Mendeléeff regards the

ETHER AS AN ELEMENT

answering the indicated requirements. Coronium is so light as to be partially independent of gravitation. "It wanders, perhaps for ages, in the regions of space, breaks from the shackles of the earth and again comes within its sphere, but still it cannot escape from the regions of the sun's attraction, and there are many heavenly bodies of greater mass than the sun." But the atoms of ether must be capable of withstanding all attractions if they are to permeate all space. Mendeléeff's calculations lead him to assume that they may be only a millionth the density of the hydrogen atom. And the ether must be atomic. "I cannot and will not regard it in the light of a simple nullity called mass," says Mendeléeff. What fills up the spaces between the atoms of ether he does not tell us. Is there another ether permeating these atoms? Is there an infinity of ethers? If argon set the Russian chemist thinking, it was radium which determined his conclusions.

THE POPULAR RADIUM THEORIES

do not satisfy Mendeléeff. He does not think it necessary to return to the emission theory of light, and he finds the hypothesis of electrons vague. Any conception of the division of atoms is contrary to his scientific conscience, and his conclusion is that the phenomena suggesting such views "would be better understood as a separation or emission of the generally recognised all-permeating ether." The "bombardment" shown in Crookes's spintharoscope is therefore an expulsion of ether atoms. Mendeléeff has always held special ideas about solution, which he regards as a loose kind of chemical combination; and he seems to apply this notion to the occlusion of ether atoms in heavy elements like radium. The entrance and egress of such atoms into and from a great mass like that of the sun, or into and from a small but heavy mass like uranium, would, he supposes, be accompanied by such disturbances in the ethereal medium as give the phenomena of light. According to this hypothesis, therefore, the mystery surrounding the apparent creation of energy by radium disappears. The energy manifested is that which is inherent in the ether atoms.—From the *Chemist and Druggist*, April 9th.

REVIEW.

A SYLLABUS OF DIAGNOSIS.*

THIS booklet consists of a series of questions based upon a work on Clinical Medicine by Dr. Clarence Bartlett, and a Course of Lectures in Physical Diagnosis by Dr. E. R. Snader. Prepared by William F. Baker, A.M., M.D., Clinical Instructor of Medicine in the Hahnemann Medical College of Philadelphia, Pa.

This is a book of *questions* only; the answers are to be found in the works to which it refers. The questions are an admirable test of the reader's knowledge.

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.

CANCER AND TREES.—WANTED A REFERENCE.

To the editor of THE HOMEOPATHIC WORLD.

SIR,—A few weeks ago I happened to read in a German medical journal (allopathic) the short report of a lecture delivered in the Royal Society of Medicine of London by a London physician—Dr. Squamer (?) Dr. Squire (?)—giving the results of his investigations as to the origin of human cancer. You would be doing me a great favour in telling me which English journal published the original article? Dr. Squamer (?) particularly mentioned a cancer frequently observed on trees, and also proved statistically the prevalence of cancer with workmen occupied in the woods, stating the possibility of an etiological connection between human and vegetable cancer.

Many thanks beforehand.

Respectfully yours,

DR. ZWINGENBERG.

Berlin, S.W. ii., 85, Koniggratzer Street,
March 25, 1904.

Can any of our readers supply our correspondent with the reference?—Ed. H. W.

* *A Syllabus of Diagnosis.* Prepared by William F. Baker, A.M. M.D. Philadelphia: Boericke and Tafel. London: The Homeopathic Publishing Co., 12, Warwick Lane, E.C. Pp. 107. Paper, 1s. 6d.

NOTIFICATION.

* * Under this heading we shall be happy to insert notices of appointments, changes of address, &c., and holiday arrangements.

BUTCHER, CURNOW & Co., LTD.—Messrs. W. Butcher and Son, homeopathic chemists, &c., write to us from Blackheath: "We beg to inform you that, for family reasons and also to enable us to take into partnership the managers of our chemist and photographic departments, we have formed our *Retail Establishment at Blackheath* into a private limited company under the name of Butcher, Curnow & Co., Ltd. We continue to hold a large interest in the new Company, and the business will be carried on as before."

GENERAL CORRESPONDENCE.

AN OPEN LETTER FROM DR. MACK TO THE EDITOR OF *B. M. J.**

LA PORTE, INDIANA, U.S.A.

March 16, 1904.

To the Editor of the British Medical Journal.

DEAR SIR,—I thank you for sending me the review, in your issue of the 5th inst., of my little pamphlet entitled *Are we to have a United Medical Profession?*

The reviewer says my pamphlet's "main object is to show to the young professed homeopathist how he 'can fight for homeopathy to the death, if need be, and can at the same time pursue rational medicine with an enthusiasm not in the least modified by his enthusiasm over homeopathy.'" One object of my pamphlet is to show to the young homeopathist a platform upon which he can cultivate both homeopathy and rational medicine with such earnestness and consistency as are contemplated in the reviewer's above quotation from me, but this is not the pamphlet's *main* object. Its main object is far more comprehensive: it is to secure the attention of the whole profession—all practitioners, as well as all students, of any and of all schools—to the fact that, as the particular

* In a covering letter to ourselves Dr. Mack writes: "The enclosed speaks for itself. The last paragraph shows why it is sent to the HOMEOPATHIC WORLD instead of to the *British Medical Journal*. I trust you will approve my wish to have it published in the HOMEOPATHIC WORLD."—[Ed. *H. W.*]

cure of which *similia similibus curantur* is the law differs from any that can be attempted in rational practice, there is no inconsistency in accepting both homeopathy and rational medicine; and further to the fact that, as this particular cure transcends the possibilities of rational medicine, those who believe in this cure may properly identify themselves by name with the law of similars, in order that they be not confounded with those who regard rational practice as the *ne plus ultra* in medicine.

The reviewer says: "A 'similar' is anything which experience shows to cure a system, however dissimilar it may seem to the non-homeopathic mind. Thus you may take a pinch of *Sodium bicarbonate* for heartburn, and if you carefully say to yourself, 'I take this to obtain "immediate" substitution of a normal vital process for an abnormal one,' you are practising homeopathy, which is right; but if you allow the thought to come into your mind that you desire to remove your heartburn by neutralising an excess of acid, you are practising rational medicine, which is wrong. Provided you bear this in mind you may treat your patient with any dose of any medicine you please; if he does not get well that is not the fault of homeopathy, but his own—because he does not 'respond.' In short, it is much like the old question of luck. If you wish when you see a piebald horse, you are all right provided you do not think of its tail. If you do think of its tail you may still get what you want, but it will not be because you wished for it. All this sounds like an intentionally humorous version of matters, but it is not. It is the serious outcome of a careful study of homeopathy as expounded by a very honest believer therein." But for his disavowal I certainly should have thought that this reviewer was trying to be funny. But for his assertion I should never have suspected that his twaddle was the serious outcome of a careful study of my pamphlet. I am confident that, this reviewer alone excepted, no man with average ability and the least ingenuousness could make such a mess, as he has made, of trying to understand my pamphlet.

I should be very glad to lay this letter before those readers of the *British Medical Journal* who have read its review. Seeing, however, that the reviewer speaks of homeopathy as "thoroughly dead" in England, and of himself as without "any desire to revive it," I apprehend

that the *British Medical Journal* might be indisposed to devote to the subject further space than that already occupied by the six hundred words of its review. To have my letter returned from England and then sent back for publication in some other journal than the *British Medical* would consume much time. So, while disposed to the utmost courtesy toward the *British Medical Journal*, I am offering this letter for publication in the HOMEOPATHIC WORLD.

Respectfully,
CHAS. S. MACK, M.D.

VARIETIES.

A SIGN OF HEART FAILURE.—Dr. Henry Jackson calls attention to one of the signs of cardiac failure which is of great import, though it meets but little notice in the articles upon this condition—namely, a discrepancy between the rate of the arterial pulse and the rate of the heart-beats. He has observed in many instances that in cases of extreme cardiac weakness the pulse was very slow, intermittent, and irregular, while the heart was rapid, and refers not to cases in which it is extremely difficult to count the pulse, as is always the case when the pulse is irregular, but to cases in which the most accurate taking of the pulse by trained individuals does not show a rapid pulse-rate, yet examination of the heart shows that its action is extremely rapid.—*Med. Times*.

SPIDERS AND COBWEBS have as good a record in medical history as any remedy in our Pharmacopeias. According to Gray's *Supplement*, Pliny and Theophrastus recommended cobwebs; and Burton, in the *Anatomy of Melancholy*, written 300 years ago, referring to spiders in nut-shells worn round the neck as amulets to keep off the ague, says he first thought the practice absurd and ridiculous, but rambling amongst authors he found this very medicine (I am not sure whether he means the spiders or their webs, and whether as amulets or as pills) mentioned by Discorides, approved by Mathiolus, and repeated by Alderovandus. Dr. Fernie, in *Animal Simples*, quotes Sir Thomas Watson as recommending cobwebs in ague; Dr. Donaldson, of Madras, who gave cobweb in pills for malarial fever in 1867, and considered it in some respects superior to quinine; and other authorities. The venom of *Tarantula cubensis*, Fernie says, has been proved (in the homeopathic sense) and found to cause great restlessness, the prover not being able to remain quiet anywhere or in any position, bringing to mind thoughts of the dancing mania supposed to be set up in Italians by the bite of this spider. It was an ingenious idea, based on this proving, to make a homeopathic tincture from the spiders and use it as a remedy for St. Vitus's dance.—*Chemist and Druggist*.

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MEDICAL AND SURGICAL WORKS PUBLISHED
DURING THE PAST MONTH.

- Fox (L. W.)**. Diseases of the Eye. 8vo. (Appleton. Net, 18s.)
- Gibbons (E. E.)**. The Eye; its Refraction and Diseases. 4to. (Macmillan. Net, 21s.)
- Glassington (Chas. W.)**. Golden Rules of Dental Surgery. (Golden Rules Series No. 13.) 48mo. (J. Wright, Bristol. Simpkin. 1s.)
- Lindsay (James Alexander)**. Lectures Chiefly Clinical and Practical on Diseases of the Lungs and the Heart. 8vo. pp. 456. (Bailliére. Net, 9s.)
- Mann (J. Dixon)**. Physiology and Pathology of the Urine. With methods for its examination. With Illusts. 8vo, pp. 284. (C. Griffin. Net, 8s. 6d.)
- Medical Annual (The), 1904**. A Year Book of Treatment and Practitioner's Index. Illust. Cr. 8vo, pp. lxxx-852. (J. Wright, Bristol. Simpkin. Net, 7s. 6d.)
- Noorden (Carl von)**. Acid Auto-intoxications. Being Part 4 of several Clinical Treatises on the Pathology and Therapy of Disorders of Metabolism and Nutrition. 8vo, pp. 80. (Simpkin. Net, 3s.)
- Nuttall (George H. F.)**. Blood Immunity and Blood Relationship. A Demonstration of certain Blood-relationships amongst Animals by means of the Precipitin Test for Blood. Roy. 8vo, pp. 456. (Camb. Univ. Press. 15s.)
- Pritchard (Eric)**. The Physiological Feeding of Infants. 2nd ed. Cr. 8vo. (H. Kimpton. Net, 3s. 6d.)
- Robson (A. W. Mayo) and Dobson (J. F.)**. Diseases of the Gall Bladder and Bile Ducts, including Gall-Stones. 3rd ed. 8vo, pp. 502. (Bailliére. Net, 15s.)
- Sawyer (Sir James)**. Contributions to Practical Medicine. 4th ed. With many Revisions and Additions. 8vo, pp. 928. (Cornish Bros., Birmingham. Net, 3s.)
- Symes (J. Odery)**. The Bacteriology of Everyday Practice. 2nd ed. (Medical Monograph Series.) Cr. 8vo, pp. 106. (Bailliére. Net, 2s. 6d.)
- Text-Book of Gynecology (A)**. Edited by C. A. L. Reed. 2nd ed. 8vo. (Appleton. Net, 21s.)
- Thome (L. T.)**. A Practical Guide to the Administration of the "Nauheim" Treatment of the Chronic Diseases of the Heart in England. Cr. 8vo. (Bailliére. Net, 2s. 6d.)
- Waring (H. J.)**. Manual of Operative Surgery. 2nd ed. Illust. Cr. 8vo, pp. 690. (Pentland. Net, 10s. 6d.)
- Younger (E. G.)**. Insanity in Everyday Practice. (Medical Monograph Series.) Cr. 8vo, pp. 110. (Bailliére. Net, 2s. 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, 8, *Bolton Street, Piccadilly, W.*

Letters to the Editor requiring personal reply should be accompanied by stamped directed envelope.

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.

Dr. Egbert Guernsey Rankin, New York.—Dr. Searson, London.—Mr. G. A. Cross, London.—Dr. Dudgeon, London.—Dr. Zwingenberg, Berlin.—Messrs. W. Butcher & Son, London.—Dr. Jagielski, London.

BOOKS AND JOURNALS RECEIVED.

Hom. Review.—Zoophilist.—Mind.—Revist. Hom.—Calcutta J. of Med.—Med. Times.—Allg. Hom. Zeit.—H. Monatsblätter.—The Chironian—La Propaganda Homeopatica.—Maanedsk. f. H.—H. Maandblad.—La Homeopatia.—Ind. Hom. Rev.—Hom. Envoy.—The Individualist.—Medical Century.—Rev. Hom. Française.—H. Recorder.—Wjestnik H. Med.—N.A.J. of H.—Clinique.—New Eng. Med. Gaz.—L'Art Médical.—Amer.

Medical Monthly.—University Homeopathic Observer.—H. J. Obst.—Jour. B.H.S.—Med. Adv.—Annaes de Med. Hom.—Lo Nuevo.—Amer. Phys.—Hom. Eye, Ear, and Throat J.—Hahnemannian Mon.—Pacif. Coast Journal of H.—Indian Homeopathic Reporter.

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Materia Medica Miscellany. By J. R. P. Lambert, M.D.

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THE
HOMEOPATHIC WORLD.

JUNE 1, 1904.

DEFINITIONS AND DEADLINES.

WE have the deepest sympathy with the aims and intentions of Dr. C. S. MACK, whose letter will be found in another part of our issue; but we regret to say we have but little faith in the methods by which he seeks to realise them. The establishment of universal medical peace, progress, and liberty is the object he has in view. The liberty of the old-schoolist is circumscribed, to Dr. MACK's great regret, by certain "deadlines," whilst the homeopath is free to move wherever he wills through the whole field of medicine without saying "by your leave" to any man. We are entirely at one with him in regard to the liberty of the homeopath. But when he speaks of "deadlines" established by the old school, and when he hopes to remove them by an omnipotent definition, we feel that he is himself moving in a region which has no existence in this matter-of-fact world.

The particular "deadline" which excites Dr. MACK's concern is, he supposes, the line of homeopathy "beyond which no one of the old-school's members can set foot and live." The actual fact is that the old-school has no objection to homeopathy in itself—it will swallow any amount of homeopathy if it is called by some other name; and it will embrace any number of homeopaths, so long as they forswear it. Forsworn homeopaths may practice homeopathy as well, or as indifferently, as ever

they did before; they may preach it in old-school colleges so long as they pretend they are not homeopaths and affect to despise HAHNEMANN, and none are so loved and respected as these by the old-school authorities. We very much fear that the almighty definition which is to alter this state of affairs is beyond the wit of man to invent.

Homeopaths have really nothing to complain of but their own apathy if homeopathy does not make the progress it ought. Complaints about the old school are perfectly futile: if the old school has the power to erect "deadlines" it is quite within its right to do so. The old school of medicine is neither better nor worse than any other "old school": it contains within it the strength and the weakness of every old and crusted human institution. It is more or less bound by the *average intellect of its individual members*. If Dr. MACK wishes to raise the average, we fear he will not achieve it by any number of definitions, however excellent.

Little over two years ago we had something to say about definitions in this journal, and as memories are short we may be excused for quoting ourselves. In April, 1902, we wrote:—

"In place of the idea of homeopathy as a living principle in nature capable of development in an infinity of ways, there has been substituted the idea of a quasi-theological creed, to be defended and disputed about and settled (or left unsettled) in the way usual in such disputes. Such being the case, it has become necessary to 'define' homeopathy, the definition necessarily taking colour from the opponent in argument for whose benefit the definition is made.

"A 'definition' may be compared to a bottle made to hold precisely the amount of knowledge on any subject possessed at the time by the definer. Having once made it, your definer is, to all intents and purposes, closed to progress. It is impossible to put more of the same fluid into the bottle without spilling the contents, and this proceeding is objected to by the owner of the bottle and those who accept it as adequate. But there are certain to be some who object to the bottle on the score of its shape and size, and hence other bottles are set up and a battle of bottles ensues.

"But homeopathy is a living principle, and can no more be defined than can Music, or Art, or Love, or Life. HAHNEMANN devoted his *Organon*—perhaps the profoundest therapeutic work ever written—to the mere *statement* of homeopathy, but the *Organon* cannot be accepted as a definition of it.

"As soon as a thing can be satisfactorily defined it is practically dead. Homeopathy is very much alive, and homeopaths should know it as a living power, and seek to apprehend as much of it as they can use, without imagining that all outside their range in vision, and scope in use is non-existent or illegitimate."

With all due respect to Dr. MACK, we do not find his definitions more to our taste than any others; and the persistence with which he speaks of "Homeopathy AND rational medicine" is to us most objectionable. He should at least put "rational medicine" in inverted commas, as our contemporary the *Homeopathic Review*, which has excited his ire, correctly does. If he does not think homeopathy is rational medicine, why does he not jump the "deadline" and repose in the bosom of what he considers to be rationality, and worry himself no more?

For our part we refuse to worry ourselves or anybody else about the old school and its self-imposed limitations. This is a free country, and if our old schools enjoy their limitations, it is no business of ours to make them dis-enjoy themselves. It may be different in America. But as long as the old school does not prevent us from doing our own curative work—and this it cannot do—it is at liberty, so far as we are concerned, to go on doing the kind of work which its clients ask of it.

OREXINE TANNATE IN HYPERCHLORHYDRIA.—Dr. H. V. Halbert describes the limitations of use of orexine tannate in stomach troubles. He says: "In my experience it is most frequently indicated at the termination of a hyperchlorhydria, when acid deficiency frequently ensues. Under such conditions, as digestion is supplanted by a tardy gastric emulsion, undigested food irritates the stomach, and both a muscular and mucous atonicity appear." Here the use of orexine is of great value. Dr. Halbert has administered the drug in the first and second decimal triturations without unfavourable symptoms arising. (*North American Journal of Homeopathy*, October, p. 615.)—*J. B. H. S.*

NEWS AND NOTES.

THE LEAF FAMILY AND DR. CURIE.

WE are sure our readers will thank us for printing the exceedingly interesting letter from Miss Julia Leaf which will be found elsewhere. It was not written for publication, but the writer has very kindly allowed us to publish it; and the postscript was added at a later date to avoid misconception. Dr. Curie certainly did not introduce homeopathy into this country, but he was the first doctor to open a *public institution* devoted to the practice and teaching of homeopathy. So that to Mr. William Leaf and Dr. Curie are due the credit of the first *public* introduction of homeopathy to England, though it had been *privately* practised by Dr. Quin and others before. Our readers will be grateful to Miss Julia Leaf for the personal touches in reference to Hahnemann. The red morocco chair alluded to is now in the possession of the family of the late Mr. Peter Stuart, of Liverpool—another of the great merchant lay homeopaths who did yeoman's work in spreading homeopathy in these islands. Like Mr. Leaf, Mr. Stuart himself was a skilled homeopath, and practised among the poor when there was no medical man to do it. Homeopathy in this country owes much to its laymen. It is a son of Mr. Peter Stuart's—Mr. Mazzini Stuart—who has subscribed £50 to the Burnett Memorial.

NEW ELEMENTS—CAROLINIUM AND BERZILIUM.

THE discovery of new elements is becoming positively bewildering. A short time ago we were quite happy with a score or two, and had all the universe neatly divided up to fit the number. Now we find we are taking in with every breath a lot of new elements we knew nothing about before, and the earth is yielding something new for every digger. The New York correspondent of the *Daily Telegraph* announced the discovery of a pair of new elements on April 11th. Professor Charles Baskerville is the discoverer :—

“The announcement of his discovery was made at a meeting of the Chemists’ Club, after the professor had held it back for four years, in order that he might become sure that he was right and positive that the two elements had never before been separated. One is named carolinium, in honour of North Carolina, and the other berziliium, after Berzilius, who, without knowing it, saw vapour of it a century ago. Professor Baskerville enjoys a monopoly, for he has all the carolinium and berziliium available, and they have cost him much money. He has five grammes of carolinium-oxide and two and a half grammes of berziliium-oxide. Carolinium-oxide is a pinkish powder, and berziliium is green, while thorium-oxide, from which both are derived, is pure white. The professor says that the substances will undoubtedly be of value for illuminating purposes, although he is not prepared to give details. Thorium is employed in the manufacture of gas-mantles, when mixed with 1 per cent. of cerium, and berziliium and carolinium can undoubtedly be put to similar uses. They may be combined with other elements to produce hitherto unknown effects in illumination. Thorium twenty years ago was spoken of as a curiosity; yet hundreds of people are now digging it in North Carolina, and the annual output is worth half a million dollars. Professor Baskerville, who has been ten years working at his discovery, is only thirty-three. He graduated in 1890 from the university of Virginia, and took the post-graduate course at Vanderbilt University. He studied for a year at the university of Berlin, and then at the university of North Carolina, where he began as assistant instructor in chemistry, and four years ago was placed in charge of that department.”

PROFESSOR RUTHERFORD ON RADIUM.

We print elsewhere the *Times*' report of Professor Rutherford's lecture on radium at the Royal Institution on May 20th. Radium appears to be a transition element: it is perpetually giving off an "emanation," which has the properties of a gas, and retains three-fourths of the properties of radium itself; and further, both radium and the emanation are giving off or changing into helium. If this is the case, it is most unlikely that radium is an exception to the rest of the substances of the universe. No doubt all are changing, but the change is too slow to be calculated by any process that has yet been invented. A point of some interest to homeopaths is the rate at which atoms are shot off from radium—200,000 miles a second! It is hardly possible for any one who is not a high-delutionist to take these figures in—and yet no one in Professor Rutherford's highly scientific audience stirred a hair at the statement!

M. BECQUEREL'S LECTURE.

FROM the *Daily Telegraph* of May 14th ("Paris Day by Day" column):—

"The President of the Republic, who showed his interest in radium by paying a surprise visit to M. and Madame Curie in their laboratory some time ago, attended, unannounced, a lecture given by M. Becquerel, the great physicist, whose researches led to the famous discovery made by the younger scientist and his wife. M. Loubet, on arriving at the amphitheatre of the Jardin des Plantes, where the meeting was held, was received with loud cheers from a crowded audience of scientific students. M. Becquerel, after relating the history of the discovery of radium, dwelt at length on the subject of radio-activity. The most striking point in the lecture was his significant comparison of the mysterious radiation of radium with the emanations of perfume. He said that, according to M. Berthelot, one milligram of musk would go on giving out scent for 7,000 years before being entirely disseminated by emanation. As regards radium, it would require exactly eleven times that period—77,000 years—before a milligram of radium were dispersed into the atmosphere by the phenomenon of radiation. In conclusion, M. Becquerel suggested the hypothesis that radiation might be the giving off of minute particles of matter by all substances, and that 'the constitutive atoms of radium might be actually those of primordial matter.'"

MADAME CURIE.

THE *Chemist and Druggist* of May 21st has the following interesting biographical sketch of Madame Curie:—

"Madame Sklodowska Curie, who has this week been elected an honorary member of the Chemical Society of London, she being the first woman whose name has been put on the Society's membership-roll, is the daughter of a Russian professor, and the wife of Professor Pierre Curie, of the University of Paris. As a girl Madame Curie was fond of going into her father's laboratory to clean his apparatus and tidy up generally, but the Professor never dreamt, when he sent his daughter to complete her education in France, that he would put her on the high-road to fame such as no women and few men have ever equalled. In radio-activity Professor and Madame Curie are pupils of Professor Henri Becquerel, and they added to his observations and those of Crookes the discovery that the radio-activity of a uranium mineral is not proportional to the amount of uranium present, and to Madame Curie exclusively belongs the honour of working the chemistry of pitchblende thoroughly until she isolated from it polonium, actinium, and radium. Her thesis describing this work and the properties of radium gained for her the Paris University Doctorate of Science. Her husband did the physics side of the subject, and was so closely associated with her in the work that the Royal Society last

year presented the Davy Medal to them jointly. Now Madame Curie as the chemist of the partnership has her efforts distinguished by the Chemical Society in the conferment of an honour which is not shared by the professor. They are the parents of one child, a daughter. The French Government appreciate the abilities of the Curies so well that by creating a professorship for M. Curie they have ensured that he will always have the means and time to prosecute research."

THE DOCTRINE OF SIGNATURES AMONG THE ALLOPATHS.

WE wonder if the *British Medical Journal* and our esteemed contemporary, the *Homeopathic Review*, will have any remarks to make on the following, which we take from Xrayser's page of the *Chemist and Druggist* of May 21st :—

"Dr. T. J. Maclagan, whose valuable service in introducing salicin as the specific remedy for rheumatic diseases was mentioned last week, was led to his theories, I am informed by a pharmacist who knew him and did some work for him, by the by-path of superstition. He was convinced that where Nature hid a disease there she also provided a remedy. It was not exactly the old Doctrine of Signatures, but it went near it. The Signaturists gave rhubarb or saffron for bile, red-rose petals for blood-impurity, and lung-wort for pulmonary complaints, because they found in the roots or leaves or some part of the plants the 'signature' of its use. Dr. Maclagan argued that a rheumatism-cure must be found in marshy meadows, and my correspondent tells me that in his apprentice-days he was sent into such localities to collect queen of the meadows (*Spirea ulmaria*), a plant which contains methyl salicylate, and that a tincture made from this was Dr. Maclagan's first panacea. The doctor, however, abandoned this later for salicin from the more abundant willow of the marshes, and soon became locally famous for his rheumatism-treatment. He was lucky enough to cure an earl, and the countess, who had watched his provincial progress and appreciated his talents, brought him to London, where he established an immense practice."

TOOTHACHE > HANGING HEAD DOWN—*Nux Vomica*.

WE have received the following from a contributor :—
"My maid, March 31, 1903, was bad with toothache or neuralgia, proceeding from a *carious* eye-tooth in upper jaw. The pain was *shooting, extending to head and ear through bones of face and zygomatic process, > by warmth of fire and warm drink. Came on in evening. Face red.* The words underlined are symptoms stated in the

Dictionary of Materia Medica. Additional symptom remarkable and rather amusing—patient hung her head down between the knees for relief, saying then she was much easier! A pilule of *Nux v.* 3 cured.”

HOMOEOPATISCH MAANDBLAD.

WE are obliged to our contemporary, the *Homoeopatisch Maandblad*, for kindly calling its readers' attention to our appeal for the Burnett Memorial. We are glad to note that there is a strong desire for reform in medical practice in the Netherlands, and we hope that our two countries may be helpful to each other in spreading the movement.

BRITISH HOMEOPATHIC ASSOCIATION.

THE lectures of the Association are now in full progress, and the month of June is expected to see a notable effort towards post-graduate instruction on the part of British homeopaths. There is a feeling abroad that it will not do to rest on our oars—we must go forward or else drift.

TOBACCO DEAFNESS.—Prof. Wyatt Wingrave reports seventeen cases of deafness which he considers to have been due to excessive tobacco smoking. He emphasises the following points: (1) That they were all well-marked cases of nerve deafness occurring in heavy smokers. (2) That the loss of low tones in 50 per cent. suggests an auditory equivalent for a recognised ocular lesion. (3) That there was definite scotoma in four cases and impaired sensation of vision in eight of them. (4) That the disease was symmetrical. (5) That 80 per cent. showed marked improvement on abstinence from tobacco, and this abstinence being supplemented by drug treatment, three were cured. But the habit was so strong and the will so weak that the forecast was not always encouraging.—*Medical Times*.

POISONING BY HONEY.—An investigation has been held by Mr. L. F. Kebler into the cause of serious illness which had followed the eating of honey at Princetown, U.S. The symptoms were those of strongly irritant poisoning, followed by collapse, and the patients narrowly escaped death. Analysis failed to recognise any alkaloid or inorganic poison, yet the administration of the honey to a cat produced identical symptoms. It is supposed that the honey must have been collected by the bees from certain species of the *Ericaceæ* which are known to contain a virulent toxine.—*Medical Press*.

ORIGINAL COMMUNICATIONS.

SHAKESPEARE AND PHYSIC.

By R. E. DUDGEON, M.D.

SHAKESPEARE writes so impersonally that it is impossible to ascertain his real opinion on any of the subjects alluded to by his characters. These subjects are numerous, and the ways in which they are handled by the characters are diverse, often opposite. While we feel convinced of the sincerity of the convictions of the speakers, we cannot arrive at any conclusion with respect to the real views of the author. It would seem that, like an illustrious statesman of our own time, he had "no settled convictions," but was merely a vehicle for transmitting the views of his characters. Of course this is absurd; he must have had opinions of his own, but his genius is shown in the wonderful truth to nature and the lifelike character of the actions and sentiments of the creatures of his imagination. Shakespeare wrote *de omni re scibili*, and the personages of his plays are endowed with almost every variety of opinion on all the subjects broached. So with medicine and its professors. In all the plays there are only six doctors and an apothecary. Dr. Caius, in the *Merry Wives*, is an entirely comic character and a Frenchman. *Macbeth* (the play, I mean) has two physicians. The first, an English doctor, is merely introduced to testify to the value of the royal touch for the "King's Evil," a superstition that lingered on in this land for many years after Shakespeare's day, for we all know that Samuel Johnson was touched for the Evil by Queen Anne. The Scotch doctor makes some sensible remarks about Lady Macbeth's somnambulism, and is very contemptuously treated by Macbeth, who, like many other non-medicals, thinks himself a much better doctor than his physician. Dr. Butts, in *Henry VIII.*, is much more of a politician and courtier than a doctor. Dr. Cornelius, in *Cymbeline*, is an excellent and sensible doctor, who says some good things about the uselessness and demoralising effects of vivisection. The physician in *King Lear* recommends narcotics for the old king's madness. The starved apothecary in *Romeo and Juliet*, for a bribe of 40 ducats, sold a deadly poison to the love-sick Romeo. So, on the

whole, Shakespeare is not disrespectful to the medical profession individually, though apparently he is not very much impressed with their health-bringing powers. But he is not nearly so contemptuous of their achievements as Bacon, with whom it is sought by some to identify him. Bacon thinks the doctors are all on the wrong tack, and he is especially severe on Galen, whom he denounces most harshly. "This is the man that would screen the ignorance and sloth of physicians from their deserved reproach, or preserve them unattacked; whilst himself most feebly and unequally pretends to perfect their art and fill up their office. This is the man that, like the raging dogstar or the plague, devotes mankind to death and destruction by denouncing certain tribes of diseases to be incurable, taking away all glimmering of hope, and leaving no room for future industry." The only passage in Shakespeare that is comparable to this is the talk of Parolles and Lafeu about the king's cure by Helen of a disease pronounced incurable by his own physicians:—

Lafeu.—To be relinquished of the artists,
Parolles.—So I say; both of Galen and Paracelsus.
L.—Of all the learned and authentic fellows,—
P.—Right, so say I.
L.—That gave him out incurable.—
P.—Why, there 'tis; so say I too.
L.—Not to be helped,—
P.—Right: as 'twere a man assured of an—
L.—Uncertain life, or sure death.

Bacon quotes with satisfaction the opinion of a learned Jewish physician:—"Your European physicians are like bishops, they have the keys of loosing and binding, but no more." Bacon talks much of what he hopes may be effected in diseases by regulated courses of strong medicines, but he gives no hint of what he thinks these medicines should be, or the diseases for which they ought to be employed. The only medicines he mentions are opiates and nitre (*Adv. of Learn.*, IV. 2). It is said that he was in the habit of taking a dose of nitre, or saltpetre, every day, believing it was useful for preserving health and prolonging life. While Shakespeare mentions many medicines, he only once alludes to Bacon's favourite nitre, and then under the uncomplimentary epithet of

“villanous saltpetre” (1 *Hen. IV.* i. 3). Apparently Bacon regarded nitre as a kind of general remedy, much as Rademacher did the so-called “cubic nitre,” which is a nitrate of soda, and not of potash, like the ordinary nitre.

Bacon, while lamenting the want of specific remedies for particular diseases, and of any general principle for the discovery of such remedies, nowhere shows that he knows of any such principle, either general or partial. Shakespeare, on the other hand, puts into the mouths of some of his characters expressions pointing to such a therapeutic principle, and we are delighted to think it is our own homeopathic therapeutic rule. Thus the Earl of Northumberland, on hearing of the defeat of his army by that of the King, says:—

“In poison there is physic; and these news,
Having been well, that would have made me sick,
Being sick, have in some measure made me well.”
(2 *Hen. IV.* i. 2.)

Still more plainly is it expressed by Benvolio:—

“Tut, man, one fire burns out another’s burning,
One pain is lessened by another’s anguish;
Turn giddy, and be holp by backward turning;
One desperate grief cures with another’s languish:
Take thou some new infection to the eye,
And the rank poison of the old will die.”
(*Rom. and Jul.* i., 2.)

Shakespeare’s allusions to medicines are interesting. Our inestimable medicine, *Aconite*, he mentions only as a deadly poison, as which it was then generally regarded, even by medical men. In this sense it is used by the King:—

“Though it do work as strong
As *Aconitum* or rash gunpowder.”
(2 *Hen. IV.*, iv. 4.)

Juvenal also employs it as a general term for poison: “*Nulla aconita bibuntur fictilibus*”—“no poisons are drunk out of earthenware”—implying that poisoners administered their death-dealing potions in precious cups, or that they selected their victims, not among the lower classes, who drank out of earthenware mugs, but

among the upper ranks, who used more valuable vessels. In more recent times we find Granville (Lord Lansdowne) using the word, probably as a general term for a deadly poison :—

“ Despair, that *Aconite* does prove,
And certain death to others' love.”

Dryden seems to indicate more particularly the well-known plant :—

“ Our land is from the rage of tygers freed,
Nor nourishes the lion's angry seed ;
Nor poisonous *Aconite* is here produced,
Or grows unknown, or is, when known, refused.”

Whatever may have been the case in Dryden's time, *aconite*, though not indigenous, is much cultivated in our gardens, and has been frequently the cause of serious accidents, and even death ; the fatal effects on the family of a magistrate in the north of Scotland, when the root was mistaken for horse-radish, are well known.

Aconite, though it seems to have been used, like hemlock, for the execution of criminals, was seldom employed as a medicine, and then often with fatal results. Stoerck, in 1762, was the first of the more modern writers to revive its medicinal use. He tested its effects on himself, and showed the doses in which it could be taken without danger. He recommends it as a remedy in scirrhus, pain in the joints, ulcers, ague, gonorrhœa, tic, rheumatism, &c. Hahnemann, in his *Apotheker-Lexicon* (1798), only says it has been found useful in rheumatisms, some paralyzes, and some kinds of apathetic insanity. In his celebrated essay of 1796 he gives a much fuller list of the affections in which *Aconite* had been said to be useful. Even in 1805, when he published his *Fragmenta*, Hahnemann seems to have had little suspicion of the wonderful remedial powers of this medicine, which he revealed later in his *Materia Medica Pura*.

Margaret's recommendation of *Carduus benedictus* to Beatrice (*Much Ado*, iii. 4) is not only for its supposed efficacy as “ the only thing for a qualm,” but is, of course, meant for a sly reference to the name of Beatrice's lover, Benedick.

Colocynth was known to Shakespeare. Nothing is said

of its medicinal qualities—its disagreeable taste is what is implied—when Iago is encouraging Roderigo in his pursuit of Desdemona: “The food that to him now is as luscious as locusts shall be to him shortly as bitter as *Coloquintida*.”

Ophelia's gift of flowers to her friends has nothing to do with their medicinal qualities, but only with the signification attached to them in the so-called “Language of Flowers” (*Hamlet*, iv. 5); and the flowers she decorated herself with, before drowning, were common weeds.

One cannot fail to be struck with the large number of weeds and flowers Shakespeare was familiar with. Look at the long list of noxious weeds that Burgundy says (*Hen. V.*, v. 2) were usurping the place of useful crops in France. Among these some have well-known poisonous or medicinal properties, such as darnel, hemlock, fumitory, but it is only for the evil they do to the land, not for their poisonous action on human beings, that they are mentioned. Perdita (*Winter's Tale*, iv. 3) gives a catalogue of flowers that would stock an old-fashioned garden, and to each of them she attaches a subtle characterisation, showing that she was quite familiar with them:—

“ For you there's rosemary and rue ; these keep
Seeming and savour, all the winter long :
. . . The fairest flowers o' the season
Are our carnations and streak'd gilliflowers,
Which some call Nature's bastards : . . .
Hot lavender, mints, savory, marjoram ;
The marigold, that goes to bed with the sun,
And with him rises weeping ; these are flowers
Of middle summer . . . daffodils,
That come before the swallow dares ; and take
The winds of March with beauty ; violets, dim,
But sweeter than the lids of Juno's eyes,
Or Cytherea's breath ; pale primroses,
That die unmarried, ere they can behold
Bright Phœbus in his strength, a malady
Most incident to maids ; bold oxlips and
The crown imperial ; lilies of all kinds,
The flower-de-luce being one.”

The last is, doubtless, the iris. The “crown-imperial” is well known in our gardens by that name. It is the *Fritillaria imperialis*, said by Hahnemann (*Apot. Lex.*), under the name of Kaiserkrone, to possess anti-hysterical properties. It has handsome pendulous flowers, but they

have a vile foxy smell, and Orfila says he poisoned several dogs with the contused leaves, so it must have toxic properties, though Taylor says it has none.

Cordelia in the pathetic account she gives the physician of her father's madness says he was—

“Crowned with rank fumiter, and furrow weeds,
With harlocks, hemlocks, nettles, cuckoo-flowers,
Darnel, and all the idle weeds that grow
In our sustaining corn.”

Darnel, hemlock, and fumitory are also among the noxious weeds mentioned by Burgundy. “Harlock” is probably intended for “*burdock*,” the *Arctium lappa*, formerly greatly esteemed for the diuretic, purgative and diaphoretic qualities of its root; it is now but seldom used, though it has found a place in our *materia medica*. The *Fumiter*, or *Fumitory*, used formerly to be used as a medicine. Hahnemann (*Apot. Lex.*) says it was found useful in several kinds of skin diseases, induration of liver, jaundice with vomiting, but he does not seem to attach much value to it, and I doubt if it is ever used now medicinally, unless by some so-called botanical country practitioner. Hemlock and nettle are both too well known to require dwelling on. Neither is mentioned by Shakespeare for its medicinal virtues, but as “root of *Hemlock* digg'd i' the dark” is an ingredient of the witches' hell-broth, we may suppose that its poisonous qualities were well understood by the author.

The *Darnel*, or *Lolium temulentum*, of the family of the Gramineæ, has remarkable poisonous qualities, characterised by a kind of intoxication—hence its French name *Ivraie*. It has often caused serious accidents when mixed with flour and made into bread. Hahnemann, in his *Apotheker Lexicon*, has given some account of its toxic effects, and still more in his first essay on the homeopathic principle (1796). It has not been adequately proved, but so far as it has, the results obtained bear out the old idea that it is a dangerous poison. However, some assert that it is only when it is affected by ergot, that fungus which often causes rye to be dangerous, that darnel is injurious, and then it is the ergot, and not the darnel, that does harm, and if the grain be carefully selected, it is quite wholesome. Whatever be the truth here, the darnel, unaffected by ergot,

is admitted into our pharmacopeia, but I do not suppose it is much used.

Fern-seed, credited with the power of rendering its possessor invisible, is spoken of in this sense by Gadshill preparing to perpetrate a highway robbery: "We steal as in a castle, cock-sure; we have the receipt of *Fern-seed*, we walk invisible" (1 *Hen. IV.*, ii. 1).

Hebenon is a poison to which there is only one allusion in Shakespeare, but then it has ascribed to it such remarkable toxic qualities, that it is important to ascertain precisely what it is. Most authorities identify it with *Henbane* or *Hyoscyamus niger* (the *albus* is not much known). The ghost of Hamlet's father gives a very graphic account of its effects upon himself:—

"Sleeping within mine orchard,
My custom always of the afternoon,
Upon my secure hour thy uncle stole,
With juice of cursed *hebenon* in a vial,
And in the porches of mine ears did pour
The leperous distilment; whose effect
Holds such an enmity with blood of man,
That, swift as quicksilver, it courses through
The natural gates and alleys of the body;
And, with a sudden vigour, it doth posset
And curd, like eager droppings into milk,
The thin and wholesome blood: so did it mine;
And a most instant tetter barked about,
Most lazar-like, with vile and loathsome crust,
All my smooth body." (*Hamlet*, i. 5.)

Shakespeare may have got the device of poisoning the victim by pouring the poison into his ears from Pliny, who says: "An oil is made from the seed of *hyoscyamus*, which if it be but dropped into the ears is enough to trouble the brain" (quoted by Hamilton, *Flora Homeopathica*, i. 94). There is no mention in the ghost's enumeration of his symptoms of the well-known characteristic action of the poison on the brain and mental functions, but only of its supposed effects on the blood and cutaneous surface. *Hyoscyamus* is not, indeed, without a marked action on the skin. Hahnemann himself, in the *M. M. P.*, mentions as occurring on himself: "Numerous large boils," and from Costa he quotes: "Cutaneous eruption of large pustules, accumulated on several spots, from the region above the hips to the knees,

in appearance like confluent small-pox ; they do not contain any fluid, and scab off after four days ;” and he gives Greeding as his authority for, “ Alternate appearance and disappearance of brown spots all over the body ” and “ tettery spots on the nape ” ; and Allen gives a few more similar symptoms. But one would have felt more confident of the identity of hebenon and henbane if the ghost had given us more of its cerebral and less of its cutaneous symptoms. The other suggestion, that the “ cursed juice of hebenon ” was juice of ebony, is absurd, as ebony has no known poisonous properties.

Mandragora, the *Atropa mandragora*, which is not a native of Britain, but grows plentifully in Italy, Spain, and other countries, is also known by the name of *Mandrake*. Cleopatra and Iago refer to its narcotic power. Says Cleopatra : “ Give me to drink *Mandagora* ; that I might sleep out this great gap of time my darling is away.” So Iago, apostrophising Othello, whose jealousy he has aroused :

“ Not poppy, nor *mandragora*,
Nor all the drowsy syrups of the world,
Shall ever medicine thee to that sweet sleep
Which thou ow’st yesterday.”

(*Othello*, iii. 3.)

The *Mandrake* was fabled to emit such a horrible groan when pulled out of the earth that it was certain death to any one who attempted this deed. Suffolk and Juliet allude to this property of the plant. Suffolk says :—

“ Would curses kill, as doth the *Mandrake’s* groan,
I would invent as bitter searching terms,
As curst, as harsh and horrible to hear.”

(*2 Henry VI.*, iii. 2.)

And Juliet :

“ Alack, alack ! is it not like that I,
So early waking,—what with loathsome smells ;
And shrieks like *Mandrakes’* torn out of the earth,
That living mortals, hearing them, run mad.”

(*Rom. and Jul.* iv. 3.)

The fancied resemblance of the root to the body and legs of a small human being (hence its ancient names *Anthropomorphon* and *Semihomo*) suggests to Falstaff the comparison of his diminutive page and of his shrivelled old

friend, Justice Shallow, to that root (2 *Henry IV.*, i. 2 and iii. 2). The shape of the root is not unlike that of our *Bryonia*, though the latter has a colour more nearly resembling that of the human being in this part of the world, being nearly white, whereas the mandrake root is more brown in hue. At an Agricultural Show in London, not many years ago, I saw a stand displaying a large number of roots of our bryony, which I knew well, having dug up many. Above them was the inscription "Mandrakes, a wonderful medicine." I asked the vendor why he called these bryony roots "mandrakes"? He replied that any one could see that they resembled human children, and so they deserved the name he had given them. He asserted, too, that they were male or female according to the number of limbs or divisions of the roots they possessed. He knew they were bryony-roots, but mandrakes was a more attractive name. As our bryonia is usually the *Dioica* variety there are, of course, separate roots of the male and female plants, but it is not likely that this enterprising tradesman distinguished his male and female roots botanically, but only by their varying shape. I suggested to him that if he called his male roots "mandrakes," he ought to call his female roots "womanducks," but he did not seem to welcome the idea. Some old authors talk of a male and female mandrake, but the sex was determined by the shape of the fruit, not of the root. The plants Reuben found and gave to his mother, Leah, though called "mandrakes" in our versions of the Bible, could not have been this (the alternative reading of the *Revised Version*, "love-apples," does not help us) as its characteristic is not aphrodisiac, but the opposite, viz., stupefying; indeed it may be called the "chloroform" of the ancients, as it was used to anesthetise patients before operating on them. Neither can the passage in the *Canticles* (vii. 13) be a correct translation: "The mandrakes give forth fragrance," for, as Hahnemann says (*Apo. Lex.*, i. 34) the mandragora has a "stupefying stinking odour,"—hardly a nice treat to offer to one's sweetheart.

Romeo says: "Your *plantain* leaf is excellent for your broken shin" (*Rom. and Jul.*, i. 2). The plantain was esteemed an excellent vulnerary in olden times, though it is little used as such nowadays. In homeopathic practice it is chiefly known for its power to cure tooth-

ache. As arnica is called "plantain" in several places where it grows (*Plantain des Alpes*, *Plantain des Vosges*), and as its virtues as a vulnerary are undoubted, we may, if we choose, think that this was the plantain Romeo thought was "excellent for your broken shin."

Macbeth is rather exacting in his demands on medicine:—

"Canst thou not minister to a mind diseased;
Pluck from the memory a rooted sorrow;
Raze out the written troubles of the brain;
And, with some sweet oblivious antidote,
Cleanse the stuffed bosom of that perilous stuff
Which weighs upon the heart?"

The doctor admits his inability to supply a medicinal remedy for this form of mental malady. He was not so resourceful as the Zulu medicine-man, who, being consulted by a countryman on behalf of a daughter who had been in service and caught Christianity there, subjected her to a long course of emetics, in order to rid her of the "perilous stuff." I do not know if success attended this drastic treatment.

Macbeth, undaunted by the want of success of his first appeal to the doctor, sets him a still more hopeless task:

"If thou couldst, doctor, cast
The water of my land, find her disease,
And purge it to a sound and pristine health,
I would applaud thee to the very echo,
That should applaud again . . .
What rhubarb, senna, or what purgative drug
Would scour these English hence?"

Probably many doctors in Shakespeare's day pretended to diagnose and prescribe for diseases by "casting the water," *i.e.*, looking at it in a flask, just as we see represented in old Dutch pictures. Falstaff seems to have sent his page on such an errand to a doctor of the water-casting sort, but without any satisfactory result:—

Falstaff.—Sirrah, you giant, what says the doctor to my water?

Page.—He said, sir, the water itself was a good healthy water: but for the party that owed it, he might have more diseases than he knew of. (2 *Hen. IV.*, i. 2.)

Macbeth's mention of *Rhubarb* and *Senna* as the drugs the doctor was most likely to be familiar with, reminds

one of the address of the candidate in Molière's *Malade Imaginaire* to the doctors who have conducted the examination and granted the degree:—

“Grandes doctores doctrinae
De la rhubarbe et du séné.”

Wormwood is not mentioned by any of Shakespeare's characters as a medicine. The nurse in *Romeo and Juliet* says that when she wished to wean the baby she applied wormwood to her nipple, so that the bitter taste deterred the infant from drinking. Wormwood, in France and Germany nowadays, under the names of *Absinthe* and *Vermuth*, seems to have an opposite effect on grown-ups, as it imparts a greater relish to their drink—with disastrous consequences!

Shakespeare's physic is a not very fertile theme. In his day the art was at a very low ebb, so we cannot expect to find his knowledge in advance of his time. But I hope the account of it I have been able to rake together from his plays may not prove quite uninteresting, and the suggestion of a therapeutic law reminiscent of homeopathy shows a glimmering of the truth which is much in advance of the crude empiricism and puerile hypotheses which constituted the art and science of medicine in his day, and for long afterwards.

MENTHA PIPERITA FOR SINGERS, NUX VOMICA FOR PIANISTS AND VIOLINISTS.

(FROM A CORRESPONDENT.)

H. C. finds *Mentha p.*—a couple of one-pilule doses taken within two or three hours before public singing—of great utility, as per *Dict. Mat. Med.* The same lady the other day experienced much disappointment in lack of skill in playing the pianoforte. There was lack of flexibility and power and precision in fingering. Last night she had *Nux v.* 200 for post-nasal catarrh (previously found effective for that), and to-day says: “I wonder how it is I can play so well to-day—my hands are warm and flexible, and I can do what was impossible the other day.” This is remarkable, but not surprising, when one reads paragraphs 21 to 24, pp. 627 and 628 of the *Dictionary*. These are two important items for students preparing for exams.

A NOTE ON EUCALYPTUS RESIN.

By ERSKINE C. WHITE.

IN January last a dog was bitten by a venomous insect, on left side of penis, about 1 inch from base.

Enormous swelling and discharge of thick pink pus ensued. I then gave *Apis* 1x, *Bell.* 1x, and *Merc. sol.* 1x, one dose of each.

A clean-cut wound about 1 in. long, $\frac{3}{4}$ in. wide, and $\frac{1}{2}$ in. deep was left in a week.

Wound remaining open for three days without least sign of healing, I tossed a wineglassful of warm red-gum mixture into the wound. In about forty hours a thick skin-like scab covered the wound, which within ten days neither sight nor touch could detect.

Holdsworthy, New South Wales.

Mr. White has very kindly forwarded to us a sample of the Resin, of which Messrs. Epps have made the usual preparations, and which they can now supply. Writing from Holdsworthy under date March 6th, Mr. White says:—

“I rode out into the primeval forest to-day, and obtained about 8 oz. of the resin of the red-gum tree.

“The trees abound in a deep and lovely ravine, two miles from here, a scene of romantic beauty. In a few weeks the trees will commence bleeding, when I can collect a few pounds of the resin. I was fortunate to find one tree ahead of its time.

“I trust, sir, you will make the experiment of applying an aqueous solution to an open artery.”

[Wounded arteries are not met with every day, but there must be a very wide sphere of utility for this remarkable resin, which we hope our readers will not be slow to test.—Ed. *H. W.*]

EXPERIENCES WITH UNIT DOSES—*THUJA OCCIDENTALIS*.

By M. Le H. COOPER, M.D.

THE following case will be of interest as exemplifying the influence of *Thuja* over the skin when other symptoms point to it as the indicated remedy.

A lady, aged 45, of dark complexion and active habits, came under my treatment in September, 1903, suffering from psoriasis. She stated that she first came under my late father, Dr. Robert T. Cooper, five years before, having previously tried allopathic treatment without avail. At that time her symptoms were giddiness of a very severe type, together with numbness down the left side of the body, severe headaches and failing sight. Seven years before this she had suffered from influenza and congestion (? hemorrhage) of the brain, which rendered her unconscious for thirty-six hours. She said that pains in the right side of the head and numbness of the left side of the body gradually came on after this illness, and that at the same time her sight began to fail. At the time of coming for treatment the vertigo occasionally caused her to fall in the street (always forward, never from side to side, or backward). Her defect of vision she described as associated with a sudden darkness coming over her sight. She further stated that at the time she came to my father there was no sign of any skin trouble, and this I afterwards confirmed by referring to the notes on her case, which commenced on 5th of April, 1899.

On tracing the case through I found that although her general health had greatly benefited, the vertigo, headaches, and eye trouble had only been slightly relieved until the 26th of October of the same year, when, after a single dose of *Artemisia abrotanum* ϕA , the following note was made: "Vertigo is much better; can walk better, numbness in various parts much better. There is, however, much headache with dragging in the eyes and muddled feeling."

A single dose of *Matthiola græca* ϕA was then given, and on the 7th of December, 1899, the note made that the vertigo and numbness had gone, but the pain in the head and eyes was severe. She also was troubled by distension after food; her sleep was not good, and she had a feverish feeling in the morning. *Ars. iod.* 30, four times a day, was

now ordered, and the next note, on the 15th of December, 1899, is the first record of an eruption described as "inflammatory spots on the legs, in which latter there are numb, gnawing pains"; a further note being made that the nervousness and numbness (presumably down the left side of the body) were much better.

On the 11th of April, 1900, a note appears to the effect that spots are now present on the arms. From this time onwards the eruption continued, though varying in intensity from time to time, it being constantly referred to in the notes, and when she came under me on the 18th of September, 1903, her symptoms were as follows:—

A scaly eruption is present over the extensor surfaces of both arms, consisting of dull reddish patches varying in size from a shilling to a half-a-crown piece. A large patch, about six inches by four inches, is present over the right thigh and a few smaller patches over the right hip, close to the great trochanter. There are also said to be some patches over the lower part of the back, but at present the legs are not effected. A notable fact, however, is that the patches do not effect the elbows and knees, though the patient thinks she had one on the left elbow at one time, but of this she is not sure. The eruption is always < at the seaside and in cold weather, and it causes an intense irritation which seriously disturbs her sleep at night. Her general health is good, in spite of the fact that she has a great deal of anxiety and worry in her daily life. She feels slightly giddy at times, but this is trifling in comparison to what it formerly was; it is characterised by a sudden desire to fall forward.

Last Christmas she had an attack in which she almost lost consciousness. She says her teeth were clenched during the attack, and that when she came to herself her limbs felt cold and heavy. She is troubled with headache of a dull character, and the left arm and leg are weaker than the right, numbness being occasionally felt in them. She had recently been taking an old prescription for *Kali brom.*, which I stopped and ordered *Ars. 3x ij* tablets every night.

October 20, 1903.—Inflammation in the eruption somewhat less at first, not now. A quarter of an hour after the first dose of the medicine patient broke out into great heat, which lasted two hours, then felt cool, less feverish, and the spots less irritable. Slept better. Pains, like

growing pains, developed in the legs, especially the left, also suffered a good deal of pain in the old vaccination scars on left arm. On the fourteenth day after commencing the medicine felt giddy, and next day had stabbing pains under the left breast. Now for the last week the eruption is more irritable again, and the left arm has become more swollen round the patches. The left arm and leg have been weak for the last few days and have twitched when going off to sleep.

Æthūs cinap. φA, *Mag. carb.* 200 in a fortnight's time if irritation is very severe.

November 11, 1903.—All the patches are more painful and burning. Immediate effect of dose—felt a scraping sensation in the eruption. A week later had a sudden attack, during which she lost power in her left arm and leg. She says that she turned deathly white during the attack, but did not lose consciousness. *Her head has been most certainly better during the last three weeks.* The irritation always begins about 5 p.m. *Lycop.* φA.

December 2, 1903.—On the whole feels better, but the eruption has been steadily extending. Most of the patches have now coalesced, forming practically one continuous inflamed surface on the extensor aspects of the forearms. In places hard crusts have formed, which tend to crack, one large patch especially, on the right forearm, having a fissure $2\frac{1}{2}$ inches in length. Immediate effect of the last dose—shivered and felt cold, and four hours afterwards the patches became very much more inflamed, and this condition continued for some days, but lessened later on. Has had faint feelings, but no actual attack since. There has been a good deal of pain in the limbs in the morning, "as though she had been lying on wood."

On making further inquiries into her mode of life, I extracted the information that she was in the habit of visiting among the poor, and that in order to protect herself from the danger of infection from small-pox she had been frequently vaccinated, the last occasion being two years ago. This fact, together with the known influence of *Thuja* over skin eruptions of this type, the vertigo, and the fact that the late Dr. Burnett had claimed to have cured many cases of left-sided paralysis with this drug, led me to give *Thuja* φA.

January 13, 1904.—The report on this date is a

startling proof of the correctness of the choice of remedy: Feels very much better in herself, *has had no giddiness at all since the dose. Eruption extraordinarily better.* On examination I found that *it had to all intents and purposes entirely disappeared, one or two faint spots the size of half a pea were all that could be seen. All the crusts and large inflamed areas were gone, leaving smooth skin at their former site, in which there was a faint brownish staining resembling the effects of sunburn. The large patch on the thigh had left a similar stain to mark the position it formerly occupied.*

The effect of the remedy had been so sudden and sweeping that the patient was in great trepidation lest the disappearance of the eruption might be followed by a reappearance of her old troubles. This, however, was not the case, but on the contrary her general health markedly improved.

One significant fact came to light when she casually mentioned that some glands at the right side of her neck, which she had had for eight years and of which she had omitted to tell me, had been better during the last three weeks than she ever remembered them. She said that the immediate effect of the dose was an increase of irritation the same afternoon, and the glands in the neck became temporarily larger.

Notes.—I must apologise for having set forth the above case at so great a length, but it was important to show first how the eruption made its appearance, the notes clearly indicating that this was practically coincident with the disappearance of the vertigo and other symptoms. Then again, unless I had given the previous treatment and symptoms fully up to the time the *Thuja* was administered, I could not have so definitely proved the direct influence of this drug. It was necessary to do this in order to clearly show that the eruption was steadily gaining in intensity up to the time the *Thuja* was given.

I am unaware whether any previous record exists of *Artemisia abrotanum* having so definite an influence over vertigo of this character (tendency to fall forward), but the interest of this observation is enhanced when we remember that *Artemisia absinthium* produces vertigo with a tendency to fall backward.

I may here note that although the glands in the neck

have not quite disappeared, and slight irritation of the skin is occasionally felt, up to the present time the eruption has not returned, the patient has had no more of the sudden attacks, and her general health has most certainly improved.

18, Wimpole Street, W.

MATERIA MEDICA MISCELLANY.

By J. R. P. LAMBERT, M.D.

Eucalyptus Verifications.—Dr. Wm. Boericke says: “*Eucalyptus*, like every other drug, before it can be enrolled into the ranks of the aristocracy among the medicines of the homeopathic materia medica must have its pathogenesis tried by the fire of clinical application, and upon the results obtained will come its rank. In the domain of catarrhal conditions it has stood the test. Mucous membranes everywhere offer the most inviting field for the manifestation of the individuality of its medicinal force. Every mucous membrane throughout the body is affected, notably, however, that of the respiratory tract, alimentary canal and genito-urinary organs. My verifications, however, will confine themselves to the symptoms of the respiratory organs. Two distinct classes of catarrhal symptoms are produced and therefore cured by eucalyptus: (1) The acute coryza array of symptoms. Others both in the homeopathic and old-school report striking success here. It produces the full feeling in the head, the dull frontal pain, stuffed-up nose and again free coryza with hot, burning, smarting eyes and tightness across the bridge of the nose. Dr. Werder, one of our oldest colleagues, has used the remedy for many years, and his indication in these cases is the running nose—‘the nose never stops running.’ Verifications of this use of *Eucalyptus* come to us from Drs. Rudolphi and Strambo, both Italian physicians of the regular school, who have used it extensively. This use of *Eucalyptus* is similar to that of camphor and eucalyptol, a substance aromatically like camphor and akin in its effects.

“Not only as a curative but preventive as well, its use in influenza is unquestioned. It meets the catarrhal symptoms as described, with throat symptoms very marked, sore pain in trachea, cough, pleuritic pains, dyspnea,

aphonia, and constriction. Especially useful is it in resulting bronchitis, when the fever has diminished; obstinate, irritable cough with thin expectoration, and later with the profuse secretion of offensive muco-pus of bronchial catarrh.

“(2) In the treatment of sub-acute and chronic catarrh used internally and as a spray, *Eucalyptus* will remain one of the greatest remedies. With increased mucous secretion, excessive secretion of saliva, also throat relaxed with constant sensation of phlegm, posterior nares inflamed and smarting, purulent and fetid discharge, cough accompanying this catarrh, it is the remedy that will speedily show its beneficial action. It has cured cases where there was continual profuse muco-purulent discharge from anterior and posterior nares, with consequent mouth-breathing. It acts best when the catarrhal state is worse in winter, and better in hot weather or dry cold weather. (Dr. Werder).

“I desire to recommend the more extensive use of *Eucalyptus* in the lower potencies (tincture to 6x) in the treatment of catarrh, acute and chronic, according to the indications given.—*P. C. J. H.*

The Arsenic Man.—Dr. E. J. Clark asks: Are you acquainted with the *Arsenicum* man personally? Here he is as described by Hoyne: “He is the most miserable man in the whole materia medica. In a state of health, he is tall, spare, and austere. His features are wrinkled, dried, and leathery, while his hair and eyes are dark; his hair is straight and harsh; when he walks by you in the street he walks fast, runs against you and wants a great deal of elbow-room; he is impolite, money-making, covetous, and malicious; he would rob his own brother for the sake of gain; he has no affection for the opposite sex, and if he marries he does so to obtain wealth; he is more attentive to his ledger than to his wife. He is a very anxious man; he is so anxious to make money that he has no time to be a fashionable man; he is not a daring man, and therefore does not take great risks in his business operations, but rather seeks wealth through miserly habits and low, underhand and cunning meanness; he is totally wanting in moral courage and constantly fears death; he cherishes none of the finer feelings of human nature; he is himself repulsive, and his diseases are of the repulsive kind.”—*Am. Phys.*

Lobelia Inflata in Pulmonary Affections.—Dr. E. R. Snader has found *Lobelia* a very useful medicine in a number of cases where the entire chest of the patient seemed on auscultation to be full of râles, and the resolving stage of pneumonia when this feature is prominent and much wheezing and rattling, and many râles are present, the presence of some pulmonary edema would not by any means contra-indicate the drug; on the contrary he has found great relief from it in actual cases of severe pulmonary edema.—*Am. Phys.*

Adonis Vernalis in Cardiac Affections.—D. H. V. Halbert makes some interesting and suggestive remarks on this drug in the *Clinique*. He refers to a bad case of aortic regurgitation with much edema, pronounced dyspnea and orthopnea, compensation rapidly failing and general anasarca increasing. The urine was below normal and amount of urea decidedly low, and the patient showed signs of coma. *Digitalis*, *Convallaria*, *Strychnia*, and *Cratægus*, and other remedies gave no relief. *Adonis* ϕ η ν six times daily was then given with excellent result. The amount of urine was increased markedly; and the urea soon reached the normal mark; the anasarca gradually subsided, and, better than all, the cardiac tone improved, until in a few weeks the compensation was well under way.

As the right heart was still suffering saline cathartics were systematically used; as the liver action and the kidney action began to improve we could notice beneficial effects so far as the heart was concerned. The utmost care as to diet and keeping the patient absolutely quiet were observed. In this way everything worked favourably while the remedy was continued. In a month's time the patient began to show a marked improvement and was allowed more liberty. Albumen, which had appeared in the urine, now subsided, and he was given a more vigorous diet.

As the edema disappeared and the heart improved the patient's strength returned; being anxious to go home he was allowed to leave. About four months later a letter from him informed Dr. Halbert that he had gone back to work, as he "considered himself well. Just how much the heart would endure with the added exercise of a vocation cannot be yet told, but the action of the remedy was a favourable surprise to him, for he had given an unfavourable prognosis.

He has since used the remedy in many other cardiac cases with decidedly favourable results. One indication for its use is the decreased amount of urea. Thus it is possible that the cardiac action is only secondary to the relief of renal and hepatic insufficiency. It, however, sustains the heart very much as *Digitalis* does, and without doubt its action is more gradual and lasting.

In the case of a fatty heart, in a very corpulent woman who had been addicted to the use of nitroglycerine, *Digitalis*, and *Strychnia* for relief, he received a most pronounced result. The patient gained greatly after only a few months' treatment. She had for a long time received no help whatever from previous treatment.

He has also obtained excellent results from the use of this remedy in conditions of tachycardia and disturbances from reflex irritations, and believes that it will yet be accepted for a general cardiac remedy. He has found no good results except in the use of the tincture, giving from five to ten drop doses four times daily.

MATERIA MEDICA RHYMES.

By MARGARET L. TYLER, M.D.

XIV.—LACHESIS.

Who *Lachesis* lack, forget
 Their pains from the very onset
 Of discharge, whatever its site :
 And the converse of this works right—
 Worse when expected flux won't flow,
 And points you on to climacteric woe :—
 "Never been well since the change, you know!"

Sleep brings the suffering back again,
 Sleeps into asthma, or sleeps into pain :
 And the obverse of this may sometimes obtain.
 Constriction and touch she can't abide :
 Pain either starts from, or stays in left side.
 Choleric women, this drug heckles,
 Who manifest ruddy hair and freckles.

Then, of *Lachesis* you'll note
That it catches a man by the throat,
Plus, often, a pain in the shin.
He must loosen the clothes 'neath his chin.
Skin purple or blue, and all swellings blue :
With difficulty is his tongue protruded,
catches the teeth, and is dry. *Lach.* gives ease
In left ovary-pain (to malignant disease),
A stool like to bits of burnt straw, he voids :
Gets a hammering in rectum, with hæmorrhoids.
Then, Rabies symptoms—cures rabies :
Solids he swallows with lesser unease ;
Empty swallowings or liquids mean pain.
Mind is profoundly affected again.
There's frantic loquacity, whistles and sings,
With exalted powers :—or the opposite things—
Confusion, weak memory ; lost time-sense ;
And irritability, nervous, intense.
Pains and burnings through *Lachesis* run :
With terror and dread he faces the sun :
Girdle-pain ; crawling on vertex : we've done !

XV.—SEPIA.

Sepia, with uterine troubles one starts :
Crosses legs, to prevent the protrusion of parts :
Rectum feels full, and prolapses likewise.
Flashes of heat from the pelvis arise.
Uterine region feels painful and stiff :
Pulsatilla-like tears, but indifference, as if
Her mind was estranged from her work, and possessed
With indifference for those she has always loved best.
Then, pressure on bladder, and micturition
Frequent, offensive—an *Indium* condition.
It is in its first sleep that the child wets bed.
Hemicrania ; shocks terrible, jerking the head.
The skin is discoloured with yellow spots, shows
A saddle astride on the cheeks and the nose.
Then, the vomiting, toothache and pigmentation
Of pregnancy : empty "all-gone" sensation :
And a terrible straining with constipation.

In the pelvic organs, to end the chatter,
Portal congestion's the root of the matter.

XVI.—HELONIAS DIOICA.

Helonias give for depression and gloom
In connection with "consciousness of a womb":
For leucorrhœa, vulvo-vaginitis,
Scanty, albuminous urine, pruritis:
Various displacements, especially pro-
lapsus, remember *Helonias Dio*.

XVII.—LILIUM TIGRINUM.

Tiger Lily hurries about;
Feels her inside's being all dragged out:
Frequent urgings to micturition—
Almost approaching the *Cantharis* condition:
Rectal distress therewith: a band
Constricting the heart, just like *Cactus Grand*.
Pulsatilla-like tears: her *Salvation's* a worry:
With *Argentum Nitricum* "duties" and "hurry."

BRITISH HOMEOPATHIC ASSOCIATION.

GRAND SUMMER FÊTE.

In reference to the Summer Fête mentioned in our May number, and for which it is anticipated that Royal patronage will be obtained, the following circular and invitation card has been issued:—

This Association has, as one of its chief objects, the establishment of Permanent Endowments for Professional Training in the Homeopathic practice of medicine in this country.

It is hoped and expected that this will, in great measure, ultimately meet the ever-increasing call for Homeopathic practitioners in Great Britain.

It is felt, however, that the Scheme is not yet sufficiently widely known throughout the country, and the Executive Committee are desirous to bring it more prominently in evidence before the friends of Homeopathy in England.

The Ladies' Committee of the Association are actively engaged in founding some part of this Educational Scheme. In furtherance of their object it is their intention to hold a Grand Fête in the Gardens of the Royal Botanic Society, as detailed in the accompanying card.

It is hoped that ladies and gentlemen who sympathise with this Scheme for an Endowed Educational establishment will allow their names to appear on the Grand Committee now being formed in connection with the Fête.

Secretaries of the Fête Sub-Committee—MRS. C. V. STEPHENSON, 90, Inverness Terrace, W.; MRS. HENRY WOOD, 34, Clanricarde Gardens, Hyde Park, W.

General Secretary of the Association—FREDERICK KING, 233A, Regent Street, London, W.

[CARD.]

BRITISH HOMEOPATHIC ASSOCIATION.

President—THE EARL CAWDOR.

Treasurer—JOSEPH HOWARD, ESQ., M.P.

The Ladies' Committee of the Association propose to give a Grand Fête at the Gardens of the Royal Botanic Society, Regent's Park, N.W., in the afternoon of July 7, 1904, in aid of the Funds of the Ladies' Branch of the work.

As it is anticipated that the Fête will be under very distinguished patronage, it is hoped that you will allow your name to appear on the Grand Committee in connection with the Fête.

Interim Hon. Secretary of the Ladies' Committee—MRS. C. V. STEPHENSON.

General Secretary of the Association—FREDERICK KING.
233A, Regent Street, London, W.

We are glad to know that the invitation has met with very gratifying response. We hope all readers of the HOMEOPATHIC WORLD will do their best to make the Fête one of the leading events of the London season.

SOCIETY'S MEETINGS.

BRITISH HOMEOPATHIC SOCIETY.

The eighth meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thursday, May 5th, Dr. Herbert Nankivell, President, taking the chair.

Clarence Granville Hey, M.B., C.M.Edin., M.R.C.V.S. Edin., of Croft House, Altofts, Yorks, having been proposed as a member by George Burford, M.B., and Edwin A. Neatby, M.D., was elected a member.

Dr. Goldsbrough, of London, read a paper entitled, "Cerebral Localisation: Some Suggestions on Principles and Conclusions," of which the following is his synopsis: Introduction—Brain the organ of consciousness—Limitations to that term—Localisation to be studied methodically—Foundation of method the highest level of consciousness—Speech as experience—The speech mechanism, how localised and related to volition, and varieties of sensation—Principles for the guidance of method—Anatomical and psychological meaning of association—The projection tracts—Provisional conclusions.

At the commencement of his paper Dr. Goldsbrough said that he would not be able to deal with the whole subject on that occasion, but merely give an outline of the subject, but the whole paper would appear in the Transactions.

A short discussion followed, which the President opened. After a pause one member remarked, "I'm afraid we are all stumped." However, Drs. Byres Moir, Madden, Alexander, Jas. Jones, and Granville Hey made a few remarks, to which Dr. Goldsbrough replied.

Dr. Spencer Cox, of London, then read a paper on "Sprue, or Psilosis," based upon two cases which he related. The principal point in the treatment, he said, was rest in bed and a milk diet. He had not found medicines of much service.

In opening the discussion the President suggested *Iodine* as a likely medicine. Dr. Madden mentioned two cases, one was relieved by milk diet and *Arsenic* and *Strychnine*. This case relapsed in a year, and did not yield to the same treatment. Another case was cured in three months by milk diet and *Arsenic*. Dr. Burford mentioned two cases, one of whom had not been to the tropics; one case was greatly relieved by *Phosphorus*. Dr. Moir had also seen a case in a patient who had never been abroad. This case ended fatally. He thinks cases more often occur than is thought among hospital children. Dr. McNish thought that most text-books consider sprue as a form of chronic dysentery. Dr. Cox replied.

BRITISH HOMEOPATHIC CONGRESS, 1904.

THE following circular has been issued by the Hon. Secretary :—

President, George Burford, M.B. ; *Vice-President*, Giles F. Goldsbrough, M.D. ; *Hon. Secretary*, D. Dyce Brown, M.D. ; *Hon. Treasurer*, E. M. Madden, M.B. ; *Hon. Local Secretary*, C. Knox Shaw, M.R.C.S.

29, SEYMOUR STREET, PORTLAND SQUARE, W.
May, 1904.

DEAR SIR,—The Annual Congress will be held this year in London, at the London Homeopathic Hospital, Great Ormond Street, W.C., by the kind permission of the Board of Management of the Hospital, on Friday, July 1st, at 10 o'clock punctually.

The Presidential Address will be delivered by George Burford, M.B., Senior Physician for Diseases of Women at the London Homeopathic Hospital.

The title of the Address is “ ‘ Similia Similibus Curentur, ’ as Science, Politics, Culture.”

“ The art of Curing will then (*i.e.*, with a perfected *Materia Medica*) approach to the same degree of certainty as the Science of Mathematics.”—HAHNEMANN (*Organon*).

“ The art of healing does not consider the interest of the art of healing.”—PLATO (*Republic*).

“ Culture, the aim of setting ourselves to ascertain what perfection is, and to make it prevail.”—ARNOLD (*Culture and Anarchy*).

Any strangers, ladies as well as gentlemen, who may desire to hear the President's Address, will be welcome.

A short interval, after the conclusion of the Address, will be occupied by the Treasurer receiving the members' subscriptions.

The Council resolved that the three papers to be read at the Congress of 1904 should be on “ Diseases of Children.”

The first paper will then be read by Byres Moir, M.D., Physician to the London Homeopathic Hospital, on “ Pneumonia in Children up to the age of Five, and the results of cases treated in the Hospital.”

This will be followed by a discussion.

The Congress will adjourn for lunch at 1 o'clock to the Holborn Restaurant.

The Medical and Surgical Staff of the London Homeopathic Hospital (Mr. Dudley Wright, Chairman) invite the members of Congress to be their guests on this occasion.

The meeting will be resumed at 2 o'clock at the Hospital,

when the second paper will be read by J. Roberson Day, M.D., Lond., Physician for Diseases of Children, London Homeopathic Hospital, on "Intra-Abdominal Phthisis in Children, and its Homeopathic Treatment."

In the preparation of this paper Dr. Day has collaborated with C. Osmond Bodman, M.D., M.S. Durham, of Bristol.

The paper will be illustrated by lantern slides, and will be followed by a discussion.

The third paper will then be read by Edmund Capper, M.D., C.M. Edin., Medical Officer to the Leicester Homeopathic Hospital, on "Epidemic Diarrhoea in Children, and its Homeopathic Treatment."

A discussion will follow.

At the conclusion of the discussion, the Congress will adjourn for a cup of tea to the Nursing Institute of the Hospital, at the kind invitation of the Board of Management of the Hospital.

The Congress will then take up the formal business—the selection of the place of meeting for 1905, the election of President and other officers for the ensuing year, and any other business which may be competent. This will conclude the proceedings.

The members, with their friends, ladies as well as gentlemen, will dine together at 7 o'clock at the Holborn Restaurant.

The subscription to the Congress is, as usual, ten shillings and sixpence. The dinner ticket alone, *for guests only*, is seven shillings and sixpence (exclusive of wine).

The Council take this opportunity of suggesting to their colleagues in or near London, that they would materially add to the success of the meeting by offering hospitality to their provincial *confrères* during the Congress.

Should you know of any colleague who has not received this circular, will you kindly let me know.

The enclosed post card is to be filled up and returned as early as possible, but not later than June 15th. Of course, if any colleague cannot make his arrangements so early, the post card would be received up to the day of the Meeting, but it is earnestly hoped that all will return the post card as early as possible, *whether they intend to be present or not*, as arrangements for the lunch and dinner are much facilitated thereby.

I remain, yours very truly,

D. DYCE BROWN, *Hon. Sec.*

PS.—As arranged last year, the meeting of the Congress will directly follow the Annual Assembly of the British Homeopathic Society, which is held on June 29th and 30th, the Congress being on the next day, Friday, July 1st.

EXTRACT.

PROFESSOR RUTHERFORD ON RADIUM.

A VERY large audience crowded the theatre of the Royal Institution last night to hear Professor E. Rutherford, of Montreal, lecture on the "Radiation and Emanation of Radium." The Duke of Northumberland was in the chair, and among those present were Lord Kelvin, Lord Rayleigh, Sir Thomas Sanderson, Sir William Crookes, Dr. J. W. Swan, Professor Dewar, Dr. Glazebrook, Professor J. D. Everett, Professor S. P. Thompson, Dr. Johnston Stoney, and Dr. F. Elgar. The lecturer first showed the power of radium to excite phosphorescence and to discharge a charged electroscope, and then described the properties of the three kinds of rays which it had been found to give off. In addition it gave off an emanation which behaved like a gas and could be condensed by cold; it could also be secluded in the radium itself, and was liberated when the salt was dissolved in water. This emanation, though exceedingly minute in quantity, possessed three-quarters of the characteristic powers of radium and all its properties. If we could collect a cubic inch of the emanation, the tube that contained it would probably melt, while a few pounds would supply enough energy to drive a ship across the Atlantic, though each of those pounds would require 70 tons of radium to supply it. In regard to the process going on in the emission of the emanation, he advanced the theory that radium was continuously producing it, but that when produced, instead of remaining constant, it was continuously being changed into something else. He supposed that some atoms of the radium in some conditions became unstable; then there was an explosion, and particles of matter were shot off at great velocities. There was a series of such explosions, due to atomic, not molecular, changes, and resulting in the formation of a series of transition elements. A mass of radium left to itself must therefore throw itself away; probably in about 2,000 years its radio-activity would fall to half-value, and after 50,000 years it would cease to exist. It was therefore to be supposed, since radium was produced from minerals more than 50,000 years old, that it was being

itself produced from something else, and was itself a transition element. A year ago to find evidence for this point of view did not seem a very promising task, but since then a great deal had been done. In the self-destruction of radium two things must be produced that were not radioactive—the α -rays and the final product. Now helium was always found associated with radium-minerals, and the suggestion that that gas was one of the products had been confirmed by Sir William Ramsay, who had shown that the emanation was able to produce helium from itself. The evidence pointed to the view that the α particle was the helium. Here there was apparently a definite case of transmutation, though not precisely of the kind sought after by the alchemists, but there was no evidence as yet that matter in general, apart from the radio-active bodies, was undergoing changes of this nature. Radium was distributed very widely over the earth; in fact, was present everywhere, though in exceedingly minute quantities. The question was thus suggested—How much heat were these minute quantities of radium able to provide, and could they account for the gradual increase of temperature found as we went deeper into the earth? The lecturer himself believed that the amount of radium present, uniformly distributed, would be sufficient to account for all the heat lost from the earth and would explain the temperature-gradient as measured to-day. In that case the date, as calculated by Lord Kelvin, when this globe would have so far cooled as to be uninhabitable might possibly be postponed for a few million years, and an end put to the troubles of the biologists and geologists about a little extra time in the past. The lecturer specially invited his audience to admire the foresight, almost amounting to prophecy, which had made Lord Kelvin qualify his calculations with the words, “provided no new source of heat is discovered.”—*Times*, May 21st.

