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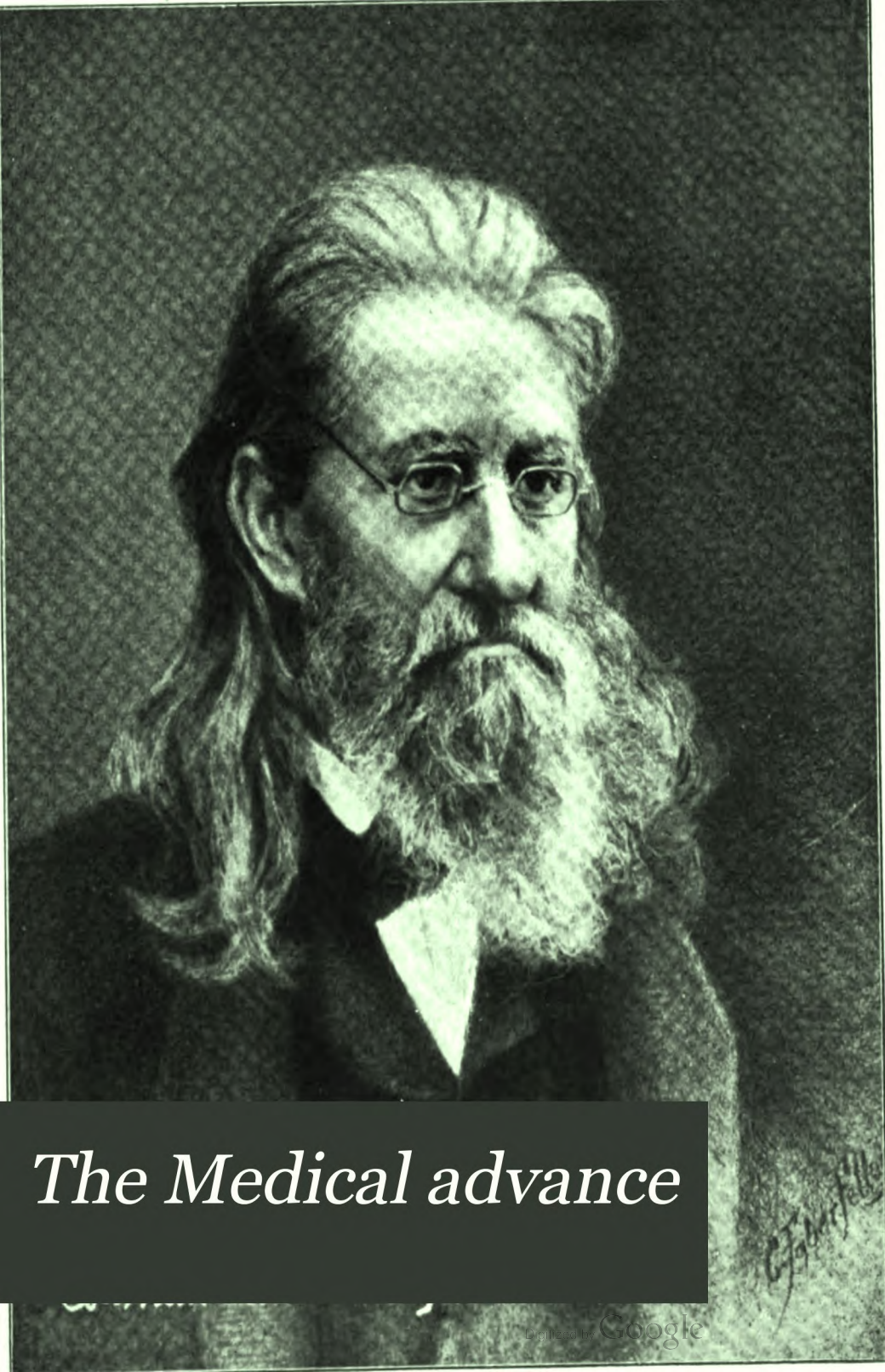
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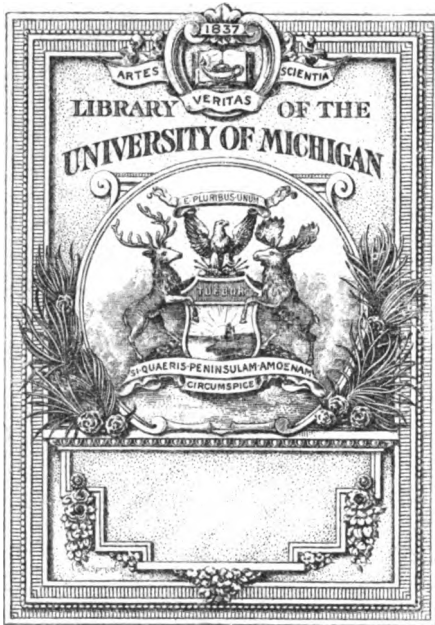
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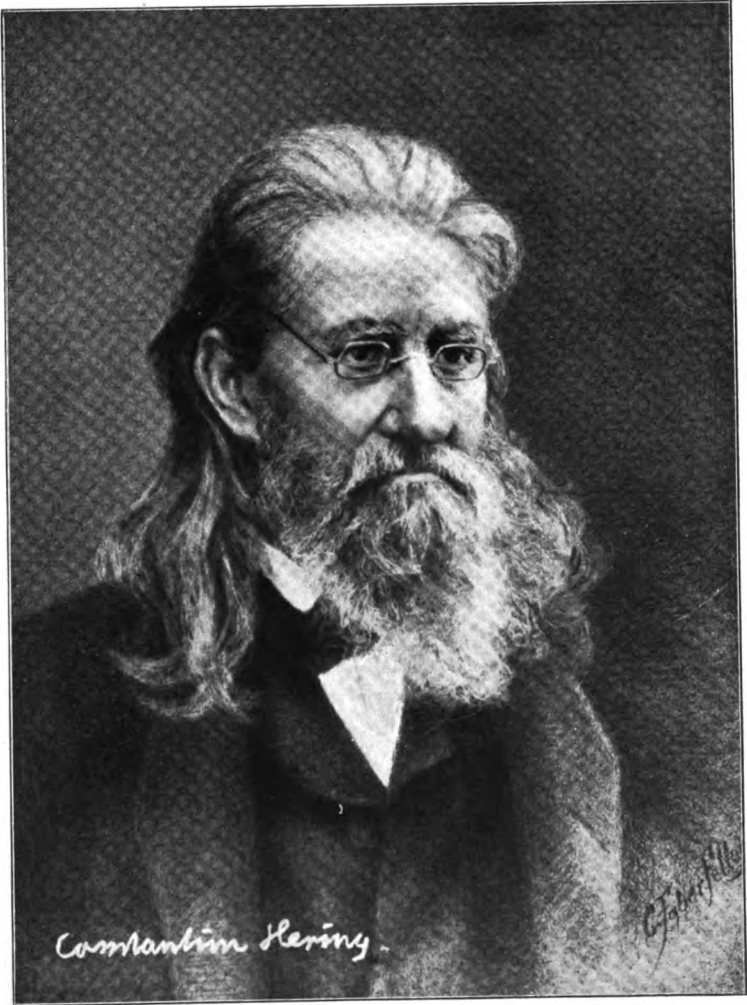




*The Medical advance*



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# THE MEDICAL ADVANCE

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## LILIUM TIGRINUM AND SOME COMPARISONS.

By E. B. NASH, M. D., Cortland, N. Y.

This is preeminently a uterine remedy. Its action seems to center in the pelvic viscera of the female organism.

This is not a great way on toward a thorough understanding of the remedy, inasmuch as the same can be said of several others. Nevertheless it is a good "starter" as the boy said when he set a pin in the chair of the schoolmaster; for while it has for instance a heart symptom very similar to one that is a characteristic of *Cactus grand.* it is in this case only reflex or as we call it concomitant, while under *Cactus* it is primary, as the *Cactus* has its center of action in the heart as positively as does *Lilium* in the uterus and its appendages.

Bönninghausen laid down as a rule for using his pocket-book in selecting the similimum, three things particularly to be observed, viz.: location, sensation and modality; and true homeopathic prescribers have ever since proved the wisdom of the arrangement. But to stop here, (i. e. at the locality of action) would be to follow the example of our old school brethren and be satisfied with a knowledge which leads only to a class of remedies.

Let us in a limited consideration of our remedy take one or two symptoms as recorded in the provings. A Miss F., aged 55, took the 300th potency (first, eighth, eleventh and fifteenth days) then the 5th potency (twenty-first, twenty-

third, twenty-fifth and twenty-ninth days). On the eighteenth day of the proving she records: "Bearing down, with sensation of heavy weight and pressure in the region of the womb as if the whole contents would press out through the vagina;" and on the 29th day: "Great bearing down in the uterine region and a feeling when on the feet, as if the whole pelvic contents would issue through the vagina, if not prevented by pressure upward with the hand, at the vulva, or by sitting down."

It will be observed that the first of these records followed after the taking of the 300th potency, and the last after that of the 5th. We find this same proving recorded as the effect of the 300th potency: "Burning and acrid feeling in the urinary passage after every discharge of urine," and "acrid smarting sensation follows every urinary passage," also "sharp pain in the ovarian region."

These symptoms have been abundantly verified or confirmed *ab usu in morbis*.

A farther study of the provings shows that not only these bearing down sensations are present in an intense degree, but that there is actual displacement of the uterus, thus establishing perfect harmony between the subjective and objective symptoms. I want to emphasize here that this condition of things was brought about by comparatively high potencies (which some would claim were unreliable for this reason) but was confirmed both by provings with the cruder drug and also clinically.

This is not only true of *Lilium tig.*, but I think that abundant experience and observation will bear me out in saying, that the remedies brought into our materia medica in this way, have generally proven more reliable as therapeutic agents, than those introduced from a history of poisoning or what are called physiological effects of material doses.

Having said thus much by way of introduction as to the reliability of the provings of *Lilium*, I will proceed to carry out what I had in mind at the start, viz.: to call attention by way of comparison and otherwise, to not only its great value



*per se*, but to a number of other remedies which resemble it in their action upon the female organs.

The nearest analogue to Liliium is undoubtedly Sepia. The local manifestation of its action is so like that of Liliium that except for what we call "constitutionals," "concomitants" and "modalities" one could hardly choose between them.

Here is the expression of Sepia both as produced in proving (in potency) and verification at the sick bed.

"Beginning to prolapse, congested; pressure as if everything would issue through the vulva.

Pressure downward as if everything would fall out with oppression of breath and pain in abdomen, she must cross her limbs to prevent protrusion of the vagina, yet nothing protrudes."

All will recognize the similarity of these symptoms as they occur under both Liliium and Sepia.

Now the practical question, how to decide between them. Constitution and temperament often enter largely into a choice between remedies. In this case that of Liliium is not yet well settled, but the Sepia patient is as a rule dark complexioned, dark haired, with rigid fibre, and often pale or yellowish, and especially moth patched face; yellowish across the upper part of cheeks and nose like a saddle. Such a temperament and face would rule out Liliium at once other things being equal. As I said in "Leaders," "The Sepia case is more likely to be a chronic one. On the other hand the Liliium case is more intense and painful." The Sepia case is often, perhaps generally complicated with psora. Liliium not so far as we know.

Now leaving the general aspect of these remedies, we come to notice three symptoms that occur in close connection with the uterus, with Liliium. Such concomitant symptoms very often present are found in the severe irritation of the rectum and bladder. So far as choosing the class of remedies is concerned each concomitant is invaluable. Under this head we have un- heavy type—"pressure in the rectum with al-

desire to go to stool. Pressure on the bladder; frequent desire to urinate, with scanty discharge and a feeling of irritation and smarting in the urethra after every discharge." These symptoms do not occur in any such degree under Sepia, but they make one think of Cantharis, Nux Vomica or Mercurius cor. Of course there is no danger of confounding Liliium with these remedies for none of them have such positive womb symptoms. There is sometimes pressure on the bladder, and frequent micturition with Sepia, but not in nearly so great degree of intensity as with Liliium.

Again the irritation of Liliium extends to the sexual passion so as to cause intense desire for coition; "must keep busy to repress this desire." This is a marked diagnostic difference between Liliium and Sepia for the latter is characteristically averse to coition; it is intolerable.

Platina, perhaps, comes as near Liliium as any other remedy in the line of nymphomania; the sexual organs are exceedingly sensitive; can't bear even the napkin to touch them. Murex also has intense sexual desire. It is so violent as to "fatigue the reason," and is renewed by the slightest touch. Liliium, Sepia and Murex all have about equally bearing down pains, so that a study of them together fixes them in one's memory. As taught by Hahnemann, mind symptoms should always take first rank in a choice of remedies.

Liliium is profoundly depressed and inclined to weep, (Puls.) is anxious, tearful and excited, feels hurried. All the mind symptoms are on the line of anxiety or excitement. Sepia is also depressed, with great sadness and weeping but the depression is apt to take the form of apathy or indifference, especially to those things which in health most interested her. Murex is as greatly depressed as either of the others but has not so far as known, the hurried feeling of Liliium, or the apathy or indifference of Sepia.

Another symptom often found in connection with uterine affections, locates in the pit of the stomach. It is expressed as a sinking or all-gone, faint feeling. Both Sepia and

Murex have it very markedly present, and Liliium not so much so, notwithstanding the great bearing down sensation which, as Dunham expressed it, made her feel as though the whole pelvic and abdominal cavity even to the chest were emptied, would lead one to expect it.

The sympathetic heart symptoms already alluded to and which often attend womb troubles appear very strongly in the Liliium case, and so far as known not at all under Murex and with Sepia only as a rule in connection with the general "flushings" of heat which are as characteristic of this remedy as with Lachesis or Sulphur, especially at the climacteric.

In a pure Liliium case the heart is very often disturbed and presents palpitation, fluttering, anxious sensation, and especially the sensation as if grasped in a vice (Cactus) or alternately grasped and released. I once cured a long standing case of this kind. The heart symptoms were so markedly present that her physician was greatly perplexed because Cactus had not relieved her. She had been confined to the house for over a year, but the doctor being called away from home, asked me to visit her in his absence. One prescription of Liliium cured her so that in about two weeks she went on an excursion on the cars for a distance of five miles from home, walking a long distance to and from the train at each end of the route. The next time I met the doctor, who had returned home and found his patient well, he exclaimed "what the d—l did you give that woman?" I told him and he admitted that he had not thought of that remedy. But it was at that time a comparatively new remedy so I forgave him, but he could hardly forgive me for he lost a "good job."

This illustrates the truth of what we all know of the value of concomitants, but care is needed not to confound the concomitant with the main affection which had in this case been done.

Again, another thing should be remembered in this comparison, viz.: that whereas there is very little appearance of ovarian irritation with Sepia or Murex, under Liliium it is

very prominent. All three of these remedies have leucorrhœa. I do not know of any positive differentiation in this respect, though there may be some.

Aside from the bearing down pain so common to all three, *Lilium* has some neuralgic pains in the uterus (Caul. and Mag. p.) could not bear touch even the weight of the bed-clothes (Lach.) or the slightest jar (Bell.) *Sepia* has lancinating from womb to navel, or stitches shooting up navel into the abdomen, or a painful feeling of stiffness in the uterine region. *Murex* complains of sore pains of the uterus; a distinct consciousness of a womb (Helon.) This in my mind sums up (in short of course) the action of *Lilium* in such a way as to make it capable of being easily understood or retained in the mind for ready use, and I have chosen *Sepia* and *Murex* out of a great many remedies that have characteristically bearing down pains and other troubles originating in the female organs, because of their close resemblance in this one particular symptom. A further study of them would of course show other correspondences and divergences; for instance *Lilium* > P. M., *Sepia* < P. M. (*Nux* and *Nat. m.*). The weight or lump in anus or rectum is found under *Murex* as well as *Sepia*.

Pain through the left mammary region to back is characteristic of *Lilium*, like *Actea* at climacteric. The characteristic flushings so strong under *Sepia* are not found under *Lilium* notwithstanding the great disturbance of the heart, but pulsation over the whole body as if the vessels would burst is found; so far as known *Murex* has neither very markedly.

Now we will notice a few other remedies that come to mind while studying this class of remedies. *Stannum* has bearing down pains and prolapsus and its great characteristic is the weakness or goneness in the chest; patient can hardly talk on account of it. Dr. Hughes says. "I have been quite astonished at its power over prolapsus. It seems to strengthen the uterine ligaments." (How about a pessary?) I am sure that *Sepia* is sometimes given when *Stannum* would do better.

Aloe may well be studied in this connection and while it has many important symptoms centering in the pelvic viscera, perhaps the distinctive one is weakness of the sphincters. Feels as if stool, urine, womb and everything else would pass away if she did not control them by force of will all the time. Then Pulsatilla finds its chief indication in its temperament and mind symptoms. Changeableness is a prominent indication. It acts fitfully; pains intermit, flow intermits: well one hour, sick the next; no two chills, no two stools, no two attacks alike. Such a condition with womb troubles always indicates Pulsatilla. It is the great changeable remedy, while Ignatia is the remedy of contraries.

Aurum met. is another very valuable remedy. The womb is hypertrophied and prolapsed in chronic cases, with deep seated and persistent melancholy. Sepia and Murex are sad but Aurum surpasses them both in this respect. The patient wants to die; thinks she has no friends, wants to suicide. I once had a case of this kind who tried to drown herself. After she had taken Aurum 200th these feelings all left her, and she could not understand how she could have felt so, but she did.

Platina is another metal which has in a marked degree the uterine affections which we are considering, and in addition to the nymphomania, and excessive sensitiveness of the genitals before mentioned has a marked mental indication or symptom which I have also cured in a patient, viz.: arrogance, pride or haughty over-estimation of one's self. The case which I cured was one of long standing and had been pronounced insane by two so-called regular physicians, and ordered to the asylum. She imagined herself a queen and myself and others around her, her subjects, and so deported herself. Platina cured her in a very short time and it never recurred.

Now if we had time we might in like manner mention with their especial characteristic indications several other remedies such as Carbo an., Kreosote, Graphites, Natrum carb., Natrum mur., Actea rac., Viburnum op., Helonias, Secale, Ustilago maidis. and others, but enough has been said, not

only to bring out in a degree at least, the value of *Lilium*, especially as a woman's remedy, but to indicate an interesting mode of comparison of the leading remedies of a class.

In closing I may say that after an abundant experience and observation extending over a period of nearly forty years, my conviction as to the value of our peculiar mode of development of the properties of medicines, so as to be able to apply them most effectually for the healing of the sick according to the rules laid down by the great master of our art is not in the least weakened, but grows upon me even until now.

Of course to get a practical understanding of it is no "drowsy pastime of a summer day," but means hard work and plenty of it; nevertheless in this as in other professions it pays to be an enthusiast.

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### ACONITUM NAPELLUS.

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H. P. HOLMES, M. D.

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The Aconite family comprises about twenty varieties, all very virulent poisons. The one we have to deal with is the Aconite Napellus, or Monkshood, the foundation remedy of Homœopathy and of homœopathic therapeutic progress. Dr. Richard Hughes said of it: "If Homœopathy had done nothing for therapeutics but reveal the virtues of Aconitum, it might even die content."

The plant is found growing wild in many parts of Europe, and is cultivated in gardens on account of its bright, showy flowers. It is of the Ranunculaceæ, or Buttercup family, growing to the height of three or four feet, crowned with a beautiful raceme of dark violet, helmet-shaped flowers. Those of you who are familiar with Grecian mythology will remember a very pretty story told of the origin of Aconite. Hercules, in order that he might become immortal, was assigned twelve tasks by Eurystheus under command of Jupiter. The last of these was to go to the infernal regions and bring back alive the three-headed watch-

dog Cerebus, This he did as ordered with no other weapon than his lion's skin. As he came into the light of day and upon terra firma with the furious beast struggling in his grasp, the foam that dripped from the triple mouths of the hellish brute sank into the ground and rose again as the poisonous Aconite. However that may be, we are indebted to mythology for the names of many of our plants and remedies. You know the three Fates were named Clotho, Lachesis and Atropos, from which are derived the names for our deadly Lachesis and Atropia. The plant to be used in medicine should be of those growing wild, as the cultivated plant seems to largely lose its toxic principles, and that growing on the mountain is preferred. The Swiss Alps is the natural home of that most coveted in medicine; the whole plant, exclusive of the root, at flowering time is used in making the tincture.

As early as 1796, Hahnemann wrote of the action of Aconite and of its curative powers as a similarly-acting remedy. He lauds it in the cure of incontinnence of urine, partial paralyses, atrophies and marasmus. To him we are indebted for its introduction into our *Materia Medica*, and the one hundred and five years devoted to its use has only enhanced its value. Aconite, in its proving, developed the fact that it produced heat, hence its homœopathicity to fevers. There is also an alternation of heat and chilliness, showing its similarity to beginning fevers.

The key-note of Aconite seems to be "fear with restlessness." A fear of death, a fear that something will happen, an anxious, excited condition. The pathogenesis records a tendency to predict the day and hour of death. I may say that I have never met with this symptom, though I have met many medical students and first-year doctors who claim to have heard their patients make this morbose prognostication. This symptom need not be waited for in making up the totality of symptoms for the prescription of Aconite. The remedy may be thoroughly indicated without that symptom, though the fear and anxiety are quite commonly met with.

The fear of a crowd, fear of crossing a public street, fear of meeting any gathering of people, I have several times met with and have seen this peculiar mental symptom promptly disappear under the influence of Aconite. Three years ago one of my lady patients developed this mental condition. She had been very fond of society, of church work and of going into public gatherings generally, but all at once she noticed she was actually frightened on coming down town and walking along the business streets. She could not account for this fear, and roundly berated herself for being such a fool, yet the fear possessed her in spite of all her self control. Aconite removed it entirely so that she soon went everywhere with her old time nonchalance.

I wish to express an opinion on this question of fear which I have derived from my own observation. I believe the influence which produces this fright or abnormal fear is due to some nervous action of the heart. This applies as well to the attacks of nightmare which are so frightening to the subject. The patient who is anxious, restless and full of fear during his fever, undoubtedly has a condition which produces a nervous action of the heart. This may not be present in all his fevers, consequently some other remedy may be called for in attacks where the diagnostic features are the same. In heart troubles I have noticed that the patient is afraid he *will* die, while in certain stomach troubles where the sickness is extreme and agonizing, the patient is afraid he *will not* die. In other words, more of an indifference to death is found in bowel troubles than in those due to affections of the heart. It is during the beginning stages of inflammatory diseases that our patients are most excitable. As they realize the possibility of their becoming very seriously sick, their thoughts are more likely to dwell on a possible fatal outcome. As the disease progresses and the condition of tension and excitement gives way to relaxation and exhaustion, there may come a feeling of indifference whether they live or die. It is a grand blessing that our natural fear of death passes away when we are really brought near to it, and we meet the grim monster unalter-



ingly and as one would lie down to a long rest and sweet sleep. Here the Aconite stage has passed, as relaxation, exhaustion and indifference contra-indicate the remedy.

The pulse of Aconite is quick, full, hard, energetic determined, like a swollen stream hurrying onward in a good down grade channel. It is eager and business like, as if it had important work on hand and was determined to do it: and this is correct, for it has its work to do and Aconite will the sooner help it to remove the morbid conditions and restore the system to tranquillity and health. The patient is extremely restless, tossing wildly about with flushed face and thirst for cold water. There may be pains, and these are of a drawing, tearing character. The restlessness is extreme, an uneasy, excited, anxious restlessness. Not the restlessness of Arsenicum, which is that of prostration; nor is it that restlessness following hæmorrhages which so plainly calls for China. There is an internal shuddering, with dry, hot skin, accompanied by sweat on the covered parts with desire to throw off the clothing. Here it is the opposite of Nux vomica, which has a chilliness on every move with a desire to keep warmly covered. We must not forget that Aconite is no better for fevers than Nux vomica unless it is an Aconite case. The face is flushed, a bright arterial hue, caused by the violent, rapid action of the heart, and this same flushed face pales and is accompanied by faintness on rising to a sitting posture. This will show the student of physiology that the excited heart is really a weakened heart, and is not able to as well force the blood through its courses if an added height be put upon its circulatory apparatus. You know it is harder to pump water upward than the same distance along a level, and this the Aconite heart or circulation illustrates. You ask the question: Is it not always so with the circulation? No, it is not; and herein is why Aconite differs from the remedy indicated where the face does not pale on sitting up. Your Gelsemium patient wants to sit up, or at least have the head somewhat elevated. The Belladonna patient is worse with the head lying low for the reason that the human force-

pump drives the blood too forcibly into the hyperæsthetic brain.

A word here seems apropos on the institutes of Homœopathy. There is an irresistible tendency on the part of a majority of our physicians to prescribe a "fever remedy." One of my best homœopathic friends says he prescribes Gelsemium forty times where he does Aconite once. Others fly to Veratrum viride as soon as they meet with a high temperature. This is wrong both homœopathically and practically. Searching for a "fever remedy" or a remedy for any diagnostic or pathological condition is the greatest stumbling-block in the homœopathic progress to success. Aconite, Gelsemium, Veratrum viride and their congeners, are fever remedies only when fully indicated, and Carbo veg. Lycopodium or Sulphur are just as useful when called for. Too few of our practitioners carefully take the symptoms of the case and prescribe the simillimum, and yet they are not practicing homœopathy unless they do so. Hahnemann so carefully cautioned us on this same subject when he used the following words: "It is indispensable that in all morbid conditions in which Aconite is given, the chief symptoms of the malady, therefore also of the acute disease, should be found accurately reproduced among the symptoms of Aconite; the effect is then astonishing."

There is a routine method of prescribing for acute diseases, against which I have long contended for the reason that the effect is suppressive and not curative. The most prominent features of a disease might be brought under control, but there would remain effects of the seizure that took on a chronic tendency, or left the patient predisposed to a future attack. Veratrum viride or Gelsemium I am certain may jugulate a pneumonia so that the patient seems to have fortunately escaped going through the whole course of the disease; but the patient does not seem to fully regain his health and there follows a train of symptoms that often leaves the patient an invalid for a disproportionate length of time.

This calls up a bon mot perpetrated on me by a physi-

cian who is a royal good fellow, but an alternator and an "applicator," if I may coin the term. We were discussing the single remedy versus alternation in regard to prompt results. He cited these ulcerated, patchy sore throats, which savor so much of diphtheria, and offered to bet me that he could take two remedies in alternation and a gargle or spray and get his patient out quicker than I could with straight Hahnemannian treatment. My answer was that admitting it was possible he could do so, my patient would be cured and stay cured while his would have repeated attacks of his disorder. "Well," he replied, "d— it! ain't that what you want?"

A high temperature and a rapid pulse are necessary in the progress of an inflammatory trouble. He who aims to control the ravages of the disease by forcibly lowering the temperature and pulse is about as wise as would be the man who attempted to reduce the congestion in railroad freight traffic by hitching a mule team to a fast freight. The plainness of this error has been repeatedly shown and sadly proven by forcing temperature and pulse down with the coaltar products. Patients are killed in that way, for the drug-embarrassed circulation cannot carry off the morbid stock on hand.

This brings me back to the point of again emphasizing the importance of searching for the simillimum and not for the remedy based on the diagnosis or applied for a single feature of the disease. Franz Hartmann, while a member of Hahnemann's household saw the great master prescribe for a case of fig warts and asked what remedy was given. Hahnemann told him to take the record and search the materia medica. This was not satisfactory and when, at the end of a month, the patient returned without a trace of the warts, Hartmann could contain himself no longer. He went to the study early in the morning before Hahnemann came in and opened the case book. The prescription was Chamomilla 30, three powders and placebo. He confessed his sin to Hahnemann and urged him to tell why he had given Chamomilla for fig-warts. "Ah, have you done

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I wish to express an opinion on this question of fear which I have derived from my own observation. I believe the influence which produces this fright or abnormal fear is due to some nervous action of the heart. This applies as well to the attacks of nightmare which are so frightening to the subject. The patient who is anxious, restless and full of fear during his fever, undoubtedly has a condition which produces a nervous action of the heart. This may not be present in all his fevers, consequently some other remedy may be called for in attacks where the diagnostic features are the same. In heart troubles I have noticed that the patient is afraid he *will* die, while in certain stomach troubles where the sickness is extreme and agonizing, the patient is afraid he *will not* die. In other words, more of an indifference to death is found in bowel troubles than in those due to affections of the heart. It is during the beginning stages of inflammatory diseases that our patients are most excitable. As they realize the possibility of their becoming very seriously sick, their thoughts are more likely to dwell on a possible fatal outcome. As the disease progresses and the condition of tension and excitement gives way to relaxation and exhaustion, there may come a feeling of indifference whether they live or die. It is a grand blessing that our natural fear of death passes away when we are really brought near to it, and we meet the grim monster unflin-

ingly and as one would lie down to a long rest and sweet sleep. Here the Aconite stage has passed, as relaxation, exhaustion and indifference contra-indicate the remedy.

The pulse of Aconite is quick, full, hard, energetic determined, like a swollen stream hurrying onward in a good down grade channel. It is eager and business like, as if it had important work on hand and was determined to do it: and this is correct, for it has its work to do and Aconite will the sooner help it to remove the morbid conditions and restore the system to tranquillity and health. The patient is extremely restless, tossing wildly about with flushed face and thirst for cold water. There may be pains, and these are of a drawing, tearing character. The restlessness is extreme, an uneasy, excited, anxious restlessness. Not the restlessness of Arsenicum, which is that of prostration; nor is it that restlessness following hæmorrhages which so plainly calls for China. There is an internal shuddering, with dry, hot skin, accompanied by sweat on the covered parts with desire to throw off the clothing. Here it is the opposite of Nux vomica, which has a chilliness on every move with a desire to keep warmly covered. We must not forget that Aconite is no better for fevers than Nux vomica unless it is an Aconite case. The face is flushed, a bright arterial hue, caused by the violent, rapid action of the heart, and this same flushed face pales and is accompanied by faintness on rising to a sitting posture. This will show the student of physiology that the excited heart is really a weakened heart, and is not able to as well force the blood through its courses if an added height be put upon its circulatory apparatus. You know it is harder to pump water upward than the same distance along a level, and this the Aconite heart or circulation illustrates. You ask the question: Is it not always so with the circulation? No, it is not; and herein is why Aconite differs from the remedy indicated where the face does not pale on sitting up. Your Gelsemium patient wants to sit up, or at least have the head somewhat elevated. The Belladonna patient is worse with the head lying low for the reason that the human force-

that?" said Hahnemann; "then take the book and read further, read the *Symptomen-codex* and see if it were possible to give any other remedy than *Chamomilla*, when such symptoms were present." And Hartmann was satisfied. Oh, my brethren of too little faith! Would that I could gather you into my arms and have some "heart to heart talks" with you over the great works of our masters in comparison with the eclectic, guess-work, irregular methods so prevalent in our school.

The indications for *Aconite* in fevers are not numerous, but are very positive. It is the remedy for tension, or, in other words, for strong active conditions. It is not for prostration, for weakened, enervated conditions. It is for the high grade, excited, anxious, restless, unweakened conditions such as are often found in the beginnings of acute inflammatory cases. This remedy is the great pulse reducer in the excitable, sthenic fevers, and the reduction is made curatively. It is here the opposite of *Gelsemium*, which has the fever of prostration and all the symptoms of relaxation. There is no need to ever get them confounded. *Aconite* for tension, *Gelsemium* for relaxation. In Hahnemann's time the great antifebrile was phlebotomy, but *Aconite* took the place of the knife in the new school and became known as the homœopathic lancet, for it did away with the ever present practice of blood-letting. Fevers that physicians had been in the habit of trying to cool by copious and frequent phlebotomies were found to respond much more kindly to minute doses of *Monkshood*, and there were none of the evils of the devitalized conditions following the withdrawal of the very elixir of life. Witness the deaths of Schiller, Byron and Washington from venesection. The old school physicians attempted to imitate Hahnemann in the use of *Aconite*, but, not believing in the immaterial doses, they failed to reap the benefits and made their patients worse instead of better.

Hahnemann, who used *Aconite* a great many years, advocated the higher potencies, as then known, if one wanted the promptest results, and as early as 1830 he used the 18th

decimal potency. Later he adopted the 30th, and claimed a single dose would remove the dangerous symptoms so that in twelve or sixteen hours another remedy might have its indications. From this we find that our great teacher thoroughly understood his business for, Aconite, though ever so well indicated, may not be able to remove all the symptoms. Carroll Dunham so beautifully illustrated this by comparing a fever calling for Aconite to a violent storm approaching and passing over a village. After the wind had died away and all features of the storm itself had passed there might remain scenes of devastation and desolation, wrecked buildings and debris to be cleared up. Some other remedy must do this and Hahnemann said that Sulphur was often the remedy. Few Homœopathic physicians think of this today, although Hahnemann's advice is as good now as when he first gave it.

Aconite is the remedy *per se* for a great many of the beginning features of disease, and if given promptly will remove all further trouble and danger. I remember hearing the late Prof. George A. Hall in his lectures quote one of our best authorities who called this remedy the "Little Sampson," and said if he could only have one of the homœopathic remedies he would choose Aconite. From the standpoint of a physician I would differ from that authority for this reason: Aconite is the remedy for the very first onset of the disease, and people seldom call a physician early enough to find the patient in the Aconite stage.

In addition to its usefulness in fevers and inflammations, some of its principal uses may be in paralysis, acute local rheumatism, stiff neck, lumbago and in asthma. In rheumatism of single muscles, especially where there is numbness and tingling, this remedy has done excellent work and should not be forgotten. In delirium tremens it ranks with Belladonna, Hyoscyamus and Stramonium in the wildness of its mental condition and terrible imaginings. In traumatic conditions and especially tetanus, as well as a sheet anchor remedy for accidents following surgical work, our remedy should not be overlooked. It has done splendid

work in tetanus and ranks with Arnica in usefulness to the surgeon. In sun-stroke it should be thought of along with Glonoine. In laryngitis and especially spasmodic croup it is of great service and formed one of the four croup powders of Boenninghausen. It has been said that more people have been converted to homœopathy by the action of Aconite in croup than in any other way. In all the abdominal inflammations we should remember this remedy. It reduces congestive action, and such affections as peritonitis, enteritis, appendicitis, and in fact all the 'itises will rapidly come under control if Aconite be promptly used. There is a left-sided pain in young women, diagnosed anything from heart disease to ovaritis, that is a key-note indication for Aconite.

The field of usefulness of Aconite covers a legion of diseases and I would simply refer all our physicians, especially those older in practice, to renewed study of the remedy. The tendency of our practitioners towards eclecticism, the too common use of Gelsemium, the use of the coal-tar derivatives and of the numerous pharmaceutical fads has undoubtedly led us away from one of our very best remedies, and not for better results than can be attained by our old friend and homœopathic stand-by, *Aconitum napellus*.

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### LAC CANINUM.

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SAMUEL F. SHANNON, M. D., Denver, Colo.

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Were one hundred homœopathic physicians to be asked to tell what this remedy is used for probably ninety would give the same answer; namely, "for diphtheria." Now those who have looked up the symptomatology of this remedy will have found a very interesting study, and also that the remedy has a good deal for study and use.

The mental character of the Lac caninum patient is as follows: he is very absent-minded; very restless; cannot collect his thoughts; is impressed that all he says is a lie; thinks he is looked down upon by every one; that he is of absolutely no consequence in this world. Here we have



exactly the opposite condition to that which obtains with the Platina patient who is very haughty, proud, arrogant; looks down with contempt upon every one and thinks no one but himself is of any consequence. Lachesis and Stramonium have also these symptoms of pride and haughtiness and arrogance but they have not the feeling of contempt for others. Palladium has an extraordinary desire to toady to others; great desire to obtain the good opinion of others and they depend greatly upon the opinions of others; desire to be flattered; or they may imagine themselves neglected; bad effects of wounded pride.

Lac Caninum has visions of snakes being about her; these visions are worse during the day, she is very seldom troubled with them at night and scarcely ever dreams about them at night. She worries lest little pimples which appear during menstruation should become little snakes and coil themselves about her. She cannot bear to be left alone an instant. She has no desire to live. At times she cannot bear the clothes to touch the abdomen, (this we find also under Lachesis). During nervous attack she must keep the fingers separated, she cannot bear them to touch each other. We find this remedy indicated for several kinds of headaches, either frontal or occipital; they are usually better on going into a warm room; useful for headaches, commencing in the nape of the neck and settling in either the right or left side of the forehead. Headaches accompanied by severe pains in the lumbar region which become better as the throat becomes worse and vice versa.

There is a peculiar throat symptom which is found under this remedy and is well worth remembering, namely, breathing seems to cease the moment he goes to sleep (must keep awake in order to breathe, respiration apparently becoming a voluntary rather than an involuntary act.) There are several other remedies that have a similar symptom, namely, Gelsemium, Chlorum, Grindelia, Lachesis and Opium.

Next we will consider the action of the remedy for diphtheria. The patient cannot bear to be left alone, has no desire to live; headache which is accompanied by severe lum-

bar pains, which pains become better as the throat becomes worse and vice versa; fluids escape through the nose when drinking; epistaxis when swallowing or talking; at four in the afternoon the face becomes expressive of great pain and anxiety; the throat and neck are very sensitive to external touch or pressure, pricking sensation in the throat as if it was full of sticks; the throat symptoms are worse from empty swallowing and from swallowing cold drinks but somewhat relieved by swallowing warm drinks; there is a varnished appearance to the diphtheritic patches or they may look white like china; the patch may make its first appearance on either side and rapidly seesaws from one side to the other; there is swelling of the submaxillary and lymphatic glands; tickling in the throat when drinking; one side of the nose is stopped up, the other side being free and discharging thin mucus or thin blood; breathing is hoarse and croupy, patient can only breathe through the mouth; there is constipation with frequent urging pains in the rectum; the urine is scanty and there is a large percentage of albumin and mucus; the thick, dirty grey diphtheritic membrane covers the borders of the epiglottis; the patient is worse after sleeping; there are pains in the head, back and limbs; the skin of the body assumes a dark red color bordering on purple; the pain in the left side of the throat extends to the left ear on swallowing; the throat is better from drinking warm drinks; there is nosebleed when speaking or swallowing; the membrane disappears and hemorrhage occurs and again as the hemorrhage becomes less the membrane increases; thirst for a little at a time and often, or for large quantities at frequent intervals; desires a drink of warmish water with a pinch of salt in it or else he craves milk.

There are several remedies which are similar to *Lac caninum* and as useful for diphtheria: *Lachesis* has great asthenia from the very start; there is an amount of prostration out of all seeming proportion to the local evidences of the disease; but *Lachesis* has more difficulty in swallowing liquids than solids; liquids when the patient attempts to

swallow them, escape through the nose; the patient is worse after sleep; the membrane always commences on the left side of the throat and goes over to the right side; there is a livid color of the inflamed parts with dull, dry appearance, and but little swelling; there is intense pain for the seemingly small amount of inflammation; when efforts are made to protrude the tongue; it seems to catch on the teeth or trembles; when Lachesis is the remedy the tongue when protruded always turns to the left side; the glands of the neck as well as the cellular tissues are swollen; there is excessive perspiration and cardiac debility even before the exudation; the patient cannot bear warm drinks (reverse of Lac caninum); patient spits up large quantities of ropy mucus.

Apis mel. has also great prostration and debility from the very start; diphtheria which progresses insidiously from the very start; small amount of pain accompanying the intense and excessive inflammation; there is much more oedema of the throat and glottis under Apis; the membrane is of a dirty gray color; cold water relieves the itching and stinging; usually the diphtheritic patches appear first on the arches of the palate over the uvula; the breathing is very hard on account of the oedema; there is either thirstlessness or else abhorrence of water; the urine is scanty and painful and is voided drop by drop with intense burning; there is tendency to cardiac failure.

Mercurius cyan. has adynamic fever from the very start; putrid diphtheria; infiltration of the cellular tissue of the neck, and swelling of the salivary glands; great fetor oris; the nasal cavity, mouth, fauces, pharynx and larynx are covered by a dark gray or green leathery exudation and ulceration; there is profuse epistaxis and incessant salivation; very free perspiration on the least motion; excoriating discharge from the nostrils; aversion to all food; heart is so weak that the least change of position causes fainting.

Carbo veg. is suitable for cases where there is sepsis and decomposition of the blood; hemorrhages of a low type;

dark, rather fluid blood flows persistently for hours or even days.

*Crotalus* has persistent hemorrhages; blood oozes from the nose and mouth, not merely from the posterior nares but escapes from the nasal cavity; the fauces are very much swollen and dark red; frightful headaches; vomiting and diarrhoea; excessive prostration, can hardly raise himself up in bed; gangrene of the fauces and tonsils.

Nitric acid has nasal diphtheria; discharge from the nose is watery and very offensive, excoriating every part that it touches (*Arum tri.*); white deposits in the nares; ulcers in the mouth with stinging in them as if full of splinters; difficult and painful deglutition; excessive salivation; fauces and glands are swollen; fetor oris; chilliness but yet aversion to heat; nosebleed; distress and uneasiness in the stomach with rejection of all food; great uneasiness; excessive prostration; deep seated local affections; intermittent pulse.

*Mercurius iodatus rub.* presents the following symptoms: swallowing of either fluids or solids is painful; patches are mostly on the left tonsil; velum elongated; must hawk and swallow from the accumulation of saliva or mucus, or from a feeling as of a lump in the throat; livid patches; exudation is limited, transparent and easily detached; the discharge is thin and offensive; enlarged glands; wants his food well salted (*Natrum mur.*); only slight thirst.

*Phytolacca*: Creeping chills, and backache in the beginning; throat feels as if it were a large, empty cavern; feeling as if a hot ball was lodged in the fauces or else a sensation as after swallowing choke berries; pains in the head, back, and limbs worse from the least touch on the neck; pains shoot into the ears on swallowing; great prostration and restlessness; livid exudation on the tonsils and fauces; these parts are greatly inflamed and swollen, sore and sensitive, worse on taking warm fluids; breath offensive; cannot stand; on rising up in bed he became faint and dizzy; high fever; albuminuria.

*Kali mur.*: Numerous gray ulcers in the mouth and

throat; excessive secretion of tough, stringy mucus and saliva; epistaxis; ravenous hunger followed by total anorexia; dryness and pains in the throat; difficult swallowing; excessive micturition; hematuria; hoarse voice; incessant cough; difficult respiration; chest pressed together; watery froth exuding from the mouth.

Kali phos: Marked putrid gangrenous condition and fearful stench from the mouth. Malignant diphtheria.

Lac caninum has also symptoms of the epigastrium worthy to some extent of attention. There is a gnawing, hungry feeling not relieved by eating; everything she eats except fish makes her sick; the very thought of taking milk makes her sick (the nearest analogues for this gnawing, hungry feeling are Anacardium, Lachesis, Chelidonium and Petroleum.)

We also find under Lac caninum burning in the epigastric region; weight and pressure in the stomach as from a stone; very thirsty; cannot eat or drink anything after diphtheria without having pains in the stomach. For ovarian pains Lac caninum is the remedy especially when they occur in the right ovary; there is heat in the uterine and ovarian regions with the menses; inflammatory and congestive condition of the ovaries before the menses; sharp pain in the right ovarian region relieved by flow of bright red blood (Lachesis has pain in the left ovarian region with tendency to go to the right side, relieved by the flow of the menses but returning on the cessation of the flow.)

Lac caninum may be used for ovarialgia also when there is constant burning pain in the left ovarian region extending from the left leg even to the foot. Here again you will notice the similarity between Lac caninum and Lachesis.

Escape of flatus from the vagina calls for either Bromium, Lac caninum, Lycopodium, Nux moschata or Tarantula.

Lac caninum is recommended for all cases where it is deemed advisable to dry up the milk.

Expectoration of thick, profuse, tough white mucus in masses in coryza may require Kali bi. or Lac caninum, the

former having more of a yellow color to the expectoration.

The nervous attacks calling for *Lac caninum* are as follows: suffering from very unpleasant nervous symptoms; not low-spirited but weak, and nerves so thoroughly unstrung that she cannot bear one finger to touch the other, and she often feels as though she would lose the use of her limbs. Sensation as if the throat was closing up; this sensation is between the throat and the nose; feels as if something in the throat was enlarged or relaxed; has a desire to keep the mouth open; talking is difficult; disposition to talk through the nose; sometimes cannot swallow as there seems to be a sort of muscular contraction in the throat; sleep is restless; frequently wakens with sick headache, which appears to begin at the nape of the neck; is afraid she will be unable to perform her duties.

*Ignatia* has many symptoms of the throat and nerves similar to those of *Lac caninum* but those cases for which *Ignatia* is suited are usually the result of protracted grief.

*Lachesis* has a sensation as of a lump rising up in the throat; cannot bear the least pressure externally anywhere; she awakens from sleep distressed and unhappy, as from loss of breath. The aggravation in the *Lac caninum* cases of diphtheria is in the morning of one day and in the evening of the next day.

A rather peculiar symptom of the nervous system found under *Lac caninum* is that she feels when walking as if she were walking on air and when lying she feels as if she did not touch the bed (similar symptoms are found under *Asarum*, *China*, *Coffea*, *Natrum mur.*, *Nux vomica*, *Opium*, *Rhus tox*, *Spigelia*, *Stramonium*, and *Thuya*.)

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Philadelphia has had a small-pox visit and scare and the local societies have given themselves over to a discussion of the pros and cons of vaccination as a preventive. As one member expressed it, "We seem to be between the devil and the deep sea; the perils of vaccination and the dangers of small-pox". It is said not to be uncommon to see a policeman guarding a quarantined house on which is posted the yellow notice, in almost every part of the city.

## CORRESPONDENCE.

### Medical Events In Bay City.

#### INTERESTING LETTER FROM A VALUED CORRESPONDENT.

The Saginaw Valley Homeopathic Medical Society was organized at the office of Dr. E. G. Kinsman in Bay City last month, at which time a constitution and by-laws were adopted and officers elected for the ensuing year. The president is Dr. C. W. Edmunds, Bay City; first vice-president, Dr. J. W. Hutchinson, Saginaw; second vice-president, Dr. W. A. Seechrist, Alpena; secretary, Dr. Harriett A. Knotz, Saginaw; treasurer, Dr. Nina Ely, Bay City; censors, Dr. J. H. Colwell, Saginaw; Dr. Edwin S. Ely, Bay City, and Dr. Clarence Williams, Alpena.

The society starts off with a good deal of enthusiasm and promise of success. The next meeting will be held in Bay City, January 8, 1902.

Illustrative of the lack of care in the selection of the homeopathic remedy by many homeopathic physicians, who have never been taught the straight and narrow way, let me cite an incident which recently occurred in this city. A certain homeopathic physician had been "feeling mean," for which he took Nux; his skin was dry so he took Arsenicum; then it hurt him to turn in bed and Bryonia was called upon and when a diarrhoea showed itself Aloe was asked to help. Still he was no better. He kept on feeling just as "mean" as before. I looked him over and found the following picture:—Early morning diarrhoea; not much pain, but burning at the anus; dry, scaly skin; rather stooped. These symptoms called for Sulphur, and one dose of the 200th cured the case.

It wearies me the way some physicians prescribe. They will say here is a case of liver or some other trouble and we will give this, that or the other remedy, because the books say it is indicated in such troubles. Instead of going about it accurately to see what remedy is good in the par-

ticular case in hand they just shoot away with "any old thing." This kind of work does neither the patient nor the doctor any good.

We are not only curing by following the straight and narrow way, but are converting good families to our way of thinking and doing. The homeopathic doctors all bow to Hering's teaching of materia medica, and I should like to impress upon every student at that college the importance of making that his chief study. He will need it more than all things else when he gets out in practice. I sincerely hope the time may come when we can do something for Hering College, to show our appreciation of what it has done for us and of the practical instruction we received there.

I have some good side news for the profession. Dr. Alvord, the only member of the state board of health who stood in the way of our college, has been removed and now it is said there will be established a reciprocity which will cover Michigan, Illinois, Indiana, Ohio and Wisconsin. This means that the credentials of a physician in one of these states will entitle him to a license in either of the others, if this reciprocity idea is carried to fruition, as it should be.

Our new society embraces in its membership two old-school physicians, who are interesting themselves in and trying to practice homeopathy. We enjoy having them with us, and they are getting to be somewhat strong in the faith.

I think I have two, new students for Hering College for next season. We are doing all we can to lay the right foundation, and hope to be successful and to send you students every year or two. If every alumnus of Hering College would but do this how the old halls would resound and how the faculty would be made glad.

E. S. ELY, M. D.

[Indeed the faculty would be glad, and the public and profession would be the gainers by having more true homeopaths among them. Let every alumnus do his part and the



spirit of Hering and Hahneman will live forever in medicine. ED.]

### Washington City Homeopathic Society.

#### INTERESTING REPORT BY A SPECIAL CORRESPONDENT.

The fourth yearly meeting of the Washington City Medical Society was held on the evenings of December 13th and 14th.

Dr. Alice Burritt read a paper on *Apis mellifica* which ranged from the time of Solomon to anarchism and the abuse of the Queen bee, including comparisons with many remedies.

Dr. Wm. R. Andrews of Rockville, Md., gave the indications for "Some Gynæcological Remedies," in an excellent manner, and said that after ranging with *Sepia* from the 6th to the 200th he finds that his patients do better under the latter.

Dr. E. C. Price of Baltimore, read a paper on Iron, which he doubted the homeopathic action a habit of his which, unfortunately, seems to be growing.

Dr. Chas. B. Gilbert read a paper on "*Calcarea*, *Nux vomica* and *Sepia* in Sleeplessness," which are very much alike in that condition.

The night of the 14th was visitors night and papers were read by Prof. Copeland of Ann Arbor, on "The Surgical Uses of Paraffin Injection," and also on "Disease of the Nasal Cavities," both able and instructive.

There was a paper by Prof. Clarence Bartlett of Philadelphia, on "Some Varieties of Glandular Enlargements, From a Medical Standpoint," which was interestingly and ably handled, and especially with reference to Hodgkin's disease as differing from tuberculosis of glands.

Lastly we had an excellent paper by Prof. Van Lennep of Philadelphia, on "Appendicitis Complicating Pregnancy," in which he advocated operation just soon as as the diagnosis can be made, no matter when the complication occurs, even during labor.

Two cases were reported by Dr. Macdonald; one being an operation in which a large amount of surplus fat was removed from a very peudulous abdomen in a woman, the other the making of an artificial vagina in a recently married woman of 23 years, who had never menstruated; the last was particularly ingenious and was successful as far as coition was concerned. The clitoris was present and also the external labia.

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### The Improvement Pleases Him.

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Uniontown, Pa., Dec. 23, 1901.

*Editor Medical Advance*:—I enclose two dollars for a year's trial subscription to your magazine. This seems a large price to pay for a small journal, yet I hope to receive ample returns for my investment, if you will continue to improve the quality as you have in the past.

I have had the pleasure of glancing over the past twelve numbers and the deciding point was the marked improvement as the number increased.

With seasonable wishes I remain,

Yours very truly, Wm. Wilson. M. D.

[It isn't always the size of the page nor the number of pages that count in value in a medical journal; it is the quality of material found therein. THE ADVANCE means to excell in this, to be helpful and homeopathic. And the profession is showing more than ever that it wants and appreciates this kind of meat and drink. ED.]

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The Homeopathic Medical Society of Chicago seems to have degenerated into a slimly attended affair. At the last meeting not one of the college surgeons attended to discuss an excellent paper by Dr. Shears on the surgery of the stomach and intestines, nor did a college gynecologist attend to discuss a splendid paper by Dr. Bailey. Not an ex-president was there, nor was even the president in evidence. It has become the rule for essayists and appointed disputants to appear only on the occasions of their own part of the proceedings, and those who have been president seem to consider themselves honoring the society by dropping out as soon as their terms expire.

## EDITORIAL.

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All Contributions, Exchanges, Books for Review and other communications should be addressed to the Editor, 5142 Washington Ave., who is responsible for the dignity and courtesy of the magazine, but not for the opinions of contributors.

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### LATENT PSORA AND ACUTE DISEASES.

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Many homœopaths have graduated from our homœopathic colleges without ever having heard a lecture on the *Organon*—the bible of homœopathy—much less having studied its principles as they were compelled to study anatomy and physiology. Others appear to think a single reading all that is necessary to master the most profound treatise on scientific therapeutics ever produced in the history of medicine. As well attempt to master Euclid's geometry by a single reading. They have little conception of the height and depth and breadth or the far-reaching possibilities of Nature's law of similars when properly applied in the healing of the sick. Those who neglect this study can never hope to be thorough in their work, can only expect to become superficial healers, for the great world of cure is beyond their reach or their ken. Here is a living, every-day example by way of illustration.

In the *Organon*, § 72, Hahnemann defines acute diseases as something more than what is found in general pathology, something that bears directly on the treatment of the individual rather than on the treatment of the disease :

As regards acute diseases, they are partly of such a kind as attack human beings individually, *the exciting cause* being injurious agencies to which they are particularly exposed. Excesses in food, or an insufficient supply of it, severe physical impressions, chills, overheatings, dissipations, strains, etc., or physical irritations, mental emotions, and the like, are exciting causes of such acute febrile affections; in reality, however, they are generally only a *transient explosion of latent psora*, which spontaneously returns to its dormant state, if the acute diseases were not of too violent a character and were soon cured.

This "outburst" of latent psora, when studied from the viewpoint of Hahnemann's Chronic Diseases and applied in the treatment of many of our every day ailments, of a more or less severe character, has proved one of the most valuable hints we have had in over forty years' practice. Latent psoric and latent tubercular affections manifest themselves in many diseases under varied names bearing the same general character. The "outburst" belongs to the individual, and both present relief and future cure or prevention are much simplified when we comprehend the probable cause.

Let us illustrate by a few diseases prevailing in this latitude during the winter, with which we all have to grapple more or less, and in which our success in symptomatic treatment often depends upon our recognition of the miasms of Hahnemann. The so-called sporadic "la grippe," not the epidemic influenza, from which many patients annually suffer between January first and April, during the depressing effects of severe cold, is an "explosion" of latent psora or tuberculosis. The acute symptoms—the chills, myalgia, bone pains, headache, etc., as well as the subsequent fever, may be relieved with *Baptisia*, *Bryonia*, *Eupatorium*, *Gelsemium*, *Lac caninum*, *Mercurius*, *Nux Rhus*, etc., according to individualization, but the lingering, prostrating sequellæ require the chronic simillimum. When a patient complains of the dread of these annual "outbursts", which disable for weeks or months, the constitutional remedy may so correct the diathesis, the miasm, as to greatly mitigate its severity or prevent its appearance. Or if a patient complains: "I have never been well since that attack of la grippe," or "typhoid," it means he has not received his constitutional remedy; that the acute "outburst" alone has been cared for, and that from repeated attacks some form of localized psoric or tubercular disease will develop.

Suppurative tonsillitis, quinsy, is an illustration of an "explosion" of latent psora, the acute manifestation of which calls for *Apis*, *Baryta*, *Belladonna*, *Lac caninum*, *Lachesis*, *Lycopodium*, *Mercurius*, *Psorinum*, *Sabadilla*,

etc., but the monthly, quarterly, semi-annual or annual recurrence can only be prevented and the tendency eradicated by the constitutional similitum that will cure the psoric or tubercular diathesis.

Even the removal of the tonsils will not prevent it, for the most obstinate attacks we have ever attended occurred in patients whose tonsils had been removed and who had been assured that quinsy would never recur, as there were no tonsils to suppurate. But the removal of the tonsils does not remove the cause that produces quinsy; the psoric diathesis remains uncured, and this eradication of constitutional ailments in the psoric, tubercular and syphilitic is the greatest medical triumph of the 19th century.

Again, typhoid, typhus or continued fever is a form of "outburst" rarely seen in non-psoric or tubercular subjects, and is often mismanaged because in origin, course and pathology it is misunderstood or the psoric element is overlooked. This may not conform to modern pathology and its germ theory; but is it not about time to again revise modern pathology? And the next step in the onward march of general medicine may be, as it should be, in the direction of Hahnemann's therapeutic facts, which, after a century of the severest experimental tests, shine with renewed lustre in every fresh encounter either with a well-known or an unknown disease.

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### THE OUTLOOK FAVORABLE.

The announcement of last month that THE MEDICAL ADVANCE will be improved and made more valuable during 1902 has created satisfaction among its friends, from whom are being received many congratulations and commendations.

For some years past it has not been possible to devote the time and attention to this work which its importance demanded. The cares and excations of a large general practice, the duties of the deanship of Hering Medical College, and the hours which have had to be given to study and research in the interests of authorship have consumed so

much time and imposed so much labor that what was formerly a journalistic pleasure and pastime became irksome and laborious. There are only twenty-four hours in a day. Efforts to induce others who might become capable of giving to the Hahnemannian homeopath a satisfactory journal have not been availing, however, and now the labor is resumed under conditions which make it possible to do much better than in the recent past.

In the nature of things this labor has to be largely one of love and duty. It is not possible to make it sufficiently remunerative to justify the expenditure of time and energy necessary to make it a success, nor will it be until the leaven of pure homeopathy shall have been so disseminated as to have leavened the whole lump. Therefore the cordial support and indulgence of everyone who believes in and tries to practice the better way are most earnestly desired. An editor can only produce an acceptable journal when its contributors give him good material with which to fill its pages. No one desires a one-man organ. To be welcome and valuable as a purveyor of medical truth and helpful facts there are required the experiences and views of a large number. Bedside nuggets and clinical verifications form a nucleus of the necessary pabulum, materia medica studies, analyses of both successful and faulty practice, and general medical and surgical information, especially as these relate to homeopathy, completing a desirable menu. These are solicited, and to them will be added a page or two of current news-notes and items, which of course, must come from the profession. Hering Medical College and Hospital will also be represented in each issue, and thus it is hoped a very satisfactory journal will be produced during the year upon which we are now entering.

If the encouragement which has followed the announcement of the intention to improve THE ADVANCE is to be taken as an earnest of the purpose of its friends to assist in this commendable effort, then Hahnemannian homeopathy will be sure to have at least one thorough-going and valuable exponent. To this end every Hahnemannian, old and

young, wherever located, is cordially invited to co-operate. The time has never been riper than now for the propagation of homeopathy as Hahnemann knew it, nor has there ever been a time when its principles and practice stood so in need of exemplification and defense. Let us arouse to the responsibility which confronts us and each do his part.

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**A Notable Departure.**—With this issue THE ADVANCE begins the presentation of a series of photographs of eminent Hahnemannians, the first being that of our beloved Hering. This feature will adorn the journal each month during the year. At times we shall offer a frontispiece of a single subject, at others a group of four or five well-known Hahnemannian homeopaths of the United States and Europe. These will be worth preserving and framing, and will serve as neat office or library ornaments. It is believed this departure will be appreciated, since it will bring to our readers the faces of colleagues of whom they have heard and known but from whom distance widely separates. The journals have made us familiar with the surgeon's portraits, why not the leading living Hahnemannians?

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**The Substance of Things.**—Please do not forget that a very essential part of medical journalism is the subscription price. Early remittance of this by every subscriber will enable us to continue to enlarge the improvements in the journal. It will be of assistance and value also if every Hahnemannian will send in his card for publication in our Hahnemannian Directory. By this means loyal homeopaths everywhere will be able to keep more or less in touch with each other, and to know to whom to send shifting and transient patrons for attention. The subscription price is two dollars. With the card the price is three dollars. THE ADVANCE needs and desires both.

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**In Memoriam.**—Dr. Sarah Smith, one of the ablest Hahnemannians of the West, died of organic disease of the heart, at Council Bluffs, Ia., Dec. 23d 1901. She was born

near Joliet, Ill., Feb. 15th 1850, began the study of medicine in the office of Dr. A. P. Hanchett, graduated from the Hahnemann Medical College, Chicago, in 1887, taking a post-graduate course in Philadelphia a few years later. She began practice as a partner of her preceptor, and had been continuously engaged in the active duties of her profession in Council Bluffs until the present illness. We were called to see her in May and found that she had been greatly overworked by the unremitting attention to a few old patients to whom she was greatly attached, although most of them were incurable. Contrary to the advice of her friends she persisted in what she considered her duty to her patients until unable to leave her room. This persistence in what she considered her professional duty, to the poor as well as the rich, was a characteristic that marked her career as a physician, and has left an indelible record in the community in which she labored. Many a tearful tribute of sorrowing love was laid on the bier by those who had lost not only a physician but a friend; for they had found that it was not the physical aches and pains alone that she sought to relieve.

Dr. Smith was not only a true physician, a genuine healer of the sick in its highest and broadest sense, enthusiastically devoted to her profession, but her helpfulness and unselfishness were of the practical kind, willingly expended in the relief of suffering wherever found. She was a true follower of Hahnemann, one of the best prescribers in the Mississippi Valley, and universally beloved and respected by her colleagues.

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The city of Havana, Cuba, formerly the post-hole of the Western Hemisphere and a constant menace to the Southern coast of the United States, is now one of the healthiest large cities of the world. With a population of near three hundred thousand its death rate for November is placed at but 19.58 per thousand of population per annum. For the first time since 1762 there was no case of yellow fever in the city in November. Thus it seem that the Spanish-American war was not altogether in vain from other than the military viewpoint.



## CURRENT NEWS-NOTES AND ITEMS.

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In France they are called Parasites, in Germany they are Germs, and in Ireland they are called Mikerobes.

The International Hahnemannian Association will meet in Chicago, probably June 24th, at the Chicago Beach Hotel.

Hering College resumed duty on Monday, December 30th, both faculty and students refreshed by their brief vacation.

The American Institute of Homeopathy will meet in Cleveland, June 17th, with headquarters at the Hollenden Hotel.

The annual meeting of the Ohio State Society will be omitted in consequence of the meeting of the American Institute in Cleveland.

The officers of senior class of Hering College are: president, H. J. Aldrich; vice-president, Nora Donahoe; secretary and treasurer, Edward R. Lindner.

Among eleven new physicians placed by the commissioners of Cook County on the civil service list by virtue of successful examinations the name of our Dr. R. N. Tooker stands third, with an average of 85.83 per cent.

The officers of the Central New York Homeopathic Society for 1902 are, president, Dr. E. P. Hussey; vice president, Dr. W. W. Johnson; secretary and treasurer, Dr. S. L. G. Leggett; censors, Drs. Nash, Ross and Alliaume.

Dr. Carl Theodor Gramm has opened a biological and photomicrographic laboratory office at 103 State street, devoting special attention to the preparation of bacteriological and other cuts and illustrations for medical journals and books.

Jot down your verifications and cures and take note of your disappointments and failures, sending them to **THE ADVANCE** for publication. In this way a helpful and scientific materia medica is sure to be developed to the fullest limit of value.

The Clinical Society of Hahnemann Medical College not having found it advantageous to hold its meetings down town will hereafter convene at the college, in the small amphitheatre. These meetings are held on the last Monday evening of each month.

A Physicians' Casualty Association has been organized, chiefly among doctors, at Omaha. Drs. D. A. Foote and R. W. Connell of the homeopathic profession are among the officers and directors. Dr. Foote is its vice-president. It insures physicians against accidents.

Frederick Stearns & Co., manufacturing druggists, of Detroit, whose vaccine product has been blamed for sore arms and tetanus at Cleveland, deny that lockjaw has ever followed the use of their virus, in even a single case. They are on the war-path for whoever says to the contrary.

The daily papers are announcing the birth of a child to Mr. and Mrs. Peter Klein, 229 Dussling street, Trenton, N. J., the mother being sixty-five and the father seventy years of age. They had been married forty years without children. The specificness of the data seems to give the report authenticity.

Dr. Frank Wieland, of Hering College, has been elected president of the national association of the Greek letter society known as the Delta Tau Delta. This society has properties amounting to above a hundred thousand dollars, having good fraternities in all the leading college and university cities. The honor is well placed.

In accordance with a time-honored and beautiful custom, and not in a meaningless and formal sense, THE MEDICAL ADVANCE extends the greeting of the season to all its readers and friends, hoping that each and everyone of them has had a Merry Christmas and that to each and every one of them will come a Happy and Prosperous New Year.

Dr. A. P. Hanchett, of Council Bluffs, Iowa, expresses himself as greatly pleased that the ADVANCE is to be improved. He says in a recent letter that he has found it a valuable help in practice and that "What there has been of it has always been unexcelled." The best of it is that he promises to help by an occasional contribution to make it better than ever before.

The Warden of Cook County Hospital very sensibly suspended the surgical clinics in the amphitheatre of that institution during the recent severe weather, it being found impossible to keep the temperature of the great auditorium above fifty degrees. Strange as it may appear there had been no previous suspension of surgical operations during even the coldest weather. Warden Healy seems to be the right man in the right place.

Chicago is now the healthiest large city in the world. Its death-rate for November was but 13.8 per thousand of population per annum, on a basis of a million and three-quarters population. No other city of a million, or anywhere near this number of inhabitants, approximates this figure. Los Angeles is but two deaths per thousand of population per annum below Chicago. Boston runs to 21 and Baltimore to about 23.

A druggist of Camden, New Jersey, having proclaimed in the Camden Daily Courier that all the cases of tetanus which recently occurred

In that city had followed the use of Mulford vaccine virus, the H. K. Mulford Company is out in a letter of denial, promising to make it warm for the offending chemist, whom, they claim, was prompted in his attack upon their product by ulterior motives. The druggist hoots at the idea that the fatal cases of lock-jaw were caused by germs floating from the filthy back-yards and alleys of Camden and alighting upon vaccination sores.

Dr. W. D. Norwood, Hering College, class of 1895, located at Shreveport, has been appointed by the governor of Louisiana a member of the State Medical Examining Board.

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### HERING COLLEGE NOTES.

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BY A MEMBER OF THE CLASS.

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Mr. James Walsh, class '03, spent the holiday vacation with his family at Cortland, New York.

Dr. H. H. Steere, of the junior class, spent his Christmas vacation at his home in Huron, South Dakota.

Paul B. Wallace, of the senior class, was in charge of the dispensary during the absence of House Physician Cox.

Mr. P. A. Wells, a prominent attorney of Omaha, Neb., spent a few days during the holidays with his wife, of the sophomore class.

Dr. C. T. Cox, house physician to Hering Hospital, spent the Christmas week at Delavan, Wisconsin, taking care of the practice of Dr. Unrich.

Prof. J. H. Allen has finished a very interesting course on the "miasms." His new work on skin diseases will deal largely with these "noxious agents." It should be in the hands of every practitioner.

"Cum Laude" was the inscription on several of Dr. Pollach's papers at the recent midwinter examinations in Nervous and Mental Diseases. In fact, the general average of the class was well up in the nineties.

The semester examinations passed happily and the senior class are joyfully on the home stretch. With about twenty subjects to carry it is safe to say that between now and commencement but little time will be given other than for study.

Word reached us that Dr. L. S. Tuholky, of last year's class, is doing a splendid business at Milwaukee, where he recently located. The

Doctor is a self-made man. His good work will be pleasant news to his numerous friends in and out of college.

The following students took advantage of the holiday vacation to spend the time at their homes:—C. T. Carr, Sheridan, Ill.; Millard Baxter, Pittsburg, Kansas; W. P. Fread, Illinois; K. C. Bemis, Janesville, Wisconsin, and V. E. Nicol and wife, Topeka, Kansas.

Hering has now six Osteopaths taking a course, four juniors and two seniors. The majority of them have been experienced practitioners in the field, and have come to realize that a course in homeopathy, such as given at Hering, is an almost indispensable thing in the field of therapeutics.

A very pleasant entertainment was given at the college the latter part of December, for the benefit of the hospital. A large number of tickets were sold, but owing to the inclement weather the attendance was not large. The program was an entertaining one, and all present enjoyed a pleasant evening.

Prof. E. A. Taylor has the happy faculty of conferring an expression on a drug that characterizes it in memory: e. g. The stool of Benzoic acid is known as the "Fourth of July" because it smells like burnt powder. Few of us will forget the "bashful" stools of Thuja, Silicea, and Opium, that protrude and recede again—apparently "nervous about expulsion."

Never in the history of the College has the obstetric clinic been so large, thanks to the efforts of Dr. Amanda Decker, who was recently appointed to a position on that chair. Fortunately in nearly every case there has been ample warning and the classes have been able to be present en masse. The last case was in charge of the junior class, and happened to be an instrumental delivery. We doubt if any college in existence has done better for its students along this line than Hering this season.

Mr. F. M. Evans, of the senior class, spent the holidays with relatives in Ohio. He will be remembered by a number of the alumni as a junior several years ago, at which time he responded to the call for soldiers in the Spanish-American war. Since that time he has served in both Cuba and the Philippines. We regret to say that he returned somewhat "the worse for wear," owing to the climate of our Western possessions, but hopes that a little "sunshine and good homeopathic treatment" in God's country will soon restore him to health.





WM. P. WESSELHOEFT, M. D.

# THE MEDICAL ADVANCE

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## SOME FLASH-WORK OF BELLADONNA AND ITS DIFFERENTIATION.

BY W. E. LEDYARD, M. D., Oakland, Cal.

"Pains come on suddenly, and, after a shorter or longer duration, cease suddenly," is a rubric that has many a time unerringly guided us to the selection of this truly wonderful remedy.

CASE I. We were recently called, to find our patient, a light complexioned, middle-aged, full bearded man, whose nose is habitually red (not from alcoholics, but in all probability from the effort of nature to rid his system of its psoric taint), lying on the right side in a stupid sleep (it being natural to him to sleep soundly and possible to sleep at any time of the day), from which he aroused himself with some difficulty on our approach

In "redness of nose," Belladonna stands in italics, with forty-four more nose-reddeners, chief among which are Alumina, whose nose is not only red but swollen and sore to touch; China with redness and heat of nose; Phosphorus with redness, swelling and shining of nose, painful to touch; and Sulphur, which we recognize readily as a reddener of mucocutaneous outlets as well as extremities.

In sound sleep Belladonna takes second rank, with fifty-two other sound sleep producers; while stupid sleep gives Belladonna first place with Conium, Graphites and Ledum; Nux vomica and Opium in the same rank.

The patient was lying on the painless side, which means aggravation from lying on the painful side.

Here Belladonna bears away the palm from at least forty-eight other remedies having the same modality.

Most prominent among these are Baryta carb., Caladium, Hepar sulph., Iodium, Nux moschata, Ruta and Silicea. Among the remedies having this modality, and most frequently called for in acute attacks, Aconite is excluded by the absence of its characteristics, viz.: great anxiety, fear of death, naming the time, restless tossing about, etc.; Arsenicum also fails to fill the bill, with an anxiety and fear of death, and exhaustion after moving, all peculiar to itself, separating it widely from the curative by its power to produce adynamia. Bryonia has amelioration not aggravation from lying on the painful side; great thirst for large quantities of cold water at long intervals; dry, parched lips, etc.

As he moved the affected part (in changing his position or breathing deeply), the pain—soreness in one of the lower left intercostal spaces—was aggravated.

In aggravation from motion of the affected part, Belladonna occupies the second place, being second to Arnica Bryonia and Chamomilla, Ledum, Rhus and Spigelia.

In this instance, however, Belladonna leads them all. No bruised sensation or hardness of the bed excludes Arnica; aggravation from pressure gives Bryonia the go by; the incivility of Chamomilla was non est. Ledum, being relieved by cold, is ruled out, for our case obtained relief from heat; Rhus tox has aggravation at the beginning of motion only; while, although Spigelia is worse from touch and from moving the affected part, and has much soreness, all like Belladonna, yet it hasn't the snapping eyes of the latter, nor do the pains come and go suddenly.

On raising the head from the recumbent position, a painful sensation of bursting in the right temple, was experienced. Here, Belladonna, in italics, stands alone, (Kent's Repertory.)

In aggravation on rising from bed we may compare Belladonna with Aconite, Bryonia and Calcarea, Nux, Phos-



phorus and Pulsatilla. Aconite reads thus: "The red face becomes deathly pale; or he becomes dizzy and falls over; he fears to rise again; often accompanied by nausea, vanishing of sight or unconsciousness."

Bryonia, from rising, has "giddiness; vertigo with reeling; rising to the erect position after eating induces nausea and waterbrash, etc., rising from bed, faintness."

In Calcarea, rising from a seat aggravates rheumatism and rising is difficult after sitting awhile.

In Nux vomica, we have, when rising from a seat or bed, syncope; pain in right kidney aggravated; causes soreness in neck of womb.

Phosphorus gives, on rising: "Vertigo with roaring in ears; weakness in legs, must lie down again for a few moments; cough worse; rising from stooping, pains in small of back."

Pulsatilla, must keep in recumbent position, on account of nausea and vertigo; cannot sit up in bed, in consequence of pain across loins.

Aggravation from pressure brings to the fore most prominently Hepar, Iodum, Lachesis, Lycopodium, Mercurius corrosivus and Silicea.

In Hepar it is pain in a spot in the throat which is aggravated.

In Iodum region of liver is sore; epigastrium painful and hypochondrium very painful.

Lachesis cannot bear pressure about neck, hypochondrium, abdomen, stomach, or left iliac region, patient feels better if held firmly or pressed down.

Pain in right side of head was relieved by hard pressure.

Headache relieved by hard pressure brings up for comparison Anacardium, Belladonna, Carbo animalis, China (in italics), Magnesia mur.. Menyanthes and Nux moschata. Anacardium and Carbo animalis have aggravation from lying on the side.

China, like Belladonna, is worse from touching the parts lightly, as well as from firm pressure; however, the

former is especially indicated after loss of fluids with ringing in the ears, and the pain goes from temple to temple.

Magnesia mur., when the headache occurs in a hysterical person with obstinate constipation, stools scanty and knotty.

Menyanthes: aggravation in the evening, while chewing, or when lying down.

While *Nux moschata* is worse lying on the painful side, the headache of *Belladonna* is relieved by lying on the painful side.

Here we had, apparently, a contradiction of modalities, aggravation and amelioration from lying on the painful side. However, the difficulty disappeared when we learned that it was a sensation of soreness that was naturally made worse by lying on the painful side; while it was a bursting that was, as naturally, relieved by firm pressure.

We learned also that the pain had come on suddenly, awaking him out of sleep. After lasting some time it had disappeared suddenly, allowing the patient to go to sleep a second time.

The hair had been cut about a week before our visit and the patient is easily affected by a draft of air; two additional indications for the remedy in question.

Aggravation from cutting the hair calls for *Belladonna*, *Ledum*, *Pulsatilla* or *Sepia*, and in aggravation from a draft, *Belladonna* and *Silicea* head the list, with *Calcarea*, *Hepar* and *Sulphur* in second rank.

Amelioration from hot applications to the head is equivalent to amelioration from warm wraps on head, or aggravation from uncovering the head, which modality gives us *Hepar*, *Nux*, *Rhus* and *Silicea*.

Although these occupy the first rank, yet, like the brethren of David, they will be passed over, in the search for the truly curative remedy.

The great sensitiveness of *Hepar* to the slightest draft of air being absent, that medicine is excluded; the sullen irascibility of *Nux*, which has no desire to converse or to be touched and wants to be alone, was conspicuous by its ab-

sence; the restlessness of Rhus was not present, nor the relief from continued motion, nor did our patient get wet while perspiring.

Although jarring, in its disagreeable effect, might well make one think of Silicea as well as Belladonna, the subject of our remarks is not a stone-cutter, nor did he get his feet wet.

We diagnosed the disease rheumatism, affecting the intercostal muscle; and what was of infinitely more importance to the patient we diagnosed the remedy, Belladonna, forthwith administering the same, the 200th potency in solution, directing another dose to be given in half an hour, and a third half an hour after that.

The three doses gave speedy relief, and serve daily to call forth unstinted praises for pure homeopathy.

CASE II. We were summoned by telegram, a distance of thirty seven miles, and found our patient, a woman of over three score winters, suffering acutely from the frequent recurrence of sudden sharp pains in the right chest, which prevented sleep during the night just past.

We say "winters" advisedly, for nearly every Christmas brought with it an attack of lung trouble.

Belladonna is indicated in ailments that return periodically, and also for those that are aggravated in winter.

We gave her one dose of Belladonna 200, dry, on the tongue (using no hypodermic morphine syringe on the sly), and within twenty minutes we had the great satisfaction of seeing the quondam sufferer in a natural sleep.

She made a speedy recovery from pleuro-pneumonia, plus old school drugs, plus the sogginess of numerous relays of flax-seed meal poultices.

CASE III. In a young woman of about thirty, and of a light complexion, unmarried, that part of the vulva called the gland of Bartoline of the right side, suddenly became greatly swollen and intensely sore and red.

Within forty-eight hours, a few doses of Belladonna 200, in solution, every half hour, completely dissipated the trouble.

CASE IV. "Jumping" toothache, in a large bull-headed man, who went prancing round the consultation room in agony, was relieved within five minutes by a dose of Belladonna 200, dry, on the tongue.

CASE V. Gum-boil, coming on suddenly, in a fair youth of sixteen, with great pain and swelling suddenly, relieved by a few doses of the magic Belladonna.

CASE VI. Little girl of fair complexion, starting up from sleep, wildly staring, with delirium and burning heat of skin, always found quick relief from one or two doses of Belladonna 200.

CASE VII. One of our first cases was a very violent attack of facial neuralgia of the right side, in a young unmarried woman of the "strawberry-blonde" type. Belladonna 200, here also gave quick relief.

CASE VIII. After treating a case of Scarlet fever, in a little girl, in which Belladonna was indicated and administered, nocturnal enuresis of years' standing quickly disappeared.

CASE IX. A tooth, which became suddenly very loose and intensely sensitive, was quickly relieved and became firm after one dose of Belladonna 200, and would "stay cured" for months at a time. In this way the tooth was preserved for years.

The above cases, duplicates of which practitioners of pure homeopathy must have met many a time, will suffice to remind the tyro of the vast importance of the highly potentized Belladonna as a curative agent.

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The city of Havana, Cuba, formerly the post-hole of the Western Hemisphere and a constant menace to the Southern coast of the United States, is now one of the healthiest large cities of the world. With a population of near three hundred thousand its death rate for November is placed at but 19.58 per thousand of population per annum. For the first time since 1762 there was no case of yellow fever in the city in November. Thus it seems that the Spanish-American war was not altogether in vain from other than the military viewpoint.

## THE NEW VS. THE OLD MATERIA MEDICA.

A. R. MORGAN, M. D., Waterbury, Conn.

Attention is here briefly called to the contrast between the dominant schools of medicine in their methods of building up a *Materia Medica*.

Every homeopathist knows that the way we gain our knowledge of drugs is by testing their effects upon the healthy human body, as well as by experimental tests upon brute animals. The results of all such tests are called provings, and are afterwards verified under the law of similars by clinical corroborations upon the sick.

The homeopathist is continually enlarging his *Materia Medica* by developing the action of new drugs according to the strictly scientific method first taught by the author of *The Organon*, employing in such tests all degrees of strength from doses of the crude material up to those of more or less highly potentized drugs, thus developing the greatest possible range of medicinal action, covering exhaustively both the entire objective and subjective fields, involving not only all pathological changes of tissue but also the more subtle and important sensational phenomena accompanying such changes.

In contrast with this thorough and systematic method of procedure, and in the absence of any definite guiding law or principle of cure, we can conceive no alternative left to our brethren of the old school but to build their *Materia Medica* upon the uncertain basis of empirical observation alone.

It is true that for a brief period of time in comparatively recent years there has been an effort by them to establish therapeutic relations upon what was denominated a "chemico-physiological" basis—i. e., by the use of medicines intended to supply elements found to be lacking or deficient in certain morbid states or conditions; but this temporary effort to establish a systematic *Materia Medica* was soon

supplanted by a wild rampage after the "animal extracts a delusion abandoned 300 years ago, and the transient flurry in this direction has in turn been superceded by the present antitoxin craze, which proposes to furnish an antidotal serum for the destruction of all disease germs, even those yet undiscovered or now being corralled by the fertile imaginations of a lot of infatuated microbe hunters.

In order to get at the difference between the methods of the two schools let us for a moment suppose that Arsenic, Cyanide of Mercury, Corrosive Sublimate, or any other of the deadly poisons, to be unknown substances, how, in the absence of any definite method, would the Allopathic school proceed to ascertain their therapeutic value?

We see above how the homeopathist goes to work; now how, except in cases of accidental poisoning, is the old school practitioner going to learn anything about drug action except by means of haphazard experiment upon the sick—i. e., by venturing in the dark and hopefully waiting results? This is the course that has been pursued from the earliest traditions of medical history down to the present time, and, indeed, in the absence of any distinctive rule or method, there can be no real incentive for attempting to learn the pure result of drug action upon the healthy human organism.

Skipping from the misty medical literature of the time of Hippocrates (450 B. C.) down to the writings of Nicholas Culpepper, a distinguished English physician (1663), and the author of many voluminous works upon medical subjects, among which we quote from one entitled "The Physician's Library," being a treatise upon *Materia Medica*, and also a work upon Practice, which will show how little real advancement had been made in *materia medica* and practice during the preceding 2,000 years.

He says on page 271: "I shall desire thee, whoever thou art, who intendeth the Noble (though much abused) Study of Physic, to mindfully heed the rules which show the key to Galen and Hippocrates, their method of Physic, and He that useth this their Method and is not heedfull of their

rules, may soon Tinker like, mend one hole and make two, cure one disease and cause another more desperate."

He states that "Herbs, Plants and other medicines manifestly operate by Heat, Coldness, Dryness and Moisture, according to the rules laid down by Hippocrates and Galen"—rules many of which are so preposterous as to seem comical to the modern mind, and certainly not worth recording here.

The following remarkable statement occurs on page 273: "Contraries are taken away by contraries and every like is maintained by its like"; thus virtually repeating what Hippocrates announced 2,000 years before in his work entitled "De Locis in Homine Libre" (caput xv), apparently anticipating both the doctrines of Contraria and Similia, either of which were practically useless without drug provings for a guide.

Since Culpepper's time innumerable conflicting theories have held brief sway in the medical world, and have been abandoned in rapid succession, with the single exception of Homeopathy, which was first announced by Hahnemann near the close of the eighteenth century in "Hufeland's Journal" (1796), and which remains unchanged but amplified at the beginning of the twentieth century, the trusted guide of thousands of faithful followers distributed throughout the civilized world.

Among the latest evidences of dissatisfaction with old medicine we refer to an article from the able pen of Dr. Wm. Osler, Professor of Medicine in the Johns Hopkins University, who, on January 29th last, furnished the "New York Sun" with an elaborate dissertation, occupying nearly twelve columns of that paper, upon the Progress of Medicine in the Nineteenth Century, in which he heralds the advent of a new school of medicine, which he declares "cares nothing for homeopathy and still less for so-called allopathy"—a school "which seeks to study rationally and scientifically the action of drugs," apparently entirely oblivious of the splendid achievements of the homeopathic school in this very direction.

Dr. Osler takes a position, like many of the best minds in the old school, in open revolt against the worse than delusive uncertainties of the allopathic materia medica, and against the hazardous and unreliable therapeutics founded thereon, and also emphatically against the abominations of polypharmacy and the excessive use of drugs.

Dr. Osler, who occupies a commanding position in the medical world, very frankly admits the many defects and absurdities of old school therapeutics, while he at the same time shows a lamentable ignorance of the teachings of Hahnemann, by quoting from Dr. Jacobi a mere travesty upon that subject—a definition which reminds one of the sage remark of Josh Billings: “Taint so much what a man knows that counts agin him, as it is what he knows that aint so.”

Dr. Osler, however, makes one singular admission, which, although not strictly true, we can but regard as complimentary to our school, for he says: “Nobody ever claimed that the mortality under homeopathic practitioners was greater than among the regular school.” He meant, probably, nobody who had any regard for the truth ever made such a claim.

Dr. Osler goes on to define his position in the following words: “A new school has arisen which has little or no faith in the great mass of medicines in general use. \* \* \* The battle ground against polypharmacy, or the use of a large number of drugs, the action of which we know little, yet we put them into bodies of the action of which we know less, has not yet been brought to a finish.” (Which remark, by the way, was better and more tersely stated in the eighteenth century by Dr. John Mason Good, viz.: “We put medicines of which we know little into bodies of which we know still less.”)

Dr. Osler also says; “There have been two contributory factors on the side of progress, viz., the remarkable growth of the skeptical spirit fostered by Paris, Vienna and Boston physicians, and above all the valuable lesson of Homeopathy” !!!



Might he not also have fairly stated that the growth of the skeptical spirit of which he speaks was probably galvanized into life by hospital reports, showing vastly superior results under Homeopathic treatment of cholera, pneumonia, typhoid fever, etc., throughout the different European capitals? This growing lack of confidence in the traditional methods of the old school is manifesting itself among thinking men, professional and lay, in many directions, and we refer to another article appearing in the April number of the *Review of Reviews* (1901) entitled "The Relation of the Family Doctor to Recent Progress in Medical Science," which began with the sentence, "Discontent permeates the spirit of the present age, and the medical profession presents no exception."

The writer, a distinguished New York physician deplores in strong terms the present drugging habit and says "with but few exceptions, the entire vegetable and animal kingdoms have given us little of specific value, but still up to the present day the bulk of our books on Materia Medica is made up of a description of many valueless drugs and preparations." \* \* \* "The common sense physician knows by experience that the constant frequent prescribing of innumerable drugs, only ends in detriment to their patients."

The above to them humiliating acknowledgment that "the entire vegetable and animal kingdom have given us little of specific value" must be very disheartening to the editors of that bulky volume, The U. S. Dispensatory, but in lieu thereof we recommend recourse to those truly reliable works, the *Materia Medica Pura* and *Chronic Diseases of Hahnemann*, *Guiding Symptoms by Hering*, and *Allen's Hand Book*.

In the light of such acknowledgements as we have quoted from representative members of the old school, how shallow and preposterous it is for men professing to be Homeopaths to be detected in returning—like a dog to his vomit—to the abandoned fallacies of old medicine.

In conclusion, standing as we do, at the very threshold

of the 20th century, surrounded by the shifting sands and debris of antiquated medicine, we declare our unfaltering faith in the new dispensation founded by Samuel Hahnemann, upon the eternal rock of nature's great curative law. *Similia Similibus Curanter.*

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### THE MATERIA MEDICA OF THE FUTURE.

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FRANK WIELAND, M. D., Chicago.

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It must be a great comfort to the older men of the profession that they are not called upon to prophesy. They can rest assured, if they leave the matter to the young men, that prophesies will be made in a spirit enthusiastic, if not meek. When I deal with the Materia Medica of the future I do it with a triumphant scorn of that of the past and present. When you consider what that of the past was and that of the present is, in the old school at least, you must regard your escape from a paper on one of these as little short of providential.

I shall take the liberty in my employment of the term, "Materia Medica," to use it in its largest sense, as anything which assists in the cure of the sick. This is unusual, but a technically correct application.

The last half of the century, despite numberless and nameless coal tar products and organ extracts, cannot be called the age of therapeutics. The profession went diagnosis-mad. The cure of a patient was nothing. Any physician who could only heal the sick and eradicate diseases had occasion to be ashamed of himself. He was unscientific. It reminded me of the man who went to visit a brother physician's patients and found the doctor giving five different remedies at once. The visitor was naturally much perturbed, for although his own patients with similar ailments were getting well on the single remedy he wondered if he were really doing all he should do.

However, a reaction has come. To consider the coal tar products alone, one has followed another so closely

that some eminent authority in Europe would scarcely have committed himself in writing up the virtues of one before its successor would be isolated. Men who valued their reputations devoted themselves in their papers to proving that everything they had previously written was wrong. Even Koch and Virchow were not above this. It is all right, but very demoralizing to physicians in general who finally accept the opinions of their masters only to find that the masters have changed their minds.

This thought cannot but force itself into prominence. While men may change their minds, truth does not change; that what is said of a drug's action once, if it is said truly, must forever be that drug's action. But where product follows product so rapidly that no study of the action can be made, what can follow but confusion? The shelves of the drug store are filled with medicines that will never be sold. The dealer must accommodate his room to a new *Materia Medica* every month.

Like all revolutions, this one against drugging has come from among the people. I suppose there is no city in the world so determined in this revolution as is Chicago. We read how a physician in another city succeeded in placing the tolerance of a child for K I at 720 grains daily. Instead of sharing the physician's admiration of himself we pity the babe. People outside of County Hospitals refuse any longer to be dosed. The cures of the future must be practically drugless, as far as material doses go. Mysterious prescriptions in Latin, with most of the terminations wrong, no longer excite the awe of the populace. The patient himself has perchance studied Latin. The utter helplessness, in therapeutics, of the physicians outside our own school is shown by the number of drugs and combinations forced on the market. In his anxiety, and that a conscientious one to do the utmost for his patient, the allopath of today tries one remedy after another, with lessening confidence in each. I watched a course of such treatment in a typhoid case in a hospital recently. At last, in despair, the physician said, "We shall stop all medication for a time." After

that the patient, relieved from the stress of excessive drug action, promptly got better and eventually well.

I was phoned for in haste recently to visit one of our nurses who it was said had a morning temperature of 104. When I reached the hospital the temperature was 97, a drop of 7 degrees in less than two hours. I was naturally somewhat surprised until I consulted the interne and found he had given her a maximum dose of a coal-tar product. In a few hours the temperature was up again and the pulse had risen from 57 to 120. I told the interne a few things he had never heard at Rush. A few doses of Gelsemium, which was indicated in the beginning, brought the temperature down to normal in a few days and it has been normal ever since.

At the same hospital one person who had watched my treatment of typhoids, the first she had ever seen under Homeopathic care, called me aside and asked "What do you give for an intestinal antiseptic?"

I answered "I do not know what you mean," which was not true, but I thought that anyone who could talk of intestinal antisepsis in typhoid or anything else was not in proper mental condition to appreciate a lecture on Homeopathic care of the sick.

I read in a recent journal the tale of a Homeopath in India who had prescribed repeatedly for a native patient with no success. Finally he was dismissed and an Indian doctor was called who completely cured the case, a very trying one, with a prescription of two roasted hairs from a rhinoceros. I don't think that line of treatment will ever become popular here, from scarcity of the aforesaid noses. I judge the patient needed *Carbo animalis*, and if the roasted hairs of a rhinoceros smell like the roasted hairs of anything else we can be sure she got the dose high.

The *Materia Medica* of the future must contain such remedies, and only such as have been proved. There are a hundred of our old remedies, many of them proved by Hahnemann, that have survived a hundred thousand employed by the old school. So well known is the action of

our polychrests that I don't think the time will ever come when they will not be known and used. And the time will come when the 3x will not be considered high. There will be a great advance along the line of potency. The future of Materia Medica lies in this direction.

Our competitors are not to be the allopaths and eclectics, but the Christian Scientists with their suggestion. If any of you is inclined to doubt this, ask of brethren practicing in Hyde Park. The therapeutic value of suggestion is yet in its infancy.

Into the physician of the future must enter many things—the knowledge of disease, as a matter of education. The physician should be the most cultured man in the world, and that culture should extend beyond the requirements of a state board examination. He should know literature and art, so that his entrance into the sick room will be suggestive of things far removed from disease. Let him refine himself with the masters of thought in language other than his own. Let him make his body a worthy tabernacle for the soul.

What profits it a man if he knows the life history of every bacillus that ever stalked the earth if he doesn't know English grammar and never cleans his finger nails? I know a physician who by street-car study has become a skilful student of the French and German languages. No one can know the latter language and not be of larger sympathy by reason of it. And sympathy of voice and touch and manner are no small part of the armament of the physician of today and must be more so of the physician of the future.

I know there are surgeons, possibly in this association, who act like raging bulls in the operating room, but I have never seen that this attitude added to their skill or increased the respect of their assistants or the nurses. On the contrary, it made the nurses so nervous that instruments were dropped and sponges were not sufficiently dried; the assistants in their hurry tied loose knots and bruised tissues, trying to catch an artery before another outburst of abuse was forthcoming.

I know another surgeon, a member of this association, and no doubt there are many, whose tone of voice even under the stress of a serious operation never varies; who impresses one as the courteous gentleman first, as the skillful surgeon secondarily, who never orders, but requests, who exacts and gets the most careful attention. He is the surgeon of the future in the present time.

The future of therapeutics is the future of the profession. The time is coming when only men of good education can enter it. That time will eliminate all of those whom nature has not fitted to the patience and sacrifice that our profession requires. The time will come when the physician will be the type of a gentleman. To all of which we say "Hasten the day."

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### RESULTS WITH AN UNPROVEN REMEDY.

BY W. P. WESSELHOEFT, M. D., BOSTON.

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It is not often that the homeopathic physician finds it fit to administer an unproven remedy. In exceptional cases however, it may be permissible, provided the remedy is given in a truly homeopathic dose. When we make "accidental cures" with such a preparation, and note down carefully the objective and subjective symptoms, the remedy has a kind of "proving" already begun. As Dr. Hering said: "It is a breach presentation, but that is no reason why the child should not be slowly born and grow into a vigorous child."

Usually such "outside methods" are used where there is a paucity of subjective symptoms, and the only manifestations which confront us, are the objective symptoms—the things we see and feel.

Recognizing fully the importance of Hahnemann's psoric theory I have often marvelled how long psora, syphilis and sycosis can lie latent in the organization without producing more functional or organic disturbance. All of a sudden some severe cutaneous expression appears, which relieves

only a single disturbed function. Patients will often say, "I was perfectly well before this made its appearance." If, however, this manifestation on the skin which seems to have disturbed the organism so little, while latent (internal) should be suppressed by external means, then we are sure to have more serious complications, and often incurable diseases.

I would like to draw the attention of this Association to an observation which I think is of much practical value. In cases where cutaneous aggravations are coincident with aggravations of internal symptoms, i. e. where the noxa expresses itself with equal violence internally and externally at the same time, we have to deal with a very serious problem. These cases are rare, but they occur and I have never been able to cure them, although often giving satisfaction to the patient but not to myself. These remarks are simply introductory to three empirically treated cases, which have been cured or markedly improved by the nosode *Malandrinum*.

The "grease of horses" is a very characteristic eruption, differing from other nosodes in the formation of its "crusts." I observed a case of this kind in a horse many years ago in which the following characteristics appeared; a thick layer of crusts, if allowed to remain without removal, heaped up one-half of an inch. The crusts were fragile, moist and yellow, about the consistency of a honey comb. When removed a raw surface remained with deep fissures and the thick crusts reformed into their original size in forty-eight hours. There was evidently no itching, but some soreness after removal of scabs.

This appearance reminded me of cases of eczema which I had treated with indifferent success. I took one of these scabs and triturated it and carried it into the 30th potency, hoping some day to make a proving. This preparation was lost, and I never thought of it again until Dr. Guernsey drew our attention to this nosode with reference to the baneful influences of vaccination.

Several years ago I received from him the 30th potency,

and since then from Dr. Milton Powell of New York higher potencies.

I have used it in the three following cases with marked success, and I would suggest that a proving be made of this valuable nosode by the Association.

L. W. M. Tall, spare man, stooping shoulders, æt. 56.

Dec. 1895.—Eczema for eight years; was perfectly well when this eczema appeared, except an occasional attack of early morning or night diarrhœa. Has been under treatment by different specialists for eight years.

Eruption first appeared about ankle, gradually spread upward and now involves both legs up to groin and buttocks; a large moist patch on belly. The skin of hands and fingers have the appearance of hog's hide, and fingers are deeply fissured near the joints.

From there to ankle the skin is covered with a thick yellow moist crust, which crumbles off and leaves a moist sticky surface beneath. Bandages adhere to the legs like glue, only slight itching, somewhat < after undressing, when he had to scratch which dislodged from one-half to a tumblerful of moist scales. The moisture had a sweetish, offensive odor which permeates the room, so that it is discernable after being aired all day.

He improved somewhat during the two years of treatment, the eruption receding from the upper parts of the body downward. Hands and abdomen showed very little of the disease. The legs, however, from knee down remained unchanged except where the eruption was drier, and the scales flatter. The stools also became normal.

In the fall of 1899 I gave him a dose of Malandrinum 200 with marked improvement which continued about two months. Later he received a dose of the 24m, and a year ago last March a dose of the cm. There still remains a much less formidable eruption around the ankles, which gives him very little trouble. The stench from his body ceased after the first dose of the remedy. He is still under observation, and reports about every three months.



Mrs. J. F. C.,—æt 52, blonde, vigorous.

Seven years ago a small crust on upper lip. This was treated locally by a dermatologist and remained "cured" for six months. It reappeared, gradually increasing in size, extending from nose to the red of the lips. When she came to me two years ago it presented the following appearance: Thick honey comb scab, projecting from upper lip, occasionally small pieces of the scab are torn off, or fall off, leaving a moist sticky surface beneath, which soon builds up again into the unsightly looking crust. The pains are intermittent of a severe and stinging character.

All kinds of external means had been resorted to with no avail. An operation was suggested as the only relief. She was evidently greatly depressed, and exceedingly apprehensive, as one of her medical advisers had thoughtlessly told her the affection was a malignant one, and nothing but the knife could bring relief. She had shunned society for a long time on account of her appearance, and this professional dictum did not add anything to her peace of mind. Sulphur, followed by Arsenic had no effect. After Kali carb. she improved markedly for six weeks, and I flattered myself that the battle was won. The stinging and burning pains had subsided, and one-half the scab had fallen off leaving an apparently sound skin underneath. But soon the process commenced afresh. A second and third dose of the same remedy did absolutely nothing; on the contrary the thickness and projection of the scab increased to such an extent that I found it necessary to trim it off with scissors to prevent her veil from catching in it, to make the use of a handkerchief possible and to prevent injury and increased pain.

Silicea and Kreosote gave no relief.

Malandrinum 24m, and three months later a dose of the cm. entirely cured this malignant affection. There is an almost imperceptible scar left and she has been a very happy woman for nearly a year.

Miss M. A.—æt 65, very delicate, emaciated.

Fifteen years ago, after a revaccination; suffered fo

three months with an ulcerated and inflamed arm. Four or five months after the arm had healed a scaly eruption appeared on different parts of the trunk and left side of neck in patches varying from a pin's head to an inch in size. Very gradually these patches began to build up crusts with a broad base, running to a point like horns. One such horn was situated on the left neck projecting fully an inch, from half an inch of base.

Occasionally, and at long intervals, one of these horns loosened, and are thrown off, leaving a moist sticky surface, which gradually builds up another horn.

I first saw her in 1895, and recognized readily that I had to deal with a case of syphilitic rupia. The poor woman had been subjected to mercurial treatment ad nauseam. All this only aided in undermining her constitution, but had no effect upon the disgusting eruption.

I treated her with great care for four years. She had absolutely no subjective symptoms to report, except weakness and sensitiveness to cold, but very little change was discernable except perhaps more strength of resistance against ordinary influences, which I attributed to the absence of poisoning drugs.

Two years ago I commenced with Malandrinum, giving a dose about every four to six weeks, commencing with the 200th and going up to the DMM.

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### RETAINED PLACENTA.

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BY W. A. YINGLING, M. D., Emporia, Kansas.

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The Creator makes no mistakes. From the beginning He plans the perfect harmony and adaptation of His works. Knowing all things, having the power to foresee the needs of His creatures, as well as to adapt the created to its use, and love and benevolence being the attributes of His being, it is to be presumed that woman has been suitably adapted to her duties of procreation and motherhood. There are no accidents of creation though there may be perversions.

through breaches of the law governing the domain of the created. There are no failures in natural law though the ignorance of man may so esteem some phenomena. The puny mind of man is incapable of grasping the great expanse of nature, and what he today considers failures will be found to be sequences of the law when experience has broadened his mind and furnished data upon which his restricted reason may act. Perfect adaptation to intended use is manifest in everything coming from the hands of the Creator. He not only approaches utility, but completes it in all particulars. If there seems to be a want of adaptation it is only apparent, and the cause is a perversion through some breach of the law or neglect of its requirements. Where there has been a perfect obedience the perfect adaptation and utility are clearly seen. Heredity must be considered in the obedience, for the sins of the progenitors are visited upon the third and fourth generations. All things being equal, when nature is unhampered by results of disobedience, gestation and parturition have as little danger or ill results as any other function of man or woman.