VIOLA ODORATA.—Rheumatism in the upper parts of the body and on the *right* side is cured by *viola odorata*.—*Hom. Envoy*.

THE FEARS OF ANACARDIUM.—Dr. J. H. McClelland, in a proving of *anacardium*, experienced as a prominent symptom “a great fear that some terrible calamity was going to befall him.” This always occurred on going to bed. If any one has these fears, *anacardium* will cure.—*Hom. Envoy*.

REVIEWS.

HAHNEMANN'S *CHRONIC DISEASES*.*

THE explanation of the appearance of this small volume is to be found in the Publisher's Preface:—

"This volume, which contains the theoretical part of Hahnemann's *Chronic Diseases*, has been issued at the urgent request of several Professors in Homeopathic Colleges, who wish to use it as a College text-book. It is hoped, too, that the profession at large will appreciate this volume, which in the opinion of many ranks in importance with the *ORGANON*."

It is an entirely wholesome sign that the demand for Hahnemann's own works is an increasing demand in the ranks of homeopathy. It is becoming more and more plain that the semi-homeopathy of the physiological and pathological school is not strong enough to survive. It will be swallowed up in Ringerism, Bruntonism, and Burroughs-and-Wellcomeism, which now pass for orthodoxy and respectability. The real, vital, distinctive art of cure remains the homeopathy of Hahnemann, and it is essential that the young homeopath should be drilled in the knowledge of it.

This volume contains the didactic part of Hahnemann's treatise; that is to say, all except the *materia medica* part. It contains a full account of Hahnemann's teaching in respect to the psoric miasm. This is of enormous practical importance, however much room there may be for discussion as to the miasm's origin. We heartily commend this volume to all who do not possess Hahnemann's complete work.

* *The Chronic Diseases, their Peculiar Nature and their Homeopathic Cure* (theoretical part only). By Samuel Hahnemann. Translated from the second enlarged German edition of 1835, by Prof. Louis H. Tafel. Philadelphia: Boericke and Tafel. London: Homeopathic Publishing Co., 1904. Pp. 269. Cloth, 7s. 6d.

CONSTITUTIONAL THERAPEUTICS.*

THE author of this work was for twenty-five years the teacher of *Materia Medica* and *Clinical Therapeutics* at the Chicago Homeopathic Medical College, and there is a melancholy interest in connection with it, since he did not long survive its appearance. The motto on the title-page is "The patient; not the disease"; and the dedication, which is all that is given by way of a preface, reads as follows:—

"This volume is dedicated to those physicians who, believing that a scientific Therapeutics is attainable, are willing to make a new study of physiology and the physiological action of drugs as conditions essential to that end."

The introduction to the work comprises 100 pages, 50 pages of this being devoted to "Pathology," the rest to "Systemic Physiology," "Systemic Pathology," "Pharmacodynamics," "Therapeutics."

Then follows an analysis of the action of a number of remedies, which the author divides into two classes: (1) Remedies beginning with derangement of the nervous system; (2) remedies whose action begins in the solids of the body.

Dr. Woodward's analyses are of great interest, and the cases he has collected are of very great value. There is much that is practically suggestive, but we cannot say that his "new study of pathology and the physiological action of drugs" is any advance on the method laid down by Hahnemann. When Dr. Woodward says that he believes a "scientific therapeutics" to be "attainable," we fear the inference cannot be avoided that he holds scientific therapeutics has not already been attained. We hold the contrary. Hahnemann has demonstrated a therapeutics which fulfils every canon of science; and it is not the fault of Hahnemann if many fail to master the same.

* *Constitutional Therapeutics*. By W. A. Woodward, M.D. Philadelphia: Boericke and Tafel; London: Homeopathic Publishing Co., 12, Warwick Lane, E.C. Pp. 537. Price 17s. 6d.

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.

LOCATION WANTED.

DR. J. REGINALD JONES writes from 15, Warren Road, Hoylake, Cheshire:—"I am retiring from a large practice which I have carried on for thirty years, but I do not want to 'die out of harness.' I should therefore be obliged to any of your readers if they could tell me of a place where a small but good practice could be had, either through your journal or by a letter to Mr. Kenway (Messrs. Thompson and Capper), Charing Cross, Birkenhead."

NOTIFICATION.

. Under this heading we shall be happy to insert notices of appointments, changes of address, &c., and holiday arrangements.

CHANGE OF ADDRESS.

MESSRS. BOERICKE and TAFEL have removed their pharmacy, heretofore located at 15, West Forty-second Street, to 129, West Forty-second Street, New York. Also their Chicago pharmacy from 44, East Maddison Street to 57, Wabash Avenue.

Obituary.

MAHENDRA LAL SIRCAR, M.D., C.I.E., D.L.

WE take the following sympathetic obituary notice of our venerable and distinguished Indian colleague, the late Dr. Mahendra Lal Sircar, from the pages of the *Indian Homeopathic Review* of March last:—

"It is with deep regret that we have to record the death of Dr. Mahendra Lal Sircar, C.I.E., the first homeopathic physician of India. This melancholy event took place at his residence in Nebutola early in the morning of Tuesday, the

23rd of February, 1904. The void that has been created in the homeopathic profession of Calcutta by the death of Dr. Sircar is one that will be difficult to fill. Dr. Sircar was known in India not only as a homeopath, but a great literary and scientific man.

“Dr. Mahendra Lal Sircar, who was born on the 2nd of November, 1833, in Paikpara, a village eighteen miles west of Howrah, lived and died an orthodox Hindu. He was not unfamiliar with the other religions of the world, for, possessing one of the finest private libraries in the city, he was one of the best read men of the day in India, and a constant student of the Bible. But his faith in the religion of his forefathers remained unshaken, and he died as already mentioned, a Hindu. Mahendra Lal's youthful career resembles, in some respects, that of another gifted Indian gentleman, namely, Dr. Gurudas Banerji, the recently retired Judge of the Calcutta High Court. It was at the age of five that he was brought by his mother, together with an infant brother, to the house of his maternal uncle in Nabutola, a locality which, endeared by early association, he never afterwards left. The family had not long been in Calcutta when the father died in Paikpara at the early age of thirty-two. Mahendra Lal returned, with his mother, only once to Paikpara; that was on the occasion of his father's *shrad* ceremony.

“Young Mahendra Lal received his elementary education in the vernacular in a *Patshala*, and his English education under the late Babu Thakur Dass Dey, to whom he remained attached to the last. He was admitted to the Hare School, where he studied till 1849, and then, having obtained a junior scholarship, he entered the Hindu College, where he continued his studies till 1854 under such able professors as Messrs. Sutcliffe and Jones of the Indian Education Department. He could have remained a year or two longer in the college, which then became the Presidency College, but his ardour for science had become so great that after considerable difficulty in endeavouring to pacify Mr. Sutcliffe, he eventually obtained permission to join the Calcutta Medical College, where some of the most important sciences were taught practically. After six years he passed the L.M.S. examination. It is said that at the Medical College he was the pet of all the professors. His career in the Medical College was brilliant. He obtained medals, prizes, and scholarships in botany, physiology, medicine, surgery, and midwifery. He was sometimes ahead even of his professors in information in their own subjects. For instance, it is related of him that he lost his gold medal in Medical Jurisprudence for having stated in answer to a question that the lethal dose of arsenic was much larger than stated in books, and that mer-

were known who had accustomed themselves to taking it, without injury, in doses of more than a drachm. This was looked upon by the then Professor of Medical Jurisprudence as a grave mistake. The Professor evidently had not read that most recent medical periodical on whose authority Sircar had made the statement. At the instance of Dr. Fayer he went up for the M.D. examination in 1863, and came out first, the late Dr. Jagabandhu Bose being second. Dr. Sircar was the second M.D. of the Calcutta University, the late Dr. Chunder Kumar Dey being the first. In this year the Bengal Branch of the British Medical Association was established through the exertions of the late Dr. Chuckerbutty. At the inaugural meeting Dr. Sircar made a speech denouncing homeopathy. This speech attracted the attention of the late Babu Rajendra Dutt, who thought he saw in him one who, if converted, would advance the cause of homeopathy. But his arguments were of no avail. Dr. Sircar did not deny the cures which his fellow-practitioner claimed to have effected, but he attributed them to the strict regimen enjoined. One day a friend asking him to review Morgan's "Philosophy of Homeopathy" for the *Indian Field*, he readily agreed, thinking it would give him an opportunity of exposing the absurdity of the system. The first perusal of the pamphlet convinced him, however, that it could not be properly reviewed without previous practical acquaintance with the system. This led him to observe cases under Babu Rajendra, and it was not long before he arrived at the conclusion that the profession had been doing a gross injustice to the system by condemning those who adopt it. Thereupon he delivered the address in medicine under the title of the "Supposed Uncertainty in Medical Science," &c. The story that led to his being ostracised from the profession was briefly related in the *Calcutta Journal of Medicine* for July, 1903, and it is scarcely necessary, for the purpose of this notice, to repeat it here. Suffice it to say that ever afterwards Mahendra Lal remained a staunch homeopath, effecting many remarkable cures under the new system, and establishing an extensive practice which only failing health compelled him to relinquish in later years.

"The *Calcutta Journal of Medicine*, which was started in January, 1868, and is still in existence, was intended to promulgate the homeopathic system of the treatment of disease. In its number of August, 1869, Dr. Sircar published an article "On the Desirability of a National Institution for the Cultivation of the Physical Sciences by the Natives of India." This was practically the starting-point of the Indian Association for the Cultivation of Science, which, however, was not established until some six years afterwards, that is, in 1876. Dr. Mahendra

Lal Sircar was appointed a Fellow of the Calcutta University in December, 1870, and was placed on the Faculty of Arts. Eight years later, in 1870, by a resolution of the Senate at its annual meeting, he was placed on the Faculty of Medicine. The members of the Faculty protested and objected to associate with one who professed and practised the absurd and unscientific system of homeopathy, but the Senate upheld their resolution. Thereafter he remained unmolested. Steadily he grew to be a power in the land, and successive Lieut.-Governors and Viceroy considered it a privilege to be associated with him, especially in furthering the claims of scientific education of the rising youth of this country. In such high estimation was he held by Government that he was given many honorary appointments of importance. He had, for instance, been Presidency Magistrate (1877); Member of the Bengal Legislative Council, being re-elected for the fourth time; Sheriff of Calcutta for 1888; President of the Faculty of Arts for four years (1893-97); ten years a member of the Syndicate; for several years member of the Council of the Asiatic Society of Bengal; Trustee of the Indian Museum, &c. The deceased gentleman obtained the honorary degree of D.L. of the Calcutta University in 1898.

“ Besides being a distinguished man of letters and science, the late Dr. Mahendra Lal Sircar was a philanthropist in the truest sense of the word. No struggling student ever appealed to him in vain, while for many years he maintained a Charitable Homeopathic Dispensary, where he gave advice and medicine free to all classes and creeds. In recent years he established a Leper Asylum in Madhupur, a station on the East Indian Railway. Physician, man of science, philanthropist, educationist—Mahendra Lal Sircar was indeed a man in whom the Indian people do well to take pride.

“ A meeting was held in the hall of the Indian Association for the Cultivation of Science at the instance of the Hahnemann Society of Calcutta, on Sunday the 6th inst., to consider what steps should be taken to commemorate the memory of the late Dr. Sircar. Raja Peary Mohon Mukerjee, C.S.I., was in the chair. There was a large attendance of the friends and admirers of Dr. Sircar. The following resolutions were passed:— (1) That the meeting desire to record its deep sense of the profound loss the country has sustained in general, and the medical profession in particular, by the lamented death of Dr. Mahendra Lal Sircar, late President of Hahnemann Society; (2) that this meeting tender its heartfelt sympathy and sincere condolence to his family in their sad bereavement; and (3) that this meeting authorises the Hahnemann Society to appoint a committee, with power to add to their number, for

the purpose of collecting funds, with a view to perpetuate the memory of Dr. Sircar in some suitable form."

Truly Dr. Sircar was a man of whom India may well be proud; and not India only, but the British Empire also, of which it is part, and the cause of homeopathy, for which he lived and laboured as an integral part of scientific truth, throughout the best years of his life.

THEODORE YOUNG KINNE, M.D.

MANY homeopaths on this side of the Atlantic will hear with keen regret that Dr. Kinne has passed away. We take the following obituary notice from the *Hahnemannian Monthly* of May:—

"Theodore Young Kinne, M.D., of Paterson, N.J., died at his home in that city from heart disease on March 4th, aged 65 years. Dr. Kinne was born near Syracuse, N.Y., on August 27, 1838. He entered the United States Military Academy at West Point in 1858, but at the end of a year concluded to take up the study of medicine, and accordingly entered the Albany Medical College, whence he was graduated, valedictorian of his class, in 1862. In 1864 he entered the United States army as assistant surgeon of the 184th Regiment, New York Volunteers, and later he was transferred to the regular army service. In 1867 he entered upon practice in Paterson, N.J., and became a prominent figure in the life of that city. His personality won for him eminence in medical affairs, both State and national; and in 1891 he was elected president of the American Institute of Homeopathy."

BENZINE—A CURE FOR RED NOSES.—Some unfortunate persons suffer from a tendency to redness of the nose, due to fugitive erythema which supervenes under slight causes, either internal or external. A Berlin physician, not improbably a sufferer himself, announces that this ephemeral but distressing condition may be cured by the application of benzine. He applies it on a folded piece of lint, which is kept in contact with the erythematous area for a few seconds, carefully avoiding any friction of the skin. If the application be repeated a few times the skin covering the nose becomes paler and less shiny. The benzine application may even be used as a prophylactic, so that persons whose noses are liable to vie in hue after dinner with the red, red rose can avert the calamity by including benzine among their cosmetic appliances.—*Med. Press.*

GENERAL CORRESPONDENCE.

DR. CURIE : A LETTER FROM MISS
JULIA LEAF.*To the Editor of THE HOMEOPATHIC WORLD.*

MY DEAR SIR,—You will, I feel sure, forgive me trespassing on your time when I tell you how deeply interested my sister and I are in the “Onward Movement” now taking place amongst the members of the British Association in regard to homeopathy; and the mention made in the last number of the HOMEOPATHIC WORLD of our father and Dr. Curie shows us that his work is not entirely forgotten. It was really our father who publicly introduced homeopathy into England. After having been cured by its means by Hahnemann himself, when all other treatment had failed, it was his one desire to spread the good news abroad, and let as many as possible benefit by the treatment. He first applied to Dr. Quin to get him to do this, but Dr. Quin had a large practice amongst the aristocracy and did not care to undertake this kind of work; so after studying the system himself, under great difficulties, and treating many patients, our father was more and more impressed with the necessity of getting a practitioner who would undertake to work for the good cause, and I believe it was Dr. Hahnemann himself who brought Dr. Curie under his notice, and he invited him to come to England. Dr. Curie accepted the invitation, and came over and lived in our house till he had learnt sufficient English, and had formed such a practice that he could send for his family to join him in London, where he soon made a name for himself.

I do not know if you have seen in the *Homeopathic Review* for September, 1874, a little notice of my father showing how he and Dr. Curie worked together for the spread of the great truth. You can easily imagine how deeply anxious we are to see homeopathy practised in its former purity, for we have been rooted and grounded in its principles from our early childhood.

My father used to go every year to Paris to see Hahnemann, and we have a portrait of the old doctor taken at my father's request, sitting in his red chair in his study,

besides a lock of the white hair and other little things. I hope I shall not have quite tired you with this long letter.

Believe me, very truly yours,

JULIA LEAF.

Laerdal, Worthing, May 13th.

PS.—There is one thing I should like to say lest any one should infer from my letter that I think my father and Dr. Curie were the first to introduce homeopathy into England. Dr. Quin had a large *private practice*, and we were all his patients. My father was so anxious to spread the truth as widely as possible, and wished Dr. Quin to open a dispensary for this purpose, but Dr. Quin did not wish to do this—hence the reason for my father's sending for Dr. Curie; they certainly both *publicly* introduced it, for at that time there were no public institutions.

J. L.

A VANTAGE-GROUND SPURNED BY THE MONTHLY HOMEOPATHIC REVIEW.

To the Editor of THE HOMEOPATHIC WORLD.

MY DEAR SIR,—The homeopath refuses to occupy less than the whole field of medicine. Whether the old school ever abolishes the deadline which it long ago prescribed, beyond which (*i.e.*, into homeopathy) no one of its members can set foot and live, is a question for the old school to determine. The homeopath prescribes no deadline. He freely goes and comes throughout the whole field of medicine, saying "by your leave" to no man.

This absolute independence of the homeopath does not, of course, mean that he would not gladly see the old school abolish the deadline which it has established. By its maintenance of this deadline the old school is perpetuating ignorance of homeopathy on the part of some hundreds of thousands of physicians the world over, and is withholding from some millions of patients blessings which, but for this accursed deadline, they might, some to greater, some to less extent, enjoy. In these circumstances the homeopath cannot, while rejoicing in his own freedom, contemplate with entire unconcern the limita-

tions which the old school imposes upon itself. One of two things is bound to happen sooner or later: either the old school will die of inanition, or it will abolish the dead-line which it has established. Whichever of these two events is to occur will be hastened by keeping perfectly clear that the homeopath, and not the old-school physician, is the man who cultivates the whole field of medicine. I believe we can best make this clear and keep it clear by first defining the particular cure of which *similia similibus curantur* is the law. This cure is an immediate change from abnormal to normal (or approximately normal) in vital processes. When these processes have become normal their effects, too, will. In this definition the word *immediate* has no reference to time, it simply means that the change to normal is the first effect of the medicine—that no other change is mediate to it. This cure transcends the possibilities of rational medicine, for in any given rational practice one must aim at an immediate effect in itself knowable, as vital processes are not; they are knowable only in their effects. In the light of this definition two things become evident:

1st. As the particular cure of which *similia similibus curantur* is the law differs from any that can be attempted in rational medicine, one may consistently accept both homeopathy and rational medicine. When he attempts the particular cure of which *similia similibus curantur* is the law, he looks to that law for guidance. When he attempts some cure within the scope of rational medicine, he looks to some principle of rational medicine for guidance.

2nd. As the particular cure of which *similia similibus curantur* is the law transcends the possibilities of rational medicine, it follows that one who believes in this cure, and in *similia similibus curantur* as its law, may properly identify himself by name with homeopathy, that he be not confounded with those who regard rational practice as the *ne plus ultra* in medicine.

At the beginning of this letter I said that the homeopath refuses to occupy less than the whole field of medicine. This is a general truth, to which there are exceptions. This letter is prompted by an article in the *Monthly Homeopathic Review* for April 1, 1904, in which occurs the following (p. 202): "For a homeopath who is enthusiastic over homeopathy to be also enthusiastic over

'rational medicine' is beyond our imaginative powers to conceive." At the beginning of this letter I said that the homeopath prescribes no deadline. Perhaps that, too, is only a general truth with exceptions. Perhaps the *Homeopathic Review* would prescribe a deadline. Read its article just referred to.

Fraternally,

CHAS. S. MACK, M.D.

La Porte, Indiana, U.S.A., April 25, 1904.

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

HOURS OF ATTENDANCE :—Medical (In-patients, 9.30; Out-patients, 2.0), Daily; Surgical, Monday, 2.0; and Saturdays, 9 a.m.; Thursdays, 10.0 a.m.; Diseases of Women, Tuesdays, Wednesdays, and Fridays, 2.0; Diseases of Skin, Thursdays, 2.0; Diseases of the Eye, Mondays and Thursdays, 2.0; Diseases of the Throat and Ear Wednesdays, 2.0; and Saturdays, 9 a.m.; Diseases of Children, Mondays and Thursdays, 9.0 a.m.; Operations, Tuesdays, 2.30; Diseases of the Nervous System, Thursdays, 2 p.m.; Electrical Cases, Wednesdays, 9.0 a.m.

MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

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| <p>Bedford (Charles H.). A Clinical Handbook of Urine Analysis. Illust. 2nd ed. 8vo, pp. 182. (Simpkin. Net, 6s. 6d.)</p> <p>Blake (Edward) Colitis (Tubal Catarrh), Appendicitis, and their Allies. 8vo, sd., pp. 168. (H. J. Glaisher. Net, 2s. 6d.)</p> <p>Clarke (W. Bruce). The Meaning of a Modern Hospital. Cr. 8vo. (Longmans. 1s.)</p> <p>De Lu (Joseph). Obstetrics for Nurses. Illust. 8vo, pp. 460. (Saunders. Net, 12s.)</p> <p>Dental Annual and Directory (The) 1904. Cr. 8vo. (Baillière. Net, 7s. 6d.)</p> <p>Fisher (J. Herbert). Ophthalmological Anatomy, With some Illustrative Cases. Roy. 8vo, pp. 196. (Hodder & Stoughton. 7s. 6d.)</p> <p>Gould (G. M.). Biographical Clinics. Vol. 2. Cr. 8vo, pp. xl-392. (Rebman. Net, 5s.)</p> <p>Joussot (P.). The Pathogenic Microbes. Authorised Translation by Horace P. Holmes. 16mo, pp. 192. (Homeo. Pub. Co. Net, 5s.)</p> <p>Leaf (C. H.). The Clinical Causes of Cancer of the Breast and its Prevention. 8vo, bds. (Constable. Net, 2s.)</p> | <p>Medical Fads; or, Musings amongst the Doctors. By a "Faddist." Cr. 8vo, sd. (Authors', &c., Alliance. 1s.)</p> <p>Medical Register (The), 1904. Roy. 8vo. (Spottiswoode. 10s. 6d.)</p> <p>Morrow (P. A.). Social Diseases and Marriage: Social Prophylaxis. 8vo. (Appleton. Net, 15s.)</p> <p>Nursing Guide. Handbook of Nurses' League, and Register of Nurses Trained at Guy's Hospital. 2nd issue. Cr. 8vo, pp. 141. (Ash. 1s. 6d.)</p> <p>Phillips (Charles D. F.). <i>Materia Medica, Pharmacology and Therapeutics: Inorganic Substances</i>. Cr. 8vo. (Longmans. 21s.)</p> <p>Rentoul (R. R.). The Causes and Treatment of Abortion. New ed. 8vo. (Baillière. Net, 5s.)</p> <p>Saunders' Year-Book of Medicine and Surgery, 1904. 2 vols. Roy. 8vo. (Saunders. Net, 13s.)</p> <p>Schafer (E. A.). The Medical Curriculum. Cr. 8vo, pp. 30. (Darrien Press, Edinburgh.)</p> <p>Text-Book of Legal Medicine and Toxicology (The). Edit. by Frederick Paterson and Walter S. Haines. Vol. 2. Roy. 8vo, pp. 826. (Saunders. Net, 21s.)</p> |
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TO CONTRIBUTORS AND CORRESPONDENTS.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 8, *Bolton Street, Piccadilly, W.*

Letters to the Editor requiring personal reply should be accompanied by stamped directed envelope.

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.

Dr. Searson, London.—Dr. Dudgeon, London.—Dr. Jagielski, London.—Dr. Hansen, Copenhagen.—Dr. Ridpath, Sunderland.—Dr. Le H. Cooper, London.—Dr. Beale, London.

BOOKS AND JOURNALS RECEIVED.

Hom. Review.—Zoophilist.—Mind.—Revist. Hom.—Zeit. Berl. V.H.S.—Med. Times.—Allg. Hom. Zeit.—H. Monatsblätter.—The Chironian—La Propaganda Homeopatica.—Maanedsk. f. H.—H. Maandblad.—La Homeopatia.—Ind. Hom. Rev.—Hom. Envoy.—The Individualist.—Medical Century.—Rev. Hom. Française.—H. Recorder.—Wjestnik H. Med.—N.A.J. of H.—Clinique.—New Eng. Med. Gaz.—L'Art Médical.—Amer.

Medical Monthly.—University Homeopathic Observer.—H. J. Obst.—Med. Adv.—Annaes de Med. Hom.—Amer. Phys.—Hom. Eye, Ear, and Throat J.—Hahnemannian Mon.—Pacif. Coast Journal of H.—Indian Homeopathic Reporter.—Fruitless Experiment by Stephen Smith, M.R.C.S.

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M. Curie and his Grandfather, By Dr. Clarke.

Whence? Whither? Odd Things in Practice. By Dr. Jagielski.

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THE
HOMEOPATHIC WORLD.

JULY 1, 1904.

THE BOTANIC GARDENS FÊTE.

THE 7th of July is a date which must not be forgotten by any homeopath who is within reach of London, and who has the good of the homeopathic cause at heart. On that day is to be given, at the Royal Botanic Gardens, Regent's Park, a grand Garden Fête under the auspices of the Ladies' Committee of the British Homeopathic Association. The Ladies' Committee have undertaken, as the first instalment of their work, the founding of a scholarship, and it is for this object that the present effort is being made.

We give in another part of our issue some of the details of the programme which has been arranged. From this it will be seen that every provision has been made for the entertainment of visitors, whilst the gardens will afford an entertainment of themselves to those who love flowers and plant-life.

The Fête Committee have generously included tea in the bill-of-fare provided for visitors, but there will be an opportunity given for the purchase of button-holes for the good of the cause at a flower-stall which Mrs. JOHN MEWS has undertaken to provide. Mrs. MEWS will be pleased to receive contributions of flowers from any friends who have the means of sending them. They should be sent to Mrs. MEWS, 68, Queensborough Terrace,

W., and should arrive not later than 9.30 a.m. on the morning of the Fête.

The Ladies' Committee have already done a great work in organising the social influence which homeopathy possesses, and we trust that this effort will be rewarded with so great a success as to make it an annual affair and an expected event of the London season. To make the new movement for the advance of homeopathy thoroughly successful, it is necessary that every element of the homeopathic body corporate should be brought into action. The social element is by no means the least important of these, and to the Ladies of Homeopathy we look for the full utilisation of this. Therefore we hope that this effort of the Ladies' Committee will be largely and chivalrously supported by all the friends of homeopathy in the community.

CAUSTICUM.—Nervous about twilight; children afraid to go to bed; afraid in the dark, is an indication for causticum. Paralysis of single parts is an indication for causticum.—*Hom. Envoy.*

PULSATILLA AND SEPIA IN INSANITY FROM MENSTRUAL IRREGULARITIES.—How many young girls become insane from anomalies of menstruation! If this is *retarded*, pulsatilla generally cures; if *profuse*, sepia. (Von Grauvogl.)—*Hom. Envoy.*

SUGAR AS FOOD IN FEVERS.—Searching for simpler means of maintaining the patient's nutrition in fever, M. Ragot (*Lyon Médical*, December 5, 1902; January 25, 1903; *N.Y. Med. Jour.*) has hit upon sugar, a substance already found by the German military surgeons to have a decided effect in overcoming fatigue. M. Ragot found his conclusions both upon experiments on animals and upon observations on the human subject. Two cases only figure in his clinical reports, both in soldiers, one of whom had pleuropneumonia with typhoid fever, and the other bronchopneumonia. Minute tabulations of urinary examinations, and elaborate mathematical calculations from the facts observed, seem to establish, so far as these facts go, M. Ragot's conclusions, namely, that sugar reduces the hypertoxicity of the urine and lessens the disassimilation of albuminoid material. Cryoscopy shows that it diminishes the proportion of extractive matter in the urine. The author found that each of the two patients had no difficulty in absorbing daily a little more than three ounces of sugar dissolved in five times its weight of distilled water. It will be seen that he alleges for the feeding with sugar, not only the more or less prevention of autophagy, but also a reduction of the amount of toxins formed. These surely are highly desirable effects in cases of severe febrile diseases.—*Medical Times.*

NEWS AND NOTES.

THE HARVEIAN ORATOR UNEARTHES A FORGOTTEN EGYPTIAN MEDICAL GENIUS.

ACCORDING to Gerald Massey, in his *Book of Beginnings* and *A Natural Genesis*, Egypt is the birthplace of the genus Homo, the land where man learned articulate speech and the art of writing; and the latest Harveian Orator now comes forward to show that an Egyptian doctor of some 6,000 years ago knew all about the circulation of the blood. We take the account from the *Daily Telegraph* of June 22nd:—

“A fascinating story was told at the Royal College of Physicians by Dr. Richard Caton, F.R.C.P., in the Harveian Oration of the year. It seemed to amount to this, that Harvey was almost anticipated 6,000 years ago by the priest-doctors of Egypt in his momentous discovery of the circulation of the blood. As far back as 4000 B.C. Egypt had works on medicine and anatomy, and one brilliant genius—forgotten nowadays and omitted from the cyclopedias—I-em-hotep, priest of the sun-god Ra, and physician to King Torsothros, became so eminent that he was revered as a demi-god after death; a temple was built over his tomb; and in his honour hospitals were raised in Memphis and other cities. Here the priest-physicians treated the sick and embalmed the bodies of men and sacred animals. They were probably, Dr. Caton thinks, the first of mankind to acquire a rudimentary knowledge of the movement of the blood. Their papyri contain intelligent references to the heart, the blood-vessels, and the pulse. Of the heart in particular they knew much, and their writings refer to its enlargement, fatty degeneration, displacement, palpitation, and pericardial effusion. One remarkable passage of these old-world inquirers speaks of distension of the heart and shortness of breath, as occurring because the blood has stagnated and does not circulate properly. Not Greece, therefore, but Egypt, long before Galen and Hippocrates, was the motherland of rational medicine and anatomy. The views of the Greeks on the circulation of the blood were almost exactly those which the Egyptians had taught many centuries earlier. On one remarkable means of treatment for incipient valvular disease of the heart which these long-forgotten Nile doctors taught, Dr. Caton laid great stress. It was the method recommended at least 4,000 years ago—to let the heart have as much rest as possible—a wise injunction, said the Harveian Orator, which we may yet practise with advantage. I-em-hotep seems to have been an all-round genius—physician, architect, astronomer, alchemist—so illustrious that after death he was reputed the son of the supreme deity, Ptah—all this and yet nearly lost to fame.”

VACCINATION KELOID.

THE following appeared in the *British Medical Journal* of February 6th :—

“RAISED SCARS AFTER VACCINATION.

“I wish to call attention through the *British Medical Journal* to a condition which sometimes follows vaccination. Previous to last year I have not seen it, and I do not think it is figured in any of the books of illustrations relating to vaccination. The question suggests itself, Is the scar condition due to the use of calf lymph? The scar is usually of a size corresponding to the vaccination, and is either arranged in ridges corresponding to the scratchings made when vaccinating, or is of a smooth, elevated appearance. It may rise to one-eighth of an inch in height. It is usually either white or raw-bacon-like in colour, and patients complain of a feeling of itching in it. In four cases I have painted this keloid condition with tincture of iodine, and with fair results.”

The keloid condition of vaccination scars is only one symptom of general vaccinosis. The remedies for the general and the local condition are *Thuja*, *Malandrinum*, and *Vaccininum* given over long periods of time.

ANTI-VACCINATION AMONG THE “TWO-POUNDERS.”

THE rate-cutting war among the Atlantic Steamship companies has resulted in getting together some remarkable ship-loads. The *Daily Telegraph* of June 11th contains a description of one of them by its New York correspondent, and incidentally shows that vaccination was not over popular with the £2-passengers :—

“The delights of the £2 steerage journey to America were described to-day by two journalists, who arrived here yesterday by the steamship *Potsdam* from Rotterdam. How much money the company lost on each passenger was the chief topic of the conversation aboard. In addition to travelling 3,500 miles, fifty-two substantial meals were covered by the fare. By far the majority of the 757 emigrants were German tailors, who regarded the United States as a veritable land of promise. Many will doubtless change their opinion on further acquaintance. The Russians aboard were deserters from the Tsar’s army. . . . The day after the boat sailed all the people in the steerage were vaccinated, but several sucked the lymph from each other’s arms, thus neutralising its effect. Altogether, to quote one correspondent, ‘It was a wonderful £2 worth.’”

CONSULTATIONS WITH ALLOPATHS.

THE *British Medical Journal* of June 11th returns to a topic of perennial interest to our friends the enemy :—

“CONSULTATIONS WITH HOMEOPATHS.

“A Consultant writes : ‘Many members of the profession take an entirely different view on the subject of consultations with homeopaths from that expressed on p. 1228 of the *British Medical Journal* of May 28th. The question is not in any sense one of practice, but of ethics. The average general practitioner takes a much more correct view of the matter than many consultants, and the latter are much to blame for the countenance which they have given to homeopaths, and therefore to homeopathy. A man who gives himself out to the public as practising a special system of therapeutics is not one that any consultant who has the honour of his profession at heart should be willing to meet. There is a sordid aspect of this support given by consultants to homeopaths which all the sophistry talked on the matter cannot hide. The profession of homeopathy would probably have vanished by this time if the attitude of consultants towards those who profess it had been correct.’

“*.* Our correspondent forgets (1) that practice and ethics are not so entirely opposed as he thinks, and (2) that the foundation of medical ethics is not the good of the profession or a section of it, but the good of society, and especially of those members of it who are sick and in need of medical and surgical assistance. Rules forbidding consultations with individuals who have rendered themselves objectionable to the general body of the profession for any reason can never be enforced absolutely; it is always necessary to allow for those cases in which, in the interest of the patient, such objections must be waived. Operating surgeons are particularly liable to be summoned to cases in which their prompt attendance is necessary if life is to be saved; and it would be a grave scandal to the medical profession if a patient's life were to be sacrificed to a scruple respecting the therapeutic doctrines held by the medical practitioner in attendance.”—[Ed. B. M. J.]

At first sight this looks rather like a climb down. But it will be observed that the foundation of the *British Medical Journal's* “ethics” is more the fear of “grave scandal”—i.e., Mrs. Grundy—than any objection to doing something which is intrinsically wrong and heartless.

PHILLIPS MEMORIAL HOSPITAL—SALE OF WORK.

ON the afternoon of Wednesday, June 1st, Lady Truscott opened a very successful Sale of Work in the

large ward of the hospital. The object of the Sale was to clear off some of the debt, and the substantial sum of £165 was realised by the effort.

THE *MEDICAL ADVANCE*.

THE *Medical Advance and Journal of Homeopathics* of May 15th is an exceedingly interesting number. Mr. W. H. Wheeler, the manager, on the invitation of Dr. H. C. Allen, the editor-in-chief, has undertaken an active share in the conduct of the journal. We heartily congratulate all concerned on the result. The *Medical Advance* is one of those journals which we cannot be content to cream—we have to file it for reference. The *Advance* stands for all that is distinctive and vital in homeopathy, and every English-reading homeopath should subscribe to it. Homeopathy and allopathy are *not* coming closer together, as is frequently maintained, and they never can do—any more than iron and clay can mix. But homeopathy may be spoiled and lost if its practice is not kept clear and distinct on the eternal foundation which Hahnemann discovered. Hering, Lippe, Dunham, Farrington, and a host of other *materia medica* experts, kept the tradition in the past, and it is the aim of H. C. Allen and the *Advance* to maintain it. A paper on *Agaricus* by Dr. J. T. Kent is a feature of the number.

A “CULTUS-MINISTER” ON HOMEOPATHY.

BAVARIA has not got its Chair of Homeopathy yet. Parliament voted it long ago, but it appears from the following that it will have to change its “Cultus-Minister” before it gets it:—

“HOMEOPATHY IN BAVARIA.”

“It may be remembered that some time ago the Bavarian Chamber of Deputies in a moment of temporary aberration voted in favour of the establishment of a Chair of Homeopathy in one of the Universities. Recently, in the course of a discussion on the Education Estimates, the Cultus-Minister took occasion to point out that as homeopathy had no scientific foundation, there is nothing in it that can suitably be made the subject of instruction. The medical councils of all the Bavarian Universities expressed opinions strongly adverse to the proposal.”

It is a pity the Cultus-Minister did not stop to explain what is the "scientific foundation" of allopathy while he was about it. The world would have learnt something if he had.

RÖNTGEN DERMATITIS.

IN the *Medical Press* of June 8th (Berlin letter) is given a sad case of Röntgen-ray injury which ought to be borne in mind by all who handle the subtle forces of radio-therapy:—

"At the Surgical Congress, Mr. Muksam spoke on 'Röntgen Dermatitis.' He said that people who had to do with Röntgen rays were subject not only to the three degrees of burn, but to a chronic skin disease; the skin became brittle and cracked, the nails became unhealthy and fell out, rhagades formed and the whole affection was extremely painful. These symptoms appeared in a medical gentleman who had been working with Röntgen rays since 1897, after about three years. Although he ceased working with the rays the symptoms did not disappear. On the contrary, a panaritium appeared beneath the nail, which required its extraction. The wound formed did not heal, but formed a large painful ulcer that was still there two years later. At the urgent entreaty of the patient, the joint was amputated by Sonnenburg, but the wound left, although it did not suppurate, took ten weeks to heal. The speaker examined the amputated joint with the microscope, and found changes in the vessels near the ulcer (distinct softening of the intima and perivascular infiltration). The case showed the importance of prophylaxis, as recovery from the affection was so extremely difficult."

THE BURNETT MEMORIAL.

IN the multitude of interests which are at present occupying the public mind, the Burnett Fund has been somewhat neglected. We hope our readers have not forgotten it. A sum of £15 has been received by the Hon. Sec. from the publishers of *The Life and Work of Dr. Burnett*, being the proceeds of the sale of that work. This shows that the book is being read, and that the influence of Dr. Burnett is spreading. Miss Buss has given a second donation of 10s.

THE MICROBE OF OLD AGE AND ITS SERUM.

DR. METCHNIKOFF, the discoverer of phagocytes, has found the microbe of old age. The *Daily Telegraph* of June 10th tells us all about it in its Paris letter:—

“Dr. Metchnikoff, the celebrated bacteriologist of the Pasteur Institute, has discovered the microbe of old age. He did not make this statement in so many words, but that is what his theory comes to. He expounded it at a scientific lecture on the subject of ‘Senility,’ which was treated with admirable lucidity and simplicity, and was wholly devoid of sensationalism, though the announcements which it contained were sensational in themselves. What is old age? the lecturer asked. He dismissed the theory that senile decrepitude is due to decrease of reproductive power in the cells of the organism, pointing out that, on the contrary, certain cells, such as those of the hair, often display greater activity in old age. The professor proceeded to expound his own theory, which, in brief, is that senility is a microbial infection. It is well known that microbes are far from being all inimical to the human body. We could not, in fact, live without the good offices of the beneficial bacteria, called ‘macrophagi,’ which spend their own existences fighting the unfriendly microbes, and thus prolong our days. But it now seems that the good microbe turns Turk after we have reached a certain age, and the discovery of that fact is the foundation of Dr. Metchnikoff’s theory. The macrophagi in question, after helping us to live, compass our downfall and death. Perhaps, because they themselves decay, they spread a slow infection in our system which produces senile decrepitude. Now, the favourite residence of the macrophagi in human beings is the great intestine. Birds, in whose systems the latter organ is reduced to its smallest expression, live much longer than mammals.

“A radical remedy for the microbial malady of old age would be the removal of the great intestine. Failing that method, to which there are obvious drawbacks, in the present state of science, at all events, Dr. Metchnikoff recommends treatment by certain foods, such as curdled milk, which will introduce into the system bacteria counteracting what he calls ‘our intestinal flora.’ On the other hand, raw fruit and vegetables multiply the flora in question rapidly. However, the only real antidote to old age will be an artificially manufactured serum, which will act directly on the microbes of senility. Dr. Metchnikoff is engaged on researches to discover such a serum. When he finds it he leads us to expect, not eternal youth, perhaps, but at least a ripe old age, not only prolonged far beyond the present span of man’s existence, but free to the last of any senile decay.”

ORIGINAL COMMUNICATIONS.

SHAKSPERE AND PHYSIC.

By Dr. PROCTOR.

DR. DUDGEON'S article on this subject called to mind a very scholarly and scientific little treatise on *The Shakspeare Flora* (Simpkin, Marshall & Co.) by Mr. Leo H. Grindon, in which the medicinal aspects of the subject are dealt with, along with a wide range of literary references which go to make a very charming volume. Any one interested in this branch of Shakspearean lore will be certain to find the book delightful reading. Respecting the word "hebenon" which Dr. Dudgeon refers to, the following extract from Mr. Grindon may be of interest to some of your readers:—

"What kind of liquid poison Shakspeare intended by 'hebenon' has been a subject of much conjecture, opinions oscillating between henbane and poisons in general, those who hold the latter view overlooking the minute description of the symptoms and pathological results. The word in question is a varied form, not of henbane or, as some suppose, of 'ebony,' but of the name by which the yew is known in at least five of the Gothic languages; the name which appears in Marlowe, Spenser, and other writers of the Elizabethan era as 'hebon':—

'In few, the blood of Hydra Herne's bane,
The juide (? juice) of hebon, and Cocytus' breath
And all the poisons of the Stygian pool.'
(*Jew of Malta.*)

And which in the first quarto itself is spelt hebona. The yew, says Lyte, translating Dodoens, is called in High Dutch, *ibenbaum*; and accordingly in base Almaine, *ibenboom*. 'This tree,' he goes on to say, 'is altogether venomous, and against man's nature. Such as do but only sleepe under the shadowe thereof become sicke, and sometimes they die' (Herbal, 1578).

"The extract is used, he says further on, 'by ignorant apothecaries, to the great perile and danger of the poor diseased people' (p. 768). From the latter sentence we may gather how the murderer was enabled to possess

himself of the deadly juice, which he is not to be supposed as preparing with his own hands, but as procuring from one of the herb-doctors who kept it for sale. Why Shakspeare should say 'hebenon' instead of 'yew' does not appear, nor does it signify. The scene being laid at Elsinore, perhaps he was careful to employ a word believed or known to be Danish."

In a note to this Mr. Grindon says: "The above teaching as to the true sense of 'hebenon' has been before my pupils for at least twenty-five years. It was with great pleasure that I saw my views confirmed in the report of a paper read by the Rev. W. A. Harrison before the Shakspeare Society, May 12, 1882."

In another place where he treats of the Violet in Shakspeare, Mr. Grindon says: "'Crants,' a word found nowhere else in English literature, is a varied spelling of the German and Danish 'Cranz,' a garland. That it should occur in the same play as 'hebenon' is at least a curious coincidence." Whether Mr. Grindon's opinion be held to settle the question or not, his criticism is illuminating, and his query why "hebenon" was used instead of "yew" suggests the probability that Shakspeare was here exercising his supreme talent for selecting the right word, choosing that one which not only has the local colour, but lifts the verse above the level of the trite and commonplace.

Birkenhead, June 9th.

HOW TO USE THE REPERTORY.

By D. RIDPATH, M.D.

I give in the following short paper two severe cases of painful affections—one of sciatica and another of gall-stone colic—in which two cases the remedy was selected by the use of Kent's *Repertory*. This is the very best repertory in existence, and includes symptoms of the whole mind and body of mankind. After some study and practice its use becomes very easy and invaluable.

The first case I shall describe was one of severe sciatica, of which I shall relate the symptoms as taken down by me at the time.

I. T. B., æt. 44, miner, April 2, 1903, says he has been

off work and under medical treatment for several months with sciatica. He has severe tearing pain in right hip, extending down the thigh at 4 p.m. > in the morning after sleep. He is very sensitive, and easily moved to tears; weeps even when thanked. He is easily startled by an unexpected noise such as is produced by the falling of any article, or by a sudden knock at the door.

There is great rumbling in abdomen, and much flatus is passed per anum. The pain is < by getting warm with walking in the open air, and < windy weather. His legs go to sleep when sitting; there is a feeling of constriction or tightness round the stomach. There is pain in the right shoulder; the left foot is warmer than the right, which is really cold.

Such were the symptoms related by this patient, and I shall now proceed to show how, by the use of Kent's *Repertory*, the remedy, the simillimum, was selected.

Under the rubric sciatic pain when walking (p. 1021) the following remedies are given: *Ambr.*, *Anac.*, *Ant. c.*, *Arn.*, *Berb.*, *Bry.*, *Calc. p.*, *Coloc.*, *Ferr.*, *Ferr. mag.*, *Hep.*, *Hyos.*, *Led.*, *Lyc.*, *Nit. ac.*, *Ol. an.*, *Petr.*, *Phos.*, *Plb.*, *Sep.*, *Stann.*, *Stram.*, *Tab.*, *Tarent.*, *Thu.*, *Viol. t.*

Sensitiveness to noise, p. 83: *Ambr.*, *Ant. c.*, *Arn.*, *Ferr.*, *Lyc.*, *Nit. ac.*, *Phos.*, *Sep.*

< By becoming warm in the open air (p. 1339): *Ambr.*, *Ant. c.*, *Lyc.*, *Nit. ac.*, *Phos.*, *Sep.*

< Of the pain in windy weather (p. 1348): *Lyc.*, *Phos.*

Tearing pain in hip extending down sciatic nerve (p. 1109): *Lyc.*

Weeps even when thanked (p. 97): *Lyc.*

Pain in right shoulder (p. 1010): *Lyc.*

It will be observed that by exclusion of other remedies *Lyc.* becomes the sole remedy left; it is in fact the simillimum. The whole genius of the drug is in fact evident from the symptoms described and looked up in the *Repertory*, as well as from consideration of some of the other symptoms, e.g., one foot warm, other cold, and the feeling of constriction round the stomach.

I accordingly at once gave him a few globules of *Lycop.* 1m, dry on the tongue, and *Sac. lac.*, gr. v., nocte manequa sumend.

On the 4th of April he could walk much better, and the pain was much less severe.

On the 2nd of May the pain was very much better, in fact

almost gone entirely, and only felt when tired with much walking; *Lyc.* 6m.

June 10th: Very much >, nearly free from pain, which, however, is very slight; *Lyc.* 20m.

After this he continued to improve rapidly, and was at work by the end of June. Cured.

He has since remained well, and is so to-day.

II. The following case is one of gall-stone colic: M. T., *æt.* 58, engineman at a colliery, visited me February 15th, saying that he was suffering from "gall-stones." He had been under treatment for several months by his usual medical attendant without having got any benefit. Hypodermic injections of morphia with the effect of merely "dulling" for a time the severe pain, which, however, was never absent. He had been finally told by his doctor that there was nothing further could be done except undergoing an "operation" for the removal of the gall-stones, and he had been given a recommendation for admission to a large provincial infirmary to undergo surgical treatment. He, however, determined to consult me and see if I could do him any good.

I obtained the following symptoms from him: He had severe agonising pain in the right hypochondrium, extending to the back. This pain was slightly relieved by drinking warm water. There was constipation, with hard stools, which were clay coloured. He had yellowness of the skin and conjunctivæ.

I consulted Kent's *Repertory*, in which was—

Pain in liver, extending to back (p. 556): *Æsc.*, *Chel.*, *Euphr.*, *Iod.*, *Kali c.*, *Mag. m.*, *Nat. m.*

All these remedies had also hard stools (p. 617).

Clay-coloured stools (p. 616): *Chelid.*, *Iod.*

Pain > by warm drinks (p. 1293): *Chel.*

Yellow skin (p. 1240): *Chel.*

Yellow conjunct. (p. 267): *Chel.*

Here then *Chelidonium* stood out as the simillimum. I gave him *Chelidonium* 1m, a few globules dry on the tongue, and *Sac. lac.*, gr .iii., nocte maneque sumend. On February 27th I heard from him that he had had no pain whatever since February 15th, when he began the treatment. On March 26th he called to consult me on behalf of another member of his family, and told me that he had been so ever since February 15th, and that the stools were of normal appearance. There was no jaundice.

He had been to work since February 17th, and he still keeps well. As, however, *Chelidonium* is not an antispasmodic, he will probably require a dose of some more deeply acting remedy to entirely eradicate the tendency to the formation of gall-stones.

Hahnemann, in his wonderful *Organon of the Healing Art*, gives full instructions for the taking of cases for the selection of remedies and for the general conduct of the patient. This work—the Bible of the homeopathic physician—ought to be in the library of all such, and ought to be studied unceasingly.

Hahnemann also, in the preamble of the *Materia Medica Pura* (Dudgeon's translation, pp. 20, 21, 22), illustrates by two examples the mode of selecting the remedies. In the *Chronic Diseases* he further elaborates, and gives a full description of his discovery of his law of healing—*similia similibus curantur*.

These works ought to be studied daily and deeply by all who wish to attain a thorough knowledge of the art of healing, of which they are the foundation.

8, Grange Crescent, Sunderland.

DR. LAMBREGHTS ON *THYROIDIN* IN ENURESIS.

By DR. CLARKE.

DR. LAMBREGHTS, of Antwerp, contributes to the *Journal Belge d'Homeopathie* of January–February, 1904, an article in which he gives some interesting experiences with *Thyroidin* in cases of nocturnal enuresis. The cause of this affection, he says, is “an atony of the neck of the bladder, with spasm of the urinary reservoir, the whole being dependent on a state of general debility and nervous irritability. In some cases the incontinence is provoked by a hyperesthesia of the urethral orifice, due to the presence of worms, or to an elongated prepuce.” For some time past Dr. Lambreghts has used with much success *Thyroidin* 3x trit. 25 centigrammes (about 3½ grains) dissolved in two spoonfuls of water—a spoonful night and morning. In obstinate cases the 2x may have to be resorted to. The indication for its use is a general one—weakly children who are nervous and irritable.

Dr. Lambreghts asks—is *Thyroidin* homeopathic to

enuresis? He quotes from the *Dictionary of Materia Medica* the following urinary symptoms of *Thyr.*: "Increased flow of urine.—Increased urination, usually with clear, pale, yellow secretion.—Slight trace of albumen found in urine.—Albuminuria.—Diabetes; caused and cured." On the strength of this pathogenetic record he further asks, are we to give a negative reply to his query? On the contrary, he maintains that *Thyr. is homeopathic to the state of nervous and general debility* on which enuresis depends, and is therefore homeopathic to many cases of the disorder. Here are some of his observations:—

Case 1.—Marie A., 21, of delicate constitution, very nervous. She is very little developed for her age, the menses not having commenced till she was 19. Her father, mother, and one sister have died of pulmonary consumption. From early infancy she has been troubled with nocturnal incontinence of urine, and in spite of divers treatments continues to wet the bed almost every night. Two of her sisters had the same trouble, but with them it disappeared at puberty. *Thyroid. 3x* was ordered night and morning for a week. The patient returned enchanted with the result: there had been only one bed-wetting, and that was after she had drunk two cups of tea just before going to bed. The treatment was continued another week and there was no recurrence. Then *Thyr.* was omitted for one day longer and incontinence returned. Treatment was continued for another month, and after this there was no recurrence.

Case 2.—Emile B., 16, pale, very nervous, and very irritable, was affected with nocturnal incontinence since infancy. An interesting circumstance is the fact that the trouble is > in summer and < in winter, when the weather is cold and the wind is in the north. *Thyroidin* was prescribed, as in the first case. From this time there was no trouble. The patient received a second prescription, and did not return. A month later Dr. Lambreghts heard from the boy's mother that he had remained well in spite of the cold weather which prevailed at the time.

Case 3.—Alfred M., 7, of delicate and nervous constitution, wetted the bed every night for about a month. *Thyr.* was ordered as above, and from that moment the boy was completely relieved of his trouble.

This is a very valuable piece of observation on the part of Dr. Lambreghts, for which the homeopathic community should be grateful to him. It shows how a homeopath can get round his cases when frontal attacks, based on the nosological correspondence, fail. Troublesome, apparently local, affections will often yield to remedies given for underlying constitutional states. Dr. Lambreghts got at his indications, very properly, by matching the constitutional state to which the remedy corresponds. There is even another way by which the same remedy might have been found. *Imperfect development* is a grand general indication for the use of *Thyr.*, as in states of cretinism, for instance. Enuresis nocturna may be regarded as an imperfect development of the innervation of the sphincter urinæ, or of the sphincter muscle itself. So, through this indication, *Thyroidin* might have been found to be a remedy for cases of enuresis. But to Dr. Lambreghts is due the credit of the discovery, and we have no doubt there will be plenty of opportunity for other observers to confirm it.

WHENCE? WHITHER? ODD THINGS IN PRACTICE.

By DR. JAGIELSKI.

(Continued from page 223.)

MANY, if not the majority, of medical men do not seem to know that medicine is the art of curing by medicaments, and nobody is more deeply convinced of this truth or fact than those doctors who have made it their moral duty to study homeopathy after their allopathic curriculum and blundering in practice; because after they have been constantly taught and assured in their medical schools and in universities that the old or orthodox system was what some like to call "rational medicine," they very soon find out for themselves, under the free guidance of homeopathic science, that the rational as well as the real art of curing by medicaments is homeopathy. What a pity it is that so many patients consult only allopaths, as by doing so they cut themselves off from the opportunity of getting advice of which they themselves never heard before, nor perhaps their allo-

pathic consultants. I mean they get to hear that certain diseases, which were supposed to be quite incurable, have found a chance in the hands of homeopathy. Very few have ever heard of cataract having been improved or cured. If they have, it was ascribed to Mother Nature, but not to scientific planning, because we are only *ministri naturæ*, but not its *magistri*. That means—often we have to stand at the bedside of patients as hopeless spectators rather than as men who can restore health by energetic interposition. In all cases nature cures, and the physician's only duty is to maintain life until this cure is effected. In cataract it is a general medical opinion that we have to wait until the cataract is ripe, so that the patient has to be quite passive, with no other hope before him than operation. When that will be advisable depends upon the relative process of ripening. Meanwhile the patient must wait—*without doing anything*—till he has gone slowly through all the moral suffering of getting blind. He *must* not do anything, so they say, because there is nothing to be attempted in the way of medicine to stay the formation of cataract or stem it, and nothing *can* be done, because there is nothing in existence worth trying that they know of in allopathic practice or the great speciality of ophthalmology. As to the operation *in vista*, "How deficient," says Malgaigne, "is a treatment which can only begin at a time when it should have been ended!" But the operation even, of which one speaks so hopefully, sometimes proves useless, because it is unsuccessful. Particularly is this the case when cataract is based upon a constitutional disease. "Ah!" then some unbiassed people will exclaim, "from the very first of its suspicion or diagnosis the treatment ought to be directed against the constitutional disease!" Then the disease should be first arrested and cured by previous internal and rational treatment. But this view has its representatives principally in homeopathic treatment. Homeopathic doctors always first look to this constitutional taint or to the totality of the symptoms of the whole individual body, in whom the first sign of cataract or of progressive weak eyesight call for a strict medical examination. Homeopathic oculists all agree that by a careful selection of drugs according to the homeopathic law, and by continuing the use for a long period, we may succeed in a large

proportion of cases in checking the progress of the disease, and are often, so say Drs. Allen and Norton, enabled to clear up a portion of the diffuse haziness, thus improving vision to a certain extent; but after degeneration of the lens fibres has taken place, they say no remedy will be found of avail. Dr. Henry Angell, of New York, says: "It does not seem improbable to me that in the course of time we may find some reliable remedy, the administration of which before the lens fibre has become degenerated may restore its transparency."

Let us hope that the time will not be far off when every doctor will have to pass his examination as well in homeopathy as in allopathy. An intelligent public alone will compel the medical faculty to study homeopathy in self-protection; then, surely, no educated person will accept a sentence to operation without first taking the advice of a homeopath on the matter. The present homeopathic doctor, being *par ordre de mufti* qualified in allopathy, does know that therapeutic department naturally; therefore he can easily follow any allopath in consultation if wanted; but it seldom happens that an allopath has even the slightest knowledge of homeopathy, which ignorance he betrays at the first sentence he utters. Where, then, would he be in hearing the homeopath speaking about the adequate pathogenesis, or the most adequate simile, or a polychrest? He can hardly be of the slightest use in consultation for treatment with a homeopath, of whatever distinction he may be in diagnosis. Why, then, should a homeopath consult with an allopath, which appears sheer folly? Dr. Malan, Dr. Bayes, Richard Hughes, write all in favour of homeopathic remedies in cataract and describe their cases; but there are a great many homeopaths who give a very large evidence of cure of cataracts. The late Dr. Compton Burnett, for instance, in his book, *The Curability of Cataract with Medicines*, has collected the whole history of cataract treatment, which is worth reading and knowing. He says: "To have one's ailments cured surgically is good, but to have them cured medicinally is better!" I have no wish to investigate or to show how many cataracts in reality have been cured, improved, or made stationary, but I wish to record my own experience of striking cases that I can vouch for. The first was that

of my own father, who, when about sixty-four years old, suffered greatly from conjunctivitis granulosa, which was treated locally by *Cuprum sulphuricum*, the crystal itself, and by various solutions of medicines. After a time his eyesight got weaker, and as I was studying ophthalmology under the celebrated Dr. Graefe in Berlin, he came from Posen, where he had during his first year of practice been very renowned as an oculist himself, and consulted Dr. Graefe, who found incipient cataract in both eyes. Of course he was advised to wait for the operation, and nothing was suggested in the way of medicines. In returning to Posen, he was advised by his friend, Dr. Goldmann, a homeopath, to use for the irritation of the eyes different homeopathic medicines. This he did for about a year, with very great improvement of his eyesight; at the end of that time my father again came to Graefe, who declared him to have greatly improved, and congratulated him as a great exception. When he was told of the homeopathic treatment he very sympathetically smiled and advised him to continue. So he did, and in using spectacles for his presbyopia he never troubled any more about his cataract up to his death at the age of over seventy-two years. The homeopathic remedies he had used were *Sulphur*, *Nux vomica*, *Silica*, *Bryonia*, *Conium*, *Belladonna*, &c.

Nine years ago I took a lady patient of mine to Mr. Knox Shaw, who diagnosed cataract slightly beginning in both eyes. I mentioned her general state of health and constitutional complaints to him for his further guidance; he agreed with me to let her continue my homeopathic treatment, amongst which *Antimonium crudum* was the constitutional remedy, and she took this for over one year for callosities on both soles of the feet, which were the principal indications for this remedy. The result was excellent; the callosities entirely disappeared; and a few days ago I took her again to Mr. Knox Shaw, who was very pleased with the present result of his eye examination, because he found nothing to indicate any progress in her local affliction, of which he had taken a sketch in his book, of the striæ of the lens which in 1895 and 1901 he had taken. The number of the glasses required for the future he altered very slightly, and as her general health had improved he did not advise any other medicine to be taken. I have two other cases of cataract on my

records, but as one had died three years after I had examined him, and the other one seven years afterwards—the former of lung complaint and the latter of kidney disease—I will only remark that both had improved in their eyesight after the homeopathic treatment I had advised them to take, and were very thankful for having been prevented from undergoing the operations which had been stated to be necessary by their oculistic specialists. Dr. Compton Burnett, in his 34th, 35th, and 36th “Reasons for being a Homeopath,” gives several cases of cataract which were so greatly benefited by his able treatment with homeopathic remedies that I wish every one to read them who may become concerned in such complaints; in any case we should do everything in our power to keep our mind hopeful, try everything to keep cheerful, free from worry and depression, because all the physical organs and the various functions of the body are under the direct government and supervision of the mind or soul. We should see to it that the structure in which it lives is kept in harmony with all its needs and desires. When the mind is free to act, perfect health will be maintained. When our mentalism is partially controlled by the influence from others and from fear, it can no longer be considered free, especially when the thoughts that are influencing the person are of an unpleasant character, and therefore cause worry, dissatisfaction, and unrest. As “like attracts like” in the law of mentalism, so he who worries attracts to him the thoughts of others who worry, and thus the cause of disease is intensified and multiplied. To have perfect health one must have a contented mind, for we attract to us from others the exact feelings we encourage within ourselves. None of us are, in the true sense, individuals. We are but a part of each other and a part of the whole scheme of creation. “Yes,” says Mr. A. Victor Segno, in his *Law of Mentalism*, “we read already in Romans xiv. 5., ‘For none of us liveth to himself, and no man dieth to himself.’” In the domain of mind distance and density of matter are not recognised; therefore one portion of physical matter is as easily influenced as another, for all men are of the same materials, and are governed by the same force. You can, by the use of mentalism, not only control your own physical being, but you can also form and control that of others. We see

this power and harmony of minds in fear as well as in hope. Look at the state of mind of people in epidemics which carry away great numbers; and look again at them when they feel they have found the ways and means to make the bacteria powerless and epidemics impossible, how they unite in self-protection. Man, therefore, is greater and more powerful, according to the new Science of Mentalism, than any and all the forces he brings under his control, or he would not be able to master them and make them serve him. In fact, there can be no longer any doubt in our minds that the power of a man's mind over his body is actually superior to any microbe or any disease or physical ailment. All facts in human history have proved this.

LYCOPODIUM IN DEAFNESS.—*VERATRUM VIRIDE* IN FEVER.

A correspondent sends us the following: "Lady, 50, not previously troubled with ear affections, became quite deaf in the left ear. It was supposed to be due to cold, the patient having sat in a draught at church. There was no pain; but the outer orifice was somewhat swollen. The ear felt stopped up; and that seemed to render the hearing of right ear indistinct. There was a sense of fulness, and in walking, every step seemed to cause a thud in the head. The left tonsil was slightly swollen, but no soreness of throat. There was noise in the head as of revolving machinery. Speaking very loudly to the patient caused much confusion in the head, and prevented her recognising what was said. *Mercurius*, *Pulsatilla*, and *Sulphur* were administered without effect. After two doses of *Causticum* the patient said, 'My ear went click, click, and now I can hear somewhat.' Because of excessive fatigue she took *Arnica* of her own accord, after which the deafness remained as bad as ever, in spite of further doses of *Causticum* and *Hydrastis*. *Lycopodium* was then selected, partly because known to agree with the patient, having cured her of piles which protruded and *ached* badly. After two days the hearing was perfectly restored, and a small quantity of rather dark cerumen was removed from the ear. The deafness had

continued five weeks, and has not returned during months that have since elapsed. *Lycopodium* has 'hardness of hearing,' in the *Dictionary of Materia Medica*.

VERATRUM VIRIDE TO "KNOCK DOWN" FEVER.

"The statement of Nash, quoted in the *Dictionary of Materia Medica*, that there is some risk in the employment of *Veratrum viride* to 'knock down' fever, reminds me of an experience I had some years ago, in the case of an infant of 15 months, who suddenly developed a raging fever. I watched the case closely, first dreading pneumonia and afterwards inflammation of the brain. There was no evidence of pain. The child slept most of the time. *Aconitum* and *Belladonna* seeming to be of no avail, a drop of *Veratrum viride* was administered with startling effect: a few minutes later the face paled and the eyes opened and turned upward. The little patient, however, soon rallied, no more medicine was given, and in a few hours discharge from both ears ran on to the pillow. The child's recovery was speedy and perfect."

MATERIA MEDICA MISCELLANY.

By J. R. P. LAMBERT, M.D.

Conium in Tumours of the Breast.—Dr. Dewey, writing in the *Medical Era*, says: "If I am positive of any one thing in medicine it is the power of *Conium* 30th to cure certain 'lumps' in the female breast. It has been my experience repeatedly to see tumours of a suspicious nature in the mammæ disappear by the use of *Conium* in this potency. Of course the indications must present themselves here, as with any other remedy. There are piercing pains, a tender gland, with a fugitive stitching here and there in it. More especially is it indicated if the lump dates from some injury, such as a blow. I do not know but other potencies would do the same, but I am sure of the 30th, and could relate a number of cases wherein it has prevented the advised use of the surgeon's knife. If we wait too long, or if the case is one too far advanced, time may be lost, to the detriment of the patient. Of this I am aware, but in most cases in the early stages of

mammary tumours the waiting of a few weeks will not result in harm to the patient if the case be watched. It is in the formative stage of these neoplasms that the remedy will act in checking the development of the growth."

Aloes and Æsculus Compared.—Dr. Laird, in an interesting paper on *Aloes*, contrasts it as follows with *Æsculus*: Its characteristic indications are to be sought solely in the splanchnic area, more especially the liver, colon and rectum. Here it pictures active hyperemia as perfectly as *Æsculus* portrays passive engorgement of the same tissues; and in addition directly or reflexly involves all the pelvic viscera in a similar congestion. *Aloes* presents increased arterial tension with strong, full pulse, diarrhea, and bleeding (*e.g.*, capillary and arterial piles); *Æsculus*, decreased blood pressure, constipation, and non-bleeding (*i.e.* venous) hemorrhoids. *Aloes* exhibits first the mental exhilaration of cerebral hyperemia followed by the intellectual torpor, ugliness, and misanthropy of intestinal and hepatic toxemia; *Æsculus*, sadness and melancholy as a primary effect of vascular stagnation. The *Aloes* patient is always hungry and hot; the *Æsculus* patient a sufferer from anorexia and always too cold. *Aloes* produces increased oxidation, fever, and inflammation, *Æsculus* decreased oxidation, venous stasis, and depression of temperature. *Aloes* is better from cold and cold applications, *Æsculus* from heat and hot applications. *Aloes* induces comparatively few nervous reflexes, *Æsculus* is rich in paresthesiæ and reflex neuroses. *Aloes* causes eczema, *Æsculus* shows no action on the skin. To *Aloes* alone belong those renal changes which make the drug of exceeding value in certain cases of uremia.—*Clinique.*

Sensations of Aloes.—Among the sensations of *Aloes* the same writer says heat is pre-eminent. It is present in every symptom or group of symptoms calling for the drug. In bilious conditions a *feeling of general internal and external heat, without fever, is very typical.* Sensation of weakness of the sphincters (anal, vesical, and pupillary) is equally characteristic; weight and heaviness are frequent accompaniments, while throbbing, common to all drugs that produce active hyperemia, is ever present. To illustrate: Heat, burning, heaviness in abdomen. Heat, weight, burning, throbbing in the rectum with more or

less tenesmus, uneasiness, heat, pressure, and tension in the region of the liver. Flatulent pain in the splenic flexure > by passage of hot, offensive flatus. Sensation of fulness, distension, and heat in whole abdomen, unpleasant warmth with throbbing. The sense of irritative warmth throughout the abdomen is very characteristic.—*Ibid.*

Therapeutics of Cataracta Senilis.—Dr. Parenteau's fifteen years' experience leads him to emphasize the following remedies:—

Cannabis Sativa.—Cataracts following nervous disturbances. Psychic degradations or eccentricities of character. Abuse of tobacco, alcohol. He is deeply depressed and fears imminent blindness.

Causticum.—Cataracts in patients with a past or present history of locomotor disturbances, either of paralytic or convulsive nature.

This remedy accomplished remarkable results in three patients, two being afflicted with hemiplegia (cerebral hemorrhage), and the other with a painless facial spasm. A dimness, grayish in colour, irregular and ill-defined, had spread over both eyes.

Cineraria Maritima.—Deemed by himself of unreliable worth, and apparently indicated in traumatic cataract and that following laceration of the zonule, where it may act favourably. The cataracts are whitish, scattered about and accompanied by very rapid obscuration of vision.

He uses this remedy in massive doses, 4–8 drops of ϕ , within twenty-four hours, and preferably by instillation.

Conium Maculatum.—Like *Cannabis sat.*, adapted to nervous, depressed persons. He recalls the case of a hypochondriacal oculist with incipient cataract. As long as this remedy was given the cloudiness disappeared, only to recur at once on its withdrawal or alternation with another remedy.

Ledum Palustre.—Especially adapted to gouty persons. A patient under his care developed an irido-scleritis of gouty nature, and simultaneously a cloudiness of the lens. *Ledum*, prescribed for the former condition, to his great surprise, also markedly improved the latter. Subsequent results attest to the efficiency of *Ledum* herein.

Naphthalin.—According to toxic effects, this remedy appears well indicated. Transient improvements only

were observed, and he is aware of no special indications for it.

Magnesia Carb.—This remedy has rendered him good services in women afflicted with uterine or climacteric disturbances; likewise persons debilitated by severe diseases (cancer, syphilis, gastric or hepatic affections, &c.). Emaciation is marked; the skin earthy, parchment-like. Two cases of struma exophthalmica, with cataracts, improved encouragingly under the use of *Mag. carb.*

Natrum Mur.—This remedy, like *Secale*, is regarded by Dr. Parenteau as his fundamental remedy. He relied implicitly upon these two in incipient senile cataract, given either alone or in conjunction.

He gives no special indications, simply mentioning the cataracts to belong to the category of simple senile scleroses, without any deeply underlying constitutional defect or any preceding injury of the structure of the eye. The appearance of the cataract is typical; it commences at the periphery with radial and distinct, though irregular, streaks. Vision remains comparatively fair, especially in good light.

Phosphorus.—An admirable remedy in patients with albuminuria, diabetes, heart disease, when hemorrhages have occurred within the choroid and retina; the opacities are more central than peripheral, and accompanied by visual disturbances, aggravated by good illumination. A case occurring in an aged, gouty, hemorrhoidal patient, giving no response to *Ledum*, improved speedily under *Phos.* selected for repeated protracted epistaxis.

Secale Cornutum.—*Secale*, like *Natr. mur.*, presumably accomplishes the best results in cataracts where the crystalline lenticular dimness is dependent upon diminished interfibrillary fluidity, here restoring the volume to a norm of fluidity. Furthermore (like *Magnesia carb.*), it seems to act preferably in women with post-climacteric uterine disturbances. Differentially, *natr. mur.* is called for by contracted pupil, whereas *Secale* presents dilated pupil.

Senega has found practically no use from his hand, while, on the contrary,

Silica has been frequently employed by him. The indications are: Cataracts occurring in desk workers, literary men, who have become "run down" by laborious,

persistent work, or, if engrafted, in a naturally weak constitution, the head feels heavy attended by weak memory for words; vertigo; tinnitus; gastric disturbance; hemorrhoids and gout symptoms at times; so also hectic fever in the evening or night. Usually, the pupils are contracted. Photophobia was noted in several cases.

Sulphur.—This remedy apparently sustained the action of *Natrum mur.*, especially in persons of scrofulous diathesis with a history of cerebro-spinal disturbances, tuberculosis, or uterine ailments. The general condition seems to be malnutrition.

Tellurium.—Cataracts following diseases of the eyes: irido-choroiditis, glaucoma, detachment, hemorrhages, &c. He claims this remedy to possess special values as an absorbent of the infiltration in the iris and choroid, and thereby increasing the vitality of the lens, and favouring retrogression of incipient cloudiness of the lens.—*Hahn. M. (Allgemeine Hom. Zeitung)*.

ACQUIRED INGUINAL HERNIA: ITS CAUSES AND PREVENTION.

By ARTHUR A. BEALE, M.B., Assist. Surgeon Homeopathic Hospital.

To thoroughly appreciate the direct and subtle causes of hernia or rupture a more or less exact knowledge of the anatomy of the part involved is necessary; this knowledge is here taken for granted. Two factors play an important part in the history of all herniæ: First a prevailing and intermittent pressure brought to bear on some viscera, and second an enticing weakness of the parieties.

In inguinal hernia there is, in all normal subjects, a canal which, whilst not patent, presents a determinant point of small and, compared with other parts, less resistance and is the proverbial weak link which marks the strength of the whole parieties. The supports of this canal are composed of a mixture of muscular and fibrous tissue. This sort of tissue is subject to great variations of tone, depending a great deal on the health of the individual. If the tone is good the resistance to any obtusion of viscera is in direct proportion, and *vice versâ* poor tone means less resistance.

Side by side with this the health or otherwise of the parieties is accompanied by a corresponding condition in the viscera, but particularly their outside coat, the peritoneum.

If one were to take away the peritoneum, the whole nature, history, and technique of hernia would be gone.

Now this relationship between the inside abdominal viscera and the outside abdominal wall is so constant that it might be formulated as a law in this way: The health and tonicity of the parieties and viscera are always in direct proportion! and one might correspondingly say the improvement in health and tone of the one always corresponds directly with the improvement in the health and tone of the other. This has a far-reaching import, both in reference to the cause and prevention, as well as cure of this complaint. It is by the co-operative defect of both that hernia came into existence, and correspondingly by the improvement in both that the general cure is accomplished. In inguinal hernia, then, we may take it that there is always some degree of inefficient tone or resistance of the abdominal support in that region, and *pari passu* a tone-lacking and drooping viscus, and in the case of the small intestine a mesentery of similar defect; and consequently the gut, instead of being suspended well away from the wall, is allowed by this elongation to lie about, and encroach on, the region of the *internal abdominal ring*. If the viscus be the colon, then the meso colon is defective in tone if the omentum itself is "flabby" and elongated. The powder and match are present, all that is wanted is the flame, and this is supplied by any undue strain—lifting, coughing, straining at stool.

Immediately, the invading viscus becomes a wedge, which, suddenly or incipiently, forces its apex into the opening, the parietal peritoneum at the same time, lacking tone, gives way before it; the wedge acts on the same principle as Hegars probes in dilating a uterus; the opening is further and further dilated and in time is so paralysed as to be almost incapable of retracting; the peritoneum is always equal to the occasion, and distends, enlarges, and thickens in proportion to the distension. In the early stages, when the sac of the hernia protrudes down to the external ring, the condition is named a bubonocele.

There are, then, three conditions at work in the produc-

tion of hernia : First, an invading wedge of viscera ; second, passive, insufficiently resisting parieties ; and third, the force behind the wedge. The truth of this knowledge has a peculiar and direct bearing on its cure, and here the homeopathic law is active, for the very conditions which cause the complaint, if simulated in moderated and controlled doses, will prevent the condition and in many cases cure. Sandow and his disciples do not easily if ever become ruptured, because by appropriate exercises the tone of the viscera and the parieties are so much improved, that it is almost impossible after a time for these people to become ruptured, and they are able to lift extraordinary weights with impunity, the very act which in another less prepared person would produce hernia. The class of people in whom rupture is most common is the weakly and flabby, whose health, perhaps, has been depleted by some depressing condition, rheumatism, influenza, paralysis, syphilis or consumption, excessive sexual indulgence.

These conditions might be spoken of as predisposing causes. The active strain takes many and sometimes most curious forms. On looking over my own cases I find out of fifty-eight who referred to the matter, lifting heavy weights was far and away the commonest attributable cause, representing twenty-one in number ; of the others seven gave it as straining at stool, six were unknown, five straining at gymnastics, including running ; four to cough. Amongst other curious causes given were blowing wind instruments, slipping on the pavement, a blow from the connecting rod of an engine, a blow from a cricket ball, and being rolled over by a horse. It should always be borne in mind that one and all of these certified causes may be only ultimate and determining, and very likely for months or years, unbeknown to the patient, the condition had been gradually and incipiently developing, when the culminating pain and protrusion declared to the patient the nature of the malady. I have seen many cases in which the patient was unconscious of anything wrong, and yet on examination there was to be felt in the canal, just within the external ring, the fundus of the sac, which, on coughing, impinged upon the finger. Many such could be saved a life of inconvenience and perhaps misery were the case diagnosed and properly treated at an early enough date.

General Causes, Predisposing and Active.—It would generally be admitted that rupture is much more common than in former times without having statistics, and the cause is to be found in the change of habits and occupations of the people. The advance of sanitation and refined methods of living have resulted in the preservation of a mass of weaklings who, with increase in intelligence, have diminished in robustness. The nature of present-day labour is such that many occupations are introduced involving heavy lifting and straining. The out-door occupations of the country have been substituted by indoor factory life of large towns, whither the large bulk of manual labour has been gravitating for years; and, moreover, be it noted that the straining of country occupations would be compensated for by a stronger physique and more robust health that comes with outdoor occupation. Again, until quite lately, when the question of dietetics began to occupy the public mind, the people have been for many years drifting into a method of eating and drinking, the whole tendency of which has been towards enervation, chiefly by the introduction of tea and coffee, pastry and confectionery, and the substitution of white bread for the more wholesome, less refined meal bread of our fathers, and the excessive use of purgatives, the whole of these tending to dyspepsia, flatulence, constipation, venous engorgement of the viscera atony of intestines and rectum.

Other depressing innovations are met with in improperly ventilated, close rooms, unclean clothing, and the general neglect of exercise, and especially the neglect of proper respiration, the slightest attention to which, by restoring a proper system of breathing, will reinstate the tone of the abdominal muscles sooner than anything I know, and will assist in the cure of hernia as quickly as its neglect will lead to its production. Amongst the methods and customs of modern times we must not forget the habit of defecation without proper support, a factor which is especially marked in India. The natives who remain true to the old methods of "squatting" protect the hernial opening with the thighs and remain free from rupture. Those natives who adopt European habits are found to be especially prone to rupture.

All those predisposing causes as age, sex, occupation

and ill-health will be found to be only commentaries on the factors mentioned before.

Preventative Measures.—If this term were applied to those cases where no sign of hernia exists these suggestions might lack the utilitarian mission they are intended to convey, and would be on a par with those alarmist propaganda which require all people to be inoculated with the antitoxin of all possible diseases which they may never contract.

But it has a wider field of action; it recognises that the vast majority of mankind are liable to the condition, and are only waiting the appropriate strain to place them in the category of the ruptured. It also presupposes that were people to subject themselves to the proper examination a state of incipient hernia might be recognised, and by the appropriate treatment being applied in time a complete restitution of parts be accomplished and the patient saved years of annoyance and inconvenience, if not misery.

The points in such cases to be looked for are: a flabby and relaxed state of the abdominal walls, an unusually patent external ring, a suspiciously well-marked impulse on coughing comparing (in most cases) unfavourably with the other side, and, what I have found to be an almost constant sign in these cases, a limited elongated protuberance running obliquely downwards inside the anterior superior spine and along the Poupart's ligament to a point opposite the internal ring.