The Creator, all wise and capable, had in view when he made woman all the functions of procreation, gestation and parturition. Why should he have failed in these objects more than in other physiological functions and purposes of His creatures. Failure here would result from death or from deleterious results which would preclude further performance of these functions, or undue and prolonged suffering. The Creator desiring the procreation and perpetuation of the human species has surely safeguarded the agency through which this must be accomplished. Where life is sacrificed at one effort of perpetuation of the species, as in plant life, a multiplication of the germ at the one effort is guaranteed as an effort of nature to propagate the the species. Or when the life of the ovum is but slightly protected, as in the fish, the multiplication is very great for the same reason. But as we go up in the scale of procreation we find greater protection to the young but a decrease in the number. Nature is very jealous in her care and

protection of life, yet perversion of the law governing life may restrict life, or, as in some instances, cut it off entirely. This is exemplified in the extinct plants and animals. Today there is fear expressed by scientists that even the prolific potato may become extinct. This can only happen by some neglect of plant life.

The healthy woman has a healthy gestation and parturition, without pain or trouble before or after the birth and without undue suffering at the time. This may be a rare occurrence, nevertheless all pain or trouble arise from deviation from the normal condition of health. The fact that it is a rare occurrence does not prove it untrue, but merely shows that there has been a deviation from the normal. Every practitioner of extended experience knows women who bear children without the slightest pain do their household work up to the very hour and would if they were allowed go to work within a few days after delivery. The function of parturition cannot be said to be completed until the restoration of the parts to normal and the cessation of the lochia, hence the new mother should be under the supervision of the attending accoucheur till this rational completion of her parturition.

One of the frequent deviations from the normal condition or healthy sequence of labor is the retention of the placenta. This may result from adhesions, improper contraction of the uterus, or inertia and weakness. As long as the cord pulsates there is attachment of the placenta. If the cord is not severed till the pulsation ceases there will be no trouble from attachments. Common sense teaches us that there are exceptions to all rules, hence there may be very rare instances in true homeopathic practice where the cord should be cut before pulsation ceases and the placenta removed immediately. But this is the exception and should be a very rare occurrence. The improper contractions (hour glass), or the spasmodic condition of the os, are always amenable to the properly selected homeopathic remedy, and usually within a very brief time. Ordinarily, in the absence of symptoms leading to a particular remedy, Pulsatilla will

be found adequate after labor and *Sepia* after abortion. There need be no hurry in these cases generally, so that there is time to select the one remedy to overcome the condition.

Trouble and time will be saved by waiting till the proper remedy is known. There is less danger in waiting than in guessing or in doing the wrong thing. The physician who loses his presence of mind and feels that he must be doing anything so that he is doing something not only shows his incompetency and ignorance of the power of the well-selected homeopathic remedy, but greatly endangers his patient's life. Where there are improper contractions there will be but little if any danger from hemorrhage, so that the most timid can patiently wait till the *simillimum* is pointed out by the symptoms. Usually the desire of the doctor to get back home causes more haste than the needs of the patient. Even in the most profuse hemorrhage the true and well-posted homeopathic physician can calmly and coolly wait the very few moments required to select the right remedy, because he has positive knowledge that that remedy will control the hemorrhage more quickly and completely than all other means or agencies, and that in cases dangerous to life the symptoms are plain and characteristic and readily point to the curative remedy.

The object of this paper is not to teach the therapeutics of retained placenta, but to nail up the thesis that where the endometrium is uninjured, as it should be in normal labor, there is absolutely no danger of sepsis from retained placenta, and mechanical means for its removal should not be used except only in the rare cases where the homeopathic medicinal agent cannot be found to control the hemorrhage. This statement applies not only to the master in homeopathy, but to the ordinary homeopathic physician with a modicum of common sense, faith in the homeopathic law and a fair knowledge of our remedies or the means at hand to obtain that knowledge. Where hemorrhage threatens life and the remedy to control it cannot be ascertained speedily, which is seldom the case, then mechanical means may be used and

only then. In all other instances the correct remedy will remove the placenta in proper time without danger of sepsis and for the woman's good in future pregnancies and general health. Even if the endometrium should be ruptured or the parts torn, the danger from sepsis would be at a minimum with the use of pure homeopathic practice, for that practice is preventive as well as curative. Though unusual, this is no new doctrine, for that master in homeopathics, H. N. Guernsey, says in his *Obstetrics*, page 201: "Should the placenta remain attached to the uterus, the question arises: Should any mechanical means be resorted to, to secure its detachment? According to my personal experience, I should say most decidedly, no. The placenta may remain attached for hours without doing any actual harm to the woman. Such cases should be carefully watched, the indicated remedy selected and administered, and the result is usually a speedy detachment and expulsion of the mass. Cases must be very rare, indeed, in which other means than the above need be resorted to."

The uterus and vagina are not absorbing surfaces, but discharging. Hence, as long as they are whole, the lining membrane unbroken, there can be no danger from sepsis. This safeguard of nature loses its efficiency should the membrane be broken in seeking to remove the placenta by mechanical means. This position seems to us to be reasonable and in accordance with the facts of experience. But there are none so blind as those who will not see.

With most physicians the retention of the placenta is the cause of great alarm and panicky fear. They act as though it was the forerunner of certain death, and even repeated cases without fatality or even injury teach no helpful lesson, but after each case they offer thanks for the great deliverance. There is much data and experience to show that there is no danger from retained placenta unless there has been some rupture of the parts, and that in these cases the preventive medicine of homeopathy is all-sufficient. Where pure homeopathic treatment has been used during gestation and parturition there is seldom any injury to the parts, so

that the danger of retained placenta is at the minimum and need seldom cause alarm in homeopathic practice. Those who have frequently to mend torn parts and risk the danger of sepsis are not the ones who rely on the teachings of homeopathy to guide them. When the parts are torn in any particular the same danger arising from retained placenta will be engendered from the natural discharges following labor, and especially so if the lochia is in any way changed from the normal. The danger is not in the retention of the placenta, but in the possible absorption of septic matter through some injury to the parts over which the discharge must pass, and in such contingency the danger is as great from the natural discharges following labor from the fact that the placenta does not become septic under the influence of the proper homeopathic remedy, and not in a very healthy woman without any remedial agent. In an abortion case in my own practice the placenta was retained eleven days. On the tenth day symptoms pointing to *Lycopodium* came to the surface, a few hours after the administration of which the placenta was ejected. There was no odor to the placenta, no pus and no decay in any way, but the mass appeared dry as if the fluid had been forcibly squeezed out. On the third day there was some odor to the discharge and quite a high fever, which quickly passed away on the administration of *Pyrogen*. The retention was owing to the spasmodic closing of the os. She was an asthmatic patient and it would have been almost impossible to remove the placenta by mechanical means, the spasmodic constriction of the os being so intense.

A lady patient related that a few years before she had what was supposed by herself and friends to be a "very bad case of whites." When in the closet she at times passed lumps which she thought were the same "whites." There was more or less constant foul odor from the discharge. One day she was compelled to use the urinal when she found the lump she then passed was the hand of a dead foetus. She did not know she was pregnant though there had been some distension of the abdomen. This putrefaction and discharge had been going on for a couple of months without

sepsis or other ill results. She was not quite as vigorous as usual, but was up and about doing her own household work and caring for her family. While one swallow does not make a summer, this case wherein the foetus actually rotted away, should be convincing to the most sceptical that there is no danger of sepsis from a few hours or even from several days retention of the placenta. There was no medicinal treatment at all in this case, and the only local means used were warm water injections for cleanliness. There are many such cases, some on record, going to prove that the uterus is a discharging and not an absorbing organ and that, other things being equal, there is no danger from its contents even though that be a mass of decaying animal matter, provided the lining membrane is whole and intact.

It was reported within the past couple of years in a Southern medical journal (allopathic), the name and date of which I now forget, that upon the postmortem of a woman the uterus was found to contain the larger bones of a foetal skeleton freed from all flesh and tissues, almost entirely dry. It was ascertained that six years before her death she had had a supposed purulent leucorrhœa which passed away and had nothing to do with her death. Septic danger is the placenta came away, but the patient made a splendid recovery; and in several cases where it was a day and a half before being expelled. I have never seen harm result where the conditions were met by the homeopathic remedy. I have never seen septicemia occur."

Dr. Nash reports a case of profuse hemorrhage that he was just able to control. The woman was sure there had been no miscarriage. She was sick in bed three months with recurrent hemorrhage. The discharge became very offensive, corrosive and of a horrible odor. Finally Dr. Lippe advised Sepia. In three hours after the Sepia "severe pains came on with the expulsion of the partly disintegrated placenta, and that was the end of the trouble." This case proves the homeopathic remedy was able to control the hemorrhage though the doctor was not able to ascertain the cause, that there was no sepsis from the slowly decaying:



placenta, and that as soon as the proper remedy was selected the placenta was promptly expelled. Had the doctor not been misled the expulsion would have been within a few hours. The result was far better than the curette in such a prolonged and weakened case with possible sepsis and death. The narrow minded objector will assert that the curette at surely as great in such a case, and also in other cases of purulent discharge or purulent leucorrhœa, as from the retention of the placenta, even though it should remain months and finally slough away.

Dr. Cook reports in the Cincinnati Medical Advance, 1879, that he has had the placenta retained thirty, sixty or ninety days, and in one case six months, and there seems to have been no untoward results. The doctor surely was not a panicky man or he would have gone wild. He proved himself to have had that self-possession which is based upon conscious knowledge and ability to master the circumstance. He was no weakling to surrender principle and knowledge to fear and the hue and cry of the allopathic school.

In the discussion of a paper reported in the Transactions of the I. H. A., 1889, the following excerpts occur:

Dr. Sawyer: "In one case it was six weeks before all the beginning would have saved the long sickness, but we have greater proof that the proper remedy at the beginning would have done safer and better work than the curette, for it actually did give prompt and permanent relief when administered.

Dr. Schmitt: "I have had several experiences in that direction. I never had to resort to the curette. The indicated remedy brought away the placenta every time even after a week's retention. \* \* \* No symptoms of septi-cemia."

Dr. Bell: "I should have endeavored to remove placenta by mechanical means without too much interference, but I prefer a cure on homeopathic grounds; such a cure is more satisfactory and more thorough. The mere mechanical removal is very difficult to make entire. There is no proper casting off of tissues, but in the other case there is a true

casting off and the tissues are left clean." If the expert surgeon must admit the difficulty in mechanical means and that the best mechanical means do not cast off the tissues properly, what can the ordinary practitioner expect? Here is the secret of so much trouble following the curette in such cases.

Dr. Frederick Hooker, MEDICAL ADVANCE, 1891, says in a long article: "Now I propose to show that in both abortion and labor at term the placenta may remain attached, wholly or in part, for hours or days without injury to the patient, and, according to my observation and experience I believe it wrong to resort to a method (mechanical means) in such cases by which a certain definite end must be attained whether it means life or death to the patient." Then he reports a number of cases where the indicated remedy was all-sufficient without danger of sepsis. He further states that a woman in whom the placenta remained adherent, but absolutely refused to permit its removal, had it delivered seven weeks afterward and that it was in a perfectly healthy condition. The woman was about during the time intervening between the birth of the child and the delivery of the placenta. Cases with blood poisoning don't usually attend to household duties for such a period of time. This shows that the danger from retained placenta at most is but small. The indicated remedy should have been administered at once.

In the Hahnemannian Advocate, 1896, J. R. S. reports a case of abortion where the placenta was retained one hundred and twenty-four days. During the time the woman did her own work in spite of a slight hemorrhage most of the time, sufficient to soil a napkin, but was feeling quite well otherwise. After so long a time, over four months, "the placenta was sound and not in the least putrid, about as large as a goose egg."

In conclusion, common sense teaches that the placenta retained should be removed as soon as possible, but that the means of removal should be the homeopathic indicated remedy and not mechanical means. Experience goes to show that there is not the danger of sepsis from retained placenta

usually feared by the profession, and that waiting till the symptoms point to the remedy, which usually is within a few hours, is far better than mechanical means.

My own experience and practice corroborate the position herein taken. I have found no trouble in removing placentas by means of the indicated remedy within an hour or two, when retained, except in two cases, one of which remained thirty-six hours and the other one eleven days. I have not seen the slightest indication of sepsis in these cases and have had no bad results.

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### TWO CASES OF OBSTETRICS.

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T. D. Stow, M. D., Mexico, N. Y.

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CASE I. During one of the worst cold snow storms of January, 1901, I was called to see a young woman 21 years of age, a primipara who had been in labor some 68 hours. She lived eight miles away in the country, and had a physician of the old school attending her. He sent a note by the messenger who came for me, requesting me to go prepared to perform craniotomy, if, on due examination, that seemed the only alternative. So armed, cap-a-pié, I went with the messenger, and after a tedious, cold ride, reached the place. I found a robust looking young mother, who probably weighed 150 lbs. Vaginal examination revealed a head presentation, occiput right iliac position, os tincae patulous and dilatable, and ample pelvic room, genitals hot, dry, and she had thirst for cold water.

Watching her a few minutes I discovered as follows:

1st. She was very restless, and mentally perturbed. Was discouraged, declared she should die before morning; extremely sensitive to touch of vulva, vagina or thighs; suffocation; had to be raised and bolstered up in bed; during pains, much tossing about, with jerking of upper and lower extremities; muscular energy scattered; labor pains sharp, short, ineffective; desired fresh air, and grasped her neck band and wrapper wildly and in affright!

I took her physician aside and advised him to give the patient Aconite 30 in watery solution every half hour, to which he assented. Within an hour she sobered down, her skin grew moist, her pulse became nearly normal, her respiration became slower and easier; her pains concentrated upon the uterus and abdominal muscles, with regularity and effective force; and at midnight she was safely delivered of an 8½ pound boy, plump and vigorous, and the mother doing well. Thus, under the benign influence of the then indicated remedy was homeopathy vindicated, and a tedious, powerless labor transformed into an active, effective one; the use of forceps, or possibly more heroic measures prevented; a child probably saved, and the mother relieved and put in better condition for the untoward possibilities of a lying-in woman; and the fear and anxiety of relatives, changed to joy and composure.

CASE II. On the 25th of December, 1900, I was suddenly called to consult with Dr. Rodway, a homeopathic physician of Mexico, N. Y., in a case of parturition. He was physician to the family. Mrs. H., a woman of 35 was carrying her fourth child, she had sustained three previous confinements, saving and rearing but one, a fine lad now six years old. This same lad has an oblique inguinal hernia in right side, as has his father. Who will say there's nothing in pre-natal influence—in heredity?

Well, on arriving at the home of patient, found that she was taken with labor pain suddenly, at 6:00 p. m., while on her feet escorting a lady friend to the door, the liquor-amnii and blood gushing away in a stream upon the floor. Her friend got her to bed at once, sent for her mother and physician, then for her husband, who came at once. Her physician requested counsel and I was summoned.

Making an examination I found a placenta-prævia and much flowing, the right hand and arm of fœtus presenting. Continuing my exploration upward, into cavity of uterus, found the vertex of child presenting toward, and upon the left ileo-pectineal line, the head firmly grasped by the uterus at each pain, and with each pain a gush of blood. Pushing

up the arm from the elbow, I tried by bi-manual movement to change the position of head into a left occipital, concluding to take some risk of further flooding, in order to make the passage of foetus safer, but found it impossible to effect the change. So nothing remained but to bring down the feet and hasten delivery, which being done with much difficulty and yet speedily, we soon had the satisfaction of placing the mother in an easier condition, and beyond danger from hemorrhage, though with a dead child. During the operation, she had Ipecacuanha 200, every fifteen minutes, and for after conditions, nothing but Arnica, Belladonna and China, each in the 200, as indicated; she recovered nicely.

The child weighed ten pounds, and its passage was retarded by undue prominence of promontory of sacrum that shortened the sacro-pubic diameter. The uterine cavity was flushed with pure warm water, just three times during the first three days. Perfect asepsis was secured, at the hands of a skilled nurse; good ventilation, good light food, and quietude were secured. How much better this, than the irritating local applications, the anodynes, cathartics counter-irritants, et cetera, of the old school.

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### A PULSATILLA CASE.

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E. J. KENDALL, M. D., Detroit, Michigan.

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Mrs. T., tall, thin, blonde, thirty-three years of age, four months pregnant, second pregnancy; first child ten years old.

During the last two months of her former pregnancy she was confined to her bed on account of the varicosed condition of the veins of her legs, and as the veins had already become very much enlarged she consulted me to see if anything could be done to prevent a repetition of her former experience. Gave her Pulsatilla 200, and in a few days the veins were reduced to normal size. About a month later the veins again became very much enlarged, those of the external genitalia also being involved. As she had two or

three powders of Pulsatilla from the first prescription, she took these and again the veins resumed their normal size, and remained all right during the balance of the pregnancy. Her general health improved and she steadily gained in flesh.

July 3, 1900, she gave birth to a male baby weighing nearly ten pounds. In due course her breasts filled with milk and everything appeared to be all right. I did not see her from the 6th to the 8th day, when I found the secretion of milk had almost ceased and the breasts were practically empty. After her former confinement the breasts filled up, but in two or three weeks the secretion of milk entirely ceased, and she was obliged to raise her babe on artificial foods. With the recollection of her former experience, clearly in her mind she was in despair. I again gave her Pulsatilla 200, and in two days her breasts were overflowing, and now, eleven months after, she has an abundant supply of milk and is still nursing her babe, who weighs nearly twenty-five pounds. During all this time she has been enjoying perfect health and now weighs twenty pounds more than she ever weighed before.

When the babe was about a month old the father came to my office and asked me to call at his house when convenient and see the baby, as one of his testicles was much larger than the other. I found that a hydrocele had developed in the right half of the scrotum. Thinking that, as Puls. was his mother's remedy, it would likely be his remedy also. I gave it to him and within a week the hydrocele disappeared, and there has been no further trouble since.

Why did not the first prescription clear up the whole case and prevent the subsequent trouble? Was it not the similitimum, or should it have been given in higher potency, or should she have been given a dose of Sulphur or some other deep acting antipsoric? In other words, what should have been done?

[The potency was not strong enough when repeated. Her antipsoric, possibly Silica, the chronic of Pulsatilla, would have cured during pregnancy and prevented future complications.—ED.]

## EXIT VACCINATION.

BY S. E. CHAPMAN, M. D., Napa, California.

In December we descanted briefly on the overthrow of antitoxin as the specific for diphtheria and now we feel it a duty (privilege?) to pen an obituary of vaccination. Of all the gods raised by the old school, one which we must either fall down and worship or brand as unscientific and cast into their seven-times heated furnace of scorn and ostracism, vaccination has longest held his grip upon a suffering world. No other agent has been so prolific of evil to the race. Countless numbers have had engrafted upon themselves and generations of progeny all the miasms and hereditary taints to which human flesh is heir through this agency alone. But those in authority have blindly closed their eyes and ears and have enforced vaccination upon humanity for so long a time that the memory of man runneth not back to the contrary.

More than one hundred years ago Jenner set up this greatest of all their gods in the plain of Dura, densely populated with those who rush blindly about seeking specifics. That hoary headed god has finally transcended the limits of even allopathic endurance, and in imitation of its mighty rival, antitoxin, has swept scores of babes into eternity by the awful route of tetanus! The knell has sounded for vaccination!

Now what will they do? The answer is so obvious that I am reminded of the instance where an inebriate staggered into a Sunday school and plumped himself into a seat among a class of boys. The boys snickered and laughed at his drunken actions and the teacher thought it his duty to lecture the poor wretch upon the evils of intemperance.

"Sir, do you realize your awful condition?"

"O yes! I'm in the gall of bitterness and bonds of iniquity. Ask me something hard."

The old school will go on hunting specifics forever!

There is no rest for them. That they will never find one need not be said. We know from satisfactory experiences that hōmeopathy has for its foundation Eternal Truth. That which is opposed to the tenets of our school has no legitimate standing place in the universe of God. Some of them are looking toward us and inquiring the way. The writer is in receipt of many letters from them asking how to study our system. They complain that their therapeutics is very unsatisfactory, and if we have any thing better they desire to know it. Some of them will become enthusiastic hōmeopaths. The majority will continue on in the same old way. Their gods are prone in the dust; but, phoenix-like, from their ashes will spring other gods, equally false and potent for evil to the race. Very soon again we will hear the sounds of the cornet, flute, harp, sackbut, psaltery and dulcimer, and all kinds of music, and we will kotow to the new god or into the furnace we go!

But many of us have been in there so often that we are getting used to it. There is always the prescence of One with us, and very soon we will come from those flames, without so much as the smell of fire on our garments. We have the satisfaction of smiling wisely and saying, "We told you so."

To one who has long been in the true medical way it is a sad and strange scene, this constant repetition of failure on the part of specific hunters. Failure teaches them nothing. Experience repeatedly knocks them down and out; up they come, smiling as ever! The only thing to admire about them is their pluck, like the ram that attempted to butt an express train off the track when it was coming at the rate of a mile a minute; his pluck was all right, but his judgement was hardly above suspicion.

So as we stand about the sepulchre of this last and mightiest of all their gods, it would be extremely appropriate to offer up this prayer; "O that thou might be the last of all the foolish, destructive race!"



## WHO ARE THE "REGULARS" IN MEDICINE?

BY J. F. EDGAR, M. D., EL PASO, TEXAS.

Why can't the *ADVANCE*, which is the only homeopathic journal that is Hahnemannian, and whose editor is dean of a truly Hahnemannian college, start a departure of truth and kindness? I am not particularly impressed by the thought that the *Medical World*, in publishing Dr. Chapman's test case and a good many homeopathic replies thereto, and in treating homeopathy rather more decently than do most allopathic journals, has done anything very wonderful, when it constantly shows its bias by speaking of homeopathy as "a sectarianism." What I most admire about that journal is its adoption of the phonetic system of spelling. I wish the *MEDICAL ADVANCE* might do the same.

But I would like to see the *ADVANCE* correct the misuse of the words "regular" and "irregular." Help the profession not only to be homeopaths but to feel their power within themselves and to be proud of their knowledge and possession.

"We all maybe the saviors of the world  
If we believe (know) in the Divinity which  
Dwells in us, and worship it."

All of Ella Wheeler's creed is Christ-like in inspiration.

The physician who knows that homeopathy is a Law of Cure, an absolute law of the Creator, just as absolute as that of gravitation, the laws of the movements of the planetary bodies, etc., is a "Regular" physician, first, last and all the time; and all who have no fixed law to guide them in the healing of the sick in the easiest, best and surest way are "Irregular."

The *ADVANCE* and all other homeopathic journals, should correct all manuscripts to conform to this truth. Let every mention of the homeopathic physician be of him as the truly "Regular" physician, and of all others as the

**“Irregulars.”** Turn their egotistical, bigoted expressions back upon them until they learn the truth.

I allow no one, physician, preacher, agent, or who he or she may be to speak of homeopathy in my presence as a “theory” or of a homeopathician as an “irregular.” I correct every article I read where the term is used. In Polk’s Medical Register and in every official paper I write my practice as “Regular” “Homeopathic.” I correct every allopathic physician to his face if he uses the term incorrectly. I never solicit nor allow consultations with them nor toady to them in any way, always preserving my personal dignity and my homeopathic self respect.

Furthermore, I charge more for office consultation and medicine than any allopathic physician does, telling my patrons that I do so because it is worth more to them and they come back reporting that it really is worth more.

I advance the fact, because it is a truth and a fact. Homeopathy will never receive its rightful recognition until its practitioners are correctly educated to a knowledge of homeopathy, not merely to a belief or theory. We will advance and be recognized as representatives of a fact, a truth, an absolute law of cure, if we stand together, work together and do not allow any one, no matter how great in stature, to treat us or speak of us as advocates of a sectarianism, a dogma, or a visionary hypothesis.

If another physician in my town has a sign out as a homeopathic physician I lend him what aid I can, professionally and otherwise, and avoid toadying to the allopathic school. Two or more homeopaths, if they stick together and co-operate with each other, consistently and honorably can succeed much better, financially and in other ways, than if they pull apart or if one of them leans toward the “irregular” or allopathic profession for support in time of need. Let us always be true to our profession, our colleague and our Law, and we will advance accordingly.

## EDITORIAL.

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All Contributions, Exchanges. Books for Review and other communications should be addressed to the Editor, 5142 Washington Ave., who is responsible for the dignity and courtesy of the magazine, but not or the opinions of contributors.

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### HOW PERFECTLY 'ORRIBLE?

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The following from the Cleveland Journal of Medicine for December is awfully harrowing:

#### PRESCRIBING WITHOUT DIAGNOSIS.

The *Cleveland Press* recently disguised a reporter as a tramp and sent him on a tour of adventure through the city. His wanderings led him to a dispensary. According to his description, he went in with a great number of people and was duly registered. Ushered into the presence of the doctors they inquired somewhat minutely into his symptoms and prescribed some medicine. Then he was sent on his way, no physical examination having been made to endeavor to learn his actual condition! Yes, this occurred in Cleveland in November, 1901. Think of it!

To prescribe without first naming the disease! Terrible, terrible! Just to take down a few symptoms, a mental picture, as it were, of what the patient is suffering and to prescribe for these. Oh! mirabile Dictu, with the accent on the "tu." For it is utterly "too-too!" Now if that dispensary physician or clerk had but placed his ear to the patient's chest, had thumped his ribs a little, had felt for his appendix, had kneaded his bowels and examined his orifices, called it something and had then prescribed for that, how "scientific" and satisfying this would have been! The means would have then justified the end, whether the end was satisfactory to the patient or not. But for any patient to get well on remedies prescribed according to symptoms alone is a crime against diagnosis; of course, it is.

Diagnosis is all right. We all believe in it as an aid to the successful practice of medicine. But precise prescribing must be done according to the symptoms; for these are the physiognomy and spoken story of the disease. They are what ails the patient; they are that for which he

seeks relief; they make up his drug picture, and they are what remedies relieve. Instead of the *Cleveland Journal of Medicine* making such wry faces at symptomatic prescribing it would be conferring a lasting benefit upon its readers if it would aid them in learning how to prescribe according to the very indications it professes so to despise. No diagnosis was ever made up without consulting the symptomatology of the case, whether objective or subjective, and no prescribing can be successful that is not based upon symptomatology and symptomatology alone. Occasional cures, if they occur along other lines, are but haphazard happenings. Accurate curing is the removal of symptoms and this can only be accomplished with a satisfactory degree of uniformity by taking the symptoms of the case, "somewhat minutely," as they present themselves, and prescribing for them instead of for some supposed pathology and namable diagnosis.

\* \* \* \*

**The X-Ray as a Cancer Cure.**—We had fondly hoped that our colleagues of the other school should enjoy the monopoly of foisting fads upon the gullible public. We did not think we had a homeopath of any professional standing who would so far forget himself, his colleagues, and his obligations to homeopathy as to appeal to the reporter of the daily press to proclaim his discovery to the profession. We did not think it possible that Koch's exploit with tuberculin could be so soon forgotten. Neither did we conceive the possibility that the senior professor of *Materia Medica* in the oldest homeopathic college in Chicago should so far forget his homeopathic principles as to advocate the cure of cancer, or any other disease, with a specific. Homeopathic physicians are not supposed to treat diseases with specifics, but to carefully individualize each case of sickness and treat the patient accordingly. But a practical knowledge of "The Three Rules of Hahnemann for the treatment of chronic diseases would have saved the professor and his colleagues the mortification which must necessarily fall on every homeopathic physician. These rules or observations of Hahn-

emann for the cure of chronic diseases, are like potentization, practical corollaries of the law.

**RULE I.** The characteristics of the remedy must be similar to the characteristics of the patient. The symptoms of the remedy must not only be alike, one by one, but in both remedy and patient the symptoms must be of a like rank, for it is this rank which decides in the selection.

**RULE II.** Chronic diseases proceed from without inward, from below upward, from the minor to the major organs; cure takes place in the opposite direction, from within to without, from above downward, from the most to the less essential organs, from the brain and nerves outward to the skin. All the antipsoric drugs of Hahnemann have the evolution of the effects from within towards without, as their most characteristic action.

**RULE III.** Symptoms recently developed are the first to yield. Older symptoms disappear last.

This rule enables the Hahnemannian to make a scientific prognosis. In the cure of a chronic disease of long standing, the symptoms having disappeared in the reserve order of their onset, we can confidently predict permanent restoration to health.

Cancer is essentially a chronic disease with a malignant tendency, and can never be cured by the knife, the X-Ray or any other method whose action is from without to within. The X-Ray may suppress or palliate but can never cure, for it acts in the wrong direction.

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**Compulsory Vaccination**, like compulsory education, may be necessary for the best interests of the citizen and the state. But, to be protective, it does not follow that it must be done in the good, old-fashioned, allopathic way, with crude virus of dubious purity. Neither should it be done indiscriminately, for every child cannot safely be vaccinated with crude virus. This indiscriminate vaccination is a chief cause of the strenuous objections offered to this prophylactic measure by many good citizens, and in the end may modify or cure the evil. How long will the intelligent and educated American citizen tolerate the public vaccinator if he carry out his orders as he did in the following case?

The Coroner will begin today an investigation concerning the death of Dora Krisler, two years old, of 115 New street, who had no apparent ailment on Wednesday of last week, when she was vaccinated. Soon afterwards she suffered from violent convulsions, but whether tetanus was the cause is not yet known.

The child was vaccinated by one of the corps of physicians under

direction of Dr. Angney. When he told of his errand to Mrs. Krisler she opposed his touching the child, because the latter was not very strong. The man, however, so the mother says, would listen to no objection, but said the little one must be vaccinated.

The virus was quickly injected and the physician left after having made a profane remark about the despatch with which the operation had been done. On Sunday the child's left arm was greatly swollen, and soon the wrist began to swell and the hand became clenched. Then the right wrist and hand became swollen and on Monday both ankles were swollen and the legs grew rigid. The child went into convulsions, and when Dr. A. E. Keller was called in to look at the little one on Monday night he saw there was no chance for recovery. Blood poisoning apparently brought death.—*Philad. Public Ledger.*

Let the physician exchange places with the patient and it might be different from that standpoint. How long will it be ere physicians and public vaccinators will learn that children or adults with a psoric or tubercular dyscrasia are not fit subjects for crude vaccination? Should not the staggering blows which indiscriminate vaccination has received in the last few months open our eyes to the unsafe and unwise practice?

But why should the homeopath be compelled to resort to this method when he has a better, safer and more effective one? In the *Organon*, §16, Hahnemann enunciates an observation that applies to all contagious diseases:

Our vital force cannot be attacked and affected by injurious influences on the healthy organism from external inimical forces that disturb the harmonious action of the functions, *otherwise than in a dynamic manner*, and in like manner, all such morbid derangements or diseases cannot be removed from it by the physician in any other way than by the dynamic action of suitable medicines acting upon the dynamic vital force.

It is a scientific fact, discovered and promulgated by Hahnemann years before the germ theory was broached, and will hold good years after it is forgotten, that the disease producing cause of contagious diseases is dynamic in character and is most effectively prevented and cured by similar dynamic means. This is as true of scarlatina, measles, whooping cough, etc., as it is of smallpox, and the dynamic prophylactic is equally preventive in all. Hence why should the homeopath, who is at least a century in advance of his allopathic colleague in all things therapeutic, be com-

elled to follow him in his crude and uncertain methods. We advocate prophylactic measures in all contagious diseases as strenuously as any one, but measures that are safe, effective and harmless. No blood poison or tetanus or life-long glandular affection ever follows, and protection is more perfect and lasting because more in scientific accord with natural methods of cure.

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Cook County Hospital, the great charity hospital of Chicago, and one of the largest in the world, is advertised as *the* clinical school by many colleges in Chicago. While it is no doubt a great field for clinical research, especially for the internes, it has never been open to the students as are the large hospitals in Vienna, Berlin, Paris or London. But the hospital is not a college and its published advantages are largely on paper so far as the student is concerned. For years these supposed clinical facilities have been growing less and less visible, and the principle colleges, Rush, the Physicians and Surgeons, the Chicago Homeopathic, have gradually secured hospital privileges independent of the County Hospital.

But the privileges of the clinical amphitheatre so long enjoyed in common by all students upon the payment of a five dollar hospital fee have now been abolished, largely because the students abused the privileges accorded them by the County Board. The following editorial from the *Record-Herald* gives public endorsement to the recent action of the hospital authorities prohibiting public clinics:

Warden Healy of the County Hospital has acted properly in his decision with regard to public clinics. The hospital is not maintained for the benefit of medical students, and no woman patient should be subjected to the double trial of an operation and an exposure before a crowd of more or less impertinent observers among whom there is at best a purely scientific interest in the case.

The question has been debated before and has been brought up anew by a violation of an express rule. A young woman had been taken into the amphitheatre where the students were assembled, and she would have been operated upon if the warden had not intervened to enforce a standing order issued two weeks ago. He now says that the rule was made "because the privileges of the students were abused." There were

complaints of the nurses "about indignities which the students offered to patients."

But so strong is his position that the abuses and complaints are not necessary to justify it. No persons aside from the operating surgeon and his assistants have any right to be present when an operation is being performed on man or woman, young or old. The patients are entitled to every delicacy of attention, and the long retinue of curious apprentices should be kept out unless the "subject" is perfectly willing to lend himself to their instruction.

Is it possible that the rudeness of the students has "killed the bird that laid the golden egg?" If so, it does not speak volumes for the student world in Chicago.

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The Homeopathic Medical Society of Chicago seems to have degenerated into a slimly attended affair. At the December meeting not one of the college surgeons attended to discuss an excellent paper by Dr. Shears on the surgery of the stomach and intestines, nor did a college gynecologist attend to discuss a splendid paper by Dr. Bailey. Not an ex-president was there, nor was even the president in evidence. It has become the rule for essayists and appointed disputants to appear only on the occasions of their own part of the proceedings, and those who have been president seem to consider themselves honoring the society by dropping out as soon as their terms expire.

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#### OWLS AND MEN.

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The owl is like some men,  
 He's rated wise, but not  
 For things he ever did  
 Or thoughts he ever thought.  
 And, like some men I know,  
 And men that you know, too,  
 The owl just sits and hoots  
 At things that others do.



## CURRENT NEWS-NOTES AND ITEMS.

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Dr. J. A. Fernee has recently located at Sidney, Ohio.

Dr. B. F. Lucas has recently located at Ozark, Ark., south of St. Louis.

Dr. Wm. Maclay Lyon has opened an office at 3901 Cottage Grove Avenue.

Dr. T. M. Dillingham has removed to No. 8 W. Forty-ninth street, New York.

Dr. Charles Adams has removed from Kenilworth, Ill., to 15 Walton Place, Chicago.

Dr. F. H. Faulder has succeeded to the practice of Dr. Anthony at Wapakoneta, Ohio.

Dr. Wm. E. Rounds, of No. 110 Forty-ninth street, New York, has assumed charge of the practice of the late Dr. Houghton.

Hahnemann Medical College of Philadelphia is the oldest homeopathic college in the world. It was established in 1848.

Chicago has five homeopathic colleges, with nearly six hundred students, and more than six hundred homeopathic physicians.

In Louisville, Kentucky, the homeopathic profession has a one-fourth representation in the City Hospital. The two professions have no trouble in working side by side.

Dr. Walton of Cincinnati, ex-president of the Institute and our well-known surgeon, has removed his office and residence to the corner of Eighth and John streets.

Dr. J. F. Tapley, Marysville, Cal., in renewing his subscription for 1902, encloses that of two of his colleagues and adds: "You are giving us the very best journal in our school."

Barcelona, Spain, has more than sixty homeopathic doctors, a homeopathic pharmacy or two, and a good homeopathic society which publishes its own journal, "La Revista Omeopatica."

Homeopathy has a one-sixth representation in Chicago's great charity, Cook County Hospital. Every sixth patient admitted is placed in charge of the homeopathic corps of internes and attendants.

Dr. Wm. Dickson Young, formerly a faithful Hahnemannian of

Buffalo, has retired from practice and is now secretary of the Cling-Surface Manufacturing Company, of which his father is president and treasurer.

Dr. Filip A. Forsbeck has recently been reappointed on the State Board of Medical Examiners for Wisconsin. Dr. Forsbeck and Dr. Dale are the homeopathic members thereof, the latter being president of the board.

Dr. Frances MacMillen, formerly of Nashville, Tennessee, is now located in the City of Mexico, and will be glad to receive patients referred to her by physicians of the United States. Her address is Otego, Numero 5.

Dr. J. W. Ward, a successful homeopathic surgeon of San Francisco, has been appointed a member of the board of health for that city, the first time a homeopath has ever been recognized in the metropolis of California in that way.

Dr. Henry C. Houghton, of New York, died on December 1st as the result of a stroke of apoplexy. He was Dean of the Homeopathic College of Ophthalmology and Otology and one of the best-known eye and ear men in the United States.

Judge Samuel E. Green, of the Criminal Court of Alabama, has issued a ruling that practitioners of Osteopathy in that state are compelled to procure a license for the practice of medicine, the same as representatives of other systems.

Dr. John A. Gann, of Wooster, one of the best-known Homeopaths of Ohio, died on the 26th of November as the indirect result of an apoplectic stroke occurring about six months previously. Dr. Gann was a brilliant and brainy man and greatly beloved in his community.

Homeopathy is well known in Mexico, Brazil and other Latin-American countries. In Mexico there is a homeopathic college, under the patronage of the government. In Rio de Janeiro, Buenos Ayres and other Brazilian cities a large number of homeopathic physicians are practicing homeopathy.

Lord Roberts, of the English army, is a staunch homeopath. While in the field in South Africa he carried his homeopathic medicine case and book of instructions, and administered unto himself and fellow officers as necessary. He says he has saved many a life by it, and that he wouldn't like to be without it.

Thanks! doctor, for words of encouragement and accompanying cash. If our readers will furnish "the sinews of war" by promptly renewing subscriptions for 1902 and inducing their friends to subscribe also, we promise the most helpful magazine that comes to your table. If you will promptly "touch the button" we will do the rest.

The title of "The American Homeopathist," edited by Dr. Frank Kraft, has been changed to "The American Physician" and the journal has been considerably enlarged and beautified. The old title will be missed, and it is doubted if anything is gained by changing from a word so distinctive and full of meaning to one so common and void of significance.

Dr. J. C. Chadwick of Buffalo has issued the first number of a neat little publication entitled "The Homeopathic Journal of Pediatrics," the only journal of the homeopathic profession devoted exclusively to the diseases of children. The first number is a creditable issue. The subscription price is \$1.00 a year, the office of publication 381 Franklin street, Buffalo, N. Y.

At a recent meeting in Chicago of members of the State Examining Boards of Wisconsin, Indiana, Illinois, Michigan and Ohio preliminary steps were taken toward establishing a reciprocity exchange of certificates of qualification in these states. It is expected that from this movement there will result a wide-spread reciprocal exchange of such certificates over the country.

Scarlet fever and diphtheria have been on the increase recently in Chicago, the latter disease especially giving the authorities a good deal of apprehension. Yet they continue to declare their full faith in the efficiency of antoxin as both a preventive and a cure. A dozen or more inspectors are going the rounds daily armed with their little squirt guns, seeking whom they may squirt.

At the annual meeting of the Northwestern Homcopathic Medical Society, held at Toledo on December 10th, Dr. J. H. Mac Vey was elected president, Dr. L. P. Gill vice-president. Dr. G. W. Ronehouse second vice-president and Dr. W. A. Humphrey secretary. About one hundred physicians were present. A large number of excellent papers were read and the discussions were reported to be full of interest and profit.

To vaccinate or not to vaccinate, that's the question that is bothering the vaccinationists. Between tetanus from impure virus and destructive ulceration and gangrene from glycerinized lymph, the way of the child of the vaccination-physician is hard. Better let the little ir-

nocents alone and build them up hygienically and homeopathically so their systems will resist invasions of all kinds. Disease doesn't occur without a pedigree.

The American army of occupation has cleared the city of Havana, formerly the pest-hole of the Western Hemisphere, of its dreaded enemy, yellow fever. Ben Butler rid New Orleans of this scourge during the civil war in the same manner. Both simply cleaned up the city and kept it clean. The American army and navy did good work in driving Spain from Cuba, and the army has done equally good work in ridding its capital of yellow jack.

Philadelphia has had a small-pox visit and scare and the local societies have given themselves over to a discussion of the pros and cons of vaccination as a preventive. As one member expressed it, "We seem to be between the devil and the deep sea; the perils of vaccination and the dangers of small-pox". It is said not to be uncommon to see a policeman guarding a quarantined house on which is posted the yellow notice, in almost every part of the city.

The Medical Magazine, edited by Dr. Harvey B. Dale, notes "that the arrangement for the establishment of a general hospital under homeopathic control in Milwaukee is brewing," from which it would seem that it is impossible for even professional circles of the Cream City to get away from the phraseology that has made Milwaukee famous. That city is deserving of a good homeopathic hospital, and it is hoped that the "brew" will not spoil in the steaming.

More than fifty of the students of Hering Medical College availed themselves of a special students' offer made by Dr. Fisher for copies of his Diseases of Children, issue of 1902. The entire expense of issuance having been more than met by the sales, nearly three thousand copies, the author has reduced the price of the volume to \$3.00 in cloth or \$3.50 in sheep or morocco binding. It is the best homeopathic volume on diseases of children that has ever been published.

Homeopathy used to be very strong in Cuba prior to their numerous and protracted insurrections. As long ago as in the "fifties" there was published in Havana a weekly homeopathic magazine, and another in Santiago monthly. Throughout the island there were able homeopathic doctors. Most of these were killed during the various rebellions or have removed to Spain and other countries. There are still several homeopaths in Havana and an occasional one in the interior.

The oldest doctor in the world, so far as known, Dr. John P. Wood, celebrated his 100th birthday anniversary at Coffeyville, Kansas,

on the fourth of January. He was born in Dublin, graduated in medicine in 1824, and has been in continuous practice in Kansas since 1854. He served in the Mexican war as a surgeon and cast his first vote for the presidency for Andrew Jackson. Dr. Wood still attends to professional duties. He is of the allopathic profession but has studiously avoided taking his own medicine, hence his ripe old age.

The price of the Homeopathic Text-Book of Surgery, of which such eminent men as Helmuth, Van Lennep, Macdonald, Shears, Walton, Pratt and others are authors, has been reduced to \$5.00 in order to bring it within the reach of the younger men in the profession and of students who have not already supplied themselves as original subscribers to the volume. This is a magnificent and really valuable book. It should be in every homeopath's library. There is no more concise, succinct and practical treatment on surgery than our own Homeopathic Text-Book.

Kalamazoo has an appendicitis club of more than seven hundred members. The club was formed for the purpose of rendering assistance to persons suffering from appendicitis, that town having had a very large number of such cases within a few years. It is stated in the daily papers that more than five hundred citizens are under treatment now for symptoms of appendicitis, and that more than fifteen hundred, all told, have undergone operations for it. The probabilities are that there are some doctors over in the Celery City who have appendicitis on the brain.

The title of the "Cleveland Homeopathic Reporter" has been changed to "The Cleveland Medical and Surgical Reporter" and the journal has been considerably enlarged and improved. Dr. Horner continues as editor-in-chief, with Dr. H. D. Bishop as managing editor. The Reporter publishes "no declaration of principles," but announces that "its allegiance is first and foremost to the great principles of Homeopathy, then to the college under whose auspices the journal is published." It has the best wishes of THE MEDICAL ADVANCE for its complete success.

The next meeting of the Southern Homeopathic Medical Association will be held at Louisville, Kentucky, in October of the present year, at which time it is expected to awaken an unusual enthusiasm in the interest of this Southern society and develop to the limit its capabilities as a missionary body. In the absence of a sufficient number of homeopaths in many of the Southern states to make successful state associations there should surely be one large and effective propagating society. The Louisville meeting will doubtless put the Southern Association squarely on its feet for future effective work.

A millionaire by the name of Palmer, living at Colorado Springs formerly president of the Denver and Rio Grande railway, has given \$150,000 for the purpose of erecting a sanitarium just east of the city for consumptives. There are to be two buildings, one costing a hundred thousand, for pay patients, but not to be operated for profit, and another to cost fifty thousand for people who are indigent. It is not the intention to make the latter an asylum for provident persons, but to give proper care and nourishment to consumptive poor not able to take care of themselves but yet with some chance for recovery.

The father of one of the children murdered by antitoxin in St. Louis last fall has brought suit for \$20,000 against the city for the wanton slaughter of his innocent babe. He charges, and with a good deal of justice, that the city is responsible for the death of his child because of the carelessness exhibited in the preparation and dispensing of the antitoxin. All corporations, whether of private or public character, which engage in the manufacture of toxic drug-agents, assume responsibilities of no insignificant import, and in cases of disaster so wanton and murderous as those of the St. Louis instance it would seem that it is but just that they should be held legally as well as morally responsible.

The January number of the North American Journal of Homeopathy was issued in an unusually attractive form, as a special semi-centennial jubilee number, covering the years from 1851 to 1891. It contained a handsome frontispiece, giving half-tone likenesses of eleven former distinguished editors including Hering, Marey, Lilienthal, Allen, Holcombe, Hempel, Comstock, Bayard, Dake, Ludlam and Hale. Of these only Dr. T. F. Allen and Dr. T. G. Comstock are now living. It also gave a half-tone of the present editorial staff of thirteen, the chiefs of which are Dr. Porter as editor and Dr. Wm. Tod Helmuth, our eminent surgeon. The number contains several colored plates and other illustrations, making it not only an unusually attractive issue but an unusually valuable one.

An idea of the extent of Chicago's hospital charity as illustrated in Cook County Hospital, with the second largest hospital population of the world, is shown in the figures of attendances for last year. There are 797 patients in the hospital at the present time. During the twelve months just closed there were treated 20,218 cases in addition to these. Of this number there were 13,812 surgical patients, 4,408 medical, 693 contagious, 320 obstetrical and 979 cases requiring dressings only. The general surgical cases numbered 8,724, the operative cases 4,005. Besides these there were 737 gynecological cases and 256 belonging to the ophthalmological department. In addition to this large army of charity patients, Dunning took care of 3,042 cases, its population being largely consumptives and insane subjects.





C. CARLETON SMITH, M. D.



# THE MEDICAL ADVANCE

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## WHY DOCTORS WHO VACCINATE SHOULD ABANDON THE PRACTICE.

By J. W. HODGE, M. D. Niagara Falls, N. Y.

The vaccination practice, pushed to the front on all occasions by a certain class of the medical profession, and through political connivance made compulsory by the state, has become not only a serious menace to the health of the rising generation, but also a most flagrant outrage upon the personal liberty of the American citizen. The inoculation superstition was the chief medical delusion of the eighteenth century. With few exceptions medical men of that period defended smallpox-inoculation and held it up to public attention as the great desideratum for the common welfare. The practice of this horrible medical doctrine sent multitudes of victims to untimely graves, and permanently impaired the health of other multitudes. Yet, vicious as the practice of inoculation proved to be, it was superseded at the hands of Edward Jenner by a fallacy quite as monstrous; so that the nineteenth century, notwithstanding its boasted civilization and its much vaunted scientific acquirements, was nearly as much cursed by the old-school doctors as was the eighteenth.

The modern leaders in the vaccination movement must be perfectly aware that the cow-pox practice stands condemned, although they appear to have no idea of surrendering it. Perhaps it would be expecting too much from human

nature to imagine that all doctors who have been accustomed to derive large revenues from the cow-pox practice will discard this lucrative enterprise even after they have been made fully aware of its utter uselessness, as well as of its pernicious effects on the lives and health of the rising generation. Nevertheless, I shall devote this essay to the presentation of some reasons why I believe that physicians who vaccinate should abandon the practice.

For the reasons which follow I am induced to believe that no intelligent physician who has taken the pains to inform himself on this subject can conscientiously perform the vaccination-rite:

I. Because there is on record abundant and positive proof that vaccination has been a complete failure as a preventive of smallpox in every country in which it has been practiced and the results recorded. I have been unable, after a thorough and careful search in medical literature, to find a scintilla of evidence worthy of the name to show that vaccination has ever protected a single human being from smallpox except by killing him. It is my firm conviction, based on a comprehensive study of smallpox statistics, gathered from every quarter of the globe, that the deceased victims of vaccination are the only persons of whom it can be truthfully affirmed that vaccination "protected" them from smallpox. By a century's dearly bought experience vaccination has been proven to be—I venture to think—not only useless as a preventive of smallpox, but it has also been shown to be the cause of many thousands of deaths. Healthy children have been its principal victims.

Prof. Alfred Russel Wallace, LL. D, F. R. S., an accomplished statistician, and one of the ablest scientific men of England, in his last great work entitled, "The Wonderful Century," has devoted a chapter to the discussion of vaccination. Prof. Wallace has made a very exhaustive study and analysis of the statistical problem as it relates to vaccination and smallpox. Under the caption, "Vaccination a Delusion—Its Penal Enforcement a Crime," he has devoted more than one hundred pages to a careful consideration of

the most trustworthy statistics on a large scale relating to these subjects.

In the preface of "The Wonderful Century" Prof. Wallace says: "The vaccination question has been discussed at the greatest length for several reasons. It is the only surgical operation that, in our country, has ever been universally enforced by law. It has recently been inquired into by a Royal Commission, whose majority report is directly opposed to the real teaching of the official and national statistics presented in the detailed reports. The operation is admittedly the cause of many deaths, and of a large, but unknown, amount of permanent injury. The only really trustworthy statistics on a large scale prove it to be wholly without effect as a preventive of smallpox. Many hundreds of persons are annually punished for refusing to have their children vaccinated; and it will undoubtedly rank as the greatest and most pernicious failure of the century. I claim that the evidence set forth in this chapter demonstrates this conclusion. It is no longer a question of opinion, but of science; and I have the most complete confidence that the result I have arrived at is a statistical, and, therefore, a mathematical certainty." In concluding this chapter, on page 314 of "The Wonderful Century," Prof. Wallace sums up his case in the following words: "I venture to think that I have here so presented the best of these statistical facts as to satisfy my readers of the certain and absolute uselessness of vaccination as a preventive of smallpox; while these same facts render it in the highest degree probable that it has actually increased susceptibility to the disease. The teaching of the whole evidence is in one direction. Whether we examine the long-continued records of London mortality or those of modern registration for England, Scotland, and Ireland; whether we consider the 'control experiment' or crucial test afforded by unvaccinated Leicester, or the still more rigid test in the other direction of the absolutely re-vaccinated Army and Navy, the conclusion is in every case the same: That vaccination is a gigantic delusion; that it has never saved a single life; but that it has been the cause

of so much disease, so many deaths, such a vast amount of utterly needless and altogether undeserved suffering that it will be classed by the coming generation among the greatest errors of an ignorant and prejudiced age, and its penal enforcement the foulest blot on the generally beneficent course of legislation during our century."

I feel confident that if the most zealous advocate of vaccination, who is amenable to reason, could be induced to carefully consider, with a mind completely emancipated from prejudice, from the disturbing influences of early education and pre-conceived opinions, of passion, tradition, personal and other kinds of bias, Prof. Wallace's arguments in his scathing arraignment of vaccination, he would wonder how he ever came to pin his faith to such a huge imposture.

Another argument I offer in support of my contention that physicians are not justified in vaccinating, is the fact that there is not a particle of proof on record to warrant the belief that the severity of an attack of smallpox has ever been mitigated because of the fact that the smallpox patient had been previously vaccinated. By a study of the records of variolous epidemics we learn that hundreds of thousands of smallpox patients have perished of the confluent form of variola, while the plainest scars of the vaccinator's lancet were in evidence on their bodies.

Physicians, I believe, should abandon the vaccine operation because it is known to be the means whereby thousands of healthy children are killed every year, as shown by mortality statistics. From a sworn statement of the Registrar General of London, England, I quote the following sentence: "In the city of London an average of two hundred children die annually from disorders initiated by the lancet of the vaccinator." The large number of fatalities from tetanus following vaccination in children which have been recently reported as having occurred in several American cities tends to confirm the prevalent belief that the dangers attendant on the vaccine operation are, at times, more fatal than the disease which it is supposed to prevent.

There is recorded in medical literature ample proof of

the most positive character that vaccination has been the means of disseminating some of the most fatal and loathsome diseases, among which are leprosy, cancer, syphilis, tetanus, tuberculosis, and erysipelas. The cow-pox practice has, indeed, proved itself to have been one of the surest and most direct means of making all forms of "pox" perpetual. In many warm countries humanized virus is still in use.

I oppose vaccination because the introduction of the products, "calf lymph", of diseased animal tissue into the circulation of a healthy human body is contrary to all the teachings of modern surgery and sanitary science, and has no justification in either science or common sense. The absurd dogma which assumes to conserve health by propagating a zymotic disease is at variance with all established knowledge. The cow-pox delusion was conceived in ignorance and born of superstition—a dairy-maid's whim borrowed by Jenner and palmed off upon the credulity of the medical profession as a never-failing preventive of small-pox.

The next reason I shall offer in support of my assertion that no intelligent and well-informed physician can conscientiously practice vaccination, is the fact that the doctor has no means of judging the quality of the vaccine stock used. Vaccine virus is now wholly a commercial product. The family physician is simply a "middle-man" between the vaccine dealer and the vaccinated, conveniently and adroitly shunting onto the former any ill-effects which may appear in the latter. Millions of vaccinations are made every year while nobody knows what they are made with. The whole cow-pox practice is a haphazard game of chance in which the vaccinated take the *chances* while the doctors take the *fees*. The medical profession of today buys its vaccine matter, under a variety of names, from those who make merchandise of it, on the simple dictum of the manufacturer that his particular brand of "lymph" is the right thing to use.

At the time of inserting vaccine virus—a disease-pro-

duced matter, miscalled "lymph"—into the healthy child's body the physician has no means of knowing what the result will be. Whether tetanus, erysipelas, cow-pox or a negative result will follow he is unable to tell until after the result of the experiment has made itself manifest in the child's system. Dr. M. R. Levenson of Brooklyn, N. Y., a physician who has devoted a great deal of time and study to the investigation of matters pertaining to vaccination and smallpox, has submitted to the medical profession the following proposition: "I will pay one thousand dollars to anyone who will explain what it is that is put into the blood of the vaccinee when he is vaccinated."

It is needless to state that, at last reports, nobody had claimed the reward. Where are all our bacteriologists and closet scientists? Why don't they speak out? I venture the opinion that evidence on record in medical literature justifies the belief that the vaccinator is a public malefactor because he confesses himself a menace to health by his practice of intentionally diseasing healthy people under the pretense of preventing disease. The avowed purpose of the vaccinator is to inoculate into the bodies of healthy human beings the virus of an acute contagious disease called vaccinia, or cow-pox, which is one of the zymoses. If the vaccinator succeeds in converting the healthy person operated upon into a diseased person he pronounces the vaccine operation "successful," and claims that the person is "protected."

Let us briefly examine the nature and extent of this alleged "protection" and the effects of this disease which, under the plea of sanitation, is wantonly thrust into the bodies of millions of healthy children.

It is generally conceded by pathologists that the vaccine disorder (vaccinia) is as truly a disease as is measles, smallpox, or typhoid fever. It is also a well-attested fact that convalescents from one of the zymotic diseases are prone to contract any other that may be prevalent at the time. For instance, a patient weakened by scarlet fever is likely to take diphtheria if the latter is about, and vice versa. It seems to be a reasonable conclusion, based on observation

and experience, that the effects of the vaccine disease diminish the resisting powers of the individual operated upon and thus tend to render him more susceptible to the disease it professes to prevent. Is it not fair, then, to infer that if by general vaccination the vaccine disease be made plentiful it will convert the community into a convenient nidus for the reception of the contagion of other zymotic diseases, including smallpox?

This conclusion coincides with the results arrived at by Prof. Wallace in his study of smallpox statistics. On page 314 of "The Wonderful Century" he says: "These same facts render it in the highest degree probable that vaccination has actually increased the susceptibility to smallpox."

The vaccinal abrasion is also a source of serious danger. The puncture of the vaccinator's lancet, by destroying the integrity of the epidermis—nature's barrier against absorption of poisons—opens one of the most fatal avenues through which septic poisons gain admission to the circulation. Through the agency of the vaccine lancet children, in particular, are thus exposed to infection by the tetanus bacillus, as well as to that of any other infective agency which may prevail, including smallpox contagion during epidemics of that disease. During epidemic prevalence of variola the infection is believed to be more than ordinarily dangerous, because it is then more abundant and more concentrated. Vaccination being more generally enforced during epidemics of variola, infection through vaccinal abrasions offers another explanation of the fact that the susceptibility to smallpox is increased by vaccination, especially during the prevalence of epidemics.

I believe I am warranted in maintaining that an impartial and comprehensive study of vital statistics justifies the belief that the extension of the practice of vaccination cannot be shown to have any logical relation to the diminution of cases of smallpox; and the same vital statistics, gathered from every available source, establish the fact that smallpox, like the other zymoses, originates in, or is propagated by, unsanitary modes of life, and can only be effectually

subdued by removing the cause. Variola is a filth disease. All the world over the occurrences of its most destructive epidemics have coincided with periods of sanitary neglect. Sanitation, not vaccination, is its antidote. The experience of unvaccinated Leicester proves that all that is needed to avert epidemics of this loathsome disease is uniform obedience to hygienic and sanitary laws. Under the benign influence of sanitary intervention this filth-disorder loses all of its terrors, and vaccination becomes a mockery.

The propagation of the Gloucestershire tradition has exerted a powerful influence in retarding the progress of the evolution of hygiene and sanitary science, as related to this disease. Teaching the people to rely on vaccination for "protection" from smallpox has tended to encourage the sloth and carelessness to which ordinary humanity is prone. The practice of vaccination is now regarded by many of the foremost sanitarians of the world as an irrational attempt to cheat outraged nature—a futile effort to avoid a zymotic disease without getting rid of the conditions of uncleanness out of which it springs, and by which it is propagated. The practice of vaccination is opposed to the whole teachings of hygiene and sanitary science. It is one of those terrible medical blunders, like inoculation, bleeding, and mercurial salivation which, in their far-reaching evil consequences, have cursed humanity.

Once committed to an error it is amazing with what mulish conservatism the medical profession will continue to cling to it. To abandon as worthless or injurious a measure which was once adopted as a great "blessing" would seem to be a tacit confession of fallibility; and fallibility is a human defect which doctors of medicine, as a class, like "doctors of divinity", are very slow to admit.

Another count in the indictment against the vaccine practice is found in the fact that the perpetuation of the cow-pox disorder has done much to promote the poison-plague which is infesting the homes of civilization in the form of ever-multiplying quack drugs and patent medicines.

Instead of being taught by their family physicians to



promote health and ward off disease by attention to cleanliness, ventilation of dwellings, exercise in the open air, and the observance of general hygienic habits of life, millions of people are encouraged to rely on anti-natural remedies, and thus come to believe that health can be sold and bought across the drug-store counter.

But let us not despair. There are "hopeful signs in the sky." The effulgent sunlight of science is streaming forth, dissipating the pestilential mists of ignorance and superstition. New light is flowing into the minds of men. Sanitation has taken the place once occupied by prayers, amulets, charms, relics and other kindred fetiches. Vaccination is on trial at the bar of Justice. Before the assaults of scientists the vaccine idol is sure to fall and pass into the limbo to which inoculation and other kindred medical delusions have been relegated.

The ever-increasing intelligence which characterizes the present era of thought and profound research is bound to damn drastic drugs and abolish the irrational and pernicious practice of propagating a zymotic disease in the name of sanitation. The efforts of sanitarians have not been unfruitful. In reviewing the progress of medical history of the nineteenth century it is found that the saving of human life was almost entirely due to diminished mortality from causes whose destructive activity is especially amenable to sanitary intervention—namely, the so-called zymotic diseases.

While I am aware that very few physicians, comparatively, are outspoken in their views regarding vaccination, I should nevertheless consider it an insult to the intelligence of the medical profession, here at the dawn of the twentieth century, to doubt that thousands of physicians who have not yet openly abandoned the cow-pox practice have long ago lost all faith in the value of this irrational procedure, and have quietly dropped it from their private lists of reliable prophylactics. It is a significant fact which needs no comment that a very large number of physicians no longer consider it necessary to subject themselves or

their families to the vaccination rite, even during the prevalence of smallpox cases in their own vicinity. It must be admitted, however, that the enormous plurality of these sanitary rationalists prefer to keep their convictions on the cow-pox subject to themselves, for reasons which the reader will appreciate without specification by the writer.

While it is regrettable that so many respectable members of a benevolent profession should by their silence tacitly indorse a useless and mischievous practice, it would, on the other hand, probably not be too much to say that there are in our own state of New York several thousand physicians who could not be coaxed or bribed to pollute the blood of a healthy child with cow-pox virus.

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### A RIGHTEOUS PROTEST.

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DR. S. H. DURGIN'S BILL NO. 178.

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#### AN ACT RELATIVE TO VACCINATION.

"SECTION 139. Any person over twenty-one years of age who presents a certificate signed by the register of a probate court, that he is under guardianship, shall not be subject to the provisions of section one hundred and thirty-seven; and any child who presents a certificate, *signed by a physician designated by the Board of Health*, that the physician has personally examined the child and that he is of the opinion that the physical condition of the child is such that his health will be endangered by vaccination shall not, while such condition continues, be subject to the provisions of section six, of chapter forty-four, or of the three preceding sections; and the parent or guardian of such child shall not be liable to the penalties imposed by section one hundred and thirty-six."

Gentlemen, you are asked by the petitioner to assist in fastening upon the people of this Commonwealth a complete medical tyranny; to delegate to an official body almost plenary power over the citizens of Massachusetts, in a matter of opinion; to force a medical practice upon them regardless of their wishes.

I protest against such action as unjust and un-American. It is unjust that in a matter as vital as life itself the minor-

ity, because they cannot conscientiously share the opinions of the majority, shall suffer and be oppressed; that they shall be delivered absolutely and literally into the hands of those whose views they challenge, and whose judgment they question.

It is un-American because it sets up a true medical oligarchy. It recognizes a State Medicine, a thing as foreign to a free country as a State Religion. In medicine, as in religion, every man must be free to hold his own beliefs and convictions, undisturbed by governmental persecutions, else we are citizens of no free country.

The petitioner wishes to obtain for the Board of Health additional powers, which shall make them complete autocrats. They have already executive, and by this interpretation, legislative authority; if now, as the petitioner desires, they be endowed with judiciary functions also, they shall stand before the world in the full majesty of omnipotence and omniscience. Yet after all, gentlemen, Boards of Health with all their powers will be only human, and therefore fallible; as liable to error as the "regular practicing physician," whom it is sought to ignore in this proposed amendment. A "regular practicing physician" is one who has satisfied the proper authorities of the Commonwealth of his ability and fitness to practice his profession, and is permitted by law to take upon himself those responsibilities of life and death which are inseparable from such practice. Shall he be held unfit to decide whether or not a person is a fit subject for vaccination? Why should such a decision be made only by a delegate from the Board of Health? What are to be the peculiar qualifications of the "designated physician?" The question needs no answer. Once started on this policy to medicate by act of Legislature where shall we stop? Who knows which one of the serums, championed as a sure preventive against zymotic disease, will be next to take the fancy of the "majority." Whatever it is, we may expect to be forcibly inoculated with it, and so achieve "immunity." And, remember, the next theory of medical prac-

tice to be forced upon the community may be one about which you have doubts or scruples.

The founders of our Commonwealth fled to these shores to escape tyranny of a State Religion; to make a home for themselves where they could be free from persecutions for their religious and political beliefs.

Shall we in this Twentieth Century set up over ourselves a tyranny, which shall persecute those who do not conform to its theories of medicine?

WILLIAM P. WESSELHOEFT, M. D.

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### BAD EFFECTS OF VACCINATION.

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BY CHARLES M. RICHARDS, M. D., Reading, Pa.

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A brother practitioner vaccinated himself and in due time it "took beautifully." His arm was sore and inflamed to the elbow; however, this did not worry him so much as the following symptoms: For two days he complained of severe pains occurring with every beat of the heart, shooting from the heart to the epigastrium, thence into the throat. The stomach felt as if both the cardiac and pyloric orifices were spasmodically closed, and as if quantities of gas were distending it and passing upward against the heart. The epigastrium was distended. It was impossible to pass gas either way. The slightest motion aggravated the pains.

After prescribing a number of remedies for himself he resorted to Morphine, but received no relief whatever. At this time I was asked to prescribe for him and, considering the cause and the stomach symptoms especially, Thuja was decided upon. It was taken from his supplies and given in the 4x potency, a few drops in half a glass of water. He had been sick nearly two days with pain sufficiently severe to lead him to take Morphine (without relief, however,) and yet, within three quarters of an hour after the first dose he felt easier, and by evening of that same day had complete relief.

No comments are necessary on the superiority of the homeopathic remedy over palliative measures, or of the carefully chosen similimum over the frequently changed seeming similar.

[This is Hahnemannian Homeopathy. This is the kind taught at Hering College, both from the rostrum and in the clinic. The single, similar remedy, and strong enough in potency to cure. This potency fitted this patient at the time; a stronger one might be needed to cure the same patient or some other patient at some other time. But the dynamic power, the potentized drug, is always more speedily and more permanently curative than the crude drug. See § 16 of *The Organon*.—ED.]

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### MALANDRINUM.

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BY GEO. H. CLARK, M. D., Philadelphia.

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EDITOR MEDICAL ADVANCE: On Oct. 22nd, 1901, a gentleman, aged 56 years, was given three doses of Malandrinum 30th, to be taken twenty-four hours apart. On Nov. 11th he came complaining of burning, stinging itching of face and scalp < in the night. In a few days there was a well-developed eczema.

Thuya was given as an antidote to the Malandrinum and a lessening of the burning, stinging itching, followed. This was allowed to act one month, at the end of which the eruption, not having entirely disappeared, one dose Bacillinum 200th was given, since which he has had no symptoms of an abnormal character.

I have given Malandrinum as a prophylactic to a number of patients, and in but one other were there any symptoms traceable to the remedy. This was a young woman who got one dose of Malandrinum 200th, and in a few days a few small pustules appeared on the left arm near the site of infantile vaccination.

116 West Walnut Lane, Germantown.

## COMPULSORY VACCINATION.

BY A MEMBER STATE BOARD OF HEALTH.

DES MOINES, IOWA, Feb. 10, 1902.

**EDITOR MEDICAL ADVANCE:** At the November session of the Iowa State Board of Health a committee was appointed to investigate the merits of Variolinum as a prophylaxis against smallpox. At our recent session, just closed, the committee was continued. While many of our homeopathic physicians use Variolinum in their practice, and have full faith in its efficacy, very few can give us instances demonstrating conclusively its prophylactic power.

We can reason by analogy, and the reasoning is an argument effective to homeopaths, but it carries little weight with a board composed of a majority of allopathic physicians.

There is much that can be presented in favor of Variolinum, much in the form of analogy and theory of drug action, but comparatively little can be cited in evidence of its successful use; i. e., instances in which it has prevented the development of the disease in those exposed. It is especially desired that the readers of your excellent journal will send the writer any such instances and evidences of its successful use.

During the present epidemic of smallpox, quite prevalent in several states, Variolinum has been used largely by homeopathic physicians, who believe it safer than vaccination and equally effective. Much proof of its useful efficacy should be obtainable.

May I not hear from among its users any such evidence of its efficiency?

A. M. LINN, M. D.

[The proof of the prophylactic power of vaccination may, with equal sincerity, be questioned. Read the evidence presented on another page in this issue quoted from one of the ablest scientific statisticians of Europe. After spending years in analyzing the statistics of Europe, both public and private, he arrives at the following conclusion:

"The only really trustworthy statistics on a large scale prove it to be wholly without effect as a preventive of small-pox. Many hundreds of persons are annually punished for refusing to have their children vaccinated; and it will undoubtedly rank as the greatest and most pernicious failure of the century. I claim that the evidence set forth in this chapter demonstrates this conclusion. It is no longer a question of opinion, but of science, and I have the most complete confidence that the result I have arrived at is a statistical, and, therefore, a mathematical certainty." \* \* \*

"That vaccination is a gigantic delusion; that it has never saved a single life; but that it has been the cause of so much disease, so many deaths, such a vast amount of utterly needless and altogether undeserved suffering, that it will be classed by the coming generation among the greatest errors of an ignorant and prejudiced age, and its penal enforcement the foulest blot on the generally beneficent course of legislation during our century."—ED.]

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### SOME OF THE "ACTS" OF THE MATERIA MEDICA.

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BY H. C. MORROW, M. D., Austin, Texas.

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[If our readers will transcribe these notes, nearly all of them having been repeatedly verified, to their respective rubrics in Hering's Condensed Materia Medica, they will find them of immense value in practice. We have relied upon them for many years and know whereof we speak. ED.]

Sulphur, Hepar Sulphur and Sepia are the exception; few antipsorics bear repetition.

Sulphur, Calcarea, Syphilinum, Psorinum, Medorrhinum, Tuberculinum, Carbo veg.: Sure to cause reaction when well-chosen remedies fail to act; especially in acute diseases, Sulphur.

Moschus: Acts beneficially when the disease does not follow its normal course, but remains uncured or develops serious symptoms, indicating nervous exhaustion.

**Ambra, Asafotida, Castoreum:** In cases of women who are nervous and do not react after sickness.

**Bovista:** In urticaria or other eruptive diseases when Rhus, has failed to act though apparently indicated; look it up.

**Mercurius:** Water treatment should be carefully avoided when administering this remedy.

**Lachesis:** Especially useful when paroxysms of fever return after taking acids.

**Colchicum:** It hastens relapses of gout if abused.

**Phosphorus, Iodine, Mercurius:** Generally act better in dry, warm weather than when it is cold and wet.

**Arum Triphyllum:** This remedy should not be given low, nor repeated often, as bad effects often follow.

**Kali Carbonicum:** Will bring on the menses when Natrum mur., though apparently well indicated, fails.

**Belladonna:** Suits persons with largely developed and active brains.

**Pulsatilla:** The principal time for the symptoms to appear is in the evening and succeeding hours until midnight.

**Ailanthus:** The odor of the flowers affects women and children more than men, and old people least of all.

**Agaricus Phalloides:** The poisonous effects do not develop until 8 or 10 hours after taking it. (Colchicum resembles it in this respect).

**Causticum:** The primary action seems to appear later than in other antipsoric remedies.

**Lachesis:** Its administration in acute diseases is usually followed by an aggravation.

**Salamandra:** When Crotalus, Lachesis and other reptilian remedies do not act, will often have desired effect.

**Ambra Grisea:** Often takes the place of Carbo veg. and Petroleum, and especially when either of these seem indicated but do not act.

**Syphilinum:** When Lycopodium seems indicated by 4 P. M. aggravation, but does not act, frequently clears up the case.



**Ptelea:** All the symptoms suddenly disappear after eating sour things.

**Calcareea Fluorica, or Fluoric Acid** follow: When **Silicea** fails to keep up improvement in ulceration of the bones.

**Bryonia:** If it be the right remedy in fever it will act within twelve hours, in which case it will produce a free perspiration.

**Allium Sativa:** Said to be injurious during pregnancy.

**Nux Vomica:** Abortion apt to occur after.—(Lutze.)

**Carbo veg., Lycopodium, Natrum mur., Silicea:** In low potencies, inactive and inert.

**Belladonna:** If children in hydrocephaloid cry until they get something to eat, it is well indicated.

**Kali carb.:** Persons suffering from ulceration of the lungs can scarcely get well without this antipsoric.

**Belladonna:** Wet bandages or compresses are often of great use in scarlet fever, but never together with **Belladonna**; either one or the other ought to be omitted.

**Iodum:** Should not be given during the lying-in period except in high potencies.

**Phosphoric Acid:** Useful in pneumonia when disease cannot take normal course owing to prostration of patient from loss of vital fluids, distressing emotions, etc.

**Acetic Acid:** One of the most dangerous remedies a consumptive can take; it predisposes to hemoptysis. (Also **Ferrum met.**)

**Hydrastis Canadensis:** Give to fatten patients cured with **Tuberculinum**.

**Lachesis:** Repeats its primary action every 14 days.

**Physostigma, Tabacum, Conium:** Action of **Gelsemium** intensified by.

**Bryonia:** Acts well in jaundice, when the case has been spoiled by the abuse of calomel.

**Nux Vomica:** Intensifies the action of **Sepia**.

**Arsenicum:** In typhoid fever, if not unmistakably indicated, does irreparable injury.

**Mercurius:** Never indicated in any stage of typhoid fever.

**Phosphorus, Silicea, Sulphur:** Unsafe to give in any stage of phthisis.

**Aconite:** Vegetable acids and wine suspend its action.

**Cinchona and Pulsatilla:** Will not act satisfactorily if the patient is allowed to drink tea.

**Kali bich.:** In asthma, according to Farrington, acts better in a low than high potency.

**Arum triph.:** As soon as the child gets better in scarlatina there is a frequent discharge of pale urine. Now stop the remedy (or any other remedy).

**Calcarea:** In persons of advanced age can scarcely be repeated. In cases of children several doses may be given in succession.

**Calcarea:** Nausea consequent upon its use is specifically counteracted by smelling Sweet Spirits of Nitre, which acts even better in this case than Camphor.

**Conium:** This remedy, in order to act beneficially, has frequently to be preceded by some other drug, and must be used in the smallest doses.

**Capsicum:** When medicines fail to act, though well selected, in flabby, lazy persons.

**Calcarea:** Frequently useful after Sulphur, especially when the pupils are prone to become dilated.

**Calcarea.** Generally acts well after Nitric Acid, when the action of this drug, although apparently homeopathically indicated, had been rather unfavorable.

On the other hand, Nitric Acid relieves the unpleasant symptoms of the homeopathically chosen Calcarea, and imparts to its action a beneficent character.

**Nitric Acid:** Acts very powerfully on mucous membranes, and has a particular affinity for outlets of mucous surfaces, where skin and mucous membrane join.

**Lycopodium:** Acts with especial benefit after the action of Calcarea shall have passed over.

**Graphites:** Especially suitable after Lycopodium.

**Iodine:** Especially useful after Mercury.

**Graphites:** Can seldom be repeated with advantage even after use of intermediate remedies.

Cinchona; Increases the anguish of Digitalis even to a death struggle.

Nitri sp. dul.: Increases the action of Digitalis very much.

Lachesis: Acts especially well at beginning and close of menstruation.

Laurocerasus: Want of nervous reaction; the well-chosen remedy does not act.

Carbo veg.: A dose every eighth day facilitates the action of Lycopodium.

Zincum: Acts better if given at night (Nux Vomica).

Magnesia, phos.: Sometimes acts better when given in hot water.

Marum Verum: Suitable when too much medicine has produced an oversensitive condition, and remedies fail to act.

Mercurius prot.: Action of remedy retarded by care and anxiety.

Muriatic Acid: Cures the muscular weakness following the excessive use of Opium or Soothing Syrup (compare Gelsemium).

Nux Vomica: Especially useful, *if the symptoms indicate it*, when the patient has been drugged.

Carbo veg., Laur., Aloe, Opium: Want of susceptibility to drugs; want of vital reaction.

Phosphorus: Useful after onion syrup.

Psorinum: Lack of reaction after severe diseases.

Mezereum: Frequently indicated during the months of January and February.

Glonoine: It is stated that if administered just previous to the monthly period the menses will fail to appear.

Valerian, Zinc. valer.: Nervous affections, when apparently well-chosen remedies fail to act.

Sulphur: Cases spoiled by the use of Aconite may often be got right again by giving.

Kali carb.: Nitric Acid is especially active after.

Hydrastis: Frequently indicated when patient has been in the habit of taking Chloride of Potash for sore throat.

**Bovista:** The smoke from burning Bovista acts more decidedly on bees than smoke from other substances.

**Coffea, Magnet. arc., Magnetismus, Nux Vomica, Pulsatilla, Asarum, Chamomilla, China, Ignatia, Teucrium, Valerian, Valerianate of Zinc:** To correct over-sensitiveness of the life force, hyperæsthesia and irritability.

After one of these, prescribed on proper indications, the symptoms that indicate the antipsoric remedy will be developed.

**Mercury:** Hepar sulf., alternately with Nitric Acid, for over-excitement from abuse of.

**Colchicum:** If given in massive doses during rheumatism, is said to frequently cause Bright's disease.

**Chamomilla (low):** To quiet the storm which is set up by being deprived of Morphine.

**Ferrum met.:** Its action in syphilis is to aggravate the symptoms.

**Phosphorus:** The curative effects more marked on the third day after administration.

**Phosphorus:** Look out for the 36-hour aggravation after administering in it chronic diseases.

**Rhus:** Will not cure in sciatica when bowels are constipated.

**Belladonna:** Said not to affect idiots to any appreciable extent.

**Lac. Caninum:** When Belladonna and Lachesis fail in croup and diphtheria, then turn to this polychrest.

**Phosphorus:** Antidotes the nausea and vomiting following administration of Chloroform.

**Borax:** The symptoms that had disappeared after taking it returned after taking vinegar.

**Ambra:** Given in the evening is apt to cause aggravation.

**Opium:** The narcotic effect of is much diminished by great pain or grief.

**Lachesis:** If a sudden fright interrupts the good effect of other medicines.

**Tarantula:** All the symptoms aggravated by seeing others in trouble.

**Arnica:** Acts injuriously after the bite of a dog or any rabid or angry animal.

**Kreosote:** In burning pains stands next to Arsenicum and cures frequently after failure of the latter.

**Tuberculinum:** In tuberculous patients after well-chosen remedies fail to act.

**Calcarea:** Easy relapses; one does not continue to convalesce.

**Lycopodium:** An occasional dose sometimes aids Berberis in curing.

**Lachesis:** In malignant pustule its administration should be accompanied by that of brandy.

**Apis:** Slowness of action; sometimes have to wait three or four days before any effects from its administration are noticed.

**Apis:** The favorable effect of the remedy is first shown by increased flow of urine.

**Calcarea:** When remedy does not act put it into child's milk if bottle-fed.

**Squilla, Colchicum, and Sanguinaria:** Act better when prepared with Acetic Acid than with Alcohol.

**Phosphorus:** Acts better if patient has been previously mesmerized.

**Lycopodium:** Acts better preceded by some other antipsoric.

**Belladonna:** Unpleasant effects very much intensified if vinegar is taken after its administration.

**Camphora:** Acts palliatively by producing the symptom, "Better while thinking of the pain."

**Chelidonium:** Acids, wine and coffee restrict its action.

**Aconite:** Must be given preceding Dolichos in cases of dentition attended by fever, to prevent convulsions.

**Fluoric Acid:** Acts beneficially when ulcers become worse from too large or too frequently repeated doses of Silicea.

**Ignatia:** Acts better if given in the morning.

**Apis:** Acts unfavorably if given in low potencies to women who are predisposed to miscarry.

**Lac caninum:** Acts best in single dose; if repeated, should be given at exact intervals.

**Kali carb.:** Is a very dangerous remedy in old gouty cases, but Kali iod., is often very beneficial.

**Arsenic:** Is a dangerous remedy in irritable heart. A dangerous remedy in dysentery if not the exact similimum.

**Syphilinum:** Do not forget it in old syphilitics and their children.

**Iodine:** Preparations of must not be exposed to the direct rays of the sun, as they are decomposed by its chemical effects and become inactive, especially in the low potencies.

**Bromium:** If preparation (low) is not fresh will not act satisfactorily.

**Camphor:** Should never be kept in the same case with other remedies as it antidotes their active properties.

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### MAGNESIA PHOSPHORICA—A VINDICATION.

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BY J. C. FAHNESTOCK, M. D., Piqua, Ohio.

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Mrs. B., age 36 years, of a nervous temperament, light complexion, and ordinarily looking as if she enjoyed good health, has been troubled with dysmenorrhœa ever since she began to menstruate. The pains were described as being "something terrible"—of a shooting, cramping character. She informed me that all kinds of applications and remedies, combined with hypodermics of morphia, had been used at each menstrual period with only partial relief.

I was called to see her May 6, 1900, and found her lying on the lounge with her head at the foot and her feet at the head, thus placing her body and feet above her head, as this was the only position in which she could get the least relief. The pains were described as being sharp shooting in both ovaries, running toward the womb, where they produced a severe cramp. At this special time she did not at-

tempt to do or take anything for relief, except to assume the position as described, as she said nothing did her any good.

I immediately gave a small powder of Magnesia phosphorica 80 on her tongue, and, by the way, it was all I had with me. I then went to my office to get more of the remedy in case it should be required. This only took a few moments, but on my return the patient was surprised and I was delighted to see her almost entirely relieved, and in a few minutes more perfectly easy.

I did not give her any more medicine, but a placebo was used as she at that time was not educated in our way of thinking. No more medicine was required at that time, and not again until about eight months had gone by, at which time her husband came to my office for another powder as his wife was having some premonition of a return of her former trouble. One powder was sufficient to relieve her, and she has had no trouble since.

This is only one of the many cases in which this remedy has acted promptly and permanently. In conducting a proving of Magnesia phosphorica a few years ago one of my provers suffered greatly with shooting, cramping pains in both ovaries, extending to the uterus, and down the thighs, accompanied with a bearing down sensation and great weakness in the lower abdomen. For several days she felt as if she must bend over and hold the lower part of the abdomen or "everything would fall out." Previous to this proving she never experienced any trouble or pains of any kind whatever during her menstruation. During the proving the menstrual flow would come in gushes at intervals varying from twenty to thirty minutes or one hour. The pains were shooting in both ovaries, then came a severe cramp in the uterus, followed by a dark clot of blood, then a gush of bright red blood; after this the flow would stop entirely, and only return when pains came on as described above.

The pains produced by Magnesia phosphorica were always of a shooting, cramping character.

**PICRIC ACID.**

BY GEORGE ROYAL, M. D., Des Moines, Iowa.

While I am not a believer in "favorite remedies," and while I try not to fall into the pernicious habit of routine prescribing, nevertheless I am forced to confess that I use certain remedies more frequently than others. Some of these remedies are polychrests, others are not. Among the latter class I find in looking over my case book that I prescribe Picric acid most frequently, and that I obtain the most satisfactory results from its administration.

A large class of my patients are what might be called "brain workers"—as high school pupils, college students, professional and business men and women. Of the totality of symptoms I find "Occupation and Habits of Life" the most prominent for Picric acid.

The second item of importance is the mental condition. These patients first become despondent, then irritable and, finally, indifferent. When this last stage is reached the mental processes are slow and the irritability usually disappears. Mental exertion always aggravates the patient during the first two of these three stages but is less apparent during the third; although the general prostration is noticeably increased by mental application.

The headache of the drug—a violent throbbing occipital headache, with pains of similar character shooting down the spine—is most pronounced during the second stage of the mental symptoms. During the third stage the character of the pain changes and becomes a severe, dull ache, sometimes expressed as a "heavy ache;" or, again, like a "lump of lead" felt at the base of the brain. The violent, throbbing headache is often accompanied by noises in the ears, which noises make hearing difficult.

The urine is dark and scanty; urates and phosphates abundant.

I have never derived much benefit from this remedy when given for sexual disturbances. Only occasionally



have I cured "seminal emissions, loss of power, etc.," with it; and then only when these symptoms were secondary to other symptoms, as above enumerated.

In women two special symptoms have been frequently observed with the others. The first, an aggravated pruritis after the menses, even though there was no change in the time, quantity or duration of the period; second, and much more frequently, have I observed a discoloration of the skin, a tinge of yellow; also, successive "crops of boils" which did not mature; boils of a bluish color, very sensitive, reminding of Lachesis.

I have not found all of the above symptoms in any one individual case, but different groups in different cases. The picture, therefore, of Picric acid, might be classed a composite one.

The importance of the symptoms I would place in this order:

*First.* Occupation and habits of life.

*Second.* Mental symptoms.

*Third.* Modalities, then kidney, skin, and, finally, symptoms of the sexual organs.

The occupation seemed to affect about 70 per cent. of all my cases.

In this connection I wish to cite two cases to illustrate:

**CASE 1.** Man, dark complexion; nervo-bilious temperament; banker by occupation. His cashier, and the one on whom he depended most, had been sick for several weeks, giving him a double portion of labor to perform. After carrying this work about four weeks he began to have violent headaches at the base of the brain and told me that he was so irritable during and after these headaches that he knew he made life a burden for his family and for those in the bank. In about two weeks this feeling of the head, which had been periodical, became constant, and the character changed to a "heavy, dull ache."

It was at this time that he came to me, and although a very accurate man in his details I was obliged to quiz him in order to get his condition. I found on investigation that

he had been making mistakes in his work at the bank; I also found that the quantity of urine was only about twelve ounces a day, dark, and heavily loaded with phosphates, and also that it contained bile. The bowels were constipated, the appetite very poor; he had no difficulty in sleeping, in fact slept rather heavily.

Picric acid, sixth decimal, two discs every three hours, with outdoor exercise, materially relieved all these conditions and enabled him to carry on his work for about three weeks longer when, on the recovery of his cashier, he was enabled to take a vacation, which completely restored him.

CASE II. Woman, teacher by occupation; aged 22; dark complexion; nervous temperament. After graduating from the high school at 18 she had done four years work in one of our colleges in three years. She began teaching early in September and the headache that had troubled her at intervals for over a year became very much aggravated. Any thinking or planning for her school work, especially any trouble in the schoolroom which worried her, brought on occipital headache, violent and throbbing, with pains shooting down the spine.

She came to me in October, just after her menstrual period, told me about the headaches and about the aggravation, and then remarked that she never had felt "so used up" as she did at that time, although the menses had been normal in every respect. The scleræ of the eyes were somewhat tinged; her tongue was coated light yellow; bowels loose; stools yellow in color, several times a day.

I gave her Picric acid 12th, and she reported after the November period with the following expression: "My headaches are gone, my irritability is gone, and I have not felt tired after this period."

A word about auxiliary treatment and diet. I find that such patients will do better if you will increase the amount of outdoor exercise. It is the brain and nerves which seem to need rest, and this is better obtained by physical exercise than by sleep or quiet.

As to diet, I find that if the regimen consists largely of

fruits, and these the tree—rather than the bush—fruits, in addition to the cereals, the patient will do better. Alcoholic stimulants and meats should be avoided, and especially tonics, to which such patients usually resort, either of their own motion or upon the advice of some friend. Tonics like beef, iron, and wine seem to do harm rather than good in these cases.

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### ELAPS CORALLINUS.

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BY S. F. SHANNON, M. D., Denver, Col.

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Elaps is the poison of the Coral Viper found in Brazilian countries. It belongs to the order of Ophidians, the class in which we find such remedies as Lachesis, Crotalus, Naja, Vipera, and Bothrops.

**MIND:**—The Elaps patient has great depression of spirits; there is an absence of mind; he imagines that he hears some one talking; he is fearful and apprehensive of some fatal disease; he dreads being left alone lest something terrible might happen. Running all through this remedy there is fear or dread of rain. Several remedies are similar to Elaps in this mental condition.

Æthusa, Aletris, Antimonium tart., Clematis, Conium, Drosera, Kali brom., Kali carb., Lac caninum, Lilium tig., Mercurius, Phosphorus, Stramonium, and Veratrum album, all have the same dread of being left alone.

Chamomilla has the symptoms "imagines he hears the voices of absent persons at night."

"Love of solitude" is found under Elaps as well as under Carbo animalis, Cimicifuga, Cyclamen, Bufo, Hyoscyamus, Ignatia, Ledum, Lycopodium, and Rhus.

The horror of rain we find only under Elaps.

**HEAD:**—Elaps has vertigo, with tendency to fall forward. The same symptom is found under Arnica, Cicuta, Ferrum, Lycopodium, Natrum mur., Ranunculus bulb., Rhus, and Silica.

Congestion to the head on stooping may call for either

**Elaps, Corralium, Millefolium, or Veratrum album.**

Elaps has lancinating headache, first on the left side and then on the right side, this being somewhat similar to Lachesis, whose symptom reads: "Headaches begin on the left side and travel from left to right until a complete circuit of the head has been made."

Elaps has violent pain in the vertex in the afternoon, as if the brain were shaking, with nausea, which prevents her keeping the head quiet.

Nearly allied to this symptom under Elaps are the headaches found under China, Gelsemium and Kali bich., which compel the patient to stand or to get up and walk about.

Again, Elaps has headaches from want of food, especially when the desire is not immediately satisfied; the pains are better after eating; lancinating pains first on one side and then on the other; occipital headaches after mental exertion, with sleeplessness.

**EYES:**—Among the eye symptoms we find aversion to light; desire to close the eyes; everything seems to be white, even at night; grey veil before the eyes; can scarcely distinguish light from darkness; red bars before the eyes when opening them; when closing the eyes partially everything looks red; the eyes are red and inflamed; blear-eyed; glassy look; eyeballs feel sticky under the lids and as if rough; bloatedness around the eyes on awaking.

**EARS:**—Crackling in the ears when eating or swallowing occurs under Calcarea, Elaps, Graphites, Alumina, Carbo veg., Baryta carb, Eupatorium purp, Hepar, and Kali iod.

**NOSE:**—For ozena Elaps should be used when there is offensive discharge from the nose and throat which smells like fish brine. The posterior portion of the throat is covered with a dry, greenish-yellow scab extending up into the nose. Pains from the root of the nose to the ears on swallowing. Sense of smell is gone. Bleeding of the nose on blowing it; the blood discharged is blood-black in color, flows in a steady stream and is copious.

**Crotalus, Hamamelis, Nitric acid, Secale and Sul-**

phuric acid have nosebleed similar to that which we find under Elaps.

**THROAT:**—We find Elaps, ulceration of the throat worse on the left side, with difficulty in swallowing liquids, occurring five or six times a year and lasting two or three weeks at a time; attacks brought on by exposure to rain or wind; patient dislikes wet weather, aside from the throat affection. Never feels well in wet weather; exceedingly difficult deglutition of both fluids and solids; throat is exceedingly sensitive to touch; tonsils are so swollen that no passage is visible; dull pains from nares to ears on swallowing; the sides of the buccal cavity above the fauces are covered with numerous dark red points, like incipient pustules.

On swallowing there is a sensation as if the food turned like a corkscrew.

Elaps might be useful in diphtheria when there is the inability to swallow either liquids or solids, here it being most similar to *Mercurius iodatus ruber*. There is offensive discharge from the nose; epistaxis of dark blood; posterior part of the throat is covered with a dry, greenish-yellow membrane, wrinkled and fissured extending to the nares; pains which extend into the ears on swallowing; frontal cephalalgia; the sides of the throat are sore to touch, there are dark red points in the buccal cavity looking like incipient pustules.

**APPETITE:**—We find also great hunger, but inability to eat on account of the peculiar sensations in the throat and œsophagus; in the œsophagus there is a sensation as of a sponge, which when food or drink is taken expands and prevents swallowing. We have also violent thirst, but this same inability to even swallow liquids. There is a desire for sweets and buttermilk, with many of these affections.

This last symptom is rather a peculiar one, and I believe is found under no other remedy.

**STOMACH:**—After drinking cold drinks they lie like ice in the stomach and cause a cold feeling in the chest. Several remedies have this symptom, that cold drinks lie heavy in the stomach, and there is also a remedy that has dis-

like for any but warm drinks. Caladium has the latter symptom, and Acetic acid, Arsenicum album, Iris vers., Natrum carb., Nux vomica, and Rhus tox. have the former symptom. Sulphuric acid has rejection of water by the stomach unless it is acidulated.

Under abnormal symptoms we find: "Sensation as if the blood was flowing backwards."

**FEMALE SEXUAL ORGANS:**—As a remedy for metrorrhagia we may use Elaps when there are the following symptoms: Discharge of very dark-colored liquid and clots, but mostly liquid, varying in quantity from half a pound to two or three pounds in the twenty-four hours; patient has the appearance of a corpse; there is a sensation of soreness across the lower abdomen; dragging pains in both temples; at times there are slight pains in the left pleura; almost always relieved by chewing a small piece of camphor.

For cancer of the womb we may use it when there is a sensation as if something burst in the uterus, followed by a continuous stream of dark colored blood on attempting to urinate; flow is very profuse, venous, and contains some clots.

**ALLIES IN HEMORRHAGE**—The nearest allies of Elaps in these cases are the following: For hemorrhages of dark blood, Acalypha, Arnica, Collinsonia, Crocus, Hamamelis, Kreosote, Phosphoric acid, Platina, Pulsatilla, Sticta, or Sulphuric acid.

Acalypha has hemorrhage in the morning, of bright red blood, not profuse, dark and clotted hemorrhage in the afternoon; patient feels played out in the morning, but gains strength as the day advances.

Arnica is useful for hemorrhages from over-straining, from injuries, after a fall or blow; blood is profuse, dark red and clotted, coming up with but little effort; contusive pains in the head, chest, and back when coughing.

Collinsonia has hemorrhage of dark, tough, coagulated blood, enveloped in viscid phlegm; bleeding caused by cardiac affections or portal congestion; previous discharge from the anus; subsequent constipation.

**Hamamelis** has pure venous blood coming into the mouth without much effort, seemingly like a warm current coming up out of the chest; the mind is calm, tickling cough in the morning with taste of blood in the mouth; sometimes a taste as of Sulphur in the mouth; the lungs feel sore and bruised.

**Kreosotum** has burning, crawling sensation in the upper bronchii; the blood is almost black; the complexion is livid; sometimes there is puffiness of the face and œdema of the feet; pains in the chest with afternoon fever; morning sweats; fetor of the sputa.

**Pulsatilla** is suitable for suppressio mensium followed by obstinate cases of hemoptysis; the blood is dark, coagulated, and coughed up in pieces; worse at night, with pains in the lower part of the chest; chilliness even in a warm room; loose stools; sick and empty feeling in the stomach; very nervous during the night.

Sulphuric acid is useful when the blood is dark and profuse; especially in consumptives and broken down constitutions from alcoholic influences; dry cough with soreness between the scapulæ; morning expectoration of dark blood; tuberculosis with ulceration of the lungs.

There is also another rather peculiar symptom found with Elaps: "Terrible coldness after drinking, and as if ice water were rising and falling through a cylindrical opening in the left lung."

**ELAPS CHARACTERISTICS:**—Remember Elaps, then, as a remedy having the great dread of rain; as having the headache on the left side and then on the right side; as having the sensation as if food turned like a corkscrew on swallowing; the sensation as of a sponge in the œsophagus; inability to swallow either liquids or solids on account of this sensation of a sponge in the œsophagus; remember the desire for sweetened buttermilk; the great coldness in the stomach and chest after drinking ice water; the hemorrhages of dark blood; that the action of the remedy is principally on the right lung.

**PRACTICAL DIAGNOSIS.**

BY E. A. P. HARDY, M. D., Toronto.

Although in homeopathic prescribing an exact diagnosis is not always necessary, yet the more exact the diagnosis the more likely is the result to be what is expected, and less disappointments will follow. On the other hand, a wrong diagnosis may be followed by poor results, and may even retard or prevent a cure.

The following cases may exemplify these statements:

CASE I. Mr. C., a banker, complained of suffering from an ulcer inside his left cheek. Had been under an old-school doctor, who had ordered a local application of 25 per cent. solution of Listerine, with apparently no benefit.

On examination an ulcer was found the size of a ten-cent piece, with uneven base and irregular outline, situated opposite a jagged and decayed molar tooth. Extraction of the broken tooth was followed by prompt healing of the ulcer.

CASE II. Miss P. came to me suffering from an annoying cough that had persisted for nearly three weeks in spite of consistent use of several sure-cure cough mixtures. There were no definite symptoms and examination of the throat revealed only a slight redness caused by the constant irritation, and I was rather puzzled how to account for the trouble. Incidentally she remarked that she must be getting old, as her hearing was not as acute as formerly. Examination of left ear revealed a large amount of impacted cerumen touching the drum-head. This was removed by syringing, and a dose of Arnica was given. The cough disappeared in less than two hours.

CASE III. Mrs. A. had been under the care of different doctors for some years and had been treated for gastritis, neurasthenia, and a floating kidney, for which an operation was advised. On close questioning a history of Tænia was discovered, and as she had been under the care of a first-class homeopathist for a considerable time I decided to re-



sort to allopathic proceedings to verify my diagnosis of *Tænia Saginata*. I out allopathed the allopaths, and then *Tænia Saginata* appeared in due time. Most of her symptoms have disappeared, and she is feeling a different woman.

CASE IV. Another *Tænia* case was reported to me by an allopathic doctor. Mr. K. had been advised to have an operation for appendicitis by several well-known surgeons. He returned home to see his own doctor and then complained of pain and distress over the region of his appendix, with symptoms of chronic gastritis. Examination revealed a painful spot over his appendix upon deep pressure. A tumor was noticed also, soft, yielding and spongy. A smart purge resulted in his passing a dead *Tænia* and so an operation was avoided. Since then he has returned to his normal state of health and all his gastric symptoms have disappeared.

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### A TYPHOID FEVER ABORTED.

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By J. F. EDGAR, M. D., El Paso, Tex.

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Dr. Johnson's article in the September ADVANCE reminds me of a number of similar experiences I have had. This is one:

A wealthy family on a plantation had seen the benefits of homeopathic practice and had adopted it for their protection. Two of the boys, while attending college, were under my care. As they came to maturity they adopted the profession of medicine. One of them studied homeopathy fairly well, but the younger one saw how the irregular (allopathic) school seemed to dominate over everything and so he went to an irregular college and came back with the bigotry and egotism taught therein. There is no special professor for that branch, for all of the faculty generally have it and utter it freely.

For the reasons given above in abstract the allopaths made much of him. But his family did not call upon him

for medical services; they still called upon a homeopathic physician when needed.

In the summer of 1900 one of the sisters, who had attended college during the previous fall, winter and spring, and had graduated, and was run down nervously, felt weak, languid, nervous. Her mother took a tent at the Chataqua, thinking the change might benefit the daughter. She was walking with her doctor brother one evening but, feeling very weak, she returned to her tent; her mother assisted her to disrobe, and they then sent around to my tent for advice and treatment from homeopathy.

I found her with a pulse of 125, temperature 103, tongue glossy and dry; lips dry, and sordes about teeth and lips; bowels inclined to be loose; desire for ice-cold water—not so much at a time, but “the water must be cold.” She was aged 20, a well-developed, sexually strong woman. I had prescribed off and on for her during several years, and knew her temperament fairly well.

I prescribed Arsenicum 4x in water that evening on account of the nervous restlessness and weakness.

Next morning the pulse was 115, temperature 103½, but she had rested better than for several nights.

I had studied over her case and concluded that Phosphorus 30 was more the similimum, which she received in water, a dose every two hours.

Her allopathic physician brother had been there, examined her, pronounced her condition as a bad case of typhoid fever and, driving down to town, sent to his sister's tent the oldest irregular practitioner in active practice. He examined my case, pronounced it typhoid fever, took out his prescription book and proceeded to write for Calomel and Quinine, no doubt; but the mother spoke up, told him she was grateful to him for coming at the request of her son, but that her daughter was under the care of a homeopathic physician. He put back his prescription book, bowed out gracefully, etc.

In about a half-hour another irregular arrived. He examined the case, pronounced it nervous typhoid, and, as he

commenced to write his prescription, he had the same experience as his predecessor. However, that made four affirmations as to the diagnosis.

The second evening she was better but complained of the noise about the tent, and having an acquaintance who lived on a quiet residence street we decided to move her. A carriage was called and she was picked up, with a thin blanket about her over her night robe, by her doctor brother and myself placed in the carriage, and at the residence carried in the same way over the lawn from the pavement into the house and to an upper room. I speak of the distance as the brother was small in stature and the young woman good sized, and I had the most of her weight upon me. After she was placed in bed, she said she did not feel exhausted but very little.

Then a scene occurred. The little allopathic physician brother threw his hat and gloves on her bed, and uttered these words: "I will not stand this any longer; she is my sister, and she must have sixty grains of Quinine and a drachm of Digitalis right away, or she will get past the reach of scientific medicine; this watery stuff is all a farce!"

His mother started to plead with him but it did no good, and I took him by the arm, led him out of the room and closed the door, and said: "Jim, I am astonished at you. Your actions are not evidence of a good brother, of a man, and least of all, of a physician. Your parents are not going to accept your ideas of medical treatment—you can see that—and if you don't promise to act better in your sister's presence I will have to forbid you to see her."

He walked away muttering something. I took her temperature,  $104\frac{1}{2}$ , pulse 140, respiration 40, but concluded Phosphorus 30 was still the remedy.

Next morning the pulse was 120, temperature  $100\frac{1}{2}$ , respiration 35. Phosphorous 30 continued.