The first step is to protect the part with a truss, and, as stated elsewhere, the wise surgeon always recommends a double truss. The second step is to place the patient under the best dietetic and hygienic *régime* available under the circumstances. The third step is to institute a regular course of breathing and muscular exercises appropriate to the conditions. Nor do I wish to suggest that every one liable to hernia should go about "trussed." The truss only becomes compulsory when the tendency is well marked and advanced, otherwise the measures to be recommended might precipitate the very condition we wish to prevent. So at the best a truss is unnecessary, at the worst it becomes a temporary measure and precaution only.

The first exercises are breathing; the practising of breathing exercises should begin gently. Three or four

respirations three times a day, guaranteeing that the method of inspiration and expiration be regular, deep, and in order, viz., the use, and one might almost say undue use, of the abdominal muscles. If you begin with a forced expiration the method of inflation becomes automatically correct by the protrusion of the abdominal muscles first, and the costal muscles secondly. These may be increased to a dozen or more three times a day, with surprising improvement in a short time.

After this is well instituted the more correlated movements and exercises may be commenced, and these consist of a regular course of exercises on the Swedish principle, commencing with the arms, then bending, leg movements from the waist downwards; lastly, and most important, the true abdominal movements, the most energetic of which are best performed lying on a couch, in which position the weight of trunk, and legs and hips are alternately thrown on one another, raising the body from the supine to the sitting, and raising the legs into the air from the straight, with knees kept rigidly straight together. A most useful little text-book of movements will be found in that by Professor Har-telius, *Home Gymnastics*, published by Isbester & Co.

Should the hernia be well marked this treatment should be combined with the system of injections of a stringent fluid as described by me in a previous article contributed to this journal in the August number, 1902.

Were it compulsory in our present educational system, as has lately been proposed, to teach hygiene and dietetics combined with regulated exercises, Swedish movements and breathing, hernia would become less common, whilst the national health would be of a higher standard.

Homeopaths should not lose sight of medication in assisting the patient to restore a healthy condition. Amongst those I have found most useful as being indicated are *Nux vom.*, *Berberis*, *Silica*, *Calcarea*, *Calc. phos.*, and *Arnica*.

CASES I HAVE COME ACROSS.

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

LXV.—*CHIMAPHILA UMBELLATA* IN SCANTY URINATION.

THIS was the case of a lad (aged 16) who was suffering from scanty and frequent urination, accompanied with scalding, smarting, and pressing pains. The urine was high-coloured, and deposited a large quantity of mucopurulent sediment. He also complained of a painful feeling of irritation of the urethra, extending from the end of the penis to the neck of the bladder. He had been taking *Terebinthina*, *Uva ursi*, *Buchu*, and *Acidum nitromuriaticum* without success. The symptoms had first come on about ten days previously, and had gradually been becoming worse. I told him to take a tablespoonful of the following four times a day :—

R. *Chimaphila umbellata* 1x ʒj.
Ad Aqua dest. ʒviii.

The patient faithfully followed the directions, with the result that on the second day he stated to me that the urine was not quite so scanty, but that he still suffered a considerable amount of pain in passing it. I told him to keep on with the medicine. This he did, with the result that at the end of the week there was an absence of pain on micturition, the sediment in the urine had also greatly diminished in quantity. He now took a tablespoonful of the medicine night and morning, and at the end of a fortnight was completely cured, even the painful feeling of irritation of the urethra having entirely disappeared.

LXVI.—*EUPATORIUM PERFOLIATUM* IN EPIDEMIC
INFLUENZA.

A lady (aged 35) had a very severe attack of influenza, which confined her to her bed. Her face was flushed; she had a throbbing headache; great thirst; at first chilliness, and then great heat, attended with weakness and painfulness all over; increased lachrymation and aching pain in the eyes; thin, acrid discharge from the nostrils; severe cough; nausea; loss of appetite; and anxiety. The tongue was coated yellow. I first gave *Aconitum napellus* 1x gtt. ii. every hour for three hours to

combat the fever, but it did not realise my expectations, so I gave the following :—

R. *Eupatorium perfoliatum* ꝑ3j.
Ad Aqua dest. ʒviiij.

One tablespoonful every hour for the first three hours, then every two hours. There was but a slight improvement after the first six doses, but it was enough to inspire me with confidence to continue with the medicine. This was done, and the patient made a good recovery, although it was fully a week before she was entirely free from all her unpleasant symptoms. In cases of epidemic influenza, in which the symptoms described above are prominent, *Eupatorium perfoliatum* will be found a consistent remedy, and one that will give the best of results in combating the disease.

LXVII.—*OLEUM JECORIS ASELLI* IN A CASE OF COUGH.

An old gentleman (aged 63) suffered from a constant dry, hacking, tickling cough, accompanied with soreness of the chest and stomach. He had present also great oppression and heat in the chest, dyspnea, and palpitation of the heart. There was emaciation, general debility, and loss of appetite. The expectoration was at times of a yellowish colour. He also suffered from attacks of vertigo and headache, the latter accompanied with a sensation as if the head would burst open. He was very fretful, and complained of coldness of the feet, for which he used to take a hot-water bottle into bed with him at night to instil warmth, as he could not get to sleep so long as his feet were cold. He had tried various "cough remedies," but without obtaining from them the slightest relief. I placed him on *Oleum Jecoris Aselli* ꝑ 3 gs. three times a day. The remedy was very marked in its effects, and showed a great contrast to the "cough mixtures" that he had been taking. Even after the first three doses, at the close of the first day, he stated that he "felt the difference already!" This led him to continue the medicine, although he by no means relished the taste of the *Oil*. The consequence was, that at the end of three weeks he was completely cured of the cough that he at one time thought would lead to consumption.

(To be continued.)

BRITISH HOMEOPATHIC ASSOCIATION.

GRAND GARDEN FÊTE.

THE Grand Garden Fête mentioned last month is to take place, under the special auspices of the Ladies' Branch of the Association, in the Botanic Gardens on Thursday, the 7th instant. The Fête promises to be a great success, and no pains have been spared by the Committee to make it so. The Fête begins at 2.30 p.m. by the performance of the Royal Artillery Band—probably one of the finest military bands in the empire. Afterwards a Pastoral Play—Shakespeare's "Twelfth Night"—will be performed by the well-known "Ben Greet Company." A concert follows later on, which will be under the kind direction of Mr. Raphaël Roche. Amongst the distinguished artists who have generously placed their talents at our disposal are M. Tivadar Nachéz, Mr. John Thomas, harpist, and other illustrious artists.

Besides these features of the afternoon's entertainment there are to be Character Sketches, and conjuring by well-known artists, and a lady palmist from the Earl's Court Exhibition. From the Earl's Court Exhibition also come a troupe of Italian Lady Singers, who are most picturesque in their national dress, as well as charming vocalists.

The Flower Stall, presided over by ladies, and kindly organised by Mr. John Mews, will, we expect, have great attractions and a temptation to lovers of flowers to purchase bouquets and "button-holes." Any gifts of flowers by those who are unable to be present will be gratefully received if sent to Mrs. John Mews, 68, Queensborough Terrace, W., not to arrive *later* than 9.30 a.m. on the morning of the Fête. Afternoon tea will be provided for the visitors in the conservatory, the cost of which is included in the price of the admission ticket, namely, half a guinea.

Tickets admitting to the Gardens, to the various entertainments (other than reserved seats of the "Pastoral Play"), and including tea, 10s. 6d. each, to be obtained on application to the Hon. Secretaries of the Ladies' Committee, Mrs. Henry Wood, 34, Clanricarde Gardens, W., and Mrs. Stephenson, 90, Inverness Terrace, W.; or to Mr. F. King, Secretary of the British Homeopathic Association, No. 233A, Regent Street, W.

SUBSCRIPTIONS AND DONATIONS TO THE GENERAL FUND
OF THE ASSOCIATION SINCE THE LAST PUBLISHED
LIST.

Donations.

Right Hon. the Earl of Dysart...	...	...	£2,000	0	0
Sir Walter Greene, Bart, M.P., per Dr. Dyce					
Brown	...	...	25	0	0
Bayes Fund (second donation)...	...	...	12	0	0
John Pakenham Stilwell, Esq., J.P. (second					
donation)	...	...	10	10	0
Miss E. R. Leon, per Dr. Byres Moir...	...	...	10	0	0
Colonel Granville and Lady Blanche Smith,					
per Dr. Dyce Brown	...	...	10	0	0
Mrs. Scott, per Dr. Madden	...	...	5	5	0
Geo. Spicer, Esq., and Mrs. Geo. Spicer, per					
Dr. Bennett	...	...	5	5	0
H. Dell, Esq., per Dr. Bennett...	...	...	3	3	0
J. Maden Holt, Esq.	...	...	2	2	0
G. H. Paine, Esq.	...	...	1	1	0
Mrs. C. W. Thomson, per Secretary	...	...	1	1	0
Mrs. Knox	...	...	1	0	0

Subscriptions.

C. F. Pearson, Esq.	...	...	1	1	0
Dr. F. Flint	...	...	1	1	0
Dr. E. M. Madden	...	...	2	2	0
J. P. Stilwell, Esq., J.P.	...	...	2	2	0
Miss Elkington	...	...	1	1	0
Miss E. H. Burney	...	...	1	1	0
Mrs. E. Butler	...	...	1	1	0
E. Durrant Cecil, Esq.	...	...	0	10	6
Mrs. Durrant Cecil	...	...	0	10	6

LADIES' COMMITTEE.

Miss E. C. Cruikshank, subscription	...	...	1	1	0
Mrs. Thirlby, proceeds of a sale of work	...	...	28	10	0
Mrs. Potter Rudhall	...	...	1	1	0
Mrs. Reade	...	...	1	1	0

MEDICAL MISSIONARY COURSE.

M. C. Nairn, Esq., per Dr. E. A. Neatby	...	...	12	12	0
Miss A. F. Monro	...	...	4	4	0
Miss M. S. Brown	...	...	3	3	0

SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

THE ninth meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thursday, June 2nd, Dr. Herbert Nankivell, President, occupying the chair. The following specimens, &c., were exhibited:—

1. Malignant ovarian tumour and hydrosalpinx, associated with extreme ascites. Laparotomy. Recovery, Dr. Edwin A. Neatby. 2. A new aseptic thermometer, Dr. Granville Hey.

Dr. J. R. P. Lambert read a paper on "*Silica* Clinically Considered: its General Action and Characteristics; Clinical Cases; Comparisons." In connection with this paper two clinical cases were shown, the most interesting of which was a case of antral disease of twenty-three years' duration, with great thickening of the superior maxilla, which had already diminished nearly half its extent under the action of *Silica* in twelve months, with great improvement in the general health. The other was a case of psoriasis guttata, with a peculiar periodic skin condition of the hands and feet. The notes of several other cases were read, to illustrate the leading characteristics of the drug.

The discussion was opened by Dr. Warren, who mentioned a case of whitlow in which *Silica* had proved curative.

Dr. E. A. Neatby mentioned an interesting breast case. The patient had had one breast removed for cancer, and on the appearance of a lump on the other the surgeon advised removal also of that. Dr. Neatby, whom she then consulted, described her as a pale, flabby subject, sensitive to cold. Among other symptoms present, he mentioned axillary perspiration, subinvolution of uterus, and leucorrhœa. Under *Sil.* 30 the swelling disappeared in three or four months.

Dr. Alexander said he had been disappointed with *Silica* in bony conditions. He mentioned a case of habitual constipation in which *Silica* 3x first aggravated, it caused such a difficult and painful stool, and then a daily action. He has also seen great benefit from *Silica* 1m. in bronchitis with nummular sputum, also in the sloughing stage of carbuncle.

Dr. Wm. Roche said he thought the difference between *Hepar* and *Sil.* is that *Hepar* helps pus formation, *Silica* helps to remove it when formed. In children such as Dr. Lambert had described it is most useful, *i.e.*, in thin, unhealthy children. It is no good for the fat, unhealthy ones. He used the 12th-30th potencies.

Dr. Jagielski mentioned a remarkable improvement in a case of cataract by *Silica*. He thought *Silica* was the best medicine to demonstrate the value of homeopathy to an allopath.

Dr. Roberson Day also spoke of the value of *Silica* in children's diseases. He would like to have seen a more recent photo of the patient with antral disease before the treatment was instituted.

Mr. Knox Shaw mentioned a very interesting case of frontal sinus disease, which came to ophthalmic department. She had suffered severe frontal headache following influenza, and a swelling developed in the frontal region and lower orbit, which produced diplopia. The swelling was exceedingly tender, and the patient was sent into hospital for operation the following Tuesday, *Silica* 6 being given in the meantime. This gave so much relief that operation was no longer considered necessary. Some months later she returned with a recurrence, and a hypodermic needle drew off some pus, and it was again decided to operate, and *Silica* given in the meantime. The patient was prepared for operation, and next day anesthetised. On removing the dressings on the operating-table the swelling was found to have gone, and nothing was done. Some months later she came a third time, and this time the frontal sinus was opened, and a sequestrum removed. Dr. Hey added that each of these two relapses was the result of a blow. He also mentioned a case of a chronic sinus of ten years' standing which healed under *Silica*, but a violent eczema broke out over the abdomen.

Dr. Octavia Lewin mentioned a case of constipation in a child of twelve. It had lasted all her life. She had been three years under allopathic treatment without relief. The stools were large and caused great pain. One dose of *Silica* cm cured.

Dr. Lambert replied.

Dr. Margaret Tyler then read a very breezy and impressive paper entitled, "Impressions of *Pyrogen*," in which she highly praised *Pyrogen* as a drug of prime

importance in enteric fever, influenza, suppurative affections, and diarrhea. A short discussion followed—short, not because the paper was not highly appreciated, but because members present had had but little experience with the drug. Drs. Roberson Day, Madden, McNish, Lambert, Neatby, and the President took part.

Dr. Tyler replied.

The annual assembly will be held conjointly with the British Homeopathic Congress on the evening of June 29th and the afternoon of June 30th.

Further announcement will be made of the proceedings.

During the assembly there will be an exhibition of medical and surgical apparatus, equipments for foreign travel, hygienic and sanitary appliances, and objects of clinical and pathological interest.

INSTITUTION.

CHELTENHAM HOMEOPATHIC DISPENSARY.

WE have received the forty-eighth annual report of this institution. The physician (Dr. Stanley Wilde) gives the following account of the work done in twelve months:—

The patients treated during the past year (ending April, 1904) are as under:—

New patients	329
Visits paid at patients' homes	617
Attendances at dispensary	1,948
Total	2,894

NATRUM SALICYLICUM.—POISONOUS SYMPTOMS AFTER THIRTY GRAINS OF SALICYLATE OF SODA.—Dr. Jones, after administration of thirty grains of sodium salicylate, observed very distressing complex of symptoms consisting of a feeling of anxiousness about the heart, great weakness, so that the patient thought he was about to die; this was preceded by a stage of excitement. This condition lasted four hours, when the patient fell asleep. The following day when she awoke she was well.—*Glasgow Medical Journal*, January, 1904. (Frank H. Pritchard in *Hahnemannian Monthly*).

EXTRACT.

THE MANUAL OF PHARMACODYNAMICS, BY
DR. HUGHES, AS A TEXT-BOOK FOR
STUDENTS.*

By B. G. CLARK, M.D., NEW YORK.

THIS work is known wherever homeopathy has been studied—by some highly praised, by others condemned. That it has not occupied its rightful place in our literature is the opinion of the writer, and it will be his endeavour to explain why it should not be used as a text-book for students in our colleges.

I believe a book can be best understood by grasping the motives and intentions of the author, or the ends sought to be accomplished by him. This brings us to a glimpse of the personal character of Dr. Hughes. I shall not attempt to speak of all this great man's work for the cause of homeopathy, nor of his beautiful home life and pleasing personality, for that has been done by abler pens than mine; and in drawing attention to his deep religious convictions I do so only in order to explain more fully the noble aspirations of the man as a Christian and as a physician.

As a churchman Dr. Hughes was, I believe, a member of that body of Christians known as the "Irvingites," or the "Catholic Apostolic Church," and held that all Catholics, if not all Christians, could be reunited on the lines laid down and the doctrines taught by this branch of the Catholic Church; and to this end he laboured in season and out of season. The reunion of Christians became part of the life-work of this good man, and I believe his last efforts were put forth in this cause.

Now, when this strong Christian character became a believer in the law of homeopathy is it any wonder that he should want to go back to the "day-books" of the provers and examine carefully each symptom, also to study attentively the writings of Hahnemann and his immediate followers? No! we should expect as much from such a man. That he was a firm believer in the

* A Paper read before the New York County Society at meeting of March, 1904.—*Medical Advance*, April, 1904.

law of *Similia Similibus Curantur* there can be no question; but in his critical way he found *some* symptoms in the provings made with potencies above the 12th, and as these symptoms were not confirmed by the provers using the tinctures, he reasonably felt there was room for doubt. And doubt must have no room in a work of such responsibility: a physician in his duty to his patient, carrying out this great, God-given law, must not be led aside by any doubt, but must have the best results obtainable for his work. The *Cyclopaedia of Drug Pathogenesis* was largely the result of this idea and of Dr. Hughes' labours. That it is the most reliable materia medica we have to-day is generally conceded; but that it is largely a work of reference and not a good working materia medica must also be conceded.

A review, however brief, of a man's life-work must precede any reference to a particular line of work, in order that one may the better understand that special line under consideration. We have called your attention to Dr. Hughes' work as a churchman, to his belief in and some of his work in connection with the cause of homeopathy. Now, this sincere and devout man, believing so firmly, as a physician, in our law of cure, saw a way by which all physicians might, and by the grace of God *could*, be brought together and made into one united profession, labouring for the good of mankind under the banner of *Similia Similibus Curantur*. Surely, a noble idea! In the reuniting of the Catholic Church minor differences must be adjusted, and perhaps some compromise in matters of ceremonies must be made, but none in the essential doctrines of Christianity: so in reuniting the medical profession minor differences must be dropped and what to some seem impossibilities must not be brought into the foreground—like the pathogenetic symptoms given by the potencies above the 12th, for instance—and in writing to the old-school physician he must be approached on the lines of his former teaching. It was from this point of view that Dr. Hughes wrote and published *Letters to an Enquiring Friend* in 1867, a second edition appearing in 1870. Some of you are doubtless familiar with these *Letters*; to those who are not I will say that each letter dealt with usually one remedy; they were addressed to a supposed friend, an "old-school" physician, telling him how he could use the drug for conditions which the writer described, and begging him to try it in his next case with the indications given and note the results. Dr. Hughes speaks of the physiological action of the drug and then turns to the conditions under which it will be called for. It was the *condition* that was to be acted upon. There is no doubt that even at this time Dr. Hughes was conversant with all of

Hahnemann's writings, and from his quotations it is evident that the *Materia Medica Pura* was ever before him; yet it is always the *disease* that the drug will cure. Why? Because it was the old-school physician to whom he was writing, with the object of bringing him to his (Hughes') mode of thinking and interesting him in this new and, to him, untried therapeutic field; and he must speak to him in as familiar terms as possible. When Dr. Hughes was asked to deliver a course of lectures before the British Homeopathic Society in 1875 these *Letters to a Friend* were taken as a basis, were much amplified, and, as he says, were delivered substantially as published; they are known as *Hughes' Pharmacodynamics*. In this work the same methods obtain as in the smaller book published in 1867 and 1870. The *Pharmacodynamics* was bought chiefly by physicians, and it made interesting reading for one looking for something better than was usually found in old-school works on *materia medica*; it opened up a wider field, and to one just beginning the practice of homeopathy, and yet a graduate of the old school, it was more than interesting—it seemed to be the real object of his search. No wonder that it was hailed with delight.

When a doctor is satisfied with himself and thinks that his knowledge of his profession is about complete he has arrived at a pitiable stage of his career. Not so with the author of *Pharmacodynamics*. He knew before he began this work what homeopathy was. A hard student himself, he thought he could lead others on to study more of homeopathy by introducing them to as much of it as he could under this head. But no! he had told us in his convincing way what to expect, and some of us felt that there was therefore no need of studying the *Organon* or the *Chronic Diseases*; we had it all with much less labour. Not until after the *Manual of Pharmacodynamics* was published had Dr. Hughes' writings been brought to the attention of the undergraduate; the book was not written for him; it was not adapted to kindergarten instruction. Furthermore, homeopathy was not built in that way; and to give such a book to the student switches him off the homeopathic track to the empirical road, and even perverts the teachings and frustrates the object of the book itself. When the tendencies of the man (Dr. Hughes) are taken into account and the object and intention of the writer—to convert the old-school physicians to homeopathy—are understood it does not seem possible that any physician could recommend the work to a student in a homeopathic college.

In conversation with Dr. Hughes at one time I took occasion to thank him for publishing *Letters to an Enquiring Friend*; I told him it was through their influence that I had concluded

to study homeopathy, and that when the *Pharmacodynamics* appeared I had read every word of it; that I had been profoundly grateful to him for what seemed to me to be a complete guide for the homeopathic treatment of diseases; but that after a year or so in practice, failing to cure where a cure seemed possible, I began to look about for help, and turning to the *Organon* for guidance, I was directed to a different manner of selecting the remedy—that it was the living man I was to treat and not the disease; and thereupon my success was much greater. “And now that I know you,” I added, “I feel that you are a much better homeopath than could be made through the teachings of the *Pharmacodynamics* alone.”

He replied, “I am glad to hear what you say, and I hope that all who have read my work as well as you have been led to pursue the same path. You know that those *Letters* were written with a purpose, which they accomplished; the further fulfilment of that purpose in your case is very different from what you say, and I am pleased to know of it. That I could not, with that purpose in mind, write *all* there was to know in homeopathy is also evident, and the *Pharmacodynamics* was really an elaboration of those *Letters*. I hope others have not stopped in their study of homeopathy with the reading of that book, but like you have passed to a fuller and more complete study of all the truths covered by our great law.”

I believe Dr. Hughes was thankful in the same spirit that the Great Physician is thankful when some poor sinner repents.

These are some of the reasons why I think the *Pharmacodynamics* should not be given to the student as a text-book and why, when it is given to an old-school physician, he should be told of its place and limited value, and that it should be supplemented by other reading tending to a better understanding of the law and practice of homeopathy, remembering, as Dr. Hughes once said, that we are priests in the one Catholic Church of medicine, although *some* may deny our orders and attempt to invalidate our sacraments.

REVIEWS.

CHILDREN IN HEALTH AND SICKNESS.*

In this excellently printed volume of 210 pages, Dr. Roberson Day deals in a clear, straightforward way with

* *Children in Health and Sickness*. By J. Roberson Day, M.D. With illustrations. London: Kegan Paul, Trench, Trübner & Co., Ltd., Gerard Street, W., 1904.

all that concerns the care and management of children, not forgetting their homeopathic treatment. There is much in the care of children that has nothing to do with medication, and for his lucid setting forth of these matters mothers of all medical schools will be grateful to Dr. Day. Matters of diet, ventilation, clothing, and exercise are equally interesting to all schools alike; but, as Dr. Day points out, the paramount interest of the infant population is homeopathic treatment. In the preface Dr. Day says of his book:—

“That it is concerned with two problems: (1) The conditions which are required for a healthy life; and (2) the means which are best calculated to restore health when sickness comes.

“To auxiliary treatment, which conduces so much to the comfort of a patient, has been given a foremost place. Of medicines I have purposely said little, my object being to supply a *First Aid* when anything goes wrong, a handbook which may be consulted in emergencies, and a guide for rearing healthy children.

“The author is convinced of the infinite superiority of homeopathy as a method of treatment, and parents who have once experienced the past benefits it has conferred on childhood will never go back to the nauseous and often too powerful medicine of the old school.”

Dr. Day's remarks on homeopathy are clear and to the point. Only we wish his practice had been of a somewhat robuster type. We notice a large proportion of his prescriptions are those of alternated remedies—as if one could not be trusted to do its work unaided. Also we think allopathic readers will not discover any great difference between Dr. Day's treatment for affections manifesting on the skin and their own. This ought not to be so. But perhaps Dr. Day has sought to provide a gentle slope for the allopathic mother to rise to the heights of homeopathy. Dr. Day does not deal with the pre-natal treatment of hereditary tendencies, or with the constitutional cure of such after birth. To our thinking this is the most important period of homeopathic medication in children, and the one most neglected by homeopaths.

But in spite of our strictures we have the greatest pleasure in commending the book to all mothers and guardians. We heartily welcome Dr. Day, who is physician for diseases of children to the London Homeopathic Hospital, to the ranks of medical authors.

WHY STUDENTS OF MEDICINE SHOULD SELECT THE HOMEOPATHIC SCHOOL.*

THE *Medical Century* recently offered prizes for essays on the subject given above. This pamphlet contains the successful essays. Dr. McConkey's essay secured the first, Dr. Baldwin's the second, and a writer whose name is not given the third. America is to be congratulated on the fact that it is possible to write on such a subject in that country. Here it is not possible—students have no choice! May the British Homeopathic Association make the choice possible!

THE KALEIDOSCOPIIC MIND OF CHILDHOOD.†

THIS pamphlet consists of a paper read before the British Child-Study Association (Liverpool Branch) in Liverpool University, February 19, 1904. It is an interesting contribution to the subject it treats of, and is full of amusing anecdotes.

RHEUMATISM AND SCIATICA.‡

A NEW edition of this work having been called for, we will quote the preface:—

“The call for a new edition of my treatise on Rheumatism and Sciatica has enabled me to put it through a complete revision and add a number of new illustrations without materially altering the scope of the work.

“Prolonged experience confirms me in the opinion that rheumatism may be, and very frequently is, the outcome of the chief chronic dyscrasie, and chief among them the consumptive diathesis. In a number of cases I have found a consumptive family history in patients prone to rheumatic fever; and chronic rheumatism is often met with in patients whose relatives have died of phthisis. Almost the same may be said of the cancerous diathesis.

“Patients whose parents have died of cancer often have rheumatism

* *Why Students of Medicine should select the Homeopathic School.* By Thomas E. McConkey, M.D., San Francisco, E. V. Baldwin, M.D., Amboy, Ind., and Another.

† *The Kaleidoscopic Mind of Childhood.* By Dr. J. Murray Moore. Liverpool Bookselling Co., 70, Lord Street, Liverpool. 6d. 1904.

‡ *Rheumatism and Sciatica.* By John H. Clarke, M.D. Second edition, revised and enlarged. London: James Epps & Co., 170, Piccadilly, and 48, Threadneedle Street. Cloth, 2s. 6d. 1904.

in some form or other. If this state is properly treated by specific remedies, the tendency may be cured; if it is not properly treated, the chances are that cancer will sooner or later develop.

"One definite case of this has come under my observation. A married lady of cancerous family history was a great sufferer from rheumatism. On one occasion the pain settled in the right hip, and the doctor in attendance, an allopath, prescribed one large dose of *Salicylate of Soda* which almost immediately removed the pain, and it never returned. But very soon something else appeared in the shape of a lump on the left axilla. This was cancer. I do not wish to blame any one for this, but merely to state the sequence. The occasion was a desperate one, as the pains were of very great severity when the dose was prescribed, and the doctor who prescribed it was compelled to do the best he knew. But the rheumatism in this lady's case was in reality a pre-tumour stage of cancer, and might have been treated as such. The sudden arresting of the rheumatic expression of this constitutional state rapidly determined the tumour formation.

"It is not within the province of the present volume to deal with this subject at length—this would require a treatise to itself. If I can find the time I may one day write a book on it.

"Among the additional matter to be found in the present edition is a recent case of *Salicylic* poisoning, and some general remarks on the use of Salicin remedies in homeopathic practice."

"JOHN H. CLARKE.

"8, Bolton Street, Piccadilly, London, W."

NOTIFICATION.

. Under this heading we shall be happy to insert notices of appointments, changes of address, &c., and holiday arrangements.

DR. F. G. STACEY, *Sheffield*, has removed from No. 711 to No. 719, Ecclesall Road, Hunter's Bar, Sheffield.

Obituary.

MR. ALFRED H. WADDINGTON.

WE learn with great regret that Mr. Alfred H. Waddington, the well-known homeopathic chemist of Bradford, has passed away at the early age of 44. The *Pharmaceutical Journal*, May 28th, gives a long account of

the late Mr. Waddington, from which we extract the following:—

“ALFRED H. WADDINGTON.

“We record with great regret the death of Mr. Alfred Henry Waddington, homeopathic chemist, of Darley Street, Bradford, which occurred on Wednesday last, May 25th, from pneumonia, after three days' illness. Mr. Waddington has for years past been, not only one of the leaders in pharmaceutical affairs in the West Riding of Yorkshire, but has also figured with considerable prominence in the local affairs of Bradford. Mr. Waddington was born in Hull of a Quaker family in 1860, was educated at Ackworth School, and went to Bradford to act as assistant to his brother, Dr. C. E. Waddington, who established the business in Darley Street. When the brother took his medical degree he transferred the chemist's business to Mr. Waddington, who had qualified in 1887, and he has since carried on the concern with very marked success. He became connected with the Bradford Chemists' Association at an early period in its history, and soon became prominent by reason of his energy and ability in discussing pharmaceutical politics. He was always a keen debater, and quick to see a point and deal with it. At times the force and pungency of his criticism excited more hostility than would have been displayed if the true inwardness of his character had been better known. For many years he acted as Divisional and Local Secretary to the Pharmaceutical Society for the Central Division of Bradford, and in that capacity had done much service of the most useful kind in the interests of registered chemists, in connection with the Benevolent Fund, and in other directions. He was directly instrumental in getting Mr. J. L. Wanklyn, M.P., to interest himself in the Pharmacy Bill, and his personality was so much appreciated that at one time he was regarded as a probable candidate for the Pharmaceutical Council, but he declared that he had no ambition in that direction. But Mr. Waddington was a frequent contributor on political matters to the *Pharmaceutical Journal*, and his influence was thus widespread. His loss will be deeply mourned by members of the craft all over the West Riding of Yorkshire. Mr. Waddington found time for many other interests. He was for many years local secretary to the Society for the Prevention of Cruelty to Animals, and a feature at his shop door was a drinking trough for dogs. He was prominent, too, in the affairs of the Society of Friends. To him was chiefly due the organisation of the May Day parades, and he worked most assiduously also in organising a trades' procession in connection with the Coronation celebrations in Bradford.”

GENERAL CORRESPONDENCE.

EUCALYPTUS IN CORYZA.

To the Editor of THE HOMEOPATHIC WORLD.

DEAR SIR,—In the HOMEOPATHIC WORLD for June I see that Dr. Lambert gives some *Eucalyptus* verifications

in his "Materia Medica Miscellany." Having had a case under my observation in which *Eucalyptus* proved of marked benefit, I venture to send you a few notes of the case in the hope that they may prove of interest to readers of the HOMEOPATHIC WORLD:—

Mrs. A. E., aged 35, consulted me first on September 3rd, 1902, for constantly-recurring "cold in the head." The symptoms came on very suddenly and apparently without cause. They were the usual symptoms of a severe attack of coryza—copious and continuous nasal discharge, sometimes thin, and sometimes thick and muco-purulent, frontal headache, &c., &c. An attack always followed nervous excitement or worry. A peculiar aversion to *Eucalyptus* was manifested by the patient, insomuch that the faintest whiff of *Eucalyptus* would bring on a most violent attack of "cold in the head." After trying the various homeopathic remedies for the condition with but indifferent success, I was led by the above symptoms to give *Eucalyptus* a trial.

I ordered *Eucalyptus* 6c in five-grain doses twice daily, and after the second dose there was improvement. In three weeks the patient was entirely free from the coryza, which, with very short intervals, has troubled her for nearly thirty years. Since then returning symptoms have been speedily checked by one or two five-grain powders of *Eucalyptus* 6c.

I remain,

Yours faithfully,

F. G. STACEY, B.A., M.B. (Camb.), &c.

719, Ecclesall Road, Hunter's Bar,
Sheffield, June 15, 1904.

SOCIETY FOR THE PREVENTION OF PREMATURE BURIAL.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—As many people fear being buried alive, will you kindly allow me, through the columns of your paper, to call the attention of your readers to the above-named Society, the existence of which many of them may not be aware of?

Full particulars of its methods and aims will be supplied gratis on application to—

LEONARD GUNN, Esq.,
17, Lamb's Conduit Street,
London, W.C.

I enclose my card and remain,

Yours truly,
S. G.

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

HOURS OF ATTENDANCE :—Medical (In-patients, 9.30; Out-patients, 2.0), Daily; Surgical, Monday, 2.0; and Saturdays, 9 a.m.; Thursdays, 10.0 a.m.; Diseases of Women, Tuesdays, Wednesdays, and Fridays, 2.0; Diseases of Skin, Thursdays, 2.0; Diseases of the Eye, Mondays and Thursdays, 2.0; Diseases of the Throat and Ear, Wednesdays, 2.0; and Saturdays, 9 a.m.; Diseases of Children, Mondays and Thursdays, 9.0 a.m.; Operations, Tuesdays, 2.30; Diseases of the Nervous System, Thursdays, 2 p.m.; Electrical Cases, Wednesdays, 9.0 a.m.

MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Archives of the Middlesex Hospital.** Vol. 2. Second Report from the Cancer Research Laboratories. Edit. by A. G. R. Foulerton. Roy. 8vo, sd. (Macmillan. Net, 5s.)
- Ballantyne (J. W.).** Essentials of Obstetrics. 8vo, pp. 242. (W. Green. Net, 5s.)
- Boucher (Crabb).** The Violet-Leaf Treatment. Its Value and Efficacy. 12mo, sd. (Simpkin. 1s.)
- Closure of Laparotomy Wounds (The) as Practised in Germany.** Edit. by W. H. Swaffield. 8vo. (Churchill. Net, 2s. 6d.)
- French (Herbert).** Medical Laboratory Methods and Tests. Cr. 8vo, pp. 160. (Baillière. Net, 3s. 6d.)
- Galabin (Alfred Lewis).** A Manual of Midwifery. Illust. 6th ed. 8vo, pp. 940. (Churchill. Net, 14s.)
- Gatchell (Ch.).** Pocket Book of Homeopathic Medical Practice, &c. 5th ed. Fcap. 8vo, full lr., pp. 394. (Homeo. Pub. Co. Net, 10s. 6d.)
- Gayton (W.).** The Value of Vaccination. 2nd ed. 8vo, sd. (H. Kimpton. 1s.)
- Gould (George M.).** A Pocket Medical Dictionary. Giving the Pronunciation and Definition of the Principal Words used in Medicine and the Collateral Sciences. New 4th ed., revised and enlarged. 12mo. (H. K. Lewis. Net, 5s.)
- Hahnemann (Samuel).** The Chronic Diseases; their Peculiar Nature and their Homeopathic Cure (theoretical part only). Translated from the Second German edition of 1835. By L. H. Tafel. Pp. 269, Cloth. (Homeo. Pub. Co. Net, 7s. 6d.)
- Kraepelin (Emil).** Lectures on Clinical Psychiatry. Revised by Thos. Johnstone. 8vo. (Baillière. Net, 10s. 6d.)
- Mackenzie (W. Leslie) and Matthew (Edwin).** The Medical Inspection of School Children. A Text-Book for Medical Officers of Schools Medical Officers of Health, School Managers, and Teachers. 8vo, pp. xviii-455. (W. Hodge, Edinburgh. Net, 10s. 6d.)
- Martindale (Harrison) and Westcott (Wynn).** The Extra Pharmacopoeia. Revised ed. 12mo, lr. (H. K. Lewis. Net, 9s. 6d.)
- Parsons (J. Herbert).** The Pathology of the Eye. Vol. I. Histology. Part I. Roy. 8vo. pp. 404. (Hodder and Stoughton. Net, 15s.)
- Riddell (J. Scott).** A Manual of Ambulance. 5th ed., thoroughly revised and enlarged. Illust. Cr. 8vo, pp. 244. (C. Griffin. 4s.)
- Starr (M. Allen).** Organic Nervous Diseases. 8vo. (Baillière, Tindall and Cox. Net, 25s.)
- Thomson (Alexis) and Miles (Alexander).** Manual of Surgery. Vol. 2. Regional Surgery. Illust. Cr. 8vo, pp. 740. (Pentland. Net, 10s. 6d.)
- Where Shall I Send My Patient? Cr. 8vo, pp. 279. (Frampton, Bourne-mouth).**

TO CONTRIBUTORS AND CORRESPONDENTS.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 8, *Bolton Street, Piccadilly, W.*

Letters to the Editor requiring personal reply should be accompanied by stamped directed envelope.

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CORRESPONDENTS.

Dr. Dyce-Brown, London.—Dr. C. S. Mack, La Porte, Indiana, U.S.A.—Dr. Stacey, Sheffield.—Mr. Wyborn, London.—Dr. Proctor, Birkenhead.—Dr. Jagielski, London.—Dr. Ridpath, Sunderland.—Dr. Beale, London.

BOOKS AND JOURNALS
RECEIVED.

Hom. Review.—Zoophilist.—Mind.—Revist. Hom.—Med. Times.—Allg. Hom. Zeit.—H. Monatsblätter.—The Chironian.—La Propaganda Homeopatica.—Maanedsk. f. H.—H. Maandblad.—La Homeopatia.—Ind. Homeopathic Review.—Hom. Envoy.—The Individualist.—Medical Century.—Rev. Hom. Française.—H. Recorder.—Wjestnik H. Med.—N.A.J. of H.—Clinique.—New Eng. Med. Gaz.—L'Art Médical.—Amer.

Medical Monthly.—University Homeopathic Observer.—H. J. Obst.—Med. Adv.—Annaes de Med. Hom.—Amer. Phys.—Hom. Eye, Ear, and Throat J.—Hahne-mannian Mon.—Pacif. Coast Jour. of H.—Bromley District Times.—Report Cheltenham Homeopathic Dispensary.—Report Hahne-mann's Hospital and Dispensaries, Bristol.—*Stellaria media*, a proving.—Why Students of Medicine should Select the Homeopathic School.—Decapsulation of the Kidneys in Chronic Bright's Disease.—Syphilitic Affections of the Nose and Throat. By Irving Townsend, M.D.—Childhood in Health and Sickness. By J. Roberson Day, M.D.

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THE
HOMEOPATHIC WORLD.

AUGUST 1, 1904.

SIRCAR.

THE passing of our late venerable contemporary, Dr. MAHENDRA LAL SIRCAR, has not, we are glad to see, caused the suspension of his excellent magazine, the *Calcutta Medical Journal*. Dr. AMRITA LAL SIRCAR, who succeeds his father in the editorship, has our cordial good wishes in his new career. A most interesting biography of Dr. MAHENDRA LAL SIRCAR fitly occupies the principal place in the first number edited by the son, and the number also contains a striking portrait of the subject of the memoir.

The life-story is in every way a remarkable one, and reflects the greatest credit on SIRCAR himself, and on the British rule in India which made his career possible. There is one point which the sketch brings out which we have not seen so clearly put before, and which gives the key to much of SIRCAR'S activity. He was one of the people—a peasant of peasant stock—and he was a missionary to his people; but a missionary who saw in the spread of knowledge the only possible salvation of his people from their belief in charms, incantations, and superhuman faculties. SIRCAR inculcated as a remedy for all this the study of natural laws. It was SIRCAR'S devotion to science, his absolute loyalty to demonstrated fact and proved law, that led him to accept homeopathy in the face of severe opposition and persecution. In spite of his un-

orthodoxy in medicine, SIRCAR won the highest respect of the authorities. In 1883, the Government of India, in recognition of his services in the cause of Science, decorated him with the insignia of C.I.E. (Companionship of the Indian Empire). In 1898 the Calcutta University conferred on him its highest degree, that of Honorary Doctor in the Faculty of Law. The Chancellor, Lord ELGIN, in conferring the degree, congratulated the University as well as Dr. MAHENDRA LAL SIRCAR on the occasion. The Vice-Chancellor, Mr. JUSTICE TREVELYAN, added this:—

“The degree which has been conferred to-day upon Dr. MAHENDRA LAL SIRCAR was unquestionably his due. The help which he has given to the better knowledge of science in Bengal by the formation and maintenance of the Indian Association for the Cultivation of Science of itself deserved this recognition. In conferring this degree upon him we are not merely honouring his labours in the cause of science, we are also endeavouring to repay to some extent the debt which we owe him. For many years, in spite of the many calls of his professional work, he devoted much of his time to our service. For ten successive years he was a member of our Syndicate, and frequently acted as its president during the absence of the Vice-Chancellor. He was also for four successive years President of the Faraday Society.”

Though honoured by the powers that be, SIRCAR was no time-server. He was a fearless critic of the Indian Government when it seemed to him to be acting against sound principles. At the same time he was not by any means of that order of patriot whose sole principle seems to be a determination to oppose all government.

We are apt to associate India with ideas of the subjection of women, and it is therefore interesting to know the sentiments of a man like SIRCAR on this topic. “In matters of social advancement and reform,” says his biographer, “his views were pronouncedly liberal, and had their root in his deep and innate regard for woman as the co-equal of man. And that regard found its practical embodiment in the Rajkumari Leper Asylum.” This asylum was founded by him in memory of his wife,

and in his speech on the occasion of the laying of the foundation-stone he expressed himself in these remarkable words :—

“ My devotion to woman as the guardian angel of infant humanity, my reverence for woman as our first preceptor, and my love for woman as the sweetener of life, have not been derived from Western education, great as its influence has been in otherwise modelling my character, nor from our own *Shastras*. They are inherent in me, and the great wonder with me is how any man can be void of them.”

SIRCAR had a remarkable command over the English language, and was one of the most eloquent speakers in India. An uncompromising opponent of bigotry, intolerance, and superstition, he was naturally set down as an atheist by those whose religion is chiefly made up of these. But SIRCAR was nothing of the kind. With him Science and Religion were one. He once gave a lecture on “ The Moral Influence of Physical Science,” in which he described religion as he knew it, as an absolute faith in a Supreme Creator and Moral Governor of the Universe, and in the endeavour to live and act in accordance with this faith.

LECITHIN.—Henri Labbé (*Revue de Thérapeutique*, November 1, 1903) writes of the therapeutic uses of lecithin extracted from the brain or from eggs. He discusses at some length the physiological properties of Lecithin, its effect upon metabolism, weight, appetite, urinary changes, osteogenesis and hematopoietic processes, nerve elements, and blood.

Therapeutically, it has been found of great value in rachitis when taken in place of the phosphates; in neurasthenia and anemia, increasing the appetite, restoring strength, and improving the general condition; in phosphaturia it can be substituted for the phosphates; Lancereaux and Paulesco have found it beneficial in diabetes, although it has no specific action on the production of sugar; in cachexias and in convalescence it restores strength; in some cases it acts upon the heart when digitalis produces no effect, and it increases the flow of urine. In children it seems to be useful only in cases of lymphatism, while in the aged it overcomes adynamia, strengthens the intellectual powers, and improves the general condition.

Claude and A. Zaky have reported marked general improvement in cases of tuberculosis from the exhibition of this agent.—*Medical Review of Reviews (Therapist)*.

NEWS AND NOTES.

DR. BURFORD'S ADDRESS.

THE Presidential Address delivered by Dr. Burford before the Homeopathic Congress is of much more importance at the present juncture than such Addresses usually are. In our present issue we give the first instalment of the Address, and it will be found how great minds in the fields of philosophy and logic have arrived at the same conclusion which Hahnemann reached. Dr. Burford also shows how the recent discoveries relating to Radium reveal the powers of infinitesimals to other tests besides the physiological one.

THE GARDEN FETE.

IN another part of our present issue we give an account of the highly successful Fête given at the Botanic Gardens on July 7th. The Ladies' Committee of the British Homeopathic Association are to be congratulated on this important fact: they succeeded in bringing together the largest gathering which has ever assembled with homeopathy as its central interest.

THE BURNETT MEMORIAL.

MR. CHARLES STEWART has given a second donation of £5 to the Burnett Fund. We have to thank our contemporaries for calling attention to the existence of the Fund, and in particular we thank the *North American Journal of Homeopathy* for this kindly notice of our editorial of May:—

"AN APPROPRIATE BIRTHDAY GIFT.

"The May number of the *BRITISH HOMEOPATHIC WORLD* completes its nineteenth year under the editorship of John Henry Clarke, M.D. Dr. Clarke is endeavouring to raise, in honour of his twentieth year in that capacity, the sum of \$10,000 for the founding of a professorship in connection with the British Homeopathic Association in memory of Dr. James Compton Burnett. The Fund will be devoted particularly to the spread of therapeutic enlightenment. It is a hopeful sign to note this sign of progress in the British Homeopathic

Association. And it is most fitting that the HOMEOPATHIC WORLD should strive for this endowment. It is now in the thirty-ninth year of its existence, and was the journal of Dr. Burnett. It would be doubly appropriate if Dr. Clarke could celebrate the twentieth year of his editorship, and the *World* the fortieth year of its existence, by such a tribute to such a man. Dr. Burnett had a master knowledge of drug-action, it is fitting that his memorial be devoted to the spreading of this science. About \$2,700 has already been pledged to this Fund. Subscriptions from any who may be interested may be sent to Mrs. Helen Clarke, 8, Bolton Street, London, W."

In a review of *The Life and Work of Dr. Burnett*, Dr. Frank Kraft, of the *American Physician*, says: "We bespeak a hearty response, first in the purchase of this little book—of itself worth many times the trifling cost—and an additional largess towards the very proper, nay, noble monument designed to perpetuate the memory of that genial, whole-souled man and homeopath, J. Compton Burnett."

HOMEOPATHY AND THE PUBLIC PRESS.

WE are glad to see that homeopathy and its founder are again becoming a matter of popular interest. The following fairly accurate sketch appeared in *Lloyd's Weekly Newspaper* of June 26th :—

"THE FOUNDER OF HOMEOPATHY.

"'A prodigy of philosophy and learning' is Jean Paul Richter's description of Samuel Hahnemann. Born in Saxony on April 10, 1755, he was the son of a painter of the ware known as Dresden china. His father intended him to follow the same occupation, but the boy displayed so ardent a love of letters that the head master gave him a free education. When twenty he went to Leipsic, where he maintained himself by translating medical works out of Latin, French, and English, into German. While thus engaged he was much struck by the unsatisfactory works on medicine. By his industry and frugality he saved money enough to visit Vienna, where under Dr. Querin he continued his studies, and became a doctor. After many vicissitudes of fortune he settled in Dresden, and for some time had the direction of a large hospital. While translating Cullen's *Materia Medica* from English into German, the contradictory accounts of the properties of Peruvian bark attracted Hahnemann's attention. After much reflection and many experiments, he became convinced of the truth of the principle, *similia similibus curantur*. In 1810 he published his great work entitled *Organon of Medicine* which has been translated into all European languages, as well as into Arabic. In this book he fully expounded his new

system, which he called Homeopathy, and founded a school at Leipsic, where he was surrounded by a host of admirers. As his system involved the administration of medicines in doses infinitely minute, there was no longer any need of the apothecary. In consequence the Apothecaries' Company secured an Act forbidding physicians to dispense their own medicines, and Hahnemann was obliged to leave Leipsic. The Grand Duke of Anhalt Kothen, however, appointed him his physician, and at Kothen he resided till 1835, when he married a second time a French lady of considerable means, and went to live in Paris, where he enjoyed a great reputation till his death on July 2, 1843."

We may remind our readers that April 10th next year marks the 150th anniversary of Hahnemann's birth. This must not be allowed to pass without some great public demonstration in which all homeopaths, lay and professional, shall be asked to unite.

SLANDER PUNISHED.

ON the 31st of May Dr. Spatz, who libelled Dr. Mende, of Zurich, in the *Münchener Medizinische Wochenschrift*, in reference to the appointment of the latter to the chair of Homeopathy in Leyden, was fined at Munich 150 marks. Dr. Spatz had described Dr. Mende by the polite term, "kurpfuscher," which may be translated, "treatment-botcher." We congratulate Dr. Mende, and hope that Dr. Spatz may in future learn better manners.

NEW YORK HOMEOPATHIC MEDICAL COLLEGE.

THE *Chironian* of June, 1904, is the "Commencement Number," and on its appearance we heartily congratulate Dr. Harvey King, the dean of the School, and the students and graduates and all others concerned. But we are particularly glad to see in its pages the reappearance of Dr. George G. Shelton, Emeritus Professor of *Materia Medica*, apparently full of his old fire after his long rest. The faculty of *Materia Medica* consists, in addition to Dr. Shelton, of Dr. Paul Allen, who is Professor of *Materia Medica* and head of the department, three other professors, of whom one is Dr. Nash, of "Leaders" fame, one lecturer, and one instructor; so that there is no lack of *materia medica* teaching in New York.

A NEW HOMEOPATHIC HOSPITAL FOR TURIN.

WE learn from the *Revue Homœopathique Française* and *L'Art Médical* that Turin has a new homeopathic hospital. It was inaugurated on November 16th last with a great deal of pomp and circumstance, presided over by Monsignor Spandre, coadjutor of the Bishop of Turin, and *curé* of the parish. With him were associated Dr. Stefano Balp, representing the Préfet; Dr. Camillo Zacconis, member of the Council of Health, and representing the president of the Municipal Council; Dr. Luigi Pagliani, doyen of the faculty of medicine; Dr. Gerolamo Mo, president of the Order of Physicians; Dr. César Lombroso, professor of legal medicine and psychiatry, and well known all over the world for his work on criminology; Dr. Luigi Cavallerleone, colonel-physician. Dr. Zacconis, speaking in the name of the municipality, said:—

“If science establishes theoretic differences between diverse methods of healing, the laity care nothing for these differences, but only take note of the good they receive from them, and this is why the city of Turin cannot allow the pious work which has just been so worthily presented to you to enlarge without expressing its sentiments of recognition which not only the Administration but the whole population owes to it. We have a golden book in churches in which we inscribe the names of the benefactors of the city. I am happy to have the honour of representing here the municipality, to declare that we wish to inscribe in it the names of the founders of this hospital, of Dr. Bonino, who directs it with so much self-denial, and of all those who co-operate with him in this beneficent work. At the present time, since the hospital question has become one of so great importance for our city, we ought to appreciate all the more the utility of the building which we inaugurate this morning.”

Italy is certainly moving on! Imagine the president and council of the Royal College of Physicians and the medical officer to the London County Council assisting at a similar function in London! In the case of Dr. Bonino the official congratulations were all the more *piquant* because they were made on the forty-sixth anniversary of his doctorate, granted to him at the second time of asking. Dr. Bonino's first thesis—like Dr. Burnett's—was rejected by the heads of the profession because it smacked too much of homeopathy! Truly the world moves—in some parts it even revolves!

CLINICAL REPERTORY.

THE *Clinical Repertory* to the *Dictionary of Practical Materia Medica* is now in the last stages of preparation before being given to the public. Although compiled expressly for the *Dictionary*, it will be available for use by the possessor of *any* *Materia Medica*. It is intended as a *first-line repertory*, in which the prescriber will be able to find his remedy in a large proportion of cases. Although named *clinical*, it is also to a certain extent symptomatic, but its use will not obviate the necessity of having a complete symptom-repertory to refer to. The *Repertory* will also afford an opportunity for its users to jot down in a place where they will always be discoverable afterwards bits of practice from everyday experience and other bits gleaned from journals and books. Another use the *Repertory* will fulfil is in the study of *Materia Medica*. It will enable the student to compare and test any remedy he may be studying on any point of its clinical relationships. It is hoped and believed that that the *Repertory* will materially lighten the labour of homeopathic practitioners, and render the *Dictionary* more accessible and practically useful than even it is at present.

MICROBES NECESSARY FOR DIGESTION.

THE following startling announcement is from the *Daily Telegraph* of July 13th :—

“BENEVOLENT MICROBES.

“Professor Metchnikoff has made frequent references to the existence of bacteria which are not only harmless but beneficial, and, in fact, essential to the human body. A young physician, Dr. Charrin, has just effected some curious experiments on the subject, the results of which have been communicated to the Academy of Science by Professor Bouchard. Some rabbits were fed entirely on vegetables which had been sterilised by the most thorough processes known. Other animals of the same species were given the same food. In this case, however, the vegetables, after having been sterilised, were impregnated with bacilli, a broth in which the bacteria had been artificially cultivated being sprinkled over them. Instead of dying from one or more of many possible microbial infections, this lot of rabbits flourished and grew fat. The others, on the contrary, who absorbed no bacteria whatever with their food, soon perished of enteric affections produced by non-assimilation of their anti-septically treated food. Dr. Charrin's inference is that, as regards the human species, the

theory that the freer food is from bacteria the better is erroneous. On the contrary, certain bacilli are indispensable to the digestive functions. Completely sterilised nourishment is, accordingly, dangerous, as, by slaying all your microbes, you may kill yourself off likewise. The aim of science in this respect must be to find an effectual method of distinguishing our friends from our enemies in the bacterial world, and then to exterminate the latter while tenderly fostering the former."

We shall next be told that microbes are necessary for the healing of wounds, and then aseptic surgery will go the way antiseptic surgery has already gone.

EUPATORIUM FOR HICCOUGH.—Eupatorium, or the common boneset, the *Medical Summary* says, is a very excellent remedy in intractable hiccough, curing when all other remedies have failed.—*Med. Times*.

ACONITE-POISONING.—At Halifax on March 11, Arthur Graham, a wealthy Western State rancher, settled in Smith's Cove, Digby, died as the result of drinking aconite liniment. He was heard to get up early and go to an adjoining room, after which he entered the room occupied by his valet, telling him to destroy his papers and not tell any one. He then dropped the box to the floor, and before medical aid could be obtained he was dead.—At Montreal on March 13, Raoul Moisan, agent, thirty-one years of age, died at the residence of Alfred Berthe, chemist, 348, St. Denis Street, from the effects of an overdose of a stimulant taken two hours previously in a drug-store in St. Lawrence Street. He, with his brother, Sylvia Moisan, druggist, Sherbrooke Street, and Mr. Berthe, was out walking when Raoul complained of feeling ill. His brother suggested that they should all go to his drug-store in St. Lawrence Street to get a stimulant for Raoul, and something that would give them an appetite for dinner. The drink was served to them as directed, and they walked home. After dinner Raoul Moisan complained of severe pain, and went to his friend Berthe to get something to relieve the pain. When he reached Berthe's house he could hardly walk. Berthe had already complained of severe pains in the stomach, but he did not think at the time that it was from the effects of the drink they had taken in the drug-store. When Moisan entered the house and fell unconscious in the hall he knew at once that they had been poisoned. Dr. Warren was summoned, and tried for half an hour to restore Moisan to consciousness, but his efforts were of no avail, and Moisan died within an hour. Dr. Warren then devoted his time to Berthe, as he had also become unconscious from the effects of the drug. At six o'clock Berthe regained consciousness, and shortly afterwards was reported out of danger. Sylvia Moisan also complained of the effects of the drug, but it did not affect him so seriously as it did the others. Investigation has brought out the fact that an error was made in compounding the stimulant-draught, aconite having been used.—*Chemist and Druggist*.

ORIGINAL COMMUNICATIONS.

THE LAW OF SIMILARS IN RELATION TO
SCIENCE, POLITICS, CULTURE.*

By GEORGE BURFORD, M.B.,
Senior Physician for Diseases of Women to the London
Homeopathic Hospital.

PART I.—SCIENCE.

“The art of curing will then (*i.e.*, with a perfected materia medica) approach to the same degree of certainty as the science of mathematics.”—HAHNEMANN (*Organon*).

§ I.—In the name and by the authority of the British Homeopathic Congress, I welcome you to the public assembly of this its fifty-fifth Annual Session. By a wise catholicity, the rule of this Congress is to invite to the opening address those, both professional and lay, who are interested in the subject here falling to be considered. To the electorate I next convey my due appreciation of the great honour received at their hands in being designated their official head at this metropolitan gathering. This honour, gracefully conferred, was none of my own seeking, and I am deeply sensible of the appreciation conveyed by their suffrages. But this high office, like the others of this Congress, carries duties as well as honours, and I anticipate that the session will be actually pleasant and long memorable to you, auguring this from the able administration of their offices by my colleagues, and from the valuable material presented by the learned contributors of the papers for your discussion. Perhaps as a contributor also, though one whose effusion it is not deemed requisite to discuss, I may in a distant and halting sense add to your appreciation of the occasion.

THE BRITISH HOMEOPATHIC CONGRESS: ITS FOUNDATION
AND FUNCTIONS.

§ II.—Our Congress is by no means a thing of yesterday, and its necessity and its importance are writ large in our professional annals. Fifty-four years ago a band of thinkers, imbued with that spirit that is immortal in

* Being the Presidential Address delivered before the British Homeopathic Congress at the Session of 1904.

man, the thirst for new truth, met for the first time in the provinces to confer on the topic of homeopathy. It was the era of congresses and peripatetic associations; and when I say that the members arrived mostly by stage-coach, you will gather what a respectable antiquity invests the foundation of this Congress. Its succession, carried on through an unbroken line of more than half a century, is in its way apostolic; and then, as now, it was clear that those of one mind should not forsake the assembling of themselves together. For such confraternities the whole is as great as its parts only when its parts come together. Nay, a great ecclesiastic has shown how in some cases the whole may be greater than the sum of its parts; for as the inspired product of a great master of music is much more than the sum of the notes, and the power of an epic is vastly greater than the sum of the separate sentences, so does our assembling connote much more than the aggregate units, you and I, who constitute its number. The living sense of comradeship, the enhanced moral effect of meeting with one mind, the mysterious spiritual stimulus derived from human assemblage—these are but thinly represented, or represented not at all, by a mere paper register of adherents. These, then, are the higher functions of this Congress, which we thus congregating are to profit by: these are the underlying influences which permeate the tougher framework of our intellectual views. Like Antæus of old, who, when weakened, descending, touched his mother earth, renewing his vigour from the contact, so we in fraternal assemblage invigorate the springs of action from the contact of personalities. *Alere flamman* was the old Roman injunction; but for the lamp to shine with power it requires atmosphere as well as illuminant.

This, however, does not exhaust the specific functions of our Congress. It not only renews the vitality that streams from personal association: its rule of practice is further to be peripatetic. This is its missionary aspect: it represents the cult of homeopathy as national and generalised, and not a mere variety of specialism localised in a few self-contained areas without cohesion or vital connection. These external functions of our Congress are of equal importance with its internal doings. The incitement to a cultivated public interest in the vogue of homeopathy, the heightened local regard in its being and

doing that a provincial convocation engenders, the nationalising of our work, the strengthening of local homeopathic interests, the enhancement of local homeopathic activities—these are the collateral objects of our annual meeting. Particularly the latter functions are of special importance; and could we leave some permanent impress of our visits, such as the conversion of a Public Dispensary into a Cottage Hospital, or move the local interest to more effectually endow the Public Dispensary—really the out-patient department of a future hospital—it would be clear that our external as well as our internal duties had been well discharged. And I should not hesitate to place this collateral product in the hands of those men of light and leading, the permanent officials of our Congress.

§ III.—*Alle gute Dinge sind Drei*, says the familiar German proverb, and I have chosen the Law of Similars in its threefold aspect of Science, Politics, and Culture, or in its threefold relation to these, as the subject for this morning's prelection. In expounding this triple function of our law, I propose to consider the two latter elements, Politics and Culture, as governed by the authority and founded on the basis of the former part, that of Science.

“SIMILIA” AS SCIENCE: AN INDUCTIVE LAW.

§ IV. Captain and chief, then, of our triad, stands Science. “To the solid ground of Nature trusts the mind that builds for aye,” sings the great English poet of Nature. It is owing to the direct investigation of our department of Nature by observation and experiment, that we as homeopaths live, and move, and have our being. Archimedes in Syracuse discovering the law of specific gravities; Galileo reasoning on the cause of the swinging lamp in the Cathedral of Pisa; Newton following out the train of thought said to be initiated by the falling apple—these were not more epoch-making than Hahnemann when he experimented with Peruvian bark on the healthy body, and added a series of similar investigations to his initial inquiry. The upshot of this was the liberation of one of those—

“Truths which wake, to perish never.”

For the facts, demonstrated first by him, and since by others, are part of the order of Nature; they can be independently verified by any one at any time; observation and experiment may repeat them in whole or in part at will; and thus the full-

orbed medical science of the future must, as grounded on the realities of Nature, give place and power to the facts and law won by Hahnemann from darkness to light.

The homeopathic science of medicine is therefore an experimental science; and as observation and experiment are the twin methods of induction, we claim for *Similia* that it is an inductive generalisation of derivative, not empirical, value; one of the *axiomata media* of Bacon.

Now, much nebulous writing, the issue of much slack thinking, has spoiled much good paper in decrying the validity of *Similia* to rank as an induction. I will therefore put as lucidly as may be the steps of the logical proof of the inductive rank of *Similia* in medicine.

And I will begin by quoting Professor Bain, who, as Tyndall once remarked, "shines with a somewhat dry light." "That quinine," says Bain, "cures a fit of ague is an empirical law. It is an uniformity established by experience; we have reason to believe it is capable of being resolved into a more general uniformity. The present inability to resolve it is a disadvantage, not merely in a theoretical point of view, but as regards the application of the law in practice."

Now this is practically where Hahnemann began. Translating Cullen's *Materia Medica*, he was struck by the vague explanations given of this action of bark in ague. So he resolved to test the question himself, and on taking 4 drachms of the powdered bark, found to his intense surprise that the disturbance it caused to him, a healthy man, was similar to that it cured in the aguish sick person. Bark, in short, caused the symptoms of ague: it had long been known to cure them.

What was the meaning of this? Was the curative power of bark in ague due to the fact that it could reproduce the state in the healthy? Or was it due to some other cause?

"We must," says Bain, "somehow arrive at inductive generalisations, and next prove them when arrived at." Hahnemann, seeing that the most striking and singular element in this dual action was that of similarity, determined to collect proof for or against this. History was ransacked to procure evidence of this cause of cure; but, unmindful of these for the purpose of proof, Hahnemann made further experiments on himself with many other remedies (105 in all during his life), and in every instance satisfied himself of the pathological powers of a drug furnishing the index of its curative scope.

This was henceforth the *magnum opus* of Hahnemann's life, and the proofs accumulated thick and fast. *Belladonna* cures scarlatina; *Belladonna* produces symptoms perfectly indis-

tinguishable from those of the scarlatinal poison. *Camphor* cures cholera; the effects of *Camphor* on the healthy—the cramps, the dejecta, the collapse—reproduce with fidelity the true cholera symptoms. And so on through the whole gamut; *Phosphorus* in pneumonia, *Aconite* in fever, *Digitalis*, *Hyoscyamus*, *Hellebore*, *Veratrum*—they one and all presented the same correspondence. Tested and tried under all conditions of youth and age, of sex and temperament, of climate, race, and even species, in every instance without exception the parallelism holds, that as is their disease-producing power, so is their curative value.

“SIMILIA” AN INDUCTIVE LAW OF DERIVATIVE RANK.

§ V.—A higher uniformity had thus been established, and the ague-curing power of *Cinchona* proved to be a specific example of a more general law. Now again to the dry light of our logician. When, remarks Professor Bain, what was an empirical law has been resolved into more general uniformities, or into highest laws, it is termed a derivative law. The converting of an empirical law into a derivative law is a step gained both in scientific value and in practical facilities. He continues: “Until the day arrives when the operation of medicine is made derivative, the only progress possible is to obtain a more exact statement of the conditions attending the successful application of modes of treatment.” To accumulate empiricisms in fact! And this, pending a derivative law, is the only progress possible!

The stars in their courses, however, have fought for the human race, and in process of time this derivative law—this operation of medicines made derivative—so ardently desired by the great logician, was brought to the light of day. This inductive generalisation is tersely expressed in the phrase, “Likes are cured by likes,” and is the general scientific law of homeopathy.

THE DEDUCTIVE VERIFICATION OF “SIMILIA” BY HAHNEMANN.

§ VI.—But an inductive generalisation requires proof, and the most critical proof to which it can be subjected is to make it part of a deductive process, and thus to extend the generalisation to new unobserved cases, completing the proof by verification. The classical instance of this is, of course, Hahnemann’s advice as to the treatment of cholera. In 1831, when cholera first invaded Europe, Hahnemann, before he had seen a case, strongly advised the treatment of the epidemic with *Camphor*, as the issue of the homeopathic law. Quin, who was then in Moravia, carried out this advice,

and had a mortality of 27 out of 278 cases. Later, in Vienna, the same treatment was carried out by Fleischmann, and the report was that while two-thirds of those treated homeopathically recovered, two-thirds of those treated by the ordinary method in the other hospitals died.

So much for this classical instance of the deductive proof of Hahnemann's inductive generalisation. Of course, this is a proof we repeat every day; when in prescribing homeopathically for a diseased state we cure it. Each time we select the similar remedy for a morbid condition we employ a purely logical process—that of deduction—and we complete the process when we verify the accuracy of the selection by the cure of the patient. This, the assertion of the logical warrant for *Similia* and the logical correctness of its method of discovery and proof, will bear further review. It is a question for us of peculiar importance, for on the scientific interpretation of the facts of the case depended homeopathy a century ago, and depends homeopathy now.

In fashioning homeopathy as he did, it is scarcely probable that Hahnemann consciously devised a typical deductive instrument for the solution of the problem of the adjustment of remedies to diseased conditions. The great logicians of the Victorian era—and chiefly Mill—had not yet done their original work. But man often builds better than he knows; and it is much to the credit of Hahnemann's prescience that the method adopted by him is, according to John Stuart Mill, the only method logically valid for this inquiry. This point is so interesting historically, and so important scientifically to us, that I will present it in some detail.

MILL'S LOGIC AND THE METHOD OF HAHNEMANN.

§ VII.—Hahnemann, desiring to clear up the mist of uncertainty that surrounded the curative action of medicines, set himself to this problem. Mill specifically deals with the proper conduct of such a complicated inquiry, and states a case thus: "Let the subject of inquiry be," says he, "the conditions of health and disease in the human body . . . and let it be limited to this—Is, or is not, some particular medicament—mercury, for instance—a remedy for the given disease?"

This, substituting cinchona for mercury, might have been the question which Hahnemann propounded to himself as the basis of his work.

Mill proceeds to state that there are three methods—the method of pure observation, the method of experiment, and the deductive method—which here fall to be considered for the

purpose of this inquiry. (1) The method of simple observation, says he, would compare instances of recovery with instances of failure in the use of this drug in disease, to find cases which agreed in all other respects save that the drug had been administered in some and not in others.

This, known to logicians as the method of Agreement, is condemned in the sweeping sentence: "No conclusions of value in a subject of such intricacy were ever obtained in this way. The utmost that would result would be a vague general impression." This method, we know, Hahneman did not adopt; it was, in fact, the vague general impression that he desired to improve upon.

The second alternative method—the method of experiment—is that of the direct trial of the drug in different circumstances of disease, and comparing the results. That is, observing the action of the drug on the diseased body, and obtaining our knowledge of its uses in this way.

Mill, after dealing in detail with the difficulties of this procedure, makes the trenchant criticism that "Anything like a scientific use of the method of experiment in these complicated cases is therefore out of the question."

We all know that Hahnemann contended most powerfully against obtaining by experiment on the diseased body our knowledge of the virtues of a remedy.

Mill makes assurance doubly sure by finally stating that these two methods, for the study of this class of inquiry, are "*from the very nature of the case inefficient and illusory.*" But here I may venture, Are not these precisely the methods which the old school largely uses for the investigation of the remedial powers of drugs? Do not we hear *usque ad nauseam* about the curative value of a drug in a certain disease determined by giving it in one series of cases and omitting it in another series of cases, and comparing results? Do we not also hear *usque ad nauseam* about new drugs by the score being tried in all varieties of disease, to try and find what their curative properties are, and assigning their use on these grounds?

§ VIII.—But turning now to the third available method, that of deduction, the critical atmosphere lightens. "The case, it is evident," says Mill, "is naturally susceptible of the deductive method of investigation." And previously dealing with this type of problem, "The instrument of deduction alone is adequate to unravel the complexities proceeding from this source." Then later follows this luminous description: "If, for instance, we *try experiments with mercury upon a person in health, in order to ascertain the general laws of its action on the*

human body, and then reason from these laws to determine how it will act upon persons affected with a particular disease, this may be a really effective method, but this is *deduction*."

Could any words better describe the method which was fashioned for us by Hahnemann, and the facts with which it operates very largely contributed to by that untiring genius?

The chapter in Mill's *Logic* on Plurality of Causes and Intermixture of Effects is full of interest to every homeopath. The case stated and line of argument ensuing are definite and unmistakable. "Is, or is not, some particular medicament—mercury, for instance—a remedy for the given disease?"

Mill proceeds to lay down that there are only the Experimental and Deductive methods available for this inquiry; dismisses the various experimental methods with short shrift, declares the deductive method the only available procedure, and illustrates what the deductive method is by that pregnant paragraph: "If, for instance, we try experiments with a drug on a person in health in order to ascertain the general laws of its action on the human body, and then reason from these laws to determine how it will act upon persons affected with a particular disease, this may be a really effective method, but this is *deduction*."

Should, in future, any pamphleteer question the validity of *Similia* to rank as an inductive law, or cavil at the method of Hahnemann as unscientific, we may hand him over to the tender mercies of Bain and Mill, and cease to waste good powder on this type of critic.

THE IMPLIED EXISTENCE OF CO-RELATIVE LAWS. I.—THE LAW OF DOSE.

§ IX.—Thus, then, we have clarified our notions concerning the position of *Similia* in the sphere of science. The law of *Similia* is thus an inductive generalisation of derivative rank, capable of proof by the deductive method, but limited in application mainly by our lack of knowledge of its co-relative laws.

The chief of these co-relative laws still requiring elucidation is the law of the dose. The famous quip of Sir William Hamilton, "Has the practice of medicine made any progress since Hippocrates," may be paralleled by another, "Has the law of dose in homeopathy made material progress since Hahnemann?" That its investigation is of extreme complexity, the fact that a century's work has not cleared up the difficulty is eloquent. And the law of dose has many details to unify. There is the generalised necessity that the dosage must be relatively small; there is the established existence

of a critical point dividing cure of symptoms from increase of symptoms; there are the proven powers of ultra-material or infinitesimal dosage, as well as of tangible or material quantities; there are the observed idiosyncrasies of patients as regards small doses of the similar remedy; all these and many other matters require unification in the law of dose.

What we definitely require is that a generalisation on the points I have enumerated should be inductively established after a sufficient course of observation and experiment conducted *ad hoc*.

But *ars longa, vita brevis*; the formation of these subordinate laws may not be within the life-circle of the *patres conscripti* of this assembly. Meantime could not the original workers among us, following the example of the mathematicians, fashion something like an integral calculus, which should compound the data already obtained into some manageable formula for present-day use?

II.—THE LAW OF CRITERIA OF THE SIMILAR STATE.

§ X.—The next law, co-ordinate with *Similia*, of equal importance with the law of dose, but, like it, as yet having no formal statement, is the law defining the essentials of the similar state and its means of identification. In what does the similar state consist? Is it in its phenomena—its *tout ensemble* of manifestations, its symptom-assemblage—or in its underlying vital processes, the altered physico-chemical conditions of disease?

Mill tells us that the effect of causes are far more accessible to our study than the causes of effects; and Hahnemann expressed this view when he enjoined the study and classification of symptoms as the royal road to the similar remedy. But how to ensure real, and not merely superficial and spurious, similarity? This practical difficulty was met by insisting on the totality of the symptoms, which at least ensured a similarly acting cause. But Nature, careless of cure, does not often provide diseased action with an exact parallel in drug action. Frequently the parallelism is only partial, or diffuse and not definite, or difficult to isolate among cross-currents.

While the method indicated *a priori* by Mill, and warranted *a posteriori* by Hahnemann, will probably always hold the field, yet the many-sidedness of the similar state is full warrant for the various methods that have been developed by various observers. One postulates similarity as indicated by the clinical sequence of symptoms. Another sees in the revelations of the microscope and of the pathologist's scalpel the true basis for construing similarity. Here the best test is

regarded as the patient's interpretation of his own subjective symptoms. There the criteria are viewed as derived from the readings of instruments of precision. Others, again, regard the touchstone as that of totality of symptoms, simplified by keynotes.

Now all roads lead to Rome : true, with varying directness ; and a wider purview will unify all these methods of solving the problem, each possessing a certain value. To combine all these factors in a single instrument is the necessary and desirable object of those of our original workers who will evolve the law of the similar state.

Light may, however, unexpectedly dawn from another quarter. Recent research, and recent speculation founded on that research, have thrown much light on the *modus operandi* of the similar remedy. My colleague, Dr. Johnstone, has put the matter succinctly in the luminous conception that the similar remedy cures by stimulating the organism to produce an antitoxin similar to the toxin which is the morbid agent. Now this conception, derived from the study of sera and the facts of immunity, may go far to revolutionise our methods for the determination of the similar condition. This idea, modestly termed by the author a working hypothesis, is yet so exactly infitting to the facts as we know them, that I cannot but regard it as the most important philosophical speculation in homeopathy of the last half-century.

THE LAW OF PARTICULAR EQUATION.

§ XI.—Quite as requisite as either of the preceding considerations is a law enabling us to equate the peculiarities of the organism with the dose and selection of the remedy. Thus the personal equation of the patient—the co-efficient of the individual—is indispensable when such fine adjustments as work with similars are being effected. Academically we learn to prescribe for a theoretical personality in whom disease is grafted on to a usual state of health. Actually, specimens of this mean constitutional state are about as uncommon as that parallel device of the sociologist, the natural man. There are the differentiations effected by heredity ; there are the loadings of congenital or acquired defect ; there are the ever-acting perturbations of environment—strange latent twists given to the organism, and which, like the onion in Sydney Smith's salad, " unsuspected modify the whole." But all this has been worked out with the hand of a master by Dr. MacLachlan in his recent Wednesday Lecture under the auspices of the British Homeopathic Association ; and to this I would refer you for a detailed and practical consideration of perturbations on the side of the organism.

Now similar difficulties are not unknown to other sciences; yet these find adequate devices to meet their exigencies. Mathematicians have provided themselves with a recondite law of averages which suffices for their special necessities. Logicians, when dealing with a complication of causes, sum all up as a generalised cause, and consider this valid for logical process. Nothing would seem mere difficult to forecast than the span of human life, yet actuarial calculations are made upon this with the formulæ of applied science, sufficiently accurate for millions of money to depend on it. Nor is there any inherent impossibility for a "law of perturbations in correspondence" to be evolved; and it is to be hoped that some genius will present us some day with this law, or at least a formula for calculating these perturbations in correspondence, due to the personal equation.

Sic itur ad astra: and in this way a compact body of science may be built up round the central law of *Similia*—a system of facts sufficiently many-sided to deal with the daily problems of cure, while in touch with new research and absorbing the results of new investigations.

THE NECESSITY FOR RESEARCH INTO THESE CO-ORDINATE LAWS.

§ XII.—Newton in elaborating the laws of motion; John Dalton in working out the laws of chemical combination; Darwin in evolving the generalisation of evolution—each found the total round of his science traversed by multiple and co-ordinate laws, each of which required expression. Bacon himself points out with insight the necessity of building up a body of science by various secondary laws: "It is these," he said, "that principally constitute the value of a science." For our progress it is essential that these co-ordinate laws—the law of the dose, the law of the essential characters of the similar state, and the law of perturbations in the correspondence of the organism—I say it is absolutely essential that these subordinate laws, still embedded in the facts of nature, should be discovered.

THE LAW OF THE INTERMIXTURE OF EFFECTS AND THE LATINITY OF SIMILIA.

§ XIII.—The precise rendering, the formal statement of our law continues to attract attention; and many, especially classical scholars, have worked at variants of Hahnemann's classical formula.

Now when classical scholars differ, the appeal may well be to the dry light of science; and logic, the director of science, has provided for this and similar cases. The whole problem

comes into the category of the intermixture of effects, and Mill gives a specific instruction under this heading. "All laws of causation," he says, "in consequence of their liability to be counteracted, require to be stated in words affirmative of tendencies only, and not of actual results."

PROOF LED FOR "SIMILIA": I.—INTERNAL EVIDENCE.

II.—EXTERNAL EVIDENCE.

§ XIV.—The end of logic is proof; and we have now examined, with the help of the logician, the scientific basis of homeopathy, and indicated the lines of its future necessary development. It is in the foundation in the order of nature, in this verification by the daily facts of professional practice, in the potentialities of continuous growth, that the main evidence for homeopathy rests. What it is and what it can do are the provable, demonstrable elements in the case for homeopathy. One clear instance of cure, planned, like Hahnemann's prescription for cholera, on an inductive basis, and obtained by a deductive method—this case is worth more for logical proof than a whole series of indirect or speculative exertations. The most cogent and irrefragable proof that can be led for homeopathy lies in its body of facts, unified by a natural law, in the precision with which in uncomplicated cases means can be chosen and issues assured, in the practical results of restored health and lessened mortality bills; in a word, in the actual demonstrable facts which the sick-room, the hospital ward, the lunatic asylum furnish in profusion.

THE COLLATERAL EVIDENCE OF RADIO-ACTIVITY.

§ XV.—In the beginning of this twentieth century the civilised world, scientific and lay, has been electrified by the new facts disclosed in the province of radio-activity. These researches have furnished us with physical analogies of the most striking sort to the familiar facts of homeopathic practice. Listen to these as they are given by the most distinguished British investigator. These radio-active bodies have been ceaselessly pouring forth energy since their formation in the earth's crust—energy that has undergone no change in intensity or character with lapse of time, energy of motion which is 6^{10} times as great as that of a rifle bullet, yet accompanied by chemical change so slight that it would require the lapse of thousands of years for the balance or the spectroscope to detect what is revealed to a delicate electroscope after a second. Think of this—of ceaseless streams of energy evolved for an enormous time, yet with chemical disintegration so slight that chemical changes have never been observed by

direct chemical methods. Well may this authority say that the energy radiated from one of these substances is enormous compared with the matter involved, and that the effects observed in most cases are produced by an almost infinitesimal amount of intangible emanation.

Nor is this all; these radio-active bodies are continually forming in their own interstices a product, which in the case of radium is many thousand times more active than radium itself; which, moreover, induces the same radio-activity in all bodies exposed for some time to it, and which, to the extent of $\frac{1}{200000}$ th of its original potency, remains a new and permanent property of the acquiring body. These processes are above and beyond the cognizance and scope of the most refined chemical methods. Here is a demonstration: A tube out of which a perfectly invisible emanation from radium, and possessing absolutely no weight, has been emptied, is next washed out with an acid; this is evaporated, leaving a radio-active residue more potent in some respects than radium itself, requiring 200 years to decay to half value. Moreover, in rooms where radium has been exposed to the air, an invisible radio-activity, perfectly undetectable by the balance or the spectroscope, is produced on the walls of the apartment, persisting even though the radium has been removed for some time.

Now facts parallel to these, but where the human body in certain defined states of disease acted with similar susceptibility to the electroscope in the former instance, were observed by Hahnemann a century ago, and have been confirmed by innumerable observations since. That matter too attenuated to be obvious to the test of the balance, or of chemical reaction, or of spectroscopic analysis should yet be detected by a suitably sensitive instrument, that of diseased proto-plasmic condition; that initiation of new conditions may be effected in a responsive state by inconsiderable material agencies, and bearing absolutely no relation in point of quantity to the effects produced; that transmission of specific qualities through a series of indifferent media may be effected, leaving the ultimate product still potent to act; that media thus used for transmission retain permanently their new character; and that a specific and definite parallelism controls the interaction of remedy and organism—these facts, I say, have been known to homeopaths since Hahnemann, and may be verified by any competent observer who cares to take the trouble.

Further, these researches in radio-activity have a special and particular bearing on that crux in homeopathic practice, the dilution or attenuation. The ancient and exploded fribble

which spoke of dilution requiring an Atlantic Ocean, and viewed attenuation as merely continuous division, may now operate as a millstone round the neck of any perpetrator in his controversial dealings with the kindly fluid. Hahnemann always speaks of attenuation with quantities that are limited, and continuous from trituration to trituration, from phial to phial.

It is probable that the conjecture of what goes on, in the process of attenuation making as infinite dilution, is quite wrong. Far more likely is it that this may accurately be expressed in terms of infinite transmission—transmission from mass to mass of a specific quality similar to that of radio-activity; and this being so, we should drop the term attenuation or dilution beyond a critical point and recur to the old term potency.

§ XVI.—These and other advances in physical science have pulverised and destroyed the ancient objection to infinitesimals, due to a crude holding of the atomic theory. Those of us so foolish as to frown on *a priori* criticisms based on the now obsolete Daltonian view of the attribute of the atom, may now adopt Huxley's teaching that *a priori* reasonings are mostly wrong. Not only has the Daltonian atom been disenfranchised, but the electron, its substitute, possesses attributes so entirely different, as practically to make the handing on of specific properties an entirely conceivable physical process. This most unscientific frame of mind has, I regret to say, been voiced in some of our text-books, and the sooner this baseless *a priori* animadversion is expunged therefrom, the better for our scientific credit. The caustic wit of the forcible-feeblers has hitherto been incited by the fact that the processes coupled in homeopathic practice have had no parallel in nature. Now, however, the scene is changed, and whereas before we left our erstwhile critic who objected to the claim of *Similia* to be an induction to the tender mercies of Bain and Mill, we may leave his fellow face to face with the phenomena of radio-activity, stranded above the high-water mark of the stream of scientific progress.

§ XVII.—In this cursory review of homeopathy as science, I cannot pretend to have sketched its many-sidedness, or to have given its multiple accordances with collateral knowledge each in their due force and proportion. I have chosen for review that part of the homeopathic presentment which lays bare the foundation of *Similia* in the scheme of things: which shows it as part of the order of nature: conforming to the principles of scientific discovery: tested by the criteria of

logical proof. This is the position—that of nature-students—we take up, imbued with the necessity of perpetually verifying our facts, testing our interpretations of these by observation of the sick, and experiment on the healthy. And it is because we regard *Similia* as both truth and guide to further truth, that we are its adherents.

We are not the slaves of theory: we are the students of fact: we recognise that nature is ever greater than our knowledge: we see the line of progress to be of knowledge that it grows: of interpretations that they expand: and we adopt the breadth of outlook of the student of science so aptly pictured by Goethe:—

“Grau, theurer Freund, ist alle Theorie,
Und Grün des Lebens golden Baum.”

(*To be continued.*)

MATERIA MEDICA MISCELLANY.

By J. R. P. LAMBERT, M.D.

Aloes: Its Action on the Urinary Organs.—Dr. Laird, in his excellent paper on this drug, says it is of inestimable value in enuresis either diurnal or nocturnal. When the child must instantly obey the impulse to urinate under forfeit of wet pants or sheets, *Aloes* is specific provided the child shows also the tendency to a similar increased peristalsis of the bowels. On the same parallel runs the incontinence of the aged, with or without enlarged prostate. There is a feeling of a plug wedged in between the symphysis pubis and coccyx, and he is uncertain on both sides (*i.e.*, rectum and bladder); acute exacerbation of prostatic hyperemia is frequently attended by hematuria (*Aloes* 2x gtt. v. 0.2 vel. 4h.).

A specific action on the kidneys is attested by both Dr. Kohn and Lauder Brunton, the former finding desquamation of the renal epithelium, and both reporting albuminuria. In our provings, too, the combination of increased blood pressure with scanty urine points to injured kidneys. Destruction of the epithelium of the tubes gives rise to uremia, and one of its not uncommon manifestations is a simple or dysenteric diarrhea with all the earmarks of *Aloes*. The typical case in which I have several times seen *Aloes* do grand work is characterised by an effort of the lower colon and rectum to throw off the

poison which has caused muco-enteritis with stools either entirely mucous or muco-bloody; the urine is scanty and hot, and the chief effect of the poison is centred on the large bowel. In this particular sphere *Aloes* is to the localised what *Morph. sulph.* 6x is to the general uremia with intense pruritus.—*Clinique.*

Aloes Diarrhea.—*Apropos* of Dr. Laird's remarks on this drug, we quote the following typical case from an editorial in the *Indian Hom. Review* :—

A lady, æt about 46, had an attack of dysentery about the beginning of January, 1903. She was brought here by her son and placed under my treatment.

The lady was very much emaciated and prostrated. Had constant nausea and spitting of saliva from the mouth. About ten to twelve stools in twenty-four hours.

Stools dark, brown, fecal, profuse and watery, containing streaks of blood, much wind in stomach with loud gurgling, fear of passing wind as if it would soil the cloth with fecal matter. Stool also consisted of some mucus and of very offensive smell.

Aggravation, generally in the morning before breakfast, viz., from 6 a.m. to 10 a.m. After eating or drinking there was some increase of pains in abdomen; she feels better by pressure on the abdominal wall and by passing wind, which was attended with difficulty. Appetite was good, but she could not digest the food well, which sometimes passed with the stools.

Before I saw her she was treated with *Merc. sol.* and *cor.*, *Ipecac.*, and *Nux vom.* by some other physicians. I gave her a few globules of *Aloes* 200 dry on the tongue. Next morning she had only one stool, and it was rather formed. The pains were much mitigated and passed wind with much ease.

No medicine to-day, and she kept well the whole day. Her son came and wanted more medicine to stop the next morning aggravation.

A few powders of *Sac. lac.* were all that was given her. She made a perfect recovery.

Ipecac. in Post-Partum Hemorrhage.—Dr. C. E. Fisher believes that in this plain and not over æsthetic remedy we have a medicine of great value in uterine flooding. Nausea and vomiting are held to be its particular sphere. But it is because of the effect it has upon the gastric and

hepatic centres of the solar plexus that it relaxes the digestive organs and emesis results. The uterus is dominated by the abdominal brain, and relaxes with the stomach for this reason. The pathology is not visible, but inertia occurs, the sanguinary stream pours forth its crimson liquid, the patient blanches, her face becomes bathed in clammy sweat, she sinks into depression, her limbs become cool and clammy, her pulse feeble and rapid, and she sighs, and is qualmish and weak even to faintness. She is a picture of relaxation, and a crisis impends. Here *Ipecac.* will beat both *Ergot* and *Sabina*. I rarely give it below the thirtieth, but in earlier obstetric work secured good results from lower strength.—*Am. Phys.*

A Graphites Case: Chronic Eczema.—Woman, aged 36 years, weight 164 pounds, mother of four children, rather plump in form but lacking the red tint of perfect health, surface pale and often cold; general health fairly good. For twelve years has been afflicted with eczema of both ears, involving the entire external ear and extending about an inch on the surface surrounding the ears; the entire diseased surface was covered with crusts that cracked easily on bending and exuded a watery, sticky fluid that seemed irritating and excited severe itching. Under the crusts and in the cracks the appearances were very red and angry-looking; this seemed especially aggravated behind the ears where they joined the head. Beneath the ears and along the sides of the neck the glands were enlarged, but gave no evidence of acute disease. The auditory canal was dry and itchy; the hearing was not impaired.

After a careful study of the case *Graphites* 6x was given, a tablet once daily. The patient was advised in regard to diet and general habits, and told to report in two weeks. At the next visit there was evidence of improvement; the remedy continued, and at the expiration of two months the only evidence remaining was a slight redness and some thickening of the skin, all of which soon passed away, and up to the last report, which was twelve years later, there was no return of the trouble.—*Quoted by Am. Phys.*

MATERIA MEDICA RHYMES.

By MARGARET L. TYLER, M.D.

XVIII.—APIS.

Apis Mellifica now we will sing,
For all manner of pains that burn and sting.
They are worse in the morning, and worse from heat ;
Better from pressure and cold : now repeat,
Till you know it by heart, that the Bee is the thing,
For all manner of pains that burn and sting.
Then in "*Cries Cerebrâles*," when you hear the "crie,"
You must hurry at once in quest of the Bee.
Then the Bee for edema ; the Bee stands first
For a dropsy with absolute absence of thirst.
Then, edema of throat, when you note, at the back,
The uvula hanging, a water-filled sac,
With the stinging pains (or with painlessness,
If the case is advanced ; more alarming, I guess !)
Now the action of *Apis* is slow, but you know
You've arrived, if the urine increases in flow.
The complexion of *Apis* is waxy ; unhid
Are the swellings transparent of up and down lid.
Tension, swelling, and stiffness, throughout, is the rule.
Something tight will be burst with the straining at stool.
In ovarian troubles and tumours, the thing
Is *Apis*—provided the pains *burn and sting*.

XIX.—CONIUM.

Conium—vertigo will guide ;
It comes from turning head aside.
Eyes—inflammation's not aggressive,
But Photophobia's most excessive.
In breast, womb, stomach, lumps may show,
Stone-hard, and following on a blow :
Their pains burn, sting and dart, they well
May make you think of *Apis Mell*.
Hypochondriasis it aids :
Good for old bachelors and maids.
Sweat, day or night, is sure to rise
The moment that he shuts his eyes

XX.—ARGENTUM NITRICUM.

Silver Nitrate (in 30 will do!),
 Sugar he craves, and fluids "go through":
 Plenty of belching and pressure; a state, as
 If stomach would burst from excessive flatus.
 Expanded sensations all through, and in head:
 Painful, red-tipped tongue, with papillæ red.
 Stools greenish and gush: apprehension and fear:
 When ready for Church, gets diarrhea.
 Hypochondriasis; mind much affected:
 Terror of corners, as if they projected:
 Claustrophobia—staggers, and dizzy
 At sight of tall buildings:—with duties so busy!—
 Numb and sensitive arms will worry him:
 Wants to walk fast, for the drug will hurry him.
 In his Epilepsies, you will not lack
 To find pupils dilated before the attack.
 Don't forget, *Silver Nitrate*, high potency, right is,
 In the very worst forms of conjunctivitis.

XXI.—VERATRUM ALBUM.

Veratrum A. you'll just hurry to get
 For a patient collapsed, in a cold wet sweat.
Veratrum A. boasts a copiousness
 In evacuations unrivalled, I guess!
Veratrum A.
 Will strong symptoms display
 In the realm of the mind,
 Till you're mighty inclined
 To prescribe *Stramonium*, but parry disgrace
 By observing, instead of *Stramonium's* red face,
 The *Veratrum Album* type, so emphatic,
 Of countenance sunken and hippocratic.

DICTIONARY OF MATERIA MEDICA.

A CORRECTION.

UNDER *Aurum Muriaticum, Relations*, p. 230, line 15
 from top, for "*Cannab.*" (*Cannabis*), read "*Cinnab.*"
 (*Cinnabar*), as antidote to *Aur. m.*

CASES I HAVE COME ACROSS.

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

LXVIII.—*MERCURIUS CORROSIVUS* IN DYSENTERY.

THIS was the case of a man (aged 60) who had been treated for ordinary diarrhea without success. The case to me was a decided one of dysentery, as the following symptoms clearly demonstrated :—There was severe pain and straining before, but more especially after the discharge of the evacuations, which were bloody, and contained a large quantity of mucus. The urine was passed with difficulty, accompanied with severe tenesmus of the bladder. Allopathic mixtures had had no effect on the symptoms, which were gradually getting worse. The following prescription was ordered :—

R̄ *Tinct. Mercurius corrosivus* 3x ℥xxx
Ad Aqua dest. ʒviiij ℥

One dessertspoonful to be taken every half-hour till improvement sets in; then every two hours.

There was a striking contrast in the result of this treatment with that adopted at the onset of the disease, for, after half a dozen doses had been taken, the good effect of the medicine was at once apparent. After the ninth dose the medicine was administered every two hours, and on the following day, every four hours. On the third day the patient had completely recovered, but felt somewhat prostrated by what he had gone through. A 2℥ dose of *China officinalis* φ, night and morning for a week, however, soon rectified that trouble.

LXIX.—*HYDRASTIS CANADENSIS* IN TORPIDITY OF THE BOWELS.

This case was that of a young man (aged 29), the diagnosis of which was that of, unfortunately, a very common complaint, viz., simple chronic constipation. He had been in the habit of taking, as too many are, what is generally called "opening" medicine—sometimes *Epsom Salts*, sometimes *Senna tea* or *Castor oil*, and *pills* of various descriptions. These, however, although relieving for the time being, had the effect of still further increasing the torpidity of the bowels. Having witnessed

the beneficial action of *Hydrastis canadensis* in similar cases in previous instances, I put him on the following:—

R. *Tinct. Hydrastis canadensis* lx ʒxxxvj
Ad Aqua dest. ʒvj ʒ

One tablespoonful every four hours.

While the medicine was acting, I advised him to make use of injections of tepid water, to remove the fecal matter, and thus obtain temporary relief. The cure in this case was somewhat protracted, but the constipation was gradually overcome, the tonic property of the *Hydrastis* improving the action of the bowels. The medicine was continued for two months, and then a dose administered nightly for a month afterwards. The patient was eventually cured, and promised that in future he would have nothing to do with "opening" medicines, but to rely on simple homeopathic treatment, should he ever again suffer from his dreaded enemy—constipation.

LXX.—*PODOPHYLLUM PELTATUM* IN LIVER COMPLAINTS.

A lady (aged 34) complained of a great feeling of discomfort, sensitiveness, and pain in the region of the liver, diarrhea, and bilious vomiting. The bowels were somewhat prolapsed, the urine was dark, and the complexion sallow. She also complained of a bitter taste in the mouth. She felt very drowsy by day, but instead of sleeping well at night, she passed very restless nights. As her symptoms pointed to *Podophyllum* as the remedy indicated, I requested her to take a tablespoonful of the following three times a day:—

R. *Tinct. Podophyllum peltatum* φ ʒj
Ad Aqua dest. ʒvj ʒ.

At the end of a week the patient returned, and stated that all her unpleasant symptoms had disappeared, and that she felt like a "new person." On my advice, however, she continued taking a dose of the medicine for another week at bedtime, and had no return of the complaint. *Podophyllum peltatum* thus proves itself to be not only a direct stimulant of the liver, but also homeopathic to inflammation, congestion, and acute irritation of that organ, as well as to pains in the hepatic

region, and biliousness. The drug, however, appears to act best when it is given in the higher attenuations in acute cases, and in the lower in those of a chronic character. Its action is closely similar to that of *Mercurius* and *Iris versicolor*, of which it is an analogue. In fact, one of the common names by which it is known is "Vegetable Mercury."

(To be continued.)

BRITISH HOMEOPATHIC ASSOCIATION.

LADIES' COMMITTEE.

SUMMER FETE.

A Fête, under distinguished patronage, was given in connection with the above Committee at the Gardens of the Royal Botanic Society, Regent's Park, on Thursday afternoon, July 7, 1904, from two to seven o'clock.

GENERAL PROGRAMME.

The "Flower Tent," for the sale of cut flowers, &c., was presided over by Mrs. John Mews. Tea and coffee were served in the refreshment tent from 4 to 6.30 o'clock. The band of the Royal Horse Artillery played throughout the afternoon. Pastoral play: Mr. Ben Greet's company, "The Woodland Players," gave in the garden scenes of Shakespeare's comedy, "Twelfth Night." A concert, under the direction of Raphael Roche, Esq., was given in the conservatory by the following artists, who kindly gave their services:—Mons. Tivadar Nachez, violin; Mr. John Thomas, harpist to the King; Senor Rubio, 'cello; Mr. Sopra, the celebrated Canadian soprano; Senor Guetary, of the Royal Italian Opera. In the Rhododendron Tent, conjuring by Charles Bertram, Esq., the celebrated prestidigitateur; pictorial sketches by Percy French, Esq., lightning artist; recitations by Miss Anna Mather—"The Hebrew Mother," by Rachel Penn (Mrs. E. S. Willard), "The Disturbing Element," by Mrs. Wheeler; Society Sketches by Harold Johnson, Esq. Miss Gladys Groom gave an exhibition of skirt dancing, &c., in the

conservatory. D'Amato's Neapolitan Singers gave selections of vocal and instrumental music, with dances in national costume, in the grounds at intervals during the afternoon.

From the Press notices of the Fête we take the following:—

From the *Morning Post*, July 8th:—

“There was an attendance of more than one thousand yesterday afternoon at a Fête which the Ladies' Committee of the British Homeopathic Association gave in the gardens of the Royal Botanic Society, Regent's Park. The object of the Association is the spread of homeopathy in this country, and the Ladies' Committee, of which Mrs. Henry Wood and Mrs. Stephenson are the secretaries, is aiming at the foundation and endowment of a travelling scholarship in connection with the system. The guests were received by Lord Calthorpe, one of the vice-presidents, and amongst those present were Earl Roberts and Lady Aileen Roberts, Lady O'Hagan, the Hon. Mrs. de Beaumont Klein, the Hon. Mrs. FitzRoy, the Misses Van de Velde, Miss Cruickshank, Mrs. Roberson Day, Mr. and Mrs. George Franklin, Mr. and Mrs. T. J. Hanley, Mr. and Mrs. Charles Kelly, Mrs. Mews, Mr. R. W. Perks, M.P., and Mrs. Perks, the Misses Raffles, Mr. and Mrs. Llewellyn Salusbury, Mrs. and Miss Stillwell, Dr. Dyce Brown (hon. secretary of the Fête Committee), and Mr. Frederick King (secretary of the Association). Mr. Ben Greet's company gave a pastoral play, a concert took place in the conservatory under the direction of Mr. Raphael Roche, while there were sketches, conjuring, and recitations in the rhododendron tent. On the lawn D'Amato's Neapolitan singers performed, and the band of the Royal Horse Artillery played. The Fête was very successful.”

From the *Manchester Guardian*, July 9th:—

“If Hahnemann had been able to attend the garden party of the British Homeopathic Association in the Botanic Gardens yesterday he would, no doubt, have returned to the Shades with a fairly satisfied expression on his face. Some eight hundred persons, four-fifths of whom were women, were present, and although the number of physicians was small, the lay members were of the most influential class. It was interesting to notice that the list of patrons included the Duchess of Hamilton, Lord and Lady Cawdor, Lady Margaret Cecil, Lady de Tabley, Monsignor Provost Russell, General Sir Henry Trotter, Sir George Wyatt Truscott, and four members of the House of Commons. The Association is in its third year, and during the past two years it has obtained over £10,000 in promises and payments (to quote from the syllabus) for carrying out its objects. Its recent activities include the establishing of a series of lectures to professional men on homeopathy, the production of a standard work on the relations of homeopathy to modern medical advance, and the founding of a travelling scholarship in the homeopathic colleges of the United States. The reason for the Fête and for the guests pur-

chasing at not (when all things are considered) extravagant prices superfluous flowers and articles of amusement from extremely pretty young homeopathsists was to provide funds to carry out the plans of the Association. Lord Calthorpe received the guests, and many things were provided for their entertainment. The best show was Mr. Ben Greet's company in 'Twelfth Night,' under the Regent's Park greenwood tree. Perhaps 'Romeo and Juliet' would have been more appropriate to the occasion, for then the homeopathsists would have heard the doctrine—

“ ‘ Take thou some new infection to thy eye,
And the rank poison of the old will die.’ ”

SOCIETY'S MEETINGS.

BRITISH HOMEOPATHIC SOCIETY.

ANNUAL ASSEMBLY.

First Day.

THE tenth meeting of the session, and the first of the Annual Assembly, was held at the London Homeopathic Hospital, Great Ormond Street, W C., on Wednesday, June 29th, at eight o'clock, Dr. James Johnstone, Vice-President, in the chair.

The meeting was devoted to a discussion on the subject of “Dysmenorrhœa.”

A paper was first read by Dr. W. Roche on “The Medicinal Treatment of Painful Menstruation,” followed by another by Dr. Clowes Pritchard, of Hastings, on “The Operative Treatment of Dysmenorrhœa.”

In the homeopathic treatment of this condition Dr. Roche recommends beginning with a few doses of *Aconite*. *Sabina* and *Secale* he thought were only palliative; *Ignatia* and *Cham.* relieve the nervous symptoms. Among the principal medicines he places *Cauloph.* 1x-3 easily first. *Collinsonia* he had not found so useful. *Gels.* ϕ when severe headache accompanies the condition. *Ham.* 1x when there is marked ovarian tenderness. He also had found *Act. r.*, *Xanthoxyl*, and *Vib.* useful.

The discussion was opened by Dr. Sandberg from the medical side, and by Dr. Wynne Thomas from the surgical side. The former had been disappointed with

Cauloph. He found *Collinsonia* useful when there were hemorrhoids, but not for dysmenorrhea. When there is left ovarian pain he finds *Lachesis* very good.

A lengthy discussion followed.

Second Day.

The eleventh meeting of the session, and the second of the Annual Assembly, was held at the Hospital on Thursday, June 30th, at 3 o'clock, Dr. James Johnstone, Vice-President, in the chair.

The Council, to celebrate the sixtieth anniversary of the foundation of the Society, proposed that the following be elected Corresponding Members of the Society: Dr. Ghose (Calcutta); Dr. Klauber (Vienna); Dr. Schepens, père (Ghent); Dr. Seutin (Brussels); Dr. Tessier (Paris); Dr. Voorhoeve (The Hague); Professor Lombroso (Turin); Dr. Olive (Barcelona); Dr. Batault (Geneva); Professor Soares de Meirelles (Rio de Janeiro); Dr. Sutherland (Boston); Dr. Bartlett (Philadelphia); Dr. Conrad Wesselhoeft (Boston); Dr. Arndt (San Francisco); Dr. Allen (Chicago); Dr. W. H. King (New York); Dr. Kent (Chicago); Dr. Copeland (Ann Arbor); Dr. Shears (Chicago); Dr. G. R. Roberts (New York); Dr. Gatchell (Chicago).

The Report of the Council was presented, and the Treasurer presented his financial statement. The Indexing Committee also presented a report.

The Meeting then proceeded to elect a president, two vice-presidents, and a treasurer, and elected Dr. James Johnstone as president, and Dr. A. E. Hawkes and Dr. Speirs Alexander as vice-presidents. As treasurer, Dr. Blackley was again re-elected.

During the Annual Assembly an exhibition of sanitary, tropical, and medical appliances and apparatus was held in the Nursing Institute of the London Homeopathic Hospital. It was open to members of the Society only on the evening of Wednesday, June 29th, from six to ten o'clock. On Thursday and Friday, June 30th and July 1st, it was open to members and their friends from twelve to six o'clock.

The exhibits included a series of models showing treatment of fractures, &c. (prize exhibit at the World's Exposition, Chicago), domestic and field filters, food

preparations, cooking utensils, tents, clothing, sleeping nets, &c, surgical instruments, medicine chests, and a large equipment for foreign travel in all departments.

A lantern demonstration of micro-organisms, parasites, &c., was given by Mr. Frank Watkins on Thursday, June 30th, at 4.30, in the Board Room, which was well attended by members, and a number of ladies and gentlemen were also present.

BRITISH HOMEOPATHIC CONGRESS, 1904.

THE Annual Congress was held this year in London, at the London Homeopathic Hospital, Great Ormond Street, W.C., by the kind permission of the Board of Management, on Friday, July 1st, at 10 o'clock.

The Presidential Address was delivered by George Burford, M.B., Senior Physician for Diseases of Women at the London Homeopathic Hospital.

The title of the Address, which was a long and scholarly dissertation, was "‘Similia Similibus Curentur,’ as Science, Politics, Culture."

"The art of curing will then (*i.e.*, with a perfected materia medica) approach to the same degree of certainty as the science of mathematics" (Hahnemann, *Organon*).

"The art of healing does not consider the interest of the art of healing" (Plato, *Republic*).

"Culture, the aim of setting ourselves to ascertain what perfection is, and to make it prevail" (Arnold, *Culture and Anarchy*).

The Council resolved that the three papers to be read at the Congress of 1904 should be on Diseases of Children.

The first paper which followed the Presidential Address after a short interval was read by Byres Moir, M.D., Physician to the London Homeopathic Hospital, on "Pneumonia in Children up to the age of Five, and the results of cases treated in the Hospital."

Dr. Moir in his excellent paper showed conclusively the great superiority of homeopathic treatment in this affection. He mentioned *Verat. viride* as of value when there are brain symptoms. He advises a hot bath twice daily or more often if the temperature is over 104°.

The Congress adjourned for lunch at 1 o'clock to the Holborn Restaurant.

The meeting was resumed soon after 2 o'clock, when

Dr. Hayle opened the discussion on Dr. Moir's paper. He has found lobar pneumonia much less fatal than catarrhal. His treatment is *Phosphorus* every four hours and *Bry.* or *Ver. v.* every hour in the lobar form, and *Ant. t.* and *Ipec.* given in the same way in the lobular. Dr. Newbery condemned poultices—*Ant. t.* 3 is his sheet-anchor, and *Sulphur* to clear up the case. Dr. Bodman (Sen.) found *Iod.* 3x very useful in lobar pneumonia. He gave a warning against using *Acon* ϕ or 1x. He had seen collapse follow use of 1x. Dr. Lambert mentioned *Chelidonium* as of value, especially when the right side is most affected, or if there is in addition a yellow diarrhea or any icterus. *Tuberculinum* also has been recommended highly, apart from any suspicion of tubercular origin. He mentioned a bad case in a baby six weeks old of catarrhal pneumonia, considered to be of influenzal origin since the other members of the family, including the nurse, had influenza. In the later stage of the case the little patient developed otitis media. This case was saved by *Amm. carb* 3x. It was a desperate case and collapsed on several occasions, but was tided over them by saline injections, which he should recommend in preference to *Strychnine*. Dr. Alexander (Hampstead) mentioned a bad case with collapse where *Carb. veg.* 6 acted well, and saved the case. Dr. Wynne Thomas advised ice-bags or Leiter's tubes in place of poultices. Mr. Midgely Cash (Torquay) also spoke. Dr. Byres Moir, in reply, said he did not at all condemn poultices as Dr. Newbery had understood him to say, a poultice over the back on which the child lies avoiding the objections raised by Dr. Newbery.

The second paper was read by J. Roberson Day, M.D. Lond., Physician for Diseases of Children, London Homeopathic Hospital, on "Intra-Abdominal Phthisis in Children, and its Homeopathic Treatment."

In the preparation of this paper, Dr. Day had the collaboration of C. Osmond Bodman, M.D., M.S. Durham, of Bristol. The paper was illustrated by lantern slides.

A third paper was then read by Edmund Capper, M.D., C.M. Edin., Medical Officer to the Leicester Homeopathic Hospital, on "Epidemic Diarrhea in Children, and its Homeopathic Treatment."

Dr. Capper's paper dealt fully with the etiology of his

subject and in a general way with the homeopathic treatment, which was shown to be very satisfactory. The number of drugs called for was too great to mention indications for any but those most commonly indicated.

The Congress adjourned for a cup of tea in the dining-room of the hospital, at the kind invitation of the Board of Management of the hospital, at 4.30 p.m., after Dr. Capper's paper. The discussion on this paper and Dr. Day's was postponed till after the business meeting, and finally lapsed altogether.

The Congress then took up the formal business—the selection of the place of meeting for 1905, the election of President and other officers for the ensuing year. This concluded the proceedings.

The members, with their friends, ladies as well as gentlemen, dined together at 7 o'clock at the Holborn Restaurant.

INSTITUTION.

HAHNEMANN HOSPITAL AND DISPENSARIES, BRISTOL.

REPORT FOR 1903.

THE Committee, in their report of 1902, stated that they believed themselves justified by the financial encouragement they had received in furnishing two wards in the hospital in Brunswick Square, and opening them for in-patients. This was accordingly done last spring, and on April 16th the first patient was admitted, a case of malignant disease requiring operation. They have engaged an excellent nurse-matron, Miss Rees, who is devoted to her duties, and is thoroughly trained and experienced in hospital work. When needful she has an assistant nurse, also well trained. Since that period there has been a succession of cases, more or less serious, which could not have been treated except in a properly-appointed hospital.

The Medical Officer's report shows in detail the excellent work which has been going on there, and subscribers and friends of the charity will be welcomed by Miss Rees any day to inspect the wards between 4.30 and 5.30 p.m.

The financial statement shows that the expenditure so far has been £300 spent in alterations furniture, &c. This is just

the amount of special donations (excluding a legacy) received for these objects in 1902 and 1903, and the Committee thought it more prudent to make only the absolutely necessary alterations and purchases for the opening of two hospital wards. This having been accomplished, they appeal to their friends for another £200 to complete the scheme, and especially for additional yearly subscriptions to enable them to continue the good work so auspiciously begun. The yearly expenditure has been increased by about £50 during 1903, and this will necessarily grow as more cases are admitted for treatment.

The attendance at the dispensaries has increased during the year from 3,800 to 4,140, and the home visiting has been assiduously carried on by the visiting medical officers. Appended is a report of the medical work done both in the wards and by visits at the homes of the patients. The demand for home visiting tickets still exceeds the supply.

It will be seen by the treasurer's account that the payments by patients bring in a considerable sum, and we are pleased to be able to say that donations to the amount of £8 5s. have been made in small sums by patients, showing their gratitude for benefits received—Miss Jeffery having kindly collected and given £7 of this.

Collecting boxes will be distributed to any friends who will kindly place them where they think they will be useful.

We acknowledge with many thanks the following gifts:—

Mrs. Melville Wills	...	A child's cot.
A Lady	...	A child's bedstead.
Miss Rees	...	Porcelain sink and tiles.

We hope shortly to complete the alterations needful, and to furnish two small wards on the upper floor, which may be used when required as private rooms, and we think there will be a demand for these when they are known to be available for private patients who cannot be properly nursed at home.

In conclusion, the Committee invite more annual subscriptions to extend the usefulness of the charity, and to interest as many people as possible in the work. As Sir Henry Burdett says in his classical work on "Cottage Hospitals," "Every one versed in hospital management knows that the secret of financial soundness in things charitable is summed up in the successful attainment of a large proportion of the income from annual subscriptions." And we hope and intend to conduct the hospital affairs both economically and on sound business principles, and with the conviction that subscribers give more willingly when they know that the patients themselves and their friends contribute their share according to their means.

REPORT OF THE IN-PATIENT WORK OF THE HOSPITAL
DURING 1903.

The Hospital was opened for the reception of in-patients on April 15th, on which date a case of malignant tumour of the breast was admitted for operation. From this time until December 31st ten cases were admitted as in-patients.

In addition, by special permission, a lying-in case was admitted, and at the end of the month both mother and child were discharged in good health.

All of the patients who have been treated in the Hospital have spoken in terms of warmest gratitude and appreciation of the attention they received and of the comfort they experienced, and two or three of them have given practical evidence of their satisfaction by sending voluntary donations to the Hospital after returning home.

The possession of wards for the reception of in-patients has proved such an advantage, and has added so greatly to the efficient carrying out of the work of the institution that it now seems difficult to understand how we managed for so long without them.

REPORT OF THE MEDICAL OFFICERS FOR HOME PATIENTS.

The amount of work done in this department during the past year has been slightly less than in the two previous years, as will be seen from the following table, which indicates the number of visits paid during the last three years:—

1901.	1902.	1903.
433	434	421

Presumably this slight difference is to be accounted for by a somewhat diminished prevalence of acute disease during the past year as compared with the previous ones.

As regards the subscribers' home notes, which entitle a patient to a month's free treatment at home, the demand much exceeds the supply. It is hoped that during the present year this will be rectified by securing a large increase in the number of annual subscribers.

The following gentlemen constitute the acting staff:—

Honorary Medical Officers.—F. H. Bodman, M.D., J. H. Bodman, M.D., C. O. Bodman, M.D., S. Morgan, M.D., T. D. Nicholson, M.D.

Medical Officers for Home Patients.—J. H. Bodman, M.D., C. O. Bodman, M.D.

Hon. Sec. and Treasurer.—E. Wheeler.

Chemist and Dispenser.—E. Wheeler.

PREPARATION.

BOVININE.

WE have received from the Bovine Company a sample of their well-known preparation together with the latest literature thereanent.

Bovinine has now been used by the medical profession since 1878. It has therefore been tested in practice in every possible way. Many uses have been evolved for it which its originators did not suspect on its introduction. It is a beef-juice, made by a cold process and therefore contains in solution and ready for immediate absorption about 20 per cent. of coagulable album. It is thus of the greatest service in all cases where there is a low state of nutrition and weak assimilation.

For some years past it has been realised that the nutrients can be absorbed by way of the skin as well as by the stomach and intestinal tract, including the rectum. It has also been found that ulcerating surfaces can absorb nutrients in solution, and in this sphere Bovinine has provided remarkable results—it has arrested rapidly spreading gangrene, and healed extensive areas of ulceration when antiseptic dressings had failed to do anything but aggravate.

Bovinine is an adjuvant to medical and surgical practice which no medical man can afford to neglect.

REVIEWS.

VACCINATION.*

THE first part of this pamphlet consists of a speech by Dr. Boucher in the course of a medical debate on vaccination by the Society of Medical Practitioners of Paris, and is reproduced from a Belgian medical journal, *La Médecine*. Dr. Boucher is strongly opposed to the

* *Le Vaccin et la Vaccination: Leur dangers et leurs résultats, effrayantes en France et en Angleterre.* Par. M. le Dr. Boucher et Glendower C. Ottley, Esq.

practice of vaccination; he was not by any means without support among his colleagues who joined in the discussion. Mr. Glendower C. Ottley adds three notes to the record of the discussion. The first deals with the results of compulsory vaccination in England and demonstrates its failure to abolish smallpox. The second shows that vaccination creates morbid tendencies. The third shows that vaccination is capable of transmitting syphilis from one subject to another, when syphilis has only been in a latent state, and not obvious in the vacciner.

FRUITS, NUTS, AND VEGETABLES.*

THIS little book contains valuable information for those who are seeking for substitutes for flesh diet. There is at present a great impetus in the direction of a more refined dietary, largely due to the writings of Dr. Alexander Haig. Mr. Albert Broadbent is a practical writer in the same direction, and his little brochure will help many to a practical realisation of these aims.

DECAPSULATION OF THE KIDNEYS IN CHRONIC BRIGHT'S DISEASE.†

IN this pamphlet, reprinted from the *Journal of Obstetrics, Gynecology, and Pediatrics*, Dr. Honan gives some details of his practical experience in this new branch of surgery originated by Dr. George M. Ebehols, of New York, in 1899.

* *Fruits, Nuts, and Vegetables: their uses as Food and Medicine.* By Albert Broadbent. Manchester: Albert Broadbent, 1904. Paper covers, 3d.

† *Decapsulation of the Kidneys in Chronic Bright's Disease.* By Wm. Francis Honan, M.D.

ANSWERS TO CORRESPONDENTS, NOTES AND QUERIES.

* * In this department we shall be happy to reply to any inquiries relating to homeopathy or to the matter of our magazine that our correspondents may like to address to us. We cannot, of course, undertake to give medical advice in particular cases, which is the business of a medical attendant; but if our medical readers like to put queries to each other regarding points of practice or puzzling cases, we shall be happy to insert queries and replies.

MR. FREDERICK KOPP.—Your request *re* phonograph has escaped me till just now. Should an opportunity occur I will see what I can do. The omitted cases referred to in your list have already appeared.—J. H. C.

NOTIFICATIONS.

* * Under this heading we shall be happy to insert notices of appointments, changes of address, &c., and holiday arrangements.

CHANGE OF ADDRESS.

DR. LILLIAN HARRIS and Dr. Clifton Harris have removed to 12, Buckingham Place, Brighton.

NOTICE OF REMOVAL.

Expiration of Lease.

MESSESR. JAMES EPPS & Co., LTD., announce that on *July 30, 1904*, they removed their West End Branch from 170, Piccadilly, W., to 60, *Jermyn Street, S.W.* (4 doors from St. James' Street). Telephone No. 6259 Gerrard.

Messrs. Leath and Ross wish it to be noted that their telephone number is 4685 Gerrard.

HOMEOPATHIC DOCTORS WANTED.

A CORRESPONDENT in Johannesburg again draws our attention to the pressing need there is for a good homeopathic doctor in that city. We believe the opening to be an exceptionally brilliant one for a thoroughly capable man.

We wish to call attention also to an opening in another part of the world, particulars of which will be found in our advertisement pages.

Obituary.

MR. CHARLES COOK.

A PROMINENT lay homeopath has passed away in the person of Mr. Charles Cook of Bendigo, Australia. An Australian correspondent writes of him as follows:—

“Homeopathy in this city has sustained an irreparable loss by the death of Mr. Cook, who was described to me by one of the Melbourne homeopathic doctors as a living wonder, and who, if he had had a regular medical education, would have been one of the first of living physicians. His strong point was the wasting diseases of children, and on Monday afternoon in particular the pathway opposite his shop was blocked with perambulators and the mothers waiting their turn. For myself, I cannot speak too highly of him.”

GENERAL CORRESPONDENCE.

DR. MACK ON RATIONAL MEDICINE.

To the Editor of THE HOMEOPATHIC WORLD.

MY DEAR SIR,—In your editorial of June 1st, just received, is comment upon my use of the term *rational medicine*. With what meaning I use the term appears from a lecture upon *Empiricism, Rational Practice, and Practice under Guidance of Law*, which I gave in the Homeopathic Medical College in the University of Michigan, and which was published in the *North American Journal of Homeopathy* for January, 1892, where a footnote reads:—

“It seems hardly necessary to explain that a technical use of the term *rational practice* does not do away with the ordinary meaning of *rational* or of *practice*. I have given reasons for believing that it is rational to, on occasion, resort to empiricism, and I think it is pre-eminently rational to practise homeopathy, but neither empiricism nor homeopathy is, technically, rational practice as here defined.”

The paragraph to which this is a footnote reads :—

“For present purposes I define rational practice as that practice in which one selects and uses a particular drug, for the reason that—in view of certain disease effects present, or proximate causes of those effects (which effects or causes he knows as scientific fact) and of certain physical, chemical, or pathogenetic properties of that drug (which properties he knows as scientific fact)—he deduces from an *a priori* premise that the patient will be benefited by having produced in him one or more of the pathogenetic effects of the drug, or by having produced in his tissues, secretions or excretions one or more effects of the drug as a physical or chemical agent; or by having the drug brought to act as a physical, chemical, or dynamic agent upon some proximate cause of disease.”

Though this definition lack the merit of brevity, it has, I suspect (so far as concerns practice with drugs) that of accuracy. I would not for an instant urge upon any one an acceptance of it, though I believe it has been useful to me and may prove so to others. I note your quotation from the HOMEOPATHIC WORLD of April, 1902, upon definitions.

I shall be glad if you will publish this letter. In any case I thank you for courtesies already shown.

Fraternally,

CHAS. S. MACK.

La Porte, Indiana, U.S.A.,
June 13, 1904.

[We have pleasure in printing Dr. Mack's letter according to his request because it explains what he means by the term “Rational Medicine.” But we cannot help remarking that it shows an engaging degree of innocence on his part to expect that because he has explained it all before in a periodical in 1892, therefore his use of the phrase must be known to all the world !

It no doubt interests Dr. Mack to go on defining; but we really cannot afford any more space for this exercise of his, though we shall be glad to hear from him when he can produce some practical results—e.g., certificates from half a dozen allopaths to say that, as a consequence of having digested one or more of these miraculous definitions of his, they have been converted to really rational (*i.e.*, homeopathic) practice from Dr. Mack's “technically rational” medicine (*i.e.*, allopathy).—
ED. H. W.]

UNIT DOSE OF *BRYONIA*—CURE OF TOOTHACHE.

To the Editor of THE HOMEOPATHIC WORLD.

DEAR SIR,—A few months ago reference was made of a cure by a single dose of *Bryonia*. This reminded me of a cure made some forty years ago. A domestic servant of my grandfather's had suffered from facial neuralgia for two days. She was of a sanguine temperament, and that led me to select *Bry.*, though I do not think it was a remedy recommended for that complaint. I gave one or two drops of ϕ (?) on the tongue, and before getting out of the kitchen was told the pain had entirely gone. This was certainly the most rapid cure I have met with.

Yours truly,

BENJAMIN BOOTHROYD.

June 4th.

[*Bryonia* is a very good toothache remedy. Here are some of its indications: "Pain < from introducing anything warm into the mouth; > momentarily by cold water; > lying on painful side; < at night and by hot things; < from smoking or chewing tobacco.—Jerking pulling toothache."—ED. H. W.]

VARIETIES.

N-RAYS.—More facts about the new N-rays have been communicated to the Academy of Sciences. From experiments upon dogs it has been ascertained that the action of chloroform at the outset causes an enormously increased emission of the rays from the brain and spinal cord. Afterwards they rapidly diminish in intensity. Finally it was stated, and this was the most important point in the discovery, that the complete cessation of the emission of N-rays is an undoubted proof of death.—*Daily Telegraph (Paris)*, May 26, 1904.

A RECORD BIRTH-RATE.—Attention has recently been directed by Church dignitaries and others to the decreasing birth-rate and its attendant evils. It is interesting to learn that the highest birth-rate ever recorded in London or the country is notified this week by Dr. D. L. Thomas, Medical Officer of Health for the Borough of Stepney, who yesterday reported that in the parish of St. George's-in-the-East—the alien headquarters—the birth-rate for the past month reached the extraordinary figure of 60·8 per 1,000. That for London for the same period was at the rate of 27 per 1,000.—*Daily Telegraph*, May 20, 1904.

SALICYLATE OF SODA IN EXOPHTHALMIC GOITRE.—The benefit derived from the administration of salicylate of soda in the treatment of Basedow's malady is being continually corroborated by prac-

tioners in France. M. Chibiel, who recommended this treatment, reported lately four cases very amenable to the drug. He prescribed one drachm daily in Vichy water. The improvement was very rapid. M. Babinsky communicated to the Société de Neurologie at Paris three cases, of which two were accompanied with intense tachycardia, 120 to 140 pulsations. After a few months of the salicylate treatment the pulsations fell to 80 and the trembling disappeared. In the third case, where the only symptom was goitre, the gland entirely disappeared at the end of three months. No other treatment was employed in any of these cases.—*Medical Times*.

CERTAIN CEREBRAL SYMPTOMS OBSERVED DURING THE COURSE OF TREATMENT OF EDEMAs.—Dr. Merklen read a paper recently before the Société Médicale des Hôpitaux, of Paris, in which he related the histories of five cases of arteriosclerosis with renal insufficiency, where certain brain-symptoms were noted during the course of absorption of edema due of cardiac or hepatic origin. These symptoms consist of stupor, Cheyne-Stokes's breathing, delirium, confusion of mind, or agitation with anguish, or even of coma with general muscular rigidity, Kernig's sign and relaxation of the sphincters. One of his patients died. Three recovered, the symptoms having disappeared after a few days to three weeks; in the fifth they reappeared twice, to disappear after absorption of the edema. In this latter case the absorption was rapid and spontaneous, while in the others it was slow and brought about by remedies. One peculiar feature deserves attention, *i. e.*, that the edema was absorbed without the quantity of urine being increased. Therefore the fluid must have been retained in the blood from incompetency of the kidneys. These symptoms might be explained, as Andral had previously done, by a thinning of the blood, for he had produced similar ones by injection of water into the veins, or by a retention of excremental principles causing an autointoxication and edema of the brain. This latter hypothesis has been proposed by Vogel, Picard and Bartels to explain those attacks of convulsions which follow absorption of edema in cases of Bright's disease and which precede recovery. Prof. Eichhorst has observed a certain number of heart cases where delirium was brought about by absorption of dropsical effusions. Whatever be the pathogenesis of this condition, treatment should be directed towards overcoming retention and increasing supplementary excretion by blood-letting and purgation. Heart tonics and diuretics should not be discontinued on the appearance of these symptoms, for they are in no case responsible for these complications. This point has been especially touched upon by Prof. Eichhorst, who has seen them disappear on continuing the use of theobromine and digitalis. As to the prognosis, it is much better than would seem from the signs, if one judge from the number of recoveries. Dr. Dupré asserted in the discussion that such symptoms will disappear very rapidly if one extract a little cerebro-spinal fluid. Dr. Barth rather thought the symptoms to be due to retention of excretory products in the blood and depletive treatment to be indicated, as it seemed to do good.—*Le Semaine Médicale*, No. 3, 1904 (Frank H. Pritchard in *Hahnemannian Monthly*).

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MEDICAL AND SURGICAL WORKS PUBLISHED
DURING THE PAST MONTH.

- Appel (E. L. C.).** How to Become a Midwife, and the Legal Requirements under the Midwives Act. Cr. 8vo, limp. (Scientific Press. Net, 1s.)
- Baker (Wm. A.).** A Syllabus of Diagnosis. Fcap. 8vo, sd., pp. 107. (Homeo. Pub. Co. Net, 1s. 6d.)
- Beck (Carl).** Röntgen Ray Diagnosis and Therapy. 8vo. (S. Appleton. Net, 18s.)
- Berry (James).** A Manual of Surgical Diagnosis. Cr. 8vo, pp. 374. (Churchill. Net, 6s.)
- Berry (George A.).** Manual of Practical Ophthalmology. Illust. Cr. 8vo, pp. 590. (Pentland. Net, 10s. 6d.)
- Bickham (Warren Stone).** A Text-Book of Operative Surgery. Written for Students and Practitioners. 2nd ed. Illust. Roy. 8vo, pp. 984. (Saunders. Net, 25s.)
- Brain.** Volume. 8vo. (Macmillan. Net, 15s.)
- Calder (A. B.).** Questions and Answers on Midwifery for Midwives. With Syllabus of Lectures for the L.O.S. delivered at the Fulham Midwifery Training School. 16mo. (Baillière. Net, 1s. 6d.)
- Caldwell (R.).** The Prevention of Diseases in Armies in the Field. Cr. 8vo. (Baillière. Net, 5s.)
- Cowperthwaite (Dr. A. C.).** A Text-Book of the Practice of Medicine, including a Section on Diseases of the Nervous System by Dr. N. B. Delamater. Cr. 8vo, pp. 1,039. (Homeo. Pub. Co. Net, 35s.)
- Davis (Edward P.).** Obstetric and Gynecologic Nursing. 2nd ed., revised. 8vo, pp. 402. (Saunders. Net, 8s.)
- French (J. M.).** A Text-Book of the Practice of Medicine. 8vo. (H. Kimpton. Net, 16s.)
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- Leube (William von).** Medical Diagnosis. Authorised Translation from the 6th German ed. 8vo. (S. Appleton. Net, 25s.)
- Musser (J. H.).** A Practical Treatise on Medical Diagnosis. 2 vols. 5th ed. 8vo. (H. Kimpton. Net, 36s.)
- Nothnagel (Hermann).** Diseases of the Intestines and Peritoneum. Edit., with Additions, by H. D. Rolleston. (Nothnagel's Practice.) Roy. 8vo., pp. 1,032. (Saunders. Net, 21s.)
- Owen (E.).** Cleft Palate and Hare Lip. (Medical Monograph Series.) Cr. 8vo. (Baillière. Net, 2s. 6d.)
- Paterson (A. Melville).** The Human Sternum. Three Lectures delivered at the Royal College of Surgeons, England, November, 1903. 10 Plates. 8vo, pp. 89. (Williams and Norgate. Net, 10s.)
- Rolleston (H. D.).** Clinical Lectures and Essays on Abdominal and other Subjects. 8vo, pp. 184. (S. Appleton. Net, 5s.)
- Simon (C. E.).** A Manual of Clinical Diagnosis. 5th ed. 8vo. (H. Kimpton. Net, 21s.)
- Taylor (Edward H.).** A Treatise on Applied Anatomy. Illust. Roy. 8vo, pp. 766. (C. Griffin. Net, 30s.)
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- Walker (E. W. Ainley).** The General Pathology of Inflammation, Infection, and Fever. Being the Gordon Lectures for 1902. Cr. 8vo, pp. 272. (Lewis. Net, 4s. 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, 8, Bolton Street, Piccadilly, W.

Letters to the Editor requiring personal reply should be accompanied by stamped directed envelope.

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.

Dr. Dyce-Brown, London.—Dr. C. S. Mack, La Porte, Indiana, U.S.A.—Mr. W. F. Bill, Massingham.—Dr. Burford, London.—Dr. Tyler, London.

BOOKS AND JOURNALS RECEIVED.

Hom. Review.—Zoophilist.—Mind.—Revist. Hom.—Med. Times.—Allg. Hom. Zeit.—H. Monatsblätter.—The Chironian.—La Propaganda Homeopatica.—Maanedsk. f. H.—H. Maandblad.—La Homeopatia.—Ind. Homeopathic Review.—Hom. Envoy.—The Individualist.—Medical Century.—Rev. Hom. Française.—H. Recorder.—Wjestnik H. Med.—N.A.J. of H.—Clinique.—New Eng. Med. Gaz.—L'Art Médical.—Amer. Medical Monthly.—University Homeopathic Observer.—H. J.

Obst.—Med. Adv.—Annaes de Med. Hom.—Amer. Phys.—Hom. Eye, Ear, and Throat J.—Hahne-mannian Mon.—Pacif. Coast Jour. of H.—Zeit. des. Berl. Verein. H. A.—Calcutta Journal of Medicine.—Jour. B.H.S.

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THE
HOMEOPATHIC WORLD.

SEPTEMBER 1, 1904.

HOMEOPATHY AS SCIENCE.

It hardly seemed possible that anything new could be produced in the polemics of homeopathy, but this achievement has been reserved for Dr. BURFORD. In his presidential address, the first part of which appeared in our issue of last month, Dr. BURFORD has brought to light the testimonies of BAIN and MILL to the logical and philosophical strength of our position, and so has done a real service to the fighting power of homeopathy. Both these masters took examples from the practice of medical therapeutics as illustrations of their arguments, and both unconsciously postulated that in order to give therapeutics a scientific basis something ought to be done which, as it happens, had already been done by HAHNEMANN before their time.

BAIN took Quinine as his example. "That Quinine cures a fit of ague," says BAIN, "is an empirical law." By that he means "An uniformity established by experience." He regarded as a disadvantage the inability to resolve this into "a more general uniformity." "We must," says BAIN, "somehow arrive at inductive generalisations, and next prove them when arrived at." When this has been arrived at—when an empirical law has been resolved into more general laws or into highest laws—it is termed a "derivative law."

Now, although this does not express much to the "man in the street"—or even to the "medical man in the street"—it is important for the reasoner to know that HAHNEMANN followed the rules of the strictest logic in working out his problem. He also took Quinine—or the Bark from which it is obtained—as his example; he experimented with it on his own healthy body, and he deduced a higher grade of law out of empiricism in the very way BAIN says it should be done.

MILL, like BAIN, used medicine to illustrate his thesis. He chose medicine because it afforded a problem involving many complications. Is or is not some particular medication a remedy for the disease in question? MILL says there are three possible ways of arriving at a solution:—(1) Simple observation. (2) Experiment—*i.e.*, trying the drug in different circumstances of disease and comparing the results. These are the well-known allopathic ways, and are unequivocally condemned by the logician. But there is also (3) the method of *deduction*:—

"The instrument of deduction alone is adequate to unravel the complexities proceeding from this source. . . . If, for instance, we try experiments with mercury upon a person in health, in order to ascertain the general laws of its action on the human body, and then reason from these laws to determine how it will act upon persons affected with a particular disease, this may be a really effective method, but this is *deduction*."

Of course, neither BAIN nor MILL knew anything about homeopathy. All they knew and all they were writing about was logic and logical methods. And to these methods HAHNEMANN conformed and so verified their logic before they worked it out.

But HAHNEMANN did much more than ever they dreamed of. Neither BAIN nor MILL got further than thinking of diseases and remedies for diseases. It never occurred to them that it was possible to discover a method whereby a remedy might be found, not for abstract diseases—

diseases in the abstract don't exist,—but for any case of any disease. This is the achievement of HAHNEMANN—he revealed an art and a science at the same time—and if he could not convert a non-reasoning medical world of blind imitators into rational beings and artists at one stroke, he is not to be blamed for that.

As far as it is possible to provide for the treatment of a specific disease HAHNEMANN has met the requirements of BAIN and MILL, as Dr. BURFORD has shown in the case of cholera. Before HAHNEMANN had seen a case of the disease from the description of cases which reached him he was able to name the remedies, and these remedies have proved the mainstay of homeopaths in the treatment of cholera ever since. But epidemics vary as cases do, and the remedies which are successful in one epidemic are not suited to the next epidemic, though it may be called by the same name. But HAHNEMANN'S science and art provide against the changes in type and character of epidemics, as well as against differences in individual cases, and this is far more than ever BAIN or MILL imagined.

Dr. BURFORD referred to the ancient dispute about the Latin formula which HAHNEMANN used to express the homeopathic rule of practice. As it is better, when possible, to avoid dead languages and use living ones we will confine ourselves to English. The *Rule* of practice is "Let likes be treated with likes." The *Law* of Similars is "Likes cure likes." If HAHNEMANN had had any doubt or hesitation about the truth of the fundamental *law* that "*Likes cure likes,*" there would be no sense or reason in his *rule* directing the medical world to treat likes with likes.

Excellent use was made by Dr. BURFORD of the most recent discoveries in relation to radium to illustrate the potencies of homeopathic attenuations. For generations the world has known that a grain of musk can give off emanations perceptible to the nose, for years together

without appreciably losing weight. But of this the world took no notice. Radium, however, appeals to a more respectable sense, the evidence of which is not to be ignored. This is how the case is stated by Dr. BURFORD :

“These radio-active bodies are continually forming in their own interstices a product, which in the case of radium is many thousand times more active than radium itself; which, moreover, induces the same radio-activity in all bodies exposed for some time to it, and which, to the extent of $\frac{1}{100000}$ th of its original potency, remains a new and permanent property of the acquiring body. These processes are above and beyond the cognisance and scope of the most refined chemical methods. Here is a demonstration: A tube out of which a perfectly invisible emanation from radium, and possessing absolutely no weight, has been emptied, is next washed out with an acid; this is evaporated, leaving a radio-active residue more potent in some respects than radium itself, requiring two hundred years to decay to half value. Moreover, in rooms where radium has been exposed to the air, an invisible radio-activity, perfectly undetectable by the balance or the spectroscope, is produced on the walls of the apartment, persisting even though the radium has been removed for some time.”

It is possible that even this will not suggest anything as to the power of infinitesimals to the medical man-in-the-street: but the other man-in-the-street is not so impervious, and for our part, we have much more hope in the intelligence of the latter.

GAULTHERIA IN GASTRALGIA.—Mr. A. B., aged 56, had gastralgia, with sensation of clawing in epigastric region; sharp pains extending from the stomach and the back. Attacks occurred daily at intervals of two or three days. Worse after least food or cold water. Not relieved by hot-water bottle or other remedies. *Gaultheria* 1x gtt. vi. gave ease in a few minutes. The oil was given on the occurrence of the next attack, with speedy relief after one dose, and subsequently after three doses. At the time of writing there had been no attack for three months.

Mr. A., aged 40, who had for several weeks been mentally overtaxed and exhausted, complained of the same gnawing, tearing, unbearable pain, worse after eating, of gastralgia. *Gaultheria* 1x was given as in the preceding case, with immediate relief, and in two weeks the attacks ceased. (These cases are reported by Dr. T. L. Bradford, who thinks *gaultheria* specially indicated in gastralgia from exhausted nervous energy.—*Homeopathic Recorder*, March, p. 107.—Ed. J. B. H. S.)

NEWS AND NOTES.

THE BITTER CRY—WANTED, HOMEOPATHIC DOCTORS!

EVERY month we have appeals from some quarter or another to send down a good homeopathic doctor. In every case the answer is the same—There are none to spare! The latest appeals have come from Taunton, West Worthing, and Scarborough—which has just lost its oldest homeopathic practitioner in Dr. Flint. The homeopathic laity must combine their forces to help the British Homeopathic Association to found its complete school, and then there will be a chance of having all demands met.

COAL DUST, CLAY DUST, AND CONSUMPTION.

MR. E. B. IVATTS, of Birmingham, has sent us the following interesting letter from a recent issue of the Birmingham *Daily Post*:—

“COAL DUST AND CONSUMPTION.

“To the Editor of the *Daily Post*.

“SIR,—On leaving school I went to one of my father's collieries at Dudley. In walking to and fro I had to pass through the late Mr. S. H. Blackwell's works at Russells Hall. Consequently I came face to face with his and my father's workmen. I was much struck at seeing some jolly, florid, and well-set-up men, as a contrast to others, who were sallow, shrunken, and ashen-looking.

Asking one of the 'butties' the reason, 'Oh,' said he, 'those that work in the coal are always healthy, as the dust is free and gritty, and helps the lungs. But those that work in the ironstone get their lungs clogged up with clay dust.'

“I found it was well known in the district that coal-miners lived much longer than ironstone-miners, barring accidents, to which the former were more liable.

“This goes rather to prove the efficacy of coal dust for consumptive people; and a question arises—Are those who live in districts where the dust is argilliferous more subject to consumption than those in verdant or gritty soil districts?

“GEORGE JONES.

“19, Greenfield Crescent, Edgbaston, August 22, 1904.”

CONSUMPTION AND CANCER.

A CORRESPONDENT writes to the editor:—"Apropos of the remark contained in the preface to your work on *Rheumatism and Sciatica*, that you have found there was consumption in the family history of several cancer patients, I may mention that I am informed by a lady whom I am treating for cancer of the rectum that her maternal grandfather died of rapid consumption of the bowels, and that her mother died of abdominal (womb) tumour at the age of 57. A brother of hers also died of rectal cancer. The patient's father died of abdominal carcinoma, aged over 70, and his mother died of galloping consumption.

"Referring to the statement in the *Dictionary of Materia Medica* that *Tuberculinum* is the best antidote for influenza poisoning, I may say that a gentleman told me recently that his father-in-law died at an advanced age of abdominal tumour, the existence of which was not known until in his old age he had an attack of influenza."

BACTERIA AND THE HEALING OF WOUNDS.

MR. J. SUTCLIFFE HURNDALL, M.R.C.V.S., writes to us from Sussex Villas, Kensington, W.:—"I assume that the prophetic probabilities concerning microbes and the healing of wounds, as mentioned on page 345 of the HOMEOPATHIC WORLD for August, are already known to you as established facts, and that your reason for putting the matter in this form is prompted by the fear of shocking your *confrères* were you to put it in a positive form. As you are no doubt aware, Dr. Granville Bantock, in his interesting brochure, *The Modern Doctrine of Bacteriology*, has in unmistakable language made this claim for bacteria."

X-RAYS AND LEUCHEMIA.

THE *Daily Graphic* about the end of July published the following note:—

"Professor Bozzoli, Director of Clinical Medicine at the University of Turin, has communicated to the Royal Academy of Medicine his observations on the surprising efficacy of the action of X-rays in the

treatment of certain serious diseases of the blood. He stated that he had succeeded in curing by X-rays a case of leuchemia which was considered incurable.”

FROM ANIMALS TO PATIENTS.

GERMANY rejoices in a “free vivisection-table,” as is well known. Freedom of this kind to experiment on animals at will leads inevitably to experiment in hospital, for the simple reason that experimenting on animals can never be conclusive till the final experiment has been made on man. Man is a long-suffering creature as long as animals only are in question; but he sometimes wakes up when his own skin is threatened, as witness the following from the Berlin Correspondent of the *Daily Telegraph* (July 20th):—

“EXPERIMENTS ON PATIENTS.

“REMARKABLE REVELATIONS.

“Much indignation is expressed here at the revelations regarding the practices of Professor Jacob, a leading physician in the consumption department of the great Charité Hospital in this city. It seems that in a recent discussion at the Medical Association Dr. Jacob described certain experiments he had made on tuberculous patients, in the course of which he had injected certain medicines directly into their lungs. At yesterday's meeting of the Association for ‘Innere Medizin,’ one of the most powerful medical bodies in the empire, Professor Jacob was attacked by numerous leading authorities for conducting experiments that were needless and dangerous to the patients. It came out that the experiments resulted in the patients growing worse, and that this fact, and others showing his experiments in an unfavourable light, were suppressed by Dr. Jacob in his public report. The operations were carried out without sufficient reason, and the throat was cut open for injection purposes, when the object might have been accomplished through the mouth. Professor Jacob tried to defend himself against attacks from all sides, but he was howled down, and the meeting broke up in great tumult. An uneasy feeling possesses the public that the experiments being conducted on the sick in this great public institution, especially on patients approaching death, are altogether unwarrantable.”

ILLNESS OF DR. DUDGEON.

OUR readers will learn with keen regret that Dr. Dudgeon is at present incapacitated by severe illness, which originated some time back in a sharp attack of influenza. Dr. Dudgeon has the sympathy of every lover of medical freedom and progress and the heartiest wishes for his restoration to health.

ORIGINAL COMMUNICATIONS.

WHAT IS DYNAMISATION ?

By JOSEPH DRZEWIECKI, M.D.

Late Physician in Ordinary to the University Clinic in the Holy Ghost Hospital, Warsaw.

THE doctrine of dynamisation presents one of those questions that take away the ground under the feet of the commencing homeopath, and furnish much material for dispute and derision to enemies of homeopathy. It is difficult to understand at once in which way apparently indifferent remedies as Charcoal, *Graphites*, *Silicea*, &c., possess in high dilutions precious healing properties; or in what manner common table salt, which we use every day, not at all in homeopathic doses, has no effect in some diseases unless it is dynamised.

I was myself in doubt for a certain time whether the doctrine of dynamisation was not a delusion on the part of homeopaths, but I was soon convinced by practice that it is based on facts, and that was sufficient for me.

Let me here briefly state a case from my practice, showing clearly the power of dynamised drugs.

In June, 1903, I was called to a patient who had been given up by the allopaths. The exact anamnesis showed: The patient R., thirty-seven years old, wife of an engineer, had passed her childhood in Maltepe (Asia Minor), afterwards in Tashkent, and having married in 1878 lived with her husband near the Baikal Lake. As far as she could remember she very often suffered from intermittent fever, and was treated with large doses of quinine; in general she took very much quinine in all her life. In April, 1903, she was operated on, on account of fibroma of the uterus, and it was entirely removed. She improved, but at the end of May suddenly fever set in, and the temperature rose to 40°C. and more, falling to 37·8–38°C. after profuse perspiration or became normal for a time after quinine. Such high temperature lasted three weeks, and when at the same time an abscess formed on the abdomen in the place of the surgical incision, the allopaths declared it to be general infection of the blood and communicated their opinion to her family, who then resorted to homeopathy.

It was clear from the narrative of the patient that she almost from childhood took large doses of quinine, therefore the first remedy which I chose for her was *Natr. mur.* 6, every three hours two grains to be taken. After twenty-four hours the temperature fell to 37·8°C., and the patient slept better for the first night since three weeks; evacuations spontaneous and abundant. The fourth day the temperature was already 36·7°C., and did not rise above the normal. She got up to-day, as I know from her family, and feels quite well.

Thus the common table salt which she used every day with the food had no effect whatever, and in order to awake its salutary action it was necessary to subject it to dynamisation, and then all its healing properties proved to be magical.

This striking case as well as the constant reproaches from the public and my university friends, the allopaths, prompted me to consider this question more profoundly in order to prove clearly to them the reasonableness of this doctrine, which in their opinion is deprived of a scientific basis, common sense, and presenting in itself quite sufficient reason for not becoming a homeopath, or a follower of homeopathy.

Every constant phenomenon must have for its foundation a certain law; therefore the dynamisation of drugs—fact confirmed by the homeopaths of the whole world—must also have in itself a certain law. For a long while I could not explain to myself the fact of the dynamisation of drugs, and the existing explanations were not convincing to me; but when recently reading an article on “*Radium*” in the *New York Journal of Homeopathy*, I was struck that radium, not losing anything of its substance, gives the water, in which it is placed in a soldered tube, all its properties, and this fact reminded me of Reichenbach’s “*Od*” and his experiments, and made me think whether there does not exist a constant law.

Reichenbach,* relying on his 13,000 experiments as to the “*Od*,” asserts that every body in its natural state emits a radial force which by sensitive persons may be felt or even seen in complete darkness. This view of Reichenbach quite agrees with the teaching of Paracelsus

* *Sphinx*, 1892; *Theosophist*, 1893, i.

and other ancient scientists, who assert that every body emits emanations, called "aura" by them. The observations of Dr. Luys* upon the action of drugs at a distance, observations which can by no means all be explained by suggestion, prove also to a certain degree the existence of an emanating force. Dr. Buchanan's † experiments prove the same. "These experiments were carefully performed; the substance either concealed from sight, or enveloped in paper, and sometimes no person present knew what substance was being tested until the close of the experiment. Out of a class of one hundred and thirty students at the Electric Medical College, Cincinnati, forty-three of them signed a declaration that when various medicines were enveloped in paper, so as to be unknown to them by holding them in their hands from five to twenty minutes, the distinct effects were proved upon them similar to those which would have been produced by the action of the same medicines administered in the ordinary way." Dr. Buchanan adds that "when an emetic was the subject of the experiment, the individual was able to avoid vomiting only by suspending the experiment."

The experiments with radium prove that its radial force completely penetrates every particle of water with medicinal force. Hahnemann asserts that by means of triturations and concussions the medicinal virtue is developed and penetrates the essential nature of the substance; in other words, that the radial force of the medicine is augmented by trituration and concussion. Cooke's experiments undoubtedly prove that the more we diminish the quantity of the gases on the scales, and the more we rarify them, the more they get new and very remarkable properties.

The experiments published in the *Journal of the Chemical Society* (June, 1889) prove that the fluorescence of fluids is augmented in proportion to their solution. Thus the fluorescence of the ammoniacal salt of fluorescence in saturated solution is equal to zero, or it is so small that it is difficult to remark it. If, however, we commence gradually to add the water, the fluorescence appears distinctly with solution 1:25, and rapidly

* *Les émotions chez sujets en état d'hypnotisme.* Paris, 1887.

† Buchanan's *Journal of Man*, vol. i. pp. 51-57; also Denton's *Soul of Thinks*, vol. i. pp. 32-35.

augmentations with further dilution, beginning from 1 : 3200 and, as the experiments prove, remains constant to dilution 1 : 6½ millions. The similar results were received with solution of red Magdala, however with the difference that it was impossible to receive the concentrated solution of this preparation, and for this reason it was not possible to remark the beginning of the fluorescence.

All the above facts enable us to conclude that the homeopathic drugs are not only physical dilutions and triturations, but that—thanks to their mode of preparation—the radial force is developed, and in consequence of it also their medicinal proper virtue. If we take a quantity of water in which for a certain while we steep a soldered glass tube containing radium, and shake it, the water will possess all the properties of the radium. To speak in this case of particles of the radium or endeavour to measure them would be simply wrong. The same we may say about homeopathic dilutions. In the third dilution it is not the millionth part of the medicine that acts as many suppose, but the radial force.

In this manner the teaching of Hahnemann that trituration and concussion develop the medicinal virtue of the drugs is one of the many proofs of his subtle genius.

EXPERIENCES WITH UNIT DOSES—*HYACINTHUS ROMANUS*.

By M. LE H. COOPER, M.D.

THE following case is that of a farmer, aged 63, who first consulted the late Dr. Robert T. Cooper on the 1st of April, 1903, suffering from what had been diagnosed to be a malignant tumour of the stomach.

The notes taken on that date show that the tumour was first discovered at the end of October, 1902. He had consulted very many medical men, and notably a well-known specialist of Birmingham, but, owing to the extent of the growth, he was strongly advised not to undergo an operation. He stated that he had taken nothing but liquid nourishment and an emulsion of petroleum since November, 1902. From eighteen years of age until the present illness he had enjoyed good health, had been in

many accidents, and thought his present condition might have been brought on by one of these. He had not been accustomed to wear a belt, nor apparently was there any history of local pressure, and he had not been vaccinated since infancy. He had never suffered from skin disease.

Present condition: Suffers from severe pain of a dull, heavy character, especially after food, the position of the pain being referred to the left side of the umbilicus. It is always present, but is worse from 4 to 8 p.m. At times he has a throbbing pain in the pit of the chest. He is always much relieved by lying on the back, and has not much desire for food. The bowels are very confined, and he has a good deal of flatulence at times. A further note is made to the effect that on examination a distinct hard, rounded swelling could be felt on the front of the stomach at its lower part.

He was put on ordinary diet, beef being limited, and *Lycop. φA* was prescribed.

April 7, 1903.—Is about the same. Bowels very confined. *Lycop. 3x*, gr. iij, unit dose.

April 17th.—Has less pain and feels the lump less, but has dyspnea on walking about. Bowels not mentioned. Nil.

May 1st.—Pain coming again in the chest. *Bowels not so confined.* The drug here prescribed is undecipherable.

May 19th.—Feels very weak, has more pain. *Ornith. um. φA.*

June 11th.—*Is better. Not so much pain.* Is still < 4 p.m. to bed-time. Breathing is still bad. *Bowels are better. Ornith. lanc. φA.*

July 6th.—Feels very bad and breathing bad, but *not so much pain last week. Rubus. frut. φA.*

July 28th.—Has had more pain the last two weeks. Pain for several weeks before, and this continuing has made him feel weak and low. Breath short, but not offensive. He takes his food all right. *Bowels regular*, but sleep is not very good, and he is irritable.

This was the last note entered, and on the 29th of September, 1903, he first came under me. I found him to be a man of medium height and dark complexion, but weak and badly nourished. He complained of a dull, heavy pain, chiefly located to the left of the umbilicus. It was always present, but was < after food, and tea

seemed to <. As before, it was generally < from 4 to 8 p.m. *Bowels now regular*, though prior to coming under treatment they had *always* been very confined. He often suffers from retching in the morning. He states that for a few weeks after coming under treatment he felt worse, in so far that he felt more depressed and suffered from sleeplessness, but that he then began to feel better.

On examination : A tumour could be felt in the epigastrium in the middle line, the position of which suggested its seat as that of the stomach near the greater curvature. Judging by the description of its characters, as previously given, it had apparently become less circumscribed than before, and it was in consequence difficult to define its size accurately, but it could be roughly put down at about four inches in diameter. Unfortunately the opportunity of examining it again was denied me, as, owing to the patient living at a distance, the treatment had to be continued by correspondence. I commenced by administering *Ornith um.* ϕA .

October 24th (report by letter).—"Not so well; was very ill for a few days after the dose. For one thing *he could not remember anything or how to do things*. Now better in this respect, but the pain in the stomach is very bad. Is not sick, but food seems to go against him, so gets weaker and loses weight. Cannot sleep. Breathing is very bad if walks a short distance." *Lycop.* 3x, gr. iij, unit.

November 17th (letter November 15th).—"Is very little better taking the three weeks through. *Did not have so much pain for about four days last week*. Says his chest has been the worst lately (by this is meant the dyspnea on exertion.—M. Le H. C.). Is very depressed at times." *Grat. off.* ϕA .

December 12th (letter December 11th).—"Still keeps about the same. *For a few days last week was freer from pain*, but it does not last. The last three days has been very bad again in stomach. Comes on in the afternoon about four o'clock and lasts all the evening, and his breath is very short. Has no cough."

It then occurred to me that in view of the evident aggravation from the *Ornith. um.* before, it might be given again with the hope this time of amelioration. *Ornith. um.* ϕA .

My hopes were confirmed, for in a letter dated June 8th, 1904, it stated that "*he was better for a fortnight after the dose, but has had more pain the last week. Has had a heavy cold for one thing, which is getting better. Appetite bad. Does not sleep well. Bowels pretty regular. On the whole thinks he is better.*"

The general catarrhal condition led me to now give *Scilla hyacinthoides* φA.

February 5, 1904 (by letter).—"Has had less pain the last fortnight than he has had at all, but his breath is very short, and he cannot walk very far." *Hyacinth. Rom.* φA.

March 4th.—"Did not write last week, for Mr. — was so much better he thought he might wait another week. He has had scarcely any pain the last month, and is better in every way. Can take his food very well and get about. Of course he felt tired, but this we must expect. Every one tells him he is looking quite well again. He thinks that if he had another dose he could go on for a time without medicine. Then if he does not feel so well he can write again." *Hyacinth. Rom.* φA.

I did not hear from him again, so concluded that he had quite recovered. This was confirmed by another patient of mine, who wrote to say that Mr. — had called upon her and said that he considered himself quite cured. To make certain, I waited till July, and received letters in reply, the last being dated August 11, 1904, to the effect that "*He had not felt any return of the old trouble, in spite of the fact that he had had an attack of influenza in May*" (which might have been expected to wake up the condition again if he had not entirely recovered from it, as one only too often finds to be the case with growths of this nature). "*He is looking very well with a clear complexion, is bright and cheerful, and has gained in weight. No lump can be felt now.*"

Notes.—Although *Scilla hyacinthoides* and *Hyacinthus Romanus* stand out very prominently in the above case, from the immediate and definite way in which they cleared up the symptoms, still I think that the point most brought out is the effect of the Liliaceæ, taken as a whole on these gastric tumours.

Of course it can be said that it was not proved that this particular growth was malignant; and certainly, as no opportunity for microscopic examination presented itself,

one cannot be absolutely certain of its histological characters, but one can say that *clinically* it was malignant in that it was sapping the vitality of the patient, and gave every evidence of finally depriving him of life. One is so used to seeing tumours yield to homeopathic treatment that one is apt to forget that the allopathic school will not allow for a moment that any tumour, malignant or otherwise, can be acted upon by medicines. So that from their point of view at least, cases similar to the above are marvellous enough even if their malignancy be denied.

The impossibility of its having been a malignant tumour is by no means so certain, in view of cases published by the late Dr. Robert T. Cooper, and notably that in which a gastric cancerous growth *which had recurred after operation* was completely cured by similar treatment.

The effect one of the doses of *Ornith. um.* had on the brain is interesting, but I have in no other case found a similar train of symptoms follow its exhibition, nor have I as yet turned this observation to account.

THE LAW OF SIMILARS IN RELATION TO SCIENCE, POLITICS, CULTURE.*

By GEORGE BURFORD, M.B.,
Senior Physician for Diseases for Women to the London
Homeopathic Hospital.

PART II.—POLITICS.

“SIMILIA SIMILIBUS CURENTUR” AS POLITICS.

“The art of healing does not consider the interest of the art of healing.”—PLATO (*Republic*).

§ I.—Let us now transport ourselves from the philosophic detachment of the groves of Academe to the more robust and strenuous life of the Agora. Descartes, you will recall, secluded himself for nine years, and thought the time none too long to assure himself of the validity of his first principles. Though I have not invited you nor myself to so drastic a course, yet right

* Being the Presidential Address delivered before the British Homeopathic Congress, at the Session of 1904.

reason affirms nothing is prolix and nothing verbose that eliminates a too hasty assurance, or that imparts in time of crisis a steady confidence in the sure foundations of our procedure.

Now, in considering the function of *Similia* as Politics, I frankly adopt the democratic standpoint, and hold that all trained minds may properly discuss and legislate on the various practical issues known as Medical Politics. These, in fact, are the intimate concern of all citizens of the State; and Plato was evidently of the same mind when he made Socrates say that the healing art does not exist for the benefit of the healing art. On the other hand, it were absurd to pretend that the light of nature is a safe guide on questions of science, often extreme in their complexity. Reliable deliverances in any department of science or letters—be it engineering, or medicine, or radio-activity, or the functions of the genitive case—can only be made by experts qualified for the task. But when we leave the purely academic plane and descend into the arena of practical application, then the matter becomes one for men of affairs; and it is to men of affairs—and are we not all such?—that this section of my address is devoted.

THE ESSENTIAL ELEMENT IN OUR POLITICS : OUR SERVICE TO THE COMMUNITY.

§ II.—Our politics then deals with the services our profession can render to the State and to the individual. Old Homer touched the true note when he sang—

“ A wise Physician, skill'd our wounds to heal
Is more than armies to the public weal.”

So also Plato, whose warrant for the healing art is the service it can render to the Commonwealth. And these Greek keynotes have the right ring. The honour and renown accorded to a liberal profession is not for the magnificence of its own establishment, or the splendour of its own resources, but for the serviceableness of it and these to the nation. Such are the politics of all liberal professions, and of the medical profession among them—essentially altruistic and national. The whole question has so often been adjudged on a totally false issue—the prior claims of our academic order.

THE DOUBLE FOUNDATION OF OUR POLITICS: I. OUR SERVICE TO THE STATE AND THE INDIVIDUAL.
II. OUR SCIENTIFIC SERVICE TO OUR PROFESSION.