Fourth morning, pulse 96, respiration 30. temperature  $99\frac{1}{2}$ .

Fifth morning, pulse 80, respiration 22, temperature 99. That evening pulse 80 and temperature  $98\frac{1}{2}$ .

She took nothing but Phosphorus 30 in water after the first evening, and in a few days after that she rode home and has been well ever since, until her marriage and going away. Since then I have lost sight of her. Then all three of the allopaths said "*there had been nothing the matter with her; they had been mistaken in their diagnosis!*"

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### LACHESIS IN TYPHOID.

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BY I. DEVERE, M. D., CLINTON, NEW YORK.

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A condition is often found in low types of typhoid which is frightful to the friends and which calls for cool judgement and prompt action on the part of the physician if favorable results are to be obtained. I refer to those cases which have run many days without any perceptible change, until a severe nervous condition is developed.

The patient trembles all over; the hands tremble; the tongue, pointed, dry, dark and trembling, cannot be protruded because it catches on the lower teeth, which are covered with sordes.

Lachesis 200, a single dose, has never failed in my hands to bring a favorable termination of such a case. I first learned this in private conversation with dear Dr. Lippe, and as I have treated many cases of true typhoid I can give many cases in verification.

**A Case in Point.**—I will give but one case which will illustrate the whole: Dr. B. F. Bailey came to me one day with a statement like this: "I have taken a case of typhoid fever off the hands of an allopathic physician. He told them the patient would die and I promised to cure her. She is a young lady, seventeen years of age, and now she is going to die for me."

I went with him and found the symptoms above described and Lachesis 200, one dose, cured the case.

## EDITORIAL.

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All Contributions, Exchanges, Books for Review and other communications should be addressed to the Editor, 5142 Washington Ave., who is responsible for the dignity and courtesy of the magazine, but not for the opinions of contributors.

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### INSTITUTE POLITICS.

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Notwithstanding the almost unanimous condemnation of the methods and activities of politics at the Richfield Springs meeting of the American Institute, which all but spoiled an otherwise very satisfactory and delightful session, the pot is beginning to boil again and we are likely to be treated to another dose of the same objectionable procedures at Cleveland. The lieutenants of the defeated candidate of last summer have for months been pursuing a still-hunt campaign in the west, trying to work up a "party" strong enough to land him in the presidential chair, and now we have word from Philadelphia that a "boom" meeting was held in that city on the night of the 22nd of last month for the purpose of launching the candidacy of a surgeon of Hahnemann College for the same office.

All of this is contrary to the best interests and highest ethical principles of the Institute. It was thought that when the open nomination method was laid aside and the Australian ballot system was adopted there would be a delightful freedom from offensive campaigning. But, instead, we have had several very obnoxious and persistently personal canvasses, none more offensive than that at Richfield, and the end seems not yet. The only way the Institute can free itself of this abomination is to take the bit in its teeth and rise as one man, and woman, against campaign politics. The self-constituted president-makers, many of them still young in the Institute, and already honored quite as much as their deserts deserve, should have a little modesty and keep

their hands off of the elections; and if they do not they must be sat upon with emphasis and made to understand that the membership is quite as able to determine who it wants for its officers as they do. Let us have clean, honest, open politics or none at all.

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### WHY NOT A PHYSICIAN?

Philadelphia's decision to launch a boom for one of its surgeons for the American Institute presidency at Cleveland prompts the suggestion that it is about time the general practitioner be given a chance. The three latest presidents have been, respectively, a surgeon, an ophthalmologist and a gynecologist, whereas more than seven-tenths, a low estimate, of the membership are general practitioners. The specialists have their own side associations and the presidencies of these ought to satisfy them, except an occasional turn at the highest office in the Institute, to which they are justly entitled. But to give the honor repeatedly to specialists, whose relation to the general interests of homeopathy is at best but indirect, is neither fair nor for the best interests of the general body. Pass the office around, and let the mantle fall this year upon the shoulders of some tried and faithful member belonging to the general membership, and not to the more limited-in-number and less-directly-interested-in-the-Institute specialists. Give us a good dyed-in-the-wool and consistent homeopathic president occasionally, if for naught but for a change.

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The young men and young women who are about to graduate from the homeopathic colleges this spring are urged to take into consideration the thought of locating in the unoccupied fields of the West and South. The cities are mostly crowded; it is with difficulty that young graduates can become established in them; their services are not especially in demand in the crowded fields, whereas both the people and homeopathy need them in hundreds of fairly good locations in new territory. Go out into Macedonia and help build up homeopathy there. It will make the young graduate a better all-around man in the end, more self-reliant and better equipped as a general practitioner, while it will at the same time aid in building up homeopathy.

## NEW PUBLICATIONS.

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**Ophthalmic Diseases and Therapeutics.** By A. B. Norton, M. D., Professor of Ophthalmology in the College of the New York Ophthalmic Hospital, etc., etc. With Ninety Illustrations and Eighteen Chromo-Lithographic Figures. Third Edition, Revised and Enlarged. Philadelphia and Chicago: Boericke & Tafel. Pp. 660. Cloth, \$3.00 net. 1902.

In every respect this is by far the most complete and comprehensive volume on Ophthalmic Diseases and Therapeutics which has appeared in the Homeopathic school. As a model of the book maker's art it will be difficult to excel. The therapeutics are more complete, the indications more characteristic and guiding and the entire work better adapted for a text-book for the student or a work of reference for the specialist and practitioner than any previous edition. Yet the clinical indications might have been greatly improved by clippings from current literature, in all diseases of the eye, both acute and chronic. From periodicals omitted in the Bibliography — *The Medical Advance, Homeopathic Physician, Homeopathic World, American Homeopathist, Journal of Homeopathics, Transactions I. H. A.*, etc. — more cures and clinical verifications in iritis, cataract, glaucoma and other obstinate affections generally classed as operative may be found than in all the literature mentioned. Perhaps we may have the benefit of this in some subsequent edition. The chief blot to the Hahnemannian is the frequent recommendation of medicated topical applications, generally unnecessary and often worse than useless. The pure asepsis obtained from the use of distilled water will be found more efficacious and less dangerous.

**A Systematic Treatise on Materia Medica and Therapeutics,** with Reference to the Most Direct Action of Drugs. By Finley Ellinwood, M. D., Professor of Materia Medica in Bennett Medical College, Chicago. With a condensed Consideration of Pharmacy and Pharmacology, By Professor John Uri Lloyd, M. D. Pp. 706.

This treatise on the "Direct Action of Drugs," accord-

ing to the views and theories of the Eclectic School of Medicine, deserves a place by the side of Scudder's and other standard works. It includes the medical observations and experiments of many new remedies which are here elaborated for the first time, and the personal observations of the author on the use of these drugs. The remedies are given under a general "Classification," and arranged in groups as "Agents acting on": The nervous system, heart, respiratory tract, stomach, nutrition, excretion, generative organs, cutaneous surfaces, etc. These divisions are purely arbitrary but under this system of medicine appear to be necessary, for the remedial agents are applied to the names of diseases, the diagnosis; instead of the patient. Many of our homeopathic remedies are to be found here clothed in the so-called "Physiological Action," which, in its broad generalizations is so delusive, yet so absorbing a study, to many professed homeopaths. There is many a valuable therapeutic hint to be found here that only needs the life-giving influence of a proving on the healthy to be converted into a useful homeopathic agent or perhaps a polychrest.

International Homeopathic Medical Directory. 1902. London: Homeopathic Publishing Co., 12 Warwick Lane.

This convenient little Directory of homeopathic physicians of all the world outside the United States, has been revised to date. It has made a notable departure this year by including in its lists the names of such American homeopaths as have responded to an invitation last year. In the future all Americans can have a copy of the Directory and their names in the list who send \$1.00 to the publisher.

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Why not have a conference of the officers of state societies, so as to arrange dates of meetings at such times that they may not all occur on the same day or same week in May? The state societies of Ohio, Michigan, Indiana, Illinois, Iowa, Kentucky, Minnesota and Wisconsin hold their annual meetings in May. Many physicians in Chicago visit some of the neighboring societies and would be glad to attend more if they did not all occur in the same week.



## CURRENT NEWS-NOTES AND ITEMS.

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Dr. E. E. Gillard has located at Rock Creek, Ohio.

Armada, Michigan, needs a good homeopathic physician.

Dr. H. C. Whitaker has located at South Charleston, Ohio.

Dr. J. M. Lee is president of the New York State Board of Homeopathic Medical Examiners.

Cleveland, Ohio, has a new small-pox ward in its city hospital with eighty ward beds and eight private rooms.

The "Old Guard," composed of homeopathic physicians of more than thirty years' practice, will meet in Chicago June 4, 1902.

Dr. W. A. Dewey, of Ann Arbor and the Medical Century made a flying business and Institute politics visit to Chicago this month.

Dr. Frederick W. Payne has removed to the Colonial Building, room 610, 100 Boylston street, Boston, Mass.

The Missouri Institute of Homeopathy meets in St. Louis April 28th, 29th and 30th, and a cordial invitation is extended.

The veteran homeopath, Dr. S. A. Jones of Ann Arbor, in an article in the January *Recorder*, speaks of Dr. Guernsey's Perfection Liquid Food as "The Crowning Chemical Triumph of the Nineteenth Century."

The Minnesota Institute of Homeopathy meets in Minneapolis May 21, 22 and 23, and Secretary H. C. Aldrich and President H. M. Lufkin ask members for titles of papers, so that chairmen of bureaus may be ready for the meeting.

A Correspondence Department will be opened in the May issue, in which questions will be answered and difficult and obscure cases in Therapeutics, Obstetrics, Pediatrics, Surgery, etc., etc., prescribed for, with special reference to the practice of pure Homeopathy. Cases should be concise, clear and give the facts, the symptoms of the patient, as defined in the Organon, §153, as nearly as possible. We can then have a uniform working base and the answers would appear in the subsequent issue.

The homeopathic members of the Louisiana Medical Examining Board are Drs. C. R. Mayer, G. Aiken, John T. Creblin and W. D. Norwood.

Dr. L. McAlister, of Muscatine, Iowa, is about to retire from a good practice in that town. An excellent opening there for a homeopathic physician.

Miss H. J. Fisher, of Elkhart, Ind., a graduate of the Hahnemann Training School for Nurses, of Chicago, is in charge of the Bailey Sanitarium of Lincoln, Nebraska.

The faculty of Rush Medical College, Chicago, has adopted resolutions recommending the opening of the regular courses of that institution to women, the change to take effect the next college year.

The Woman's Southern Hospital of Philadelphia offers a position as interne to any woman graduate. Applications should be made to Dr. Amelia L. Hess, 1911 Mount Vernon street, Philadelphia, Pa.

It is reported that Johns Hopkins Hospital has adopted the plan of treating typhoid fever without the use of drugs and with better results than were obtained by other methods. Now let them add a good homeopathy and they'll do better yet.

Medical reports state that there is an alarming death rate among infants throughout Russia. In one government the mortality of infants among Christians is said to be 342.1 per 1,000, while the death rate among the children of Mohammedan parents is 140.4 per 1,000. The Mohammedan law compels the mother to nurse her child.

The Illinois Homeopathic Medical Association will meet in Chicago May 13th, 14th and 15th, on the 17th floor of the Masonic Temple. A banquet will be given Wednesday evening at the Auditorium Hotel to the visiting members outside of Cook county by the resident physicians.

An urgent Case.—When the doctor's telephone rang late one night he went to the instrument himself and received an urgent appeal from two fellow practitioners to come down to the club for a quiet game.

"Emily, dear," he said, turning to his wife, "I am called out again, and it appears to be a very serious case, for there are two doctors already in attendance."

John D. Rockefeller recently gave a million dollars to the medical school of Harvard University, the gift, however, being contingent upon the condition that other friends of the university donate half the sum given by himself. The president of the university says that there will be no difficulty in raising the \$500,000.

Dr. Joseph Jones, of San Antonio, Texas, one of the best-known homeopaths of the Southwest, died in that city after a brief illness the latter part of February. Dr. Jones was formerly a resident of Indianapolis, having gone to Texas because of ill-health in 1878, since which time he enjoyed a large practice in San Antonio.

The Chicago School Board blames cigarette smoking for the startling increase in heart disease and nervous ailments among high school students. The condition was revealed by examination recently held for admission to athletic sports. Twenty-one out of one hundred were found unfit and all but three suffered from some sort of heart trouble.

The milk commission has ordered that hereafter smooth faced men only shall be employed for milking cows and delivering milk to the various depots throughout the state of New York. They claim that the dust from the stable is liable to infect the beard, which will collect and hold microbes that may readily impregnate the milk. Thus the medical profession and the barber are still to work together.

Dr. Alonzo Boothby, one of Boston's best known gynecological surgeons, died, after a brief illness from angina pectoris, on the 8th of February. Dr. Boothby was prominent in homeopathic circles in New England, had been a regular attendant upon the society meetings in his state and upon the American Institute for a great many years, and will be missed from these circles by a large number of faithful friends.

The Western colleges have taken liberal advantage of Dr. Fisher's special students' offer and have been ordering his "Diseases of Children" in club lots. Cleveland took 58, Cincinnati 25, Louisville 8, St. Louis 34, Hering College 60, Hahnemann of Chicago 33, Kansas City 28, Iowa City 25, and Denver 21. New York College has also sent in an order for 20, and a club is being made up in Boston, so we are informed.

At the annual meeting of the Germantown, Pa., Homeopathic Society, January 19, they adopted the following resolution:

"Resolved, That the Germantown Homeopathic Medical Society, of Philadelphia, desires to record its unqualified approval of the value of vaccination as a preventive of smallpox, and is heartily in accord with the effort of the board of health to secure universal vaccination." That society has yet a good deal to learn.

The friends of Hering Medical College will be glad to know that it has had a very successful winter, with good classes, the best obstetric clinics it has ever enjoyed, varied surgical clinics, and a general medical course of the highest character. It will send out a class of excellent materia medicans and prescribers this spring. And after all, no matter what the glamour for surgery or the fascination for blood, it is materia medica and successful prescribing upon which the highest success must rest. It is this that has made homeopathy what it is.

A letter from Julia H. Bass, sec'y of the Texas Homeopathic Medical Society, Austin, Texas, to the Cleveland Medical and Surgical Reporter states "There are many towns in Texas where from one to eight homeopathic physicians are already established and some of these places could support another, but I would advise the occupancy of a fresh field if you hope for a quick start. In the railroad towns will be found many people who were patrons of homeopathic physicians before coming south, and very generally the people take kindly to the practice where the physician will go to the trouble to explain its superiority over old school methods. Every well educated physician who has come among us of recent years has done well and there is a living for at least three hundred more without crowding."

The Maltine Company has issued a circular announcing two prizes, one of \$1,000 in cash and another of \$500, for the best essays of ten thousand words covering the subject of "Preventive Medicine," the essays to be completed by September 1st, 1902, and to be submitted over a nom de plume to a committee consisting of Prof. Lewis, president of the New York Board of Health, Dr. Reed, ex-president of the American Medical Association, and Dr. Rhodes, of Rush Medical College, Chicago. This effort would be far more practical to humankind if in the offer was included a consideration of the subject of preventive medicine as it relates to the possibilities of homeopathic therapeutics in the eradication of constitutional or pedigree-making diatheses. The Maltine Company has been written to asking them to extend the scope of inquiry to cover this phase of the subject.

Jonathan Hutchinson, F. R. S., General Secretary of the New Sydenham Society, has requested Messrs. P. Blakison's Son & Co., of Philadelphia, the American agents of the society, to announce the publication of "An Atlas of Clinical Medicine, Surgery and Pathology," selected and arranged with the design to afford, in as complete a manner as possible, aids to diagnosis in all departments of practice. It is proposed to complete the work in five years in fasculi form, eight or ten plates issued.

every three months, in connection with the regular publications of the society. The New Sydenham Society was established in 1858, with the object of publishing essays, monographs and translations of works which could not be otherwise issued. The list of publications numbers upwards of 170 volumes of the greatest scientific value. An effort is now being made to increase the membership in order to extend its work.

Complaint is made that the "American Medical Monthly," formerly published as the "Southern Journal of Homeopathy," which journal is really responsible for the organization of the Southern Homeopathic Association, and which has always been looked upon as its official organ, has failed to give any especial attention to the Atlanta meeting of the Southern society or to publish even a synopsis of the proceedings of that association. Since assuming the title of "The American Medical Monthly" and dropping its old title, the former ardent "Southern Journal of Homeopathy" has, apparently, ceased to take a very active interest in affairs homeopathic. The South needs and should have an earnest, loyal and zealous homeopathic organ of aggression and defense. The Monthly should awaken from this lethargy and resume its former position as an out-spoken and able exponent of homeopathy in the interest of the whole southern territory, not confining its efforts to Baltimore.

Dr. Russell, in the Journal of the American Medical Association, reports a case of fatal vaccination infection which resembled appendicitis. This occurred in a female 15 years of age, who was brought to the Presbyterian Hospital, Chicago, on March 12, 1901. Operation was decided upon. The abdomen was opened. The appendix was found healthy; clear serous fluid escaped from the abdominal cavity. On account of the poor condition of the patient further exploration of the abdomen was not warranted. After the operation the patient grew gradually worse, and death occurred on the day following the operation. A few hours after death a complete autopsy was made. The anatomical diagnosis was as follows: "Vaccination wound of the right leg; suppurative adenitis of the right inguinal and iliac glands; purulent infiltration of the recto-cecal tissues; diffuse purulo-fibrinous peritonitis; recent laparotomy; acute splenic swelling and general parenchymatous degeneration; ecchymoses in the lungs; hemorrhagic erosions of the stomach and right adherent pleuritis." The Germantown society might make note of this to advantage.

The International Hahnemannian Association meets at Chicago Beach Hotel June 24, 25, 26 and 27, and arrangements are being made for the most pleasant and profitable

session in the history of the Association. The hotel is delightfully situated on the lake shore at the foot of 51st Boulevard and is well arranged for convention purposes, with an exceptionally fine room for the sessions and committee rooms galore. The first re-union of the alumni of Hering College will take place at this meeting and Drs. Frank Wieland, E. A. Taylor, S. T. Mitchell, Belle Gurney, Elizabeth Beatty and Minnie R. Bishop will be a committee to make all arrangements for entertaining the guests. Full particulars will be given later. Make your arrangements to attend and bring a chapter of your experience with you as a contribution to the proceedings.

S. E. Chapman, M. D., has returned to California after giving one of the most profitable courses of lectures on *Materia Medica* ever delivered in Hering College. The doctor captured the class the night of the faculty reception and held the close attention of the students to the end of his course. He has demonstrated that he can teach as well as write and all who have read his "Lycopodium Case" in the *Advance*, or his "Phosphorus Case," in the *World*, of Philadelphia, will bear witness to the fact that his originality can "stir up the animals." These cases we happen to know were genuine, occurred in his own practice and were cured by the dynamic single remedy, notwithstanding the sneering reference of the editor of the *Pacific Coast Journal*. We also know that these practical tests have made many converts from honest readers of the dominant school and the end of their influence is not yet in sight. His work in Hering College was so satisfying that both faculty and students gave him a hearty vote of thanks.





**FREDERICK W. PAYNE, M. D.**



# THE MEDICAL ADVANCE

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## **DO YOUR OWN THINKING; BUT FIRST INFORM YOURSELF.**

J. A. KIRKPATRICK, M. D., Professor of Pathology Hering  
Medical College, Chicago.

The diversity of the human mind is exemplified in many ways. It is more noticeable in larger cities where there is a mixed population. Every one seems to have an opinion of his own, which varies more or less according to race, religion, education, occupation, observation or experience.

There is nothing upon which people differ more than in their choice of treatment when they are sick.

Many of the reasons they give are amusing if the results were not so serious.

Few stop to think of the consequences when they choose a doctor or recommend one to their neighbors. People of wide experience and observation who have witnessed death many times are slow to use their influence and assume so great a responsibility.

The great majority, however, are ready to recommend a favorite doctor and express an adverse opinion about another, and often it occurs that they know but little about either. If they were asked to give an intelligent answer to the question, "Who is your doctor?" they could not do it. Some might be able to give good reasons. It may be they saw the doctor by the bedside while life was in a balance, his cheerful countenance, his words of encouragement, his

good advice, his carefully chosen remedy all helping to hasten recovery and save life; therefore are they ready to speak his praise. And there are other reasons which could be given in reference to his character, intelligence, personal appearance, common sense—all of which add strength to his popularity.

A beloved physician has ties that bind so closely that only death can break them. The relation is nearly as sacred as that of husband and wife. It precludes all doubt. The doctor's ability is not questioned, his advice is implicitly followed and the consequences accepted as final, for "all was done for the best" and "everything was done that could be done." It may seem like sacrilege to say or do anything to disturb such a relationship or cause doubts to arise in the minds of those who have such trust.

But is there not danger of becoming blindly trustful when this confidence shall become the basis of credulity which will help to perpetuate error that involves a consequent loss of life? Does not history teach that there was a time when the learned and much beloved physician, as we now know, used measures that actually hindered recovery and caused the unnecessary loss of life? For did not this kind and intelligent and highly esteemed doctor bleed, and blister, and puke, and purge, and salivate, and starve—and more, withhold even the cup of cold water from the patient burning with fever?

It is not enough to have faith—there must be intelligence. What a person may think does not settle a question. It does not change facts. Life is fixed by laws; break them and you suffer. It makes no difference whether you do so through ignorance or prejudice. Think of the multitudes of different methods for treating the sick! There are the Homeopaths, Allopaths, Eclectics, Osteopaths, Thermo-paths, Hydropaths, Physio-medicals, Magnetic Healers, Mud cures, Movement cures, Faith cures, Hypnotism, Christian Science and patent medicines and cure-alls galore; and still they multiply, and as they increase in number they add confusion worse confounded.

Does it not seem like an indeed endless task to bring order out of all this confusion? What explanation can be made? Did it ever occur to you how it is possible for the sick to recover under each of these systems of treatment? No doubt there is some truth in each, and on that truth, which is common to all these methods or systems, must rest whatever success is achieved. What is that truth? It is the inherent tendency to live, to recover when sick. Fully nine-tenths of the average cases of acute sickness tend toward health. In the physiology of life is found the secret. It is in the metabolism which goes on in spite of misguided means, It is that silent force which carries away the waste and repairs the cells. It performs its work according to fixed and unerring law, and requires time and a suitable environment to remove the toxins of disease or repair damage from mechanical injury.

“What is the use of a doctor, then?” says one. We might as well ask what is the use of an intelligent gardener if good seed and soil and rain and sunshine are the essentials to plant life; or why not dismiss the faithful cook in the kitchen because God has promised us our daily bread?

If a fruit grower set out 100 apple trees and 28 died, and a neighbor only lost 6 trees out of 100, think you that he would not try to find out the cause of his greater loss?

Are you not of much more value than many trees? Every one is deeply interested in human life. Why not investigate?

There never was a time when more accurate records were kept. They are not perfect, but there are enough to make some reliable comparisons. They are to be found in hospitals, asylums and other charitable and public institutions.

Let us make a comparison between the two leading schools, the Allopaths and Homeopaths (I know that the Regulars will resent the name Allopath; but the Homeopaths and Eclectics are just as regular as they are, so I will use the term “Allopath” in referring to the dominant school).

For example, statistics gathered from the following nineteen cities, Philadelphia, Brooklyn, St. Louis, Baltimore, San Francisco, Cincinnati, Detroit, Minneapolis, Rochester, St. Paul, Kansas City, Providence, Denver, Indianapolis, Allegheny, Syracuse, Nashville, Duluth and Dayton show that 20,605 cases of acute bowel diseases were treated by the Allopaths. During the same time 1,511 cases of the same class of diseases were treated by Homeopaths.

There were thirteen times as many deaths under Allopaths as under Homeopaths.

There being six Allopathic to one Homeopathic physician makes the loss under Allopathic nearly twice as many as under Homeopathic treatment, on the basis of the same number treated.

Dr. Strickler, who gathered and compiled these statistics, says "That on any basis of calculation the Allopaths sign twice as many death certificates as the Homeopaths. It lies with the Allopaths to explain why this is so."

From the same records it is shown that 27,512 cases of scarlet fever were treated by Allopaths; 2,378 died, or 9 out of every 100.

During the same time the Homeopaths treated 4,303 cases of scarlet fever with a loss of 229, or 5 out of every 100.

During the same time and in the same cities 14,313 cases of typhoid fever were treated by Allopaths; 3,229 died, or 22 out of every 100.

The Homeopaths treated 2,082 cases; 316 died, being a loss of 15 out of 100.

In diphtheria in these same cities during the years 1891 to 1895 the Allopaths treated 16,088 cases; 5,228 died, or 32.5 out of every 100.

The Homeopaths treated 1,992 cases and lost 550, or 27.95 out of every 100. Evidently some of our Homeopaths have been carried off their base by antitoxine. Pure homeopathic treatment shows a much lower mortality.

In obstetrical cases the Allopaths waited upon 66,788 cases and lost 1,395, or 2.09 out of every 100.

The Homeopaths waited upon 8,307 cases and lost only 71, or 0.85 less than one out of every 100.

In pneumonia the difference is still more marked. Dr. Edward P. Wells (Allopath) reports that he gathered from reliable statistics prior to 1891 an account of 223,730 cases, of which 40,279 died, or 18 out of every 100. Since then he has gathered additional statistics covering 134,705 cases of which 37,715 died, or 28 out of every 100. Progress with a vengeance!

Dr. Wells says: "In these waning days of the 19th century we must frankly confess that the prevalence, frequency, severity and dangers of pneumonia have not been one whit diminished by our immediate predecessors or ourselves."

Truth is stranger than fiction, for it can be shown from reliable statistics gathered from all available sources, not only in this country but in Europe, and covering a period of more than sixty-five years, during which time thousands of cases of pneumonia have been treated homeopathically, that we have had a death rate of only 6 out of every 100.

It seems almost incredible that such a difference in mortality should continue to exist in an enlightened land and age. History is simply repeating itself, for there have been many similar examples in the past that could be enumerated. Our generation is no exception; we are still fettered by ignorance and prejudice.

There are reliable statistics to show that in the United States alone the deaths which occur under allopathic treatment are about 500,000 annually more than would occur if homeopathic treatment were universally employed.

The saddest thought is not that this is so,  
But sadder still, the people do not know.

And why? Is not every one interested in human life? "All that a man hath will he give for his life." No one would deliberately or knowingly employ a treatment for himself or loved ones that has a higher death rate, much less recommend it to others.

How is it possible, then, that a majority go on employing such treatment? It might be explained this way:

There are six Allopaths to one Homeopath in the United States.

Suppose that each of the six Allopaths has 100 cases of pneumonia; that would make 600 cases. According to Dr. Wells 168 die; that would leave 432 who recover.

Nothing is more natural than for each of those who recover to feel very grateful, and each will have a dozen friends who will join them in praising the doctor and the nurses; and the dozen druggists also will be very thankful for the part they had. This will make a crowd of more than 6,000.

We will say the one homeopath has his 100 cases and loses 6; that leaves 94 who recover. Each one has his dozen friends which also feel grateful, making a company of 1,128 to tell about the new and better way. But alas! when the 6,000 learn about those 6 deaths and begin to tell it, you would think the homeopath lost nearly all his cases. They denounce such treatment with the strongest invectives and call the people fools who employ it, while they go on imposing upon a credulous public, "deceiving and being deceived," and in this way the majority of people thoughtlessly go with the multitude to do evil; by this means quacks, patent medicines and nostrums become popular, and charlatons are made rich. The failures are not counted and the harm done is not considered.

All popular remedies have in them an element of deception; they have the power to render the sick insensible to their diseases, so instead of "feeling better" as they say, it would be nearer the truth to say, they do not feel, for, just to the extent they experience relief they are insensible; but the shout of victory goes up for the drugs.

What is the remedy for all this misguided enthusiasm? Simply this:

Gather up the facts,  
Scatter them in tracts.

Truth is mighty and will prevail, but must have an advocate. Armed with truth "one can chase a thousand and two put ten thousand to flight."

Let each one of the 1,128 take a dozen tracts and distribute them. This will equal more than two to their one. If we can get the ears and eyes of twelve thousand we will soon have more than six thousand voices to praise the better way.

It is grand to think we have come to such a time as this. Our duty is plain. We should stand together as a separate school of medicine so long as we have a larger per cent. of recoveries and a smaller death rate.

In 1825 we had one lone Homeopath in the United States. Now we have 12,000. We have 85 hospitals, 66 special hospitals, 58 dispensaries, 30 medical journals, and over five million patrons.

Since gaining legal standing some have grown indifferent. The pioneers of Homeopathy were more active and earnest in winning people to accept the true healing art.

Their experience teaches that the most powerful agent is the press. Through the distribution of literature, in the form of tracts and leaflets, the people learned about Homeopathy and were led to employ it.

The supreme test is at the bedside, but there are hundreds in every community who know nothing of its nature or success and are easily misled. It is our duty to let them know its virtue. "Knowledge is power." It is the foundation of wisdom, understanding, righteousness and true happiness.

Our growth will depend upon our continued activity.

We are in danger from the commercialism of the age. Money-getting acts like a soporific upon a medical reformer. It will lead him to adopt any expedient, regardless of the future welfare of his patient. This is his logic: the more prescriptions he makes the more dollars he gets; the longer his patient is sick the more visits he makes. He magnifies ills to create demand for his pills. Such a doctor cannot advance the healing art. He leaves the people in ignorance so long as it is profitable to do so.

No school is free from such characters. There is a strong

temptation to commercialize the practice of medicine and impose upon the credulity of the people.

It is easier, more pleasant and profitable to drift with the current of public opinion than to strive against ignorance and prejudice. As long as the masses make it possible the avaricious class will profit at their expense.

The only hope for deliverance from medical imposition lies along the line of an increased general intelligence.

Homeopathy deserves careful investigation. It has no secrets. Its books are open. It is founded upon law. Its principles are in harmony with the latest researches in physiology and pathology. Every one should know its plan, its principles and its success.

When a person knows the comparative value of the various forms of treatment then he will be qualified to choose a doctor for himself and recommend one to others.

To fail to qualify ourselves is to base judgment upon mere opinion or hearsay and trifle with human life.

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### HYDROPHOBINUM. (LYSSIN.)

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JOSEPHINE HOWLAND, M. D., Auburn, N. Y.

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In animals suffering from hydrophobia we notice these features: Noises, running water, the slightest draught brings on spasms and convulsions, and running all through the provings there is a susceptibility to noise, water and draft. There is intense relief from heat. Hering says: "Lyssin will not cure hydrophobia unless it has the desire for heat marked." It has convulsions with aching down the spine; aggravated or brought on by touch, noise, and draughts. Such convulsions have generally been controlled by *Nux vomica*, but this remedy goes deeper than *Nux*. In tetanus with opisthotonos of infants and children it may prove of use. Mentally, full of impulses. Impulse to do disorderly things. *Nux* has it. [Mother has impulse to throw child into fire, and gives it to nurse lest she do it harm; *Nux*.] Patient is irritable; bites; has impulse to tear things, clothing, bed-



covers, etc. Animal crouches in corner, eyes glassy, looks anxious, and snaps. The saliva is not generally ejected by spitting, but flows from the mouth, copious, frothy, tenacious, thick.

It is similar to Nux in its exaggerated sensitiveness to external things. Mental faculties exaggerated; understanding acute; more intense than Coffea.

Involuntary stool and urine from hearing water run.

It has, like Belladonna and Stramonium, an aggravation from bright, shining, smooth, glassy things; windowglass, transparent things. These bring on convulsions and he cannot swallow. Jaws get set on thought of a glass of water, though thirsty and wants to take it.

Relieved of convulsions by a hot bath; though may have convulsions while taking it is better afterward. Convulsions and choking if any water gets into mouth. Dogs may have even the anxiety of Arsenicum; constantly moving; hyperæsthesia of all of the senses, and sensitiveness to draught. It may be of use in hysteria of the uterine variety. All of the headaches have great pressure and throbbing. Throbbing all over the body. Tongue swollen, flabby; taste exaggerated; "cool sense" felt in the œsophagus (as after water cresses). Throat, spasmodic affections. Intensity of nervous excitement. Will be useful in chronic, rather than early cases of hysteria. Lyssin is supposed to have prevented rabies in a dog after having been bitten.

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### THE SEARCH FOR THE REMEDY.

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B. LEB. BAYLIES, M. D., Brooklyn, N. Y.

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Before attempting to select a remedy we must first obtain a clear view of the case to be treated. Having noted the aspect and temperament of the patient, and heard his story and complaint of all abnormal sensations or pains; their position, character and direction; their origin and order of sequence, verified by particular inquiry; taking care not to mislead or bias his perceptions by suggestion; and when

the examination has been made of the morbid objective manifestations by inspection, palpation, or auscultation, and of the conditions of aggravation or amelioration of his symptoms, whether by mental or physical exertion, by certain postures, motions, or rest, heat or cold, wrapping or uncovering, in the house or in the open air, and of the time when these conditions are operative; when we have recorded these facts, then as preliminary to the search for the remedy, we select and write out under separate heads for study of their homeopathic relations to the case.

First—The most prominent and peculiar symptoms of the patient.

Second—The remarkable concomitant symptoms.

Third—The condition of their occurrence, amelioration, and aggravation.

For instance, the first division would present a particular sensation or pain, its character, location, and direction; for example—stitch in the right hypochondrium extending upward through the lung to the right nipple, to top of the corresponding shoulder, and to the right scapula. Next, certain concomitant symptoms, as sleeping with eyes half open, hallucinations, rising from bed in delirium, talking in sleep.

Third—As a condition of aggravation, before, or in the earlier hours after midnight.

Searching for the remedy with the help of Bönninghausen's Repertory we compare the list of drugs which cause pain stitching upward with those mentioned under the rubric, comprising those manifesting action on the liver or right hypochondrium, and select and write out those which are common to both, representing thus the drugs related to the variety of pain, its location and direction. Comparing these with the concomitant symptoms we then compare these with those which produce the concomitant symptoms above mentioned and select from them and write [for example] those to be found under the caption "sleeping with the eyes half open", and of these, those under talking in sleep, leaving or escaping from bed, delirium, etc. From

these we select those which have the condition of aggravation noted in the case. The patient, however, in his distress cannot always clearly define a symptom though able to state its location. We must then determine by his posture, movements, and expression, as we are accustomed to do in the case of children, whether the pain is continuous or intermitting, and probably infer that it is one of two, similar in character; and by comparison with the other phenomena and conditions select the corresponding remedy. Before this process is completed we will, by exclusion of the non-corresponding drugs, have reduced the number remaining to the one or two characteristically possessed of all these qualifications. Comparing these with their provings in the *Materia Medica* we clearly recognize the remedy.

In this analytical method of seeking the remedy it is most expeditious to select first that one of the symptoms most peculiar to the case, or that modality which comprises the least number of drugs, and proceed from this to those which have the larger number, thus saving time and trouble. It is also generally sufficient and time-saving to scan only those distinguished by the gradation of type as pre-eminently characteristic of the symptoms and modalities, and Bönninghausen has, according to my experience, proved his remarkable accuracy in classifying them; although occasionally some drug in the lowest order of type may seem worthy of a higher place and be found indispensable to the cure.

The selection of the remedy and ultimatum of our search should be the discovery that the drug indicated by the *Repertory* forms, in the proving, as nearly as possible, a sympathetic picture of the mentality, temperament, symptoms and modalities of the case.

## A FELON ABORTED.

A. MCNEIL, M. D., San Francisco, Cal.

Mrs. W., aged about 30 years, considerable adipose tissue, complexion clear and cheeks red, dark hair and eyes. She showed me her finger, which was pink, slightly swollen and moderately painful. I diagnosed an incipient felon. This she confirmed from her previous experience. She had such an ailment a year ago, which was lanced, probed and poulticed, secundum artem. In spite of all of which six months elapsed from its beginning to the final healing.

She was in terror at the prospect of the repetition of her sufferings. I could learn no modalities. The only symptom, further than what I have mentioned, was that with every menstrual period she had pimples on her face. On this I gave Graphites 6 m., on the 23rd of last month. By the 16th the pain was all gone, swelling and discoloration better. On May 4th her husband called on his own account, but he informed me that all symptoms suggestive of felon had passed away without any return.

My guiding symptom, "Eruption during menses" is given to Graphites in the second rank in Hering and in Kent's Repertory.

Dulcamara has the same rank, Nux moschata the fourth or lowest. The case here reported is the fourth in which I have verified it, as occurring under Graphites, so that I consider that remedy as a candidate for promotion to the highest rank. Such a symptom has the merit of being easily found, as all our fair patients are sure to observe anything that affects their complexion.

DISCUSSION: J. H. Allen, M. D.—I think the paper is at fault in not stating the character of the eruption. Various kinds of eruptions may come out at the menstrual period. The paper does not describe the kind in the case in question.

J. C. White, M. D.—I can relate a case that I had last

week showing the value of symptoms at the period. It was a lady who had had menstrual headache for over twenty years. The headache was severe and would commence the week previous to the flow. I noticed that she had her hands clasped up over her head. She would get so tired that she would desist from it but she always got relief that way. She had also bearing down, nausea and vomiting; her rest was fairly good and she felt better for it. Because of this relief from pressure I gave her Ignatia. On the next visit I found her worse than she had been. The pain in the head was severe; on pressing my hands on her head she said that she felt better. I prescribed *Nux moschata* for her and when in three hours I returned she said that she had never got such relief before. I was surprised not to find this symptom in any materia medica that I could find. I neglected to say that she had dryness of the mouth and numbness in the extremities and vertigo. There was tenesmus with her stools: she could accomplish the defecation but she could not strain the least because it hurt her head so. That last symptom was not relieved particularly by the *Nux moschata*. She complains of the vertigo yet, especially when lying down.

Her breasts are sensitive for a week before the menses come on. I conclude that she will need *Conium* to complete the cure.

#### HINTS ON NUX MOSCHATA.

C. M. Boger, M. D.—These are two very interesting cases. In the last year's transactions you will find, I think, a laryngeal case cured by *Nux moschata*. There is a fine proving of *Nux moschata* in an old journal published by Hering and Morton. Bönninghausen contributed towards the perfection of the proving, a number of quotations being taken from him. It is one of the few remedies that has a false perception of distance, similar to *Cannabis indica* and *Cannabis sativa*. The patient will imagine that things that they see are at a greater distance than is really the case. This is not said in so many words but is an unavoidable inference from the other symptoms. It is between the lines. It is one of the remedies that Bönninghausen recommended

for impotence. In this proving that I have referred to, he recommended it very highly for that purpose.

Hering cured a case of apoplexy with *Nux moschata*; he gave one dose only. It is one of the remedies that throws the blood to the head. I believe that I would change the potency in that case of Dr. White's, instead of giving *Conium*. I do not believe that we should accept pathological symptoms too easily, but clinical modalities are perfectly acceptable; in fact that is the only way that we can get a modality.

J. C. White, M. D.—The only thing that suggested that modality was what I read in a proving of *Nux moschata* about the prover wanting an attendant to sit on his head. I did not expect to relieve the headache with it, but it did.

H. C. Allen, M. D.—Every modality observed, like that, should be noted down in our works on *Materia Medica*, and watched for in other cases. In that way we perfect our *Materia Medica*. We have two remedies that have headaches with similar amelioration, *Sepia* and *Canchalagua*. Such modalities make excellent additions to our *Materia Medica*.

#### IS IT STANNUM OR ZINCUM.

J. C. White, M. D.—I would like to ask advice about the following case. A lady has a hollow feeling in chest, and the headache that she has is a pain in the base of the brain extending through to the eyes. Palpitation of the heart worse from exertion. She is wonderfully exercised during a thunder-storm, is nervous and has restlessness of legs and feet, commencing in the evening about four o'clock. What is the remedy, *Stannum* or *Zinc*?

J. H. Allen, M. D.—I have this proving of *Stannum* after taking four doses. It began with an empty feeling extending all over the abdomen, then great exhaustion. I felt as if I could not walk a hundred feet; I wanted to lie down on the ground. These symptoms were entirely relieved by eating.

#### SILICEA IN A GALL-STONE CASE.

C. M. Boger, M. D.—I have a remarkable specimen here

that I would like to exhibit to the members. This large gall-stone, the largest that I ever saw, came out of a fistula one year after an operation for the purpose of removing it. I gave the patient Silicea and shortly after it became possible to pull it out with a forceps. The cicatrix of the cut of the operation, which had been quite deep and well marked during all the year since the operation, disappeared entirely in two weeks. Now I doubt if it could be found at all. [The gall-stone was as large as a walnut.]

Alice Campbell, M. D.—Here is another case something like it: A woman over seventy years of age was taken with vomiting, very offensive and profuse in quantity; it continued for three days, changing in character to bile. Then it ceased. It was accompanied with pain through the stomach and back. Afterward it went lower down, every day a little lower. The abdomen became tense and swollen. After two weeks of this it was expelled violently together with three quarts of fecal matter. The gall-stone is not so big as that of Dr. Boger's but it is a very large one. It came out like a plug, and many more came with it.

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### PROCEEDINGS OF THE CENTRAL NEW YORK HOMEOPATHIC SOCIETY.

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BY S. L. GUILD-LEGGETT, M. D., sec'y.

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Rochester Club, June 13, 1901.

The Society was called to order by the President Dr. Volney A. Hoard, of Rochester, at 12 M.

Members present: Drs. Hoard, Drake, Johnson, Graham, Howland, Biegler, Leggett.

Visitor Present: Dr. J. K. Tretton.

Reading of the minutes of March 1901.

Discussion of the various evidences relating to the founding of the Central Society, led to the adoption of the following motion:

Moved by Dr. Johnson, seconded by Dr. Graham,

*First*, that it is the consensus of opinion of this Society that it was organized in 1850, and after a period of suspension during the Civil War, was reorganized in 1866,

*Second*, that this motion be entered upon the minutes of March 1901, directly following the historical records of the Society. Carried.

The minutes were accepted as corrected.

There was no report from the Board of Censors.

The Organon Sections I. II. were considered by Dr. W. W. Johnson.

#### THE ORGANON LESSONS.

‡ I. The physician's highest and *only* calling is to restore health to the sick, which is called healing.

‡ II. The highest aim of healing is the speedy, gentle and permanent restitution of health or alleviation and obliteration of disease in its entire extent, in the shortest, most reliable and safest manner, according to clearly intelligible reasons.

What a mighty good thing it was for the world that Samuel Hahnemann lived and worked just when he did. Read his old foggy notions and imagine what a misfit he'd be today as a practicing physician. Why, take the first paragraph and see how he puts it: "The physician's *only* calling is to heal the sick."

The fact of it is Hahnemann wasn't "on to his job;" the revised up-to-date 20th century edition of the Organon should read: "The healing of the sick is *only one* of the callings of the up-to-date physician and it's not the greatest by a long shot."

Of course if a fellow were content to have but a small following of educated dreamers; to be run down at the heels and out at the elbows; to be known as "a bright fellow, but queer, you know;" he could be all that by striving *only* to heal.

Samuel Hahnemann might have been able to heal some bad cases of chronic disease which were the blight of some valuable lives, and I've no doubt he could sometimes collect as much as \$1.50 for each case; but, I'll wager, when it came to hustling for the appointment of Examiner for the Knights of Maccabees, I could beat him in a walk.



Only to heal! Why my patients never think of that. They come to me because I live in the proper quarter, because I drive the best team or the handsomest automobile, because my wife is in the swim and they want her influence, or because many of the best people come and it's well to be classed with them, and I have some poor devils too who can't afford to go to a cheaper doctor, for then their neighbors would get on to it that they were poor. Oh! My! the healing is an incident, just a mere incident, you know. Hahnemann took himself altogether too seriously. Of course I meet baffling cases (now this is on the dead square and just between us, you know) but I never let on I'm baffled. No, I just advise a trip to some resort, or order an operation and "go shucks" with the hotel-keeper or surgeon. The surgeon is the safest. There is almost always something left they can take out and the prices are high. They've got on to their job all right.

They used to do what they called clean sweep operations i. e., take all the insides a patient could spare.

This was bad, it was another of Hahnemann's *onlys*. Nothing else left. But now they have it down fine, only one or a piece of one at a time. Always leave something that you can take away next time. And then, too, there are always adhesions left to fall back on. Why there's nothing to-day to keep a good bright young physician from getting on.

Now I see I have unconsciously glided from the first to the second sections in my argument.

Hahnemann says the highest aim of healing is the "speedy, gentle and permanent restitution to health." That might have been the highest aim in Hahnemann's time but it don't go now. Read what all the magazines and papers are harping about; what all the great men of to-day say, and there is but one testimony: the 20th century success is measured in its length, breadth and thickness by the dollars. No dollars, no success. Therefore, in the light of the 20th century this teaching of Hahnemann is false. How can you expect many dollars if you heal speedily.

Another phase of it is the dissatisfaction of the patient with a speedy cure. They want their money's worth, too, and a speedy cure means they weren't very sick, and it's worth four times as much to be cured of a follicular pharyngitis as it is of a sore throat. And then that "gentle" of Hahnemann's. Why, you'd think all the patients then were women, but even they must have changed radically for no self-respecting woman can boast of a cure to-day with her insides all in.

Speaking of changes, it's marvelous! Why, I've no doubt there are two or three here to-day who can remember when we used to get fifty-cent cases of ordinary belly-ache.

What has become of them? Have we not transformed them into from \$300 to \$400 operative appendicitis cases? Talk about your Midas touch; we touch our patients for diamonds.

No, it's all wrong; "speedy, gentle, permanent!" There's a medieval flavor in it that does not appeal to the modern palate.

I trust my levity may be forgiven, but my treatment of the paragraphs was the result of an inspiration, the original text being too plain and its truths too self-evident to need serious discussion.

Grant me, thanks, that I did not bore you with my specialty in which the Sections gave me such a fine chance to dilate, referring as they do to no pathy or school.

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Dr. Johnson's paper was received with much amusement at its appositeness to certain aspects of the time.

Dr. Biegler said the paper covered well the tendency to chicanery in medicine. He said that he did occasionally meet physicians who had respect for Homeopathy other than its name.

Discussions of surgical and palliative treatment of cancerous conditions was followed by a paper from Dr. T. F. Allen.

#### A CONTRIBUTION TO GYNECOLOGICAL HOMEOPATHY.

A short time since I was called upon by a lady, the wife

of a dentist in my vicinity, who had consulted a physician who seemed to be very hopeless about her case. This physician told her that she had undoubtedly a cancerous growth in the mammary gland and advised her to consult a surgeon; but before doing so she took her husband into her confidence and he advised her by all means to consult me, since it was his opinion that cancerous growths were not cured by an operation. She was glad enough to do this and so fell into my hands.

On carefully examining her case I found it necessary to refer her for consultation to a lady who is very prominent in a medical college in the city, and who, after a careful examination, fully concurred in my opinion that she was suffering from a cystocele.

I found on questioning the lady that this has persistently protruded since the birth of her eldest child, and had gradually increased in size, so much so that at present the tumor protruded from the vagina, accompanied in a general way by frequent necessity to evacuate the bladder, and especially by dragging pains from the shoulders, a frequent accompaniment of this disease.

Having been recently very much interested in Hahnemann's "Original Notes," published as his "Materia Medica of Chronic Diseases," notes especially emphasizing Stannum for an atonic condition of the bladder with other symptoms which have apparently long been overlooked, or never, by many, formerly at least, given their true emphasis on account of their similarity to cystocele, though that name was not then known and has not appeared in our practical treatises except as "a weakness of the bladder."

This remedy, upon this indication and accompanying symptoms, was prescribed with so much relief that the patient has continued to take it nearly up to the present time. A few days ago I again requested Dr. Brown to re-examine the case and report upon it to me. Report is that the bladder had very much improved in tone, was not prolapsed so much, and in every way seemed very much better. The doctor was very much surprised and informed me that she

would immediately proceed to use Stannum internally in many cases which seemed to require a plastic operation for the relief of the cystocele.

I now feel justified in offering the drug anew to the profession, as a remedy to relieve distressing symptoms occurring especially as the result of a cystocele which may be present either from injury or from loss of power of this organ, especially if accompanied by the peculiar dragging pain which we so commonly observe to accompany this affection. It has been used by me in a few cases only, which have been known to result not only from injuries but to accompany loss of power of the bladder and even accompanying a severe prolapsus of that organ. I am quite confident of very happy results which will follow its use in cystocele. I would suggest one dose per day for a week, then complete suspension of the drug for two or three weeks, followed by its resumption.

The symptoms which accompany the local bloated symptoms seem to have attracted Hahnemann's attention to this weakness or atonic condition of the bladder, and certainly these symptoms have been abundantly verified. Plastic operations for the cure of cystocele are very difficult and not always fruitful of good results, and any drug which promises relief from such a trouble will doubtless be welcomed with avidity.

I may add that the lady suffering from carcinoma of the breast has certainly been improving; she has interrupted the taking of Stannum for a few times on account of the action of another remedy, being required in her case to take Lithium carb. for the shoulder pains extending to the breast accompanied by marked gouty symptoms, and being speedily relieved, has returned to the Stannum. While no appreciable result seems to have been attained she has steadily improved in health, has become decidedly stronger, and the swelling, which threatened at one time to become serious, has almost entirely disappeared. I am hopeful (as she is) of the entire disappearance of her trouble.

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Dr. Allen's paper was received with pleasure and listened to with interest. All expressed themselves glad to know this special sphere of Stannum, a remedy infrequently used, and perhaps less known than many others. Adjournment for lunch.

Called to order 2:30 P. M.

The Sec'y. read the following communication from Mr. Carr:

CENTRAL NEW YORK HOMEOPATHIC MEDICAL SOCIETY:

I thank you very kindly for the resolutions passed by your Society upon the death of my son Dr. A. B. Carr. They are a great comfort to me in my bereavement.

Very truly, S. D. CARR.

Dr. Josephine Howland then read a paper upon

DULCAMARA.

You have, no doubt, all read Dr. Kent's lecture on Dulcamara. I do not, therefore, expect to tell you anything new about this remedy, but to recapitulate what has already been said and follow with a most interesting clinical case.

This medicine affects especially the mucous membranes of the body.

The Dulcamara patient is disturbed by every change in weather, from warm to cold, from dry to moist; better in dry, even weather, worse in cold and damp; better in summer and worse in winter.

Patients are affected by changes in mountainous regions of hot days and cold, damp nights.

By these sudden changes diarrhœas are apt to come on, Strike an atmosphere that will make you sweat, then suddenly suppress it by a colder atmosphere, and you will have a Dulcamara state, no matter what the name of the disease is which it produces—rheumatism, diarrhœa, inflammation of the eyes, sore throat, Bright's disease. Ice-cream men are good Dulcamara patients. In this climate complaints that come on from over-exertion, over-heating and then throwing off the clothing and becoming chilled; every time there is a cold damp rain the nose stuffs up; in autumn when all the ailments return. Then comes a headache with a dry

catarrh; as soon as the catarrhal discharge starts up his headache is relieved.

The *Dulcamara coryza* is worse in cold, open air, the opposite of *Nux Vomica*: better by hot applications; cough from damp cold weather or getting wet; better in warmth and worse in cold.

October 12, 1896.—Mr. A., 64 years, grey hair, brown eyes, wrinkled forehead, rather full face, weight 185 pounds, mason by trade.

This patient has had several attacks of rheumatism during his life and would be in bed six weeks at a time under allopathic treatment. For two years he had been unable to do any work and his wife had watched him to see that he did not attempt to do anything. The doctor said he would die and she must go with him everywhere; expecting she would find him dead in the carriage, on the street, anywhere. In this condition I took the case on paper before leaving for Philadelphia, as I had not yet completed my college course in the Homeopathic college, promising to prescribe after I got there. The case was as follows:

Tightness of chest behind lower part of sternum, with dry, hacking cough; began last January; > by heat, < pressure, < after a meal.

Dyspnœa—On lying down < at night, > after midnight, > after expectoration. (Quinine cough syrup.)

Cough—Worse on going to bed, < lying down, in cold room, from exercise, > out of doors; hoarseness at times, < from coughing, > from hot drinks; all the time trying to clear throat, < night and morning, < from riding.

Expectoration; scant, white mucus, worse in the morning.

Abdomen; bloated, came on in April, lasted three or four months; < towards night, > moving about.

Puffiness under eyes, inflamed and dizzy feeling.

Tightness about the neck, then could not see or hear as well.

Sensation of a tight collar about the neck, only lasted a short time; droopy afterwards for several days.

Appetite fairly good. Dinner best meal; fond of vegetables, except cabbage; fat meat, milk, oysters, sweets and fruit; dislikes acids or pickles.

Sleeps pretty well. Dreams of work, of danger. Likes plenty of covering.

Not very thirsty. Wants cold water.

Constipation for years; has gone a week without stool; goes two or three days as a rule (Sodium Phosphate). Stool; small black balls at times.

Diarrhoea at times, followed by constipation.

Urine usually has brick-dust sediment, pain before discharge lately.

Sweats easily, particularly when exercising, then would get chilly and be likely to take cold.

Hands warm and moist, feet warm and dry.

Feels > outdoors, sitting up, in a warm room, moving about. Feels well in the morning on awaking, and worse after exercising.

Irritable since sick; ordinarily even tempered.

Despondent at times.

Has had typhoid fever, acute rheumatism at 21 caused by overwork in sugar bush, got sweaty and took cold, lasted six weeks (allopathic treatment). Had sciatica ten years ago in right side, lumbago twenty years ago. Pneumonia two and a half years ago; fever and ague, that is, malaria in 1855, in Wisconsin, it was quartan at first, then tertian, lasted three weeks. This was repeated one and a half years after. Has double hernia for two years.

Deafness in both ears since this trouble came on. Better out of doors. Ears feel stopped, < by pressure. Ringing in ears at times. Can hear but don't take the meaning. Backache in small of back if standing long in bent position.

Rheumatism in knees, ankles, hips, right arm, muscles.

Last winter started in right knee, then went to left, then to right shoulder and arm and from there to the left side (allopathic treatment).

Upon examination the pathological change in this case was tri-cuspid regurgitation of the heart.

After arriving in Philadelphia and looking over the case I did not see the remedy. I took the case to Dr. Thatcher and he suggested that possibly Rhus might be the remedy, but not being positive I refused to prescribe.

A year later I returned to New York state. I found the man no worse, if possible, a trifle better, but still unable to do any work. He had taken no medicine preparatory for homeopathic treatment, waiting for me to prescribe. He was taking enemas to move his bowels, which I had him stop, and put him on water, drinking a cup of hot water first thing in the morning and a glass of cold water at night. This worked charmingly. It relieved the system to such an extent that he was able to do chores. He then went one day into his brother's cellar, threw off his coat, put on a frock, and chopped up some meat. He took cold. On came the old-fashioned rheumatism.

His wife said to me: "Now is your time, you know whether you want to take this case or not, you understand it."

I said to myself the allopaths have this man at the verge of the grave, I can do no more than push him over. I will take the case. This was March 1st, 1898. The symptoms were sent me by mail as follows:

Rheumatism in knees, later in hands, < on beginning to move, < from continued motion, but gets worse if walks much; > from hot applications.

Sleep, restless.

These symptoms I thought called for Rhus, which I gave, 50 m.

March 3 I was called to the house and found these symptoms:

Began to be worse night before last. Only in right knee, ankle and right shoulder, in calf of leg a little; began in right shoulder yesterday, shoulder sore.

Right knee and ankle swollen yesterday, again to-day; pain when still for a little while, but soon gets < and has to change position. Sharp throbbing or aching pain, > by heat, < towards night.



Sleep, restless, < after 12 o'clock.

No stool for two days.

Urine, frequent past two days. Was light; dark last night; like strong tea this morning.

Face, puffy yesterday morning, right eye ecchymotic. Puffiness began this morning.

Headache, yesterday morning when he got up, frontal steady, heavy beating, left at 3:00 P. M.

Sweat a little in the night.

March 4.—Again got worse at 3:00 P. M. yesterday.

Sharp pain in knee and down to ankle, jumping pain in ankle, felt at times, left there and stayed in knee. Knee got easy, pain went to shoulder. Terrible pain in shoulder joint, got easy in shoulder and extended down the arm, < by motion; > hot cloths. Can't use right arm without pain in shoulder. Dull, aggravating pain in knee since yesterday. Cannot lie still for pain; feels sore.

Backache, on either side of sacral region lying on the back, had to move for the pain. Better for a little while, then had to move again.

Face very red.

Sleep, between 11 and 12 awakened by sharp pain in knee and shoulder.

Sweat, since yesterday afternoon, offensive odor.

March 4, 4:40 P. M.—Temperature 99½. Pulse 69, strong.

Headache, frontal this afternoon.

Urine, dark red, almost brick color.

March 5, evening.—Pulse 71. Temperature 99½.

Restless night and day, wanted to be turned every few minutes.

Limb feels restless and hot, has to move; sore mostly on posterior thigh, pain < since yesterday. Shoulder began to get > after midnight, then knee began to get <, knee slightly swollen above and a little to the inside.

Backache; *i. e.*, he lies upon it a little while, feels sore.

Dull pain in right side of chest at times. Sore feeling. Hurts to take a breath.

Urine; ineffectual urging last night, scant, dark red, brick dust sediment.

Headache, frontal last night and this morning. Dull pain.

On these symptoms I gave Dulcamara c.m. at 5:00 P. M.

The next morning I learned he had had a very restless night, slight delirium, thought there were two in the bed. Upon examination I found the patient decidedly better. The urine was brick red. There was a steady improvement from that time on, and in three and a half days I dismissed the case.

Six weeks later I was called in because there were slight pains in the knees, showing returning symptoms, although the patient had been around the house all the time. I gave him the same medicine and that was the end of the trouble.

Examination of the heart showed no heart lesion.

Later on, however, Dulcamara failed to do anything more for the symptoms which arose in the case, which were slight, and he was put upon Sulphur. All this time in pretty fair state of health, able to work most of the time. He improved very much on Sulphur for a long time, when it ceased to do anything more for him. My last prescription was about two weeks ago when I placed him upon Lyco-podium. Haven't seen him since. Is able to work. Practically well.

\* \* \* \*

This paper received the commendation of the members, and its various points were warmly discussed.

It was the consensus of opinion that the truly great things done by physicians were rarely accredited to them. Cases were cited of wonderful cures attributed to one thing or another quite foreign to the facts: *i. e.*, some neighbor's domestic remedy, changes of air, of scene, christian science, etc.

A paper was then read from Dr. J. Mumford Keesee.

#### PERIODICAL RECURRENCE OF SYMPTOMS.

Some time ago I was interested in a paper read by one of our number on the action of certain plants, as the morning

glory, four o'clock, evening primrose, oxalis, portulacca, night blooming cereus and others, with reference to their opening and closing at a certain hour, or time of day, or under certain conditions. It gave me renewed interest in some of the drugs in our *Materia Medica* which, in their provings, have elicited symptoms which recur at certain hours, or at stated periods, and at certain and regular intervals.

Along this line I report a case in which no very satisfactory results were obtained, but which may be of service in the future, not as a case, but in stimulating reasoning power in searching for remedial agents.

The patient was suffering from a rather singular ailment. For some time she was feeling reasonably well during the day, attending regularly to her daily round of duties, but every night as soon as she lay down in bed she was seized with a severe chill, which lasted for a half or three-quarters of an hour, yet was followed by no heat and only a very slight sweat. No amount of covering produced any effect, and, thinking that the cold sheets were the cause she used flannel, but obtained no relief. The symptom, "chills soon as she got into bed," was not usual, and one which I could not hope to find in so many words in the repertories. I managed, however, to zigzag a marked amelioration, but the result was not satisfactory. [*Heloderma* has a similar condition.—ED.]

Dr. Carleton Smith reports a case somewhat similar, in which *Diadema Aranea* was a prompt curative. *Diadema*—the poison of the Cross Spider—has the remarkable symptom, "toothache every day at the same hour," and seems to be one of the best timekeepers among our drugs, and in spite of the fact that it is not a vegetable poison.

Now my patient's trouble did not present itself at the same hour exactly each day, but, on the contrary, was developed only when she retired to bed, which was at irregular hours; but when it did present itself it was as regular as clock work, and always under precisely the same conditions. I surmised that if I had reasoned as Dr. Smith did, I might possibly have relieved my patient and myself much more

satisfactorily. He reasoned as follows: "In the homeopathic use of many drugs we must reason from analogy, and if the symptom, whatever it is, comes on with a positive regularity every day, every other day, or every seventh day, moving as it were in a cycle, then the remedy corresponding to this positive regularity is homeopathic to it, and will in all likelihood effect a cure." The colic of Diadema has the characteristic action of the drug, and seems to be somewhat similar in its severity to Colocynth, but the Diadema colic is relieved by sitting up and rubbing the abdomen all over with the hand. The toothache mentioned above occurs in one or more teeth every day at precisely the same hour, but on lying down every tooth in the head will ache. Chill and other symptoms may be aggravated every other day at precisely the same hour. Great regularity seems to be the keynote of the remedy.

Pulsatilla, with its periodical sick-headache two or three days preceding menstruation, its regular evening aggravation, and its rheumatism with wandering pains shifting rapidly from part to part, and worse every other night, is another remedy of interest along this line, though not as marked as some others.

Lycopodium is perhaps a little more regular with its headache, cough, rheumatism, chill, etc., worse from 4 to 8 P. M. This is a very valuable modality, often recurring very persistently.

A few of the other drugs with periodical action are:

Natrum Muriaticum, return of symptoms at 7 A. M. regularly, facial neuralgia, or chill at 9 or 10 A. M., or every Spring and Autumn has symptoms of chill and fever.

Nitric Acid, with its every other day aggravation in typhoid.

Ipecac. dyspepsia every day at the same hour, also every alternate day at the same time; every Saturday bilious vomiting.

Arsenicum, with its general 1 to 3 A. M. aggravation, periodical complaints, return of complaints when year comes round.

Alumina, which has chronic diarrhoea aggravated on alternate days and skin affections always worse in winter.

Argentum Metallicum, with symptoms which reappear at noon.

Sulphur, with its headache every seventh day.

Chininum. sulph., with its marked periodicity of prosopalgia, chill, etc., at 10 A. M., 3 P. M. and 10 P. M.

Chinchona, with its every other day aggravation, are among others of our remedies with regularly recurring symptoms.

We are undoubtedly prone to put a too narrow interpretation on many of our provings.

For instance, *Lac Caninum* has sore throat constantly changing from one side to the other, and I have found this a valuable symptom. But if we stop here, and infer that the drug has this peculiar action on the throat alone, we will do nothing with this characteristic symptom but cure sore throats with it. I have found that rheumatism and acute pains in different parts of the body can readily be cured with it, whenever this peculiar symptom manifests itself, of the pain or soreness alternating from one side to the other at regular intervals.

*Cedron* must not be forgotten, with its attacks occurring with unerring periodicity to the hour, prosopalgia and neuralgia especially.

Dr. Johnson remarked that the periodical cycles were certainly of great importance, and especially so in chronic disease. That the numbers 3, 5, 7, 9, 14, 21, had been studied in relation to disease manifestations before it was known that the various drugs had developed like peculiarities.

The President appointed Drs. Nickelson, Hussey, Nash, Tretton and Dever as essayists, and invited Dr. Martin Deschere of New York to be present and address the society in September.

S. L. GUILD-LEGGETT,

Secretary.

## EDITORIAL.

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All Contributions, Exchanges, Books for Review and other communications should be addressed to the Editor, 5142 Washington Ave., who is responsible for the dignity and courtesy of the magazine, but not for the opinions of contributors.

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### HOMEOPATHY VERSUS ANTI-TOXIN.

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During the half dozen or more years that antitoxin has been before the profession the occasional spectacle has been witnessed of some homeopathic journalist approving its use and advocating its adoption as a therapeutic measure, contrary to all the teaching of Hahnemann and in violent prostitution of the homeopathic principle, the latest of these exhibitions of a lack of loyalty to homeopathy, as of homeopathic unwisdom, having been offered by the *Medical Magazine* for March, a journal edited by an ex-president of the Wisconsin State Homeopathic Society, now president and a homeopathic member of the Wisconsin State Board of Medical Examiners, which journal is also the official organ of homeopathy in Wisconsin.

Just why homeopaths should wish to adopt this agent in the treatment of diphtheria, or why any homeopath should hold that its use is necessary or justified, is one of those problems which is non-understandable. Allowing all that its most ardent advocates claim for it, it still falls far short of the possibilities of homeopathic treatment, and it is certainly lacking in every essential which goes to make the application of a remedy in the sick room scientific.

Antitoxin is nothing else than polluted horse serum. Despite various fine-spun theories concerning its physiological or chemical composition the fact remains that it is not known exactly what it is. Nor is it known whether it is the diphtheria-ized serum or the carbolic acid which preserves it that makes it potent. The physician using it is

quite unacquainted with his weapon. He only knows that he has bought an agent put up by some commercial house or health department which is labeled antitoxin. He gives an empiric agent upon empiric indications. There is a total lack of careful differentiation between constitutions, temperaments, idiosyncrasies, modalities, times and conditions of ameliorations and aggravations, symptomatic peculiarities and everything else that goes to make prescribing a science and art.

Antitoxin is prescribed because there is a membrane. It matters not what kind of a membrane it is so long as it is presumed to be diphtheritic, which side of the throat or which part of the fauces was first invaded, in which direction the invasion traveled, how measuredly or how malignantly it spread, what hours of the day or night the patient is better or worse, what his modalities of various kinds may be—all that is cared for is that it is a membrane and in goes the syringe. Perhaps this is "scientific" medication; but if it is there are a good many homeopathic physicians who fail to so see it.

The *Magazine* says editorially that it has seen the membrane fade away as if by magic. So hundreds of others have seen it fade away as if by the same magic under carbolic acid, when indicated, in various potencies. And carbolic acid enters into the composition of antitoxin. Has anyone seen the membrane fade away under antitoxin without carbolic acid? A Philadelphia house recently brought into unenviable notoriety in connection with some of its animal products claims its preparation does not contain carbolic acid, and that therefore it is not this agent that cures when its antitoxin is employed. But that house uses trikesol, a coal-tar product three times as powerful as carbolic acid, as its preservative, therefore its claim is a subterfuge, pure and simple, unworthy of any reliable manufacturer. The fact is that antitoxin is not preserved by anything but carbolic acid or its equivalent; and in the light of the homeopathic pathogenesis of this remedy, and in the light of its proven clinical value in profound septic states of the human

system, it is safe to assume that it is this agent which has the melting influence in diphtheria when antitoxin is used, and not the serum composing the menstruum in which the acid is carried. This view is taken of it today by many an old-school journal, and surely, we as homeopaths, should take fully into consideration the presence of such an element before giving approval to such a compound.

Nor is carbolic acid the only remedy that melts the diphtheritic membrane as if by magic, when carefully selected and rightly applied. *Lycopodium*, the innocent club moss of the pharmacies, in high potency, will do it in strictly homeopathic administration. This has been demonstrated too many times by too many competent prescribers to be gainsaid by any doubting Thomas.

*Lac caninum*, the despised bitch's milk, about which so many are so derisively skeptical, fairly knocks the spots out of the diphtheritic membrane and clears up the fauces like magic in suited cases. But its indications must be specific, plain and homeopathic.

Carbolic acid, *Kali bichromicum*, *Mercurius cyanuret*, *Kali permanganum*, *Lachesis*, *Psorinum*, *Phytolacca*, *Allium cepa* and a score of other proven homeopathic medicines dissolve the membrane and clear up the disease, if prescribed according to their pathogeneses, in potencies of sufficient dynamic strength to produce their effects quickly and if not so often repeated as to destroy their curative influence. What a mine of wealth homeopathy contains in this direction too few, alas, are aware of.

The homeopathic friends of antitoxin and other antipathic remedies are prone to seek refuge in the hackneyed slogan, "I use whatever cures, wherever found." But do they live up to this catchy statement? How many of them have studied with care Hahnemann's *Organon* and *Chronic Diseases* and tried to cure this violent disease by directing the remedy in potentized form against the taint, pedigree, dyscrasia or other element that made the diphtheria possible in the subject in hand? The physician who does this painstakingly is not often the one to resort to antipathic



and compounded factory-prepared therapeutic agents. He sticks to his homeopathy so faithfully that he secures results which justify the faith that in him lies.

Just why physicians and editors who adopt antipathic treatment in this, that, or the other disease, continue to proclaim themselves homeopaths and associate with homeopaths and homeopathic institutions is beyond comprehension. Association with Homeopathy carries with it the idea of being a homeopath, not an eclectic, not an antipath, nor an allopath, not a physiological prescriber, but a straight-out supporter of Hahnemann's great therapeutic law and methods and those of his early followers, who brought Homeopathy into the sunlight of science when the horizon was almost impenetrable because of the density of the blackness of prejudice, ignorance and intolerance which characterized the times in which they lived.

Those men cured diphtheria without antitoxin, with or without carbolic acid or trikesol, so can we.

They made us possible as homeopathic physicians by excelling the old school in curing, why shouldn't we be able to make still better homeopaths for the future by curing even better than the antitoxinationists of this day and generation?

It not only can be done, but it is being done. Tooker's statistics covering diphtheria in Chicago, made six or seven years ago, give a loss, even under ordinary homeopathic treatment, of but seven per cent. Whereas the very best the most ardent antitoxinationist has yet claimed for his agent is a mortality of above sixteen per cent.

Why should we, as homeopaths, let nine or ten more of our cases per hundred slip through our fingers into the hands of the undertaker than were we to use homeopathic remedies alone according to their proven indications?

This question may be asked in all seriousness of every homeopath resorting to antitoxin in diphtheria, since to justify its use they will have not only to step outside the pale of *similia similibus curantur* but they will have to set aside Homeopathy's statistics while accepting allopathic

compilations. And to do this is but to condemn their own profession as unworthy of belief and prove themselves hardly worthy of a place therein.

As a matter of fact, antitoxin has no place in Homeopathy; it is a pollution; it is a compound; it is repulsive; it has no scientific basis upon which to rest; it fails to save one-half as many as Homeopathy saves. We should be consistent and have nothing whatever to do with it.

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### A DELUSION AND A SNARE.

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There is something very taking about the phrase "I am a physician first and a homeopath afterward," but a more deluding expression was never coined in relation to therapeutics. The best physician God ever made is the homeopathic physician who is studiously and conscientiously a follower of the Hahnemannian law. This is so because this kind of a physician cures more of his patients, and cures them more surely and safely, than any other kind of a physician. To hold otherwise is to give contradiction to the testimony of more than a hundred years of successful homeopathic practice, and to justify the disbandment of the homeopathic profession upon the hypothesis that we are homeopaths only to trade upon the name, as claimed by our opponents; that we are neither scientific nor honest and that Homeopathy has no legitimate place in the professional guild.

The thought of being "a physician first and a homeopath afterwards" carries the idea that with one Homeopathy cures everything but diphtheria, with another everything but pneumonia, with another everything but typhoid fever, with another everything but anemia, with another everything but malaria, and so on down the list. If this be true then what right have we to exist as a separate school? Absolutely none whatever. And if it be true, as antitoxinationists among us would have us believe, that there is no longer any use for Homeopathy in the malignant diseases of childhood, heretofore assigned us by a kind of common con-

sent by our opponents, then surely we should throw up the sponge and join the ranks of the great unwashed in medicine, who would make practice easy by establishing a line of specifics to cover all diseases by name, and no longer herald our similia similibus curantur to be a never-changing law, co-equal in reliability and truth with the law of gravitation, chemical affinity and other proven facts in nature.

Fortunately, however, for mankind, the "physician first and homeopath afterwards" is a delusion. The man who is the best homeopath is the best friend of the sick. The best doctor is the one who is the homeopath first, last and all the time.

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### EX-PRESIDENTIAL MODESTY.

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It does not necessarily follow that because a member of the American Institute of Homeopathy has been honored by having been elected to the highest office in that body he must retire from its councils and take no further part in its deliberative and official functions, but it should follow that members who have been so highly honored should not form themselves into cliques for the further control of the policies and politics of that body.

We have several striking examples of becoming modesty in this regard which may be held up to some of the later-day presidents with justice to the Institute. Wesselhoeft has been a president, but who has seen him button-holing the members, calling and participating in caucuses, and otherwise chicaning to control elections and to reward the friends who elevated him? Likewise with Helmuth, Talcott, Kinne, McClelland, T. F. Allen, and others who still attend the Institute and take a deep interest in its welfare.

These ex-presidents have been content with taking part in the deliberative proceedings of the Institute and have not made themselves offensive politicians. They have been highly honored and have shown that they feel that the members who elected them are quite competent to decide

who they would like to have as their successors. The example is a worthy one, and it might not be amiss, without mentioning names, if a few later-come presidents, some of whom have perhaps been honored far beyond their deserts, would profit by the example and let the politics of the Institute alone for a time.

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### A MEETING WORTH ATTENDING.

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The great central thought of Homeopathy is therapeutics. *Materia medica* is the corner stone upon which our system rests secure. Without our therapeutic resources we are no better physicians than the great army of dosers composing the old school profession. Our surgeons, gynecologists, oculists, and other specialists have nothing upon which to raise the claim of superiority except their *materia medica*. And, unfortunately, not one of them in a dozen is a competent homeopathic prescriber, as Hahnemann or Hering would have had him be.

It is this that has made the International Hahnemannian Association a successful working body. Its one song is therapeutics. It weaves the homeopathic *materia medica* and its application at the bedside into every paper and every discussion to which it listens. If one of its members has had a trying case of obstetrics the question arises, "What did you do for it homeopathically?" If a surgical paper is offered the red thread of Homeopathy runs all the way through its web. If an oculist has cured some difficult case it is the Homeopathy which he has exemplified that has satisfied him. And so on all through the meetings. More good and satisfying homeopathic knowledge is obtained from one meeting of the International Hahnemannian Association than from any other medical meeting of the year, because it is a homeopathic gathering, called and perpetuated for the purpose of studying Homeopathy, consistently directed toward this end, and always offering plenty of *materia medica* and therapeutic helps.

The meeting for this year will be held in Chicago June

24th. You can take it in when returning from Cleveland. It is open to everybody who respects Homeopathy and would learn more of it. Come to it if you would be a better homeopath and if you would be refreshed by learning how Hahnemann's followers keep up the standard he set for them. The sessions promise to be unusually well-attended and delightfully instructive and entertaining; and you will be repaid a hundred fold, for you will find more genuine enthusiasm in the air than in any homeopathic society you ever attended. Side shows and excursions are not needed to keep up the interest.

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### THE TWENTIETH CENTURY FUND.

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The Twentieth Century Fund suggested by Dr. Burford in his admirable address as President of the British Homeopathic Society marks another milestone in the many earnest but not altogether successful attempts to popularize Homeopathy in Great Britain. Every decade appears to call for some similar effort in this missionary work. The last combined endeavor was the issue of the Homeopathic League Tracts, 54 in number, the entire series forming one of the most convincing arguments ever produced in the popular presentation of Homeopathy. And yet these efforts, so convincing and apparently so well directed, prove at best but a temporary assault on the almost impregnable bulwarks of English Allopathy. Here and there a few converts are made among the physicians, more by the convincing cures of the homeopaths than by the logical and statistical arguments of the tracts; for in therapeutics it is practical bedside experiment, not logic, that convinces and converts.

Now that a fund of \$50,000 is being raised for another onslaught on empiricism, "for the extension of Homeopathy," we respectfully suggest to our English colleagues a new line of action, a flank movement as it were, on the traditional establishments of Allopathy. The *Homeopathic World of March* assigns as a reason for previous failures:

There have always been two parties in the homeopathic mission field—one of them anxious by hook or by crook to convert the allopathic profession; and the other looking upon the academic mind as to all intents a hopelessly sterile soil. The Pro-allopath party among homeopaths, with truly British regard for establishments, looks on the medical establishment as something to be treated with deference and respect, and think it possible to inoculate the faculty with Homeopathy, so that it will become homeopathic unawares. The homeopathic imperialist believes that in and through homeopathy lies the only possibility of advancing medicinal therapeutics, and that the possession of this principle makes the homeopath the master of all who ignore it; that for the homeopath to court or pay deference to the allopath *qua* allopath or *qua* “established,” is nothing less than an exhibition of despicable professional snobbery. \* \* \* For our part we would rather subscribe to a mission to convert Turks into Greeks than to any fund for converting the allopathic profession. Suppose the whole faculty converted to a belief in Homeopathy—what would be the good of it? The *belief* in it would not make them able to *do* anything with it. \* \* \*

To our thinking the cardinal blot on British Homeopathy lies in this: That there is no place in the British Empire—except in far away Calcutta—where an allopath who knows that the principle of Homeopathy is true can learn how to put it into practice. To convert an allopath to a *belief* in Homeopathy is futile. To provide a school in which the practice of Homeopathy can be taught to all comers is the bounden duty of all homeopaths who have any care for the world's progress.

This, in our opinion, strikes at the root of the evil and solves the homeopathic problem in Great Britain. The London Homeopathic Hospital forms a nucleus and the \$50,000 fund now being raised will be sufficient to equip a medical college that will accommodate 100 students. Then both students and practitioners can not only be drilled in the science and art of homeopathic practice but can see it verified in clinic and hospital work.

Why is it that in all Europe there is not a medical college in which a student can receive a homeopathic education? Our enemies exultingly point to the fact that Homeopathy is dying; for even in Germany, the land of its birth, its representatives are not increasing in number and influence. At whose door is this crime to be laid if not at that of its professed but indolent friends? Can the homeopaths of Great Britain work only on the banks of the Ganges? Had the homeopaths of America worked in the same list-

less, half-hearted way we would not now have one homeopathic practitioner where we have fifty. Every homeopath in Great Britain must first have a complete knowledge of Allopathy before he can practice or even study Homeopathy; and when he begins its study he is hampered by this allopathic millstone around his neck. How would Allopathy progress were the tables reversed and every student were compelled to pass his examination in Homeopathy before he could begin the study of Allopathy? How many would ever practice Allopathy? Let our English colleagues appeal unto Cæsar and not to the R. C. P. & S., and they will soon have a college of their own and thus solve this question which, like Banquo's ghost, will not down.

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### SHADES OF HAHNEMANN!

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"To Dr. Gatchell belongs the honor of having first pointed out the homeopatheicity of antitoxin treatment.

"The prevalent theory of etiology of rheumatism is its bacteriological origin. I would like to prophesy that it will be found than salicin and its compounds do the work of the specific antitoxin developed by the system to combat the toxins of rheumatism. I understand that the action of quinine in malaria is thought to be directly upon the microscopic invader; the control that quinine has upon malarial phenomena is paralleled by that of salicin upon rheumatic phenomena."—Dr. J. P. Cobb in the *Medical Century on Rheumatism*.

And this from a candidate for the presidency of the American Institute of Homeopathy, supposed and intended to be the representative homeopathic body of the world, and a professor of *Diseases of Children* in a college bearing the name of our illustrious founder! Antitoxin for diphtheria, quinine for malaria, salicin for rheumatism! If this isn't a choice sample of unhomeopathic Homeopathy then what is it? If this is the teaching of Hahnemann College it owes it to the memory of that great and good man to forthwith change its name, and if it is a sample of the practice that college exemplifies in its children's wards what are we to expect among its adult patients?

If Hahnemann could know how his precepts and hon-

ored name are being prostituted to such unscientific, empirical and unhomeopathic teaching and practice he would surely turn in his grave in Pere Lachaise and cry out in anguish, "And did I live in vain?"

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### A NEWSPAPER VIEW OF IT.

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The Chicago Tribune of April 5th contained the following capital editorial anent the germ craze, too good to be lost to the medical profession. Its clear irony indicates that not all the public is fooled by the foolishness of the microbic extravagance:

#### WHISKERS AND GERMS.

"The scientific authorities have decided that mustaches and whiskers are favorite resorts of germs, and hence physicians should sacrifice their hirsute adornments and keep their hair cropped close, or at least wear skull caps when in attendance upon patients. The milk commission of New York has also advised milkmen to shave off their beards lest they convey germs to the milk. Probably the surgeon in the operating room, the man at the soda fountain, the waiter at the restaurant, the cook in the kitchen, and the man servant at the table, may also be brought into the same category.

"When Prof. Koch announced his germ theory and other professors caught and cultivated and identified innumerable varieties of microbes it may have been a great triumph for science, but it added a new and heavy burden to the many with which man was already afflicted. A few years ago the world was in blissful ignorance of any kind of microbe save those "small deer" which the microscope used to find in the drop of water for the amusement or the terror of children. Now the microbe is here, there, and everywhere, in all that we eat, and drink, and wear, in the air we breathe, in the smoke, and the dust, and the garbage, in the books we read, and the tools we use, and the soil we walk upon. Thus "Star-eyed Science" rapidly increases the area of human despair and makes of life an apprehensive possibility and a galling suspicion.

There can henceforth be no rest for the man who believes in the germ and its universality. A new anxiety has been added to his life and the anxiety is all the more burdensome because the object of it is unseen and he cannot tell at what instant he may be exposing himself to its insidious attack. There may be happiness in Patagonia and other remote parts of the earth where the microbe is unknown just as there used to be happiness everywhere before it was found. In the meantime, if there are microbes or germs, and if beards are germ repositories, the physicians, who are mainly responsible for them, should not hesitate to sac-



rice beards, mustaches and hair, and relieve to that extent at least the apprehensions of the community."

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THE ADVANCE has received a denial from Dr. Bartlett, editor of the *Hahnemannian Monthly*, that a boom has been started in Philadelphia for a surgeon-candidate for the Institute presidency, a denial which it welcomes with pleasure since the office this year, and for two or three to come, belongs by right to the general practitioner member.

### HERING COLLEGE COMMENCEMENT.

After one of the most successful years in its history Hering College held its tenth annual Commencement Exercises in Handel Hall, Chicago, on the night of April 10th, graduating a class of thirteen young men and women to go out in the field to sow the seed of true Hahnemannian Homeopathy.

The Exercises were interesting and varied, consisting of reports by the Dean and Registrar concerning the work of the college and its prospects for the coming year, a faculty address by Rev. E. W. Millar of the Universalist Memorial Church, vocal selectios by Miss Marian Allen, violin solos by Mrs. Robbins, piano accompaniments and solos by Miss Edith Miles, and the issuing of Diplomas to the following candidates for the Degree of Doctor of Medicine and Surgery: H. L. Aldrich, C. T. Carr, Nora V. Donahue, S. M. Evans, Valeria A. Hopkins, Maximilian Kuznik, F. R. Lindner, Frederick Podgorski, C. E. Simons, W. G. Tenley, D. E. C. Vichenoff, P. B. Wallace, W. W. Weeks. Two of the candidates were ladies. One of the gentlemen to receive the degree, Mr. Podgorski, came from Russia, and another, Mr. Vichenoff, from Salonica, Greece, to learn the true homeopathic way. The hall was well filled with the friends of the college and graduating class, the exercises proving among the most interesting which Hering has yet held. According to the reports of the Dean and Registrar the prospects are better than ever before in its history. Its junior, sophomore and freshman classes are larger than for

several years past, and to this are numerous prospective additions from all over the United States and several foreign countries which promise to swell the classes of 1902 and 1903 to larger proportions than any which have yet attended the college.

The class banquet was held in the dining-room of the Pullman Building on Michigan Avenue on the evening of April 11th, at which time a delightful social reunion and post-prandial entertainment was enjoyed. The graduating class goes out with the best benediction of the faculty and trustees of their Alma Mater, who look to them for a devoted loyalty to the Hahnemannian principle and to their college mother with confidence that the trusts which are reposed in them will be faithfully conserved.

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Zincum—Violent drawing, tearing in the middle parts of all the long bones.

Plumbum met.—Headache due to constipation.

Staphisagria—Pain of incised wounds.

Bovista—For goitre, with palpitation of the heart, vertigo, headache and shortness of breath.

Borax—Painful retention of urine when there is much dribbling, fretfulness and a dread of downward motion.

Natrum Sulphuricum—Asthma which has looseness of the bowels at each attack.

Baryta Carbonica—Diminution of the sexual desire and great weakness of the genital organs in persons addicted to excessive use of intoxicating drinks.

Argentum nit.—Left sided infraorbital neuralgia. Face swollen, with great heat and burning.

Belladonna—The child is peevish and irritable; wakeful with spells of prolonged crying.

Coffea cruda.—The child is unusually lively, restless and wakeful.

Nux Vomica—Derangement of the digestive system is the cause of the wakefulness.

Mercurius—A desire for sweet things, which makes his symptoms worse.

## NEW PUBLICATIONS.

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A Dictionary of Practical Materia Medica. By John H. Clarke, M. D. Bound in three volumes. Vol. I., 951 pages; Vol. II., bound in two parts, 1,613 pages. London: The Homeopathic Publishing Co., 12 Warwick Lane. 1902.

Vol. II., in two parts of about 800 pages each, has just been received. We have anxiously awaited its appearance, and a somewhat careful examination only confirms our first impression of the practical excellence of the Dictionary as an every day working reference-book for the office table. The large number of new remedies whose symptomatologies and clinical indications are here given is a matter of surprise and congratulation. Many homeopaths have written us asking for information about remedies mentioned in Burnett's works, what they were and where a recorded proving or a clinical history of them could be found. Here they are in Clarke's Materia Medica, and here, too, many of our writers and not a few of our teachers of Materia will find the symptoms, clinical and pathogenetic, authorities, preparations, characteristics, relations, causation, etc., etc., of many remedies to which most of us are entire strangers. And here too we find the author's view of

### THE TEST OF A HOMEOPATH.

Complaints are frequently made that the homeopathic materia medica is too vast for practical utility; that the lists of symptoms are unprofitable, if not impossible, reading. I do not think so. Indeed, I think that the test of a genuine homeopath might not unfairly be said to lie in his capacity to read through a schema with both profit and *enjoyment*—because of the possibilities it reveals of dealing with cases occurring every day in practice. Again and again in the course of my work I have come across symptoms in the schemas of remedies reminding me of cases in the past which I might have cured had I but known the remedies then. And many a time a case has turned up in my practice calling for a particular remedy at the very time I have been working upon it, and a cure has resulted, when, but for my study of the schema, I might more than likely have failed to find what was wanted. I think that the introductory sections preceding each schema will make the study of it profitable and enjoyable to some who have hitherto only found it dry. And

when we consider that the *Materia Medica* is the very *raison d'être* of the homeopathist, and that in it he must live and move and have his being, it is too much to expect of him that he shall at least give as much mind to its cultivation as is required for maintaining high proficiency, say, in billiards or in golf.

Those who have been clamoring for a condensation of our symptomatology will find in the admirable arrangement of the Dictionary just what they have been dreaming of. Here too will be found the nosodes, both animal and vegetable, and Pyrogen and Tuberculinum alone will be worth the entire cost of the work to the live and progressive homeopath, for they will enable him to cure many cases both of acute and chronic disease that now go uncured for lack of the similar remedy. Here he will find the pathogeneses of Zincum met. and Zincum aceticum, Bromatum, Cyanatum, Iodatum, Muriaticum, Oxydatum, Phosphoricum, Picricum, Sulphuricum and Valerianicum. The same with the Calcareas, the Kalis, the Iodides, the Mercurys and others. Every homeopath cannot afford to be without it for the skilled workman cannot work without tools.

**DISEASES AND THERAPEUTICS OF THE SKIN.** By J. Henry Allen, M. D., Professor of Skin and Venereal Diseases, Hering Medical College, Chicago. Philadelphia: Boericke & Tafel. Pp. 353. Cloth, \$2.00 net; by mail, \$2.12. 1902.

The first 210 pages are devoted to the consideration of diseases of the skin, their etiology, pathology, differential diagnosis, symptomatology, synonyms and definitions. These are clearly yet concisely outlined and we think are very practical. The remainder of the work is devoted to therapeutics and the treatment is homeopathic, pure and simple, devoid of the unsightly mixtures for local treatment so often found defacing the pages of professed homeopathic works on the diseases of the skin. Like Hahnemann, Hering and their followers the author maintains that diseases of the skin are but "the external manifestation of the internal essence of the disease," and that to cure the affection of the skin by local medicated applications is suppression, not cure, and is certain to manifest itself again in some more serious form, in an affection of the more vital organs.

## CURRENT NEWS-NOTES AND ITEMS.

The Kansas Homeopathic Society meets at Topeka May 6th and 7th.

The graduating exercises of Hahnemann College of Chicago will be held on April 17th.

Dr. T. C. Duncan of cardiac literature has severed his connection with Dunham College.

Dr. Nils Bergman is building up a good homeopathic practice in Joliet, Ill., his new home.

Dr. W. E. Pritchard, recently of Minnesota, has located in the City of Mexico, Espiritee Santo 1.

The Missouri Institute of Homeopathy will meet at St. Louis on the 28th, 29th and 30th of this month.

The commencement exercises of the Chicago Homeopathic College will be held in Studebaker Hall April 22d.

Dr. Charles Adams has resigned his position as professor of surgery in the Chicago Homeopathic Medical College.

Dr. E. H. Pratt will hold his seventh annual post-graduate course in official surgery during the week beginning April 28th.

The homeopaths seem to have captured Ann Arbor. Dr. Copeland is mayor of that city and Dr. Hinsdale is its health officer.

Dr. Wm. Tod Helmuth, our noted surgeon, has removed his office from 504 Fifth Avenue to 667 Madison Avenue, New York.

Dr. J. R. Haynes, the oldest member of the Indianapolis Homeopathic Medical Society, and a Hahnemann Homeopath, died last month.

The Northern Indiana and Southern Michigan Homeopathic Medical Society will meet at Elkhart, Indiana, on the afternoon of May 6th.

The American Institute of Homeopathy will hold its next annual session at Cleveland, beginning June 17th and continuing until the 21st.

The continuous performance course of Hahnemann College has not proved to be a success, and it will soon settle back to its regular winter session.

Dr. C. E. Kahlke of Hahnemann College has been elected President of the homeopathic attending staff of Cook County Hospital. A good selection.

Dr. C. M. Bebe of Denver, formerly of Chicago, has given up gynecology and surgery as a specialty and will hereafter devote himself to the throat and lungs.

Among the recent deaths in the homeopathic profession is noted that of Dr. H. C. French of San Francisco, for many years a prominent oculist and aurist.

A Philadelphia jury recently awarded a mother the sum of \$1,000 in a verdict against the physician who vaccinated her six years old child, the child dying therefrom.

Physicians intending to locate in Oregon will be glad to know that Dr. Byron W. Miller, a homeopath of Portland is secretary of the medical examining board of that state.

Dr. Sarah W. Andrews of Chicago died on February 25th, after an illness of several months. She had a large practice and was well and favorably known over a considerable section of the South side.

Dr. J. N. Downs of Ottawa, Ill., has recently been decidedly more successful in the treatment of typhoid fever by the free use of hot water baths than his old school colleagues with ice water, in the same disease.

The Critique of Denver, edited by Drs. Smythe and Anderson, which recently donned a new and attractive cover, contains more homeopathic jottings from month to month than any other Western journal.

Patrons of the Boericke & Tafel pharmacy in Chicago are glad to welcome the former manager, Dr. M. R. French, to his old post. For the last year or two he has had charge of the Pittsburg house of that well-known firm.

Dr. Menninger, Topeka, Kansas, reports a good opening at Newton, in that state, a thriving railroad town of several thousand people, on the line of the Santa Fe. Some good homeopath should take advantage of this excellent opportunity.

Dr. J. M. Selfridge of Oakland, Cal., celebrated the fiftieth anniversary of his graduation of medicine last month, at which time he was honored by his colleagues with a banquet at the Fabiola Hospital commemorative of the occasion.

His numerous friends in Chicago and throughout the United States will be glad to learn that Prof. Hawkes, formerly of this city, but now of Los Angeles, is the happy father of a five months' heir. The Doctor is very happy in the arrival of this, his first son.

Do not forget the date of the meeting in Chicago of the International Hahnemannian Association, which convenes at the delightful Chicago Beach Hotel on June 24th. During the session a reunion of Hering College Alumni is to take place, and it is expected that an enjoyable evening will be spent by the Association at the college.

Dr. H. C. Aldrich, Registrar of the American Institute, has recently greatly improved the Minneapolis Homeopathic Magazine. Now let our Minnesota friends follow suit and greatly improve the status of their college and Homeopathy in that state will prosper.

Dr. I. D. Foullon, formerly editor of various St. Louis homeopathic medical journals, died in February after a short illness at his home in East St. Louis. Dr. Foullon was a ready writer, after the Frank Kraft class, and was for many years connected with the St. Louis Homeopathic College. //

Governor La Follete of Wisconsin has exhibited unusual good sense and judgment in vetoing the compulsory vaccination bill passed by the legislature of that state at its last session, giving as his reasons for so doing that such a law is repugnant to many good people, and that existing conditions do not seem to demand it.

The strict Hahnemannian has a justifiable abhorrence to "auxillaries" because unnecessary with his wonderful potencies, and for the reason that they are often harmful. He does not, however, object to a splint for the fractured limb, corrective lenses in abnormal vision, or Perfection Liquid Food with an inert digestion.

Dr. Christian Fenger, the ablest and best known surgeon of the allopathic profession of Chicago, died on the 7th of March in the full vigor of his manhood from acute pneumonia. Dr. Fenger was one of those earnest, faithful men whose work will live after him. There was nothing of bombast or pretense in his make-up. He was beloved of all men who knew him.

The next annual meeting of the Illinois Homeopathic Medical Society will be held in the auditorium of the Masonic Temple on May 13th, 14th and 15th, under the presidency of Dr. E. H. Pratt. On the evening of the 14th a banquet will be given by the physicians of Chicago to the visiting members at the Auditorium Hotel, Dr. Cobb presiding as toast master. The meeting promises to be one of the best the society has yet held.

**WORTH A YEAR'S SUBSCRIPTION.**—Dr. Leonard Luton of St. Thomas, Ontario, under date of March 31st, 1902, writes the *ADVANCE*: "The article by E. B. Nash in the January number is a good one, and the 'New Versus the Old Materia Medica' by Dr. Morgan is alone worth a year's subscription." The *ADVANCE* is receiving a good many commendations along this line lately and challenges comparison with any or all of its cotemporaries in relation to the helpfulness of articles and data with which it is supplying its readers.

## HAHNEMANNIAN DIRECTORY.

For the convenience of readers who desire to recommend their patients to Hahnemannian physicians we publish a list of those who to the best of our knowledge, use the single remedy. We ask assistance in correcting, extending and perfecting this list in order to make it more useful. These cards, including subscription, \$3.00 per year, but names of all Hahnemannians will be retained in the Directory whether subscribers or not.

### Arkansas.

**Eureka Springs,**  
Ellis, C. F.  
**Hot Springs,**  
Biggs, E. L.  
Halman, H. V.

### Alabama.

**Normal,**  
Ford, Justina.

### California.

**Los Angeles,**  
Glidden, J. I. Mackay, Henne Bldg.  
Hawkes, W. J., 620 Laughlin bldg.  
Waddell, W. E., 431 Douglas Bldg.  
**Marysville,**  
Tapley, J. F.  
**San Francisco,**  
Martin, Geo. H., 606 Sutter St.  
Martin, Eleanor F., 606 Sutter St.  
McNeil, A., 611 Van Ness Ave.  
Selfridge, C. M., 400½ Haight St.  
Ledyard, W. E., Oakland.  
Underwood, Maro F., 21 Powell St.

**San Luis Obispo,**  
Winslow, T. Hartley.

**Santa Barbara,**  
Crooks, E. W.  
Stambach, Henry L.

**Summerland,**  
Balch, E. T.,

**Woodland,**  
Martin, J. T.

### Canada.

**Hamilton,**  
Wickens, A. E.

**Ottawa,**  
McLaren, D. C., 133 Maria St.  
Quackenbush, Arnley, 131 Main St.

### Toronto,

Adams, E. T.  
Hardy, E. A. P., 605 Spadina Ave.  
Hearn, Robert.  
Jones, D. Ogden.  
Tyrell, J. D., 589 Sherbourne Ave.  
Colorado.

### Denver,

Shannon, Sam'l F., Jacobson Bldg.

### Victor,

Lane, Frances Margaret.

### Connecticut.

### Bridgeport,

Gregory, Edward P., LaFayette St.

### Hartford,

Case, Erastus E., 902 Main St.

### Middletown,

Griffin, Louise A., 198 College St.

### Milford,

Nahm, Ida M., Laurel Beach.

### New Haven,

Goodrich, Mrs. La Rendell, 93  
Lake Place.

### Torrington,

Pulver, Grace C.

### Waterbury,

Morgan, A. R., 50 Leavenworth St.

### District of Columbia.

### Washington,

Custis, J. B. Gregg, 912 15th St.  
Riggs, D. H., 1410-11th St.

### England.

### London,

Berridge, E. W., 48 Sussex  
Gardens. (W.)

Clarke, John H., 30 Clarges St.

Heath, Alfred, 114 Ebury St.

Lewin, Octavia, 25 Wimpole St.

Skinner, Thomas, 25 Somerset St.

Thornett, A. Marian, 25 Wimpole.







GEORGE ROYAL, M. D.

# THE MEDICAL ADVANCE

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## APIS MELLIFICA, WITH COMPARISONS.

BY SAMUEL F. SHANNON, M. D. Denver, Col.

There are two preparations of this poison. In one the whole bee is used and in the other only the poison of the insect is made use of, but all authors agree that the only preparation that should be used is that made from the poison.

We all undoubtedly know the effect produced by the sting of the bee: the part swells rapidly, becomes more or less hot and red; with a tense pain and often burning. Also we see intense œdema of the part. Apis stands between Belladonna and Rhus; the first having more intense cutaneous inflammation and the latter has more vesicular tendency, but Apis is the paramount remedy for œdema, symptoms corresponding.

Among the mental symptoms we find great fear that they are going to die but there is no fear of death.

The patient is usually of an irritable disposition; there is jealousy, nervousness, fidgetyness, violence almost amounting to frenzy; absent-mindedness; patient is always very busy, restless, changing the kind of work frequently; awkwardness; breaks things; lets everything fall out of her hands.

The headaches are as follows: the brain feels *tired or as if it had gone to sleep* (this symptom is one of the characteristic symptoms of Apis); dull, heavy tensive pain over

the eyes extending over the vertex down to the occiput, with pain through the orbits; photophobia; the lids move with difficulty; the pupils are contracted; violent drawing in the back of the head spreading over the left half of the head; burning and throbbing in the head, worse from motion and stooping; better from pressing the head firmly with the hands; integuments of the head and face feel stiff; œdema about the eyes; headache with vertigo affecting the forehead, temples and eyes; with nausea and vomiting; worse in a warm room and when lying down; urticaria; great desire to sleep, suppressed urine in children; periodical headaches.

We find the remedy very useful for hydrocephalus and hydrocephaloid when the disease results from some repercussed eruption. It is useful in the first stage of the disease; the child bores its head backwards into the pillow or rolls it from side to side; rouses from sleep and utters a shrill, piercing cry due to pain and pressure; is sleepy but cannot sleep; there is great restlessness at night; there is squinting, grating of the teeth, trembling of the limbs; one half of the body twitches while the other side is paralyzed; the patient gives no evidence of sight when a light is thrust before the eyes; when water is placed in its mouth no effort is made to swallow it; the pulse is irregular; the tongue is dry and blistered; there is an exquisite soreness of the abdomen; olive-green, slimy, profuse stools full of bright red spots like chopped beets: colic and tenesmus; small stools smelling brassy; copious sweat on the forehead of a musk-like odor, the urine is scanty, milky looking or profuse; occasionally we find red streaks or crimson spots on the face or different parts of the body.

The similar remedies are Belladonna, Bryonia, Cuprum, Glonoinum, Helleborus, Arsenicum, Rhus, Sulphur and Zincum.

Belladonna has throbbing of the carotids; more violent congestions; injected red eyes; drowsiness broken by starts and frightened out-cries; there is no œdema, which we find so prominently under Apis, nor do we have the shrill,

piercing outcries so characteristic of Apis. Belladonna is decreasingly indicated as the symptoms of effusion increase and Apis just the reverse.