§ III.—The foundations of our politics are thus dual, and it is essential to see that both are well and truly laid. On the one part is our Academic foundation, and the necessity for seeing that we build on the solid ground of nature. On the other part is our civic foundation, whose rule of construction is *salus populi suprema lex*, and the necessity for seeing that this is grounded in the necessities of the Commonwealth. The broader we lay the foundations of our politics, the more and more will they be implanted on a national basis, and the less and less correspond to the limited interests of an academic cult.

First, then, dealing with that element of our politics on which we are all adjudicants—on *Similia* as one of the public interests. Whatever lessens or tends to lessen the duration of disease; whatever preserves lives valuable to the family or to the national interest; whatever lowers the cost of illness, entirely wasteful from an economic standpoint; whatever does these not only enriches the State, but is insurance for individual safety and well-being; and to the extent it does these demands the support of every citizen of the Commonwealth. And these we claim are the daily issues of *Similia*.

THE EXTENSION AND DEVELOPMENT OF HOMEOPATHY IN THE NATIONAL SERVICE.

§ IV.—Now, strictly adhering to our axiom, which is that we build up the powers of homeopathy in the service of the nation—not its converse, that we narrow down our public activities to the strict limits of the interests of homeopathy—it is, I say, with this wider outlook, this national well-being, that we, from a homeopathic standpoint, have to do. But our propagandism, like that of the great religious bodies, must perforce be a voluntary one.

First, then, I attach the greatest importance to the forceful backing of an informed public opinion. Without this we can do nothing of consequence. This is the spade work we must set ourselves to, stating in substance and proving in fact that our mortality bills are less—often much less—than those of others, and our average duration-period of illness materially abbreviated for curable diseases. These facts have to be brought home to those most concerned, and this can be done

in perfect taste by literature of the explanatory, not of the polemic, kind. All great movements have, and must have, the literature of their subject dealing with elementary facts and first principles; and it is this type of effusion, well written, compact, and informing, that the national intelligence requires of homeopaths.

But the most valuable work in extending the sphere of action of homeopathy is without doubt done by those institutions—Hospitals, Dispensaries, Sanatoria, Convalescent Homes—which testify year in and year out to the living and moving force of homeopathy in our midst. There is not only the most excellent tale of good work done which, ever increasing, tells its own story; there are the outward and visible signs of bricks and mortar—auxiliaries of the most potent kind in extending the practical usefulness of homeopathy among the people. Here I may place that invaluable adjunct, the assistance of trained nursing—training which can only be effected in hospitals, and which is of untold value to the homeopathic practitioner in the conduct of his work. I would strongly urge that in every town where two or more homeopathic practitioners reside, that one or other of the larger institutions—Hospital, Sanatorium, or Convalescent Home—be established; *that it is in ways such as these that homeopathy is to be made most serviceable to the community, and that it is its serviceableness to the community that controls the present and future alike of our form of practice.*

Here I may call attention to the important and necessary function of homeopathic chemists in the permeation of national life by homeopathy. The part played by pharmacists in homeopathic history has been an important one, and should be still more so. Domestic practice is an art which probably every sane adult in the British Islands finds requisite and necessary; and I am inclined to think that in these latter days sufficient importance is not attached by ourselves to this most necessary and universal procedure.

STATE SERVICE AND PUBLIC OPINION.

§ V.—Only a forceful public opinion, based on the obvious services homeopathy is rendering in civil and unofficial life, can break down that narrow exclusiveness which proscribes homeopaths from the military and naval professions, or which excludes them from the civil advisory functions which the State or the municipality requires from responsible medical advisers. I can recall Mr. Knox Shaw successfully fighting his battle against sectarianism a quarter of a century ago. We have all sympathetically watched the similar firm stand of our former colleague, Mr. Gerard Smith, now of the Antipodes; and in

recent times also the virile and persistent claim for the right of private judgment—backed by results—maintained by Colonel Deane, which has won for him the admiration of all who value consistency in an able man.

These, however, are unit instances; a living and moving national force would not countenance official obstruction; and the arbitrament of Parliament—that focus of national life and public opinion—would deal shortly with red-tapeism and the routine of bureaucrats.

And here, again, it is only the usefulness of homeopathy to the nation than can create that forceful public opinion, without which, I repeat, we can do nothing.

THE "MANUAL OF HOMEOPATHIC POLITICS."

§ VI.—In the British Army there is issued to each individual qualifying for the strenuous life a manual called the *Soldier's Handbook*. Here the lines of conduct and directions for procedure are laid down, so that each may develop to the utmost his own personal powers, and know also how to proceed to make the most out of conjoint action. Thus the importance of the soldier to himself is maintained, and all the ample and more extensive issues of co-operation in action are developed to the full. Permit me to express a wish that a *Guide in Politics*, or *Manual of Procedure and Co-operation*, could be drafted for the common use of ourselves, who daily wage a more peaceful yet a more incessant war.

Among the axioms and postulates of such a Handbook conceivably might occur the following:—

(a) Each homeopathic settlement may be regarded as an outpost of the orthodox medicine of the future—a focus of homeopathic activity—a sphere of influence for the development of a public homeopathic interest.

(b) A homeopathic propaganda is of many sorts; the simplest and readiest is the information propaganda—the statement in simple black and white of what homeopathy is and on what it is based, of what it does and can do.

(c) A much more important outpost propagandism is the testimony of public institutions—hospitals, dispensaries, sanatoria, convalescent homes, &c. These potently demonstrate the benefits of homeopathy to a much wider circle than the limits of a private *clientèle*, and lay hold of the public imagination much more effectively.

(d) Another and most important propagandist measure is the training of nurses. This is an invaluable and too little utilised method of consolidating a homeopathic position; this

nursing should be made readily attainable within a wide circuit.

(e) Co-operation and co-fraternity among homeopathic professional men should be developed to the utmost, whether by conjoint work in hospital or dispensary, by hospital federation, by Congress visits and the practical results of these, and by similar methods of conjoint action.

(f) It is always advisable to perseveringly and enthusiastically enlist the interest and the human sentiment of homeopathic patients and friends in its public work. As is the personal note of the leader, so is the personal response of the adherents.

II.—OUR INTERNAL POLITICS: (a) THE NECESSITY FOR A FULL ACADEMIC EQUIPMENT.

§ VII.—Next, strictly adhering to our bi-lateral basis, the problems constituting our internal politics come up for consideration, and impress the insistent necessity for our full academic equipment.

Fortunately, the proper way of teaching science has been fully worked out in the arduous pioneer labours of the last half century; it insists on the close correlation of subjective knowledge and objective knowledge, that the student shall both hear for himself, as well as see and do for himself; that any divorce between the library and the laboratory is fatal to the work of both.

It is not here necessary to dilate on the immense value of systematic *viva-voce* education as against the partial and disproportionate results of self-education; this has been recognised since the University world began. Books do not educate: they merely inform.

§ VIII.—If the dominant note of our work in the State be the service we can render to it and its members, so also is the dominant note of our academic work the service we can render to our profession and our colleagues. In both instances I maintain again, *it is not our own status or our own secular interests that should be the informing spirit of our politics: it is the use and value we can be to the national life on the one hand, and to academic or professional progress on the other.*

Thus, in this our second half of the subject falls first to be considered the arrangements for full professional equipment for our work. When we consider the pains, the time, the brains, the money, the pious founders, the elaborate establishments which are found necessary for the teaching of matters of much less importance than health and life, we can only stand

in amazement that homeopathy has successfully survived the ordeal of no systematic educational establishment. But the continuous ignoring of positive necessities is not a policy which is other than witless ; and signs of late have not been wanting of an intention to set our house in order.

We have no full academic establishment, empowered to teach, to examine, and to legitimate practice in homeopathic medicine ; and it is this grave and fundamental defect which chains the wheels of progress, and is the effective bar and impediment to our wider work in the State and among the profession. It is not difficult to fashion a proper constructive scheme of academic work : we only need to avail ourselves of what experience has taught other educational establishments to be requisite and necessary.

THE NECESSITY FOR A CENTRAL HOMEOPATHIC INSTITUTE :
AND ITS NUMEROUS ACTIVITIES.

§ IX.—We require an Institute, focussing under one roof, in one administrative centre, all the departments of homeopathic activity other than clinical or hospital work. There is the department of work in the many medical problems bearing on treatment ; there is the department for the conduct of provings ; there is the department for systematic lectures, general and special, of which one or other should always be going on ; there is the department for developing further federation among all the hospitals in Great Britain, for protection, for aid, for initiation ; there is great necessity for a department, hitherto scarcely dreamed of, for internationalising homeopathy in the old world, and bringing into line homeopathic work in England, in France, in Germany, in Russia, and other countries : and this on exactly the same basis that makes science, which knows no limit of country, a common bond of union and work among all who profess it. These and cognate departments of usefulness are each as important in their way as hospital work ; and such a many-sided usefulness can no more be tacked on to the proper functions of a hospital, than the specific sphere of hospital work can be tacked on to these extraneous activities.

THE NECESSITY FOR AN ENLARGED HOMEOPATHIC HOSPITAL.

§ X.—But the essential and legal complement of a fully-equipped academic institute is a hospital containing not less than a hundred and twenty beds, whose size gives sufficient warrant for its sufficiently ample clinical teaching. Practically, then, until the London Homeopathic Hospital is raised to a full working quota of one hundred and twenty beds, we

are not legally able to undertake training, examination, and qualification of our own students. This hospital enlargement and maintenance is one of the most considerable and important problems of the near future. All the portents point to such an augmentation at no very distant time; but all the portents also point to the absolutely necessary infusion of a new interest in the hospital sphere—a new compelling cause to warrant and necessitate the considerable extension of our hospital charity. Such a forceful and competent new impulse will be found in the legal foundation of a medical school, and I am unshaken in the belief that the public spirit of homeopathic adherents over the country will meet this and many other requisitions, provided their administration is sound and their object judicious.

THE OBJECTIVE METHOD IN TEACHING.

§ XI.—This, then, is the crux of our present difficult position—our inability to legally train, examine, and qualify. Now, ladies and gentlemen, unless and until all our awakenings and revivals culminate in this issue, we may just as well recognise the fact that our strivings are merely beating the bounds of a closed circle—a course without expansion, or progress, or prospects.

First and foremost in our academic equipment is the paramount necessity of teaching the homeopathic *Materia Medica*. This is the basis of our cult—medical materials—and as obtained from the dry wells of literature is usually as fascinating a study as the differential calculus. But this devitalised aspect of *Materia Medica* is entirely due to the old decorticated method of teaching science—of hanging a mass of facts in mid-air without visible means of support. Directly these are invested with life—clothed with actuality—put back into their objective surroundings from which they have been detached—then the study of *Materia Medica* becomes one of the most fascinating of researches. Hence the professor of *Materia Medica* must be also and simultaneously the director of provings, both partial and complete. This, in fact, is part of his laboratory—the provision of the necessary objective method; and every *Materia Medica* student who has made no experiments in proving on himself, is as forlorn as a chemistry student who has done no analysis for himself.

This course, though prior in point of time, is not *primus* in point of importance. This high place belongs to therapeutics, the art of cure, to which *Materia Medica* is but handmaid and servitor. Now homeopathic therapeutics is an exceedingly difficult art, and directly we stray away from the strict parallelism of drug action and disease action, we get swamped in

the Serbonian bog of chance. And yet, as I have before indicated, in what parallelism lies and how to detect it—whether in symptoms, clinical development, or pathologico-chemical processes—is a more complex question than appears *prima facie*. If the direct and instant appeal to nature is essential for the fruitful teaching of *Materia Medica*, much more is it requisite for the demonstrative incalculation of therapeutics. No science—least of all, therapeutics—can be taught other than by the inclusion of the objective method; and the omission of either the didactic or the demonstrative method of teaching therapeutics, is bound to lead to knowledge either nebulous or scrappy. Thus the Academic Institute and the Clinical Hospital are the complementary halves of a properly balanced whole.

RESEARCH WORK AS EDUCATION.

§ XII.—Next, the enormous importance of research work as an educational measure, apart from its other value, is one of the best products of the past half century's educational discovery. The curing of disease is a daily succession of research work with all of us: it provides what cannot be taught from the professorial chair, that is, experience; and any scheme of education is deplorably lacking that does not include training in the methods of research as part of an academic career.

The coping stone—and no mere ornamental accomplishment—is affixed to an adequate scientific education by the plan of travelling scholarships, especially after the graduate has been in actual practice a year or two. Those of you who have profited by this international academic training can speak of the immense advantage this experience has been. For myself I count it among the most valuable of my personal experiences; the new sources of knowledge, the thorough-going character of the work, the contact with great and inspiring personalities—these give a finish and a breadth to professional education which it can but ill afford to forego.

These, then, are the essential elements in a satisfactory educational foundation for the scientific teaching of our profession.

OUR INTERNAL POLITICS: (b) OUR SERVICE TO OUR PROFESSION.

§ XIII.—Proceeding now to that part of our Internal Politics which co-relates us with the profession in general, history is quite clear that nearly all great reforms originate in the first instance from pressure from without. I regard the evidence of a living and moving force in the world's work as

more suasive than any series of well-marshalled argument, as more compelling than any victory of disputation.

To our increased power in the national welfare, then, I look for an increased tendency on the part of professional men to "look into" homeopathy. Our science in many details is still so detached from current views that the argument from results is more cogent than any explanations or interpretations we can give.

Other methods of suasion have, however, their definite rôle. What is urgently wanted is a compact, coherent, cogent statement from the professional aspect—conveying the essential facts of homeopathic science, showing its foundation in the order of nature, its parallelism to the most modern scientific teachings, its perpetual cropping out in the most recent physiological speculation, and its solution of the current difficulty of nihilism in medicine.

Now I do not anticipate this *apologia pro vita nostra* to be greatly proselytising; those of our good friends who hold that truth to be seen is to be accepted, must re-read their history to better purpose; but I do hold that a presentment of our technical case, well ordered, copious without prolixity, and with references, would be a reasoned exposition which at least in self-defence we should issue.

Our distinguished colleague, Dr. Dyce Brown, has laid us under much obligation by providing the *Materia Medica* section of such an *apologia*; and unless rumour does them and itself much injustice, two of our ablest parliamentary hands are essaying, or intending to essay, a presentment of the facts and law of homeopathy viewed as natural science.

Professor Huxley declared that the progress of a truth was in three stages. At the first, "it was obviously and inherently absurd," so ran the verdict of the majority; a stage further, "it was opposed to all authoritative teaching"; and finally, when this was well passed, "Oh, we knew all that long ago." Some such brief biography threatens to be the memoir of homeopathy. None can deny that the homeopathising of the profession is proceeding apace: but this I deal with hereafter.

SUMMARY OF OUR PRESENT REQUIREMENTS.

§ XIV.—Thus we may summarise the salient points of what I present to you as our requisite scheme of practical politics:—

1. There is the necessity for educating a public opinion favourable to the expansion of homeopathy, on the ground of its public service to the health of the community and its private service to the wellbeing of the individual.

2. There is the proper and legitimate use of the literary arm, in the intellectual presentment of our position plainly and succinctly: just as is done in politics, in science, in art, in religion, in letters, and in all the great interests of mankind.

3. There is the more extended use of the secular arm in the great desirability of our *confrères* fitting themselves for public spheres of usefulness in the service of the municipality or the state, in whatever department professional service is required.

4. There is the necessity for the public demonstration of the value of homeopathy to the community in the shape of the establishment and maintenance of some public homeopathic institution—whether cottage hospital, dispensary, sanatorium, or convalescent home—in connection with every homeopathic settlement. Wherever two *confrères* work in the same sphere this should preferably take the form of a cottage hospital, controlled by public organisation, financed by public interest.

5. There is the urgent and paramount necessity for a suitable and proper academic equipment for the full training of graduates in the theory and practice of homeopathic medicine. Coupled with this is the similar necessity for provision for all collateral developments of homeopathy, scientific and propagandist, in the shape of a Central Institute, the focus of all the various homeopathic activities in the country.

As a corollary from this, all efforts of ours in giving force and vigour to the place homeopathy has in the currents of progress are nullified, unless and until we obtain legal powers to teach, examine, and qualify for practice. The absence of this hitherto truncates our politics, and disarticulates our best devised and most far-reaching plans.

Research work and the special qualification that only travel can give, fall in their proper place in any adequate educational scheme, and due and proper provision must be made for them.

And as we have a duty, not only to the nation, but also to our order, there is required a compact, coherent, cogent presentment of the scientific warrant for our art and practice. This will include not only the direct evidence from the facts of disease, but the various indirect evidence from the collateral findings of physical and physiological science.

THE THREE FACTORS OF "SIMILIA" IN POLITICS: I. OUR SERVICE TO THE STATE. II. A COMPLETE ACADEMIC EQUIPMENT. III. THE HOMEOPATHISING OF THE PROFESSION.

§ XV.—Such, ladies and gentlemen, is my cursory presentment of the tripartite totality of homeopathic politics. It

includes our duty to the commonwealth, our duty to our homeopathic status, our academic duty to our profession.

Now and again, after long quiescent periods, there comes to great causes an afflatus which impels to progress, marks out a new epoch, opens new avenues for expansion. Such a spirit I see to be working at the present time in the service of homeopathy in Great Britain. It behoves us to take advantage of this flowing tide, this current as it serves, and not to rest content with beating the same coverts and whipping the same stream.

And my final word to the leaders in homeopathic politics when they are confronted by an *impassé* is to turn about and recast the perplexing situation on new lines. The policy of drift is always a fatal policy. Chronic and recurring difficulties are often best met by introducing new activities, by the dropping of old methods, and boldly sailing out on the sea of enterprise. To start with a preconceived notion that sympathies are a limited circle and support a limited quantity, is radically bad leading. It is, as Mr. Chamberlain says, enthusiasm that heralds success: it is enthusiasm that breaks barriers, gains treasures, achieves results; and enthusiasm, backed by a good cause, can and will plant British homeopathy in a large place.

MATERIA MEDICA MISCELLANY.

By J. R. P. LAMBERT, M.D.

Artemisia Vulgaris in Epilepsy.—Dr. Haehl, of Stuttgart, has recorded the following case: A young man of 21 had for two years suffered from epileptic attacks, sometimes occurring every two months, but lately twice a week. He was of a quiet, somewhat melancholy disposition, only before his attacks he was generally very much excited. He was given *Art. v. 4*, five drops three times a day. He had one more violent attack in March, then a very slight one in April, after which the disease entirely disappeared. To prevent recurrence he was directed to take the remedy at rare intervals till July, 1899. Since then he has received no medication, and is in good health at present.—Translated from *Hom. Monatsblätter for Hom. Recorder*.

[It is a pity Dr. Haehl gives no details of the character of the attacks.—J. R. P. L.]

Acidum Nitricum in Foot-and-Mouth Disease.—Dr.

Fischer, of Berlin, writing on this subject, says this disease may occasionally affect persons who drink the milk of affected animals without its being boiled, and then it shows itself by producing blisters in the mouth. *Nitric acid* is not only able to shorten the duration of the disease, but when used in time it will prevent its development. The blisters which develop in the mouths of children who drink milk coming from such diseased animals will also soon disappear on giving them *Nitric acid*.

He advises all whom it may concern, wherever this disease shows itself, to put at once a teaspoonful of *Nitric acid* into the general drinking supply of the cattle. Great care should then be taken also in the stables to provide good food, clean bedding, and fresh air. To abate the disease he gives three drops of the 1x or 2x dilutions four times a day in water. When the mouth is affected it should be washed out once daily with a weak solution of the remedy, and in hoof disease the hoofs should be washed several times a day with a stronger solution of the same.—*Ibid.*

Melilotus in Neuralgic Conditions.—The *American Physician* quotes the following under the initials "R. H. S." :—"The remarkable effects of *Melilotus*, or sweet clover, in neuralgic complaints prompted me to order some for a case which had bothered me not a little for several years. The gentleman had been subject to attacks of neuralgia for fifteen or twenty years, affecting the right side of head, and which had been the cause of the almost complete destruction of sight in that eye. The attacks were caused by fatigue, cold, or derangement of the stomach. The pain centred about the eye, and extended over the right side of head and neck, and left the scalp sore and tender to the touch. The pain during some of the attacks was agonising in the extreme, and the patient would become wild and furious with its severity. I had used all the usual remedies, including *Morphine*, at different times, but *Aconite* and *Belladonna* had generally rendered the best service. I first used the *Melilotus* last fall, with the effect of completely controlling the attack, and since that time, when taken soon enough, it has always checked or controlled it."

Lac defloratum Headaches.—In an anonymous article on this little used remedy in the *Medical Advance*, no

doubt from the pen of H. C. Allen, the writer calls attention to the number of *Natrum* systems, with its pathogenesy. The headache may be preceded by a sharp pain at the apex of the heart, as though a knife were cutting up and down, followed by a strange feeling in the head; forehead feels extremely heavy. For periodical headaches, which occur before, during, and after the menstrual period, especially with constantly decreasing menstrual flow, it may be compared with *Cocculus* and *Sepia*. The general prostration and colic pains are less marked than with *Cocculus*, and the pelvic symptoms of *Sepia* are absent, but the headache is more severe than with either of these remedies. Among head symptoms he mentions: American sick headache; begins in forehead, extending to occiput, in morning on rising (*Bry.*); intense throbbing, with nausea, vomiting, blindness, and obstinate constipation (*Epig., Iris, Sang.*); < noise, light motion (*Mag. m., Sil.*); < during menses (*Kreos., Sep.*); great prostration; > pressure, by bandaging tightly (*Arg. n., Puls.*); copious pale urine; dim vision as of a cloud before eyes, face pale, feet cold, slight nausea. Pain commencing in and above inner end of right eyebrows before rising in morning; after rising pain passed into eyeball till afternoon, when it became unbearable, < by walking, and especially by sitting down, though carefully done, also by heat of fire and stooping; > on pressure. Pain ceased at sunset, and did not return till next day.

Intense pain at exit of supra-orbital nerve diffused over forehead; attack begins with dull, quick pulse, flushed face, and eructations of wind.

Pain so severe she would bury her eyes in her hands, and press them into pillow; severe headache for years, severe pain over eyes, intense throbbing in temples. Sensation as if top of head lifted off and raised about five inches; head feels very hot; motion < pain, face felt as if flesh was off bones and edges sticking out.

ABSORPTION !

“DUCKY, ducky, ‘come and be killed,” is the genial invitation of the duck-wife to her swimming charge in the season of green peas. We are reminded of this by an invitation to homeopaths to come and be “absorbed,”

published in an article in the *Medical Press* of July 27th. We fancy that neither bird will be in too great a hurry to accept; but we publish the article for the benefit of those homeopaths who are always regretting their sectarian position and craving for union of hearts with—gentlemen of the *Medical Press* type. We publish the article also to keep on record what that type is. What the editor of the *Medical Press* says about homeopathy and homeopaths is of no consequence whatever either to it or to them; but it is of very much consequence in regard to the writer himself. He paints his own portrait, and it would be a pity to spoil it by any comment of ours. Likes attract likes. Let those so-called homeopaths who feel that the Editor of the *Medical Press* has struck a chord of fellow-feeling in their bosoms hasten to “confess” the error of their ways and be—absorbed!

“IS A HOMEOPATH A QUACK?”

“AN interesting libel action was lately tried in Germany, the plaintiff being Dr. Mende-Ernst, a homeopathic practitioner of Zürich, and the defendant Dr. Spartz, the editor of the *Muenchener medizinische Wochenschrift*. Dr. Spartz’s journal had published an article in which Dr. Mende-Ernst was referred to as “the well-known charlatan and homeopath,” a conjunction of designations to which the latter took strong exception, so much so that even after Dr. Spartz had published an announcement that Dr. Mende-Ernst was a duly qualified medical graduate of Zürich he found himself sued for libel by the indignant homeopath. A number of witnesses, including von Winckel, the great authority on forensic medicine, were called by the defence to show that, however well a man might be qualified in the view of the law, from the point of view of scientific medicine he deliberately placed himself on a level with charlatans when he embraced and practised the exploded system of Hahnemann. Von Winckel quoted the amusing dictum of Müller that the principles of homeopathy seemed to him to be about the same as if after a man had been run over by a waggon he should be treated by having a toy-cart run backwards and forwards over him three times; and he showed, moreover, how homeopathy is used to hoodwink and deceive the public, just as much as frank charlatanism is. Spartz, in his evidence, dwelt on the fact that homeopaths were in reality worse than quacks, in that they had been instructed in the scientific basis of medicine and had eschewed it in favour of ridiculous doctrines, such as that the “intellectual vital force was dynamically out of time,” and that it was inconceivable that any man who had been taught pathology could act so from conviction. The other scientific witnesses spoke to the same effect, saying that from the point of the profession homeopaths rank as quacks. As it happens, however, the Bavarian law recognises homeopaths, and in the end the editor had to pay a nominal fine and costs, although it was clearly

established that there was no question of personal malice. For a long time past the homeopaths, in this country at least, have been holding out the olive branch to those whom they are pleased to call "allopaths," or "antipaths," for they are tired of being cold-shouldered by the self-respecting members of the profession, and they are willing, as expressed by the mouths of some of their leading spokesmen, to give up their sectarian character. No doubt it would suit them well to be able to meet scientific physicians in consultation in dangerous cases, and to have eminent surgeons to operate on their patients when they are in difficulties, so long, that is, as they can retain the hold that they have on the section of the public who see magic in the blessed word "homeopath." But the homeopathic practitioner cannot have it both ways, and while he professes to practise a hole-in-the-corner system he cannot expect scientific men to meet him and recognise him as one of themselves. In this country, as in Germany, it may not be legal, or even scientific, to call a homeopath a "quack," if a quack is taken to be "a boastful pretender to medical skill that he does not possess," but the gulf that separates the man who holds the pathology of disease to be the basis of rational treatment from one who holds that pathology is irrelevant to treatment, and that the "vitality of symptoms" is the true guide to the prescription, is one that cannot be bridged. The homeopath of to-day is certainly very far removed from the enthusiast who held that the "itch was the cause of seventh-eighths of all chronic diseases" and that "by the trituration and succession of drugs there is an actual exaltation of medicinal power, a real spiritualisation of the dynamic property, a true, astonishing unveiling and vivifying of the medicinal spirit." They have indeed given their master the go-by in almost everything; they do not scruple to use remedies that confessedly act on allopathic principles, and they admit the virtues of such a radical antipathic ally as surgery. In fact the homeopath now is very much of an eclectic, and when he hears a method of treatment is doing good he does not wait to see if its acts on the "*similia similibus*" or the "*contrari contrariis*" principle before adopting it in his practice. He reserves his globules of bryonia and his pilules of pulsatilla for old ladies who have not much wrong with them, and for children who will get well if not treated much with anything, and if taxed with inconsistency, he will exercise a deal of casuistry to show that a potent treatment, such as antitoxin in diphtheria, is quite admissible under homeopathic rules. Indeed, the most wonderful thing about the modern homeopath is his aptitude for sophistries, and the amount of ingenuity he can expend on showing that in spite of all appearances he remains a homeopath is worthy of a better cause. But in so far as the homeopath is removed from a quack and approaches to "allopathic" standards, it is difficult for the unsophisticated to believe in his disinterestedness, and, quack or no quack, it behoves the medical profession to give him a wide berth while he continues to obtain practice on the pretence of having some esoteric principle up his sleeve. When he confesses that he is prepared to drop his sectarian title and to do what is best for his patient, irrespective of system or creed, it may be feasible to absorb him into the general rank of the profession. But that day is not likely to come in this generation."

EXTRACTS.

THE ACTION OF *TUBERCULINUM*.*

By DR. ANTON NEBEL, of Montreux.

Translated from the *Zeitschrift des Berliner Vereines Homöopathischer Aerzte*, by P. W. SHEDD.

IF finely divided mercury in an oil-medium be injected into healthy muscular tissue the following action takes place. The surface of the mercury globule becomes oxidised through the influence of the tissue cells and the NaCl of the tissues, and is changed partly into the sublimate, partly into mercurial albuminates. These reactions produce chemotaxis in the leucocytes, which, together with muscular and fibrous tissue cells, undergo necrosis, and an abscess forms about each mercury globule.

The Hg combinations cause great dilatation of capillaries and veins, and an enormous emigration of leucocytes into the vicinity of the abscess. The leucocytes take up Hg and proceed to the lymph nodes, into the bloodstream, thence to all organs of elimination, viz., salivary glands, colon, liver, kidneys, skin, &c., and at the points of elimination are developed the mercurial lesions; stomatitis, dysentery, glomerular nephritis, the mercurial sweat and skin symptoms.

In other words, the centripetally tending noxa is repelled by the *vis naturæ* acting through centrifugal crises.

Consideration of the pathogenesis of *Tuberculinum* at once indicates its avenues of elimination, viz. :—

1. The mucosæ, conjunctival, aural, nasal, oral, laryngeal, bronchial; the mucosæ of the entire digestive tract, particularly of stomach and colon; the secretory canals of liver and kidney and their mucous surfaces; the bladder, uterine and vaginal mucosæ.

2. The serosæ, serving as reservoirs from which the toxin is gradually reabsorbed; hydrocephalus, hydrorhæcis, pleuritis, peritonitis, synovitis, tendo-vaginitis, bursitis, hydrocele.

3. The skin, with its various eruptions, sweat, &c.

With the elimination of tubercular toxin a de-toxinisation also takes place; apparently all cells have de-toxinising powers, but especially so the hepatic cells, as

* *North American Journal of Homeopathy*, June, 1904.

we may observe clinically. All glandular structures participate both in elimination and in de-toxination. The gland cells chiefly occupied in these processes are the mononuclear leucocytes from the splenic malpighian corpuscles and the germinal centres of lymph nodes. What rôle bone-marrow plays I cannot, from my own investigations, say.

It is easily comprehensible why the lungs are the chief points of attack for the tubercular toxin; it passes by lymph and blood channels directly through the heart to the alveolar capillaries, and causes the well-known syndrome: dilatation, hyperemia, diapedesis, and the sequent infiltration of lung tissue and cicatrization. In the vascular system the lesion of arterio-sclerosis soon develops. The hemoglobin is decomposed; a portion is regenerated in spleen and liver, but the greater part is carried to the colon and eliminated. The constant loss of the ferric element causes the anemias of scrofula and tuberculosis.

On the central nervous system the toxin is at first excitant, then depressant; it causes atony and atrophy of muscular and connective tissue—the well-known wasting of voluntary muscle in the tuberculosis; the atomy and dilatation of involuntary muscle as in the alimentary canal; in cardiac muscle fatty degeneration and brown atrophy—the phthisical and psoric heart. And these lesions are produced, first, by direct toxic action on tissue elements; then by vascular disturbance and the atrophying pressure of small-celled infiltration passing into cicatricial tissue.

The acute action of the toxin is evident in tuberculosis miliaris and submiliaris; the chronic action is markedly different, and has been pictured by Samuel Hahnemann, who applied the name, *psora*, to chronic tuberculosis.

Tuberculinum is therefore in our hands a polychrest, a *dynamis*.

The clinical experience of homeopaths using the high potencies proves that a high potency has no effect either on the healthy or the sick, where no homeopathy exists. Such is the experience of daily life. As an antipsoric remedy is null, either in the 30 or the cm where no psoric symptoms are present, *i. e.*, in a perfectly healthy body, no high potency can here produce any effect. (Cf. *Organon*, §§128, 129, 130.—Translator.)

In the following consideration of symptoms, physiological analysis and theory will be abandoned for the more practical therapeutic application.

When one considers how frequently the mentally afflicted die of tuberculosis (No statistics given.—Translator), the importance of *Tuberculinum* in psychotherapy cannot be overrated. As evidenced in olfactory experimentation, the brain is a primarily affected organ, whence the irritation reaches the vaso-motor centre of the medulla, and continues to the sympathetic. Here, as elsewhere, we meet the contradictory characteristics of *Tuberculinum*; melancholia and mania; insomnia and sopor. I have not had many opportunities of using the remedy in mental disease, but here is a characteristic case.

A girl, æt. 25, suffered for a long time from catamenial melancholic depression which steadily increased. When I first saw her the condition of anxious depression had lasted four days; she was anemic; emaciated, especially about the thorax; hallucinations were marked. Momentarily quiet, she would break out in rage and strike her relatives, tossing about, loquacious, sleepless. R. *Hyoscyamus* 13, which operated favourably for two days; then *Platinum* 13, with indifferent results; on the fourth day all symptoms were worse, mania; obscenities, importunities; and preparations were made to remove her to an institution. R. *Tuberculinum* 1,200; a half-hour later she lay in deep sleep which lasted twenty-four hours, when she awoke, exhausted but sane. Since then there has been no return of menstrual melancholia, and her bodily health is improved.

I have used the remedy several times in religious melancholia, always with success, usually alternating with *Sulphur* 200 at ten-day intervals; also with individuals in good circumstances who, fearing approaching poverty, save and scrape, dismiss servants, &c., here alternating with *Baryta carb.* 200.

In neurasthenic children or adults its effects are marvellous in conjunction with hygienic measures where the eliminative organs are not active. Burnett made extended use of *Bacillinum* with nervous children. In the neurasthenia of adults, *Tuberculinum* is usually followed by *Sepia*, *Calcarea carb.*, &c. The foundation of neurasthenia is chronic tuberculosis (*psora*), its forms vary; chronic gonorrhœa in particular will develop the most aggravated neurasthenia in organisms infected with

tuberculosis. He who does not believe this may experiment for himself with *Tuberculinum* and *Gonorrhoin* in alternation.

No remedy does so much for epilepsy as *Tuberculinum*, though it often aggravates the attacks during the first month or two of treatment. According to constitutional symptoms, *Tuberculinum* 1,200-4,000 in alternation with *Calcarea*, *Silica*, *Sepia* is prescribed. I always give *antipsoric remedies* after *Tuberculinum*, commonly the 200, more rarely the 30. I consider its use in epilepsy as one of its most valuable indications.

In meningitis basilaris the remedy is useful when critical discharges appear, sweat, polyuria, diarrhea, exantheams, repeating the dose only when new crises come on. In such cases *Tuberculinum* 1,200 (with one exception) has been used. If the remedy is given early with simultaneous use of hot baths and hot compresses to the head, success is commonly obtained; the disease may often be cut short on the second or third day, and in such cases rapid emaciation usually follows and persists for two or three weeks. In a difficult case with continued rolling of the head, deafness, aphonia, paralysis of right arm and leg, *Tarantula* 30, *Tuberculinum* 1,200, *Sulphur* 30, *Silica* 30, *Calcarea carb.* 30, succeeded in halting the disease; consciousness and hearing returned, the paralysis gradually disappeared, though aphonia persists (6th week of treatment). In this case there were copious sweats about head and thorax, a scalp and vertebral eczema, and whooping-cough added to its complications.

Those forms of paresis and paralysis of the lower limbs calling for *Sulphur* lie also in the sphere of *Tuberculinum*, alternate the remedies every 8-14 days as long as indicated.

The indications for *Tuberculinum* in the insomnia of tuberculosis coincide largely with those of *Sulphur*, *Calcarea carb.*, *Sepia*, *Silica*, &c., and the remedy is of great efficacy when clearly indicated.

The pathogenic fever of *Tuberculinum* is of the typhoid type. Single doses produce attacks resembling influenza, and the fever curve exhibits deep serrations. Two types are prominent: the intermittent (malarial), in which *Sulphur*, *Natrum mur.*, *Arsenicum alb.*, &c., are to be considered, and the hectic type. (Cf. *Sulphur*.)

The skin affections of *Tuberculinum* are polymorphous; in crusta lactea it is very useful though sometimes contraindicated. Four cases were cured by *Thyroidin* 30, 100, *Graphites* and *Baryta carb.*, respectively. In passing, it may be noted that keynotes for *Thyroidin* are the lack of intelligent expression in the child, and a cretinoid cranium.

Tuberculinum is also indicated in chronic eczema, and it is

worthy of remark that in persons of apoplectic habit—usually *Graphites* patients—a cautious treatment is necessary. All eczemas fall within the sphere of the remedy, herpes circinatus, for example, an indication already given by Burnett; also chronic eczema of the tarsal edges (Dr. J. H. Clarke), which in the beginning is often absorbed by *Kali carb.*, or its further progress by *Lachesis*, *Sepia*, *Graphites*. In psoriasis, *Tuberculinum* often causes violent aggravation; *Thyroidin* is here frequently indicated, followed by *Sepia* and *Graphites*. A case in point: A young man, æt. 20, had suffered from childhood with psoriasis. When the eruption was marked, he had no cough; if it retroceded, bronchitis and apical infiltration appeared. When first seen by me the portions of his body free of psoriasis would not have equalled together the surface of the palm; scalp and face were implicated; the complexion very brown. At intervals he received *Tuberculinum* 1,200, *Sepia* 200, *Thyroidin* 30, *Graphites* 200. After five months' treatment he "caught cold," followed by fever, with agonising pain in the astragular joint; at the same time the psoriatic scales fell off and the red rough cuticle came into view. He received *Tuberculinum* 1,200 only, which, in the course of a few hours, caused the pain and swelling to vanish, followed by a critical flow of urine. Later, the psoriasis reappeared, but in less degree, and the treatment was continued, but to-day, after a year's treatment, the cure is not perfect.

Isolated acneoid pustules on the inside of the cheeks somewhat above the prolongation of the oral commissure, more right than left, are indicative of *Tuberculinum*. I acquired two, as large as peas, from the use (pathogenetic) of *Tuberculinum* 30.

Herpes labialis with acute infectious diseases; urticaria (generally with *Calcarea carb.*), erythematous eruptions, especially in children, often find the remedy useful.

With lupus (in cicatricial forms) *Tuberculinum* orally, indicated, either in local application or subcutaneously. The less vascular the growth, the lower the potency and the more frequent its local application; superficial recent cases heal rapidly.

Pathogenetically, the remedy seems indicated in scarlatina; in measles my own experience recommends it—given early it brings out the eruption, and conjunctival troubles, coryza, and bronchitis are hardly evident. In two cases only (in very weak children), has bronchopneumonia developed. In many cases the remedy has been followed by Morbillin (Dr. Young's high potency).

In affections of bones and joints the potency used is important. In serous, fibrinous, fibrous, acute or chronic joint troubles, it is best to begin high, 4m—1m, and cautiously

descend to the 200—30. Results are often quicker from injections into the joint, or local compress-applications; also in bone troubles, in which this treatment is often rapid enough to be of diagnostic value. In addition to this treatment, hot compresses are used, wet with a decoction of *Equisetum arvense*, and a plaster of resin, wax, butter, and *Tr. Scrophularia nodosa*. Tubercular bone diseases in elderly people heal slowly and demand cautious prescribing.

In acute articular rheumatism this remedy has been more satisfactory than any other, and with *Bryonia*, *Rhus*, *Tox*, *Sepia*, works marvels.

So-called catarrhal fever, and in many cases of gastricismus acutus, *Tuberculinum* is genetically indicated; also in numerous chronic affections: gastritis chronica, ulcus ventriculi, cases pointing to cancer, gastrectasis, cramps, vomitus, vomitus gravidarum—cases, of course, where abuse of alcohol and nicotine is excluded; and in various forms of diarrhea and constipation, in all of which *Tuberculinum* often clears the case and permits an accurate choice from *Sulphur*, *Calcarea carb.*, *Sepia*, *Lycopodium*, *Graphites*, &c.

As previously noted, the liver plays an important rôle as an antitoxic and eliminative agent in tuberculosis; the toxin entering the organ by two paths, the hepatic artery and the portal vein. At first the artery is chiefly interested, and we find the hepatic cells fed by it becoming atrophic, and finally disappear, leaving cicatricial tissue; *Sulphur*, *Calcarea carb.*, and *Sepia* successively indicated from an anatomical standpoint. If the toxin takes the portal route from absorption in the alimentary canal, the *Sepia* picture passes over into *Lycopodium* and *Graphites*; the portal hepatic territory atrophies, in consequence of which hemorrhoids appear, and because of the insufficiency of function, gouty troubles.

Tuberculinum is indicated in acute and chronic renal affections, but great caution is necessary, for where skin and intestines do not perform normally, even high potencies are dangerous. Also, in polyuria, scanty urine, enuresis nocturna, the remedy is useful; in diabetes, no results; in cystitis chronica, brilliant and permanent results.

In benign mammary tumours *Tuberculinum* is most valuable; in female disturbances, oophoritis, metritis, leucorrhœa, salpingitis, acute or chronic, menstrual troubles—what Burnett termed "genital consumption." Also in hydrocele and chronic prostatitis.

In acute and chronic gonorrhœa of scrofulous individuals I use *Tuberculinum* in alternation with *Gonorrhœin* 30, with intercurrent use of further indicated remedies: *Mercurius corr.* 30, *Thuja* 200, &c.

The use of *Tuberculinum* in phthisis pulmonalis demands attention to the following points: In apyretic purely tubercular phthisis results are marked, provided the eliminative organs are in good order, but nothing below the 1,000th should be used, unless absolutely necessary. With patients where strepto-staphylo-pneumococci are in the bronchi; where also, after washing the sputum a pure "t.b." bacilli-mass (ein reiner Tuberkelbacillenkern) remains, the same treatment is indicated. With mixed infection—found in the majority of cases—where the sputum swarms with virulent micro-organisms in addition to the "t.b.," other procedure is necessary. If the heart is in good shape, a single dose of *Tuberculinum* 1,000–2,000 is given, provided there are no marked indications for other remedies. With due attention to temperature and possible critical excretions, the dose is allowed to work until effects are no longer observed, 8 days to 8 weeks. Usually a syndrome then presents, permitting the accurate choice of an antipsoric *Silica*, *Lycopodium*, *Phosphorus*, &c. After a while the picture again darkens, and now a high potency of the isopathic remedy corresponding to the most virulent and prominent micro-organism found in the sputum is given: *Staphylo-*, *Strepto-*, or *Pneumococcin*. The accurate bacteriological analysis of the sputum is absolutely essential; the choice of the ison again clears the picture, and so, proceeding on the one side etiologically (where these isopathica have not yet been proved); on the other side symptomatically with antipsoric remedies, the disease is dominated.

My own experience warns, in the case of mixed infection, against the use of *Strepto-*, *Staphylo-*, or *Pneumococcin* below the 500th. I use them only from 2,000 to 1,000, having seen terrible aggravations from the 30, 100, 200, with a lowering temperature from 104 to 96. Hence the admonition, which need not concern scoffers, but those alone who wish to avail themselves of a potent weapon. The toxins used as remedies are, like *Tuberculinum*, prepared from pure and virulent cultures.

And cases, seemingly condemned to speedy death, are brought in a year or two back to normal temperature, though of course sacrificing a large portion of lung tissue. This result is sure when the patient can and will take care of himself, where the heart has withstood the toxin, and the stomach and liver are in good function. Further, climatic variations must be avoided. With the great mineral metabolism of the phthisic, diet regulation is imperative, and should be preponderately vegetable, together with the addition of physiological salts in low potency, *Calcarea carb.*, 3x, 5x, *Calcarea phos.* 2x, 6x, and intercurrently according to indications organ-

remedies as *Cactus*, Tr. 30, *Chelidonium* Tr. 30, *Taraxacum* Tr., *Nasturtium* Tr., *Urtica urens* Tr., *Tussilago farfara* Tr., *Lysimachia nummularia* Tr., for short periods.

The first dose of *Tuberculinum* in any difficult case is, however the most weighty prescription. The remedy should not be given without a most careful cardiac examination. As the surgeon before the anesthetic, so must the physician know the heart before administering this drug, especially to children, and seniles—and to young seniles. He who observes this rule will have fewer clinical reproaches on his conscience. When *Tuberculinum* is contraindicated, recourse must be had to the nearest antipsoric.

The above caution applies also to asthma, pleuritis, peritonitis in scrofulous (tuberculous) subjects.

There is a form of diphtheria clinically and pathologico-anatomically indistinguishable from true diphtheria. Bacteriologic analysis shows no bacilli of diphtheria or tuberculosis; it results pathogenetically from the ingestion of the tubercular toxin. In a case of a girl, aet. 10, two hours after a dose of *Tuberculinum* 1,200 a large apparently diphtheritic membrane was dislodged from the nose during an attack of cough. *Tuberculinum* 1,200 in alternation with *Diphtherinum* 30 I have used in two cases only of diphtheria, both successfully; one case in particular, of gangrenous type, surpassed expectations. The sequent ocular and pharyngeal paralysis disappeared in ten days under *Diphtherinum* 50.

In bronchopneumonia and capillary bronchitis of children a single dose of *Tuberculinum* often cures, but caution is necessary, and with children the remedy should be twice considered before prescription.

Brown atrophy and fatty degeneration, cardiac debility; atheroma, are effects of chronic tubercular infection. Hence the eminent preventive value of *Calcarea carb.*, *Sepia*, *Graphites*, *Phosphorus*, *Silica*, &c., in those of apoplectic habit.

In the treatment of lymph-node tuberculosis the remedy is effective, but it is a case of patience for all concerned.

Tuberculinum is potent in acute rheumatism of muscles and joints. Chronic rheumatism is of psoric (tubercular) origin and one of the most frequent symptoms of chronic tuberculosis. Hence the efficacy of *Sulphur*, *Calcarea carb.*, *Sepia*, *Lycopodium*, *Graphites*, in this trouble.

As previously noted, *Tuberculinum* disintegrates red corpuscles, and therefore causes anemia. The separation of the iron takes place chiefly in the colon; the yellow-brown scales carried by leucocytes to the epithelium give the micro-chemic *Ferrum* reaction. The treatment of anemia brings the intelli-

gent physician to the front. Why pour in iron, when a daily loss of iron is taking place? The first thing to do with a leaky barrel is to stop the leak, not pour in water that it may be kept full. Thus we learn why *Sulphur*, *Calcarea carb.*, *Pulsatilla*, &c., in high potency cure anemia—they find and stop the leak.

In conclusion. My indications for *Tuberculinum* have been verified by allopathic reports of its action; and the symptomatology is rich enough to accurately define its use. The dislike of many physicians to the remedy is due to insufficient study of its pathogenesis. Results from the 30 or 100 are rare. In the first eighty cases in which I used these potencies little success (with three or four exceptions) was had; the value of the remedy was found only on using the high dilutions and through further study of Dr. Samuel Hahnemann's psora theory. To thoroughly comprehend the remedy I would recommend Boenninghausen's method of study as laid down in his *Relationship of Antipsorics*, viz., Minute observation of effects produced in a course of treatment with it. True, he who studies *Tuberculinum* as I have studied it for the last three years will have mounted his hobby, for he will fare farther on it than the genial routinist on his showy mount.

CASE OF IODOFORM IDIOSYNCRASY.

By CHAS. HELFIELD, M.A., M.B., L.M.S. Bombay.

WITH a view to illustrate the increased susceptibility some individuals have to iodoform, I shall cite a single case out of the many that have occurred in our clinique and experience.

A young man, æt. 30, was suffering from a papular eruption located round the inside of the thighs and pubes, extending to the hypogastrium, attended with intolerable itching, insomnia, weakness, disarexy, and general cachexia, and declared by his medical attendants to be septicæmia produced by a deep wound on the wrist near the ulnar artery. I was called in to see the patient after the lapse of a month from the first symptoms of eruption, and when all sorts of remedies had been tried by his medical attendants without any obvious benefit. After having taken a minute account of the patient's history, and after careful examination, I discovered a ringworm on the inside of the thigh, and on questioning the patient I was told that he had also used iodoform ointment for the ringworm. I then concluded that the said eruption was caused by iodoform idiosyncrasy. My first step was to stop all iodoform dressing for the wound of the wrist, and to use instead a solution of

Acidum Benzoicum. Furthermore, I ordered a sitz-bath with starch every time the patient felt severe itching, with *amyllum et cocainæ* 2 per cent., as a dusting powder, and internally a teaspoonful of citrate of magnesia three times a day, placing the patient on soup and milk diet. After two weeks the patient got well. What I wish to point out is, that the eruption was neither eczematous nor erythematous, but it was a clustered, yellow-scaled pustular eruption passing into scabs, and I believe it to have been impetigo.

I find that the routine fashion of dressing cavities and wounds by iodoform without having learnt the patient's susceptibility for the drug, or otherwise learnt whether the patient is predisposed to eruptions, is not only dangerous but absurd. In practice I and my brothers, as well as Drs. Zuchodoller, Pistis, and Caribdis, use the following compound, suggested by me in nearly all cases of dressing, with excellent result: *Iodoformum*, 6; *Acidum Benzoicum*, 2; *Sodii Bicarbonas*, 2.—*Medical Press*, June 1.

POISONING BY TANNING LIQUOR.

DR. WALDO, the coroner for the City of London and Southwark, held an inquest on September 15th with regard to the death of a workman at the tanning works of Messrs. Samuel Barrow and Co., Bermondsey, who died after falling into a tanning pit. It appeared that the man was going to the water-closet, and while walking down the alley slipped and fell into the pit, which contained English bark liquor, but no skins. The pit was 5 ft. 4 in. deep, and the depth of the liquor was 3½ ft. Dr. J. C. Bell, who first saw the man, said that he was shivering and very blue and cold. He had vomited brown liquid, and could not speak many words; he appeared to be suffering from shock. The patient was admitted into Guy's Hospital, where he suffered from intense diarrhea, and died about four hours later. The necropsy showed that the body was well nourished, there was slight atheroma of the aorta and old pleurisy at the apex. Beyond this the internal organs were normal, with the exception of the stomach and intestines, which showed signs of irritant poisoning. Mr. Stanley Hodgson, M.B., house-surgeon to Guy's Hospital, attributed death to the effects of an irritant poison producing collapse from vomiting and diarrhea. Mr. James Gordon Parker, D.Sc.

(Strassburg and Berlin), Director of the Research Laboratory of the Leathersellers Company, gave evidence that he had analysed the liquor into which the deceased had fallen; it contained liquor of bark and of the acorn cup of the Turkish oak, but no antimony, arsenic or other poisonous substances which taken in a minute dose would be likely to cause death. It was stated in evidence that workmen were in the habit of drinking this liquor as a pick-me-up, and great surprise was expressed that it should have caused death. Mr. Hodgson stated that Dr. Stevenson had told him that he had found a somewhat similar case of death recorded in Germany about forty years ago, and Dr. Waldo informs us that on December 3, 1902, he held an inquest at Southwark upon a man, aged 71, who was also a labourer in the same tannery. This man had fallen into a vat of liquor 6 ft. deep. Dr. Ashby, who attended him, found him pulseless and suffering from symptoms of shock; there was no diarrhea or vomiting, and he was satisfied that death was due to the immersion, accelerated by chronic bronchitis. No necropsy was made, and the jury returned a verdict in accordance with medical evidence.—*Brit. Med. Jour.*, September 26, 1903.

PLUMBISM FROM DIACHYLON POISONING.

IN view of the paper by Dr. Jacob and Mr. Trotman in the *British Medical Journal* for January 31st, p. 242, I venture to think that the notes of the following case may be of interest:—

Mrs. X., aged 29, sought relief, early in November, 1902, for severe vomiting. She looked ill, her face having an anxious expression, and being of a yellowish-white colour. She was very constipated, and complained of a good deal of headache. Although repeated inquiries on the subject were made, no history of the taking of any irritant could be obtained. She was put to bed, and in spite of varied treatment the general condition became worse, vomiting, constipation, and headache being more severe.

Early in the morning of November 24th the patient had an epileptiform fit, and in the course of the same day she vomited some blood; she also had five more fits during that day. In the course of the evening some weakness was noticed in the external rectus of the right eye, there being occasional internal

squint on that side. The patient was given nutrient enemata, as all food by the mouth was at once returned.

It was thought that she was possibly suffering from some intracranial growth, but nothing abnormal was seen on ophthalmoscopic examination. Up to this time there was no sign of any blue line on the gums.

During the next week feeding by means of nutrient enemata was continued, the patient lying in a semi-conscious condition, and complaining of intense pain in the head. About this time it was discovered that she had taken something previously, and later, when she was able to talk about things, she admitted that she had taken in the course of a week $1\frac{1}{2}$ oz. of diachylon.

Towards the end of November a blue line began to appear on the gums, and rapidly became more apparent. Paralysis of the right external rectus became complete, the patient complaining of diplopia. Knee-jerks were diminished, pressure over the vagi gave rise to pain. Left pupil was larger than right.

On December 9th lead was discovered in the urine, but could never be detected on any other occasion. Since then the patient has been getting well. The most persistent symptoms were headache and constipation. On December 15th she had another epileptiform attack, but none since. The patient is now about the house. The blue line has almost entirely disappeared, and the ocular paralysis has passed off. The most noticeable point about the case is, I think, the long period—almost a month—that elapsed between the taking of the lead and the appearance of the characteristic signs of lead poisoning. I have come across several other cases of poisoning by diachylon, but never any so severe as this one.

FRANK G. LAYTON, L.R.C.P., M.R.C.S.

Walsall.

—*British Medical Journal*, April 11, 1903.

CHINA IN VERTIGO.

WE have a long series of remedies for vertigo in homeopathy: *Belladonna* in full-blooded persons, *Rhus* with older people, *Nux vomica* in vertigo rising from the stomach, then *Conium* and *Cicuta*. This latter kind of vertigo I might describe as the Socrates vertigo, as there is a failing in the strength of the lower extremities as with Socrates when he was killed with hemlock. Schuessler's Nerve-salts, *Calcarea phosphor.* and *Kali phosphor.* also will, no doubt, remove vertigo (the so-called nervous vertigo with neurasthenic patients); but

here we would describe more closely the vertigo curable with *China*.

Miss O., forty years of age, had taken a severe cold (having been thoroughly drenched by a thunderstorm); her symptoms were those of influenza. The stomach was especially affected, there was complete loss of appetite, the tongue was thickly coated, and there was headache. Her chief complaint was: *Vertigo when raising herself up*. The patient is very pale, and, indeed, is generally so. She had before, this received *Calcarea carb.*

Caspari says: Pale persons should have *China*. If followed literally this advice would lead to many a disappointment. Still there is considerable truth in this saying, and a pale face may frequently become a leading symptom. *Ferrum* might also be considered in this connection, but still there is a great difference between *Iron* and *China*, and it would be a great mistake to substitute one for the other without a good reason. Nor is it a matter of indifference if we substitute *Chinin*, the active principle or so-called alkaloid of *China*.

In our case *China* alone was indicated. And even an allopath need not have shrunk back from the homeopathic "clinic" experiment. For it does not need any high unsubstantial potency; on the contrary, I give in such cases with preference the tincture itself. The patient was, therefore, given three times a day two drops of *China*, and in a few days she was freed from her vertigo and also otherwise restored. If *China* had not proved successful I had intended to give *Apis*, which was indicated by the symptom: "As if there was water in the brain (dashing about within the head)."—H. Goullon, translated in *H. Recorder*.

SEP

PENICILLUM GLAUCUM AND THE PATHO- GENESIS OF PELLAGRA.

CENI and Besta (*Riv. Sperim. di Fren.*, December, 1903) describe their observations of the effects on animals of poisoning with two varieties of penicillum glaucum. The experiments are part of a larger series not yet concluded. The results seem to the authors to deserve immediate publication, but they insist on the tentative character of all deductions that may be drawn from them. Of the two varieties of penicillum

glaucum (called provisionally A and B), A has not previously been studied, but it is widely disseminated in Nature and may readily be obtained from mouldy maize and from numerous other vegetables. It prevails especially during the cold months from October to April. Its growth in cultures is very slow. Either in cultures or on maize it has a characteristic fusty smell. Variety B is probably the variety studied by Di Pietro. It is found in similar surroundings to those of A, but flourishes most during the hot months. The pathogenic power of the germs was studied by the direct (endovenous and endoperitoneal) introduction of the germs into the organism, by feeding animals on maize or polenta infected by penicillum, and by the injection into animals of the toxins extracted by alcohol from cultivations of the germs. The chief results of poisoning with A were shock, general depression, and muscular relaxation. The symptoms of poisoning with B were those of neuromuscular exaltation—muscular spasm, tremors, and exaggeration of reflexes, though it is noted that after injection of the toxic extract of B, the animal after a period of excitement passed into a phase of relaxation which resembled the effects of A. In each variety the effects are practically the same whether the toxic principle is injected separately, or the germ introduced into the circulation or the peritoneal cavity or into the alimentary canal. In each variety the germ, whether spore or mycelium, acts only by the toxin which it contains, and to produce symptoms of equal intensity it is necessary to introduce approximately equal quantities of the germ. In this respect penicillum differs markedly from aspergillus which has somewhat similar effects, produced often by small quantities of the micro-organism. Small quantities of penicillum or of its toxic principle are quickly neutralised or eliminated. The local reaction (more marked in the case of A than B) is the same whether the toxins are injected or spores themselves introduced. A decided phagocytosis rapidly removes the poison. When animals are fed on infected maize intense gastro-intestinal lesions may be produced, but they are much inferior to those similarly produced by aspergillus. The authors admit that the symptoms recorded by them as due to penicillum do not justify any claim that it is the sole cause of pellagra, and do not even entitle it to such a place as aspergillus occupies in the etiology of the most acute form of that disease. The common phenomenon, for instance, of a patient admitted to hospital with slight symptoms of pellagra and suddenly developing an acute attack several days after his complete removal from all possibility of further poisoning, is quite unlike anything that occurs in experiments with penicillum. But the chronic or subacute form of pellagra

resembles in many respects the results obtained with the a variety of *penicillum glaucum*. It is suggested that pellagra is the result of a mixed infection, its symptoms varying as one or another germ predominates, and that valuable results may be obtained by recording the nature and effects and seasonal prevalence of different germs.—*British Medical Journal*, March 26th.

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.

PITCHBLEND.

Is there anything known of Pitchblend being proved or used for homeopathic treatment? Seeing it contains Radium, and that M. Phisalix, of Paris, has found that viper poison exposed to Radium ceases to be poison, either Pitchblend or Uranium would be worth proving. I have obtained some pitchblend from Harrington Brothers, 53A, City Road, from Redruth, Cornwall.—E. B. IVATTS, Birmingham.

[Uranium—that is, Nitrate of Uranium—has been proved. It is highly desirable that Radium and Pitchblend should also be proved, and we hope our correspondent and others will undertake this.—Ed. H. W.]

NOTIFICATION.

* * Under this heading we shall be happy to insert notices of appointments, changes of address, &c., and holiday arrangements.

Colwyn Bay.—DR. T. REGINALD JONES, late of Birkenhead, has removed to "Wayside," *Conway Road, Colwyn Bay*.

Obituary.

FREDERICK FLINT, M.D.

WE regret to have to announce the death of Dr. Flint, of Scarborough, who passed away on July 25th, at the age

of 62. The following notice of our late colleague is from the *Scarborough Evening News* of July 26th:—

“DEATH OF DR. FLINT.

“We regret to announce the death of Dr. Fredk. Flint, of Mayfield, Ramshill Road, Scarborough, which occurred at ten minutes past eleven, on Monday night, at High Fields, Kirbymoorside. Dr. Flint had been in failing health, and unable to attend to his practice, since February last. By advice of the eminent physician, Sir Thomas Barlow, he was removed from his home to High Dales, Hackness, about two months ago, and three weeks prior to his death, again acting under advice, he was taken to High Fields, Kirbymoorside. During his illness he was regularly attended by Dr. Ross. Deceased leaves a widow and nine children—three sons and six daughters.

“The late Dr. Flint, who was sixty-two years of age, was a native of Canterbury. For a short time he practised in Norwich, coming to Scarborough thirty years ago, when he succeeded to the practice of the late Dr. Craig, and for a number of years resided at the corner of St. Nicholas Parade. During his time in Scarborough he has conducted a large practice, for the last seventeen years in partnership with Dr. Ross, Vernon Place. He was a convinced and earnest Congregationalist, and began his association with Bar Church in 1874. The following year he became a deacon, retaining that office up to the time of his death, a period of twenty-nine years. Dr. Flint took a very active and sympathetic part in the work and services of the church. Excepting when out of town, or called away by the demands of his profession, he was always in his place at the Sabbath services, at the Monday night prayer-meeting, and the mid-week service on Wednesday night. He was deeply interested in the work of foreign missions, and has for years been a generous and earnest supporter of the London Missionary Society. Indeed, all the institutions of the town, philanthropic and religious, had in Dr. Flint a sincere friend, especially the Town Mission and the British and Foreign Bible Society, whilst he was devoted to the promotion of the principles of total abstinence. Whilst a well-wisher of all Christian Churches in the town, that at Bar had in him a specially warm-hearted adherent, and he was a close friend of the present pastor (Rev. Fredk. Hall), with whom he has been intimately associated during the whole of his ministry in the town. Bar Church has lost in Dr. Flint a kind and helpful friend, and as a townsman his kindly, useful presence will be missed. Dr. Flint took no prominent

part in the political or municipal life of the borough, but he had many close friends, who mourn his loss.

"The interment took place at Scarborough Cemetery on Friday, July 29th, preceded by a public service at Bar Church."

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

HOURS OF ATTENDANCE:—Medical (In-patients, 9.30; Out-patients, 2.0), Daily; Surgical, Monday, 2.0; and Saturdays, 9 a.m.; Thursdays, 10.0 a.m.; Diseases of Women, Tuesdays, Wednesdays, and Fridays, 2.0; Diseases of Skin, Thursdays, 2.0; Diseases of the Eye, Mondays and Thursdays, 2.0; Diseases of the Throat and Ear, Wednesdays, 2.0; and Saturdays, 9 a.m.; Diseases of Children, Mondays and Thursdays, 9.0 a.m.; Operations, Tuesdays, 2.30; Diseases of the Nervous System, Thursdays, 2 p.m.; Electrical Cases, Wednesdays, 9.0 a.m.

MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Bigler (Wm. H.). Syllabus of Lectures on Physiology. Feap. 8vo, lr., pp. 205. (Homeo. Pub. Co. Net, 6s. 6d.)

Clouston (T. S.). Clinical Lectures on Mental Diseases. 6th ed. Cr. 8vo, pp. 752. (Churchill. Net, 14s.)

Dunglison (R.). A Dictionary of Medical Science. 23rd ed. Roy. 8vo. (Churchill. Net, 34s.)

Hall (G. S.). Adolescence: Its Psychology, and its relations to Physiology, Anthropology, Sociology, Sex, Crime, Religion, and Education. 2 vols. 8vo, pp. 530-784. (S. Appleton. Net, 31s. 6d.)

Humphry (Laurence). A Manual of Nursing: Medical and Surg. 27th ed. Cr. 8vo, pp. 268. (C. Griffin. 3s. 6d.)

Khory (Rustomjee Naserwanjee) and **Katrak** (Nanabhai Navrosji). Materia Medica of India and their Therapeutics. 2 vols. 8vo, pp. 619-800. (*Times of India P., Bombay.*)

Leftwich (Ralph Winnington). An Index of Symptoms as a Clue to Diagnosis. 3rd ed. Cr. 8vo, pp. 400. (Smith, Elder. Net, 6s.)

Lent (E. B.). Being Done Good. Comments on the Advance made by Medical Science during the Past 5,500 years in the Treatment of Rheumatism. Cr. 8vo, pp. 345. *Brooklyn Eagle Office.* Net, 6s. 6d.)

Rogers (Leonard). The Physiological Action and Antidotes of Colubrine and Viperine Snake Venoms. 4to. (Dulau. 3s. 6d.)

Squire (Peter Wyatt). The Pocket Companion to the British Pharma-

copoeia. New ed. 12mo, pp. 792. (Churchill. Lr., net, 7s. 6d.)

Stevenson (Surg.-Gen. W. F.). Wounds in War. The Mechanism of their Production and their Treatment. 2nd ed. 8vo, pp. 511. Longmans. Net, 15s.)

Sykes (John F. J.). Forty-eight Annual Report of the Medical Officer of Health on the Vital and Sanitary Condition of the Metropolitan Borough of St. Pancras. Report for the year 1903. 8vo, pp. 167. (Office.)

Turner (Dawson). A Manual of Practical Medical Electricity. The Röntgen Rays, Finsen Light, Radium, &c. 4th ed. Revised and enlarged. (University Series.) 8vo, pp. 460. Bailliére. Net, 10s. 6d.)

Tuson (Richard V.). A Pharmacopoeia. Including the Outlines of Materia Medica and Therapeutics for the Use of Practitioners and Students of Veterinary Medicine. 4th ed. Cr. 8vo, pp. 386. (Churchill. Net, 7s. 6d.)

Wilson (Andrew). The Modern Physician. Being a Complete Guide to the Attainment and Preservation of Health. Illust. Vol. 1. Roy. 8vo, pp. 270. (Caxton Pub. Co. Net, 7s. 6d.)

Wright (A. E.). A Short Treatise on Anti-Typhoid Inoculation. Containing an Exposition of the Principles of the Method and a Summary of the Results achieved by its Application. 8vo, pp. 86. (Constable. Net, 3s. 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, 8, *Bolton Street, Piccadilly, W.*

Letters to the Editor requiring personal reply should be accompanied by stamped directed envelope.

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.

Dr. Dyce-Brown, London.—Mr. Foster, Scarborough.—Mr. J. S. Hurndall, London.—Dr. Cooper, London.—Dr. Jagielski, London.—Dr. Drzewiecki, Warsaw.—Mr. Ivatts, Birmingham.—Dr. Burford, London.

BOOKS AND JOURNALS RECEIVED.

Hom. Review.—Zoophilist.—Mind.—Revist. Hom.—Med. Times.—Allg. Hom. Zeit.—H. Monatsblätter.—The Chironian.—La Propaganda Homeopatica.—Maanedsk. f. H.—H. Maandblad.—La Homeopatia.—Ind. Homeopathic Review.—Hom. Envoy.—The Individualist.—Medical Century.—Rev. Hom. Française.—H. Recorder.—Wjestnik H. Med.—N.A.J. of H.—Clinique.—New Eng. Med. Gaz.—L'Art Médical.—Amer. Medical Monthly.—University

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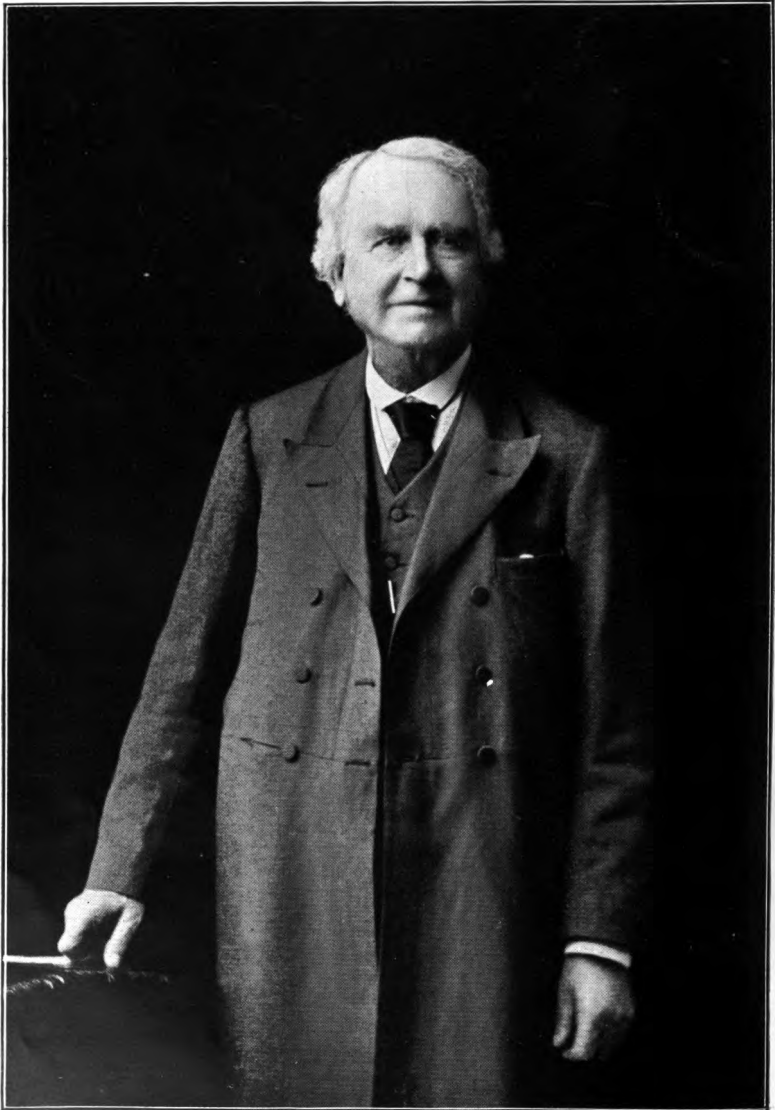
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DR. R. E. DUDGEON.

[London Stereoscopic Co.]

THE
HOMEOPATHIC WORLD.

OCTOBER 1, 1904.

DUDGEON.

IN the fulness of years and honours ROBERT ELLIS DUDGEON has passed to his rest. Britain has given to HAHNEMANN many distinguished disciples, but for sheer ability there is not one among them who can compare with the doyen of British homeopaths who has just left us, after sixty-five years of ceaseless labour in the cause of the healing art. We doubt if his colleagues all realise the rare combination of talents, of heart and mind which DUDGEON brought to their service. His ready wit and the delightful humour which always flavoured his discourse, and made his hearers hang upon his words, were apt to make them overlook the solid ground on which these were founded. DUDGEON had among his other talents the rare gift of tenacious and accurate memory. In relating his cases he had never forgotten the crucial details which made the experience of value. The enormous range of his experience provided him with salient illustrations of almost any topic which might

be raised, and rendered his contributions to medical discussions of peculiar value.

But this is only the smallest part of the work he has left us. During the forty years of his co-editorship of the *British Journal of Homeopathy* he has contributed the lion's share of the treasures its volumes enshrine—translations, clinical experiences, provings, and gleanings—a vast store of material which other workers, notably HERING and ALLEN, have laid under contribution for their epoch-making works. This may be said without any reflection on the other great writers associated with him—RUTHERFURD RUSSELL, DRYSDALE, ATKINS, BLACK, and, latterly, HUGHES. Probably HUGHES, though he came late into the field, contributed, next to DUDGEON, most largely to the pages of the *British Journal*.

But the most precious treasure DUDGEON has left us is HAHNEMANN'S own works done into accurate, vigorous, and scholarly English. DUDGEON'S literary style was one of his most important endowments, and his English translation of the *Organon* must remain the standard English version for all time. There is no need for any one to do it over again after the complete revision it was put through by its translator when the second edition was published. DUDGEON'S translation of the *Materia Medica Pura* is no less a classic; and his translation of Hahnemann's *Lesser Writings*, collected in one volume, comprises another work of great interest for which the English-speaking world will always be grateful to DUDGEON.

Yet another noteworthy service has been conferred on the homeopathic profession by Dr. DUDGEON. Some twenty years ago he was convinced of the hopelessness of making any impression on the allopathic profession

by appealing for fairness or justice addressed directly to itself. As a result the *Homeopathic League* was started to put the case before the public. The concrete result of this effort has been the publication of the three volumes of *Homeopathic League Tracts*. The most important, as well as the majority of these tracts, were written by Dr. DUDGEON himself, so that no injustice will be done to anybody if the merit is given to him for them all. Ever since their appearance these tracts have been an unflinching source of ammunition for all who have been led into the polemics of homeopathy. To this day the demand for them is as active as ever, and they have become almost as classic as the other works mentioned above. To DUDGEON'S great memory, his accurate and literary habits, his rich reference library, and his wit and humour we owe the value of the *Homeopathic League Tracts*, and the arsenal of weapons of offence and defence they contain.

It was a paradox of the author of *Erewhon*—DUDGEON'S friend, brother literate and brother satirist, who recently pre-deceased him—that “the dead are more quick, and the quick more dead than are generally supposed to be.” This is, in sober earnest, the fact. Death's door is only next door. Things are not what they seem, though convention is compelled to accept them as such. The greatest illusion of this life is the apparent substantial reality of death. All our instinct rejects the idea. That the mighty intelligence and no less mighty heart of our departed colleague have ceased to be, is not thinkable. We inscribe on the wreath we lay upon his tomb—
“*Au revoir!*”

NEWS AND NOTES.

HOMEOPATHY AS POLITICS AND CULTURE.

THE third and concluding part of Dr. Burford's Presidential Address appears in our present issue. The second part, which dealt with the politics of homeopathy, appeared last month. In that Dr. Burford set forth that the guiding principle of homeopathic politics was the public benefit and that only—*salus populi, suprema lex*; and he showed that the chief need of the homeopathic body for the attainment of that end was a complete academic equipment. In the present section of his thesis, which he has worked out with a philosophic completeness never attempted before, Dr. Burford shows that Culture demands that we do all in our power to learn homeopathic truth, and to make it prevail. And he maintains that our only path of escape from our present isolated position lies in the achievement of this aim.

THE COOPER TESTIMONIAL.

OUR readers will be glad to see, from a circular which we publish elsewhere, that a movement is on foot to raise a testimonial to Dr. Robert T. Cooper. Mr. J. Munford, of Kensington College, Queen's Road, Bayswater, the hon. secretary and treasurer of the fund, will be glad to give all information to inquirers.

A meeting has been held, at which a list of subscriptions was read, showing a total amount received of £52 9s. 6d., but other promises had been made, and it was hoped that a somewhat larger amount would eventually be reached. It was suggested and unanimously approved that each subscriber should be invited to send a photograph for the Album which Mr. Masters has kindly consented to embellish with sketches of a few Irish views loved by Dr. Cooper, and that the Album when completed should be presented to the family.

It was decided to hold the next committee meeting at Kensington College, at 3 p.m., on Monday, October 17th

next, when a selection should be made of one of the two following proposals:—

- (a) To erect a suitable memorial over the grave.
- (b) To discuss some scheme to commemorate the late Dr. Cooper's love of forestry, such as the planting of an avenue of trees in some suitable locality.

Mr. Munford was appointed hon. secretary and treasurer. Mrs. Batemen was appointed hon. auditor.

PITCHBLENDE AND RADIUM—MR. ARMBRECHT'S OFFER.

We wish to call attention to the generous offer of Mr. Armbrrecht, of Duke Street, Grosvenor Square, to supply Pitchblende and Radium free to any who wish to test them by way of proving. It is most desirable that these substances should be proved, carefully and thoroughly, for they are undoubtedly potent medicinal agents. We trust that the offer of Mr. Armbrrecht, who has taken a deep interest in the Radium question, and who possesses a greater store of it than, probably, any one else in the world, will not be allowed to pass unaccepted.

CLINICAL REPERTORY.

THE *Clinical Repertory* to the *Dictionary of Practical Materia Medica* is now in the binder's hands, and will be forwarded to subscribers immediately. The month of October is the last month during which subscriptions will be received. The publishing price cannot be definitely fixed until the cost of printing, &c., is known, but it is expected to be about double the subscription price, and will be announced in our next issue.

THE LAST OF THE BARBER-SURGEONS.

THE following interesting note is from the *Daily Telegraph* of September 20th:—

“In these days no profession demands a more rigorously scientific education than that of the physician and surgeon. All the more

surprising is it that up to quite recent times the professions of barber and surgeon were combined. In a work just published, *At the Sign of the Barber's Pole*, the author, Mr. William Andrews, of Hull, points out that 'in all parts of the civilised world in bygone times the barber acted as a kind of surgeon, or, to state his position more clearly, he practised blood-letting and the dressing of wounds. Their shops were general in Greece about 420 B.C.' In London the Barbers' Company became in 1540 the Company of Barber-Surgeons, and though laws were passed forbidding any 'person using any shaving or barbering in London to occupy any surgery, letting of blood, or other matter, except drawing of teeth,' they were set at defiance. The last of the fraternity in the metropolis was a man named Middlewick, who died in 1821, and was known to Mr. John Timbs. The thoughts of men have widened since then in regard to surgery."

OLD PRESCRIPTIONS.

THE danger of using old prescriptions is a very real one, as the following cutting from the *Daily Telegraph* of September 21st will show:—

"DANGER OF OLD PRESCRIPTIONS.

"A jury, at Hampstead, investigated the death of Beatrice Mary Ingram, twenty-six, a costumier's model, who succumbed to the effects of poisoning. The deceased, who had been much upset by her mother's ill-health, swallowed twenty grains of morphia, afterwards remarking to her sister, 'I am so utterly miserable, I could not help it.'

"A chemist stated that on Friday night Miss Ingram called at his shop, and asked for the usual quantity of morphia for her mother. He told her he would send it up the next morning, as he had not got the prescription made up.

"The Coroner: Did she produce the prescription for the morphia?

"Witness: No. I have made it up so often that I thought it was scarcely necessary to see the prescription every time. The original prescription was made up ten or eleven years ago by a doctor who is now dead.

"The Coroner: I think with a drug of that kind it was a little lax on your part not to insist on seeing the prescription.

"The jury returned a verdict of suicide whilst temporarily insane, adding a rider that there should be in future some restriction on the use of old prescriptions."

Homeopathic prescriptions are not attended with the same danger, but it is quite possible to take too much of a remedy in homeopathy. The old homeopaths gave their patients just as much of a remedy as was needed—often a single dose—and required to know the effect before following it with another.

MORPHINE—THE FIRST OF THE ALKALOIDS.

“XRAYSER” in the *Chemist and Druggist* of September 17th gives this interesting account of morphine and its discoverer:—

“The discovery of morphine was such an important landmark in the history of pharmacy that I would like to add a few sentences to the note on its alleged centenary published in the *C. & D.* of September 3rd. There ought to be no mistake, too, about the fact that the world of medicine owes this achievement to a practising pharmacist. Moreover, the discoverer, Sertürner of Einbeck, in the Electorate of Hanover, was at the time, if not a British subject, at least a subject of the British King. For more than a century chemical doctors had had the idea of separating from opium its active principle, and several of them had got out of it a crystalline salt. Ludwig, a German doctor, in 1668 published a formula for a *Magisterium Opii* which became somewhat famous. Working in accordance with some suggestion of Vauquelin, Derosne, a chemical manufacturer of Paris, claimed to have isolated the active part of opium and called his preparation “*sel narcotique de Derosne.*” His article describing his discovery was published in the *Annales de Chimie* of February, 1804. Séguin, who had taught chemistry under Fourcroy, and who ultimately got into trouble with Napoleon’s Government on charges of having enriched himself improperly over supplies to the Republican armies, read a paper on opium to the Institut in December, 1804, which came nearer than any earlier observations to describing the process for isolating morphine.