Helleborus has more mental torpor, with want of reaction; the forehead is wrinkled, the pupils are dilated, and the lower jaw tends to drop; the sopor is complete; there are *automatic motions of one arm and one leg*; the forehead is bathed in a profuse sweat which is cold; complete sensorial apathy; *the nostrils are dark and sooty*; slow pulse, no response to touch or pressure. Bryonia may be called for in cases arising from suppressed eruptions. The sensorium is benumbed though not so perverted as under Apis or Helleborus. There is a *constant chewing motion of the jaws*, the face is dark red; the lips are dry and parched; when offered a drink the child takes it impatiently and hastily; screams with pain if moved, even the slightest.

Cuprum has more convulsive symptoms than the other remedies. It has loud screaming followed by violent convulsions; the thumbs are clenched and the face is pale, the lips being blue; the eyeballs rotate constantly.

Glonoinum has the cephalic cry; *a sensation as if the head was enormously expanded*; spasmodic vomiting of cerebral origin; wants to keep the head perfectly quiet; the face is alternately flushed and pale.

The Zincum child awakens with fear; rolls the head; cries out and starts in sleep; constant fidgety motion of the feet; especially useful for children who are too weak to develop an eruption.

Rhus, which by the way is inimical to Apis, has more physical restlessness than Apis, the latter having more fidgetyness. The eruption of Rhus is darker, but Rhus has not near so much oedema as we have under Apis.

Arsenicum has great depression of the vital forces. This is manifested by great prostration. There is emaciation, pallor, thirst; sometimes the child strikes its head with great force as if to give temporary relief.

#### APIS IN DIPHTHERIA.

Apis when indicated in diphtheria and other throat troub-

les presents the following: it is in the first stage or may be given as a preventive; there is great debility and prostration from the very start; a suspicious absence of heat, not much fever; the pulse is rapid but not strong; diphtheria which progresses insidiously; there is but a small amount of pain attendant upon the intense and extensive inflammation; the tonsils, more often the right than the left, are studded with deep, gray, angry looking ulcers which exude a scanty, putrid discharge.

The throat is sore and tender on swallowing; pains extend to the ears on admitting air; œdema of the throat, uvula œdematous and elongated; the membrane is of a dirty gray color.

Cold water relieves the itching and stinging.

The diphtheritic patches appear first on the arches of the palate over the uvula; the breathing is difficult from œdema glottidis; the breath may be fetid or not; thirstlessness; painful and scanty urination, voided in drops with burning; perspiration frequently breaks out and dries up; heat is unpleasant; oversensitiveness of the skin to touch; tendency to heart failure; diphtheritic croup with rough, hoarse voice and sensation of rapid œdematous swelling of the air passages; speaking is painful; sensation of suffocation; high fever; numbness or even paralysis of the throat or lower extremities (Mercurius cyan. follows Apis well).

Arsenicum is also somewhat similar to Apis in diphtheria. It presents the following symptoms: the membrane is dry looking and wrinkled, covering the entire fauces; ulcers extend from the throat to the roof of the mouth; the tongue is coated white; cervical glands are swollen; there is a thin excoriating discharge from the nose; a sensation as if a hair had lodged in the throat; great fetor from the diphtheritic deposits; oozing of blood from under the thick elevated portions of the membrane; sleep is broken by starts; crying out, jerking of the limbs; great weakness and prostration; great restlessness and anxiety; patient wants to change position frequently although his debility is very great; patient, if a child, wants to be carried from

one room to another, cannot bear to be alone. There is either constipation, or diarrhoea of a watery exhausting character, often offensive; the urine is fetid or scanty and burning; the pulse is rapid and weak; thirst for small quantities at frequent intervals; patient is always < after midnight, is > from warmth and from warm drinks; paralysis after diphtheria; albuminuria.

Natrum arsenicosum is one of the similar remedies. There is not much pain despite the dark purplish color of the throat, the great swelling and prostration. The uvula hangs down like a sac of water; the fauces and pharynx look red and glassy; the throat is sore and painful on empty swallowing but there is no soreness on swallowing food or drink; there is a tough, yellowish mucus in the posterior nares and upper part of the pharynx, with considerable hawking to clear the throat; the neck feels stiff and sore; there is troubled sleep; cold, clammy sweat; heart is oppressed from the least exertion; the pulse is irregular. variable and slower than usual.

Kali permanganicum: odor of the breath is unbearable the whole throat is covered with black, foul exudation; the submucous tissue is dark and dry; face is purple; throat is swollen inside and out; there is a thin, sanious discharge from the nose which excoriates the upper lip; fluids taken into the mouth return through the nose; great dyspnoea; general and excessive prostration; dark colored, offensive diarrhoea.

Remember there are but few remedies that have œdema of the throat in diphtheria and that none have it as prominently as Apis.

Apis has a sensation on swallowing as if there was a fish bone in the throat, similar to *Æsculus hipp.*, *Argentum nit.*, *Hepar*, and *Nitric acid*.

#### APIS IN DIARRHŒA.

Apis has a diarrhoea of a perfectly painless nature (*Podophyllum*). These attacks are usually worse in the morning; the stools are greenish, yellow, watery, mucus, profuse, *full of bright red lumps* (with drowsiness, prostration

and no thirst); stools may be involuntary, pouring or *oozing* from the half open anus on any movement of the trunk; chronic diarrhœa of a bilious or erysipelatous nature with increasing prostration and smarting of the anus; diarrhœa during typhoid or scarlatina; or from the debilitating influence of prolonged heat.

Podophyllum also has diarrhœa during the early morning hours; tendency to rawness, and soreness of the abdomen; watery stools with meal-like sediment; yellow, pasty, black, mucus and blood-streaked stools; involuntary while being washed, during sleep, or while passing flatus; stools followed by a sensation of great weakness in the abdomen but especially in the rectum; almost invariably painless and during stool prolapsus of the rectum.

Bryonia, Natrum sulph. and Sulphur all have early morning diarrhœa but Bryonia has no movement until the patient begins moving about in the morning. Natrum sulph. has morning diarrhœa on first rising and standing on the feet.

#### URINARY SYMPTOMS.

Among the urinary symptoms calling for Apis we have burning in the urethra *before, during, and after* micturition; a disagreeable sensation in the bladder with a bearing-down in the region of the sphincter, and frequent desire to urinate; incontinence of urine with great irritation of the parts worse at night and on coughing; almost incessant desire to pass water; may be high colored or straw colored with brick dust sediment.

For Bright's disease we should use Apis for the secondary stage, when there is a genuine catarrh of the urinary canaliculi; the dropsy may be general but is usually worse on the eyelids and the upper portion of the body, with thirstlessness and absence of sweat; anasarca with shining white skin; ascites with great soreness and sensitiveness of the abdominal muscles; cerebral œdema; pericardial effusion; œdema of the lungs with great dyspnœa and suffocative constriction about the throat; pains in the renal region; soreness on pressure and on stooping; the



urine is suppressed, or scanty, high colored, fetid, and contains albumen, blood corpuscles, tube casts and epithelium. There is great debility, no anguish nor fear of death characteristic of Arsenicum. Albuminuria after scarlet fever or diphtheria.

#### UTERINE AND OVARIAN AFFECTIONS.

Apis is useful for many uterine and ovarian troubles. We find in every work on *Materia Medica* that this remedy should never be given in a low potency to a pregnant woman as it is liable to produce a miscarriage. We may use Apis for amenorrhœa with congestion to the head as a result; with bearing-down in the uterine region without the appearance of the menses, especially in young girls at puberty when they are hysterical and awkward with flushing of the face.

Again we may use it for ovaritis when there is a stinging in the ovaries after intercourse; burning-stinging as after a bee sting; sharp, stinging, periodic pains in the ovaries especially in the *right*; numbness in the side and limb; cutting in the left and again in the right ovary, < at intervals, extending down the thigh, < while stretching; tightness in the ovarian region on raising the arms; pain in the right ovary with pain in the left pectoral region, and cough; lancinating pains in the ovarian region and groins extending down the thighs, < on the right side and during the menses; numbness and dullness beginning in the right ovarian region and extending to the hip and ribs and down the whole thigh; < when lying on it; strained pain in the left ovarian region < when walking in the evening, followed by bearing-down pains in the right side, and lame feeling in the shoulder blades. *When walking she is compelled to bend forward* (Arnica). The ovary is enlarged, swollen, indurated. Ovarian cyst as large as the head. Ovarian dropsy with unusually white and transparent fluid. Pains are < from touch and from heat (*Lilium tig.* pains are > from rubbing with a warm hand); by lying on the right side; ovarian dropsy and anasarca.

“Mel cum sale”, or a preparaton of honey with salt, is

sometimes useful for uterine or ovarian troubles, the special guiding symptom is a *feeling of soreness across the abdomen from ilium to ilium.*

Apis has menses too profuse or too scanty; *metrorrhagia with red spots which sting like bee stings*; irregular menses lasting but a day or two, accompanied by weakness; copious or lumpy menses with great pain in the spleen continuing after menses cease and interfering with walking, talking and laughing; flow may be delayed or suppressed; sensation as if the flow was coming on but it fails to do so; much pain in the right ovarian region before and during the menses or when suppressed. Micturition is painful; scanty urine is dark. Great tenderness over the uterine region with bearing-down pains; sharp plunging or stabbing pains in the uterus or in the head, sometimes followed by convulsions at every menstrual period. Patient feels tolerably well between the periods. Deep seated tenderness; stinging and frequent micturition during the menses. Pale, waxy skin.

#### THE COUGH OF APIS.

Next we take up the coughs of Apis. The irritation to cough is in the supra-sternal fossa; cough with a ringing sound from affection in the upper part of the bronchii; irritating cough easily produced by even the slightest pressure on the larynx; cough which loosens with difficulty, rouses from sleep before midnight and ceases as soon as the least particle of mucus is loosened but the patient is obliged to swallow it; cough especially < after lying down, or sleeping; cough with painful concussion of the head and shaking of the chest, and inability to retain the urine. The patient is fidgety and irritable. There is either no expectoration or the mucus has a sweetish taste or may be tasteless. Dyspnoea from the œdematous swelling of the mucous membrane of the larynx. A characteristic symptom found with all the Apis coughs is the fear of the patient that he will be unable to get another breath.

Similar remedies are Carbo veg., Lachesis, Rumex, Belladonna, Chamomilla, Crotalus, Nux vomica, Bryonia,

*Ignatia*, *Arsenicum*, *Hyoscyamus*. *Rumex* has cough from tickling in the supra-sternal fossa, > by cool air or by anything that increases the frequency of respiration.

*Chamomilla* differs mentally from *Apis*.

*Bryonia* pains are sharp, < from inspiration or motion: *cough frequently arises from a tickling in the pit of the stomach*. *Ignatia* has a cough more of a nervous nature; *the more the patient coughs the more he has to cough*.

*Arsenicum* has a burning-tickling in the fossa, and is really a concomitant of *Apis*, but there is greater restlessness, mental anguish, and fear of death.

*Belladonna* can be distinguished from *Apis* by the absence of œdema, and by the flushed face, throbbing carotids, headache, etc.

#### APIS AND KINDRED REMEDIES IN TYPHOID.

For typhoid conditions we should use *Apis* when there is muttering delirium; tongue trembles so he can hardly protrude it; it is cracked or ulcerated; muscles of the body are so relaxed that he slides down in bed; the patient is nervous, restless and fidgety; sleepy but cannot sleep; finally a stupor arises as deep as that of *Opium*, but there is a happy, strange expression of the face during even muttering delirium; great soreness and bloatedness of the abdomen; head and whole surface of the body hot and dry; skin is burning hot in some places and unnaturally cool in others, is generally dry or there is only a transient sweat; bruised, sore feeling of the skin; the face is puffed and dark red; the lips are dry and covered with a brown crust; the tongue feels as if wooden, is studded around the edges with blisters and catches on the teeth; prickling sensation in the tongue and fauces; a very tenacious mucus in the throat; anorexia but much thirst; considerable swelling of the spleen but the abdomen is sunken; on pressure over the ileo-cœcal region gurgling as from fluid; great soreness and bloatedness of the abdomen so that the walls become tense; watery, foul smelling diarrhœa or constipation; incontinence of urine; moist cough but can raise the sputum only to the tongue, whence it must be wiped away. The

pulse is weak, full and soft. Roseola is well developed.

Muriatic acid has continued delirium which keeps the patient from sleeping; he is constantly occupied with changing pictures of the past and present; the activity of the senses is increased; the eyes shrink from light; the ears are sensitive to noise; smell and taste are very acute; the eyes are full of lustre, the pupils contracted; circumscribed redness of the cheeks; the nose, lips and tongue are dry; tongue may be slightly coated or not coated at all. There is but little affection of the intestinal canal. The urine is clear, reaction acid. He can hardly pass flatus without urinating at the same time. The heart beat and pulse are very frequent, irritable without energy. Respiration is accelerated. Skin is mostly dry, with increased temperature. Muscular power is not much diminished; later on there is excessive prostration from muscular paresis. Headache as if the brain was bruised. Constant sliding down in bed, with groaning and muttering during sleep; muttering and unconsciousness while awake. Putridity, aphthæ putrid, small and deep. Dryness of the mouth and tongue. Tongue is heavy, paralyzed. Patient cannot move the tongue at will even when conscious. Pulse intermits every third beat. Profuse discharge of watery urine. Watery, dark, offensive diarrhoea. Involuntary urine and feces. Turning up the whites of the eyes; depression of the lower jaw; paralysis of the tongue and of the anus; bleeding of the anus. The thought or even the sight of meat is distasteful.

This remedy is the one most similar to Apis in typhoid.

Apis is indicated in Scarlatina when the rash is of a miliary nature; little or no fever; eruption is interspersed with miliary rash. The body is hot in some places and cool in others. The rash is deep red in color, with itching and burning of the skin. There is heat of the feet and hands although the patient complains of chilliness. The child is drowsy and sleeps most of the time or else is sleepy but cannot sleep. Is fidgety and restless, or peevish and irritable. The tongue is dry, deep red, swollen and inflamed, often covered with blisters. There is inability to swallow.

Dryness of the mouth without thirst. Diphtheritic patches on the tonsils. Outside throat is engorged, with erysipelatous blush on it. Puffiness of the throat and œdema of the uvula. Bad cases of repercussed eruption. Sweat breaks out and dries up again, with irritation of the meninges. Muttering delirium. Great and early prostration and sudden shrill screams, with rolling of the head on the pillow. Nausea and vomiting with soreness of the abdomen to touch. The nose is stopped up and dry. Post-scarlatinal dropsy when there is suppression of the urine or the urine is scanty, dark red from decomposed blood and contains epithelium and casts. Anasarca with thirstlessness. Pale waxen skin. Typhoid scarlet fever.

#### APIS IN SCARLET FEVER.

Belladonna is somewhat similar to Apis in scarlet fever but is only suitable to the smooth or Sydenham variety. The eruption is perfectly smooth and is of a bright scarlet hue. There is more active delirium; when aroused from sleep the child is afraid and strikes at those around it; the eyeballs are red, there is a wild look to the eyes; redness of the face; throbbing of the carotids; head is hotter than other parts of the body; the lips and mouth are very red, there is violent tonsillitis and angina with twitching pains and spasmodic contractions. Inability to drink. Fluids return through the nose. Violent thirst with or without dread of water. Again in cases where the rash fails to come out and the child becomes pale or livid, rolls the head into pillow, moans, whimpers, screams, jumps out of bed and wants to walk in sleep. The pulse is small and accelerated.

Rhus has miliary form of scarlet fever; vesicular eruption like millet seeds which itches violently; child grows drowsy and restless; the fauces are dard red and œdematous; the cervical glands and left parotid are enlarged; cellular tissue about the neck is inflamed, with dark red or bluish erysipelatous hue; there is a mild delirium with desire to move about; the patient constantly wants to move from one side to the other, is continuously restless; the eruption does not come out fully and what does come out is

of a dark color; drowsiness with restlessness; ichorous, acrid discharge from the nose, and epistaxis at night; rheumatism of the joints worse while at rest; swelling and suppuration of the parotids; swelling of the glands and lymphatics in any part of the body; desquamation.

#### APIS IN DROPSICAL AFFECTIONS.

When Apis is the remedy for dropsy there is a waxy hue to the skin; the urine is scanty, dark and highly albuminous, containing tube casts; swelling about the eyelids either above or below; there is an eruption here and there resembling nettle rash; red pimples or an erysipelatous rosy appearance of the anasarcaous limbs; absence of thirst or else a desire to moisten the dry fauces and throat; stinging-burning pain in various parts of the body; dropsy of cardiac origin; feet are œdematous especially after walking; feeling of dyspnoea with mental anguish, as if he could not draw another breath and as if he were going to die; dropsy of the chest with dyspnoea and great restlessness; ascites with great soreness of the abdominal walls; cannot get breath except when sitting up, even leaning backward causes suffocative feeling; complications with scarlatina; with uterine tumors and inflammatory processes of the bowels; dropsy of renal origin; anguish of mind without fear of death.

Among the remedies similar to Apis for dropsical conditions we find that Apocynum has dropsies especially, from heart disease; bewilderment and heaviness of the head; drowsiness and debility; disturbed, restless sleep; all the functions are sluggish; the pulse is slow; there is constipation; the kidneys are torpid or the urine is copious or nearly involuntary from relaxed sphincters; sense of oppression in the epigastrium and chest, must inspire frequently and deeply; flutterings of the heart; dartings and weak feelings in the chest; sinking, gone feeling at the pit of the stomach; irritable condition of the stomach which cannot retain even a sip of water or the smallest quantity of food; muddy urine; diarrhoea; bloated face while lying down but passing off on assuming an upright position; hydrothorax with inability to speak; catching of breath; suppression of urine;

great thirst; post-scarlatinal dropsy or in convalescence from severe zymotic diseases; hydropericarditis with great dyspnoea; wheezing breathing; heart's action scarcely perceptible; face is bloated and anxious looking; small, weak pulse; finger nails are bluish; cannot lie down, must be supported in a sitting posture; the lower limbs, pudenda, and abdomen are swollen. Sometimes the better results are obtained from a decoction of this medicine than from the alcoholic solution, and when we obtain a good effect the usually dry skin will become moist before the urine becomes more profuse.

Arsenicum is another remedy somewhat similar to Apis, but eating or drinking causes vomiting; there is œdema of the lower extremities; the face and, at times, the whole skin looks pale; or may be sallow or greenish; there is great debility and prostration; faint feeling from even the slightest motion; dyspnoea with great anxiety and restlessness, worse when the patient tries to lie down, also in the evening and arousing him at night; > by expectoration of mucus; the tongue is dry but the patient can only take sips of water; rapid respiration; the skin is cool but there is burning heat of the inside.

Acetic acid has pale, waxen skin; great thirst; gastric symptoms prevail; anasarca; sour belching; waterbrash and diarrhoea; great emaciation; ascites; the abdomen and limbs are swollen.

Bryonia has anasarca and œdema of the feet; the swelling increases during the day but diminishes at night; hydrothorax; pain in the side; cough with contraction of the diaphragm; splitting pain in the head excited by motion; retarded stool and frequent desire to pass water but only a few drops pass at a time. Ascites, when there is congestion of the head; giddiness after stooping; loss of breath on the least motion; the lower eyelids are œdematous (here like Apis and Phosphorus). The lips are bluish; great thirst for large quantities at prolonged intervals; scanty urine; obstinate constipation; after scarlet fever.

Digitalis has dropsy from cardiac debility, irregularly

acting and weak heart; suffocating, constricting feeling as if the internal parts had grown together; sinking and faintness at the pit of the stomach; feeling as if life were becoming extinct; cyanotic symptoms; doughy swelling which yields readily to the pressure of the finger; pale face; bluish hue under a pale skin; constant urging to urinate with scanty discharge; scarlatinal nephritis after desquamation, with anasarca of the lungs; infiltration of the cellular tissue of the scrotum and penis.

Asparagus is useful for fat people with heart disease; weak action of the heart; when urinating the last drops constricting pain in the cardiac region, patient turns blue in the face, the urine has an unpleasant odor. Must sit up in bed to relieve the dyspnoea. Hydrothorax in old age, with gouty symptoms.

#### APIS IN INTERMITTANT FEVER.

Apis, in intermittent fever, the chill comes on at three P. M.; begins in the front of the chest or in the knees; there is oppression and a feeling as if the chest were too full. The chill is followed by burning heat of the whole body with increase of oppression in the chest. There is never any thirst during the sweat; the feet are swollen and œdematous; the skin is sallow or waxen; the urine is scanty, and urticaria is usually present.

Natrum mur. is complementary to Apis and is the most similar remedy in fever, the difference between the remedies being in the time of the appearance of the chill; that of Apis occurring at three in the afternoon while the Natrum chill comes on at ten A. M.

The indications calling for Apis in heart troubles are cardiac inflammations and dropsy; sudden lancinating, darting, or stinging pains just below the heart extending diagonally towards the right chest; great feeling of suffocation, he feels as if he should smother for want of breath; œdema or sudden mucous swelling, dyspnoea, sudden fidgety restlessness and anxiety; blowing sound with the diastole; the chest feels as if beaten or bruised; every contraction of the heart shakes the whole body. Patient is restless but ob



tains relief in no position; distress lasting (in paroxysms) an hour or so usually occurring in the morning; great prostration; insufficiency of the mitral valves: eccentric hypertrophy of the heart; the pulse is irregular, not strong, intermits every third or fourth beat. Anæmic aspect. Absence of thirst but scanty urination. Heart failure, as in diphtheria. Interrupted and feeble breathing. Pale face. Prostration, during which he lies stretched out. Filiform pulse. *The pulse under the finger feels like shot gliding along.*

Lastly we find a few skin symptoms calling for this remedy. It is useful for urticaria when the swellings are hard, red, somewhat conical, occurring usually on the lower extremities below the knees, sometimes on the arms, but rarely on other parts of the body. There are heat, redness, and extreme soreness. Burning, smarting, stinging pains. Dyspnoea with the nettle rash, or the result of cold, or during intermittent fever.

Uterine catarrh. More useful in acute than in chronic cases. Worse from heat and covering. To somewhat sum up the remedy we have awkwardness, fidgetiness, usually thirstlessness, scanty urination; diphtheria, when the membrane appears first on the back part of the throat above the uvula; that with the throat and almost all other troubles for which it is indicated there is œdema, usually of the affected parts. Remember also the stinging, burning pains which are so characteristic of the remedy.

Rhus is inimical; Natrum muriaticum is complementary.

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The Chicago Homeopathic Medical College held a very successful commencement at Studebaker Hall on the afternoon of April 22d, the doctorate address, one of the best ever delivered at one of these commencements, a most scholarly production, being delivered by Prof. Streeter. The graduating class numbered . The highest class standing was attained by a lady student, a rather significant fact since this is the first time for more than twenty years that Chicago Homeopathic College has admitted women to its classes.

## PARTICULARIZATION IN TYPHOID.

BY CHARLES E. FISHER, M. D., Chicago.

Homeopathy possesses a decided advantage over any other form of medical practice in the treatment of typhoid fever in its power to specialize, particularize and individualize its cases in the selection of remedies and their application at the bedside, a factor which should be accounted a strong one in this day of specialization in other departments of medical and surgical science and art.

Typhoid fever is measured in its invasion, deliberate in developing, never hurries in its earlier weeks and takes plenty of time to exhibit its scope and force. Therefore it offers plenty of time for the consideration of remedies with which to combat it, and never demands a "rush" treatment at the beginning.

On the other hand, many a patient is sacrificed to undue haste in selecting the initial prescription. There is absolutely no use nor excuse for hit-or-miss medication. In every case there is ample time for careful deliberation, close watching of the symptoms and the most painstaking care in the choice of the similitum.

Routinism in typhoid is little short of criminal. There might have been some excuse for the pioneer homeopaths of the West when they gave Bryonia and Rhus to almost every case, prior to the introduction of Baptisia. Their knowledge of homeopathy was limited and they did the best they could. But this is no excuse for us. Nor is it enough to know that they succeeded better than the old school of their time. We must succeed better than the old school in ours, and he has improved over his fellow of other days. No longer can the alternationist or compound homeopath of the present generation lay claim to being a more scientific prescriber than his allopathic colleague. In fact, some of the polypharmaceutical compounds that some so-called homeopaths dispense would put the worst prescription an allo-

path can write to shame. The careless homeopath, the routinist, the alternationist, the mixer, the man who would be "a physician first and a homeopath" afterwards, fails to cure as large a per cent of his cases as if he stuck to his law, selected the *similimum* carefully in each case, and applied it according to the teachings of Hahnemann. Of this truth eighteen years of medical editorship and thirty years of observation in practice have convinced me beyond the peradventure of doubt.

Never hurry in beginning the treatment of a case of typhoid. No injustice is done the patient by giving him a placebo upon the occasion of the first visit and thinking his case over before selecting the remedy. Haphazard prescribing has no rightful place in the initial stage of the battle. Rarely if ever should an acute medicine be given as the first prescription; almost always is it better to begin with the patient's deep-acting constitutional *similimum*. Upon seeing for the first time a case presenting the least suspicion of being typhoid the slogan ought to be,

' MAKE HASTE SLOWLY.'

No matter how sharp the fever, how severe the headache, how tender the epigastrium, how profound the languor, how defined the prostration, if not absolutely clear on the constitutional remedy give a placebo and wait.

#### CONSTITUTIONAL PARTICULARIZATION.

Foster, of Chicago, holds that typhoid fever is a purifying disease, in defense of this theory citing the fact that the subject is generally in better health after than before an attack. He thinks the seizure eliminates some element that has been a menace to the individual's health, and that in this process he is bettered by his sickness.

Allen, also of Chicago, in his new work on *The Therapeutics of Fevers*, assumes that the typhoid is but a volcanic outbreak of a constitutional miasm which has been lying dormant within the patient, and that by prescribing upon this basis, according to the symptom-manifestations, the best results are secured. This is Hahnemann's suggestion, and it has been found to work well in practice. Certain is

it that typhoid fever varies greatly in severity and course in different subjects, and that in those possessed of constitutional taints it burns like a prairie fire.

Nor is it required that the subject should be delicate for the fire to rage consumingly. Youths and young men and women of apparently robust vigor are frequent sufferers. But just as not all that glitters is pure gold so not all who seem robust are free from miasms of one kind or another. They are robust in appearance in spite of their defects, but let typhoid fever invade their systems and away they go in a furious conflagration of temperature, delirium, etc.

Odd as it may seem to those who have not given it a thought such remedies as Sulphur, Calcareo, Kali carbonicum, Psorinum, Phosphorus, Iodine, Tuberculinum, Lycopodium and other anti-psorics are the best with which to begin the treatment of typhoid. Hahnemann did not have the microscope and bacteriological laboratory to aid him in diagnosis and pathology, or there might have been no measuring his capabilities. He possessed a wonderfully clear insight into the ailments of mankind in his day. He looked right through them, as it were, and gave us the best knowledge the profession has yet had of disease-pedigree and constitutional miasms. And in his deep-acting, anti-psoric, constitutional remedies he left us a heritage which has proven by all means to be the best for treatment of profound conditions which has yet been developed.

Whether we accept Hahnemann's psora theory or not there are taints which are neither syphilitic, tuberculous nor gonorrhoeal, neither cancerous, eczematous nor psoriasis, for which there is no treatment except the homeopathic similitum. Take the offspring of a family which in successive generations has suffered from tuberculosis, syphilis, gonorrhoea, cancer, eczema, vaccinosis or any one or more of a dozen other ailments, and he is tainted clear through with something which is neither one nor the other of the diseases named. This is, for practical purposes, a "psoric miasm." And let this subject of this psoric miasm come

down with typhoid fever and woe betide him if his attendant doesn't take it into consideration in prescribing for him.

Sulphur is frequently an excellent remedy with which to begin the treatment, because Sulphur is the similimum to many a symptom and condition present. The patient is lean, lank and sallow. He is of constipated habit and has suffered from hemorrhoids. He is stooped and scrawny, and hasn't been a success in life either physically, forcefully or financially. It is in this type that Sulphur finds its best photographic reflection.

The Sulphur man's hair is dark and dry. His complexion is swarthy and mottled. He had skin troubles in early life. He may even have had scald-head, ringworm or the itch, and these were probably cured by external medication. But how many homeopaths think of these things in typhoid fever! Yet they are no less important here than in pneumonia, bronchitis or incipient phthisis. And who would overlook them in these diseases?

Calcarea carbonica is put down by Jahr as one of the cardinals in typhoid, especially in young subjects, and I have found it so time and again. But who among us today reads or follows Jahr?

Calcarea is adapted to light-haired youths and children those who are flabby, fat, chubby, fair-complexioned. But it is also suited to the same type in adult life. "Once a Calcarea subject always a Calcarea subject," is an axiom worth remembering. Everybody was a child once, and a great many everybodies were Calcarea children. These have but become Calcarea adults now. It is a mistake to assume that because a human being has passed beyond the age of kilts he has outgrown his constitution. In this he remains as he was born.

Those who once were rickety are likely to require Calcarea in typhoid. Those whose fontanelles were slow in closing are likely to need it. Those who as children suffered from retarded dentition and who had summer complaints as their annual portion are likely to present a Calcarea symptomatology. It is not called for on general

principles alone, but because Calcarea symptoms most often attend the acute manifestations in any disease of the truly Calcarea subject.

If we could but blot out our pathological nomenclature we could the more readily understand this, because we would then be guided by symptoms and drug pathogeneses alone in treating the sick. But since diseases are classified and given names there has come to be an association between certain sets of remedies and certain diseases and we are prone to stick to these lists. This is a mistake in homeopathic treatment which often cheats us out of our best results and costs the patient his life or health.

The Calcarea typhoid subject is flabby, lymphatic, catarrhal, takes cold easily, is non-resistant, perspires upon slight exertion, and his digestive organs are easily disturbed. Women who are leucorrhœic, whose menstruation is too profuse, who are lax in fibre and lackadaisical in habit are likely to need it in fevers, as in other ailments. And especially is it likely to be indicated in young subjects just budding into manhood and womanhood, either at the beginning or end of their third seven years of life. And it is here that typhoid occurs in dire malignancy.

The subject who was marasmatic as an infant, who had itch as a child, who was scrawny in the age of puberty, whose diarrheas are forcible, contrary and foul-smelling, whose perspirations are strong and unyielding, whose feet give notice of his presence in company, is likely to need a dose of Psorinum as he starts on his typhoid way. This nosode has a symptomatology all its own, and its value has been so clearly proven that to decry it is but to exhibit ignorance. It goes to the bottom of things, stirs the very foundations, arouses reaction where Sulphur fails, in suited cases, and is of wonderful help in low states generally.

My experience with Tuberculinum has been more limited, but it is proving itself worthy of a place. Where a tuberculous history runs all the way through a typhoid subject's pedigree it is wise to give it thought. Its debility is profound, its fever intense, its course erratic, its dyscra-

siæ latent. The three great "reactionists" are Sulphur, Psorinum and Tuberculinum.

Just as Sulphur, Calcarea, Psorinum or Tuberculinum is required in cases of typhoid offering their symptomatology—and conditions are as much a part of the symptomatology of any case as are recorded expressions of the patient—so will Kali carbonicum, upon which both Hahnemann and Grauvogl laid great stress, the latter in the hydrogenoid constitution, be required and found beneficial; and so will Phosphorus in the phthisical subject, Iodine in the grandular, Lycopodium in the hepatic and flatulent, and Arsenicum in the anemic and debilitated. The fact is, homœopathy has a wonderful armamentarium in constitutional remedies rarely thought of even by its own loyal votaries in typhoid fever and other acute diseases which are profound in nature.

Nearly all cases of typhoid have certain characteristics in common—malaise, headache, feverishness, anorexia, constipation or diarrhea, delirium and prostration. These are the common or general symptoms, the background for the painting, the warp for the woof. To make a correct prescription it is best to go behind the patient's spoken returns. Learn all that can be learned about him. It is he that is sick. His individuality, his temperamental peculiarities, his psychical characteristics, his physical and pathological pedigree in so far as we may be able to unearth and interpret them, make his case a personal one, different from that of every other person. To overlook the "him" of it, capitalized and underscored, is to miss the key to his internal economy and make him one of a common herd of typhoid fever patients, empiricism in its worst form. If he is deliriously inclined we may look for delirium. If he is a subject of diarrhea his bowels will be loose, and his glands the site of his conflagration. If he is florid and full-blooded his temperature will be violent. If he is apparently robust yet non-resistant he will be lardaceous fuel for the flame. As he is so will his case be; therefore he must be studied in his entirety, and this is what too few of us do in our typhoid

cases. We must particularize in order to get the best results; differentiate between diagnostic and Therapeutic symptoms.

In the main it is better to give the constitutional remedy in a high potency, to give a single dose, and to wait. High potencies act as well in acute diseases as in chronic, oftentimes better. Hahnemann proclaimed this fact and it has been found to be too true to be denied. Typhoid fever is in no hurry, therefore give the remedy time to spend its force and bring about its reaction before repeating the dose. Never mind the clock; let the patient's condition and symptoms decide the question.

If there be any merit at all in potentization nothing short of clinical experience will determine its limit. Unbelief is not evidence, nor is honest doubt the element upon which the verdict must rest. I have long given but one remedy at a time and am learning to give a dose and wait and to rely upon high potencies in many a case where for a quarter of a century I gave only the low. In typhoid fever, especially, I am ascending the scale with satisfaction and success.

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## QUININE AND BLACK-WATER FEVER.\*

BY W. H. HOWITT, M. D., Toronto, Ontario.

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Extract from a course of lectures on tropical diseases and their homoeopathic treatment. The selection is not specially identified with Homoeopathy, in fact, was purposely written that members of other schools might realize the serious results of their use of crude drugs when given empirically from a theoretical standpoint.

Black-water fever is probably the most malignant of all tropical diseases, and for its relief, as well as for all forms of malaria, quinine is practically the sole means ordinarily employed. So very fatal is this sickness that one attack,

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\*From lectures on tropical diseases at the Toronto Bible Training School.



even if recovered from, generally leaves behind it an almost inevitable predisposition to a hopeless recurrence, making it imperative for the sufferer to flee for his life from the infected country. In this way many a devoted missionary has suddenly found himself under the necessity of abandoning his chosen field of labor and changing his whole life purpose.

The action of quinine in appropriate cases of malarial fever is such an ideal one that it must be regarded as exerting not merely a toxic effect upon the malarial parasite but also a curative, specific influence on the whole diseased condition. It follows, therefore, that the drug will undoubtedly obey the rule of all other specifically acting remedies, namely, that its prolonged use as a preventive, or otherwise, will gradually wear out its usefulness as a medicine, and there being often nothing in such a case to absorb its energy it will sooner or later begin to set up poisonous effects of its own which will, of course, by virtue of its specific relationship, give rise to similar symptoms and involve the same structures as did the malarial poison. In this combination of morbid processes, I am constrained to believe, lies the explanation of the origin of black-water fever, and it accounts, moreover, for the many reported failures of quinine in malarial disorders of all kinds, especially when chronic. The proposed regulation enforcing the routine employment of quinine on West African government subordinates invests this phase of the subject with additional importance.

For the same reason I also feel it my duty to enter an earnest protest against the well-nigh universal practice in the tropics of taking quinine as a preventative of malaria. If this is done habitually it is not possible, should the necessity for the use of quinine in a malarial attack arise, to obtain that prompt and certain remedial action of which the medicine is so manifestly capable, and which it may be so vitally important to secure. The system in such a case is already saturated, and perhaps even then in a dangerous state from the accumulation of the drug. More quin-

ine under these circumstances will be simply adding fuel to the fire, and likely precipitate the very danger it has been an anxious endeavor to avoid. Far better to rely for immunity from malaria on the protection of mosquito nettings, and the adoption of special individual safeguards, particularly during the evening and night, and reserve the use of quinine for acute attacks of the disease.

From the foregoing considerations, as well as from personal observations of the effects of the drug on the human system, I am convinced that the inordinate recourse to quinine, more especially as a preventive, is to a very great extent, if not wholly, responsible for the prevalence of black water fever. I say to a very great extent, because it will not do to overlook the fact that in nearly all malignant affections a peculiar tendency is witnessed to the production of a condition characterized by the appearance of blood in the secretions; and it is quite possible that occasionally this symptom might arise spontaneously in the course of an attack of pernicious malarial fever. It does not militate against this belief that sometimes black-water fever comes on when quinine is not being taken. What I would require to know in such cases would be whether quinine, either in large doses for a short period or in smaller amounts for a long time, had not previously been used.

In support of the preceding views it may be said that it is actually conceded by the best writers on the subject that the free use of quinine is liable to exercise a destructive effect on the red corpuscles of the blood, thus favoring the escape of their contents. It must also be borne in mind that at times quinine manifests a remarkable proneness to accumulate in the body, and that in such cases it is often eliminated most tardily. Experiments bearing on this point reveal the fact that an interval of many weeks frequently intervenes between the time the quinine is taken and that at which it is all thrown off by the kidneys. This would account for the very striking circumstance that the malarial parasite as a rule disappears from the blood during the progress of an attack of black-water fever, the sudden exhibi-

tion of activity on the part of the accumulated quinine in all likelihood temporarily removing every trace of them from the circulating fluid.

That quinine is the active agent in the production of black-water fever is the opinion I have held for many years; and I am glad that it has lately been endorsed by no less an authority than the German bacteriologist, Dr. Koch, who has recently been engaged in making a practical investigation of the complaint on the East coast of Africa. His conclusions, however, I regret to say, do not meet with the approval of the profession at large.

My reasons, therefore, for attributing this fever to the excessive and persistent use of quinine are the following:

1. Black-water fever, as far as can be ascertained, is a disease of comparatively recent development; and chiefly prevails on the East and West coasts of Africa, but is liable to occur in any highly malarious country.

2. Although discovered in 1820 quinine does not appear to have come into use as a preventative of malaria until about forty years afterwards.

3. In no country in the world is quinine so recklessly resorted to as in Africa, as much as sixty grains being not unfrequently taken at a single dose.

4. Black-water fever is met with only in those persons who have lived in malarious localities for a considerable time, and who have experienced previous attacks of ordinary malaria. It rarely, or never, occurs during the first months of one's stay in a malarious district, and it is most likely to appear after one has lived in such a locality for two or three years.

5. It need scarcely be pointed out how a residence of several years under such circumstances would be apt to occasion the extensive employment of quinine, both as a remedy for acute attacks and also as a preventive. At the end of that time the system would in all probability be completely saturated with the drug. Is it any wonder, then, if, coincidently with the depression attendant on a fresh attack of malaria, and its treatment again by quinine, the pent up

effects should suddenly break forth with such disastrous results?

6. It is a noteworthy fact that persons who have once had black-water fever may suffer from a relapse of the malady, and actually perish from an attack of the same, long after leaving the malarious country in which the affection was originally supposed to have been acquired.

7. Still more significant is the circumstance that in some instances even the first attack takes place months after returning to a perfectly healthy climate. People have died of black-water fever in England, for example, who have experienced very mild attacks of malaria during their previous stay in Africa.

8. In all these respects black-water fever differs entirely from every other variety of malarial disorder.

9. I have yet to hear of a well-authenticated case in which the disease has been known to take place in a person who has not been previously dosed with quinine.

10. Carefully conducted tests with the drug prove that quinine is capable of setting up a condition of the kidneys similar to that found in black-water fever.

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### COMPULSORY VACCINATION.

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#### AS A LAYMAN SEES IT.

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Senator James Henry McCabe, of New York City, has introduced a compulsory vaccination measure which should be promptly killed by the legislators. Senator McCabe is a physician. He has a leaning toward vaccination. Many other physicians incline the same way.

The application of vaccine virus would be very remunerative to the professional men who furnish decoctions which are compounded by mild-mannered druggists. When certain doctors find patients alarmingly healthy in winter they are sometimes assured that an epidemic of smallpox will soon be raging, and that thousands of victims will be claimed by the dread disease. In a spirit of philanthropy,

these physicians insist upon befriending mankind by injecting poison at so much per head. If the vaccine virus is followed by lockjaw or blood-poisoning the physicians shrug their shoulders and declare that the victim would surely have succumbed to smallpox if he or she had not submitted to inoculation. There is something very comforting in the thought that if you do not die from the effects of vaccination you may catch only a slight attack of smallpox.

The physicians of New York City appear to have found their vaccination practice very remunerative. They have circulated among timid folk, have scratched limbs with their poison quills, and have collected large fees from well-to-do patients. Usually, when the child of parents in comfortable circumstances is vaccinated the family doctor is called in a number of times while the little victim is suffering from the poison in his or her system.

But the doctors of the metropolis seem to think that the inoculation of gullible folk is not as widespread as it should be; that doubters will refuse to bare their arms to the physician's poisoned quill; and they have accordingly instructed their brother in the profession, Senator James Henry McCabe, to present a bill which is intended to compel nearly everybody in the State to submit to compulsory vaccination. Besides specifying certain measures in regard to the inoculation of unfortunates, Senator McCabe's measure authorizes boards of health to enforce the law whenever necessary. This means that in the event of the dangerous bill passing the Legislature and receiving the Governor's approval, the people of the State would be compelled to submit to vaccination every time an isolated case of smallpox started a scare in communities which pay little attention to the laws of health and too much attention to the advice of persons who always have an eye for business.

If boards of health would devote more attention to proper precautions against diseases which are frequently epidemic they would be performing their duty. As it is, their support of the vaccination theory creates the impression that they are working in the wrong direction, if they

wish to protect the public health.—*Albany Press-Knickerbocker.*

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### CASES FROM MY NOTE-BOOK.

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BY MARGARET E. BURGESS, M. D., Philadelphia.

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Mrs. A. M., one of my patients, while spending the summer in a malarial district in Connecticut, was stung by bees, the attending swelling and pain being very severe. In the course of a few days the following symptoms presented themselves:

Chills, anticipating, every other day, ushered in with blue nails, cold hands and feet, headache and nausea; beginning in the feet and extending over entire body but most pronounced in the hips and reproductive organs; > by being surrounded with hot water bags. Nausea and retching but inability to vomit, attended with faintness, > by ice water; duration of chill one hour, during which there was a sensation as if falling and desire to be held.

Heat most intense in the abdomen and attended with a dry painful cough and frequent urging to urinate, the urine being "blood red."

Sweat most profuse about neck and waist.

Following paroxysm, great prostration, "so weak could hardly lift head."

During all the stages headache, and the surface of the body was so sensitive to contact that the slightest touch would cause her to shiver and groan.

Conjunctiva yellow, eyes glittering and sensitive to light.

The jar of any one walking across the floor was unbearable. As the patient was being treated by mail the symptoms were obtained piece meal and several remedies were prescribed without benefit. Finally Apis. 200 was given with immediate improvement, a repetition being necessary four or five days later when a relapse occurred.

In connection with this case two queries have arisen in my mind:

First, did the bees inoculate the patient with the malarial poison?

Second, was *Apis* curative because it antidoted the sting of the bee?

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Mrs. G., aet. 28, sanguine lymphatic temperament, evidently weighing in the neighborhood of two hundred pounds; left California sixteen months ago, at which time she was menstruating, but the catamenia have not appeared since, a profuse yellow leucorrhoeal discharge coming regularly once a month, the breasts being painful and indurated. For three months has had a "hard cough" with difficult expectoration and profuse perspiration. Feet burning, vertex hot. Under Graphites 33m a normal menstruation began in four days and cough and attending symptoms gradually disappeared.

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Agnes S., aet. 17, a dispensary patient, working in a cigar factory for one year, presented the following symptoms which had developed during that period:

Vertigo, > in the open air, looking steadily at an object!

Cold, chilliness in the back and abdomen,

Vision dim, "everything looks blue;"

Falls, but does not lose consciousness,

Nausea, "would feel so much better if could only vomit."

Headache, dull in the morning until noon, > by tea and by lying down.

Prostration.

Palpitation, "heart beats in throat."

Face pale, earthy, haggard.

Emaciation most pronounced in face and arms.

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Mrs. J., very rapid labor, child born before my arrival, but just as I entered the room a great gush of bright red blood. On introducing my hand into the vagina felt the hot

blood coming from a partially detached placenta. Belladonna failed completely, as did other remedies. As soon as the nurse removed her hand from the abdomen through which she was holding the uterus the bright blood would gush as before, even after the placenta was expelled; this continued for five hours. I then gave Sulphur 20m and the powder had not more than dissolved on the tongue when the nurse exclaimed, "Oh, doctor, that is a great deal better, the uterus is contracting well now."

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### THE INTERNATIONAL ASSOCIATION.

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MEXICO, N. Y., March 15, 1902.

*Members of the International Hahnemannian Association, Active and Associate:*

GREETING—Eight months and twenty-one days have passed since we met at Niagara Falls, N. Y., and but 101 days are left within which to prepare for the next meeting of our Association, set down for June 24, 25 and 26 of 1902. "The Chicago Beach Hotel," 51st St., and Lake Michigan, Chicago, Ill., is the place selected for the several sessions of the Association. It is a beautiful spot, the hotel, large and commodious, on the shore of Lake Michigan, retired, quiet and convenient of access, sixteen minutes from the heart of the city.

The meeting at "the Falls" last year will not soon be forgotten. The goodly number present; the number of applications for membership; President Case's excellent address; the superlative quality of papers from the several bureaus; the efficient work and zeal of Secretary King; the fine number, the radiant faces of ladies present, each and all gave weight and inspiration to that meeting. Let us hope and strive to the end that the coming gathering may be as interesting and profitable as that of 1901.

Fraternally,

T. D. Stow.



## THE CURE OF ALCOHOLISM.

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A. F. RANDALL, M. D., Port Huron, Michigan.

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I would like to see our homeopaths take up the cure of those damnable drink and tobacco habits. Surely something can be done. As a starter I will state that I have had some varied experience. A man came to me asking: "Do you have a cure for the drink habit?"

"I sometimes prescribe for it."

"I know you do, for a neighbor of mine was drinking hard, and you gave his wife something to put into his tea, and in a little while his liquor did not taste right and he suspected his wife of drugging his tea; but she would drink the cup that he refused, so he did not know what to think; but in a short time he could not drink and could not use tobacco, so he quit and went to work."

A German, about fifty years old, heard that I gave medicine to take away the appetite and he wanted some of it, as he could not pass a saloon if he got a smell of the beer. I prescribed, and he reported in a month or so, "I can go to the saloon right by all right." I have not always been as successful, but I believe that in the majority, perhaps, good patient prescribing will pay.

As to remedies, the repertory and materia medica contain a goodly number.

Galavardin's little book is helpful and inspiring, although we can not depend on it solely, but must study the materia medica.

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## NOTES ON PHOSPHORUS.

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BY J. A. WAKEMAN, M. D., (39) Centralia, Ill.

(Contributed to the Old Guard.)

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At the time Dr. T. S. Hoyne of Chicago was publishing the first volume of his *Materia Medica*, the exact date of which I cannot give, but think it was in 1870, or there-

abouts, he requested me to write an article on Phosphorus, which I did, and at the same time reported two fatal cases of dysentery, with this peculiar condition:

Extreme dilatation of the anus from paralysis or debility, the anus remaining constantly open to the diameter of one-half or three-fourths of an inch; exposing the black and sloughing mucous membrane to view to the extent of three or four inches, remaining in this condition about two days in each case before the death of the patient.

The manuscript was not received until the article on this remedy had gone to press, and was never published.

Up to this time I had never seen a notice or mention in any work on symptomatology of this condition, nor have I since. I have consulted Hartmann's *Acute Diseases*; Hull's *Jahr*; Hering; Lowrie's *Practice*, and others, but in Allen's *Encyclopedia*, and in Farrington's work on *Materia Medica*, both late works, mention is made of it.

Is this a Phosphorus condition? This remedy was not given in either case. Would it have controlled them? It is a serious matter, and who can give any light upon it.

I was ignorant then, and am yet, on this particular point. Should a similar case present itself I would give Phosphorus, hoping good results might follow.

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A. R. Morgan, M. D., Waterbury, Conn., has been recruiting in St. Croix, W. I., from which he writes some glowing accounts of the delightful climate.

The uniform temperature here is what makes it a desirable climate for persons suffering from bronchial and pulmonary affections, and we predict that when the many sanitary advantages afforded by St. Croix are known to the medical profession at home it will become one of the most salutary resorts for pulmonary invalids in the world, and we believe if the change is made by invalids to St. Croix while there is lung tissue enough left to aerate the blood entire recovery may be expected.

One virtually lives out of doors here, there being very few dwellings with glass windows. The walks and drives about the island are delightful. Wild deer are quite plentiful, while the fishing is excellent, affording diversion for those who are fond of such sports.

## EDITORIAL.

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All Contributions, Exchanges, Books for Review and other communications should be addressed to the Editor, 5142 Washington Ave., who is responsible for the dignity and courtesy of the magazine, but not for the opinions of contributors.

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### DEFINITION HOMEOPATHS.

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Among the various kinds of homeopaths common to the first years of the twentieth century is a type which may be styled the "definitionists", men and women who believe that they have settled the status of Homeopathy for all time among scientific men and principles by issuing a dictum as to what it is, or at least what they think it is. Thus the American Institute of Homeopathy has come to be in a way the National Society of Definitionists," since it has been thought necessary for that body to state to the world what it considers its Homeopathy to be, much as the schoolboy writes beneath the first picture of a quadruped he has tried to draw on paper "This is a Horse." We have often wondered what place the giving of a definition to our principles is expected to have in the settling of any of the problems of Homeopathy, and what part it is expected to play in converting the world to Homeopathy or in narrowing the chasm which exists between our school and all others. And we have also often wondered if our definitionists have ever stopped to consider what small influence the wringing out of the words contained in their definitions have thus far had and will always have upon the solving of the issues which are involved in the life of Homeopathy!

The *Homeopathic World*, of London, deals with the subject of "Definitions" in its issue of last month in a very satisfactory manner, correctly holding that defining a thing does not establish among its adversaries that it is that thing

and that it solves no issue connected with its existence, *The World* defines a definition very tersely as follows:

“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 a bottle without spilling some of its 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 shape or size, and hence other bottles are set up and a battle of bottles ensues.”