“Sertürner, instigated by these unsatisfactory communications, commenced his investigations about 1806, but only published his memoir, recording the patient work of many years, in 1816. In the course of his experiments he came near killing himself and three of his apprentices by his physiological testing of his product. Derosne’s salt had been administered in doses of from 4 to 10 grains by various doctors without doing any harm. Sertürner’s investigations showed that it consisted principally of narcotine. Sertürner’s morphine proved nearly fatal in $1\frac{1}{4}$ -grain doses. Sertürner’s chief title to honour is that he established quite clearly the basic character of morphine, and thereby pioneered the many alkaloid discoveries which followed. His claim was fully acknowledged by the Institut de France in 1881, when he was awarded a prize of 2,000f. ‘for having recognised the alkaline nature of morphine, and having thus opened the way for great medical discoveries.’”

THE GRASS CURE.

YET another new cure! This might be called the Nebuchadnezzar cure. The following is from the *Star* of September 22nd:—

“‘Back to the grass!’ is the cry now heard in New York. Since Eusebos Santos, the American-Cuban, described the benefits of

exclusive grass-water diet, others have tried the experiment. They collect succulent blades daily in the public parks.

"Frank Taylor, 72, the latest convert, says he had gastritis eight years ago, and is now completely cured, all through grass.

"Taylor is a farmer (says the *Telegraph*), and says he intends to winter on a diet of grass, supplemented by clover."

BEQUEST TO THE SUSSEX COUNTY HOMEOPATHIC INFIRMARY.

WE are pleased to hear from the *Daily Graphic*, of August 29th, that the Sussex County Homeopathic Infirmary has been bequeathed £500 by the late Mrs. Jane Bowron, of Hove. Surely this will be a help towards founding the Cottage Hospital which homeopathy has so long needed in Brighton.

"THE BALANCE OF ORTHODOX MEDICAL PRACTICE."

THE following is from the *Individualist* of August:—

"The *Medical Press*, writing on the Hadwen v. Price case, says: 'Adverse comment of any kind from one practitioner upon the opinion of another is at any time undesirable, even when the person criticised holds views such as homeopathy and anti-vaccination, that have been tried in the balance of orthodox medical practice and found wanting.' This sentence throws a flood of light on 'orthodox medical practice.' In the legal profession such a conspiracy of silence as is here divulged would be laughed at. Lawyers are constantly making adverse comments on the opinions of others of their vocation, to the enlightenment of the lay mind and the acceleration of legal progress. Even among ministers of religion the notion that mutual criticism is illegitimate would be scouted. But medical orthodoxy shows itself more obscurantist than the bar or the Church. And the notion that 'orthodox medical practice' is a balance in which any medical or medico-political belief may be weighed and found wanting savours more of the triple tiara than the staff of Esculapius."

Artemus Ward said he had a "well-balanced mind—it balanced in any direction the public required." The mind of "orthodox medical practice," on the other hand, balances in any direction professional prejudice directs.

ORIGINAL COMMUNICATIONS.

THE LAW OF SIMILARS IN RELATION TO SCIENCE, POLITICS, CULTURE.*

By GEORGE BURFORD, M.B.,
Senior Physician for Diseases for Women to the London
Homeopathic Hospital.

PART III.—CULTURE.

“Culture, which is the endeavour to see and learn the truth, and to make it prevail.”—ARNOLD (*Culture and Anarchy*).

“SIMILIA SIMILIBUS CURENTUR” AS CULTURE.

§ I.—An examination of homeopathy as science, or facts and law; and as politics, or the practical administration of this science, might be held as encompassing the essentials of a full-orbed review. What, then, does culture in this galley? The warrant for its inclusion is not far to seek.

Culture, its chief apostle tells us, is characterised by two prime qualities—to see and learn the truth, and the endeavour to make it prevail. How could more appositely be stated its peculiar and especial bearing on the preceding topics of this morning’s discourse? Science and politics, knowledge and practice, what we know and what we do are unified and co-ordinated by culture as a higher authority, which enlarges our horizon, and assigns our place in the world’s work: gives clear insight into our problems, and legitimates our action.

OUR PRESSING PROBLEMS: CULTURE AS GUIDE.

§ II.—Truly the problems on which we desire clear guidance are important enough.

How are we best to maintain our connections with the future?

Hitherto we have been “*voces clamantes in deserto*”; shall we continue to shape our course thus, or yield to a stream of tendency which would land us in the professional establishment?

Is our science—our facts and law—to become domi-

* Being the Presidential Address delivered before the British Homeopathic Congress, at its Annual Meeting on July 1, 1904.

nant and sweep the field, or ultimately to appear merely as a spent influence—as a qualifying agent which has done its work—a force merged into an historical record?

What of the direct effects of our detached position upon us? on the contributions we make to science? on the free working of original minds among us? on the varied amenities of professional life we experience? Is, in short, our detachment a starving or a stimulating influence?

Now culture, which strikes the essential note of progress in saying that *not a having and a resting, but a growing and a becoming, is the path to perfection*; culture, which shows us how to keep up our communications with the future; culture, I say, provides us with the canons of judgment for the appraisalment of our difficulties, for the criticism of our suggested remedies, for the shaping and directing of our internal politics.

Some of the foregoing, if I mistake not, are among the vital problems of present-day homeopathy, and are at least as attractive to you as the former matter we have passed in review. To answer these questions we must get outside our organisation; observe why other similar movements have risen and fallen; take stock of the historic forces which control the career of dissident movements like our own; invoke as standard and criterion the law and cause of progress.

Now here culture has unexceptionable credentials to act as guide and judge for us in these grave practical problems. This mentor, whose function it is from the widest observation to see and learn the truth, and to make it prevail; this judge, which sweeps away a limited outlook, and insists on totality of view; this informing spirit, which tells us that a plan may be salutary and necessary for the future, and yet that the present generation may be sacrificed to it; this counsellor will tell us what of our plans are but the product of the spirit of the time, and, again, of what the foundations are permanent.

THE JUDGMENT OF CULTURE ON THE ESTABLISHMENT PROBLEM.

§ III.—Now, first let us turn the stream of fresh and free thought which culture gives, on the constantly

recrudescing tendency among us to identify ourselves with the establishment. How much do we not lose by our detachment from the main current of professional life, its breadth, its volume, its power? Not to be in unison with the stream of tendency compels us to spend much of our energy in polemics, in strenuous propagandism, which, but for this, could be profitably turned to pure or applied science. Can the atmosphere and equipment of our dissident organisation be calculated to attract or evolve many personalities of national mark? Perpetual prominence being given to our distinctive and differential views, can we preserve the golden mean, and not miss the operation of a well-balanced judgment? And as concerning the methods of a distributed professional culture—the Press, the societies, the educational establishments—how can the instincts of a liberal profession be potently nurtured apart from these?

So the moral seems to be plain. Let us adopt some means for identifying ourselves with the establishment; then these disabilities will cease. We shall once more be included in the main stream of professional life, find free scope for our energies, not in polemics, but in research, have all the powers and the possibilities of the establishment with us, and merge our accentuated views in the larger volume of the greater number.

Now here, culture with the widest possible outlook turns its free and fresh stream of thought alike on the weighty problem of our isolation, and the alternative solutions of this difficulty. Dealing with the problem as a particular instance of a more general case, we are bidden to note that difficulties experienced from the lack of a powerful auxiliary, by no means warrant that the addition of this potent auxiliary would be the proper or fitting cure of the evil. History is full of the cases where this fatal blunder has been made. And as arbiter on our special case, culture bids us beware lest the auxiliary whose lack we feel so acutely may, if called to our aid, not only solve our problem, but a good deal more besides, and, to cite the homely German proverb, get rid of both the bath and the baby.

Now the common but quite erroneous plan offered us for the solution of the establishment problem is specious and captivating: from the establishment side it deplors the slur on learning that sects in a liberal profession imply

(why not sects in astronomy or chemistry?) ; regards the freedom and not the suppression of opinion as determining the survival of the fittest ; and would deal with the difficulties of the medical sectarian problem while they are amenable to diplomacy. From the heterodox side—our side—it attaches predominant importance to the incurable ills of our expatriation from the establishment, is not unduly impressed by the scientific divergence, is intolerant of a strenuous future cast in the shades of opposition, and thirsts for unification as a more congenial, freer environment.

Now to this forced settlement the canons of culture have much to object. First, they point out that this plan is historically an anachronism : that it is a hundred years behind the time. Excellent and statesmanlike at the very inception of the difficulty, the cumulative growth of the secession has added much history to the problem which cannot be wiped from the slate ; history charged not only with indignity on one side and intolerance on the other, but also with the record of the intellectual development, the literature, the crystallised modes of investigation fashioned by the lesser body ; history, the events of which have left on both sides their permanent mark, and whose memories until persistently and slowly lived down will defy all attempts at fusion.

Culture emphatically lifts up its voice against this over-valuing of what it calls machinery : it points out that establishments or secessions alike are means to an end : that this end, the learning of truth and the making it prevail, should be the paramount and inspiring purpose. "Faith in machinery," says Matthew Arnold, "is our besetting danger ; in machinery, in and for itself" ; and, again, "it is a delusion on this point which is fatal, and against delusion on this point culture works." And under the heading of machinery, utilised to see and learn the truth, explicitly come the resources and the spirit of the establishment ; and what these have done for medical truth is within the knowledge of all of us.

The same judicial finding also makes it clear that a special fitness in time is requisite, as the basis of an amalgamation with the characters of permanence. No proof has hitherto been led that this fitness is now existent. The signs of the times do not declare it. But what the signs of the times *do* declare is that movements within

the establishment, the natural outcome of our pioneer work, are slowly progressing. The conversion of the profession to the small dose, the idea of the patient and not the disease, the single remedy, the working (admitted sometimes) of the Similar law, are proceeding according to the laws regulating progress in human affairs. Leave these historic processes alone : let no precipitancy on our part spoil the course of nature. That is our recrudescent tendency to error. We want to make our homeopathic history in a hurry ; we wish to rush the pace of intellectual progress ; short views are our curse ; we sometimes overlook that what we have to do is to provide history with the material to work with. When we chafe at our apparently stationary position, let us then enlarge our horizon.

The application of the canons of culture to this projected solution would be incomplete, without the pronouncement that the suggested settlement could not be permanent—that the grounds of dissension would appear again and again—so convinced are we of the validity of the Similar law.

“ADMINISTRATIVE NIHILISM.”

§ IV.—It is understood that the medical statesmen of the present day insist that a certain balance and proportion is maintained by the establishment ; that its policy is inclusive and not exclusive ; that within its canonical limits all may live and work—“-paths ” and “-ists ” from alpha to omega—providing that no distinctive views are insisted on, no positive homeopathic teachings enunciated, no disproportion of view allowed. A poet so happily satirised this view a century ago in the terms of a theological parallel :—

“ No Deist, and no Christian he,
No Whig, no Tory ;
He got so subtle, that to be
Nothing was all his glory.”

And culture, I may say again, emphatically discourtenances this heterogeneous assemblage that calls itself uniformity. It does not forget that the operation of this comprehension theory within the establishment did not preclude the denouncing of Harvey's immortal discovery,

nor the discountenancing and obstruction of Jenner's work; and with one accord, in place of rising to the occasion and finding scope for Hahnemann's investigation, first abused and finally ignored it.

The trend of culture, then, is away from this suggested settlement of our problem. Alike on the account of its neglect of the historic factor, of its over-valuation of the establishment as machinery, of the arrest it would effect of our distinctive tendencies, and of the moral certainty of providing grounds of scientific dissension, we cannot accept this as our guide of conduct. Elsewhere, then, we must look for the area for our fruitful work.

What lead, hint, or explanation will culture give us of our present position, and its relation to the future? How, in a word, may we best maintain our connection with this future?

A "CONCURRENT ESTABLISHMENT" AND THE SANCTION OF CULTURE.

§ V.—Consider now the alternative of a concurrent establishment—one with equal rights and privileges, with equal rank and equal powers to train, examine, and qualify, holding throughout a similar status to that of the major sect.

To such a foundation as this the canons of culture could allow no objection. Given the indications of power to establish it—that our equipment of school, and hospital, and teachers, and general appointments came up to legal requirement; that we were obviously administering the desideratum of a weighty part of the nation—in such a case, is no sound reason why such an establishment should be denied us.

It would remove various difficulties, notably that prominent one that at present the medical establishment allows and teaches the views and doctrines of the major sect, without making any effort or pretence to ensure totality. It would eliminate that persistent consciousness of the bad statesmanship of the leaders in medical politics, in that a compact and abiding circle in medicine is totally left out of account, ignored with ostrich-like acumen. If the statesmen of the profession wish to raise the power and the importance of medicine in the Commonwealth, they will not do it so long as the unsolved problem of a

considerable dissentient body testifies to all that they are unable to overcome an initial difficulty.

OUR INTERMEDIATE POSITION: AND THE INTERPRETATION OF CULTURE.

§ VI.—That our present position is but an intermediate one is plain without demonstration. Its interpretation on the lines of culture seems to be this (in the exact words of the leading authority): "A tendency may be necessary, and even as a preparation for something in the future, salutary, and yet that the generations or individuals who obey this tendency are sacrificed to it." Could any statement of our position be more apposite? and phraseology put it with more point?

Our position of isolation, our necessary detachment, is that we may work out with more thoroughness, investigate with more initiative, the facts underlying the Similar law, its scope of operation, its relation to other cognate laws, and its inclusion in a higher law of still greater generality. Hahnemann broke away from the establishment, and we have accepted the continuity of his work; detached we shall remain until our work is done, and then, even if we make no move, the averaging processes of human development will again bring us into contact with the broad stream of medical life.

In the meantime we personally are being sacrificed for it. The establishment is becoming homeopathised; the reforming influences are not generated from within: they are elaborated by us. From thus obtaining a clear view of our object we must plan our machinery accordingly; and what the general detail of this machinery is I have already outlined in the middle part of this address. Let us here clearly comprehend that it is because of our necessary excess; our ever putting homeopathy first; our leading it into the solution of all problems relating to the cure of disease and its prevention; our incessant trying and testing of it under all circumstances—it is for this necessary excess that we are penalised. There is absolutely no help for it: it is part of the cosmic order; we must obey. If we give up our position, the same discoveries will be made, but made by others, in a different way, and from other sides; we give up also the forging of a weapon which it is our clear duty to hammer at until

shaped and perfected. In the meantime we are being sacrificed to the necessities of progress. Harmonious perfection is the ideal of culture; culture has many agents: in our sphere we are one.

HOMEOPATHY AS A LEGALISED STATE INSTITUTION.

§ VII.—I have placed this question first because I heartily feel—we all heartily feel—the disabilities and defects which professionally accrue from detachment from an establishment; the evil and the deterioration wrought to medical science by monopoly; the stimulus and the impulsion that each branch would receive when on terms of legal equality. I would urge *this* end as one to be unflinchingly contended for. It would give homeopathy to that keenest of tests—the survival of the fittest; and we are not afraid of that issue; and in concurrent establishment I see the only fair solution of our present difficulty. It lies now with the statesmen of medicine—those whose predecessors should have averted the enormous solecism of disruption—to mend and repair this anomaly, eliminating thus from themselves and from ourselves the appearance of sectaries, and once more rising to the ethical dignity of a liberal profession.

THE REAL IMPORT OF OUR DETACHED POSITION.

§ VIII.—Man is a creature of large discourse that looks before and after, as well as round about him; and about our present our historical guide is clear.

Our body of adherents, our organisation, our public institutions, collectively constitute a whole which is specialised for the purpose of investigating and developing the powers of the law of *Similia* and its congeners. Our warrant for our detached existence is that we may develop these far better—specialised for the work—than in the traditions and environment of the establishment. This, then, is our clear mission, our *raison d'être*; with a scientific basis, to make our investigations grow from more to more; to be before the slow drift of the mass; to carry out pioneer work unfettered by conflict with received opinions.

OUR PRESENT: A SPECIALISATION FOR A DEFINITE
NECESSARY WORK.

§ IX.—Our work is to investigate with a free hand and clear outlook the facts of nature as seen by us; to carry out the full mission of a scientific specialisation, seeing what is to be seen, noting results without fear or favour, and perpetually verifying our work and conclusions, not whittling down and shaping facts and observations in vain attempt at concord with the spirit of the time; in general, recognising our function and accepting our position and its necessity to work out the problems of our special science. The amount of spade work visibly within reach of us is enormous—the facts and laws regulating the adjustment of the dose; the causes which ally the action of drugs and diseases, are, in their formal expression, still wanting: still embedded in the facts of nature: waiting for that fuller inductive research which will translate the implications of our daily experience into defined propositions. Our specialisation, then, is requisite and necessary because of the law of progress, and because of precedents of history. It is requisite and necessary for the complete investigation and development of *Similia* and its congeners; because it is pioneer work, and cannot yet be homologated with the currency of the establishment; and because it is the only assured way of maintaining our connection with the future.

WHEN IS OUR DETACHMENT TO TERMINATE?

§ X.—*When* is our detachment—our specialisation—to end? Properly, when we have done our work, and made good in completeness and entirety our mission. Our work is not done yet: far from it. It is a double-sided unity; the one side, the full working out of our facts and laws—that is the side of science; the other, the homeopathising of the profession—that is the side of history. The latter part of our vocation has proceeded unabated from almost the first days of our heterodox cult. The disappearance of mercurialising; of routine leeching and bleeding; of “heroic” treatment of various types; of heavy dosing; the appearance of the small dose; the single remedy; the unconscious frequent adoption of the Similar principle; the treatment of the patient rather

than the later symptoms merely—these constitute in all their detail fair evidence of the continuous homeopathising of the profession. The former part of our vocation—the ardent cultivation of observation, of research work, of investigation into the powers of nature and the methods of nature in the treatment of disease—this part of our vocation, though less dramatic, requires our best brains, our most unwearied persistence, our fullest support; for this is the vital, the growing, part of our organism, and if we do not grow we cannot give.

Our specialisation will end when we have developed our science so thoroughly that it is no longer matter for debate; when with fuller development comes greater certainty, greater precision, a wider sweep of operation; when we have reached this *terminus ad quem* the necessity for our detachment—our specialisation—will have disappeared.

HOW IS OUR DETACHMENT TO TERMINATE ?

§ XI.—And now to the final and most interesting question of all. *How* is our specialisation to end? Are we to sink our differences, smooth over the distinctive principle, drop the advanced views, and be absorbed into the main stream of medical life? Certainly we may, if, to use a striking phrase of Professor Tyndall's, we prefer intellectual peace at the modest price of intellectual death, with the reassuring certainty that others will take up our work in other ways, pursue our investigations from other standpoints, compass our ends, though more circuitously and with more difficulty, and rightly obtain that olive crown which we refused. To conceive this, however, is to conceive the inconceivable, and to suppose the un-supposable; our end is not that way.

Let us re-address ourselves to the question, How is our specialisation to end? If we are to continue, possibly for generations yet, working out as a detached body the salvation of therapeutics, what of the final issue? If what we look to is the final dramatic exclusive triumph of ourselves and our organisation, the reception of homeopathy into the establishment with open arms, to the sweeping exclusion of hitherto received opinions, I grieve to say there is no warrant for such a chimera. History is not built that way.

Truly such a *dénouement* might suit our vanity; but if it is the victory of truth that we desire, and not the glorification of our own methods and efforts in bringing it about, we must be prepared to take our triumph in some other fashion.

Two alternative issues present themselves. When we extend the range of our homeopathy by further important discoveries; when we bring from darkness to light those cognate laws of which *Similia* is the centre; when nature, still full of hidden facts grouped round the Similar law, when nature is further worked by patient seekers, then new and important issues bearing on health and disease cannot fail to arouse the interest of skilled critics as new and verifiable facts in medicine. These new results would, as is customary, lead independent observers to similar work—at first critical, next confirmatory. Then the homeopathising of the profession will proceed from within.

The other alternative way is less pleasing. Should the *raison d'être* of our separate existence and the proper function of our specialisation be missed; should we not always see with clear insight that search and discovery are of yet more vital and pressing importance than practice itself, we cannot expect to stimulate much homeopathising of the profession from within. True, this is ultimately to be expected; but the issue will be immensely postponed, nor will the work be ours. Rather shall we appear historically as the earlier manifestation of a stream of tendency, which, arising from various sources and called by various names, was ultimately turned to account in the broad fields of the establishment. We shall have accomplished something, for to have started a stream of tendency is *something* achieved; but our power of evoking work on our own lines will belong to ancient history; our doctrines will persist, but we shall be a spent force. This is the fate of causes that do not set themselves to grow; and culture thus describes this type of achievement: "We have not won our political battles, we have not carried our main points, we have not stopped our adversaries' advance, we have not marched victoriously with the modern world; but we have told silently upon the mind of the country; we have prepared currents of feeling which sap our adversaries' position when it seems gained; we have

kept up our own communication with the future." Yes, and when all this is said and done, it is rather a broken-winged achievement.

§ XII.—One of the great thinkers of the Victorian age vividly puts it that "The individual is required, under pain of being stunted and enfeebled in his own development if he disobeys, to carry others along with him in his march toward perfection, to be continually doing all he can to enlarge and increase the volume of the human stream sweeping thitherward." These are our marching orders, obvious and precise; they include our duty here and now, and effectively meet our obligations to those who come after us. Our broad scheme of politics—the fashioning of our corporate conduct for the greatest good—has to include the future as well as deal with the present. Ruskin has it that "Our part is not fitly sustained on the earth unless the range of our deliberate and intended usefulness include not only the companions, but the successors of our pilgrimage. This earth . . . belongs as much to those who are to come after us as to us; and we have no right, by anything we do or neglect, to involve them in unnecessary penalties, or deprive them of benefits which it was in our power to bequeath. Men cannot benefit those that are with them as they can benefit those who come after them."

Ladies and gentlemen, permit me to convey to you my cordial thanks for the patient and discriminative attention you have kindly accorded to me this morning. In this review of *Similia* as related to Science, Pololitics, and Culture, I have throughout regarded it as a human interest, both as a truth to hold and to make prevail, and as a practical measure for the relief of human suffering. I should be repentant indeed if all that remained of this morning's discourse with you was a mere memory of an academic exercitation. Rather I would have it as a stimulus to pursue more zealously than ever the task imposed on you and me to aid with all our powers in the relief of sickness and pain. This is the dominant human interest, and in its unflagging pursuit it has the divinest example and warrant. It is what, on the moral side, this consciousness that we hold a truth has stimulated us to do for others; it is how far to this end it has made us to "scorn delights and live laborious days"; it is its com-

elling power with us as a truth which once clearly seen has to be followed; it is such and similar results which are the personal tribute we pay to the law of Similars as a beneficent influence for mankind. For practical purposes it is important not only what truth we hold, but how we hold it; and it is this seeing and learning the truth, and making it prevail, in this our day and generation, that will continue as an abiding influence when your personalities and mine have dropped out of the strenuous life, and are as impassive as the portraits on these walls.

MATERIA MEDICA MISCELLANY.

By J. R. P. LAMBERT, M.D.

Gelsemium in Obstetrical Work.—"Only a fever remedy" is a slander. The *Jasmine* is one of the best of helpers that the obstetrician possesses. It is a cross between *Belladonna* and *Cimicifuga*, just as *Ferrum phosphoricum* is a cross between *Aconite* and *Gelsemium* in fevers. Its sphere is both relaxation and dilatation. It relaxes the cervix and dilates the os as no other drug I have used, except in cases in which the indications for some other remedy are not of the most positive kind. If I had but one lying-in helper it would not be *Belladonna*, nor *Pulsatilla*, nor *Cimicifuga*, nor *Chamomilla*, but *Gelsemium*. It is as much the pronounced absence of a type that calls for it as anything else. The back aches, the patient squeezes the obstetrician's hand in the vice of a Methodist, and she writhes and twists on the bed in a fashion suggesting bodily effort at induction of the rotation of the fetal head. In delayed advance, with the characteristic movement which has been described as the corkscrew motion of the head in its effort to engage, the attempts of the womb in this direction amounting to almost a uterine intelligence, *Gelsemium* has no equal. Look out for it and be ready to help. For more than once has its effect been so prompt in my practice that I have almost been caught off my guard. I have given it both high and low, and with apparently equally good results. By preference I use the thirtieth now, but cannot condemn the second and third, both of which have served me well.—Dr. C. E. Fisher in the *Medical Visitor*. (*New England Medical Gazette*.)

Lilium Tig. in Ovarian Diseases.—*Lilium tig.* is one of our most important and most often indicated remedies for the treatment of left-sided ovarian diseases. The pains are sharp, cutting, and extend straight across the abdomen and down the left thigh. The flow is generally bright and profuse; it is aggravated during the day and when moving about. Should the flowing continue while the patient is lying down, it will contra-indicate *Lilium*. The flow returns during the intramenstrual period from any unusual exercise, such as riding horseback, riding in a rough wagon, or working over a wash-tub. Its leucorrhœa is brownish, excoriating, and often very fetid.—*Pacific Coast Journal of Homeopathy*. (*Ibid.*)

Onosmodium in Female Complaints.—As prominent leaders we find the following quite frequently suggestive: Violent uterine pains, often of a bearing-down type, or spasmodic, crampy, similar to the pains induced by exposure to cold during menstrual period. Sensitiveness of uterine region < from pressure, even contact of corset or clothing. Utero-ovarian pains, latent for years, tend to recur. Dull, heavy aching, or gradually increasing, throbbing pains in ovarian regions. Ovarian pains, travelling from side to side, leaving parts tender and sore, < by pressure. Utero-ovarian pains > by loosening clothing and lying upon back. *Loss of sexual desire* (this symptom even noticed in males; hence useful in cases of *abusus sexualis*). Constant sensation, as if menses would appear, which are premature, profuse, protracted. Leucorrhœa, cream-coloured, profuse, fetid, excoriating. Pruritus vulvæ < scratching and contact of leucorrhœal discharge.

Uterine cramps have frequently been greatly mitigated by hourly doses of the tincture.—*Allgemeine Hom. Zeitung*, November, 1903. (*Hahn. M.*)

A Cajuput Verification.—Dr. A. L. Fisher reports the following case:—

Mr. X., about fifty years old, comes from a neighbouring town. General health is good, but he cannot eat solid nor semi-solid food without experiencing severe cramping or constricting pain in the esophagus. So severe is the pain that for many weeks he has lived on liquid diet almost exclusively, and has become so weak that he is obliged to quit work. More recently

liquids have caused this pain, though in less degree than solids.

Allen's *Symptomen Register* gives, under constriction of the esophagus, several remedies; but aggravation after eating, and worse while trying to swallow solid foods, only under *Cajuput*.

The sensation of swelling and soreness in esophagus, of which patient also complains, is found under the same remedy, *Cajuput* 3x cured the case promptly, as it did the other similar case.—*Medical Advance*.

Lac Defloratum Eating and Drinking Symptoms.—The same writer whom we quoted last month gives the following indications under the above heading:—

Could not drink milk without its causing sick headache. Many patients complain of inability to use milk in any form, not as a recent trouble but an idiosyncrasy which has followed them from infancy. Eating and drinking milk may cause nausea, vomiting, diarrhea, and sick headache or obstinate constipation. Many are unable to bear the sight or odour of milk. Many cannot eat food in which it forms an ingredient; and many are equally susceptible to the use of cream in any form. We have found that those persons who are so susceptible to milk very frequently present symptoms which call for *Lac deflor.* as their constitutional remedy, and many a cure of an obstinate chronic disease has followed its use. Sometimes a strong dynamic potency of *Lac defloratum* will not only relieve the inability to use milk but will cure the constipation produced by it. For the persistent nausea and vomiting of pregnancy this remedy will relieve perhaps as many cases as *Lactic acid*, for it will as frequently be called for by the symptom totality of the patient.—*Ibid*.

AUSTRALIAN BLUEBELL (*WAHLENBERGIA GRACILIS*) IN A CASE OF DEAFNESS.

By ERSKINE C. WHITE.

THIS plant belongs to the natural order Campanulaceæ. The following case illustrates its action:—

A gentleman, æt. 72, for three years troubled with increasing deafness, complained of intense pains in head

and back of neck, running down the left side of the neck, worse in sinew. The attacks of pain were periodical. His friends have to shout to make him hear. He is of cheerful, firm, hearty disposition, abundant hair and beard; reads with glasses; has good appetite; is a total abstainer. He has had heart strain from a fall on a fence. Is constipated.

For three years I gave, off and on, usual remedies for constitution and deafness.

No results, or merely temporary.

Gave *Wahlenbergia gracilis* 3x (from similarity to English Bluebell).

Pains in head increased (from three doses of three drops a day).

Second week, pains in head insufferable. Omit doses one week.

One dose of No. 100. Hearing completely returns, third week.

Hears as well as twenty years ago.

No return of deafness.

Waha. ϕ acts profoundly on stomach and bowels.

I selected the Australian Bluebell from its slight resemblance to the English bell, on the line of the "Bell" in botany having an affinity for the ears, after Dr. Cooper's success with the Bluebell.

AUSTRALIAN CLEMATIS (*CLEMATIS ARISTATA*) IN FACIAL ERUPTION.

By **ERSKINE C. WHITE.**

A YOUNG woman, age 18. Whole face disfigured for years with eruptions of large pimples. Defied usual remedies. (*Clematis erecta* not tried.) Having no *Clematis erecta*, resorted to *C. aristata*, as it grew abundantly around.

No. 3x three times a day were given.

Eruption completely disappeared.

Complexion remarkably clear. She remains well, one year after.

Holdsworthy, N.S.W.

DISAPPEARING LONDON—MESSRS. EPPS AND
THE EGYPTIAN HALL.

THE Egyptian Hall having been condemned to be demolished, its occupiers have been compelled to seek other quarters. This has entailed the disappearance of Hahnemann's well-known bust from Piccadilly. Messrs. James Epps & Co. are the oldest purely homeopathic chemists in the United Kingdom. We understand that there are claims of priority on the part of another house, which was an allopathic establishment before it became homeopathic; but the firm of James Epps & Co. was homeopathic from the start. They opened business sixty-five years ago—in the year 1839—first at 112, Great Russell Street, W.C., and 82, Old Broad Street, E.C.; afterwards at 170, Piccadilly, W., and 48, Threadneedle Street, E.C. The City pharmacy was rebuilt in 1891, the original premises having become decayed and ruinous, and now in 1904 the West End premises situated under the old Egyptian Hall are so dilapidated as also to require rebuilding. The firm therefore have now established themselves in newly-opened premises in the immediate rear of the old ones, at 60, Jermyn Street, S.W. Although the removal of old landmarks is painful to our conservative instincts, no one need commiserate the firm on the change. Their new position is an excellent one, and they have greater advantages of light and air than were before available. Many things have been learned in the art of shop-fitting since the Egyptian Hall was built, and no pains have been spared in taking advantage of them all.

ZIZIA AUREA IN CHOREA.—Dr. Shanks cured a case of chorea with this drug in a girl of 16 who had benefited under arsenic until toxic symptoms developed. A rest cure of six weeks had done no good. She was tall, thin, pale, anemic and poorly nourished. She had choreic movements of the arms, and at times of the legs, also drawing and twitching of the muscles of the face. The latter movements sometimes played about the eyes and forehead, at other times about the cheeks or mouth. These spasmodic movements gave the face a strained appearance, bordering at times upon the sardonic. The movements continued in some measure during sleep. Improvement began within forty-eight hours, and complete recovery took place in a few weeks. Two years later similar symptoms recurred in the face, which yielded again to zizia.—*Progress*, February, 1904; *North American Journal of Homeopathy*, April, 1904. (C. J. W. in *J. B. H. S.*)

EXTRACTS.

HOMEOPATHY AND THE "OD" * THEORY.†

By DR. KIRN.

Translated by P. W. SHEDD, M.D.

It is delightful to wander through one's own country, but it is also beneficial to occasionally cross the border, and, ascending some far-seeing mountain summit, to look back upon the familiar picture, its hamlets, cities, rivers, lakes and hills. Thus to-day I would consider our scientific fatherland, Homeopathy, from the foreign view-point of the "Od" theory. Perchance we may behold vistas and see things hitherto invisible, and perfect our knowledge of Hahnemann's doctrine through that of Reichenbach to our own advancement and the healing of the sick.

Consideration of the relations of the Od theory to homeopathy I have thus far found only in the handbook of Dr. A. von Gerhardt, where (pp. 25-39 of the introduction) is an excellent exposition of the ergistic action of the homeopathic dose from the Od standpoint. Elsewhere little mention of Reichenbach is to be found among us, and yet I am convinced that no department of science has such close relationship with homeopathy as the Od doctrine, and that homeopathic physicians should be peculiarly interested in the recognition and propagation of this neglected discovery.

Reichenbach says in the preface to his work: "The present and future development of the laws of Od will work almost transmutation in many departments of medicine."

Life processes hitherto unexplained here find solution, and many practical therapeutic measures appear in a new light. The action of our potencies can depend only upon what Reichenbach termed the "Od." Let us see what the science of "Od" offers the homeopath, and whether the results of this theory coincide with our views and experiences, recognising our peculiar fitness to comprehend the value of Reichenbach's discovery.

* Pronounce "ode."

† From *The Chironian*, August, 1904. Translated from *Zeitschrift des Berliner Vereines homœp. Aerzte.*, vol. xxii.

I. *Sensitivity (Sensitivitat).*

The reason why the Od doctrine is comparatively unknown lies in the fact that not mankind in general, but only the so-called "sensitives," may feel and see (?) the Od.

This differentiation of mankind into "sensitives" and "non-sensitives" is of great practical import. "The physician who does not recognise the powerful influence of the Od upon sensitives will frequently play a sorry rôle at the bedside," says Gerhardt in the previously mentioned introduction, whose perusal I would commend to those interested, before they begin the study of Reichenbach's works. Sensitivity is an exaggerated sensitiveness to stimuli. The sensitive with his hyper- (nervous) perception is open to impressions not apprehended by the non-sensitive. It is known that many physicians are able to diagnose infections such as scarlatina, measles, &c., by olfaction. Sensitivity is hyperesthesia. But this has two sides; the hypersensitive nerve responds to stimuli that do not affect the normal nerve; the sphere of stimuli (Reizschwelle) is enlarged. Stimuli of lesser action are termed hypostimuli; of similar action, parastimuli; of greater action, hyperstimuli. Men, according to their state of health or disease, exhibit differences in their reaction to external stimuli. What is hypostimulus to one becomes parastimulus to another, and hyperstimulus to a third individual of great sensitivity.

The other side is, that stimuli normally perceptible and common to the healthy, act upon the hyperesthetic or "sensitive" powerfully and abnormally, a fact meriting the utmost consideration in pathology. Reichenbach was the first to utilise the delicacy of human sensitivity in the investigation of nature's mysteries, and his results demand an entirely new comprehension of pathology and therapy.

In the domain of homeopathy there is an ancient feud between high and low potentists, and each party believes that truth will die with it. Both accomplish genuinely homeopathic cures. Upon this apparent confusion the concept of sensitivity alone sheds light. The sensitive, hyperesthetic, erethistic patient of fine mentality must be handled with high potencies; the torpid, non-sensitive, robust, hyperesthetic needs the low. Low potencies prescribed for the sensitive will aggravate. Each primary

agg. is a proof that the potency was too low. On the contrary, high potencies administered to the non-sensitive are null and void. Hence, if we would know the suitable potency we must first prove the sensitivity of the patient. Patients come with predilection to homeopathic physicians, disgusted with the gross mixtures of the "regular" school. If we give to the sensitive patient only low potencies, he soon arrives at the conclusion that "homeopathic medicine is of no avail. I feel only worse," and determines thereafter to flee all drugging. Upon the sensitive all drugs have action, and hence must be chosen with great care, and not too frequently repeated. Upon the non-sensitive the low simillimum alone will have effect.

The often ridiculed "drug-olfaction" is naturally efficacious only with sensitives. How infinitely, incredibly acute this class is, every page of Reichenbach's work shows. Hence it is of practical value for us to diagnose "sensitivity," and Reichenbach aids us here in his book, "The Sensitive and the Non-sensitive." (Wer ist sensitiv, wer nicht?) Do not consider that such diagnosis is difficult. Sensitives are not rare, and in this neurotic age are daily becoming commoner.

"No village is so small that sensitives are not found therein. There are several methods by which sensitivity may be determined. These methods may be exploited with all sorts of procedures and instruments, and thus a scientific (?) atmosphere may be developed, but this is not essential. An empty hand, a posture, a sign, may, like a chemical reagent, determine the question; even these are not necessary; a simple inquiry intercalated into an oral examination may suffice. Even the presence of the patient is not required—knowledge gained from friends, family, an old servant, concerning the habits of the patient is enough to establish the diagnosis."

Symptomatology of Sensitivity.

The first question is. Does the patient sleep quietly or restlessly? Is the sleep restless even when in health? Non-sensitives, when well, sleep quietly all night, while sensitives are restless and given to insomnia. The more restless the sleep, the greater the sensitivity. Sensitives love solitude, and avoid crowds (agoraphobia); avoid handshaking. He who delays long in freeing the grasped

hand is surely non-sensitive—the sensitive withdraws his own quickly. In winter they prefer the porcelain stove (common in Germany) to the iron; the Odpositive metal is disagreeable; the Odnegative stone is not.

Even the odpositive mercury of mirrors is obnoxious to the sensitive. They cannot bear the fragrance of flowers in their room at night. Moonlight in the room hinders sleep, makes them gay and lively. They prefer a cool *régime*, wear thin clothing, elect cold rather than warm food. They dislike warm baths. Of foods they avoid fats, sweets, spices, but are fond of bitter, sharp aliments (mustard, radish), acidulous substances as fruits, and especially salads, as lettuce. They like rare meats, raw eggs, milk warm from the cow. Sunshine decreases the appetite, which is increased at full moon. Chlorotic sensitives have peculiar longings for raw, unprepared nutriment (*vide* the Naturheilmethode—Nature's cure). Tobacco is obnoxious, also wine and tea. They eat moderately, prefer light breakfasts. Reichenbach says: "The sensitives turn from our hyperdelicate modern civilisation back towards the primeval state of man. And since they are thus guided by instinct alone, it is apparent that nature with its negative force is stronger in them than in other men. One might well learn of them in the study of diet; consideration of their inclinations is instructive in teaching more normal ways of living; of better maintenance of physical and psychical health. Hence, the study of sensitives offers us concepts of primary importance."

Mercurial, restless individuals who can never keep still are sensitive. Leather shoes and gloves hinder the Od currents and are unpleasant; constrictive clothing obnoxious. Perhaps the beneficial effect of air-baths is largely due to the fact that the equilibrium, the popularity, of the Od emanations is left undisturbed. Anesthesias, numbness of fingers, arms, feet, legs are not uncommon as correlatives of hyperesthesia. The uniformity of plains, prairies is displeasing. An unconquerable desire for change of work is born in them, hence they are not suited to quiet, steady labour; to resolute, productive exertion; to steadfastness amid life's adversities. Neurasthenia. Of colours, yellow displeases, blue is pleasing. Sensitives suffer much from headache, migraine, gastroses, cramps.

Sensitives recognise the presence of those in ill-health, even when the abnormality is not externally cognisable. The sick are more Odpositive than the well. If we think of the "sick atmosphere" of the tuberculous, that is enlightening. There are, as is well-known, individuals able to prophesy weather changes. The reason therefore lies in the Od disposition of air and earth-surface. Many animals have a remarkable perception of weather changes (tree-toad, spider). Before the storm there exists an Odpositive charge, which, with rain, passes over into an Odnegative. Many patients are conscious of this, and during nocturnal storms fall asleep only when the rain begins to fall. The sensitive, because of the general esthesia of his nervous system, is easily frightened; the slamming of a door causes a visible start (*K. carb.*); for new acquaintances he soon conceives a well-defined like or dislike. Thus one finds the sensitivity of an individual mirrored in his temperament and humours. One can logically determine his sensitivity or non-sensitivity from his way of exhibiting himself and his feelings in the conduct of life. Hyperesthesia, liveliness, fineness of feeling mark the sensitive, as well as restlessness, desire for change of work (or play), sometimes capriciousness and a less well-balanced mental equipment. These are the diagnostic points of sensitivity, easily determined in the ordinary examination of the patient, and as everywhere numberless individuals are found in whom these characteristics are united or largely present, the value of such diagnosis in medical practice and homeopathic treatment cannot be over-estimated.

Dahlke says in his excellent *Discourses on Materia Medica* concerning *Sulphur*: "The potency was always a matter of dispute. That the 30th is the normal seems to me indubitable, but in many chronic *torpid* eruptions the lowest potencies are often indispensable." I would emphasise the word *torpid*, and in general maintain: in all torpid, hypoesthetic diseases of non-sensitive organs or organisms the low potencies must be used. Disease may make a single organ or the whole individual either hyper- or hypo-esthetic; probably these are only stages of the same process.

According to the demeanour of the organ or the individual, the potency should be high or low; it is not determined by the nature of the drug nor by the

name of the disease, but only by the sensitivity of the organ or the patient. All efforts to declare the 30th or lower potencies alone correct are vain; one may only say that for these torpid patients low potencies (in common and frequent dosage) are necessary, while for the sensitives high potencies (infrequently given) are indicated. And exact homeopathic anamnesis must not only include symptomatology, but also present the degree of sensitivity of the patient. It is well known that there are great differences in patients in the degree of sensitivity; from a torpid individual you may without narcosis excise the lip; the other, a sensitive hysteric, suffers cramps and faintness from a breath of air. The "regular" school has bothered itself little with these differences; with us there has certainly been more inquiry into the sensitivity of the diseased nervous system, but this important law has not yet, to my knowledge, been fully and clearly established. I believe that if homeopathic physicians would study sensitivity more carefully for some years or decades, we should gradually gain more exact indications for the potency. How many cures must have escaped us because we did not strike the right potency! Cases are always appearing in our literature in which it is demonstrated that permanent cures only resulted from the discovery of the suitable potency.

(To be continued.)

KORSAKOFF'S DISEASE.

SOUKHANOFF and Boutenko (*Soc. de Neuropath. et Psych. de Moscou*, January, 1904) describe a typical case of this condition. A man of 43, a pronounced alcoholic of many years' standing, had delirium tremens at the beginning of 1902, and in the autumn of the same year epileptiform seizures, which left him very stupid, with slight pyrexia. As he got better his memory proved poor and he showed the characteristic tendency to tell "fairy tales." In November signs of multiple neuritis (loss of knee-jerks, tenderness of calves, uncertain gait, and wasting of lower limbs) appeared; this, together with the loss of memory for recent events and false reminiscences, giving a typical example of the syndrome described by Korsakoff. Both psychological and physical symptoms improved, but did not completely disappear. A careful review of the literature (nearly 200 cases) brings out the following points: This combination

of a special paramnesia with multiple neuritis is very constant, nine-tenths of the patients being chronic alcoholics, though in a very few enteric fever, gastro-intestinal disturbances, &c., seem to have been responsible. It occurs in men between the ages of 40 and 50, in women between the ages of 35 and 40; three-fifths of the patients are men. In the discussion following this paper the association of a set of psychical symptoms with a set of physical symptoms, constituting Korsakoff's disease, was compared with general paralysis of the insane; and it was pointed out that the paramnesia which constitutes the commonest type of psychosis in these cases cannot be looked upon as diagnostic, for it occurs as a result of cerebral softening and other gross intracranial lesions.—*British Medical Journal*.

Obituary.

ROBERT ELLIS DUDGEON, M.D.

By DR. CLARKE.

ONCE more the mournful duty devolves on the HOMEOPATHIC WORLD of chronicling the death of one of Homeopathy's greatest sons. The Reaper of the twentieth century has been busy in harvesting the fruits of the nineteenth. The first year it was Burnett; the second it was Hughes; the third Cooper; and the fourth year claims Dudgeon, the eldest of them all.

Born at Leith (the port of Edinburgh) on March 17, 1820, Robert Ellis was a younger son of a wealthy timber merchant and shipowner of that town, trading principally with Sweden and Norway. The name of the firm was "Dudgeon and Dickson," and for business purposes the Dickson of the firm took up his residence in Sweden, permanently as it turned out. The late Baron Oscar Dickson, of Sweden, was his son.

At an early age Robert was sent to a boarding-school, of which he used to give an amusing description—it was a school of the "Dotheboys Hall" type, though his fond parents were in blissful ignorance of this fact. But whatever the opportunities for instruction might or might not be, nothing could prevent young Robert taking in learning. When still a boy, he passed on to Edinburgh

University, and by the age of nineteen he had passed all his examinations for the M.D. degree, and had received the qualification of the Royal College of Surgery of Edinburgh. Although he had passed all his examinations, his M.D. degree could not be conferred until he was of age, so he spent the two intervening years in further studies in the medical schools of Paris and Vienna. To his residence in these capitals is probably due his familiarity with the French and German languages, which proved of such service in after years.

Contemporaries of his, and fellow sons of Midlothian, were John Drysdale, Rutherford Russell, and Francis Black. When at Vienna, Dudgeon met his old friends, Drysdale and Russell, who had come to study homeopathy at Fleischmann's hospital. But Dudgeon was engaged in other studies, and could not be induced to look into the new cult. It was after all had returned home that Dudgeon became interested, and in this way: Drysdale and Russell asked Dudgeon to help them with some translations they were making from the German. Dudgeon, then as always ready to help his friends, undertook a share of the work. He then became interested indeed; so much so that he made another journey to Vienna to study homeopathy for himself. From that time to his death—for over sixty years—his life has been spent in the service of the homeopathic cause.

BRITISH JOURNAL OF HOMEOPATHY.

The *British Journal of Homeopathy* was started on its long and honourable career in the year 1842, under the editorship of J. Rutherford Russell and J. J. Drysdale. Three years later Dudgeon joined the staff, and continued to be one of its editors until it ceased to appear, and its editor-in-chief for the greater part of its existence. The *British Journal of Homeopathy* was a quarterly journal, whose solid contributions to the practical and theoretic evolution of Hahnemann's system are part and parcel of the foundation of the practice of to-day.

Translations, new provings, clinical experiences, reviews of books, summaries of practice recorded in other journals, and gleanings from literature of all schools—these are embodied in the forty-two volumes of the *British Journal*, and these in turn have been

exploited by compilers of the standard books of materia medica and practice in use at the present day.

HOMEOPATHIC WORLD.

During the last two years of the existence of the *British Journal of Homeopathy*, at Dr. Dudgeon's request, I had joined him and Dr. Hughes on the editorial staff. The *British Journal* closed its career in 1884. In the following year I took over the editorship of the HOMEOPATHIC WORLD from Dr. Burnett, and I was enabled to enlist the services of Dr. Dudgeon in my new capacity. In the twenty volumes which have appeared since 1884, Dr. Dudgeon has contributed a notable proportion of the articles, many of them editorials, but most of them under his own name. Only last June a brilliant article from his pen on "Shakspeare and Physic" appeared in the pages of this journal—an article which has been pronounced by a Shaksperian authority as providing (incidentally) the best argument against the Bacon-Shakspeare theory which has yet been furnished. Yet another service of no small importance Dr. Dudgeon has conferred on the HOMEOPATHIC WORLD—for many years past he has compiled its Index. One of the most important of Dr. Dudgeon's gifts was the faculty of arrangement—a faculty of supreme importance in all literary work, and especially so in homeopathic literature, which necessarily deals with an enormous mass of detail. To the very last—as long as he was able to hold a pen—he continued to work at the Index for the present year, and it is now almost complete to date, so that the Index to the present volume will be mostly his compiling.

LITERARY WORKS.

Gifted in an eminent degree with the literary faculty, Dr. Dudgeon's writing was by no means confined to journalistic work. Homeopathy has never wanted representatives who have the power of expressing themselves clearly in direct and vigorous language, and to this faculty it owes many of its treasures. Of literary homeopaths Dr. Dudgeon must always occupy an honoured place in the very first rank. His translations of Hahnemann's works into English are as immortal as those works themselves, and are destined to be even

better known and more widely read than the originals, by reason of the greater prevalence of the English language over the German. Hahnemann himself had great literary powers, and, like Dr. Dudgeon, was a great linguist and translator. It was Hahnemann's translating work which led him to discover the homeopathic law, as it was Dr. Dudgeon's translating work which made him a homeopath. But Hahnemann's style, though vigorous and clear, was so apt to wander off into page-long parentheses—such was the wealth of his ideas—that it is not always easy reading, and is never easy translating. But Dr. Dudgeon, whose style is as easy and clear as it is full of interest and charm, has given us in his translation of Hahnemann's *Organon* and his *Materia Medica Pura*, works which, whilst absolutely faithful to the originals, are in some ways an improvement upon them. Of less importance, but still of great value, is Dr. Dudgeon's translation of Hahnemann's Lesser Writings. His *Lectures on Homeopathy* have also a permanent value in homeopathic history and literature.

Dr. Dudgeon's long acquaintance with the history and struggles of homeopathy gave him an unique position when any controversy arose—he knew his opponents' side of the question better than they knew it themselves. In the "*Odium Medicum*" battle, which raged for weeks in the *Times* newspaper, Dr. Dudgeon's contributions were confessedly the masterpieces of the debate, and even *Punch* burst into poetry to celebrate the victory of the globule over the bolus. This discussion was started by Lord Grimthorpe *apropos* of the fight at the Margaret Street Dispensary for Consumption, when an attempt was made to oust two of the medical officers who had become homeopaths subsequently to their election. The "*Odium Medicum*" correspondence was reprinted by the Homeopathic Publishing Company, and copies are still to be had.

In the year 1886 the Homeopathic League came into existence, and Dr. Dudgeon's unrivalled knowledge of homeopathic controversy again came into action. The League work crystallised itself into the issue of a series of tracts. These tracts were for the most part written by Dr. Dudgeon himself, and those which he did not write he edited, and he indexed the whole. Thus the three volumes of "*Homeopathic League Tracts*" may

be put down to his credit as practically one of his own original works.

Another work of Dr. Dudgeon's is entitled *Hahnemann's Therapeutic Hints*, and is a valuable collection in repertory form of practical suggestions of Hahnemann's scattered throughout his works.

Dr. Dudgeon, as stated above, was a great indexer. His sense of order and arrangement made it a necessity for him to have his material so arranged or indexed that any item of it could always be found without difficulty. This faculty was not lost sight of by Dr. Drysdale and the originators of the *Cypher Repertory*. Dr. Dudgeon was impressed into their service, and well his share of the work was done. The cypher did not commend itself to Dr. Dudgeon as the best practical way of putting the matter, and he offered to repertorise the symptoms in full. It is a thousand pities that this offer was not accepted; but Dr. Dudgeon, with characteristic deference to the judgment of others, allowed himself to be overruled by his seniors.

For Dr. Dudgeon, with all his great abilities, was the most modest of men. Indeed, if we take Ruskin's definition of modesty as the true one, he was hyper-modest. True modesty, says Ruskin, is a just measure of one's own powers; and when an Albrecht Dürer says of one of his own works, "It cannot be better done," that is true modesty. Dr. Dudgeon never made the most of his talents, so far as he himself personally was concerned. Perhaps it is because they were so great and varied that this was the case. Dudgeon's *Repertory of the Symptoms of the Mind and of the Head* are among the most useful sections of the *Cypher Repertory*, and are so arranged that they may be consulted with great advantage by any one, even without a knowledge of the cypher. The *plan* of the *Cypher Repertory*—apart from the cypher—will, in my opinion, form the basis of the *Repertory of the future*. The cypher itself was very ingenious, but it paid no respect to the limitations of the average medical mind. Also it partly arose from an exaggerated fear of making the work too bulky. In these days we are not quite so much in awe of paper and printer's ink. So long as material is well arranged, bulk is no hindrance to a work's usefulness.

DR. DUDGEON'S INVENTIONS AND WORKS ON OPTICS.

Dr. Dudgeon wrote and translated several books and articles on the subject of the Human Eye—*e.g.*, *The Human Eye, its Optical Construction* (1878); a translation of Fuch's *Causes and Prevention of Blindness* (1885); of François Sacey's *Mind Your Eyes* (1886). These were books. His articles were, "Cure of Pannus by Inoculation" (*London and Edinburgh Journal of Medical Science*, 1844); "On Subaqueous Vision" (*Philosophical Magazine*, 1871).

The last work dealt with one of Dr. Dudgeon's inventions—spectacles for seeing under water. The human eye is constructed for aerial vision, as the eye of fish is for subaqueous vision. The consequence is that to the human eye when under water the refraction is so great that objects cannot be seen in their true positions. Dr. Dudgeon invented spectacles which enabled him to do this. The invention consisted in making a lens of air hermetically enclosed between two concave glasses. The curves of the glasses were so arranged as to correct the refraction of the water. In his work on the Human Eye, Dr. Dudgeon gave an account of these, and also interesting illustrations of how objects appear under water, and above the surface of the water when looking through the glasses from beneath.

In 1882 Dr. Dudgeon's work on "The Sphygomograph" appeared. This contained a description of his new Pocket Sphygomograph, now so well known, and then recently perfected by him. The original sphygomograph was that of Marey, invented some years before. Singularly enough, Marey's death occurred, at a great age, only a few months before that of Dr. Dudgeon. Marey's sphygomograph was a clumsy affair compared with that of Dr. Dudgeon, and was quite out of the question as an instrument for use in general practice. Dr. Dudgeon made it possible for any one who so desired to take sphygomograms almost as easily as to feel the pulse.

There are many other points of great importance in Dr. Dudgeon's career which must be noticed in succeeding issues of the HOMEOPATHIC WORLD. The national importance of the event of his death was recognised throughout the press of the country. Among the notices of his death we will take the following, which appeared

in the *Daily News* of September 10th, which was perhaps the fullest of all :—

“ DEATH OF DR. DUDGEON.

“ HOMEOPATHIST AND INVENTOR.

“ London has lost a notable citizen in the person of Robert Ellis Dudgeon, M.D., who passed away on Thursday at his residence, 22, Carlton Hill, N.W., at the age of 84. During the most active period of his life Dr. Dudgeon resided at No. 53, Montagu Square; but even in the semi-retirement which the growing disabilities of age compelled him to adopt he continued to attend a few of his old patients until within a few weeks of his death.

“ Dr. Dudgeon will be known to posterity, first and foremost, as the translator of the works of Hahnemann into the English language. For many years past he has been the foremost living British homeopathic practitioner and writer. For forty years he was the principal editor of the *British Journal of Homeopathy*. It is not, however, the homeopathic branch of medicine alone which has benefited by Dr. Dudgeon's genius. His name will also live in the history of medicine as the inventor of the pocket sphygmograph—an instrument for recording the pulse-beats—and also as the inventor of ‘subaqueous spectacles.’ Dr. Dudgeon was an authority on the eye, and he wrote a popular book on optics. He was a great swimmer and diver, and it seemed to him a disadvantage that he could not see under water as well as he could above water. So he invented spectacles which enabled him to do this, and these afforded him no little pleasure in his favourite pastime. In his book on the human eye he has given interesting illustrations of the effect of wearing the glasses under water in the swimming-bath.

“ In the course of his long practice, Dr. Dudgeon had many notabilities among his patients. Among these may be numbered Lord Lyndhurst, John Bright, James Russell Lowell, the late Lord Ebury, and Samuel Butler. Dr. Dudgeon was, perhaps, Samuel Butler's most intimate friend as well as his physician. They were literary friends and fellow humorists. Butler's *Erewhon* inspired Dud-

geon to write a 'subaqueous' romance entitled *Colymbia*—Colymbia being a region under tropical seas inhabited by a remarkable people. *Colymbia* was not a success—which is not surprising with *Erewhon* for its companion—but it is none the less full of good things.

"Dr. Dudgeon had a notable share in shaping one item of the present Medical Act. By the aid of the late Lord Ebury, then Lord Robert Grosvenor, in the Commons, and Lord Lyndhurst in the Peers, a clause, mainly draughted by Dr. Dudgeon, was inserted making it illegal for medical authorities to withhold degrees from candidates who had passed all their examinations, on the ground of their medical faith. Previous to the passing of the Bill containing this clause—Clause xxiii. of the Medical Act—a number of students who had been found to have leanings towards homeopathy after they had passed their examinations and before the actual conferring of their degrees, had had their degrees withheld from them.

"Dr. Dudgeon's latest literary venture, *The Prolongation of Life*, published a few years ago, was a distinct success, a second edition being called for in a very short time.

"At the time of his death Dr. Dudgeon was consulting physician to the London Homeopathic Hospital, and had held all the posts of honour open to his branch of the profession.

"During the illness of the late Prince Consort Dr. Dudgeon received a Royal command to hold himself in readiness to proceed to Windsor at a moment's notice, but the illustrious patient passed away, and no summons came.

"In politics Dr. Dudgeon was a Radical, but he was not 'born so.' The traditions of his family were all the other way. It is interesting to note that it was the Corn Law Agitation which converted him from a Tory to a Radical, and, once converted, he did not change again.

"For many years Dr. Dudgeon was a prominent member of the 'London Scottish' Rifle Brigade, and, like most Scotchmen, he was an enthusiast in golf."

Some two years ago Dr. Dudgeon had a severe attack of influenza and he was never quite the same after it. It

affected him in a singular way, causing swelling of the fingers and other parts, and irritable skin affections.

Last summer he went as usual to the Isle of Wight for his holiday, but there he became worse instead of better, and returned home before the time that had been arranged. Soon afterwards the skin trouble became more pronounced, blisters appearing in various parts without pain or inflammation. At the time of the Annual Congress he was present at the opening meeting, but excused himself from attending the dinner.

Being so unused to being ill himself, it was with great difficulty that he could be made to take care of himself, until he was incapacitated altogether. He attended patients to within a few weeks of his death. Latterly the skin trouble increased rapidly, and he became greatly emaciated. In spite of all he retained his usual cheerfulness and good-humour until he lapsed into unconsciousness and finally passed away.

The funeral took place on Monday, September 12th, at Golder's Green, where his remains were cremated. The funeral was attended by a number of his colleagues and old patients, besides members of his own family. The ashes were interred in Paddington Cemetery.

To Mrs. Dudgeon and his surviving children and grandchildren the sympathy of all readers of the HOMEOPATHIC WORLD, who will ever cherish his memory, will be most heartily given.

W. A. VON DITTMANN, M.D.

By DR. LEON BRASOL.

THE not very large family of homeopathic doctors at St. Petersburg has had to suffer a painful bereavement. Dr. Wladimir Alexandrowich von Dittmann, one of the most widely known representatives of the homeopathic method of treatment in St. Petersburg, has passed away. He was born at Dorpat in 1842, took his degree of undergraduate at the School of St. Anne, in St. Petersburg, whereupon, in 1861, he entered the faculty of medicine at his native town, Dorpat, where he obtained his medical degree in 1866, having merited the honour of a gold medal for his work on microscopical structure of the

lungs, and, later on, passed a doctor's examination at the then Medico-Surgical (now Military-Medical) Academy at St. Petersburg, and took the degree of Doctor of Medicine in 1867. Immediately after this he passed two years as surgeon-attendant of Nikolaïevsky Military Hospital, and another two years as a surgeon to the Corps of Cadets at Polotzk. There he used to devote his leisure to painting on glass for magic lanterns, which had just at this time began to be used in schools at lectures of a scientific and educational nature. Only at first such pictures on glass used to be got from abroad, and were very expensive, until by the incentive of the Pedagogical Museum there had been made a proposal to set up the manufacturing in Russia of projectional apparatus and pictures on glass, with the view of making them cheaper. At present this national branch of industry has been brought, in our country, to a considerable degree of perfection, and it has been the merit of Dr. Dittmann to have been among the first workers in this field. In 1871 he resigned his office and settled at St. Petersburg as a privately practising physician. There, guided by Dr. Dominic Villers, a very well-known at that time, greatly instructed and gifted medical man, Dr. Dittman became very soon convinced of the advantages of the homeopathic treatment, and turned into its zealous partisan.

At the beginning of the eighties there broke out at St. Petersburg an epidemic of diphtheria, which yielded to Doctors Villers and Dittmann plentiful material for watching the effect of *Mercuric cyanide*, just then and for the first time brought into medical practice by Dr. Beck, another well-known homeopathist in St. Petersburg. The results proved to be splendid, and Dr. Dittmann, in a burst of enthusiasm for the discovery of so powerful an agent for struggling against such a dangerous disease, appealed, with the intervention of Adjutant-General O. B. Richter, to the Emperor Alexander III., with the fervent application for the permission to submit this remedy to an extensive trial in one of the town hospitals, for the general good of the diseased population. The Sovereign, who felt always in sympathy with the homeopathic method of treatment, and granted to it his gracious support, ordered to be opened at the Nikolaïevsky Military Hospital a separate ward for the homeopathic treatment of diphtheria. Immediately after there

had been brought to this hospital a child of nine years out of the poorest class of population, not quite recovered from a bad form of measles, and ill already with a malignant diphtheria. On the third day of illness, when it had already had time to produce deep ulceration of the tonsils and fauces with general blood-poisoning, in a quite hopeless state, on a cold and windy winter day in December, the boy had been driven through the whole of the town in an open sledge and brought to the homeopathic ward, where the consulting physician of the hospital, Dr. Afanasiew, in the presence of Dr. Dittmann, put the diagnosis of a "gangrenous diphtheria," and on the following day the child passed away. That was the first and the only patient of the homeopathic ward, because the medical police-officers took care not to send there any more sufferers; and as there had been on trial but a single patient, who died, the conclusion drawn had been that the homeopathic treatment yields a death-rate of 100 per cent., and that was the end of the comparative trial of the allopathic and homeopathic treatment of diphtheria. And the Medical Council, foreseeing in the person of Dr. Dittman a dangerous man, crushed him down with the famous "Journal-Decision" published in the *Government's Messenger*, and reproduced in many newspapers. This document, unique of its kind, has been written by the late Professor Eichwald, a raging antagonist of homeopathy, who, instead of the difficult task of criticising quietly and in a scientific way the fundamental principles of homeopathy as to their *essence*, preferred the easy work of morally bringing down in the public's opinion the *personality* of Dr. Dittmann, and discharged a coarse and shameful philippic, knowing beforehand that no refutation and justification of the offended would be allowed to appear in the press. Fortunately, all those furious attacks had no effect whatever upon the working of Dr. Dittmann, who possessed at St. Petersburg a very extended sphere of practice, and enjoyed the reputation of an experienced and successful physician.

Dr. Dittman was richly endowed from nature, possessed extensive capacity for medicine and fine arts, and had great mastery over the German, French and English languages, which he spoke and wrote just as fluently as the Russian. Many a time he took part himself in International Congresses of Homeopathy, where his

presence was always noted and valued, owing to his gift of eloquence, his quick perception of every subject debated upon, and his sociableness. In 1896 he was elected Corresponding Member of the British Homeopathic Society. He wrote very easily too, but left after him only a few works printed. In some popular editions are to be found his not very numerous articles in defence of homeopathy, and there is a manual of his, with which he was not satisfied himself; in later years he conceived even the idea to work it over again in a thorough way, but he had no time to realise his project. He took always a particular interest in the consumption of lungs and its treatment. Impressed by the views of Dr. Brehmer, and encouraged by the results of the consumption's cure at Gorbersdorf and Davos, he purchased in 1887 a piece of ground at Halila in Finland, in the vicinity of the railway station Oussirkirka, and erected at his own cost the first sanatorium for the consumptive in Russia, which was inaugurated in 1888. The choice of the place, free of humidity, dust, and winds, as well as the plan of organisation of the sanatorium for the consumptive to dwell there during the whole of the year, were calculated by Dr. Dittmann very justly and with perfect foresight, but he had no money sufficient for supporting such a big enterprise. This notwithstanding, the fundamental idea of the necessity and possibility of a sanatorium for the consumptive at the North, four hours' distant from St. Petersburg, proved to be quite a just one, and was rightly valued by the Emperor Alexander III., who bought Halila for himself. At the very place, occupied by the modest, wood-built principal building, there stands erected at present the proud and beautiful Imperial Sanatorium, the founder of which was Dr. Dittmann.

Wladimir Alexandrowich became Member of the Society of Homeopathic Physicians of St. Petersburg soon after its constitution, was for many years its secretary, later on, from 1887 to 1889, its President, and, finally, Member of Council till his death. He used to attend assiduously every one of the medical and economical meetings of the Society, took an ardent part in all its affairs, and distinguished himself in particular by his solicitude in respect to the wants of those employed in the service of the Society. With his death the Society has lost one of its most active and energetic

fellow-workers. During the autumn of the last year Wladimir Alexandrowich fell ill with pleuritis exudativa, developing on a tuberculous ground. The pleurisy underwent an absorption, but his health gave way considerably, and the tuberculosis of the lungs began visibly to undermine his strength. Feeling a great weakness, he expressed the wish to be brought to his former sanatorium, and hoped to find there an increased strength and recovery. But the inexorable irony of fate decided that he, the founder and formerly the owner of the sanatorium, should be refused the admittance for want of free vacancies! He resolved then to go for the winter to Italy and the Riviera, and after two months of rest in a good climate he came back to St. Petersburg in a comparatively good state, but soon caught a cold and fell ill once again. His last hope of recovery he placed in Koumiss, and went in June of the present year to one of the Koumiss establishments at the government of Oufa. But the cruel disease did not stop in its progress, and on July 26th (August 8th) Dr. Dittmann passed away during his journey back to St. Petersburg. The profoundly afflicted Society put a wreath on his grave, and the President being absent from St. Petersburg it was Dr. Flemming who delivered a deep-felt funeral oration. As to his religious convictions, Dr. Dittmann, as well as our lamented Dr. Richard Hughes, was a fervent member of the Catholic Apostolic Church.

God rest thy soul, dear friend and companion in arms!

St. Petersburg, Troitzkaia 5.

THE INFLUENCE OF COMMON SALT UPON GASTRIC DIGESTION.—Dr. H. Boenninger gives, in the *Münchener med. Wochenschrift*, No. 2, 1904, a series of interesting experiments by which he endeavours to prove kitchen salt to be a retarding factor in the digestive process of the stomach and the disintegration of albumen. This doubly retarding faculty of common salt makes it appear of doubtful therapeutic value. For the same reason it may be advisable to caution against excessive saltiness in food, for if it be generally accepted that the intestine is capable of completing the digestion of albumen passed insufficiently digested from the stomach, it may not be immaterial to the organism that the digestive function of the stomach should thereby be impaired. Boenninger does not mean to detract from the beneficial effect of certain saline springs, but points out that the waters of these are mostly taken early in the morning, and have passed through the system before breakfast.—*Therapist*.

GENERAL CORRESPONDENCE.

MEMORIAL TO THE LATE ROBERT T. COOPER, M.A., M.D.

To the Editor of THE HOMEOPATHIC WORLD.

DEAR SIR,—I feel sure that you will be glad to know that there is a movement amongst the patients and friends of the late Dr. Robert Cooper to commemorate in some way his remarkable personality.

Many of us are indebted to him for life and health vouchsafed to us through his skill and care. His memory is endeared to all who knew him by his noble and unselfish life, and I gather that we all feel it would be a relief to us in our grief to join in some concerted movement to commemorate his life and work.

Donations may be paid to the credit of the "Dr. Robert Cooper Memorial Fund," at the Queen's Road Branch of the London and South Western Bank, or they may be forwarded to me at the address below, in which latter case they will be duly acknowledged per return of post.

Believe me, yours faithfully,

J. MUNFORD, Director,

(Hon. Sec. and Treasurer pro tem.)

Kensington College, Queen's Road, Bays-
water, London, W., July 26, 1904.

PITCHBLENDE AND RADIUM: MR. ARMBRECHT'S OFFER TO PROVERS.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—I read in this month's HOMEOPATHIC WORLD the query about Pitchblende. Pitchblende from Cornwall is very poor of Radium, only now and then I have come across a piece which acts a little on the electroscope. I have a large quantity of Pitchblende from Joachimsthal and Johann Georgenstadt, both in Bohemia, which

M. Curie places at top of the radio-active ores. I am willing to supply provers with any preparation from 1x to 30 free of charge.

Believe me, sir,
Your obedient servant,

E. L. ARMBRECHT.

71 and 73, Duke Street, Grosvenor Square,
London, W., September 2, 1904.

VARIETIES.

ONION FOR WASP STING.—In a letter to the *Standard* Mr. J. Green recalls a cure for wasp stings in the throat. The plan is to chew an onion, keeping the pulp at the back of the mouth, and to swallow it slowly. It is claimed that this prevents the swelling in the throat.—*Western Gazette*.

SABAL SERRULATA IN ENURESIS.—A young girl of 13 years was suffering from chronic enuresis. After all the other remedies commonly used and indicated had been given in vain, she received also Sabal serrulata. This remedy had a decided effect, and she was entirely cured of her affliction. She could now attend school without trouble, she made great journeys, and there has been no relapse. It was a permanent cure. This is a brilliant confirmation of the good effects of this remedy in this ailment, which so often proves stubborn.—*Allg. Hom. Zeit. (Hom. Envoy)*.

PIGMENTATION DURING CHILDBED.—Moraller (*Zentralbl. f. Gynäk.*, No. 4, 1904) attended a primipara, aged 23, who had been delivered spontaneously; double pyosalpinx developed afterwards. Already, during the ninth month, pigmentation of the skin, from the pubes up to the breast, had been noted; this greatly increased after delivery, so that on the eighth day the integuments below the umbilicus were brownish black, whilst from the navel to the breasts they were of a rich brown colour. Luke-warm poultices were applied to promote absorption of the pyosalpinx. Then, as the tubal complication subsided, the pigment disappeared, coming off in the form of small brown epidermic scales. The pigmentation was doubtless related to the genital functions, and was homologous to chloasma and to the pigmentation of the nipples and linea alba.—*British Med. Journal*.

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MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Archives of the Middlesex Hospital.** Vol. 3. Third Report from the Cancer Research Laboratories. 8vo, sd. (Macmillan. Net, 5s.)
- Bell (Robert).** The Cancer Problem in a Nutshell. Cr. 8vo, sd., pp. 39. (Baillière, Tindall & Cox. Net, 1s.)
- Blatin (Dr. Marc).** Les Infirmières, ce qu'elles sont en Angleterre, ce qu'elles devraient être en France. 12mo, pp. 276. (A. Owen. 3s. 6d.)
- Broadbent (Albert).** Dyspepsia Prevented by Diet. Dangers in Food. Rheumatism and Gout Prevented by Diet. (Penny Health Library.) Cr. 8vo. (R. J. James. Each id.)
- Collier (Mayo).** Mouth Breathing. 8vo. (Baillière. Net, 2s. 6d.)
- Corner (E.M.).** Clinical and Pathological Observations on Acute Abdominal Disease. The Erasmus Wilson Lectures, 1904. 8vo. (Constable. Net, 3s. 6d.)
- Gerrard (F. N.).** Beri-Beri. Its Symptoms, &c. An Essay. 12mo. (Churchill. Net, 2s. 6d. Extracts. Net, 1s. 6d.)
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- Morten (Honor).** The Nurse's Dictionary. 5th ed. With Phonetic Pronunciations. Revised by Mary I. Burdett. 16mo. (Scientific Press. 2s.)
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Letters to the Editor requiring personal reply should be accompanied by stamped directed envelope.

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.

Dr. Dyce-Brown, London.—
Dr. Leon Brasol, St. Petersburg.—
Dr. Tyler, London.—Dr. Ross,
Scarborough.—Mr. Ivatts, Bir-
mingham.—Dr. Burford, London.

BOOKS AND JOURNALS RECEIVED.

Hom. Review.—Zoophilist.—
Mind.—Revist. Hom.—Med.
Times.—Allg. Hom. Zeit.—H.
Monatsblätter.—The Chironian
—La Propaganda Homeopatica.
—Maanedsk. f. H.—H. Maand-
blad.—La Homeopatia.—Ind.
Homeopathic Review—Hom.
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Obst.—Med. Adv.—Annaes de
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Medicine.—First Lessons in the
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THE
HOMEOPATHIC WORLD.

NOVEMBER 1, 1904.

THE MACHINERY OF THE QUINQUENNIAL
INTERNATIONAL HOMEOPATHIC CONGRESS.

EVER since the year 1876, when CARROL DUNHAM presided over the first "World's Quinquennial Homeopathic Convention," it has been the custom for homeopaths from all parts of the world to assemble in a place agreed upon at intervals of five years—more or less. We say "more or less" advisedly, for at the last Congress but one held in London in 1896 it was decided to hold the next in Paris in 1900—at an interval of four years only, that is.

In the natural order of things the next quinquennium would have brought us to the year 1905, and some of us have been innocently imagining that in the coming year the looked-for event would take place. But it seems this is not to be. The next quinquennial Convention will be held at a *six* years' interval.

Now, we may ask, how has this disarrangement of the secular procession of the Congresses come about? The first disarrangement was a deliberate act of the Congress itself—it was voted at a full meeting of the Congress held in London in 1896, in order to bring the date to coincide with the Paris Exposition of 1900. The cause of the second disturbance, it is stated, is the lamented

death of Dr. RICHARD HUGHES—which occurred two and a half years ago, in 1902!

It seems to us that there is something very faulty in the machinery of the Congresses when the life or death of any one man can wreck the orderly succession of events.

Let us see how this possibility came about. At the first "World's Convention" held at Philadelphia in 1876, under the presidency of Dr. CARROL DUNHAM, it was decided to make the event a quinquennial affair and to hold the second Congress in London. In 1881 the Congress duly assembled and our American *confrères* were charged with the duty of handing over the gavel which had been wielded by CARROL DUNHAM, to the chosen president of 1881, CARROL DUNHAM having, to the lasting sorrow of the homeopathic world, joined the majority in the meantime.

The president of the London Congress of 1881 was Dr. RICHARD HUGHES, and to him was duly handed the gavel. In the course of his presidential address Dr. HUGHES made certain practical suggestions, and a committee was appointed to consider them. As a result the following resolutions were adopted by the Convention:—

"1. The continuance of International Conventions, to be held every fifth year.

"2. The appointment of a committee, made up of skilled pharmacutists, say, one from each country represented in this Convention, to correspond and co-operate with the editor of the proposed new edition of the English Homeopathic Pharmacopeia, to the end that such work may be more correct and complete, and that it may furnish uniform methods for the preparation of medicines, and the notation of the same in all countries.

"3. *The election of a permanent secretary, who shall have charge of the archives and property of the Convention, and make preliminary arrangements for future meetings.*

"4. The placing of a file copy of the transactions of each Convention in at least one public library in each country where the practice of homeopathy is known,"

This report was signed by the members of the committee—J. P. DAKE, ALFRED C. POPE and A. CLAUDE—and was carried at a general meeting of the Convention. As every one knows, Dr. HUGHES himself was chosen permanent secretary.

It will be noticed that the first two Conferences took place without there being any permanent secretary. The desire for some permanent machinery for the continuance of the Conventions was quite natural and right; but it is perfectly evident that the right kind of machinery was not selected. No man can count on five years of life, and for the occurrence of Congresses to be dependent on the life of one man is a sheer absurdity, as events have sorrowfully proved.

What then remains to be done?

The initiative lies with our American *confrères*, who are the hosts of the coming Congress. The last International Convention accepted the invitation of the American contingent to visit America next time. As no provision was made in "Clause 3" of the resolutions quoted above, for the carrying on of the duties of the permanent secretary in the event of his decease, and as no vice-secretary was appointed, the office lapses, and the next Convention will have to do as the first and second did, without the assistance of any permanent secretary. And it may be remembered that these Conventions did exceedingly well without one.

When the next committee meets it will be able to rearrange its machinery, and we have no doubt it will rearrange it much better. The permanent secretaryship under Dr. HUGHES did work, but it is no secret that it did not always work well, and this may be said without in the least derogating from the whole-hearted devotion which the late Dr. HUGHES gave to the work. But Dr. HUGHES, with all his abilities and devotion, was not a great man of affairs, and although the permanent secretaryship was his own suggestion, it is plain that the position was one which no one man could satisfactorily fill.

We would suggest that each Convention should appoint a committee of three or four, *with the injunction to fill up gaps that time may make in their number*, the retiring president being one of the committee by virtue of his office, and the holder of the gavel until it passes to his successor. The committee may appoint a secretary to make arrangements or carry on communications, but the committee, as a whole, to be responsible for the work being done.

We understand from our contemporary, the *Homeopathic Review*, that at a dinner recently given by Mr. KNOX-SHAW, the host of the occasion was chosen to fill the office vacated by the late Dr. HUGHES. With all deference to the good intentions of the party assembled, we may point out, that whilst it is entirely within their right to offer to do all they can to assist our American *confrères* in getting up the next Convention, they have no more right to elect a successor to Dr. HUGHES than they have to elect the President of the United States. Only the Convention in full assembly can do this, if it should wish to do it; but we do not think it ever will.

The choice of the dinner-party, as good fellowship demanded, naturally fell upon the host. But we feel it only right to the homeopathic community to point out that, except from the point of good fellowship, the choice was a peculiarly infelicitous one—supposing the party had had the power to choose. With all due respect to Mr. KNOX-SHAW's energy, ability, and intentions, we must point out that his chief distinction as an international homeopath is a superlative admiration for allopathic ethics, a determined attempt to destroy the *International Homeopathic Directory* in deference thereto, and a pronouncement *urbi et orbi* from the presidential chair of the British Homeopathic Congress that "the Hahnemann standpoint has changed!" No; if the late Dr. HUGHES *must* have a successor, we hope that the next International Homeopathic Convention will not adopt the choice of the dinner-party.

NEWS AND NOTES.

DR. DUDGEON'S PORTRAIT.

OUR readers may like to know that the photograph from which our picture of the late Dr. Dudgeon was taken may be obtained from the London Stereoscopic Company, 106, Regent Street, W. The photograph was taken on May 14th last. Other photographs of different positions were taken on the same date, so that purchasers may make a selection.

DR. COOPER MEMORIAL.

THE following are the Minutes of a meeting held at Kensington College on Monday, October 17, 1904, from which it will be seen that a highly appropriate form of memorial has been selected by the Committee:—

“Present: Mrs. Bateman (Hon. Auditor), Mr. Bensusan, Rev. N. J. Devereux, Miss S. Flood, Miss A. Moorehead, Mr. J. Munford (Hon. Sec. and Treas.).

“The Secretary read a letter from Mrs. Cooper, communicating the wishes of the family as to the shape they would prefer the Memorial should take. The Secretary also read all the correspondence that had been received since the last meeting, including letters from Mr. Masters, Dr. Pullar and Dr. Clarke; the list of subscriptions, amounting to about £70, was read. After a full and careful consideration of all the correspondence and the various schemes suggested, the following resolution, proposed by the Rev. N. J. Devereux, and seconded by Mr. Bensusan, was carried unanimously, viz:—

““That, taking into consideration the late Dr. Cooper's devotion to forestry in the highest interests of humanity, it would be most in accordance with the tenor of his life's work to plant an avenue of trees in one of the parks under the control of the London County Council, and that the approach to the avenue should, if possible, be marked by a memorial stone or tablet recording the Doctor's work and the fact of its having been erected by his friends and grateful patients.”

“The Honorary Auditor, Mrs. Bateman, examined the counterfoils of the paying-in slips, showing that the amount received had been duly paid into the London and South Western Bank, Queen's Road Branch, to the account of the Fund.”

We sincerely trust that the public authorities may co-operate heartily with the committee in their laudable enterprise.

MICROBE CATCH MICROBE.

A CORRESPONDENT sends us the following from the *Globe*, October 11th:—

“The fruit grower of the future will fight insect pests not by the aid of electrical soil emanators or poisonous sprays, but by parasites. At the present time a great battle is being waged in the fruit fields of San Bernardino country, between the black and yellow scales infesting the fruit trees, and a horde of parasites let loose among the enemy by Commissioner Pease, who is watching the result of the contest. In addition there are two sets of men at work attempting to clear out another part of the fruit plantation with the aid of fumigators. The ultimate result, and the effect, is already well indicated. The Commissioner tells us in advance that the parasite recently imported is clearing out the black and yellow scale very effectively. The parasite is increasing rapidly, and does its work at far less cost than it could be done by fumigation. The present experiments will attract the attention of fruit-growers everywhere, and the coming report will be of the greatest interest.”

This, says our correspondent, looks like a lesson in antiseptics. Why not set a microbe to catch a microbe, instead of resorting to poison?

TETRACOCUS OF ACUTE ASCENDING PARALYSIS.

A LADY correspondent, who was cured by the late Dr. Burnett of acute ascending paralysis, sends us the following from a recent issue of the *Daily Mail*. Our correspondent adds: “I thought you would be interested in the enclosed—it is the exact description of the illness I had (six or seven years ago) and which I was cured of by Dr. Burnett. The paralysis came on with me exactly as it is described in the paper:—

“A NEW MICROBE.

“FRENCH DOCTORS ADMIRE THE TETRACOCUS GERM.

“Another subtle foe of mankind has been unmasked in the shape of the ‘tetracoccus of acute ascending paralysis.’

“It was immensely admired by the French doctors during their visit to the Westminster Hospital, where some of these organisms have been cultivated from a patient who has been suffering from this rare disease. It affects the spinal cord, and the patient rapidly loses the use of every muscle in the body, and the mortality is extremely high.

“The patient at the Westminster Hospital, however, has been more fortunate. Within fifteen days of being attacked by it he was

an inert piece of clay, with the exception that he was able to move one toe. At present he is progressing very favourably in the Burdett ward under the supervision of Dr. Murrell.

"At the height of the disease a hypodermic syringe was plunged into his back, and from the material thus obtained the famous tetracoccus was isolated. Its existence has been known for some months to the heads of the profession, but the organism is sufficiently new to render this confirmation very welcome.

"It takes a multitude of extended experiments to prove satisfactorily that a certain microbe is the cause of a certain disease. The tetracoccus seen under the microscope appeared like a series of dots arranged in fours. At the Westminster Hospital the identifying experiments have had to be stopped half-way towards proof. Proof is obtained when the culture reproduces the disease consistently in living animals, and the 'Westminster' is not allowed to practise vivisection."

ORTHODOX CANDOUR.

THE opening addresses of the Medical Schools are sometimes interesting, and Sir William MacEwan's address on Appendicitis at the Charing Cross Hospital, and Professor A. E. Wright's address at St. Mary's Hospital Medical School, contained some wholesome truths as to orthodox pretensions and possibilities.

Said Sir Wm. MacEwan (*Daily Telegraph*, Oct. 4th) :

"There were many parts of the human body whose structure was unknown, and the functions of which were hidden. Had we a right to conclude that every part of the human anatomy, whose structure and functions we did not understand, was useless? The theory of evolution did not lead to such a construction. No doubt man underwent slight modifications as the thousands of years passed, but still, it might be asked whether he had outlived any part of his anatomy. Men had been relieved of the spleen, part of the brain, a lung, the kidneys, and were able to go about without any detriment, apparently, to the ordinary observer; but it would be ridiculous to say that the portions of the body which had been removed were useless in normal human beings and should be removed, or that men would be as well without them. With all his imperfections, normal man was a much more perfect animal than the physiologist and surgeon could make him. Thousands of operations were performed for the complaint of appendicitis, but all the removals of the organ did not bring us one step nearer the causation of the disease or its prevention. If the appendix be useless and a menace to life, should it not be removed at an early period of existence? But the great majority of people seemed to do very well with it; a very small proportion of mankind suffered from appendicitis. They might, therefore, ask: Is the appendix useless, and is it not possible that the cæcum and the appendix play an important part in the process of digestion? One of the functions of the appendix might be to preserve the healthiness of other digestive organs."

Professor Wright gave this picture of the power of allopathy over disease:—

“It was necessary to dispel some illusions, one being that medical art could at present do anything to avert death from bacterial invasion, for the wise physician in such cases usually contented himself with looking after the feeding of the patient, and became a sort of skilled head-nurse. The conclusion was, however, forced upon us that medical art of to-day could not cope with bacterial disease, and, although sanitary science did something to kill the germs outside the body, it was probable that the achievements in that direction were over-estimated, or the efforts of the sanitarian might be entirely erroneous.”

This is perfectly true of allopathy because there is neither science nor art in it. Homeopathy is a very different thing. It is both a science and an art, and it has real power over disease processes. The homeopathic physician is something vastly more important than a mere head-nurse.

THE BROMLEY HOMEOPATHIC HOSPITAL CONCERT.

THE annual concert in aid of the funds of the Phillips Memorial Homeopathic Hospital took place at Bromley in the Town Hall, on Wednesday evening, October 7th. Mr. Lindsay Bell, who has organised the series of concerts, placed another great success to his record, and has handed over a substantial sum to the funds of the institution. The deepest gratitude is due to Mr. Bell for his self-denying efforts on behalf of this institution, and to the great artists who have so generously come forward to aid him. During the evening Miss Ada Crossley was presented with a handsome bouquet by Lady Truscott, and a magnificent basket of flowers by Mr. and Mrs. Crutch. A very beautiful bouquet was presented also to Signorina Esta D'Argo by Mr. Willett, and one to Miss Inez Jolivet by Mrs. De Luca.

MILK.

A FEW months ago some children were brought by their mother to the writer suffering from intestinal disturbance with fever. The mother was advised to stop the children's milk, as it was possibly adulterated with

an antiseptic. This she did, and the children's illness stopped at the same time. But the mother did more than this—she sent a sample of the milk for analysis. The result was that a considerable percentage of boracic acid was found in it. Needless to add, this discovery led to a change of dairy.

But antiseptics are not the only adulterants of milk, as witness the following from the *Daily Telegraph* of October 18th (Paris Letter) :—

“A new terror for milk drinkers has been discovered by Dr. Quesneville, Chief of Pharmacy at the Asylum of Sainte-Anne. Re-examining samples passed as fair by the municipal laboratory and submitting them to a process of his own invention, he triumphantly demonstrated the milk to have been adulterated in a manner undetected by the former expert analysis, and to be unfit for consumption. The new way of doctoring milk consists in adding to it fatty substances when it is naturally thin. M. Quesneville can now detect such adulteration by treatment with benzine, which dissolves foreign greasy matter, but has no action on the buttermilk. The latter, it seems, is found in the shape of cells coated with albumen which are impervious to the benzine. The processes of analysis hitherto in use failed, according to the doctor, to reveal the presence of foreign fatty substances. Among the latter, he says, pork dripping and cocoanut butter are commonly used in this country to give body to cow's milk, even when it has not been previously thinned artificially by the pump.”

WHISKY.

AFTER milk, whisky. The New York public is horrified by discovering that whisky is no less poisonous than Manchester beer (*Daily Telegraph*, October 15th, New York Letter) :—

“Despite the Presidential election, public interest in America seems absorbed by the whisky fatalities in New York, and the revelations which have followed throughout the States. A cry for urgent reform with regard to the sale of spirituous liquors is heard. It is possible, indeed, that the political party, pledging itself to prevent the repetition of such fatalities, might sweep into office upon the rising tide of public indignation. A dozen deaths in New York alone have been traced to wood alcohol in whisky within a few days. Now comes a startling statement from Dr. Wiley, head of the Government Bureau of Chemistry at Washington, that fully 85 per cent. of all whisky sold in American hotels, restaurants, clubs, and bars is nothing less than cheap imitation spirit.

“‘It is my opinion,’ says Dr. Wiley, ‘that pure whisky, except in most moderate quantities, is injurious to the human system. How much more so, then, adulterated compounds such as are now foisted

upon the public! Government officials are emphasising the contention that not only cheap bars, but clubs and restaurants are equally guilty. As a remedy Dr. Wiley suggests the passing of better laws regulating the sale of strong drink, the most important of which would be a statute compelling the real and spurious articles to be labelled as such. Public opinion in New York favours the institution of more frequent prosecutions, and the most severe punishment for public officials who are detected in taking bribes from the saloon-keepers."

A CASE OF LOST MEMORY.

THE following account of a remarkable instance of lost memory appears in the *Daily Telegraph* of September 30th:—

"The young lady who was found in the streets of Bristol a week ago, suffering from loss of memory, has not yet been identified. She is still at Bristol Workhouse, where she talks rationally with the other inmates; whilst the officials speak highly of her quiet, unassuming manner and gentle disposition. In conversation with a Press representative yesterday, she said she could remember nothing of her previous home or associations. She could recall no acquaintances or incidents in her life. Her mind was completely blank.

"Asked when she first became aware of her affliction, she replied, 'I was walking along the streets—it must have been a short while before I spoke to the police-officer—thinking of nothing in particular, and when I asked myself what day of the week it was, I could not recollect it. Then it dawned upon me that my memory was completely gone, for I could remember absolutely nothing. I experienced no shock or unusual sensation at the time.'

"'You speak with a marked Welsh accent. Do you think you are of Welsh parentage?'—'No; I might have lived in Wales, but I don't think I am Welsh.'

"'You have full cognisance of everything that has happened around you since your memory gave way?' 'Oh, yes; and it has occurred to me that my Christian name is Annie, but I am not positive.'"

THE THEORY OF "OD."

WE published last month the first part of an article on "Homeopathy and the 'Od' Theory" by Dr. Kirn, which we think it is of great importance to homeopaths to understand. The rest of the article will be found in the current number. One of the most remarkable examples of Odic sensitives was the unfortunate Casper Hauser, whose case was narrated by Dr. Dudgeon in our pages many years ago. If we can find room for it we

propose to print Dr. Dudgeon's article over again at an early date, as it is necessary to impress the facts of it on homeopathic practitioners. It is in sensitives that the high potencies of homeopathic remedies have produced such very potent results and furnished very valuable provings.

A LESSON IN FORESTRY.

THE following from the *Morning Post* (St. Petersburg Letter) of September 21st conveys a striking illustration of the teachings of the late Dr. Cooper in reference to forestry :—

“SHRINKAGE OF THE DNEIPEK.

“Some years ago men of science observed that the dwindling rainfall in the valley of the Upper Volga, caused by the excessive and haphazard felling of timber in Northern Russia, was affecting the volume of that river and materially reducing the inflow of its waters to the Caspian Sea.

“The Kieff Correspondent of the *Moskovskiiya Viedomosti* sends to his paper a startling account of the rapid shrinkage of the Dnieper, famous to the Russians alike for its beauty and for its uses as a waterway. In both these aspects it appears to be threatened. It flows past the “Mother of Russian cities” now as a strip of water in a streak of sand, and, as a natural consequence, river locomotion is carried on with great difficulty.

“Nothing, it appears, is being done to ascertain the causes of this waning of its waters, and the correspondent forecasts a still further emptying of its channel, which, as he points out, will bring direful results, not only to the country around Kieff, but throughout South Russia.

“It is possible that this drying up of an important river artery may have had some influence on the rainless seasons which have recently been experienced in some districts of Southern Russia.”

JAUNDICE IN PREGNANCY.—Lourich (*Zentralbl. f. Gynäk.*, No. 24, 1904) reports a case where two sisters both became jaundiced during pregnancy. The elder is a 5-para. During the third pregnancy symptoms of cirrhosis appeared. Gestation occurred four times in the younger sister, inclusive of two abortions; one child, 2 years of age, survived. In both patients the jaundice disappeared after delivery. There appeared to be a family tendency to jaundice. The pregnancies had been carefully watched, by the same physician, in both sisters.—*Brit. Med. Journ.*

ORIGINAL COMMUNICATIONS.

TABACUM.

By JAMES SEARSON, M.D.

Assistant Physician to the London Homeopathic Hospital.

LAST year, when in Chicago, I had several interesting conversations with Dr. J. T. Kent, regarding the action of drugs. One of them had reference to sea-sickness, a topic which just at that time, as may be inferred, possessed for me a considerable personal interest. After detailing the symptoms, which it was my unhappy lot to experience under that head, Dr. Kent suggested as a remedy *Tabacum*.

This interested me exceedingly, inasmuch as for many years past that drug has been a particular favourite of mine, as a cure for a series of symptoms which are very much allied to those produced by sea-sickness. Indeed, in the whole range of our *materia medica* I know of no drug which I have found so invariably satisfactory and reliable as the drug now under consideration.

I have mentioned it to a large number of colleagues, and as the drug does not appear to occupy in practice the position to which I think it is entitled, I am glad of this opportunity of emphasising its merits, and commending it for more general trial.

Its importance may be gathered from the fact that in Clarke's *Dictionary* more than eight pages are devoted to its consideration. Many other authors, however, make but scanty, if any, allusion to it. I was first led to try it in the case of an elderly gentleman, whose symptoms were those with which we are familiar in association with the conditions known as arterio sclerosis; intermittent and feeble action of the heart, great pallor, breathlessness, nausea with occasionally vomiting, uncomfortable feeling in the epigastrium, headache and giddiness, associated with the hard, cord-like pulse.

In endeavouring to select a remedy for this case on our lines, my thoughts reverted to an experience of boyhood, when, after using the "fragrant weed" contrary to parental orders, almost identical symptoms were experienced. The picture seemed to be complete, and I

had no hesitation in administering *Tabacum* 6. The effect was, without any exaggeration, almost magical; the symptoms promptly disappeared, and the patient, who had suffered for some months, remained, during the time he was taking *Tabacum*, free from his troubles. Since then I have prescribed the drug in the same strength in many similar cases, and the results have been invariably satisfactory.

In the Out Patients' Department of the Hospital, as well as in private practice, one frequently meets with cases where giddiness is complained of as the leading symptom. In these cases I now almost invariably give *Tabacum*, and the more I use it, the better I like it.

The drug, as may be gathered, has been abundantly proved, the symptoms experienced by the provers being: feeling dizzy, cold perspirations, deathly nausea (improved by cold air), trembling, nocturnal emissions, jerking of the limbs, and palpitation. It is useful in Menière's disease, intermittent heart in old people, and sea-sickness. Allen recommends it for dim sight and strabismus, and gives as the leading indication the desire to have the abdomen uncovered. In brain-fag the drug will also be found useful, especially when the former is accompanied by a dull aching pain in the upper part of the eyeball, especially the left, and it should relieve precordial oppression.

86, Wimpole Street, W.

THE LATE DR. DUDGEON.

By DR. CLARKE.

THE first meeting of the present session of the British Homeopathic Society, held in the Board Room of the Hospital on Thursday, October 6th, was very fitly devoted to addresses, and the voting of resolutions in reference to the decease of its most distinguished member. The resolutions included one of condolence to the bereaved family, and one for the consideration of the steps to be taken to raise a fitting memorial in his honour. The volume of the *Journal* of the Society containing a record of these proceedings will be one of unusual value and interest.

In the obituary notice of last month promise was made

that Dr. Dudgeon's career should be reviewed from several aspects. In relation to practice, and in relation to homeopathic politics, there are points to be considered of very great importance, and I hope next month to deal with the latter.

At present I must be content with reproducing two additional obituary notices that have appeared. The first is from the *British Medical Journal* of October 8th. This article does not contain much that is not already known to our readers, but it is well to put it on record because, in the first place, it does no little honour to the journal itself. The *British Medical Journal* has, of late years, on more than one occasion, done homage to Dr. Dudgeon's abilities, and we were glad to see it adopt a generous and sympathetic tone in chronicling his decease:—

“ Dr. Robert Ellis Dudgeon, who died at Carlton Hill, N.W., last month, at the age of 84, was in his way a notable personage, and certainly one of the most distinguished followers of whom the cult of homeopathy has been able to boast during the past half century. A Licentiate of the Royal College of Surgeons of Edinburgh in 1839, Dr. Dudgeon spent a year or two abroad in Paris and Vienna, and then graduated M.D. at Edinburgh. Not long afterwards he became editor of the *British Journal of Homeopathy*, and occupied the post for some forty years, at the same time carrying on a considerable practice, and serving upon the staff of the Homeopathic Hospital. He was a man of unusual mental and physical activity, and this not being fully absorbed by his ordinary work, found outlet in very miscellaneous ways. On the physical side, volunteering, swimming, and golf all claimed him as a devotee; while, on the mental side, his literary output was large and varied in character. The subject of optics, in particular, had a great attraction for him, and, in addition to several papers dealing with the subject contributed to the *Philosophical Magazine* and other periodicals, he invented a pair of spectacles for use under water. A man of much humour and a very original turn of mind, he was the esteemed friend of a considerable number of persons of distinction, social and literary, and amongst others of Samuel Butler, the author of *Erewhon*. It was probably under his influence that Dudgeon was induced to turn some of his superfluous energy into the writing of a kind of novel, a romance called *Colymbia*, dealing with an imaginary country situated under the sea, and with the ways of its inhabitants. It was not exactly a success, but

contains, nevertheless, a great deal of clever writing of a kind typical of the author's peculiar turn of mind. A more useful piece of work, however, and the one which best entitles Dudgeon to a permanent place in the memory of his fellows, was the invention of the sphygmograph which bears his name—one which is, perhaps, the handiest and most generally useful of those which have been brought out. Dr. Dudgeon's activity persisted until a very late period of life; he continued to see a certain number of patients until quite recently, and his latest literary effort was published only four years ago, when its author had almost reached the age of eighty; it is called *The Prolongation of Life*."

The next account of our departed colleague we take from the *Zoophilist* of August. As is well known, Dr. Dudgeon took an active part in defending the right of animals to be protected from vivisection:—

"DR. DUDGEON.

"Readers of the *Zoophilist* will learn with great regret that one of the most remarkable among the medical defenders of our cause has passed away, in the person of Dr. Robert Ellis Dudgeon, of Carlton Hill, London. For the last twenty years or more, both on the platform and with his pen, Dr. Dudgeon has denounced vivisection as being unscientific and misleading, and in the highest degree prejudicial to the true interests of the healing art. Like all great men, Dr. Dudgeon was fond of animals—the writer never knew him without a dog as a member of his household—but it was from the scientific side that he preferred to make his attack. The extravagant pretensions of Pasteur and others at the time of the experiments with rabic virus, first led him to take an active part in the anti-vivisection crusade. In his witty phrase he named vivisection the 'Joanna Southcott of Medicine'—always proclaiming itself as about to bring forth medical salvation, and always failing to fulfil its promise.

"Dr. Dudgeon was a man whom none of his enemies could afford to despise. Though he belongs to an heretical camp in medicine, the *British Medical Journal* was fain to admit that it wished he were 'one of us,' i.e., its own party. Dr. Dudgeon was a wit, a man of letters, a scientist to whom the whole profession is under obligation for his inventions, and even the *British Medical Journal* could not set him down as either a sentimentalist or a faddist.

"Dr. Dudgeon was born at Leith on March 17, 1820.

At the age of nineteen he had passed all his examinations for his M.D. degree, but being too young to have it conferred, he went to Paris and Vienna to complete his studies. Whilst in Vienna he met college friends who were studying homeopathy at Fleishmann's hospital; but he was then engaged in other studies. On their return Drs. Drysdale and Russell enlisted his services in making translations of Hahnemann's works, and he became so much interested that he returned to Vienna to study for himself. For many years past he has been one of the most prominent practitioners of Hahnemann's system in this country, and has had many distinguished patients under his care—John Bright, James Russell Lowell, and his own great friend, Samuel Butler, among them. At the time of Prince Consort's last illness he received a Royal command to be in readiness to proceed to Windsor, but the illustrious patient passed away and no summons came.

“Dr. Dudgeon's translations of Hahnemann's works will be the standard English translations of these epoch-making works for all time. Some thirty years ago Dr. Dudgeon wrote a satirical romance, *Colymbia*; in 1900 his *Prolongation of Life* was published by Chatto and Windus, and soon ran into a second edition.

“Dr. Dudgeon was a most lovable man, and his patients, friends and family were attached to him with an uncommon devotion. Up to two years ago he was singularly active and youthful for his years. An attack of influenza at that time was the cause of his decline of strength, but in spite of this he continued to follow his practice within a few weeks of his death. He passed away in the early hours of Thursday, September 8th. His remains were cremated at Golder's Green, on Monday, September 12th.

Next month I hope to contribute an article on the place of Dr. Dudgeon in the politics and propaganda of homeopathy.

STRANGULATED HERNIA AND ITS TREATMENT.

By ARTHUR A. BEALE, M.B.

Assist. Surgeon London Homeopathic Hospital.

ANY general practitioner or surgeon may find himself face to face with a case of strangulated hernia at any moment, and on his knowledge of what to do may depend the life of the patient. This condition is one of the most

deadly, and yet no person ought to die from it, since under proper conditions it is very amenable to treatment. Most hernias are more incipient in their development than is generally recognised, and it is probable that all cases of strangulated hernia are those which have advanced a fair way towards settling into ordinary uncomplicated hernia, when some extra strain has determined the critical condition called strangulated hernia. In this condition some viscera, usually a knuckle of the smaller intestine, has forced its way through one of the openings in the parieties, or through a slit in the mesentery, or one of the more internal openings of the abdomen. In either of these cases the general symptoms are the same and are so uniform as to be easily recognisable.

There is generally a well-defined tumour at one of the usual localities—inguinal canal, femoral canal, or umbilicus—which is tender to the touch and with great pain in the immediate neighbourhood, which radiates to other parts of the abdomen.

As the case advances the pain and tenderness increases in severity, and the parts may show signs of inflammation.

Sickness comes on with frequent retching and vomiting. There is stoppage of alvine discharges. The pulse is hard and frequent, and high fever rages, the tenderness and pain extends to the whole of the abdomen as the general peritoneum participates. Convulsive hiccough sets in and is always an important symptom. The vomit consists at first of the ingesta only, but as the condition advances it may become stercoraceous. After a time these symptoms may subside, and the patient feels comfortable, but the comfort is illusory, for it generally marks the stage of gangrene, and is accompanied by a cold, moist skin, glazed eyes, and in no short time, if some radical measure is not pursued, the patient dies.

Needless to say in competent hands the last stages should never be reached, for long before this operative measures would be instituted for the saving of the patient.

Treatment.—What can we do in such a case? Well, now, the nature of the treatment must depend on—

1st. The severity of the symptoms.

2nd. The length of time which has elapsed since the accident.

3rd. The degree of development of the condition, *i.e.*, the treatment in the gangrenous stage must differ from that of the early stage. In any case the treatment must be definite, prompt, and effectual.

If caught in the early stage no time should be lost to attempt reduction (always supposing, of course, that the case is external) by taxis. This applies both to femoral and inguinal.

Taxis.—To carry this out effectually there are a few details to remember.

1. It is always safer and easier under an anesthetic (and perhaps chloroform is on the whole most desirable), but in advanced cases this becomes a danger, as it is not so easy to estimate what harm is being done.

2. The patient should be placed in that position that gives the surgeon the best chance of reducing the hernia. There are four positions which have proved useful. Any one or combination should be selected.

(a) The patient lies on his back, the legs are flexed on the thighs and the thighs on the abdomen, and the limbs are adducted. This most readily relaxes the pillars of the ring.

(b) The patient lying on his back, the hips are raised on a pillow, whilst the trunk is depressed, the limbs are flexed and rotated inwards.

(c) The patient lying on the back, is inverted by inclining the patient with the head downwards and the hips high up.

(d) Place the patient on the afflicted side in a semi-prone position with the thighs flexed on the body.

3. The patient (if not under an anesthetic) is invoked to avoid all exertion of the abdominal muscles, and asked to keep his mouth open to assist this end.

4. If the tumour is large enough, grasp the tumour in the hollow of the hand, catching hold of the neck high up between the index finger and the thumb, drag it down gently, compressing and manipulating the neck, again crowding it up towards the neck, the whole time pressing it back into the abdomen with the thumb and fingers of the left hand if necessary.

Dr. Nichols, of America, declares that all cases of strangulated hernia can be reduced by taxis. To aid him he uses hot cloths saturated with chloroform. In worse cases he says: "I carefully readjust the pressure, reduce

or lessen the tumour as much as possible, holding the part, and making the pressure close to the point of stricture with the one hand, and with the other, after holding it in cold water a few minutes, I suddenly seize the abdomen below the navel and carry it upwards, at the same time using a little more force or pressure with my other hand at the stricture. I know this by experience, and I fully believe that it is the remedy *par excellence* in every obstinate case of strangulated hernia." The writer has tried these suggestions with satisfactory results.

It is necessary in some cases to evacuate the bladder and rectum. In obstinate cases an evaporating lotion applied to the tumour is necessary, a good one being alcohol, potassium nitrate, and vinegar, equal parts, or spts. vin. meth. (or rect.), ammon. chloride, and spts. of chloroform aa ζ ii aqua ad ζ vi.

The pressure in taxis should always be in direction inversely to that in which it developed.

There have been many devotees to the use of the elastic bandage when taxis has failed. It must be used with caution and not applied too long at a time. Mr. Maisonneuve was the first, I believe, to recommend it. Failing this the patient is not yet necessarily condemned to operative procedure. By a wise and cautious dietetic treatment much can be done.

The rectum should be thoroughly evacuated by hot enemata, which should be repeated. No soap need be used, but the colon should be injected with 2 to $2\frac{1}{2}$ quarts of hot water with great caution and slowly. The distension of the rectum and colon will sometimes accomplish the desired end, especially if the prolapsing gut is the colon; or after preliminary enemata the gut may be expanded with air. Then the patient is put to bed and fed strictly on barley-water or barley-water and milk, with every chance of spontaneous reduction; the pulse and temperature must be carefully watched for alarming symptoms. The writer knows of three cases treated successfully in this way with most excellent results. Hot and cold compresses can be applied locally according to the relief experienced.

The late Professor Helmuth, the American surgeon, and others have spoken highly of the effect of homeopathic remedies in the treatment of strangulated hernia. There

are many recommended. The favourite ones are *Opium*, *Nux Vomica*, and *Aconite*, in this order.

1. The indications for *Aconite* are inflammations of the affected part with great susceptibility to the touch, accompanied by considerable fever, and a quick, hard, and full pulse.

2. Dr. H. G. Dunnell, of New York, reports a case of cure of strangulated inguinal hernia after stercoraceous vomiting, in which *Tinct. opium solution*, 1 to 100 parts, was given in three minim doses, every two hours. *Aconite*, *Arsenicum*, *Nux vom.*, *Sulphur*, *Verat.* were also employed, apparently without results.

3. *Nux vom.* When the respiration is laborious and oppressed, tumour sensitive to pressure (not so great as in *Aconite*), bitter vomiting, and especially when the strangulation is caused by errors of diet or exposure to cold.

4. *Nux* and *Aconite* have been used in alternations.

5. *Sulphuric acid* is said to be a specific by some.

6. *Veratrum* where the above gives no relief, and where there is a cold, moist skin, coldness of the extremities and profuse vomiting.

7. If there is no relief and fecal vomiting starts, accompanied with distension of the abdomen and the patient comatose, *Opium* is the remedy.

8. A Mr. Traub recommends *Nux vom.*, *Acid sulphuric*, *Lycopod.*, *Belladonna*, and *Aconite* as auxiliary remedies.

9. There is a record of a case relieved by *Ipecac.*

10. Dr. Helmuth also mentions some curious cases in which spontaneous reduction took place after drinking some coffee. Dr. Sarra seems to have been the heroic prescriber, though he had previously heard of the remedy from others. He also ordered the infusion to be applied locally as well.

Where these remedies fail to give relief and the patient's condition is serious an operation must be considered, and in some cases the condition calls for immediate interference of this nature. The operation of kelotomy is not in itself a serious one, and should not be considered a last resource, as deaths occur not from the operation but from shock produced by the condition. In inguinal hernia the operation is as follows: An incision is made, through the integument and superficial fascia, over the tumour in its long axis parallel to Poupart's ligament

extending some distance above and below the external ring. The structures are then carefully divided down to the sac, which is caught up and carefully opened so as not to injure the contents, the nature and condition of which will determine future procedures. There is generally an escape of fluid, which is evacuated, and the underlying structures cleaned and examined for signs of gangrene. A director is then passed along the hernia (inside or outside the sac, as considered wisest at the time), and the stricture relieved by little snicks in an upward and outward direction, or, as is now more often recommended, the gut or other viscera is pressed back with the index finger of the left hand, whilst the blade of the hernia knife is passed upwards under the ring on the flat, and then turned so as to snick the constriction. If the gut is presenting and is fairly healthy it may be pushed back. If omentum it should always be ligatured and cut off and the stump returned. If gangrenous then enterectomy if possible, or opening and forming, as a temporary measure, a false anus. The parts may then be treated as in radical cure if the condition of the patient permits.

In Femoral Hernia the constriction is usually at Gimbernat's ligament, and after arriving at the sac, the incision should be made directly inwards with the same precaution of snicks instead of deep incision, to avoid cutting an abnormally placed obturator artery, which is stated to be wounded once in every 150 cases.

There is often shock afterwards which must be met by appropriate treatment, of diet, &c. In these days of safe transfusion the question naturally suggests itself whether many lives might not be saved in the dangerous stage of shock by a timely transfusion.

32, Weymouth Street, Portland Place, W.

MATERIA MEDICA MISCELLANY.

By J. R. P. LAMBERT, M.D.

Guaiacum in Tonsillitis.—A boy had a temperature of 103° with headache, anorexia, and sore throat. Tonsils were swollen, the right more than the left, and studded with yellow points. The mucous membrane was of rather a pale red colour, without much secretion. The pain on swallowing was very severe, and extended toward the ear.

All the symptoms yielded very rapidly to *Guaiac*. 1x. This is only one of several similar cases where what seemed to be the commencement of phlegmonous tonsillitis was very promptly cured by this remedy. The indications are similar to those of *Belladonna* and of *Mercurius*, and rather a close discrimination is called for. *Guaiacum* lacks the increased secretion and the soggy tongue of *Mercurius*. The redness is paler than with *Belladonna*, and the pain extending toward the ear is more marked in *Guaiacum*. A rheumatic or gouty diathesis would be an additional indication.—Dr. E. H. Linnell, in the *Journal of Otology, Ophthalmology and Laryngology*. (*New Eng. Med. Gaz.*)

Thuja in Skin Diseases.—*Thuja* cases have fine prickings, as if from needles in the skin. Acne appearing at puberty on forehead often calls for it, because of this sensation—violent itching, stitching in the warts—seedy, pointed warts. A red tubercle is also characteristic of *Thuja*. Soreness of condylomata about the anus distinguishes this from some other remedies. Moist fissure about the anus, without the aching of bones, found under *Nitric acid*. Cauliflower excrescences of the os uteri have been benefited by local application added to the action of internal remedies. A recent case, where warts appeared about the vulva soon after marriage, fully recovered by the use of *Thuja*. Several years since a patient came in for treatment, having a large brown, painful wart on the third toe. Skilful surgeons had pronounced amputation of the toe her only chance of cure. *Thuja* 30 and 200, with *Thuja* cerate locally in a few weeks, left a smooth surface.—*Cleveland Medical and Surgical Reporter*. (*Ibid.*)

Toxic Polyneuritis from Sulfonal.—Erlsloh reports the case of a woman suffering from carcinoma of the cervix. She had repeated hemorrhages and had become profoundly anemic. In the course of five days she received 150 gr. of sulfonal in order to control insomnia. Five days later she developed pain in the calves, followed by paralysis, first in the legs and then in the arms. Curiously, the feet and hands were the last parts affected. Within sixteen days the paralysis had involved the muscles of respiration and the patient died. The urine contained hematoporphyrin. Mentally, she had hallucinations, and toward the end was difficult to arouse, and had incon-

tinence of urine and feces. Macroscopically, the central nervous system was negative. There was degeneration of the peripheral nerves, involving the myelin sheathes and the axis cylinders, characterised by the appearance of small masses at different points in the myelin sheathes that stained black with osmic acid. The anterior roots of the central nervous system appeared to be intact. There was reason to believe that the process commenced in the peripheral portions of the nerves, and that the functional changes preceded the anatomical changes because in the brachial plexus no histological alterations of the nerves could be detected.—*Deutsche Zeitschrift f. Nervenheilkunde*, vol. 23, 1903, Heft 3-4. (Translated for N. A. J. H.)

Carbon Bisulphide Polyneuritis.—The patient, a young man aged 17, had been employed in manufacturing toy balloons for three months. It was necessary to plunge the balloons in a bath containing carbon-bisulphide, so that the exposure was both to the fumes and to direct contact. Three months after beginning this occupation his legs grew weak, later the hands became affected. There were at no time pains or any subjective or objective disturbances of sensibility. The hands perspired freely and there were reactions of degeneration in the intrinsic muscles of the hands. No tenderness of the nerve trunks. He was subject to headaches, was forgetful, had at times a feeling of intoxication, and a taste of carbon-bisulphide in the mouth. Recovery was complete. The interesting features of the case were the early appearance of the paralysis after exposure (three months), the quadriplegia without sensory disturbances, and the amnesia, which was general and not restricted to any one period of the patient's life.—*Revue Neurologique*, vol. 12, 1904, No. 3, February 15th. (*Ibid.*)

Acetic Acid in Membranous Conjunctivitis.—Dr. S. de Wayne Hallett writes in the homeopathic *Eye, Ear, and Throat Journal* :—

The results obtained from the use of this drug in diseases of the air passages led to its use in certain eye conditions, especially in croupous conjunctivitis. It is adapted to those cases in which *the false membrane is very dense, closely adherent, tough and yellowish-white in colour*. The lids are thick, red, edematously swollen, especially the upper, which then hangs down over the lower.

While the membrane is closely adherent it does not extend into the conjunctival tissue as in the diphtheritic form, and no scars remain after resolution. The discharge is neither thick nor purulent, nor is it mixed with small portions of the membrane. It is not appropriate if the cornea is involved.

THE X-RAY DISEASE.

THE attention of the public has been drawn in a very pointed manner to the disease-producing powers of X-rays by the death of Mr. Clarence Dally, which is thus recorded in the *Daily Telegraph* of October 1st:—

“After suffering years of torture Mr. Clarence Dally, an electrical engineer, who was Mr. Thomas Edison’s chief assistant, has died a martyr to the cause of science. During some X-ray experiments Mr. Dally’s hands were badly burned with the fluoroscope. He submitted to amputation of both arms, to skin grafting, and to all kinds of painful operations without avail. Previous to the amputation Mr. Dally was obliged for months to keep his hands in cold water night and day to allay the burning sensation. The direct cause of death was blood poisoning.”

On the other hand we take this from the *Westminster Gazette* of July 7th:—

“A case in which the application of the X-rays proved highly satisfactory was presented to the French Academy of Medicine yesterday. A woman thirty-three years of age who had suffered from a malignant cancerous growth upon her face which ordinary treatment failed to cure, was submitted to the X-ray treatment. In three months her cure was complete. She was only subjected to rays of intensity for a few seconds at a time, and during the whole three months was only under the process for seventy minutes in all.”

The fact that the principal use of X-rays in medicine is for the cure of cancer, and that the X-rays have actually caused cancer, has not failed to strike the popular imagination, though the profession, as usual, sees nothing in the coincidence. But short of causing actual cancer X-rays have produced in numbers of operators, many of them medical men, a condition of persistent ulceration and warty growth very little removed from malignancy. All these facts should be utilised by homeopaths, who may use X-rays in the attenuations, prepared in the same way as the attenuations of the electricities—by attenuation of *Saccharum lactis*, or distilled water, saturated with the

rays. These attenuations ought also to be proved; and the Provers Association of America and of the British Homeopathic Association would do well to turn their attention to this subject. The following is an epitome of an article in the *British Medical Journal* from the public press:—

“TERRORS OF THE X-RAY.

“A NEW DISEASE.

“In its latest issue the *British Medical Journal* prints a paper read before the British Medical Association in July on ‘Chronic X-ray Dermatitis.’ The author, Dr. Hall-Edwards, himself a sufferer from the disease which he describes, is connected with the General Hospital, Birmingham, and he characterises it as ‘as one of the most persistent, painful, and disfiguring maladies it has been my misfortune to meet.’ Very soon after Röntgen discovered the rays which bear his name, experimenters found that exposure of any portion of the body to their influence tended to produce dermatitis—inflammation of the skin—but chronic dermatitis is a new, very severe form of the malady. Patients are exposed for a few minutes at comparatively long intervals and suffer no danger; medical men in operations and demonstrations often for hours at a time, and the consequences to them have become extremely serious. Dr. Hall-Edwards gave a series of demonstrations in 1896, lasting four evenings, on each evening exposing his hands for some hours. Two or three weeks later the skin round the nails became red and painful; then the nails came off; warty growths appeared; the skin was dry and wrinkled, and latterly severe pains have ensued, resisting every attempted remedy. ‘According to present knowledge there appears little or no hope for those who have contracted the disease.’

“Dr. John Pitkin says: ‘For a description of the pain and suffering no language, sacred or profane, is adequate. Moreover, it is sometimes fatal. Dr. Blacker, of St. Thomas’s Hospital, died of it, after suffering terribly, a martyr to science and humanity. In another hospital an operator has had to lose several fingers, and in London, Guy’s, Middlesex, and most of the great hospitals where X-ray treatment is largely used, doctors and nurses are suffering—the mischief having continued in some instances for years.’

“It says something for the altruism of the medical profession that they have said and written so little of their sufferings. If the pain had been caused to patients we should have heard of it at once. Two things are now known: First, it is the long-continued exposure which sets up the terrible chronic inflammation; secondly, it is unnecessary. Precautions can be taken to avoid the peril. The X-rays are so penetrating, going even through metals, that it might seem hopeless to wear any gloves or gauntlets that would afford sufficient protection; fortunately, this is not the case. A doctor in the Hospital for Diseases of the Skin in Fitzroy-square has been engaged in Röntgen-ray work for over five years. He became aware of the risks betimes, and his hands show only a sun-burnt hue: but the portion of the wrist protected by the shirt-sleeve was scarcely affected. For long exposures, which are often necessary in operations, thicker gloves are worn;

better still, gauntlets, covered or lined with lead—that metal being the least penetrable by X-rays. Similar, and perhaps still more stringent, precautions are, no doubt, required whenever radium is employed. If these be taken the new generation of workers need know nothing of the ill-results of long exposures.

“ Besides the medical and surgical practitioners, several makers of X-ray instruments are sufferers from the new malady. ‘ I feel sure,’ says Dr. Hall-Edwards, ‘ that even living in a room with an excited tube is dangerous.’ ”

MEDICAL ETHICS AND THE PUBLIC.

THERE has been a long correspondence in the *Pall Mall Gazette* on the above topic, bearing chiefly on the intolerance of the profession with regard to outsiders and remedies introduced by outsiders. The following letter appeared over the initials of Dr. Pullar on September 30th :—

“ *To the Editor of the Pall Mall Gazette.*

“ SIR,—Considering the uncertainty of successful results in the ordinary treatment of disease, one would naturally expect the medical profession to be open-minded and ready to ‘ prove all things ’ likely to advance the least exact of all sciences. But, unhappily for the public, this is not the prevailing attitude in the official bodies that preside over and give ‘ tone ’ to the rank and file of the medical profession ; and in consequence of this hide-bound conservatism the public are deprived of the benefits of treatment, the great advantages of which have been amply confirmed all over the world amongst enlightened people who refuse to accept the dicta of medical autocrats. As your correspondent, ‘ Another of the Public,’ points out, there is a sort of tyranny in the profession which renders it extremely difficult for any practitioner to deviate by one hair’s breadth from routine orthodoxy, however convinced he may be of the superiority of methods of treatment that are persistently ignored (or misrepresented) by the ‘ regular ’ (*sic*) authorities. There are, indeed, unlimited healing resources available for every one who honestly investigates nature ; and the only obstacles to their successful utilisation are ignorance and prejudice on the part of the (liberal ?) profession of medicine. It is an intolerable state of things which would soon be mended or ended if the real truth of this matter were known to the public.—Yours, &c.

“ September 29th.”

“ A. P.”

In the issue of October 19th an article by Dr. C. W. Saleeby appeared stating the case for the profession, and claiming for it the highest altruism and liberality.

The following letter in reply appeared in the issue of October 21st :—

"To the Editor of the Pall Mall Gazette.

"SIR,—If you have not already had enough of this subject, perhaps you will allow me to make a few comments on the article by Dr. Saleeby in your issue of to-day ?

"Dr. Saleeby suggests that any member of the public or of the profession is sure to receive a warm welcome from the editors of medical journals if he has any new remedy to announce for any malady, provided he does not keep the remedy a secret. Dr. Saleeby's view of the open-mindedness of medical editors is a little too rosy. At least, he must, I think, be aware that this hospitality would not be allowed to one who frankly owns allegiance to Hahnemann.

"The medical profession, equally with the public, are on an entirely wrong tack : they are looking out for 'cures' for 'diseases.' Cures for 'diseases in the abstract' do not exist. The remedy which will cure Jones's rheumatism will not cure Smith's. Now Hahnemann discovered a law, and developed a science, by means of which a medical artist can discover which is the remedy for Jones's rheumatism and which is the remedy for Smith's. But this is an art, and a very delicate art, and it requires brains in the working of it. Hahnemann laid his discovery before the profession, and he was driven out of his home for his pains. Homeopaths at the present day are equal with allopathists before the law, but no medical society will accept them, and no general medical journal will accept articles in favour of homeopathy, though these journals are ready to accept articles against it.

"The fact is, the medical profession is neither better nor worse than any other close corporation of human units. But a little leverage from the outside in the shape of public opinion is a very wholesome tonic, and it seems to me, Sir, that you have done the profession a service by opening your columns to this discussion.—Yours, &c.,

"JOHN H. CLARKE, M.D.

"8, Bolton Street, W., October 19th."

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Entrance fees and Pastoral Play seats at Botanic Gardens.....	16	17	6				
Mrs. Otto Beit, donation	10	0	0				
„ Carter, donation	10	0	0				
C. W. Arnott Stewart, Esq., sale of tickets	8	8	0				
Mrs. Thirlby, sale of tickets	7	17	6				
Miss Raffles, sale of tickets	6	16	6				
Miss Herbert, donation, per Dr. Burford	5	5	0				
Miss Torrens Johnson, sale of tickets	4	14	6				
Mrs. John Mews, flower stall	4	6	0				
Mrs. John Mews, donation	4	4	0				
Lady L. Durning Lawrence, donation, per Mrs. Wood	3	3	0				
Miss Florence R. White, donation	2	2	0				
C. A. Kelly, Esq.	2	2	0	Mrs. E. W. Cooper	1	1	0
W. Willett, Esq.	2	2	0	Miss Cruikshank	1	1	0
Joshua Aldes, Esq.	2	2	0	Mrs. J. B. Capper, per Dr. Dyce Brown	1	1	0
George Harris, Esq.	2	2	0	Mrs. Arthur Cates	1	1	0
Patrick Ness, Esq.	2	2	0	E. J. Laurie, Esq.	1	1	0
Miss E. Shadwell.....	2	2	0	Mrs. Rains.....	1	1	0
Miss Cecilia Porter	2	2	0	Mrs. S. R. Hanley	1	1	0
Lady Westland.....	2	2	0	Mrs. Thomas Mason	1	1	0
Alderman T. Richardson	2	2	0	C. A. Russell, Esq., K.C.	1	1	0
Miss R. Dent.....	2	2	0	Lady Ida Low	1	1	0
Mrs. Fortescue.....	2	2	0	F. W. Warren, Esq.	1	1	0
Misses Barrett and Whitaker, per Dr. Dyce Brown	2	2	0	Mrs. Harvey	1	1	0
Sir John H. Morris	2	2	0	J. H. Moberly, Esq.	1	1	0
Mrs. E. Oliver	1	11	6	Miss Florence McArthur	1	1	0
George Franklin, Esq., J.P., D.L.	1	11	6	Miss Warner.....	1	1	0
Mrs. Verner	1	11	6	Dr. W. Cash Reed	1	1	0
Dr. Dyce Brown, sale of tickets	1	11	6	Mrs. Mather	1	1	0
Dr. Roberson Day, sale of tickets	1	11	6	Mrs. H. O. Wills	1	11	6
Lady Walsingham	1	11	6	Dr. Horace Sanders.....	1	1	0
Miss Fowler	1	11	6	The Hon. Victoria Grosvenor	1	1	0
Dr. Eugene Cronin	1	11	6	H. Thorould Wood, Esq.	1	1	0
The Lady Jane Trotter ..	1	5	0	C. A. Llewellyn Salusbury, Esq.....	1	1	0
Mrs. Schloss, per Dr. Burford	1	1	0	W. R. Dalb, Esq.	1	1	0
Mrs. Rossiter Hoyle, per Dr. Burford	1	1	0	Mrs. Burroughs, per Dr. Burford	1	1	0
Mrs. Bonwens, per Mrs. Wood	1	1	0	Major Tudor	1	0	0
The Lady Loch.....	1	1	0	C. A. Kelly, Esq.	0	10	6
				Miss Slater	0	10	6
				Mrs. Benecke	0	10	6
				Countess of Hintore	0	10	6

EXTRACT.

HOMEOPATHY AND THE "OD"* THEORY.†

By DR. KIRN.

Translated by P. W. SHEDD, M.D.

Concluded from page 463.

II. *The Od.*

THE most important and useful characteristic of the sensitive is that he is able in a darkened room to perceive a hitherto unnoticed light, with which peculiar warm or cool sensations are connected. This light is found—

1. On magnets.
2. On crystals.
3. On parts of the body.
4. On rubbed surfaces.
5. On wires exposed to sun- or moon-light.
6. On charged metallic electrical conductors.
7. In chemical reactions.
8. On all material substances.

This emanation of light is the Od of Reichenbach. The word is derived from the Sanscrit, and signifies "something that blows or waves," *e.g.*, breath, vapour, flame.

Reichenbach had, up to 1856, investigated 197 sensitives, and at least 100 others without reducing his results to writing. The fundamental investigations of the Od have therefore been carried out in nearly 300 cases with inexhaustible patience and pertinacity. Control experiments were instituted by Professor of physics von Baumgarten, in this manner: He placed unnoticed in the hands of a sensitive, instead of a magnet, a piece of common iron in magnet form, which (the difference) was immediately perceived by the individual. Among his 197 sensitives were at least 100 scientifically trained men (physicians, students of natural science, chemists, mathematicians, philosophers). Each fundamental experiment was repeated 10, 20, 100 times. The foresight, care, exactitude, and circumspection accompanying these

* Pronounce "ode."

† From *The Chironian*, August, 1904. Translated from *Zeitschrift des Berliner Vereines homœop. Aerzt.*, vol. xxii.

experiments permit of no contradiction. Reichenbach's name, as discoverer of the paraffins, creosotes, eupions, &c., and in other matters of medical and technical import, already had weight in scientific circles when he began these difficult experiments. In 1845 he met at Carlsbad the celebrated chemist, Berzelius, the discoverer of *Selenium*, *Thorium*, *Silicium*. As Berzelius was much interested in the Od, Reichenbach looked about for sensitives in Carlsbad, and through the kindness of the local physician, Hochberger, became acquainted with an excellent subject in the person of a Miss von Seckendorf, of Sondershausen. Among other experiments demonstrated by Reichenbach to his illustrious *confrère* was the following: Reichenbach had stuffed his pockets full of a number of chemical preparations, each carefully wrapped in paper, and without superscription. He spread them upon a table, and directed the sensitive to move the fingers of the right hand about among them without opening the packets. She soon remarked to the two observers that she was differently affected by the various packets; many were without effect, while others exerted peculiar attraction upon her hand. Reichenbach desired her to separate accordingly the packets into two groups. This done, he took a group in each hand and placed them before Berzelius, one group non-attractive, the other attractive. Berzelius opened and found in the non-attractive group: *Sulphur*, *Selenium*, *Graphites*, *Tell.*, *Ox. ac. crystals*, *Tart. ac.*, *Sod. sulph.*, *Cup. sulph.*, *Rochelle salt*, and *Saltpetre*.

In the attractive group: *Plat.*, *Nickel*, *Cu.*, *Zn.*, *Rhodium*, *Pb.*, *Iridium*, *Stan.*, *Morphine*, *Atropin*, *Caffein*.

Not a little amazed, the father of electro-chemic science beheld in the attractive group only electro-positive; in the non-attractive, electro-negative bodies. The pleased surprise of the great chemist was so much the livelier, as in this phenomenon he saw a new and unexpected proof of the dual value of substances, and added guaranty for the correctness of his system, and that from a source hitherto unsuspected, the human nerve. What had cost infinite labour and acuity for a century to accomplish was done by an untutored, sensitive girl in ten minutes. "From that hour," says Reichenbach, "Berzelius showed a lively interest in my experiments."

This power, dynamis, by which substances react upon the human nerve and make their presence physically felt, is the Od.

If one further investigates this quality, it will be found that the attractive, positive bodies feel warm to the left hand, cool to the right, and that reversely the non-attractive negatives seem cool to the left, warm to the right hand.

The electro-chemic relations, which you will also find in Farrington, p. 386, in his discussion of mineral substances, is also the Odic relation, electro-positive or odic-positive, as for example: *Hydrogen, Kali, Natrum, Lith., Calc., Baryta, Zn., Alumina, &c.*; the electro-negative, as *Ozone, Nit. ac., Sul. ac., Sul., Iod., Brom., Chlor., Graph., Sil., Phos.*, are also Odnegative.

Compare also our lists of right- and left-side remedies, and you will find that *Ant., Ars., Carbo, Fl. ac., Nit. ac., Sul. ac., Sul., Iod., Graph., Sel.*, purely Odnegative substances, affect the left side, while Odpositive, *Alumina, Atropin, Arg., Merc., Aur., Zn., Pb. (Ferr.)*, are right-side remedies.

The Odpositive remedies affect, therefore, the Odnegative, right side, and the Odnegative the Odpositive, left side.

But yet more. Since the upper half of the body is Odnegative, we must conclude that Odpositive remedies which affect the right side will also first and chiefly act upon the head. (Cf. *Cuprum, Zinc, Arg.*). The Odnegative remedies, first *Sul.* then *Selen., Brom., Iod., Phos., Ars.*, begin their work at the other, the Odpositive end of the body.

Farrington remarks: The electro-negative work upon the intestines in the a.m., on the chest in the p.m., *i.e.*, from below upwards; the reverse is true of the electro-positive, which act upon the chest in the a.m., and intestinally later in the day.

One may thus say, according to the seat of the disease or the time of development of symptoms: This patient needs an Odpositive or Odnegative remedy.

I have already stated that the right side and upper half of the body are Odnegative. I must add the back is also negative, while the left side, lower half, and anterior surface of the body are positive. Man is therefore polarised in three (3) axes; above, right, behind stand in

opposition to below, left, front. Homeopaths have long known that it is not a matter of indifference if a neuralgia or pulmonic inflammation be right- or left-sided. It is an old hygienic rule that the head should be kept cool, the feet warm. Why? To the Odnegative head cold is homogeneous; to the opposite Odpositive end, heat, even as heat is developed at the positive electric pole. Cold feet cause various disturbances of health; through coldness of the skin the Odpositive emanations are hindered. Disease, therefore, is disturbance of odic equilibrium. Man changes as he progresses from health to disease, from an Odnegative to an Odpositive condition. Foot-sweat is of great practical value, and its sudden suppression has often the most serious consequences. This is easily understood if one considers that a normal function of the Odpositive end relieves abnormal Odpositive stasis in the body. Ulcers of the legs also act as vents for disease of the abdominal organs, as may be often observed, and for the same reason I have been in the habit, since acquainted with these odic relations, of questioning all chronic patients concerning the sudorific activity of their feet, and I have often gotten thereby excellent indications for the remedy. Especially, according to my observations, are relapsing bronchial catarrhs and obstinate dysmenorrhœas thus explained and cured. Here also belong scrofulous nasal affections, which are very frequently accompanied by foot-sweat, and which, by proper care and the corresponding remedy, *Rhus*, *Sil.*, *Lact. ac.*, *Calc. c.*, *Baryta*, *Kali c.*, *Sul.*, &c., are surely improved. But because *Sil.* 30th has made a brilliant cure, it may not do so next time. One must prove the sensitivity, and then choose the potency.

Pettenkofer makes the following calculation: If a soaked woollen stocking weigh 45 gm., the water contained in it requires as much heat as would raise a half pound of water from zero to boiling point. If from the body so much heat is daily drawn, it should not surprise us if such patients are already cold. The purely local consideration and therapy of internal and skin diseases is wrong. We should rather always and everywhere try to find a relation. This the Od theory teaches as well as homeopathy.

The disposition to habitual sweating depends chiefly upon an over-aqueous blood, the hydrogenoid constitution

(*Nat. mur.*, *Calc. carb.*). The organism seeks in every way to rid itself of the superfluous water. Reichenbach speaks concerning this in his principal work, "The Sensitive, and His Relation to the Od," vol. i. sec. 879, as follows: "Man changes as he goes from health to disease, from an Odnegative to an Odpositive condition; the Odpositive must increase at the expense of the Odnegative; the hydrogen elements gain preponderance over the oxygen. In walking, climbing, &c., respiration is fuller, deeper, the blood gets more O, and the body undergoes a richer oxidation. Now O is that negative chief constituent of the body which renders it everywhere Odnegative; it is the secretion and excretion of the Odpositive H which it assists and effects."

This is not only theory, but has been practically verified.

I am treating now an elderly woman, who for years, partly from comfort, partly from cardiac degeneration and a consequent dyspnea, has not left her room. This spring, after a bronchial catarrh, she developed edema of the lower limbs and nightly asthmatic attacks. After *Kali c.*, *Puls.*, *Dig.*, *Stroph.*, *Crat.*, and *Cact.* had failed to relieve, I gave her 5 gm. Merck's 30 per cent. hydrogen superoxid, the best ozone preparation that we have at present, in 250 cc. of water. She improved at once, the dispnea becoming much better. The nurse called my attention to the polyuria. In short, the septuagenarian was again saved.

Grauvogl has emphasised the value of ozone water in carbo-nitrogenous constitutions. It helps, especially when potentised remedies fail. The air-hunger is best satisfied by an ozone preparation.

Hydrogen-superoxid is not toxic in 2 per cent. solution, but because of its biting taste may not be taken readily. It should be applicable in many diseases—dysentery, typhoid, diphtheria, diabetes, chlorosis, pertussis; also externally in surgery, gynecology, ophthalmology, otology, dermatology, it seems indicated. I have hitherto used it in diphtheria with considerable benefit, in pertussis with marked success. In diphtheria the foul odour speedily disappears, but the cure progresses slowly; but in all cases of pertussis an immediate diminution of the attacks occurred (instead of ten paroxysms during the night, only two), an improvement noted under no

other remedy. This is all easily explained if Reichenbach's view is accepted, viz., that disease is an overbalance of positive ods. The addition of negative ods quickly restores equilibrium. The general use of *Sulphur* is hereby seen in a new light. But ozone water appears to me a good adjuvant only in cases where the system, from some cause or other rendering respiration difficult, is hindered from getting its O normally.

But not alone for man is the Odnegative the main-spring of life, the plant world also requires the negative sunlight. Seeds germinate and grow in blue light, in yellow or red they perish, *i.e.*, they live in the negative od and die in the positive. The sun is the mightiest od source for plant life. When it rises the plants rouse from slumber, the flowers open, the day is born. When it sinks, and the stream of radiating od is arrested, the leaves droop, the flowers enfold, the plant sleeps. That negative and positive ods are the causes of waking and sleep in the vegetable kingdom has been proved by the experiments of the botanist, J. Sachs. He could at will cause a plant to sleep or wake during the day by placing it under red or blue glass.

Who does not here think of colour therapy? Blue light strengthens and calms nervous patients, while red is adapted to blood and infectious diseases. And artists call blue cold, red warm in all their nuances. It is, moreover, striking that sensitives find blue colours cool and red warm. The psychical sense of the artists and the physical perception of the sensitive here agree. It is more than likely that this agreement rests finally upon the same basis, sensitivity. Apparently there has never been an artist-nature which was not sensitive (in the technical sense). Goethe has said: "All life has its atmosphere." This atmosphere, whereby all living things influence their environment, can be nought else than the Od. With what interest would Goethe, himself a student and investigator of nature, have taken up the discoveries of Reichenbach! At the close of his labours Reichenbach arrived at the conclusion that sensitivity is fundamentally, on the one side, a condition of disturbed health (genius). From quite other sources than science, genius and madness have long been considered near neighbours. Reichenbach, who died in Leipzig, 1869, and whose writings are with difficulty found in antiquarian shops,

was perhaps the most modern of scientific authors, so modern that many of his views and discoveries are just gaining recognition. For his contemporaries he was too subtle, they undervalued his work. The microscope has changed and advanced anatomy and pathology; the doctrine of infinitesimals, mathematics, homeopathy and therapeutics. Similarly the doctrine of the infinitely fine processes, perceptible only to the most delicate reagent in the world, the sensitive nerve, will serve to advance the progress of physiology and medicine. Reichenbach in his day was called a mystic. The uncomprehended, the hidden meaning, however, is alone mysterious. As soon as a thing is comprehended, understood, its mystery departs. Reichenbach brought forward only clear and simple facts in nature, and established them in science by varied and stringent proofs, and hence is far removed from mysticism.

For homeopathy the acceptance of the Od doctrine affords further support. In our future laboratories a dark room should not be lacking. The sensitives, therefore, are everywhere. In mediæval times they tortured the insane, holding them possessed of the devil. With advancing knowledge came the more humane treatment. And for the many sensitive patients a better knowledge will provide a more reasonable therapy. Who knows if geniuses like Mozart and Schubert, sensitives of the first rank, might not have been saved from untimely death by a more sensible therapy? In our drug-proving, also, note should be taken of sensitivity, and thereby finer indications established. Kent says in one of his beautiful drug studies (Alumina): "This drug has few mind symptoms, and those we do know are not certain, and were discovered clinically. We need a proving in high potency upon a sensitive individual to develop the finer symptomatology."

Perhaps the Od will have to be rediscovered if official science is to believe. Nowadays the press speaks of the sixth sense of the blind. It is remarked that many of them are conscious of the presence, for example, of a wall two metres distant. In a room the larger pieces of furniture are recognised without touch. The sense for obstructions is much finer in darkness. A certain Hans Levy says: "Though I am completely blind, yet I know when I am opposite an object, know whether it be large

or small, whether it be fence of wood or wall of tiles or stone. None of my five senses has aught to do with this. I differentiate in passing shops from residences, can indicate towers and windows, and whether they be open or shut." His perceptive powers, too, remain intact in the dark. He recognises the fact that a cloud darkens the sky. At the close of the interview the remark is made, a new field of investigation is here opened to scientists.

We doubt not that this blind man is a sensitive, and that he perceives the Od emanations from objects at some distance. He recognises the cloud from the cutting off the sun ods. Reichenbach says, sec. 2589, that sensitives in the dark never stumble against a wall, a large piece of furniture, an animal, a man, because they have previously become conscious of the Od emanations, a fact I have often verified.

From Rademacher we learn that in epidemic catarrhs liver remedies may be indicated. Reichenbach gives proof of this (sec. 2043), "Miss Z., by tactile sense, recognised my condition of ill-health before I myself was cognisant of it. She felt especially about the hepatic region. In the dark room she saw through my garments the oblique margin of the liver shining forth as large as the hand. At the same time she declared both sides of my forehead (frontal sinuses) markedly illuminated. I give the facts, their significance I do not know." But we do. Reichenbach had busied himself little with observation of disease in the dark room, yet he considered that the interests of pathology demanded further fundamental and many-sided study in this direction, and that a time would come when every large hospital would consider a dark room indispensable to diagnosis.

I could relate to you much more from this remarkable book, but will spare your patience.

In closing, I give the polar characteristics of the Od. "The Od goes hand in hand with the forces light, warmth, electricity, magnetism; it appears everywhere simultaneously with them; it divides into poles, is imponderable and evasive as these forces; it is a part of inorganic and organic nature, and being in such universal relationship with these forces, it is also a force.

The sources of Od in man are partly mechanical, partly chemical. The blood circulation and all voluntary move-

ment produce positive Od ; the chemistry of respiration, of digestion, of metabolism is the genesis of negative Od.

“Very probably the Od itself is a factor in life.”

The above are the chief points in Reichenbach's theory which have interested me. I am convinced, however, that each colleague who shall study the Od will find others, so rich is the subject. If so much has been made of sensitivity and Od as one man, Reichenbach, has given us, what rich harvests await us when whole scientific bodies with more perfect apparatus and greater powers develop the subject. I would not hold that the Od theory offers at present anything iconoclastic, but maintain that we may expect much of the future if we follow the indicated lines. Great is the progress that the healing art owes to similia and potentisation, yet it will become still more perfect through the merging of the two realms of investigation of those two greatly misunderstood thinkers, Hahnemann and Reichenbach.

REVIEWS.

HERING'S HOMEOPATHIC DOMESTIC PHYSICIAN.*

HERING'S *Domestic Physician* is one of the classics of homeopathy. It is our advice to every young homeopathic doctor to possess himself of it and master its contents. Hering has proved that it is possible to write a book for general comprehension and family use, and at the same time faithfully and completely maintain the “Hahnemann standpoint.” And this is of momentous importance in homeopathy. The suction of the tendency of the times is always backwards and downwards towards the allopathic attitude of regarding remedies as remedies for diseases rather than as remedies for particular cases. So soon as a homeopath leaves the ground of individualising cases and individualising remedies he is inevitably drawn towards the allopathic abyss in which

* *Hering's Homöopathischer Hausarzt*. Neunzehnte Auflage Vollständig umgearbeitet von Richard Haehl. Stuttgart: Fr. Frommann's Peilag. London: Homeopathic Publishing Co., 12, Warwick Lane, E.C. 1905.

all sense of reality is lost. The names of diseases are treated with the names of remedies, and the successes are of such microscopic dimensions that surgery easily walks in and rules the roost.

The vitality of Hering's work is shown by the fact that seventy years after its first appearance a nineteenth edition is issued from the German press. Hering has been fortunate in his latest editor, who has with loving care brought the work of Hering up to the present date, and thereby conferred a boon on all German-speaking homeopaths. We heartily commend this work, and strongly urge every German-speaking medical man and every German-speaking family to possess themselves of a copy. The work is excellently printed, and strongly bound in cloth. Dr. Hachl's edition ought to be translated into English.

CLINICAL REPERTORY TO THE DICTIONARY OF MATERIA MEDICA.*

At last I have the satisfaction of announcing that this *Repertory*, which I have had in hand ever since the *Dictionary of Materia Medica* was completed, is now before the public. The *Dictionary* was finished at the end of 1901, so that the present work has occupied the best part of three years in its compilation. This may seem a long time when regard is had to the size of the work compared with the size of the *Dictionary*, but I think when the work itself is analysed it will be found that neither time nor space has been wasted.

The work is intended first and foremost to repertorise the Clinical section of the *Dictionary*. This will be found to be, I have no doubt, its greatest use, as it has been its most frequently expressed want. But before I could even commence on this there was one preliminary to be settled, which may not seem a great matter, but which is nevertheless of great importance, and a work of no little trouble. This was to fix on the abbreviations which should always stand for every medicine wherever mentioned. The

* *A Clinical Repertory to the Dictionary of Practical Materia Medica*, together with *Repertories of Causation, Temperaments, Clinical Relationships, and Natural Relationships*. By John Henry Clarke, M.D. London: The Homeopathic Publishing Company, 12, Warwick Lane, E.C., 1904. Cloth, 21s. ; half-morocco, 25s..

point to be secured here was to select an abbreviation which would suggest the remedy and not occupy too much space. The two first sections of the work—List of Remedies with Abbreviations, and List of Abbreviations with Remedies—are devoted to this subject.

The second part gives the Clinical Repertory itself—showing all the remedies which have been credited with the cure or alleviation of any given state. The margin of the book is sufficiently wide to allow of insertion of other remedies, and for this purpose the list of abbreviations will, I think, be found very convenient. For example, in the HOMEOPATHIC WORLD for October was a paragraph giving an experience with *Sabal serrulata* in the cure of enuresis. I have put that remedy, abbreviated thus, "Sbl.," on the margin of my copy, under ENURESIS, for future use. It would be well to do this when a striking bit of practice occurs in the journals, and thus every man's copy of the *Repertory* will become a more or less original work of his own.

It appeared to me, whilst engaged in compiling this work, that it would be of great use to repertorise one or two other generalities which are not to be found in any other repertory. These were points which I have often wished to have for my own use. Thus it has come about that the other repertories—Causation, Temperaments, and Relationships—are to be found in this volume.

In the binding of the work I hoped to have been able to have the different sections blocked out so as to show at a glance on the front edges. This did not prove to be practical. Still, any reader can, in a few minutes, with a pen and ink, mark the front edges of each section, so that he can find any part he wants at once. I have done this with my own copies.

The volume, it will be seen, is a clinical repertory and much more besides. It is compiled as a completion of the *Dictionary of Materia Medica*, but it is available for use in respect to any materia medica. It may also be regarded as complementary to the *Prescriber*, to which it is definitely related, by the use of italics in the text of the *Clinical Repertory* part. Only in this work the number of remedies named under each item is necessarily much larger than in the *Prescriber*. In the *Prescriber*, on the other hand, details of distinction are given such as are not aimed at in the larger work. The *Clinical*

Repertory is, I believe, the most complete of its kind in existence.

It may be objected that too many remedies are given under many headings. But this is no objection except to the superficial. The practical prescriber will often at a glance select the right remedy from any list having the main indication he wants, because he will see which of them corresponds closest in other particulars to the case he is treating.

I have endeavoured to meet the convenience of readers, as in the case of the *Dictionary* itself, by choosing for the *Repertory* a paper which is light to handle, and which shows type well and takes ink. I trust the work will lighten the labours of my readers in finding the similar remedy, and will prove an aid and incentive to the study of materia medica and exact prescribing.

I have dedicated the volume to the memory of Dr. Robert Thomas Cooper, who gave me such generous and enthusiastic aid in compiling the *Dictionary*, and whose additions to the materia medica will be found indexed under their clinical uses in the volume itself.

JOHN HENRY CLARKE.

THE NECESSITY OF TEACHING HOMEOPATHY IN THE FACULTIES.*

IN these letters Dr. Flasschœn puts forth unanswerable arguments in enforcement of his claim that homeopathy ought to be taught in the medical faculties. Needless to say the arguments remain unanswered. "Replies" indeed are received—but not replies to the arguments. Two words sum up the answers of the faculties—"Non possumus."

Nevertheless Dr. Flasschœn did well to write, and did better still to publish his letters and the answers they elicited. They make a capital pamphlet, which the British Homeopathic Association might do well to translate and circulate.

* *De la Nécessité d'Enseigner toute de suite L'Homœopathie dans les Facultés de Médecine.* Lettres à M. le Professeur Debove par le Docteur Flasschœn, et Réponses. Paris: J. B. Baillière et Fils, 17, Rue Haute-feuille, 1902.

PREPARATIONS.

FRY'S CHOCOLATES AND COCOAS.

WE have received from Messrs. J. S. Fry and Sons, Limited, of Bristol and London, samples of their well-known preparations, including their Cocoa Extract, Malted Cocoa, Milk Chocolate, and also a number of novel devices in the way of boxes of sweetmeats, chocolate creams, &c., artistically put up in fancy boxes suitable for Christmas presents. Pure chocolates are among the most wholesome of sweetmeats, and we can confidently recommend these excellent preparations of Messrs. Fry.

Messrs. Fry issue an illustrated catalogue and price list of fancy boxes, which is a work of art in itself. We commend it to the notice of those in need of suitable Christmas presents.

"Fry's Milk Chocolate" is an excellent condensed food which should always be carried by those who are on cycling or motor tours, and are uncertain when they may be able to get their next meal. "Fry's Malted Cocoa" is a combination of extract of cocoa with Allen and Hanbury's Extract of Malt. This is especially of value when the digestive powers are weak.

"Cocoa Extract" is particularly suitable where a beverage is required rather than a food. One of the fascinations of tea is its thinness; but cocoa may be made almost as thin as tea, and it is free from the nerve stimulating and therefore nerve-wearing properties of the latter. The manufacturers of cocoa have conferred a great boon on the community by finding substitutes for tea and coffee. Coffee is barred to homeopaths largely, because it antidotes many homeopathic remedies.

THYROID FUNCTIONS AND EPILEPSY.—Crisafulli (*Il Morgagni*, April, 1903) reports the case of a man, aged 20, who began to suffer from epileptic fits and simultaneously enlargement of the thyroid gland. Two years of bromide had no effect. Treatment of the thyroid with electricity and iodine brought about a reduction in size of the thyroid and complete cessation of fits. The positive electrode was wrapped in wool, soaked in iodine, and applied to the gland. Other writers have proved that there is a definite relationship between epilepsy and the thyroid, and this is supported by experiments on animals.—*Brit. Med. Journ.*

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.

A correspondent asks the following:—

“SAPS OF TREES.

“Is there any information available on the medicinal use of the saps of trees, viz., oak, elm, ivy, holly, &c., how best obtained, and at what season of year. Old Herbals do not give any information, nor botany books. Please recommend a book.”

“CHIROPODY.

“Please recommend a practical professional treatise on this subject.”
[We invite replies.—Ed. H. W.]

NOTIFICATION.

. Under this heading we shall be happy to insert notices of appointments, changes of address, &c., and holiday arrangements.

CHANGE OF ADDRESS.

DR. F. S. ARNOLD has left Manchester. His address is the Harley Sanatorium, Ipsden, Wallingford.

DR. C. GRANVILLE HEY has commenced practice at 4, Fopstone Road, Earl's Court, London, S.W. His telephone number is 1491 Western.

DR. ROSS, of The Elms, Vernon Place, Scarborough, asks us to state that he has succeeded to the practice of his former partner, the late Dr. Flint, and that he is seeking for an assistant.

OXYGEN INHALATION FOR VOMITING.—It is stated that in the various forms of persisting vomiting, functional, reflex, and organic, no other means has proved so uniformly effectual as inhalation of oxygen. It is perfectly harmless under all conditions, requires no effort on the part of the patient, and involves no suffering or disagreeable after-effects. Being administered by the lungs, it not only acts independently of vomiting, which may continue for a time, but is peculiarly serviceable in such cases as those of gastric neurosis, irritability, inflammation or ulcer, in which it is undesirable or useless to introduce anything into the stomach, or after laparotomy, when, in addition to this, retching is particularly obnoxious.—*Med. Times.*

GENERAL CORRESPONDENCE.

THE NEW THEORY OF MATTER.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—The enclosed clipping is from the *Sydney Morning Herald*, August 19, 1904.*

At the Sydney University in 1863 Professor John Smith, M.D., asked his class the following question: Why can't we prove that matter has substance? Of course an answer would depend upon accepted definitions of the terms matter and substance: and from the professor's teachings I gathered the following definition: that matter is only a combination of forces or powers (*dynamia*), in equilibrium of which gravity is the *sine qua non* or differentium; that we know matter only by its properties acting by vibrations on one or more of our senses, but we cannot know the existence of such a thing or separate entity as substance (*sub-stans*), or something

* "LONDON, August 18th.

"The British Association for the Advancement of Science commenced its annual session yesterday.

"Mr. A. J. Balfour, the Prime Minister, who is president this year, in the address from the presidential chair, spoke on the new electrical theory of matter, which, he said, constitutes a bold and scientifically more satisfying attempt to unify physical nature than former doctrines.

"Mr. Balfour contended that natural science as it grows leans more and not less upon an idealistic interpretation of the universe. He emphasised the inevitable incoherence of any general scheme of thought built out of material derived from natural science alone.

"Some years ago Professor J. J. Thompson published a remarkable paper on the apparent increase of inertia which would be conferred on a spherical conductor charged with electricity if it moved along with a high velocity. 'An application of these principles in the light of the discoveries on cathode and radium rays by Sir Oliver Lodge and M. Kaufmann has given rise to the question whether all inertia may not be the inertia of electric charges moving with enormous velocity,' says a contributor to the *Annual Register*, 'and thus the mass of a body is an effect arising from the orbital motion of the electrons of which it is composed. This startling suggestion leads to the view that matter is not a separate entity, but is of the nature of electricity, probably a modification of the universal ethereal medium. And if matter is a state or condition of the ether, is matter eternal and indestructible, as formerly asserted?'"

indestructible underlying the component dynamic factors of matter, as we have no organ of sense by which to recognise it. And as all known forces (*dynamia*) are correlated and interconvertible, it follows that all varieties of matter may be resolved into one and the same force as that contained in the sun's ray.

There is, therefore, contrary to what is taught in our text-books, no essential difference to be made between matter and force, and that destructibility of matter—that is, its separability into its component *dynamia*—is therefore one of its most essential properties, but force itself (*dynamis*), though permutable, is eternal.

Professor Smith was dean of the faculty of medicine here, and was a homeopath.

I understand that Hahnemann recognised this dynamic constitution of things, and regarded homeopathy as the application of the laws of dynamics to effect a cure, in contradistinction to the materialism of the allopaths.

Yours, in truth and justice,

WM. GEO. WATSON, M.A., M.B., M.R.C.S., &c.

150, Elizabeth Street, Sydney.

August 19, 1904.

LAC DEFLORATUM AND INTOLERANCE OF MILK.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—In your HOMEOPATHIC WORLD for this month you have a short article on *Lac defloratum*. In that you exactly describe my symptoms on taking milk; all my life I have suffered from acidity of the stomach, and have not been able to take milk in any form. On taking it at once turns sour. I have made inquiries from a homeopathic chemist *re Lac defloratum*, and he cannot give me any information regarding it, or where to get it. I should like to give it a trial, and would feel very grateful to you if you can inform me when or how it can be obtained, and in what strength.

Yours truly,

J. W. CAMPBELL.

22, Park Road South, Birkenhead.

October 14, 1904.

[We sent our correspondent a dose of *Lac defloratum* C. M. (Swan) given to us by Dr. Skinner. We believe this can be supplied by some of the London Homeopathic chemists. Our correspondent informs us that he is 54 years of age.

Another correspondent has written to us to express his thanks to Dr. Lambert for the paragraph in his article to which Mr. Campbell alludes.—ED. H. W.]

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

HOURS OF ATTENDANCE :—Medical (In-patients, 9.30; Out-patients, 2.0), Daily; Surgical, Monday, 2.0; and Saturdays, 9 a.m.; Thursdays, 10.0 a.m.; Diseases of Women, Tuesdays, Wednesdays, and Fridays, 2.0; Diseases of Skin, Thursdays, 2.0; Diseases of the Eye, Mondays and Thursdays, 2.0; Diseases of the Throat and Ear, Wednesdays, 2.0; and Saturdays, 9 a.m.; Diseases of Children, Mondays and Thursdays, 9.0 a.m.; Operations, Tuesdays, 2.30; Diseases of the Nervous System, Thursdays, 2 p.m.; Electrical Cases, Wednesdays, 9.0 a.m.

MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Appleton's Medical Dictionary.** Edit. by F. P. Foster. Imp. 8vo. (S. Appleton. Net, 42s.)
- Clarke (John H.).** A Clinical Repertory to the Dictionary of Homeopathic Materia Medica. Super royal, 8vo, pp. 360. (Homeopathic Publishing Co. Cloth, 21s. net; ¼ bd. 25s. net.)
- Calendar of the School of Medicine of the Royal Colleges, Edinburgh.** Session 1904-1906. Cr. 8vo, pp. 142. (Darien Press, Edinburgh.)
- Coles (Alfred C.).** Clinical Diagnostic Bacteriology. Including Serum Diagnosis and Cytodiagnosis. Coloured Plates. 8vo, pp. 246. (Churchill. Net, 8s.)
- Dench (E. B.).** Diseases of the Ear. 3rd ed. 8vo. (S. Appleton. Net, 21s.)
- Edge (J. S.).** A Guide to Medical Officers on Field Service. More especially Civilian Medical Officers and Junior Officers of the Royal Medical Army Corps. Cr. 8vo, sd. (Gale and Polden. Net, 1s.)
- Fraser (Sir T. R.) and Elliot (Major R. H.).** Contributions to the Study of the Action of Sea Snake Venoms. Pt. 1. Venoms of *Enhydryna valakaden* and *Enhydryn curtus*. 4to. (Dulau. 2s.)
- Harrison (Reginald).** The Ambulance in Civil Life, and the Proceedings of the Metropolitan Street Ambulance Association. 6th and enlarged ed. Cr. 8vo. (Bale.)
- Johnson (Alfred E.).** The Analyst's Laboratory Companion. 3rd ed., much enlarged and rearranged. Cr. 8vo, pp. 160. Churchill. Net, 6s. 6d.)
- Laumonier (Dr.).** New Methods of Treatment. Translated and edited from the 2nd revised and enlarged French ed. by H. W. Syers. Cr. 8vo, pp. 340. (Constable. Net, 7s. 6d.)
- McFarland (Joseph.)** A Text-Book of Pathology. For Practitioners and Students. Illust. Roy. 8vo. pp. 818. (Saunders. Net, 21s.)
- Moullin (C. M.).** Enlargement of the Prostate, its Treatment, &c. 3rd ed. 8vo. (H. K. Lewis. 6s.)
- Pusey (William Allen) and Caldwell (Eugene Wilson.)** The Practical Application of the Röntgen Rays in Therapeutics and Diagnosis. 2nd ed., revised and enlarged. Roy. 8vo, pp. 690. (Saunders. Net, 21s.)
- Treves (Sir Frederick.)** The Student's Handbook of Surgical Operations. New edition, revised by the Author and Jonathan Hutchinson, jun. Illust. Cr. 8vo, pp. 498. (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, 8, *Bolton Street, Piccadilly, W.*

Letters to the Editor requiring personal reply should be accompanied by stamped directed envelope.

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.

Dr. Dyce-Brown, London.—Dr. Tyler, London.—Mr. Ivatts, Birmingham.—Dr. Burford, London.—Dr. A. A. Beale, London.—Dr. Haehl, Stuttgart.—Mr. Fredk. King, London.—Dr. Searson, London.

BOOKS AND JOURNALS RECEIVED.

Hom. Review.—Zoophilist.—Mind.—Revist. Hom.—Med. Times.—Allg. Hom. Zeit.—H. Monatsblätter.—The Chironian.—La Propaganda Homeopatica.—Maanedsk. f. H.—H. Maandblad.—La Homeopatia.—Ind. Homeopathic Review.—Hom. Envoy.—The Individualist.—Medical Century.—Rev. Hom. Française.—H. Recorder.—Wjestnik H. Med.—N.A.J. of H.—Clinique.—New Eng. Med. Gaz.—L'Art Médical.—Amer. Medical Monthly.—University

Homeopathic Observer.—H. J. Obst.—Med. Adv.—Annaes de Med. Hom.—Amer. Phys.—Hom. Eye, Ear, and Throat J.—Hahne-mannian Mon.—Pacif. Coast Jour. of H.—Calcutta Journal of Medicine.—Bromley and District Times.—Hering's Homöopatischer Hausarzt, 19th edition. By Dr. Richard Haehl.

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—Old Prescriptions—Morphine—The First of the Alkaloids—The Grass Cure—Bequest to the Sussex County Homeopathic Infirmary—"The Balance of Orthodox Medical Practice."

ORIGINAL COMMUNICATIONS.

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Materis Medica Miscellany. By J. R. P. Lambert, M.D.
Australian Bluebell (*Wahlenbergia gracilis*) in a Case of Deafness. By Erskine C. White.
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THE
HOMEOPATHIC WORLD.

DECEMBER 1, 1904.

THE BURNETT FUND.

OUR readers may have thought that the receiving of funds for the Compton Burnett Memorial had fallen into abeyance, but that is very far from being the case. The Hon. Secretary announces the receipt of £19 during the last month. We beg to remind our readers that we are open to receive Christmas-boxes of any amount—however large or small—to this object on which we have set our hearts. Our twentieth editorial birthday occurs on May 1, 1905, and our coming of age is on May 1, 1906. By the latter date from the present time some £1,400 has to be received in order to enable us to hand over to the British Homeopathic Association a sum which will enable the Association to administer the trust and carry on the work.

How important that work is becomes more and more evident every day. The silence of the medical journals and medical schools on the subject of homeopathy—except by way of abuse—and the displays of ignorance on the part of medical writers in the public press call loudly for strong and united action on the part of homeopaths. The most effective action which can be taken is the founding of a teaching college on a sound financial basis.

This is the primary work of the Association, and every individual homeopath can contribute something to its

power and efficiency. The annual meeting of the Association, under the presidency of Earl CAWDOR—that staunch and tried friend of our cause—will take place at the Queen's Hall, Regent Street, W., on December 2nd, at 3.30 p.m. All friends of homeopathy will be warmly welcomed. On the evening of the same day a Festival Dinner will be held at the Whitehall Rooms, Hotel Metropole, S.W., which promises to be a great success. Mr. F. KING, 233A, Regent Street, W., will be pleased to give information to any one who may apply to him.

"ORTHODOXY" IN MEDICINE.

IN the course of the correspondence in the *Pall Mall Gazette*, part of which we give elsewhere, was a letter from an astronomer, Mr. J. F. TENNANT, saying that astronomers were much less narrow than doctors, and did not think of boycotting from astronomical societies members who held to the Ptolemaic cosmogony. But Mr. TENNANT went on to add a comment on the relations between homeopaths and allopaths which needs a little correction. He said that "the accusation against orthodox medicos" is their "refusal to consort with homeopaths;" and he made the further remark that he could see no use in it. Now this is a wrong way of putting the case. Homeopaths do not seek association with allopaths—they find it much more profitable to have societies of their own; but, in loyalty to the science of which they are the custodians, they are bound to contest the right of the allopathic sect to assume the possession of a quasi-ecclesiastical infallibility, on which their refusal of professional courtesies is based.

"Regular" and "Orthodox" medicine has been wittily described as being "orthodox without a *doxy*," and "regular without a *rule*." So-called orthodox medicine consists of an agglomeration of such unsystematised bits of practice—homeopathic bits among them

—as have succeeded in becoming fashionable for the time being. The "*credo*" of the allopath changes day by day, but whatever it may be, the ban of excommunication goes out against all who do not accept it.

Now in medicine "belief" has no rightful place at all; it is a question of "I know" or "I do not know." As is often the case, the "knowers" in medicine are in the minority, and the majority adopt the unscientific methods of ecclesiasticism in dealing with them. No doubt they are wise in their generation in so acting; the instinct of self-preservation affects societies and faculties no less than individuals.

Homeopathy has no "doxy"; it has no "*credo*." Homeopathy is a Science, consisting of an ordered body of facts, which provide it with a Rule of practice. It is therefore the real and only "regular" system of medicine. *Homeopathy asks for no man's "belief"*; it only asks him to learn and test it—but to test it honestly and fairly. This entails considerable trouble and the use of brains; it offers no attractions to the would-be penny-in-the-slot practitioner.

The very existence of such a thing as "orthodoxy" in science is an absurdity and an anachronism. It comes down to us from the Middle Ages when the Church exercised dominion over all the sciences. Until a scientific society, or a scientist, has shaken off the trammels of ecclesiasticism, progress is next to impossible. One step towards getting rid of mental fetters is the getting rid of the terms which symbolise them. The retention of ecclesiastical terms like "orthodoxy," "creeds," and the rest in matters of science, is a very real bar to progress, and they should be dropped forthwith.

Homeopathy is not a matter of opinion or belief—it is a Science to be known and an Art to be practised. Want of knowledge can in nowise be compensated by belief, however strong. Belief in wrong methods will never make them cure patients, no matter how many millions of people there may be who accept them as "orthodox."

NEWS AND NOTES.

A HOMEOPATHIC LORD MAYOR.

ALL over the homeopathic world the name of Martin and Pleasance, of Collins Street, Melbourne, is known as one of the leading firms of homeopathic chemists in the British Colonies. The sole proprietor of the firm is now Mr. Charles Pleasance; and Mr. Charles Pleasance, who has been Councillor Charles Pleasance since 1899, has just been elected Lord Mayor of Melbourne. We sincerely congratulate the new Lord Mayor and the homeopathic community of Australia on the selection. *Table Talk* publishes an excellent full-page portrait of Mr. Pleasance. Cricketers will be interested to learn that he was on the Committee of the Melbourne Cricket Club for fifteen years, from 1876, and he has been Vice-President of the Cricketers' Association.

LORD KELVIN'S ADDRESS.

AMONG the October addresses to students that of Lord Kelvin appears to have been one of the most interesting. We take the following short account of it from the *St. James's Gazette* of October 29th:—

“ Lord Kelvin, speaking to the students of the St. George's Hospital Medical School yesterday, referred to the phenomena of life. The modern medical man, he said, must be a scientific man, but what was more, he must be a philosopher. To the list of subjects which they had to study for their profession, there should be added the subject of human nature. Whether they desired it or did not desire it, they were forced to deal with human nature from the beginning to the end of their medical course. That went far beyond all matter, far beyond crystallography. Let them not imagine that any hocus-pocus electricity, any viscous fluids could make a living cell. There was no prospect of any process performed by human influence making a living thing; nothing approaching the cell of a living creature had ever yet been made. The phenomena of life, and, sad to say, the phenomena of death, and the difference between life and death were subjects which they would meet every day in their practice. Those who were now going out to practise were going out to deal with living men and women and children, and they must never think of their patients as mere laboratory specimens, but as human beings.”

This is excellent. Medical students have, as a rule, plenty of human nature in themselves to study; but it would seem that they seldom make that their starting-point. It is sad to think how few are the philosophers whom the colleges turn out on the world!

“ IS PHYSIC A FAILURE ? ”—EXTINGUISHING DANGER SIGNALS.

UNDER the above heading the *Daily Graphic* of Tuesday, November 1st, published an interesting leading article dealing with Lord Kelvin's address. The article concluded with this very weighty and pregnant passage :—

“ Where modern pharmacy works its wonders is in the treatment of symptoms, and herein is its danger for an impatient and unthinking public. *Who can tell how much of the nervous and physical breakdown of modern life may not be due to the abundant means which the chemist has provided for extinguishing the danger signals of nature ?* ”

ON November 4th appeared the following :—

“ IS PHYSIC A FAILURE ? ”

“ A HOMEOPATHIC ANSWER.

“ *To the Editor of the Daily Graphic.*

“ SIR,—In your interesting leader on the above-named topic you do public service in calling attention to the dangers of palliative medicine. You rightly say that the triumphs of modern physic lie in the direction of removing symptoms, which should be of the greatest service to the physician in guiding him in the conduct of a case.

“ The reason why surgery has usurped the place of medicine so largely is that surgery is a mechanical art which has been developed to a very high degree of perfection, whilst medicine is an art of a much more complex kind.

“ But there is a science of medicine which is able to make practical use of symptoms, without obscuring them, in the cure of patients—the science which deals with disease- and drug-correspondences. Hahnemann discovered that Cinchona bark not only cured ague, but also caused its like when given to the healthy. Modern light-therapeutists have found that X-rays cure or relieve cases of cancer, and also that X-rays cause malignant ulcerations, and even cancer itself. Medicine will one day regain its lost precedence over surgery, but this will not take place until the fullest advantage is taken of the discovery of Hahnemann.

“ Yours faithfully,

“ JOHN H. CLARKE, M.D.

“ 8, Bolton Street, W., November 1st.”

Allopathy gave no answer to the *Graphic's* query—perhaps because it had no answer to give.

BLOOD AND IRON—A SANGUINARY RING.

THE following is from the *Globe* of November 17th :—

“IRON IN THE BLOOD.

“ ‘Iron in the blood’ expresses, no doubt, a chemical fact as well as a figure of speech, but probably not one in a thousand, even among chemists, ever saw ferrum sanguinis materialised to visible metal. This feat, however, has been performed by M. Barruel, head of the chemical laboratories of Paris. M. Barruel, who has, in his time, practised much phlebotomy on the human subject, has systematically extracted chemically the ferrum from the other constituents. This he transformed into minute globules or ‘pearls’ of iron. At last the idea occurred to him to have them all welded together, and the result is an iron ring made from human blood, which he wears on his finger.”

PHOTOGRAPHING THE RETINA.

FROM the same issue of the *Globe* we take the following interesting paragraph :—

“OPTICAL INVENTION.

“A highly important invention affecting optical science in general, and the further development of the eye specialists’ profession in treating eye diseases and faulty visions in particular, was recently made in Berlin. The assistant of the University Clinic of the Royal Charity Hospital has managed to photograph the background of the eye, and obtain good pictures of it, too. His invention represents a material improvement on the ophthalmoscope invented by Helmholtz in 1850.”

FATAL HICCOUGH.

It is not generally known that hiccough may be a fatal disease. The following is taken from the *Daily Telegraph* of October 21st. The affection appears to be more common in America than in this country :—

“After hiccoughing constantly for five days and nights, the Rev. Galen Spencer, a Methodist, has died at Greenwich, Connecticut. Within recent years several deaths in this country have been due to perpetual hiccoughing.”

THE BURNETT MEMORIAL.

THE Hon. Secretary of the Burnett Fund wishes to acknowledge the receipt of £5 from Mrs. W. Jardine and £14 from Mr. Chas. Stewart during the past month.

SLEEPING SICKNESS—PROLONGED INCUBATION.

A REPORT on Sleeping Sickness was published in the *Daily Telegraph* of November 12th. The report is interesting, and especially so in the evidence it brings forward as to the length of time the parasite may be in the blood without setting up symptoms of the disease:—

“ From our observations and from information which we have collected, it is very apparent that sleeping sickness has spread in the Congo in recent years, along the lines of communication, *i.e.*, along the rivers. The spread of the disease has been much assisted by the practice of taking large bodies of natives, soldiers and labourers, from one part of the Free State to another.

“ It is only a few months since the transportation of cases of sleeping sickness on State steamers has been forbidden. Previously, affected individuals had been allowed to return to die in their, perhaps, uninfected villages. Declared cases of sleeping sickness are easily recognised, *but, as we showed in the Gambia, Trypanosoma Gambiense may be present in the blood for months, even years, and the patient remain in apparently perfect health.* The importance of the early recognition of such cases is obvious, and it has long been one of our chief aims to devise some easy and fairly accurate method of detecting the presence of trypanosomes. We believe that in ‘cervical gland palpation’ we have now an excellent clinical method of detecting an infected person.

“ The tsetse fly was incessantly present from Stanley Pool to Basoko. After Basoko was passed there were very few flies, and just after leaving the mouth of the Lomami river the last one was seen on the steamer. Although the natives of the towns at which we stopped above Basoko recognised the fly, none were found in the neighbouring bush. There is certainly a marked reduction in the number of tsetse flies above Basoko, and it is possible that there may be stretches of river where none occur. It is an interesting coincidence that where there were many tsetses there was much sleeping sickness. Where these flies were scanty, cases were rarely seen.”—*Reuter.*

THE INTERNATIONAL CONGRESS AND DR. HUGHES' SUCCESSOR.

WE understand that exception has been taken in some quarters to our remarks on the above topic last month.

The grounds on which our remarks were made are to be found in the *Monthly Homeopathic Review* of September last. In order to be perfectly fair to all concerned, we quote the article entire in another part of this issue. The article says that Dr. Sutherland proposed that, in view of Dr. Hughes' lamented death, British homeopaths should take steps to co-operate with the American Committee. This is perfectly in order. But the report goes on to say:—

“All present unanimously agreed that this should be done, and Mr. Knox-Shaw was also unanimously appointed the Secretary for Great Britain and the European Continent.”

This, we contend, is tantamount to electing a successor to the late Dr. Hughes. If this election by dinner-party is accepted by the next Convention as an official appointment, with the solid backing of the homeopaths of Great Britain and Europe behind it, the Convention is not likely to rescind the choice. It is for this reason that we felt it incumbent on us to point out that it does not possess this backing. Mr. Knox Shaw is a purely consulting surgeon, and therefore has little direct association with homeopathic work; he will not allow his name to appear in the *International Homeopathic Directory*; and he has said publicly, and has not retracted the saying, that “the Hahnemann standpoint has changed.” We have no personal feelings in the matter whatever, but we must point out to our American friends that the enthusiasm of European homeopathy is not likely to flow very strongly through any channel of the robustness of whose homeopathy there is any doubt. If the dinner-party has been wrongly reported—and in our opinion a private dinner-party should not be reported at all—we shall be very happy to hear that this is the case. Our contemporary, the *Review*, will in that case owe an explanation to Mr. Shaw; on the other hand, if this is so, Mr. Shaw has had two months already in which he might have repudiated the report, and he has not yet done so. The writer of the *Review's* report says that the dinner-party represented “The British Congress, the British Homeopathic Society, and the Homeopathic journals.” This is only correct in the sense that the Tooley-street tailors were correct in describing themselves as “We, the people of England.”

ORIGINAL COMMUNICATIONS.

THE LATE DR. DUDGEON AND HOMEOPATHIC
POLICY.

By DR. CLARKE.

IN the ranks of homeopathy there has been a dividing line almost from the first. There has been one party whose aim has been to develop homeopathy on purely professional lines, observing with strict punctiliousness the unwritten rules of professional life with the object of winning the majority of the profession to take a favourable view of Hahnemann's system and adopt his reformed practice. On the other hand there has been a party which has recognised the absolute incompatibility between the ideas of the dominant section and the ideas of Hahnemann; and which has felt that the treatment meted out to Hahnemann at the hands of the profession of his day differs in no respect from the treatment accorded to his followers whenever the power has existed to put it in force. This section of British homeopaths has from the first taken the line that if homeopathy is to make headway it can only be by a large measure of public support; that it is to the public more than to the profession that homeopathy must look for its motive power; and that it must be made interesting to the public if any progress is to be made. This section has concluded that as homeopathic doctors are excluded from the civilities and advantages of ordinary professional life, homeopaths owe no allegiance to the rules of etiquette framed by the majority to their own advantage and to the disadvantage of homeopathy.

The first-named section of the homeopathic body has been mainly represented in this country by Drs. Quin, Drysdale, Hamilton, Cameron, Black, Ker, Hughes (to a certain extent), and, at one part of his career, by Dr. Dudgeon. The founders of the British Homeopathic Society were almost all of this section, and the traditions of the Society have been preponderantly of this complexion ever since.

Of the other section, such names as Curie, John Epps, Laurie, David Wilson, Ruddock, Bayes and Burnett may be mentioned, together with the names of the great lay

homeopaths, William Leaf, Peter Stuart, and Marmaduke Sampson of the *Times*.

In describing these two classes I do not wish it to be understood that there was any sharp division between the two: many homeopaths have belonged at different times to both, and many do not know to which they belong. But every now and again incidents crop up which show that there are two separate currents—like the waters of the Soane and the Rhone—in the homeopathic stream.

In Dr. Dudgeon's earlier homeopathic life in London he was associated with the popular class. He was connected with the Hahnemann Medical Society (London held two Homeopathic Societies in those days), and had a considerable share in founding the Hahnemann Hospital and School of Homeopathy in Bloomsbury Square, when he had Dr. Curie and John Epps among his colleagues. It was there that his classic Lectures were delivered.

When Dr. Curie died, in 1853, the committee of the Hahnemann Hospital, which was mainly composed of Curie's personal friends, decided to close it, leaving, in Dr. Dudgeon's words, "the British Homeopathic Society and the London Homeopathic Hospital masters of the field." These two institutions having "gradually eliminated from their laws most of what the dissentients objected to," Dr. Dudgeon and others transferred their allegiance to them.

But Dr. Dudgeon was not continuously a member of the British Homeopathic Society even after that. For a number of years he had "a difference" with it, and was out in the wilderness. On his return he was welcomed as a member without re-election. In 1852 Dr. Dudgeon did the memorable piece of work which secured liberty of conscience for medical students by the insertion of Clause XXIII. into the Medical Act. It is possible after this achievement he considered the battle won for the homeopaths, and that there was no further need for popular agitation. Be that as it may, for about thirty years, from 1854 to 1884 when the *British Journal of Homeopathy* closed its career, Dudgeon's work was entirely on professional lines. He was one of the "Scotch Quadrilateral"—Drysdale, Dudgeon, Black, and Ker—who offered strenuous opposition to some of the details of Dr. Bayes' "London School of Homeopathy" scheme. This in no way

impaired the friendship between Dr. Dudgeon and Bayes, and Dudgeon accepted the post of Hahnemann Orator in connection with the School for the year 1882. The title of his Oration was "Hahnemann: The Founder of Scientific Therapeutics." This Dr. Dudgeon dedicated to the memory of Dr. Bayes, who had died before it was published.

DR. DUDGEON TAKES THE POPULAR SIDE.

It was in the year 1885 that Dr. Dudgeon definitely took the popular side in homeopathic politics. In the December number of the HOMEOPATHIC WORLD is an unsigned editorial article, written by Dr. Dudgeon, entitled "A New Propaganda." This announced the fact that it had been decided to form a new association for advancing homeopathic interests, and gave an interesting account of its predecessor, the English Homeopathic Association, which resulted in the founding of the London Homeopathic Hospital. This article concludes as follows: "The instinct which impels us to spread the truth of homeopathy abroad in new fields is a wise and a true instinct; the promulgation of its central doctrine is fraught with untold advantage to the human race, and therefore *forces the duty back upon us as a thing which our hands have found to do*, and which, within the limit of sagacious guidance, should be done with all our might."

Just about this time three incidents had occurred which perhaps helped to emphasise Dr. Dudgeon's decision. These he set forth at length in his masterly article entitled "Medical Boycotting," which appeared in the HOMEOPATHIC WORLD of January, 1886.

The *Lancet* of November 28, 1885, had published an address by Dr. Samuel Wilks, in which he had attacked homeopathy and made some unusually ignorant remarks about it. These remarks the *Lancet* in a leading article alluded to as "one of the most important points" of the address. Dr. Dudgeon wrote to the *Lancet*, and the *Lancet* refused to insert the letter. This is incident No. 1.

About the same time the translation of Ameke's *History of Homeopathy*, which Dr. Dudgeon edited, was published. An advertisement of this was sent to the *Practitioner*, which up to that time had inserted advertisements of homeopathic works. This was refused; and a most entertaining three-cornered correspondence resulted be-

tween Dr. Dudgeon on the one side and Messrs. Macmillan and Co. (publishers of the *Practitioner*) and Dr. Lauder Brunton (one of the editors) on the other. Dr. Brunton and Messrs. Macmillan were each anxious to shift the odium of the refusal onto each other's shoulders, with the result that under Dr. Dudgeon's skilful thrusts they were both left without a leg to stand upon except the legs of bigotry and intolerance.

The third incident was the refusal of a skin-specialist to meet Dr. Dudgeon in consultation, coupled with an impudent offer to see the patient alone. We do not envy the feelings of this specialist when he received Dr. Dudgeon's reply. It is to be found in *Medical Boycotting*, the perusal of which we commend to any who have not read it. It is as full of pith and interest to-day as it was when it first appeared.

Thanks mainly to the efforts and initiative of Dr. Dudgeon the Homeopathic League, with its motto "For Truth and Justice," was started on its career. During the ten years of its existence it issued 54 tracts, which contain an unrivalled body of argument and an inexhaustible fund of ammunition to which defenders of the cause, lay or medical, may come for all time. The great majority of these tracts were written by Dr. Dudgeon himself; but one of the rules of the League in regard to the issuing of tracts was that they should be issued anonymously. They remain one of homeopathy's classics, and the measure of their value is the extent of Dr. Dudgeon's work in their authorship.

I may fitly conclude this sketch of Dr. Dudgeon's Appeal to the People by quoting from a summary of his paper "En Avant," contributed to the International Homeopathic Congress held at Bâle in 1886. The italics are mine. Dr. Dudgeon asks:—

"What can we do to promote the general adoption of homeopathy? At its first introduction homeopathy spread rapidly among the intelligent classes, *because it was zealously propagated among the public by popular literature, lectures, and meetings*, and because it offered a mild system of medication which contrasted strongly with the violent and often painful methods of the old school. But gradually the old school abandoned these rough methods, gave up bleeding and the painful and perturbing methods they had hitherto used, and homeopaths, seeing this, trusted that the old school would

go a step further and adopt homeopathy. Therefore *they left off appealing to the public and addressed themselves to the profession only. The public, no longer directly appealed to, ceased to interest themselves in the new system, and the profession, no longer influenced by the patient world, ceased to furnish new converts to homeopathy, but took from homeopathy its medicines and methods, while they continued to misrepresent and deride the doctrine from which they derived their remedies. Homeopaths found that all their appeals to the old school remained unheeded. In order to influence the profession, we must do as the earlier pioneers of homeopathy did, and resume the propaganda of our system among the public, who will in their turn force the old school to adopt the doctrine as well as the remedies of homeopathy, which they now only use empirically. The profession, on the whole, will gain by adopting homeopathy, as patients will then regain the confidence in medicine which they have in great measure lost, in consequence of the acknowledged uncertainty of treatment and the open boast of medical men that they are guided by no therapeutic principle. When the profession is agreed on the adoption of the only true and rational homeopathic rule, and the public know this, they will cease to dread the haphazard treatment of a doctor, and will lose their love for quack medicines, whose use will thus appear to them irrational."*

"MEDICAL ETHICS."

Pari passu with Dr. Dudgeon's part in popularising homeopathy, his action in reference to the rules of etiquette in medicine, made by allopaths for allopaths (and such homeopaths as are docile enough to accept them as binding), and dignified with the name of "medical ethics," is well deserving of study.

In September, 1893, the late Mr. Ernest Hart, then editor of the *British Medical Journal*, journeyed to Washington to attend the Pan-American Medical Congress held in that city in that year. What right Mr. Hart had to be there, as he was not an American at all, was never divulged, but his paper was accepted and read. The ostensible object of the paper was to expound "Medical Ethics" to American doctors; and its practical object was to urge on American allopaths the bounden duty of boycotting homeopaths—that being one of the main objects of "Medical Ethics." The paper was not at all well received, and Mr. Hart was condemned even by

allopathic medical journals as well as the public press of America.

It was on this escapade that Dr. Dudgeon wrote his brilliant and trenchant article, "Turveydrop in America," which appears as an editorial in the HOMEOPATHIC WORLD of December, 1893. This article is full of racy and condensed argument; it is, indeed, a very compendium of facts for reference which any controversialist would do well to keep at hand. I will quote one passage, which explains the title:—

"How our homeopathic colleagues must have laughed to read the archaic abuse of the fussy British editor! It is not likely that he will be again invited to address the Pan-American Congress. They could hardly have anticipated that the editor of a great medical periodical would treat them to a vulgar tirade against homeopathy and its practitioners. But then our American colleagues do not know Mr. Ernest Hart as well as we do. As his prototype, the illustrious Turveydrop, undertook to teach 'deportment,' for which his only qualification seems to have been his admiration for the dress and attitude of 'The First Gentleman in Europe,' his late Majesty King George IV., so Mr. Ernest Hart's speciality is what he calls 'Medical Etiquette,' for which his only qualification is his venomous hatred of homeopathy and its practitioners."

It may easily be imagined that when a party in the homeopathic body, out of deference to the ethics of this very medical Turveydrop, attempted to destroy the *International Homeopathic Directory*, in this same year, Dr. Dudgeon was one of those who most strongly condemned the manoeuvre. Equally a matter of course is it that Dr. Dudgeon was one of the strongest supporters of the revived *Directory* and that he remained so to the day of his death. In this respect Dr. Dudgeon's example has been of widespread influence throughout the homeopathic body. The *Directory*-dissentients, who were numerically strong enough to compel Messrs. Keene and Ashwell to discontinue its publication in 1893, have now dwindled to a small and practically inappreciable number. Dr. Dudgeon's policy in this matter has undoubtedly won the day.

THE BRITISH HOMEOPATHIC ASSOCIATION.

The latest movement in favour of advancing homeo-

pathy promises to be the most potent and most successful of any that have been launched hitherto. I allude, of course, to the British Homeopathic Association. This movement, which is entirely in harmony with, and, in a sense, an outcome of the Homeopathic League, was warmly welcomed by Dr. Dudgeon. In the February number of the HOMEOPATHIC WORLD of 1902 Dr. Dudgeon contributed an article under his own name entitled "The Twentieth Century Fund." This was in the early stage of the movement, as outlined by Dr. Burford in his presidential address. In this article Dr. Dudgeon warmly commended the project. "He was," he said, "as zealous as ever for the promotion of the interests of homeopathy and the spread of its beneficial practice among those who require the aid of the physician"; and though he could not hope to take an active part in a twentieth century work—he felt he had only wandered, "as it were, accidentally" from the nineteenth, to which he really belonged—he could and did give it his cordial blessing.

This must conclude my brief sketch of Dr. Dudgeon's work and place in homeopathic policy. I think it will be recognised that it is a work and a place of enormous importance in the history of British homeopathy.

MATERIA MEDICA MISCELLANY.

By J. R. P. LAMBERT, M.D.

A Chronic Belladonna Case.—Dr. J. C. White, of Port Chester, New York, reports the following case in the *Medical Advance*:—

W. B., retired sea captain, heavy-weight, aged 50, nervous sanguine temperament, complained of pain in left shoulder, extending down arm to palm of hand, < by exposure to draughts, low temperature, and lying down, especially at night.

Burning sensation in palm of hand; skin of the hand and palm frequently exfoliated.

Thirteen years previous, after severe exposure, he had suffered severe pain in left shoulder and arm, < by motion, jar, and by recumbent position; had not been able to lie down for a period of two months; even hypodermics of

morphine and the application of anodyne liniments did not ease him so that he could lie down with any sense of comfort.

Ever since this acute attack he has suffered the burning sensation in the palm of the hand, and any exposure would renew with the pain in the shoulder and arm. I said to him, that any able homeopathic physician would have cured him in three days!

I gave him six powders of *Belladonna* 50m, with directions to take one each evening until relieved; then wait until again required, and at some future time to tell me how many powders he found it necessary to take. Several weeks after this visit he had required but two powders. The pain, discomfort, and burning had entirely disappeared.

Phosphorus in Pneumonia.—Dr. C. E. Sayre, formerly a veterinary surgeon, records a bad case of pneumonia in a valuable horse, which was gradually getting worse in spite of his best allopathic efforts, till one day he received an urgent message saying the horse was down and dying. The owner said if there were a homeopathic veterinarian in the city he could save him. Dr. Sayre replied that he was studying homeopathy, but did not know enough yet to prescribe, but thought he could get Dr. H. C. Allen to see the case. He accordingly went to his office and gave him the symptoms: bloody discharge from nose, great prostration, rapid breathing, and the anus open and protruding. Dr. Allen gave him *Phosph.* 1m, a single dose to be given dry on the tongue, and said he would call round in a few minutes, and a second dose of the cm potency for the evening. The result of the first dose was that in twenty minutes the horse got up and began to eat. When Dr. Allen called he said, "Let him alone and he will get well." He consequently gave placebo and the other dose in the evening, and the horse very promptly got well.—*Medical Advance.*

Echinacea in Blood Poisoning.—Dr. A. C. Hermauer, in commenting upon the value of this remedy in blood poisoning, cites the following case:—

Mr. M., aged 50 years, scratched his leg just above the knee with a rusty nail while packing some furniture. This was followed next day with swelling, burning, lancinating pains through wound, nausea, vomiting, and offensive diarrhea, frontal headache, rise of temperature,

purplish areola around wound, general prostration, marked thirst. *Arsenicum* was given in different potencies without results. This was followed by *Lachesis* without improvement. The wound began sloughing badly, pains so severe patient could not rest day or night. A marked symptom in this case was sensitiveness to touch of the affected part, he being unable to bear the least pressure. *Echinacea* ϕ 20 drops in half a glass of water, a tea-spoonful every hour, was given, and a dressing of the same applied externally; the result being immediate improvement, and complete recovery in two weeks.

The special sphere of action of this drug seems to be upon the fluids of the body. It might be termed an internal antiseptic. We have records of it as greatly relieving the pains of carcinoma, and in malignant carbuncles its action has been quick and curative; also in septic diarrhea, and septic peritonitis from retained placenta, we have clinical evidence of its great efficacy.—*American Phys.*

A Pulsatilla Case.—Mr. McM., aged 50, small, compact, energetic, light complexion, has had hemorrhoids for several years, with only partial relief from all kinds of treatment.

For three or four months symptoms are :

Backache : small of back, before stool.

Back \leftarrow on beginning to move, but \rightarrow by continued motion.

Bright red blood with stool, from one to two pints every morning; prostrates, weakens.

Mental exertion or excitement \leftarrow .

Despondent : fears he will not recover.

Fulness after eating : flatulence.

Thirstless : \rightarrow outdoors, wants to live in open air.

Pulsatilla, 1m gave prompt and permanent relief.—Dr. H. C. Allen in *Medical Advance*.

MATERIA MEDICA RHYMES.

By MARGARET L. TYLER, M.D.

XXII.—EUPATORIUM PERFOLIATUM.

Eupatorium per. will shine
 In a morning chill, from seven to nine :
 Aching intense—deep—bone's the seat :
 And he vomits bile 'twixt the chill and heat.
 A feeling of bones all broken, you get
 [Here his action has earned him the name "*Bone-*
set"]:

Hoarseness, again, with soreness of chest,—
 With soreness all over, the patient is blessed :
 Influenza, Malarial and liverish states—
 Good for worn-out old persons—inebriates.

XXIII.—IODIUM.

Ravenous *Iodine* howls for her dinner ;
 Eats a lot, and eats often, and only grows thinner ;
 Her voluminous meals she is always repeating,
 Because *all her pains are improved by eating.*
 Her glands and her thyroid enlarged appear ;
 There's corrosive, destructive-to-clothes *Leuchor-*
rhea.

XXIV.—ANACARDIUM ORIENTALE.

Anacardium—"Marking Nut"—
 Plug everywhere, "from eyes to gut."
Anacardium—here's your guide,—
Plug within, tight band outside.
 Inside, too, two wills oppose,
 Which to obey, he hardly knows.
 Patient wants to curse and swear?—
 Quick with *Anacardium* there !
 But, if patient wants to pray,
 Give *Stramonium* right away.

Anacardium vies with *Nux*,
 In dyspepsias : here's the crux ;—
 Pain *till food's digested* (see ?)
 Spells *Tinct. Nucis Vomica* :
 Pain *when stomach's empty*, tut !—
 Cure him with the Marking Nut.

Marking Nut will useful be
To improve lost memory.

XXV.—RHEUM.

The *Rheum* baby is sour to the smell,
And is sour in his temper and stools as well.

Like *Calc.*, *Hepar*, *Mag. C.*,
In his sourness he'll be.

His fits of night-screaming, Calcarea-like, scare,
And, awake or asleep, he has sopping-wet hair.
Then, shivering with stool, should *Rheum* suggest,
And bad taste in the mouth at the end of night-
rest.

Like *Mag. carbonate*, *Rheum* most useful appears
For babies with colicky diarrheas.

CASES I HAVE COME ACROSS.

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

LXXI.—*POPULUS TREMULOIDES* IN PAINFUL URINATION.

A man (aged 38) complained of a painful urination, which had troubled him for some considerable time. There was great heat and scalding of the urine, and a large amount of irritation of the bladder and urethra. Knowing, by past experience, of the good results to be derived from the administration of *Populus tremuloides* in similar cases, I put him upon the following:—

R. *Trit. Populus tremuloides* 1x, gr. xxiv.
Divide into 12 powders of 2 grs. each.

A powder to be taken every three hours.

The above, I may state, was prepared from the pulverised bark with *sugar of milk*, and not from the tincture. The patient got prompt relief, and, persevering with the medicine, was perfectly cured in ten days. *Populus tremuloides* is one of the most valuable remedies we possess in our *materia medica* for painful urination, attended with heat and scalding. Especially has it been found useful when these symptoms occur in women during pregnancy. It is also a remedy *par excellence* in

catarrh of the bladder, ardor urinæ, and chronic enlargement of the prostate. It is very prompt in its action—a property that renders it of still greater value than it would otherwise be, and its effects, moreover, are of a permanent character.

LXXII.—*DIGITALIS PURPUREA* in PALPITATION OF THE HEART.

In this case, that of a young man (aged about 24), there was great irregularity of the action of the heart, accompanied with great distress and inability either to lie down or walk. There did not appear to be any assignable cause to induce these symptoms, and the heart was in no way organically diseased. I requested him to take a tablespoonful of the following every three hours:—

R. *Tinct. Digitalis purpurea* ϕ mxlvijj.
Ad Aqua dest. z viii m .

Relief was obtained after the second dose, and the patient was free from the unpleasant symptoms described above, after three days' treatment, the heart at that time having recovered its normal condition. An irregular pulse is a prominent indication calling for *Digitalis*, and I have found it in numerous instances to be of priceless value in those cases of palpitation where such irregularity was present. In such cases I have generally experienced that the ϕ tincture acts more promptly and effectively than the dilutions—a point to be borne in mind in treating this class of cases.

LXXIII.—*NUX VOMICA* IN CONGESTIVE HEADACHE.

A young woman (aged 28) stated to me that she was a great sufferer from headache, and had been so for some considerable time past. On questioning her as to the symptoms, I found that the headache was of a congestive character, accompanied with throbbing, flushed face, vertigo, and worse after meals. The pain was as if the head would spit, and there were present also a considerable amount of stupefaction and nausea, the headache being aggravated by stooping or coughing. Constipation was also a troublesome symptom. She was of sedentary habits, and took very little open-air exercise, which, undoubtedly, helped to induce the attacks from which she was suffering. She had been taking *Belladonna*, but

without effect. I advised her to take 3-drop doses of *Nux vomica* 1x, three or four times a day, for a week. This she followed out, and had the satisfaction, at the expiration of that period, to find her symptoms greatly relieved. On my advice, she persevered with the medicine for another ten days, when she stated that she had not been troubled with headaches and accompanying symptoms for several days. She then took a dose night and morning for a further period of a fortnight, and then left off taking the medicine. I am pleased to state that there was no return of the unpleasant symptoms, the *Nux vomica* effecting a complete and permanent cure. She also, I might add, whilst taking the medicine, took more open-air exercise, and continued to do so after she had been cured. This, undoubtedly, assisted in hastening the cure.

(To be continued.)

HOMEOPATHY IN THE PRESS.

OUR readers may like to see the continuation of the correspondence in the *Pall Mall Gazette*, of which we gave the first part in our last issue. The subject on which the correspondence started was "Medical Ethics and the Public," but it concluded as a duel on homeopathy. To Dr. Clarke's letter of October 21st Dr. Saleeby replied as follows in the *Pall Mall Gazette*, October 26th:—

"MEDICAL ETHICS AND THE PUBLIC.

To the Editor of the Pall Mall Gazette.

"SIR,—Dr. Clarke is certainly correct in his assertion as to the manner in which medical societies and journals treat homeopaths. Similarly the astronomical papers do not now accept monographs in favour of the Ptolemaic astronomy. Insecure as human knowledge is, the centuries do nevertheless suffice, here and there, to establish certain conclusions—which are necessarily also exclusions.

"Dr. Clarke's chief point is that 'the remedy which will cure Jones's rheumatism will not cure Smith's': *i.e.*, 'cures' for 'diseases' do not exist. Yet, as every one knows, salicylate of sodium daily relieves Smith's rheumatism and Jones's; quinine daily cures Smith's malaria and Jones's; iron daily cures Miss Smith's anemia and Mrs. Jones's; diphtheria antitoxin daily cures Mrs. Smith's baby and Mrs. Jones's—but I suppose I must stop.

"Yours,

"C. W. SALEEBY, M.D.

"7, Mandeville-place, W., October 21."

On October 28th the following appeared :—

“ *To the Editor of the Pall Mall Gazette.*

“ SIR,—In his letter, which you publish to-day, Dr. Saleeby has unconsciously supplied an admirable specimen of the manners and methods of orthodox medicine. A question of fact like the homeopathic law, which is open to demonstration by observation and experience, is met with nothing more substantial than a pompous anathema. But Dr. Saleeby is peculiarly unfortunate in his methods of banning. Homeopathy has not been disproved by the ‘centuries,’ for it is barely one century old. It is his own section of medicine which represents the centuries of Ptolemaic darkness. Hahnemann is the Copernicus of medicine; his science is only in its infancy yet, but it has already lived longer than any other therapeutic system that has been evolved.

“ Nor is Dr. Saleeby any more fortunate in his illustrations of orthodox medical practice. It was one of Hahnemann’s charges against the practitioners of his day that they did not treat individual patients, but the *names of diseases*. By his own showing, Dr. Saleeby’s school has learned nothing since then. He puts his penny in the ‘Rheumatism’ slot and out comes salicylate of sodium, no matter who the patient may be; he puts it in the ‘Anemia’ slot, out comes iron; in the ‘Diphtheria’ slot, out comes diphtheria antitoxin!

“ But why diphtheria antitoxin? This is surely rather suspiciously like a kind of homeopathy, as indeed its inventor, Dr. Roux, confessed that it was. Then, among fashionable ‘orthodox’ methods of the day, there is the tuberculin treatment for tubercular conditions, and there is cowpox prophylactic against smallpox. The fact is, all the time that orthodoxy is busy banning homeopathy with bell, book, and candle, it is never too proud to pick its pockets.

“ Yours, &c.,

“ JOHN H. CLARKE, M.D.

“ 8, Bolton Street, W., October 26th.”

Dr. Saleeby replied on November 1st :—

“ *To the Editor of the Pall Mall Gazette.*

“ SIR,—Dr. Clarke having asserted that cures for diseases do not exist I quoted universally familiar instances, such as quinine in malaria and iron in anemia. Dr. Clarke has made no attempt to meet my direct refutation of his assertion, but he has not withdrawn it.

Dr. Clarke says, ‘Homeopathy has not been disproved by the centuries, for it is barely one century old.’ This is an obvious *non sequitur*. I may start to-day a theory that one can live without eating; but though the theory be only two hours old, the centuries have disproved it.

For the claim that the antitoxin treatment of diphtheria is homeopathic I sincerely thank Dr. Clarke. He will not dispute that (1) diphtheria is caused by the diphtheria toxin produced by the diphtheria bacillus in the throat; (2) the bacilli produce this toxin, when grown in a culture medium; (3) the filtered toxin is injected into the horse, in whose blood there appears a very definite new substance, formed

from its body-cells, which is the anti-toxin, and which combines with and neutralises the toxin when injected into a patient. The anti-toxin treatment, as the very name implies, is 'allopathic.' The homeopathic treatment would obviously be the injection into the patient either of the living bacilli, or of their toxin. If Dr. Clarke or any other 'medical artist' tries this experiment, I shall be happy to accept an invitation to the post-mortem.

" Yours,

" C. W. SALEEBY, M.D."

" 7, Mandeville Place, W., October 28th.

On November 4, this further letter was published :—

" *To the Editor of the Pall Mall Gazette.*

" SIR,—Dr. Saleeby seems determined to supply your readers with crucial examples of the subjection of the allopathic medical mind to what has been termed 'the tyranny of words.' Molière's medical student thought he had sufficiently explained the action of *opium* by saying that it contained a 'sleep-producing virtue' (*virtus dormitiva*). Dr. Saleeby thinks that the 'very name' antitoxin-treatment 'implies' that it is allopathic. I must remind your readers that it was Dr. Roux, and not I, who said this treatment was a 'kind of homeopathy;' and when we consider that a minute quantity of the poison is put into the blood current of a horse, and is churned up, through the action of the heart, into the gallons of blood contained in the horse's body, that part of the blood drawn from the horse some days later is used as the remedy, it does look, as Dr. Roux suggested, something like an infinitesimal attenuation of the original poison.

" But let us take another example, which has not the name 'antitoxin-treatment' to confuse Dr. Saleeby. In the *British Medical Journal* of October 29 is an account of cures of cases of tuberculosis by tuberculin (an 'emulsion of bacilli'—no horse in question here) in doses of one-ten-thousandth of a gramme. This is surely an instance of like curing like?

" For the sake of his patients, I hope Dr. Saleeby will soon learn that iron is not the remedy for every case that is labelled anemia. He will have plenty of cases of iron poisoning—'ferrism,' he would, perhaps, prefer to name it—on his hands, if he does. For iron will not cure 'anemia in the abstract,' but only certain cases of anemia. It may be news to Dr. Saleeby, but iron can cause anemia as well as cure it.

" To understand the principle of homeopathy requires the wish to know, and the exercise of intelligence on the inquirer's part. Dr. Saleeby will excuse me if I decline to try to make it plain to him. But your readers who know that the most fashionable treatment for cancer at the present day is by the X-rays, and who have read in the papers that at least one X-ray operator has been killed by cancer produced by X-rays, will be able to understand that there must be some truth in Hahnemann's law that Likes cure Likes.

" Yours, &c.,

" JOHN H. CLARKE, M.D.

" 8, Bolton Street, W., November 3rd.

On November 8th:—

“To the Editor of the Pall Mall Gazette.

“SIR,—By way of trying to check Dr. Clarke’s tendency to wander from the point, I numbered a series of assertions in my last letter, and stated that Dr. Clarke would not deny them. As my surmise was correct, and as he has not yet met my assertion that cures of diseases do exist—claiming, indeed, as homeopathic, certain cures the existence of which he has denied—I am well content.

“The cure of cancer by X-rays being quoted as an instance of the law that ‘like cures like,’ I am now wondering in what characters the X-rays are like cancer.

“As I will not insult your readers by supposing that, like the majority, they judge that controversialist worsted who stops first, I propose that this letter shall be my last.

“In attributing to me the ‘allopathic medical mind,’ Dr. Clarke apparently sees in my mind some characters common to it and those of such ‘allopaths’ as Hippocrates, Harvey, and Lister. It is certainly the nicest compliment ever paid me. I fear I shall not look upon its like again.

“I am, yours,
“C. W. SALEEBY.”

After this, the editor, very rightly, applied the closure. Dr. Saleeby had sufficiently answered himself.

If any of our readers are curious to know who this new detractor of homeopathy is, perhaps the following cutting for the *Chemist and Druggist* of November 12th may inform them:—

“DECADENCE OF THE DRUG.

“Dr. C. W. Saleeby, M.D., writing in the current number of the *World’s Work*, is drawing attention to the limitations of drugs in modern practice. The drug is enjoying a heyday of disastrous popularity, he begins; never were advertisements of drugs in the public Press more numerous and mendacious. He goes on to refer to the shoals of new synthetic remedies that arrive every year, apparently not having yet grasped the trend of such medicaments, as has Mr. Fletcher Moulton. The multiplicity of new forms of drugs ‘so simplifies the labours of the prescriber that the art of prescription-writing is obsolescent. You are tempted to order “Bipalatinoid S. & M. No. IV.,” or something of the sort, instead of compounding the old-fashioned draught. . . . The prescribing of the active constituent *Strychnine* instead of the tincture of the plant, *Nux vomica*, which contains it is coming into vogue, greatly aiding and unquestionably improving the use of drugs.’

“It is curious that a M.D. should fall into the error of regarding *Strychnine* as representing *Nux vomica*. The writer then goes on to say that ‘in sober scientific medicine the drug is decadent,’ and turns to Pasteur:—

“If your patient has diphtheria—if he is suffering from the multiplication within him of the *Bacillus diphtheria* and the production by it of a complex organic poison which is killing him—what good can be done by pouring a miscellaneous selection of other poisons, derived from plants or from coal-tar, into the already poisoned system? Plainly the best line of defence for your patient will be to kill the bacillus or to neutralise its poison. Thus we arrive at the new method of serum-therapeutics.”

“The argument will not be very convincing to any one who looks for logical sequence, but as the paper appears in a lay journal the doctor evidently writes down to his readers. The same remark applies to this note: ‘The point I want to make is the inherent improbability that this, that, or the other plant shall provide a cure for a disease the cause of which has nothing whatever to do with the plant.’ Here is another *obiter dictum*: ‘To cure your neuralgia or insomnia, or dyspepsia, you must, for instance, live in pure air or refrain from over-work or over-eating. When you recognise these facts the decadence of the drug has set in with you.’ Curiosity prompted us to turn up the Medical Register to see the years of experience that the writer had in curing neuralgia with pure air, and we found that Dr. Saleeby is of a distinctly modern generation. He qualified in 1901. We would be the last to discourage young men from expressing their views on such matters as the decadence of drugs, but views detrimental to their profession should have the rawness taken off before being given to a public unqualified to make the needed allowances.”

Surely it is time the British Homeopathic Association get to work if it is to persons of the Dr. Saleeby type that the public turns for information!

The *Star* of November 17th published an article under the heading “The Shot-Gun Prescription,” quoting from the article in *World’s Work* referred to by the *Chemist and Druggist*. According to this article the highest proof that can be given that a medical man is “scientific” is the fact that he seldom uses drugs. One medical knight, a professor of therapeutics, is quoted as having advised his students to “make a pudding” of the contents of their prescriptions; which is an undeserved insult to the kitchen. The *Star* of November 19th published this letter in reply—

“THE SHOT-GUN PRESCRIPTION.

“To the Editor of The Star.

“SIR,—The article which you publish under the above heading in your issue of to-day gives a very candid description of twentieth-century orthodox medicine by a twentieth-century graduate. But it is a little juvenile on the part of the writer you quote to think that the decadence of allopathic medicine is anything new. Except that the

'shot-gun prescription' has given place to the 'shot-gun tablet,' and that the medical world of to-day has a greater number of things to be ignorant about, allopathy remains very much as it was in the old days when Sir Astley Cooper described it as being 'based on conjecture, and improved by murder;' or when Oliver Wendell Holmes said of it: 'If all drugs were cast into the sea it would be so much the better for men, and so much the worse for the fish;' or when Hahnemann wrote of the 'shot-gun prescription': 'The more complex our prescriptions are the darker is the condition of therapeutics. How can we complain of the obscurity of our art when we ourselves render it obscure and intricate?'

"But I maintain, sir, that there is no sort of excuse for this obscurity since Hahnemann pointed the path to light. He showed that there are two sides to drug action, as there are two sides to most other things; and he pointed out that if the action of any drug is to be understood it must be studied singly, and it must be studied in its complete action—on the healthy, that is, as well as on the sick. It is utterly amazing that this simple—one would think, self-evident—proposition should have been neglected by the teachers of medicine these hundred years; but there is no one so dense as your man of science when *odium medicum* claims him for its own.

"Some people write scornfully of drugs as if there were some blameworthy defect in the plants and minerals themselves! This is ridiculous. Remedies of the utmost value abound on all sides of us. We cannot take a walk in the country without treading them under foot by scores. But they will not work except for those who know them in their complete powers, and know how to make use of them. This knowledge is open to all who will study Nature with Hahnemann for guide.

"It may interest your readers to know that there is an association at work, with Earl Cawdor at its head, whose object it is to establish a college in London for the teaching of Hahnemann's system. I allude to the British Homeopathic Association, of which the secretary is Mr. Fred. King, 233A, Regent Street, who will be pleased to give particulars to any of your readers. The Association hopes to make the conditions of things described in your article something less possible in a civilised country."—Yours, &c.,

"JOHN H. CLARKE, M.D.

"8, Bolton Street, W., November 17th."

NODIUM is an industrial metal, much lighter than aluminium, and was discovered by M. Albert Nodon. It is obtained by a new method of electrical ionisation. Its colour, sheen and grain are very much like those of steel. It is dense in a melted state, and conservation in the air is possible for a longer time than is the case with aluminium. As regards ductility and malleability, nodium is comparable to bronze, and its electrical conductivity is equal to that of copper weight for weight. The use of nodium for conducting wires, light and strong pieces for automobiles, torpedo boats, airships, &c., for mouldings in place of bronze, is likely to be considerable.—*Med. Times.*

SOCIETY'S MEETINGS.

BRITISH HOMEOPATHIC SOCIETY.

THE second meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thursday, November 3rd, Dr. James Johnstone, the President, taking the chair.

Thomas Miller Neatby, M.A. Cantab. et Lond., M.R.C.S. Eng., L.R.C.P. Lond., proposed at the last meeting was elected a member.

The following specimens were exhibited :—

1. Hair from a dermoid in coccygeal region, simulating ordinary abscess. By Mr. A. A. BEALE.
2. Oxalate renal calculus, extracted from the left side of a "horse-shoe" kidney. By Mr. A. A. BEALE.
3. A malignant ovarian tumour removed by operation. Death. By Dr. EDWIN A. NEATBY.
4. Intra-mural uterine fibro-myoma, removed by myomectomy. Recovery. By Dr. EDWIN A. NEATBY.
5. A uterine fibro-myoma, removed by hysterectomy on account of hemorrhage and cardiac weakness. Recovery. By Dr. EDWIN A. NEATBY.
6. A uterine fibro-myoma, showing sub-peritoneal pedunculated nodules ("hard fibroids") and intra-mural degenerating myomata ("soft fibroids"); removed for pressure symptoms. Recovery. By Dr. EDWIN A. NEATBY.
7. Microscopic sections of last-named, showing structure of "hard" and "soft" portions. By Mr. F. WATKINS.

The President, in opening proceedings, said that British homeopathy had suffered another great loss in the death of Mr. G. A. Cross, secretary-superintendent of the Hospital.

A recommendation was presented by the Council respecting a memorial to the late Dr. Dudgeon, suggesting that a portrait by a good artist should be purchased, and any balance of subscriptions should be devoted to the improvement of the library. Dr. Dyce Brown said that such a portrait was available, and suggested that it might be sent to the Hospital for exhibition at the next meeting. The Society empowered him to see that this was done.

A paper was then read by Dr. W. T. Ord (Bournemouth), entitled "Drug Treatment and the Later Stages of Phthisis," in which he made the following proposi-

tion: Do drugs ever arrest the disease in the later stages of phthisis? He then discussed the present position of drug-treatment for phthisis in the old school; the present position of homeopathic treatment; the action of drugs on the lung-tissue in the later stages of phthisis; failure of remedies usually recommended; searching our materia medica for a remedy, he was led to experiment with *Aurum* and *Iodine*, and with some satisfaction, using *Aur. iod.* 2x 1-2-gr. doses and *Iod.* 1x η v. doses. He had, however, found a more perfect picture for the condition in *Stannum*, which he used in the form of the *iodide*. In early phthisis this drug had disappointed him, but it was very useful in later stages. He obtained the best results from the 2x trit., 1-3 grains thrice daily after meals. It occasionally produced gastric irritation, and must be given weaker. If there is no effect in a week he adds *Iod.* 1x η v. given in milk. Until the appearance of Dr. Clarke's *Dictionary of Materia Medica* he was not aware that other practitioners had used this salt. But on reference to that work he found observations recorded confirming his own experience.

Dr. Dyce Brown said he had found *Iod.* 3x alone useful.

Dr. Clarke said the deductive method of getting at remedies was quite legitimate in homeopathy. Compound remedies often combined the properties of their ingredients. He was surprised Dr. Ord had not mentioned *Tuberculin*. Dr. Stonham had used *Stannum* for night-sweats. He had also used *Tubercul.* 30 once a week, and usually found aggravation on that day.

Dr. Spiers Alexander had cured a case with *Ars. iod.* He uses *Tubercul.* in the 200th.

Mr. Dudley Wright spoke at length on the bacteriological side of the subject, pointing out that in advanced cases one has to do with streptococcic and staphylococcic infection, and not tubercle bacilli only. Dr. Byres Moir also mentioned a case where *Tub.* 30 produced an aggravation. Dr. Lambert said he had used *Tuberculinum* frequently, but always in the 200th, once a week, and had seen no aggravation, but patients often expressed a sense of benefit from the dose. He thought the 30th too low. Drs. Hey, Searson, and Watkins also took part in the discussion. In reply, Dr. Ord said he had not used *Tub.* above the 30th, and had several times seen aggravation, but no curative action in advanced cases.

Dr. T. D. Nicholson (of Clifton, Bristol) then read a paper on the action and therapeutics of *Strychnine*. He divided the action of the drug into three stages: (1) Excitability; (2) Spasm; (3) Exhaustion; and mentioned examples of diseases corresponding to each stage.

In the discussion that followed Dr. Goldsbrough said he thought *Strychnine* contra-indicated when pathological changes have taken place in nerve tissues. Dr. Stonham did not think the use of *Strychnine* was homeopathic where there is exhaustion; any drug will produce exhaustion if pushed far enough. Dr. Clarke said he had had a good deal of experience with *Strychnine*, some of which bore out that of Dr. Nicholson. He had used it in the 6th centesimal dilution with success in post-influenzal cough on the recommendation of the late Dr. Cooper. He had found *Sulphur* the best antidote to chronic *Strychnine* poisoning.

Dr. Dyce Brown also took part in the discussion.

WESTERN COUNTIES THERAPEUTIC SOCIETY.

MEMBERS of the Western Counties Therapeutic Society met at the Homeopathic Hospital, Plymouth, on Wednesday, October 19th, and were provided with tea by the kind hospitality of the Board. The president (the Rev. W. K. Burford), treasurer, and secretary of the institution, and several ladies were also present. Subsequently the visitors were conducted through the wards, and expressed their interest in all they were shown. After a visit to the Hoe the party met at 8, Queen Ann Terrace, the residence of Dr. Newbery, where Dr. Midgley Cash, of Torquay, read an interesting paper on some diseases of old age. A discussion followed, after which the visitors, together with the hon. treasurer and secretary of the hospital, were entertained to dinner. The president of the hospital was unavoidably absent from this part of the proceedings.

THE DISCOVERY OF PEPSIN can hardly be credited to any other investigator than Schwann. It was he who first recognised its fermentative action, and it was also he who gave it its name. But in connection with pepsin the earlier experiments of Spallanzani of Pavia ought not to be forgotten. His work was published in 1780. Previously the action of the gastric juice was totally ignored. He extracted it and showed that it would dissolve fibrin even in a glass vessel. The English anatomist, John Hunter, warmly contested his views, but Spallanzani completely established his theory.—*Chemist and Druggist*.

INSTITUTION.

CROYDON HOMEOPATHIC DISPENSARY.

WE are glad to learn that the Croydon Dispensary has removed to more commodious premises at No. 128, George Street. This dispensary is open at the new address as above on Monday, Friday, and Saturday afternoons from 3 to 4 p.m., and on Tuesday and Thursday evenings from 7 to 8 p.m.

The dentist attends on Tuesday mornings from 9 to 10 a.m., and on Friday evenings from 6 to 7 p.m.

In reference to the removal, the following circular has been issued by the medical officers:—

“CROYDON HOMEOPATHIC HOSPITAL,
“128, GEORGE STREET, CROYDON,
“October, 1904.

“DEAR —,

“We think that the information embodied in the enclosed leaflet relating to the removal of the Croydon Homeopathic Dispensary to 128, George Street may be of interest to you.

“The dispensary should be well supported by all who have the interest of homeopathy at heart, since it is the one public institution devoted to the cause in this large borough.

“The Committee have taken the opportunity of the removal to add an efficient dental department to the dispensary. The capability for the institution to expand still further in its useful work will depend very largely upon the amount of public support it gets. We are therefore bringing it personally under the notice of all our friends at this important juncture of its history, feeling sure that they will be glad to help on the good cause by becoming subscribers or by making a donation, and by recommending suitable cases for treatment at the dispensary.

“We may remind you that even half-a-crown will provide, at dispensary fees, a month's treatment for some sick person. Either we or the honorary secretary, J. Godby Croucher, Esq., Mayfield, Recreation Road, Sydenham, S.E., will be glad to receive any contributions, or to supply further information if required.

“We are, with kind regards,

“Yours very sincerely,

“R. PURDOM, M.D., C.M.,

“Ellerslie, Park Hill Road.

“H. MUNSTER, M.D., C.M.,

“3, Oakfield Road.”

EXTRACTS.

THE INTERNATIONAL HOMEOPATHIC CONGRESS.*

In our leading article of last month on the British Homeopathic Congress, we stated that the International Congress was due to be held in 1905, but that having heard nothing of any arrangements for it, we intended to hold our British Congress in 1905 as announced.

On July 27th, however, Mr. Knox Shaw kindly invited a number of his colleagues to dinner to meet Dr. Sutherland, of Boston, the President of the American Institute of Homeopathy, and to discuss the arrangements for the International Congress. The gathering round Mr. Shaw's hospitable table was representative of the British Congress, the British Homeopathic Society, and the Homeopathic journals.

Dr. Sutherland stated that at the recent meeting of the American Institute of Homeopathy, it was resolved that 1906 was a more suitable year for America than 1905, and that the International Congress should accordingly be held then, and a committee was appointed to carry out the necessary arrangements, with Dr. J. H. McLelland, of Pittsburg, as chairman. Dr. Sutherland proposed that, as we had lost by death the Permanent Secretary of the International Congress, the late lamented Dr. Richard Hughes, the British Homeopaths should take steps to co-operate with the American Committee. All present unanimously agreed that this should be done, and Mr. Knox Shaw was also unanimously appointed the Secretary for Great Britain and the European Continent, and requested to communicate with Dr. McLelland.

The date of meeting was then discussed. It was pointed out that the American Institute always met in June, and the previous International Congresses, when held in America, were also held in June, as being the most convenient time of year for our American colleagues, but that this month was a hopeless one for the large majority of British homeopaths; and that, if June were decided on, the numbers of our British colleagues who could be present would be very small indeed. With Dr. Sutherland's approval, Mr. Knox Shaw was requested to ascertain whether our American colleagues would not agree on this occasion to the Congress being held in September instead of June.

Dr. Sutherland, whom all present were delighted to have the

* From the *Monthly Homeopathic Review*, September, 1904, p. 569.

pleasure of meeting, said that in all probability Atlantic City would be selected as the place of meeting. This is one of the best known and most fashionable sea-side resorts in the United States, and is less than four hours by rail from New York or Philadelphia.

We sincerely trust that the arrangements will be satisfactorily carried out, so as to enable a large and representative Congress—thoroughly International—to be held in 1906.

THE POISON MAN.*

At about half-past three yesterday afternoon a number of respectably dressed citizens were shown one by one into the Masonic Room of a Leicester Square Hotel, where, as if awaiting them, a table was spread with some of the preparations for a feast. The hasty conclusion which might be formed that these gentlemen were Masons, is, however, a mistaken one. They had been invited to witness the efforts of a Captain Vetrico "to set at variance the laws of nature," as he had been advertised to do on the invitation cards. Nobody knew quite how he was going to do it; and the table, with its dozen napkins neatly set up on the plates, and its not unattractive dishes of hors d'œuvres and sandwiches, suggested no clue. The spectators, far outnumbering the napkins or the hors d'œuvres, could only gaze blankly at the Barmecide feast, and wonder. Presently a pallid young man, with a magnificent set of teeth, entered the room, and was announced as Captain Vetrico. He rightly offered no apology for keeping the guests waiting twenty minutes, but immediately plunged into an explanation of his profession. The explanation was, in brief, that he had a "Little Mary" of unprecedented might, majesty, dominion, and power. It could take anything; atropine left it calm; arsenic merely gave it tone; strychnine, phosphorus, sulphate of copper were child's play to it; the only thing at which it drew the line was prussic acid. As Captain Vetrico spoke with pardonable pride of this wonderful organ, he whisked off the napkins from the plates one by one, and disclosed no dainty dish or innocent baker's roll, but little heaps of brightly-coloured mineral. Most of them appeared to be some form of sulphate of copper, though there was one heap subsequently declared to be sulphur and arsenic, and one which was indigo. The experimenter then invited the company to name any one of these heaps on which he was to begin, and elaborated certain other precautions which they might

* From the *Daily Graphic*, November 5th.

take in order to make sure that he really did swallow these unpleasant viands, and that his stomach—the word is out at last!—really did receive them. The company, as is not infrequent on these occasions, betrayed reluctance to interfere with the operations of nature, and Captain Vetrico swallowed, one after the other, small doses of sulphate of copper (Paris green), strychnine, indigo and phosphorus. As far as any one could make out, he swallowed quantities of these poisons which would cause most persons grave personal inconvenience. He asserted that he had swallowed two and a half grains of strychnine and four to five grains of phosphorus at this afternoon meal, and though there was no means of verifying his quantities, the qualities of his stomach seemed to be beyond doubt. One of the spectators wanted to know what was the good of it all. Captain Vetrico responded that his stomach was a scientific curiosity. "Yes, but," persisted the inquirer, "what does it prove?" "Sir," responded Captain Vetrico, "it's a great moral lesson!"

POISONING BY "FOOL'S PARSLEY" (*ÆTHUSA CYNAPIUM*).

By H. E. DAVISON, M.D.

ON July 1, 1904, I received a message to attend E. W., aged 23, domestic servant, and found her to be suffering from severe abdominal pains with persistent vomiting and diarrhea. The vomited matter was green stained. The patient was extremely collapsed. Surface cold, radial pulse absent, heart beating at the rate of 120 times a minute, heart sounds very feeble. The temperature was so subnormal as to be incapable of being registered by the ordinary clinical thermometer—the mercury not rising to the 95° F. graduation mark. On inquiry I elicited the fact that on the previous day the patient had eaten a considerable quantity of a herb gathered in the kitchen garden attached to the house, which she believed to be "mustard and cress." This proved to be "fool's parsley" (*Æthusa cynapium*) of very young growth. The symptoms of poisoning did not come on until some twenty hours after ingestion.

Morphine (for the pain) and stimulants were administered, and the patient made a speedy recovery.—*British Medical Journal*, July 16th.

THE TREATMENT OF LEPROSY.

By DR. JAMES S. ASHE, M.Ph.S.I., F.C.S., &c.
(Late Professor and Lecturer on *Materia Medica* Ph.S.I.)

It may interest some of my pharmaceutical brethren to know something about the new treatment for leprosy as discovered by my friend Captain E. Rost, I.M.S., Rangoon. I have just returned from there, and have seen many cases before, during, and after treatment as well as the preparation of leprolin in all its stages, to which the cure is due.

The first and most important thing is to get over the difficulty of growing the bacillus, and he has discovered a method by extracting the salts from nutrient media, as the bacillus of leprosy will not grow in the presence of salt. In order to make such a nutrient medium he distills beef-extract soaked in pumice-stone in a current of superheated steam, and obtains a medium in which the bacillus will grow with the greatest ease. "Leprolin" is made on somewhat similar lines to those first employed by Professor Koch in the manufacture of tuberculin; over a hundred cases are now being treated in Burmah, and the treatment is also being tried in India.

Already four cases have been cured, and the improvement in most of the cases under treatment is very marked. One case I know of, a Burman, was completely cured in ten days; this was a very bad case, with ulceration of the feet for five years and anesthesia all over his legs. The most remarkable action of "leprolin" is the suddenness with which sensation returns in those patches where it was lost. "Leprolin" appears to act just as well on the anesthetic as the nodular varieties, the colour and patches changing to normal in the one, and the nodules and ulceration disappearing in the other. The injections are given once a fortnight, with salt ointment to the areas affected, and salt internally. This now does away with the "fish theory" for the cause of cancer, as there appears to be sufficient salt in the fish to prevent the growth of the bacillus. Captain Rost attributes a great deal of his success in the discovery of his method to Buddhism, into which he is a great inquirer. From it he has founded a theory (not yet published) on the periodicity of the pathogenic organisms which is based on the law of the periodicity of the atomic weights of Mendeléef, and

which agrees with some of the tenets of the Buddha. Captain Rost is quite a young man, very quiet, short-sighted, a great enthusiast. He has fitted out a laboratory at his own expense, where he has been for years engaged in his spare time investigating the nature of such diseases as cancer, beri-beri, and tuberculosis. The demand for his "leprolin" has become so great that the local Government have asked the Government of India to place Captain Rost on special duty, with a department to himself, to follow out his work. The first day I was with him his genius impressed me, the second his extreme courtesy and kindness, and the third his modesty. His work is only a few months old, but I am quite assured of his coming fame.—*Chemist and Druggist*, August 17th.

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.

I should be much obliged if you could give me, through your journal, the name and address of any lady practising homeopathy in London.—E.P.

[Dr. Octavia Lewin, 25, Wimpole Street, W., practises homeopathy.—Ed. H. W.]

NOTIFICATION.

. Under this heading we shall be happy to insert notices of appointments, changes of address, &c., and holiday arrangements.

CHANGE OF ADDRESS.

DR. McLACHLAN, *Oxford*. Dr. McLachlan has removed from Beaumont Street to 3, *Keble Road, Oxford*.

Obituary.

MR. G. A. CROSS.

It is with great regret that we record the death of Mr. G. A. Cross, late Secretary-Superintendent of the London Homeopathic Hospital, which occurred on October 31st, from heart failure. Mr. Cross had been in indifferent health for some time, but was apparently much better, and on the evening before his death there was nothing to indicate that the end was so near. We take the following sketch from the *Philanthropist*, of which journal he was editor till within a recent period :—

“ With deep regret we record the death, at Muswell Hill, on the 31st ult., of Mr. Geo. A. Cross, Secretary-Superintendent of the London Homeopathic Hospital. Mr. Cross was for so many years connected with the fortunes of this journal as editor that his untimely demise has a special loss for us, apart from that shared by all who have an interest in charitable affairs. Born and educated in the City of London, he early in life developed strong literary tastes, devoting much time to reading and study, and invariably choosing the best authors. He showed remarkable capacity for absorbing information, and quickly grasping and mastering any subject new to him ; added to which he had a splendid memory.

“ The *British Lyceum* was his first independent journalistic effort, and was a ‘ monthly popular journal of science, literature, and art, devoted to the interests of the members of literary institutions.’

“ Mr. Cross also became connected with the *Fountain* (‘ religious, literary, social ’) as sub-editor and reviewer, in conjunction with the late Dr. Joseph Parker, and it is believed was engaged in this work at the time of his appointment to the London Homeopathic Hospital. He contributed stories and articles to this journal.

“ The friendship which sprang up between Mr. Cross and the late Dr. A. H. Allshorn, through the professional services of the latter, led to Mr. Cross’s attention being called to the vacant post of secretary at the London Homeopathic Hospital, Dr. Allshorn noting his many good qualities, and considering him well suited to fill the vacancy. For this appointment Mr. Cross was tempted to apply, although it meant the sacrifice of his literary work, which he loved so well, to devote himself entirely to the hospital, and on November 1, 1875, he was successful in obtaining the position.

“ In spite of his absorbing work at this institution, he later found time to exercise his active mind and talent for writing, and until recent years edited the *Philanthropist*. His capacity and fondness for figures were well known, and found a vent in a series of articles dealing with ‘ Hospital Accounts ’ which appeared in this journal, and in which he described an original perfected uniform system of accounts, a system which has long been adopted at the London

Homeopathic Hospital and nearly all the general hospitals. Short stories also appeared in this journal, and for some years he was responsible for its Christmas story."

VARIETIES.

PULSUS PARADOXUS.—Galli (*Il Policlin.*, N. 41, f. 7, 1904) points out that, as Kussmaul originally observed, the presence of pulsus paradoxus alone is not characteristic of mediastino-pericarditis, but only when associated with inspiratory swelling of the veins of the neck. The pulsus paradoxus alone may exist in the most varying diseases; indeed, it is so common that some authors have denied any clinical value to it. The author attributes much importance to the pulmonary traction in the origin of diastolic reduplication and pulsus paradoxus. The heart, being a hollow vessel, is constantly exposed to the elastic traction of the lungs and diaphragm, between which it lies. Owing to the greater elasticity of the lungs in early life, the pulsus paradoxus is more common at that time than in mature years. Cardiacs suffering from severe orthopnea breathe with mouth wide open, so as to admit air readily and lessen the intensity of the pulmonary traction, whilst they expire with closed lips, instituting a kind of miniature valsalva experiment. The pulsus paradoxus is a sphygmographic signal indicating lessened cardiac resistance, which may be temporary or permanent according to the cause. The author illustrates one cause of a temporary nature which came under his observation—namely, the use of digitalis.—*Brit. Med. Journ.*

INFLAMMATORY TUMOUR OF THE SALIVARY GLANDS.—Gangitano (*Rif. Med.*, July 6, 1904) reports a case of so-called inflammatory tumour of the salivary gland, with a detailed macroscopic and microscopic examination of the tumour. Kütines, in 1898, first drew attention to this affection. Of the six cases described by him, five were diagnosed as malignant and one as chronic adenitis. In the author's case syphilis and tubercle were excluded, and, on removal of the tumour, it was found to correspond exactly to the cases described by Kütines. Macroscopically it looked like a tumour, but presented clearly a glandular structure, and microscopically it was characterised by increase of interstitial connective tissue and extensive small-celled infiltration. In the author's case he was able, in addition, to make out a blastomycetic organism, to which he attributes the formation of the tumour, infection probably occurring *via* the lymphatics. Clinically, these cases are distinguished by the presence in the submaxillary region of a swelling varying from the size of a nut to that of a hen's egg, of oblong or rounded shape, of hard consistence, slightly movable, almost painless, and covered with normal skin, which may or may not be slightly adherent. These tumours are most often confused with malignant tumours, and hence extensive operations are liable to be undertaken needlessly. In the author's case the duration of the disease was about two years.—*Brit. Med. Journ.*

DIAGNOSIS OF AFFECTIONS OF THE PANCREAS.—Neumann (*Zentralbl. f. Chir.*, No. 32, 1904) at a recent meeting of the Freie Vereinigung

der Chirurgie of Berlin, pointed out that though most cases of disease of the pancreas take a characteristic course and admit of a ready diagnosis, there are some which cannot be easily recognised and be distinguished without difficulty from affections of other abdominal organs, especially the kidney. Reference is made to a case under the author's own care, in which a pancreatic cyst presented the diagnostic features of a suppurating cyst originating in the right kidney. On laparotomy this organ was found to be normal and the swelling was discovered to be a cystic tumour of the size of a man's head which, when incised through a lumbar incision on the right side, proved to be connected with the pancreas. A second case is reported in which laparotomy was performed for the relief of symptoms pointing to acute intestinal obstruction. Section of a fibrous cord compressing the ascending colon was followed for a time by a successful result, but six days later a return of the former symptoms necessitated a second operation. A large cystic swelling was now found between the two layers of the transverse mesocolon, which at first was taken for a cyst of the head of the pancreas, but which subsequently proved to be the result of paranephritic suppuration on the right side. The patient, who was twenty-two years of age, was ultimately cured by nephrectomy. The lesion, it is assumed, had originated in an injury to the abdomen in childhood, which injury had resulted in hydronephrosis and, after a time, renal suppuration. The cord causing intestinal obstruction in the first instance had probably been formed by the localised peritonitis set up by the extension of the suppuration in the kidney to surrounding parts.—*Brit. Med. Journ.*

FORMALIN IN MILK.—James Leppard, of Lewisham, was summoned at Greenwich Police Court yesterday for selling milk containing .001 per cent. of formic aldehyde. Mr. Templer Down prosecuted for the Lewisham Borough Council, and said the use of formalin was entirely prohibited as injurious to health. Mr. Ricketts, for the defence, said the quantity in this case was only one part in a hundred thousand, and could not possibly affect health. Dr. Rideal, D.Sc. (London), public analyst for Chelsea, stated that he was the author of a standard work on food preservation and had given evidence before the Royal Commission on the question. Witness was the first to make experiments with formalin in this country in 1894, and after the appearance of his paper on the subject it had been generally used as a preservative. He had never known it to be injurious to health, though he had given it to his own children, to kittens and other animals. There was not one tittle of evidence to show that one part in a hundred thousand was injurious even to the health of even an infant child. The Royal Commission recommended the prohibition of the use of formalin because it was impossible to ascertain the quantity used in milk. Witness had made experiments with fish, and a goldfish thrived in water containing one part of formalin in 40,000, and one part in 5,000 did not affect the heart of a frog. Defendant said he had used no preservative, and was unaware that any had been used in the milk in question. Dr. Harris, medical officer of health for Lewisham, gave evidence that after taking a pint of milk containing one part of formalin in 100,000 a day for ten days, he felt a considerable amount of discomfort and nausea. He considered that it must be deleterious to young and delicate children. Dr. Toogood, superintendent of Lewisham Infirmary, stated that formalin was an irritant

poison. Witness had made experiments and found he could tolerate formalin up to one part in 5,000, after that it made him sick. There was no doubt that even one part in a 100,000 retarded digestion if taken for any period. Mr. Kettle fined the defendant £5 and £2 12s. 6d. costs, and a similar penalty was imposed in the case of George Terrington, of Blackheath.—*Morning Post*, Sept. 21, 1904.

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

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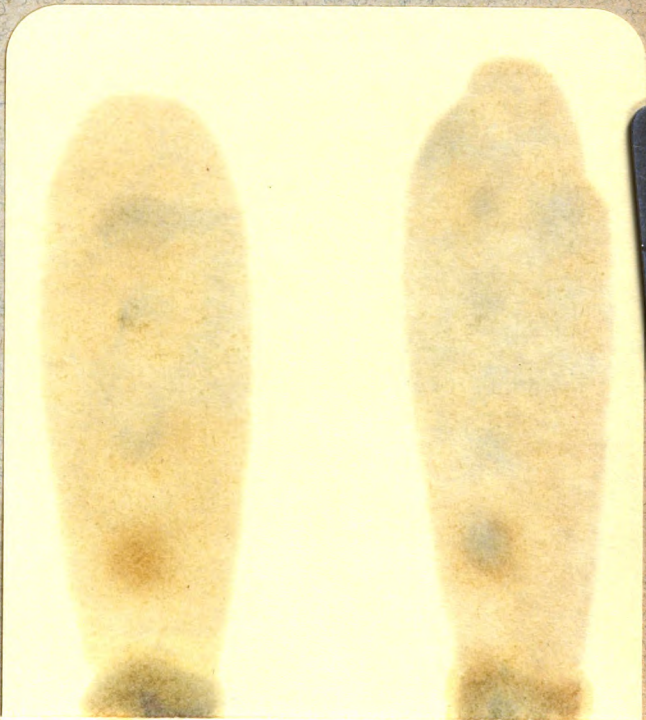
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