This is exactly the situation with reference to the definitions of Homeopathy which have been given it by the American Institute. The first time this was attempted, at Denver we believe, the definition lasted one or two years only. It did not then even satisfy the definer and a definition which seemed to be a trifle more comprehensive was substituted. This definition confronts us in the bound volume of Transactions year by year, a veritable eyesore and affront to the scientific homeopath, and a confession of weakness by ourselves. For a thing that has to be defined to be known and understood can have small merit. Homeopathy is able to make its own definition. It cures the sick. It cures them better than any other system. It cures them more safely and permanently than any other system. It cures without doing violence to various organs and tissues of the body, and stands for a certain, definite possibility. It is a plain Law of Cure, certified to by a hundred years of success. A homeopathic physician is one who cures by it, without fringes or furbelows, without adjuncts, adjuvants or bolstering of any kind. He annihilates all idiopathic diseases by a simple, safe and effective plan. He is King in the sick room. How much better it would be for mankind and for our profession if every one of us was a straight out homeopathic doctor instead of a definitionists homeopath, who has to have a standing explanation or apology of his position in order to make it appear to the scientific world that he has a right to exist, by having a written sign placed under him announcing “I am a Homeop-

athic Horse!" The Institute ought to stop making itself ridiculous, by appealing its definition and letting it be understood that it stands for Homeopathy, first, last and always.

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### AN INTERESTING MEETING.

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The Allen County Homeopathic Medical Society held a successful meeting and banquet at Fort Wayne on April 4th the principal attraction and success of the session being an address on "What is Homeopathy," by Dr. Dewey, of Ann Arbor. One of the strong points of his address was a recital by Dr. Dewey of the Chapman experiment, wherein ten homeopaths selected a single remedy, *Lycopodium*, for a test case stated by letter and eight allopaths gave different prescriptions, covering forty-two drugs, showing scientific precision and accuracy in the prescribing of the homeopaths and the greatest degree of promiscuousness by the allopaths no two of them being alike in their prescriptions. Among others besides Dr. Dewey who were present from other cities were Drs. Chislett and Banning of Chicago, Dr. Mumaw of Elkhart, Dr. Clokey of Huntington, and Drs. Fowler and Springstead of Bluffton. The meeting was characterized by excellent papers, discussions and cordial sociability. Several allopaths attended.

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### THE PROPER APPLICATION OF MENTAL SCIENCE.

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Prof. Jastrow, of the chair of psychology in the University of Wisconsin, in a public discussion of "The Mind in Disease," referring to the prevalence of psychological charlatanry in relation to the treatment of the sick, lays down the proposition:

"If it were generally understood to what extent mental treatment is wisely and sanely introduced into the practice of skillful physicians, particularly how well such influences are utilized in cases of conspicuous nervous troubles—that, in brief, there is a well-balanced and sound and rational form of utilizing the influences of mental upon bodily con-

ditions—then it is not unlikely that the field of application of the latter would be more extended and the success of extreme propaganda and the profits of charlatans could be proportionately diminished. The true psychology of mind cures and allies them with well recognized every-day principles; the extreme forms that secure popular attention lead to a lack of rational perspective and to the spread of confusion and error.”

Prof. Jastrow has elucidated a statement which contains a mountain of truth. Every experienced practitioner of medicine knows well the scope of mental influence in the sick room, and exercises that knowledge to the benefit of his patient. Only the gross, materialistic, coarse, physicking doctor trusts to materialism alone in treating the sick. The personal equation is of inestimable value in dealing with invalids, especially with chronic and nervous subjects, and he is only half prepared for his work as a physician who ignores the influence of the mind of one person over another and of mind over matter. The successful physician brings into play every factor that benefits his patient, and not the least potent of his weapons is his knowledge and practice, consciously, of mental therapeutics.

On the other hand, the physician also knows that remedial agents have their power for good, just as they have for harm, and he avails himself of this knowledge also. Especially is it true that the painstaking homeopath avails himself safely of a knowledge of drug influence while also applying mental therapy. In this he is just that far ahead of the physician who neglects mental influences and of the mental healer or so-called “Scientist,” who neglects the aid of medication and attempts to rely solely upon spiritualism or mentalism. The true homeopathic physician avails himself of pure homeopathic medication, harmless yet beneficial, and of every psychological influence of which he is capable. The optimism of the conscientious homeopath, the outgrowth of a knowledge of what his medical system is capable, is one of the best factors at his command in the combat with disease and death.

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## QUININE AND BLACK WATER FEVER.

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The excellent article on the relation of quinine to black water fever which appears elsewhere in this number of the **MEDICAL ADVANCE** from the facile pen of Dr. Howitt, of Toronto, contains a good modicum of value in that it sets forth with clearness the baneful influence which the unlimited use of this drug in malarious districts has upon the human system.

Blackwater fever is an aggravated form of hematuria. The urine is so charged with vitiated blood-cells and plasma that it is almost black, hence the name which is given to this type of supposed malarial infection. It has been accepted as one of eight distinct varieties of pernicious intermittent, the others being the algid form, the febrile or congestive type, the choleraic form, the diaphoretic variety, the convulsive type, the gastric form and the hemorrhagic type. These have been classified by Loomis, Bartholow and other authors, including Russell, Reynolds and Ziemssen, only within the last few years the hematuric form having come to be recognized as, in a measure at least, a quinine disease. It is now believed various others of the forms which have been named will be so considered eventually.

Not only does this blackwater fever, a name not given it in this country, occur along the African coasts but it is common to some sections of Central and South America and is also met with in the Mississippi Valley and along water courses tributary to that stream. In the United States it has been classified as a pernicious type of intermittent fever, but as long ago as 1886 and 1887 various medical journal contributors began to call attention to the fact that it is not seen except in subjects who have long been saturated with quinine. Dr. Hewitt, of Memphis, was among the first to take the position that it is not an idiopathic malarial disorder but a quinine poisoning. Koch of Berlin has reached the same conclusion, and the author of the article presented this month on this subject has long held likewise. There seems to be little doubt, in fact, that quinine is wholly re-

sponsible for the so-called malarial hematuria, and the same conclusion will be reached in regard to other types of hemorrhage in connection with its abuse, beyond question. The ills which are due to the abuse of this drug by the people and the profession in malarious countries are legion, and not until it is recognized that its powers for harm are co-equal with or greater than its power for good will it become a safe agent in the sick room.

Quinine in crude form has no legitimate place in the therapy of the homeopathic physician. *Cinchona officinalis* and *Chininum sulphuricum*, as also *Chininum arsenicosum* and other forms of the cinchona which have been proven and which have developed distinct pathogeneses, meet all the requirements of the alkaloid without producing its ill-effects, if given in the potentized dose and according to their respective symptoms. In fact, quinine as quinine is never required by the true homeopath. It only suppresses and leaves a countless chain of evils in its wake, not the least violent and dangerous of which is malarial hematuria.

Its vitiating effects upon the blood and its irritating effects upon the brain and spinal cord are too well depicted in works on physiological therapeutics for the homeopath ever to be justified in its use.

Dr. Howitt has discussed the subject of quinine in relation to this form of hematuria more from the old school than from the homeopathic point of view, with the idea of calling attention to its abuse and dangers irrespective of the subject of pathy; but his article contains good value for us in that it gives us a strong weapon with which to combat the ignorance and prejudice of allopathic confreres and unbelieving patrons in malarious districts to whom the presence of malaria, and everything simulating it, carries the idea of quinine, quinine and nothing but quinine. In this relation articles of this type possess a value that cannot well be overestimated.

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## HARD BLOW FOR VACCINATION.

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The experience of Cleveland is a hard blow to vaccination as a measure for the "stamping out" of small-pox. That city, along with many others, had suffered from the presence of small-pox for more than two years, despite the most thorough-going efforts to kill it out by vaccination. Everybody who could be vaccinated was vaccinated, and re-vaccinated. In many instances the process was repeated several times. In cases which would not "take" various makes of virus were used, the health department exercising its very best efforts to rid the city of the pest by this generally accepted means of eradicating it. Nothing was left undone that vaccination might do, nor was there any contest against Jennerism to militate against its efficiency. Still small-pox raged, however, without material check. Finally there were enough cases of failure and enough of contamination by impure virus to set the new health officer thinking, and other means were decided upon as worthy of trial, at least.

Vaccination was abandoned and sanitary measures were resorted to. Instead of trying to render the people immune to the causative factor the health officer intelligently set about trying to get rid of the factor itself. Assuming that it was a germ he organized against the microbe's forces. A sanitary corps was sent from house to house with scrub brushes, soap and water and disinfectants. Of the latter formaldehyd was the adopted agent. Every infected room was closed tight and formalin was burned freely in it. The walls were cleaned, the floors, woodwork and windows were scrubbed, and every contaminated thing was either fumigated or burned. Cleveland was given such a cleaning up in her lower quarters as the city had never had, and, lo and behold, small-pox disappeared completely, so that not in six months has there been a case in that city.

Compare this with Chicago. In the latter city the health board has but one idea, that of vaccination and toxination. Little or no attention has been given to fumiga-

tion, house-cleaning, street and alley cleaning, or anything but vaccination. This has been practiced faithfully and to excess. Hundreds of thousands of citizens who are most likely to be exposed and be new foci for the disease have been vaccinated. Large armies of men employed by the corporations have been vaccinated, many of them against their will, yet the disease goes on. Ordinarily small-pox ceases with the coming of warmer weather, but in Chicago it is on the increase. More cases are reported with each succeeding week, and the end seems not in sight. Vaccination has not stamped it out, whereas in Cleveland, after it had been faithfully tried, sanitation quickly did what vaccination failed to do.

There is food for serious reflection in this comparison. To a great many physicians and people, including many good homeopaths, vaccination has come to be accepted as the one thing with which to combat variola. In support of this theory the statistics of the German army, in which every soldier has to undergo three successive vaccinations, are constantly referred to. But it is not taken into consideration that the Germans, of all people, are rigid sanitarians, and that especially is the German army maintained in a state of the best possible hygienic conditions. Their camp and individual inspections are among the strictest which are practiced, their medical and surgical staffs are microbicidists to the last man, and nothing that can be done in the way of hygiene and sanitation is left undone in Germany army and navy life. Just how important this factor is in giving that nation freedom from small-pox in its military and naval arm has not been sufficiently estimated. The experience of Cleveland would lead to the inference that sanitation more than vaccination has been the important agent in securing the oft quoted results.

Since small-pox has been more or less prevalent throughout the United States, especially in the great centres, during the past three or four years, and since vaccination has not stamped it out, why not drop it for the time and try sanitation and see what this will do? The seri-

ous objection which arises in the minds of many physicians and many people to having their patients and children subjected to the introduction of an animal virus into their systems would alone seem to justify every possible effort to find something that promises better and succeeds better than vaccination; and since a well-carried out sanitation has been so clearly demonstrated in the case of Cleveland to have done so much better than vaccination, there can be no legitimate objection to the suspension of the latter and the adoption of the former for the time, that a comparison may be secured. Even the most ardent vaccinationist ought to welcome any measure which is more effective, which will offer less violence to personal and physical ethics, and which will do away with vaccination's flagrant violation of accepted surgical teaching, to in no way permit septic infection to make inroads upon the human system. Instead of deliberately making a wound and infecting our patients it would seem to be rational and desirable to direct our efforts as a profession toward developing preventive measures which will be successful while at the same time are non-contaminating. If the Cleveland health office shall have given us a better way than vaccination unborn generations will rise and call it blessed.

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## CORRESPONDENCE.

The vaccination question is still a very live one and will continue to be as long as compulsory vaccination laws are agitated and being enacted.

MILWAUKEE, April 19th, 1902.

EDITOR MEDICAL ADVANCE—:

It seems to me THE ADVANCE has become an anti-vaccination journal, than one devoted to the development of our knowledge of the Homeopathic Materia Medica. Our antivaccination friends seem to be able to see nothing but a few unfortunate occurrences in St. Louis and New Jersey. The great reduction in deaths from small pox is not to be considered when placed against a few accidents from impure virus. I have vaccinated thousands and have failed to note the terrible results they profess to see. One might as well stop riding because a horse occasionally runs away and kills the driver.

It matters little how much the Brother Jaspers oppose vaccination if they keep their views of vaccination and Homeopathy separate; for Homeopathy suffers by being linked with notions that have no connection with it at all. Vaccination relates to prevention, Homeopathy to the *cure* of disease. Yours fraternally, JOS. LEWIS, M. D.

[It may not appear to our correspondent to be anything serious if twenty-five or thirty lives are sacrificed to an antiquated fad. The fatalities in St. Louis and New Jersey attracted universal attention and are liable to occur again, especially if compulsory laws are enacted. But why not use homeopathic prophylaxis in variola as we do in scarlatina, measles, diphtheria, whooping cough, and other contagious and epidemic diseases? Next to the cure of the sick the highest duty of the physician is to prevent sickness, whether it be variola, pneumonia or tuberculosis, and there is no method by which susceptibility can be so surely and at the same time so safely eradicated, as by the law of sim-

ilars which is universal in its applicability. All diseases, whether contagious or infectious come within its benign yet effective scope. If our friends of other schools do not know how to use it, or if they shut their eyes to scientific progress and decline to investigate it, there is no reason why we should abandon our law and return to the crude, empirical, unsafe and uncertain methods of a century ago.]

IOWA STATE BOARD OF MEDICAL EXAMINERS,  
DES MOINES. March 8th, 1902.

DEAR SIR—:

Please inform me to what extent, if any, you teach your graduates that Variolinum or any other internal remedy is a safe and efficient substitute for ordinary vaccination, as a preventive of smallpox.

To what extent do you use it yourself in your practice?  
An early reply will greatly oblige,

J. F. KENNEDY, Sec'y.

Dean Hering Medical College.

OUR ANSWER.

1. The graduates of Hering Medical College are taught to use prophylactic measures against all contagious and infectious diseases by rendering the patient immune, because healthy, for health and nonsusceptibility are synonymous.

2. The contagious principle of variola is dynamic, is communicated by olfaction, the microscope has not revealed it. Why should it not be met on the same level by dynamic means?

3. Individuals differ, susceptibilities differ, epidemics differ, and prophylaxis must be attained by different medicines, for the vaccine virus does not affect all alike; in fact some are not susceptible to vaccination in any form.

4. Vaccine virus becomes an "internal remedy" as soon as it enters the circulation; so does variolinum.

5. We used crude vaccination for many years and have known patients on whom it "worked" and who had more than one cicatrix, to have variola when exposed. We have used variolinum more or less for twenty years and have

neither known nor heard of a case of variola ever occurring after its use.

6. We do not know what vaccine virus, the "pure glycerinated lymph", is. Dr. Levenson, of Brooklyn, has said: "I will pay \$1000 to anyone who will explain what it is that is put into the blood of the vaccinee when he is vaccinated." Why do not the scientific bacteriologists claim the reward?

7. Health Commissioner Friedrich, of Cleveland, O., reports that smallpox was eradicated in his city by fumigation with formaldehyde after vaccination had failed.

8. Variola is a filth disease. Why not destroy the filth and thus protect the community, rather than use an unknown septic material that weakens the health and normal resistance to variola and other diseases? The Cleveland plan has proved effective. Give it as fair a trial as we have given vaccination and compulsory vaccination laws will not be needed.

9. The graduates are taught to use prophylactic measures against all infectious and contagious diseases as well as variola.

10. "Ordinary vaccination," although a crude form of homeopathic prophylaxis, has proved so very defective that we want something more reliable. Read the practical letter of Dr. Vincent, a graduate of Hering College.

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UNION, Ore., April 8th, 1902.

EDITOR MEDICAL ADVANCE—:

In the March ADVANCE Dr. Linn asks for reports of the use of Variolinum. I hope all who have used it will respond.

I will add my little experience to the sum total. We have had an epidemic of variola here and still have a few cases.

I have given out quantities of Variolinum and not one person who has used it has taken the disease except those previously exposed and under the influence of the disease before taking the remedy. And such cases, without exception, have been very mild.

Some I might say did not have it at all, although living in the same family with it. They would have slight aching of the back and limbs, and perhaps a half dozen pustules on the whole body, which would not have been noticed at any other time.

These symptoms, without the eruption, also occurred with others who took the remedy, and particularly in the members of one family who, after using the remedy, kept a boarder through the whole course of the disease and none of them took it. I leave the reader to judge whether these symptoms in any case constituted a proving or were due to small pox or to mental suggestion.

The case of this latter family I consider good positive evidence of the efficacy of the remedy as a prophylactic. It is true the greater number of cases have been very mild, yet some cases under allopathic treatment have been very severe, and some of my cases at my first visit were not good to look upon. The face one pustulous suppurating mass, swollen almost beyond the semblance of humanity. Sick enough to send for me to go ten or a dozen miles into the hills to give them one dose of Variolinum and placebo. That is what most of them received, and every case improved at once and permanently, few requiring a second visit.

Now I will say that to give Variolinum in every case as a prophylactic would be empiricism no less than to give it to every case of small-pox. I have done neither of these things.

In some cases I saw a Sulphur picture and gave Sulphur as a prophylactic. In some cases of the disease I saw a Belladonna picture and gave Belladonna as the curative remedy. But when a well person wanted a prophylactic I prescribed, in anticipation for a variola picture, the remedy Variolinum. Or if in a case of the disease I could see only a variola picture I gave that remedy.

If this is not Homeopathy, show me why. And furthermore I neither give Malandrinum nor Vaccininum for a va-

riola picture no more than I would give Sulphur for a Psorinum picture for fear of practicing Isopathy; nor Calcarea carb. for a Calcarea phos. picture because similar and not "the same."

A. W. VINCENT, M. D.

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The Rock River Institute of Homeopathy held its 76th quarterly meeting in the Windsor Hotel parlors, Clinton, Iowa, on Thursday afternoon and evening, April 3d. The session was devoted to *Materia Medica*, and verifications were reported and aid solicited from members by Dr. Blackman, Chairman of the Bureau, and cases reported by Dr. Blunt and others on chorea, diabetes and typhoid fever in the afternoon, the discussions and suggestions of which were very helpful.

In the evening session Dr. Blackman's paper consisted of questions sent to the members of the Society and many prominent homeopaths throughout the country, asking if they used the single remedy in practice and from what potency they obtained the best results. The answers in general showed a tendency to the more frequent use of the single remedy than in former years.

Dr. Allen of Chicago gave an address on Pure Homeopathy and Hahnemann's Antipsorics which received the closest attention and from the questions asked a spirit of investigation was manifest which may be heard from in the future. The interest in the question was so marked that some of the members decided to remain over night to hear the address and the interesting discussions, many points raised being entirely new to the members. This is an enthusiastic, active, hard working society, and is a source of personal pride on the part of the members which accounts for the good attendance. Those in attendance were: Drs. Hill of Sterling, Blackman and Sickels of Dixon, Lanning of Morrison, Arp of Moline, Maloney of Savanna, Ward of Fulton, Bray of Dubuque, Ia., Keister of Davenport, Ia., Hunter of Princeton, Ia., and Martin, Lowell, Blunt, Gruber, Finley, Charlton, Ryder of Clinton, and Allen of Chicago, who was made an honorary member.



**Homeopathy** expects that every man and woman, members of the A. I. H. and I. H. A. prepare their papers now while they have time. Do not put it off, as that proverbial case of obstetrics at the last moment may interfere and you may find yourself feasting or sponging on the bounties of others and not contributing anything of your experience in return. The meetings are in June, the A. I. H. in Cleveland on the 17th and the I. H. A. in Chicago on the 24th.

**H. M. Campbell, M. D.**, Westville, Ind., reports several good locations in North Eastern Indiana, and makes a strong appeal for men to fill them.

The **Hahnemannian Dispensary** at 612 Spring Garden St., Philadelphia, is in need of a resident physician. The field is a good one. An energetic man or woman could soon have a large practice; remuneration, experience. Expenses guaranteed. Address Dr. Lydia W. Stokes, Sec'y.

**Woodside Cottage**, on Indian Head Hill in Framingham, Mass., is a new sanitarium for the care and treatment of a limited number of patients suffering from chronic ailments. Address Dr. Frank W. Patch.

**Dr. S. R. Stone**, Rhinelander, Wis., has been re-appointed Commissioner of Health.

**Dr. J. D. Graybill** of New Orleans writes: "If Dr. J. C. White will consult Lippe's *Materia Medica*, page 480, he will find under *Nux Moschata* the modality: "< in the cold and from lying down, > from hard pressure and from external heat." [Also same in *Hering's G. S.*, Vol. VIII, page 84. ED.]

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### AN OPEN LETTER ON SOLIDARITY.

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MEXICO, Mo., Feb. 12, 1902.

SHELDON LEAVITT, M. D., Chicago, Ill.:

Dear Dector:—Let others experiment with "The New Psychology." We have a system of medicine founded on facts, subject to no man's opinions, the homeopathy of

Hahnemann. Let our Allopathic friends grope on till they have found the truth as we have found it.

No more can be expected in the future of Allopathic methods, nor of hypnotism, magnetism, spiritualism, clairvoyance, Christian science, osteopathy, theosophy, suggestion, etc., than has been realized in the past. The founder of osteopathy is a confirmed spiritualist. The fakirs in India have brought out all there is in "The New (?) Psychology" long ago. No larger per cent of cures can come from it than has come from the bones of the saints, holy shrines, Bethesda pools, etc.

Prevision proves a power beyond any our own minds can have. No work on psychology explains prevision. None even attempts it. Why confine a part of these powers to man's subjective mind when all can not be so confined?

Behold, how all things out of Christ in the religious world, and out of our Divine Homeopathy in the medical world, lead into quagmires! THEO. H. WINANS.

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**Vaccination and Conscience.**—A futile attempt was made in the House of Lords, Feb. 18, to obtain an earnest hearing for a bill abolishing the "conscientious objector" clause in the vaccination law, but, even with a grave small-pox epidemic threatened, the government is determined not to retreat from its present position, intimating that the clause will be abolished when the time-limit expires next year. It is only fair to say that the conscience clause did not originate with the Lords, who were forced to take it up by the Commons. The worst effect of the clause is the widespread belief among half-educated folks all over the country that there must be some lurking evil in vaccination when their rulers deliberately permit the relaxation of the compulsory law. The government declares that renewed vigilance and closer attention to the quality of the lymph have gone hand in hand with the "conscientious objector" amendment, that vaccination has rather increased than decreased lately, and that people are beginning to learn that vaccination is necessary to the public health.

## NEW PUBLICATIONS.

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**THE THERAPEUTICS OF FEVERS.**—H. C. Allen, M. D., Chicago, Octavo, 538 pp., cloth binding, \$1.00; by mail \$1.25. Bœricke & Tafel. Philadelphia and Chicago, Publishers.

In this splendid work on the homeopathic therapeutics of fevers, covering all types common to temperate and semi-tropical zones, the author has given a faithful portrayal of the pathogenesis of the homeopathic fever remedies, not only those in common use but also of every remedy in the *Materia Medica* which may be found useful in any case in which temperature is a factor to be combatted. In a way the book is built upon the author's excellent monograph on intermittent fever. Yet it is a completely new book, not a page of the former work standing as it was originally published. All types of malarial fever, typhoid, typhus, yellow fever, septic fever, pernicious intermittent and the various zymoses are included in the therapy set before us. Under the different remedies are given the characteristics, the times of aggravation and amelioration—prescribing symptoms of the largest value—the type, the time of chill, fever, etcetera, the nature of chill, nature of fever, sweat symptoms, the tongue, pulse, apyrexia, the relationships of the remedies, and a general analysis of the action of the particular medicine which is considered, in fevers of various types.

The repertory feature of the volume is most complete and helpful. Not only have the leading authenticated repertories been drawn upon to make this complete but the author has introduced a great many indices from his large experience and his extensive bibliothical annotations. Hardly a rubric that might be thought of is not to be found, and under the chief ones the remedies are italicized, small capped or capitalized, according to importance and value. The modalities of the remedy, most often the guiding symptoms to its use, are elaborated more than in any sim-

ilar work, this giving to the volume a special value which will be appreciated by physicians and students who understand the value of modality indications.

The introduction is a valuable part of the book. It is refreshingly after the style of Hahnemann and Dunham. The author sets forth his well substantiated views that fevers along with other diseases to which human flesh is heir, are dependent upon a miasm or taint within the system that makes invasion possible, and that prevents the system from throwing it off. According to the subtlety of this miasm is the fury of the fever fire. To prescribe for the superficial symptoms, the tongue, pulse and temperature, even taking into account the mental manifestations and certain other superficial characteristics, and leave out of the consideration the basis upon which the disease may be engrafted, is to but half meet the demands of the case. Typhoid fever is held to be but a volcanic expression of a latent miasm. The stubborn intermittent is stubborn because there is within the individual a something, Hahnemann called it psora, which enables a disease disturbance to lay fast hold upon him. "Hahnemann's lesson in the Chronic Diseases on the treatment of acute syphilis must be applied to fevers of all types and acute diseases of every name and every kind, irrespective of habitat." In this thought which runs through the volume, lies the foundation of strict homeopathic treatment as against the more superficial prescribing of careless symptom-observers and even of many totality-physicians who overlook the bases upon which both characteristics and totality are founded.

Nor is this a pathological inference with the author. He deals with the miasm, taint, psoric base or disease-pedigree as a part of the totality. His totality is a larger totality than most physicians look for. And herein will be found one of the greatest points of usefulness of the work. It goes to the bottom of things, not only showing how to treat an individual subject but how to go behind his returns and apply remedies helpfully to conditions of which he has

perhaps no knowledge but which are revealed in the symptomatology of his illness.

The hints which the author gives on the selection of the remedy, the dose, its repetition, its potency, the examination of the patient, and other essential inquiries and applications in the sick room are of no inconsiderable value, especially to the medical student and to prescribers whose practices have not always been of a high order, homeopathically considered. Taking it all in all it is a volume which should not only be in every physician's library but on his table, in his hand, and in constant use.

C. E. F.

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### CURRENT NEWS-NOTES AND ITEMS.

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Michigan will hold its State Society meeting at Mt. Clemens on May 20th and 21st, at the Hotel Agnew.

George Washington said: "To persevere is one's duty and be silent is the best answer to calumny."

The Illinois State Homeopathic Society will meet in the auditorium of the Masonic Temple on the 13th, 14th and 15th instants. There is every prospect of an unusually good meeting.

Sedalia, Missouri, a city of twenty thousand, with a large railroad population, is announced as a desirable location for a homeopath. Mr. M. C. Hunsberger of that city will give the desired information. Sedalia ought not to be left begging.

Denver Homeopathic College commencement exercises were held in Trinity Methodist Church on the 24th of April, eleven candidates receiving the degree. The annual banquet was held at the Brown Palace Hotel immediately after commencement.

The heaven is working in England. Already it is pretty well decided that the Twentieth Century Fund which has been started by Dr. Burford, president of the British Homeopathic Society, shall be devoted to the establishing of a school or the provision of other educative facilities.

Several important resignations have taken place at the Chicago Homeopathic College, Prof. Charles Adams has resigned from the chair of surgery, largely from personal reasons; Dr. Charles Gatchell has resigned from the chair of practice, as has also Dr. A. E. Thomas, both

for purely personal reasons; Dr. W. S. White has resigned from skin and venereal diseases for business reasons, and Dr. C. A. Weirick has resigned the chair of sanitary science because he has not wished to continue in that department. This wholesale list of withdrawals makes somewhat of a hole in the faculty for the time but already it is being closed and the college will go on as before, not weaker, but if anything stronger. Harmony and toleration are essential factors in college work and life.

The American Institute of Homeopathy at Cleveland on the 17th of next month, the International Hahnemannian Association at the Chicago Beach Hotel, Chicago on the 24th. Attend both if you can, the former for its general sociability and specialties, the latter for its general good time and its Homeopathy. Both will do you good.

Dr. C. J. Lopez is president of the New Orleans Hahnemannian Association, which body seems to be taking on new energy and life. There should be a strong society, a good college and an excellent homeopathic hospital in the Crescent city. A little more personal energy among the profession and all these things are attainable.

The Missouri Homeopathic Institute held a very satisfactory and fairly well-attended meeting at St. Louis on the 28th, 29th and 30th of last month. The sessions were held in the Southern Hotel. As a rule the papers were above the average in quality, the authors not being limited to the 15 minute rule, and the discussions were very instructive. The Bureau of Legislation was of chief interest on account of the loss of the insane asylum at Fulton to the Homeopaths, after the best record for five years ever made in a public institution in the state. The number of patients had been nearly doubled, the percentage of cures greatly increased, and the expenses largely reduced. But Gov. Dockery, who tried to prevent Hahnemann's monument from being erected in Washington, found means to retire the Homeopaths from the asylum, notwithstanding their excellent record. This is the question now uppermost and the homeopathic profession, aided by the advice and assistance of the late Gov. Stevens, has on its war paint, and a vigorous campaign may be looked for. Dr. Young made a most excellent presiding officer and Dr. L. P. Crutcher had the business well in hand. The next meeting will be at Jefferson City, to "Beard the Lion in His Den." But the most vital Bureau in the program of a homeopathic society—that of Homeopathic Philosophy—was lacking. It was placed at the bottom of the list instead of at the head where it should have been, and both chairman and report were wanting. The most vital Bureau of a homeopathic society—like Hamlet—was omitted from this play. The State

society, the city society and the college at St. Louis sadly need a homeopathic revival, and if the signs of the times are not misleading it is not far off. There are many young men in St. Louis who never had a course on the Organon while at college enquiring for a better way, for a purer Homeopathy, and a club for the study of the Organon and Materia Medica is being organized. If Drs. Young, Fletcher, Jones, Mellies, Bunte, Brickbauer, with McElwee, Burleigh, Schott, Reed, Brady and Overman and others perhaps whom we did not meet will unite in earnest work in a bi-monthly society for the study of the principles of our science, they may not only be greatly benefitted personally but may revolutionize the practice of the city and state.

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### HERING GRADUATES NEWS-NOTES.

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Dr. Simons opens an office in Chicago.

Dr. Tenley is still in the city taking post-graduate work.

Dr. Weeks becomes interne at the Hahnemann Hospital Rechester, N. Y.

Dr. Kuznik is teaching anatomy in the city, Jennes College for a time.

Dr. Lindner is visiting Minnesota his old home before locating in practice.

Dr. Carr succeeds to an established practice in Somonauk, Ill., and is at work.

Dr. Aldrieh intends wrestling with the victims of cyclones in Topeka, Kans.

Dr. Evans locates in the vicinity of his old home Bellaire, O., or Wheeling, W. Va.

Dr. Wallace enters into partnership with Dr. S. E. Chapman at Napa, Cal., in Sanitarium work.

Dr. Vishanoff returns to his native Macedonia to dispense pure homeopathy to the modern Greeks.

Dr. Donohue remains in the city to take the State Board examination, after which she will practice in Decatur, Ill.

Dr. Podgorsky will remain in the city for post-graduate work in Materia Medica before returning to Poland to practice.

Dr. Hopkins will take the State Board examinations and then a hospital position in New York City before deciding on a location.

## HAHNEMANNIAN DIRECTORY.

For the convenience of readers who desire to recommend their patients to Hahnemannian physicians we publish a list of those who to the best of our knowledge, use the single remedy. We ask assistance in correcting, extending and perfecting this list in order to make it more useful. These cards, including subscription, \$3.00 per year, but names of all Hahnemannians will be retained in the Directory whether subscribers or not.

### Arkansas.

#### Eureka Springs,

Ellis, C. F.

#### Hot Springs,

Biggs, E. L.  
Halman, H. V.

### Alabama.

#### Normal,

Ford, Justina.

### California.

#### Los Angeles,

Glidden, J. I. Mackay, Henne Bldg.  
Hawkes, W. J., 620 Laughlin bldg.  
Waddell, W. E., 431 Douglas Bldg.

#### Marysville,

Tapley, J. F.

#### San Francisco,

Martin, Geo H., 606 Sutter St.  
Martin, Eleanor F., 606 Sutter St.  
McNeil, A., 611 Van Ness Ave.  
Selfridge, C. M., 400½ Haight St.  
Ledyard, W. E., Oakland.  
Underwood, Maro F., 21 Powell St.

#### San Luis Obispo,

Winslow, T. Hartley.

#### Santa Barbara,

Crooks, E. W.  
Stambach, Henry L.

#### Summerland,

Balch, E. T.,

#### Woodland,

Martin, J. T.

### Canada.

#### Hamilton,

Wickens, A. E.

#### Ottawa,

McLaren, D. C., 133 Maria St.  
Quackenbush, Arnley, 131 Main St.

### Toronto,

Adams, E. T.  
Hardy, E. A. P., 605 Spadina Ave.  
Hearn, Robert.  
Jones, D. Ogden.  
Tyrell, J. D. 589 Sherbourne Ave.

### Colorado.

### Denver,

Shannon, Sam'l F., Jacobson Bldg.

### Victor,

Lane, Frances Margaret.

### Connecticut.

### Bridgeport,

Gregory, Edward P., LaFayette St.

### Hartford,

Case, Erastus E., 902 Main St.

### Middletown,

Griffin, Louise A., 198 College St.

### Milford,

Nahm, Ida M., Laurel Beach.

### New Haven,

Goodrich, L. R., 93 Lake Place.

### Torrington,

Pulver, Grace C.

### Waterbury,

Morgan, A. R., 50 Leavenworth St.

### Delaware.

### Wilmington.

Mullins, J. W.

### District of Columbia.

### Washington,

Custis, J. B. Gregg, 912 15th St.  
Riggs, D. H., 1410-11th St.

### England.

### London,

Berridge, E. W., 48 Sussex  
Gardens. (W.)  
Clarke, John H., 30 Clarges St.  
Heath, Alfred, 114 Ebury St.  
Lewin, Octavia, 25 Wimpole St.  
Skinner, Thomas, 25 Somerset St.  
Thornett, A. Marian, 25 Wimpole.







**MR. JOHN B. YOUNG, Clinton, Ia.**  
Cured by Hahnemann in Paris.

# THE MEDICAL ADVANCE

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## AGARICUS MUSCARIUS.

S. L. GUILD-LEGGETT, M. D., Syracuse, N. Y.

Objectively, we find the Agaricus patient either flushed and hot or puffy, pale and blue.

The muscles about the face and eyes are constantly twitching, especially upon the right side; or they become paralyzed about the mouth with drooping corners and running saliva.

These patients reel with vertigo or totter, grasping for objects that shall enable them to stand; they are unable to correctly calculate their motions because of their rapid change of focal distances, causing objects to seem now near then far.

Their loquacity in delirium is remarkable, constant and unvarying, or furious, raging with extraordinary manifestations of strength. They become excited and pass rapidly from subject to subject, like Lachesis.

They have also many alternations of humor; they change from gaiety to sadness; from anxiety to indifference; are bright and pleasant one moment, peevish and quarrelsome the next; vexed with themselves, pitying themselves, laughing at themselves; disinclined to answer questions; disinclined for work, especially mental.

These patients are drowsy, yawning all day, even early in the morning soon after getting up. The yawning is sometimes followed by involuntary laughter, and is therefore a peculiar symptom.

Subjectively we find serious affection of nerves in all parts of the body.

Headaches begin with paroxysms of yawning and are > by moving slowly about (Puls.) and by stool.

Headaches may be accompanied by twitches and grimaces.

The eyes suffer from rapid focal changes during exertion of vision, such as reading and probably walking. Type seems to move and jump about while reading, and exertion < the twitching of eyes and lids.

The roof of the mouth is covered with aphthæ, and the teeth jerk painfully from contact with cold water.

The stomach has irritation to sneeze, with both nausea and vomiting.

The urine is intermittent in flow (Con.) and the patient must press with the voluntary muscles to make it pass.

The male suffers a great < of weakness, uneasiness and sleepiness after coition.

The female has increased sexual desire; *intolerable* bearing down in pelvic organs, with a desire to sit, like Liliun, Natrum and Sepia.

The cough is peculiar and ends in a sneeze (Squilla).

The sleep is peculiar in that the subject wakens often, and is at once wide awake; he also twitches on falling asleep, twitches everywhere.

There is a characteristic nerve pain in some of the patients needing Agaricus, described as a pricking as from cold needles. They also exhibit convulsions in several successive spasms; spasms at short intervals; spasms with tremor. They show great weakness, excessive loss of strength.

Agaricus produces that numbness of the legs *on crossing them* called going to sleep. It produces chilliness in the open air, or on slightest motion, even raising the bed clothes (Nux), but its sweat is greasy, not offensive, and often only on the front of the body; it is cold on the face, chest and neck.

The Agaricus patient is pronouncedly affected in the

skin. It *burns, itches, swells*, looks as if it *had been frozen*. This burning and itching of the skin may, or sometimes does, follow coitus. Of course these symptoms of the skin, causing so great distress, has led to its effectual use in the cure of chilblains. The itching, burning of first one place then another may take place without eruption.

A peculiar condition is found in the < from pressure on dorsal spine which causes involuntary laughter. The general < and > are found in all the best works on *Materia Medica*, so I will not quote them here.

CASE I. Dr. John Hall cites a case of threatened miscarriage where the pains were frequent and strong without special progress. Examination showed that the violent contractions were confined to the abdominal muscles, and were not at all in the uterus. The pains were so violent that it was difficult to prevent the uterus from being "pushed through the vulva." The bearing down was intolerable. The patient was sanguine and sensitive. *Agaricus 59m (F)* completely arrested the pains and she made rapid recovery.

CASE II. Dr. Waddell reported a case of swelling, redness, itching and burning of the toes, occurring every spring and fall for eight years, and for which chloroform had been the only relief obtained, cured without return in more than a year, with *Agaricus 30*.

CASE III. Dr. Rushmore reports a cure of eye symptoms that were < by reading, light, in cold air and twilight, by closing eyes, by exertion. The eyes felt hot, the spine was sensitive to touch in various parts, the feet were cold, swollen and troublesome from chilblains, but the whole trouble disappeared under *Agaricus 900*.

NOTE IV. Dr. E. J. Lee notes that the bearing down pains of *Agaricus* are intolerable, and that the urine has a shining pellicle upon its surface, and a red sediment.

CASE V is the report of the cure of a youth who had a palpitation *only when standing*, by *Agaricus*.

CASE VI was a case of spasms, at short intervals, with jerking in the right side of body and extremities, which had lasted three hours and which yielded to *Agaricus* within

fifteen minutes, making a rapid and comfortable recovery.

CASE VII. Dr. Schumacher had applied Agaricus to diagonally moving complaints, upper right and lower left; to cases where black or brown spots moving before the eyes, like flies; had found these subjects > by sleep and < by singing.

He reported a case of gonorrhœa in a young man who had led a *fast life* of sexual excesses, and whose condition showed marked *debility* and *tremor*. Agaricus cured.

He reported another case in which the patient, a car driver, young, married, had such severe attacks of chilblains as would cause him to cry like a child. Agaricus cured.

Dr. Seward found Agaricus more often indicated in chilblains than Pulsatilla.

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### PYOTHORAX—POST PLEURO PNEUMONIA.

HORACE P. HOLMES, M. D., Omaha.

This, to me, very interesting case is written for this society\* from notes taken at the time.

Albert Lind, twenty years of age, was taken with a violent cold in the month of March, 1893. He was placed under old school treatment for what must have been a pleuro-pneumonia. The violent cough and pain in the side were evidently suppressed at the onset by the irregular treatment and the case was treated for some kind of organic heart trouble, at least that was the diagnosis given the family for five or six weeks. From time to time four different physicians saw and prescribed for him, until at last the case was abandoned as hopeless and the physician discharged, as the father thought it unnecessary to incur a larger doctor's bill if his son was not to recover.

Through the influence of mutual friends I was called to examine the patient on May 5, 1893. Diagnosis, typhoid pneumonia. Prognosis, desperate, but would not abandon

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\*Nebraska State Society.

treatment while there was life. Prescription, Phosphorus.

I noticed in this case a peculiar form of delirium which is interesting enough to report. I suspected delirium, but my most careful watching and questioning of the mother did not reveal it. The patient was quiet, apparently rational, gentle, answering all questions respectfully and promptly, and with a deliberation that made the answers seem the more intelligent. After treating him several days and still failing to get a confession of delirium from the mother I asked the patient where he felt the most pain. He seemed to think carefully, so as to give the most correct answer, and then replied with all the frankness in the world, "Well, down about twenty-third street." And yet in all my visits, though certain the patient was not fully rational, I had been unable to gain any positive evidence of delirium. This shows that sometimes our patients may really be in a delirium and irresponsible when we cannot prove it so.

I shall not enter into the details of symptoms and remedies for this stage of the case. Suffice it to say that under the influence of strictly homeopathic treatment the patient rapidly improved, so that I made my last visit to him on the 28th of May. He was up and about, gaining in strength and flesh as one would expect from such a malady. I attended our medical congresses in Chicago in June, and after my return saw my patient as an office patient. There remained quite a consolidation of the right lung, and the heart sounds could be so plainly heard over the whole region of the lower half of the right lung that one might have believed the heart was displaced to the right side of the sternum.

In August the patient ceased his visits, as he felt he was incurring too large an indebtedness. But, being taken worse a month later, I visited him at his home and found pain and sensitiveness of the right side at the base of the lung. Afterwards he came to my office and at length an abscess seemed pointing three inches below and posterior to the right nipple. This I opened superficially on the

20th of October and a yellow, creamy pus discharged to the amount of a half pint. The canal took such a tortuous course that I could not probe it, and I hesitated to make a freer opening.

Later on I introduced a probe to the depth of four inches and could swing it in every direction without striking anything but the posterior wall. There was a gradual and steady diminution in the quantity of pus. At length there seemed evidences of the pus pocketing below the opening. I dilated with steel sounds, inserted a soft catheter attached to a Black's pump in the form of an aspirator and drew off ten ounces of quite thick pus of a slightly greenish hue. This was done after aspirating an inch below the opening already made and getting nothing.

The cavity was now thoroughly cleansed with hot water and a drainage tube four inches long left in the opening. At this time the patient showed pyæmic conditions. His skin bore many small boils and pimples, there were chills and night sweats, the feet were badly swollen, and the ends of the fingers were club shaped. The best the patient could do with a spirometer was ninety cubic inches.

During the next month a complete recovery was brought about. The patient had gained fifteen pounds. At the first of my treatment he could not have weighed over one hundred pounds; now he weighed one hundred and fifty. The cavity was washed daily with hot water and then a solution of pyrozone.

But three remedies were used internally during all this treatment: Hepar sulphur, Silicea and Pyrogen. The spirometer measurement showed an increase to one hundred and fifty, a gain of sixty cubic inches. The chills and night sweats subsided, the swelling entirely left the feet and the club at the finger ends disappeared.

By the middle of February the amount of pus did not exceed a teaspoonful a day. The drainage tube was then removed trusting to the wound opening to finish the drainage. This closed up by granulation a few days later, and on the 27th of February the patient received his last treat



ment from me. I watched him for several months and saw him a strong, robust, able-bodied man. There was no return of the pyothorax.

In reviewing this case after these many years I can see little room for improvement. More radical measures might have been adopted had each particular stage been recognized at the moment. I have heard of the free opening of the pleural cavity with resection of ribs, curettage and all that, but I have known of no results better than in this case.

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### RATIONAL THERAPEUTICS.

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In a paper read before the Syracuse Academy of Medicine several months ago, it was contended that the business policy of manufacturing pharmacists had seriously helped to turn many prescribers from those principles of treatment that experience had proven to be sound and practicable.

It was charged that medical practice too often interfered with and upset the defence initiated by the organism for the relief and cure of diseased conditions. Again, that excessive zeal in combating symptoms sometimes did more harm than good. That in his desire to "meet the indications," as the expression runs, the prescriber frequently combated mere symptoms instead of the pathological changes that were the cause of such symptoms. Finally, that with the abundance of ready-made combinations at hand he gave too much medicine, he gave it too often, and he gave too many kinds of medicines; and as a corollary to these propositions, it was pointed out that the patient was made to suffer from new symptoms produced by the treatment, in addition to those legitimately resulting from disease.

It is worth while, perhaps, to pause a moment and take stock, as it were, of the numerous aims, tendencies and methods of therapeutics. It is worth while to rest from the

not wholly satisfactory task of trying to verify the glittering claims made by their promoters for the multitude of new remedies sent forth from domestic and foreign laboratories. It is even worth while to desist from the breathless chase of the latest fashionable microbe, and consider leisurely a few truths, that have stood the test of time and experience, that have been sheet-anchors in hours of need, and that have been included among the fundamental articles of belief of the wisest in our profession, and that will survive in the future of medicine when half of the lauded specifics of recent reputation shall have been cast into the rubbish heap of therapeutic delusions. It ought to go without saying that in this paper there is no attempt to belittle the work, nor ignore the remarkable achievements of the day that in any way help the cause of suffering humanity. The work has been wonderful, and the workers are entitled to due recognition. The outlook and promise of relief for many of the scourges of life is most encouraging; but all results are not in the line of progress, and while it is right to praise, it is not safe to forget the experiences—often mortifying—of periods that are past, and that have helped make up the history of the art of medicine.

That very wise old general practitioner—and his name must have been legion—who confessed from time to time, that in his early practice he used a hundred remedies for the cure of one disease but as the years passed and he acquired knowledge, genuine knowledge, boiled down, crystallized and valuable, then he “cured a hundred diseases with one remedy”—that physician, if alive to day, would appreciate that now there are a thousand remedies for one disease, and the pity of it is that the thousand are all in use. He would still be able to do more good and work more cures than many can with their hundreds of medicines, and he would do far less harm than the tyro whose right hand knoweth not what his left hand doeth.

The history of the art of medicine is eloquent with warning against too much medicine and too many medicines. Particularly in the management of acute diseases has it

been demonstrated that too much and ill-judged interference has killed patients, where nature would have saved them if left alone. The chronicles of our art disclose the melancholy truth that the sick man may suffer more from his doctor than from his disease. To admit this is not to argue that medicines should not be used freely and energetically. But remedies should be selected and employed in such a manner as not to conflict with nature, so as not to offset the good that nature tries to bring about. The argument is in favor of the smallest number of active remedies and the smallest quantities of them that a given case requires. So well known a therapist as Dr. Hobart Amory Hare says, "nature often produces her most rapid cures when left alone." Austin Flint says in his *Practice of Medicine*, "we should be content with doing nothing when ignorant how to do good." He emphasizes this and makes the meaning plainer when he says, "the severity of the disease, and the danger of the patient, be they ever so great, do not alone constitute grounds for active measures." And it will be found that great prescribers and clinicians famous for their skill, almost without exception exhort us to simplicity in the matter of treatment—simplicity coupled with careful study and accurate knowledge of conditions, and especially the tendencies of disease in each individual case. Too often, far too often, the individual case is studied just sufficiently to enable the medical adviser to give a name to the disease, and then follows the search for novelties listed in the text-books, or perhaps in the catalogue of the druggist, novelties that are expected to cure the corresponding disease—the name of the disease being the guide that determines the choice of remedies. The plan thus decided upon is further developed by adding special medicines for special symptoms and finally supplemented by free concession to whatever fad happens to be popular. For example, in the older days quinine used to be exhibited as an antidote to malaria always assumed to be present, and some whiskey must be added to sustain the vital forces. Now, at the present time when "nutrition" has the floor, proprietary extracts and

laboratory foods are fed the sufferer and with them he gets pepsin for his "stomach's sake," and other infirmities. His heart must be boosted with digitalis, and strychnine is thrown in to make the combination solid. This method is an example of what Lauder Brunton calls the "therapeutics of fancy as distinguished from the therapeutics of fact." It is an example of that blemish on medical practice known as "routine treatment." It is an exaggeration and distortion of the axiom, "meet the indications," which is supposed to mean, pay attention to every sign and symptom, and do something for it. As a matter of fact the great clinicians who have been geniuses at treatment, often do very little. They study the individual who is sick quite as much as his disease, and when the *rationale* of the various symptoms—which, as H. C. Wood says, are only the "surface-play" of disease—has been made plain to them, they lay out a plan of treatment which is simple, not calling for many medicines, and which may ignore absolutely twenty out of twenty-five of the symptoms present. Prescribers of this quality understand well that some perversions of function, that help to make up the picture of disease, require to be combated. while others require to be favored, and many others should be let alone.

The triumphs of a sound therapy are found among those acute forms of illness that are not severe enough to be necessarily fatal, but which kill under multiple dosing. Some patients are the victims of too much zeal. The dictum of the philosopher Talleyrand applies to therapeutics as well as to morals. Perhaps sound therapy secures more obvious and positive triumphs in the management of those chronic cases that are not incurable, or if so, may be immensely relieved, and promptly, by skillful treatment, as distinguished from that method that aims at every symptom with some form of therapeutic bullet which misses the complaint but hits the patient.

It will not be amiss before trying to make a sort of categorical statement of the articles of belief that enter into the Confession of Faith of the rational therapist, to call

attention to specific damage sometimes found to come from the therapeutic bullet referred to in the preceding paragraph. This damage is various and may be easily serious. To begin with, ill-judged medication may produce fever, headache, delirium, sleeplessness, cough, dyspnoea, loss of appetite and indigestion, great or fatal weakness of the heart, the typhoid condition, vomiting, purging, general prostration, sweating, hallucinations, vertigo, and so on. Every careful observer has seen these results, and much testimony to the evil possibilities of drugs could be furnished were it necessary.

Now, after this arraignment of certain tendencies in practice, what shall be said of rational therapeutics? What are the principles of rational therapeutics? What is the foundation of such therapeutics? It would seem as though knowledge of the natural history of disease uninfluenced by active medication ought to be considered of first importance. It is not saying too much to assert that some never acquire much of this information.

It would appear rational not to prescribe so as to interfere with or antagonize the conservative efforts of the organism.

One should always bear in mind the self-limitation of a large number of diseases, and hence may sometimes wait and watch to advantage. *A policy of masterly inactivity has been deemed wise under certain circumstances. Colored water is sometimes the most useful medicine.*

The problem of treatment must be kept as simple as possible by the exhibition of few remedies well selected.

Study the patient just as much as the ailments he suffers from. (Some have advised to study his relatives even more.)

Try to remove the cause of symptoms, relieve pain, and make the sufferer comfortable.

Avoid a large number of remedies for the reason that they are wasted; they neutralize one another even when they do not harm the patient.

Prescribe for conditions, rather than diseases.

Watch constantly for symptoms that may be the result of remedies prescribed for previous symptoms.

It is often rational therapeutics to withdraw all medicine for a time, instead administering placebos; systematic study of diseases treated in this manner will afford a revelation to him who has never tried it.

Of course, an enumeration of all the principles of rational therapeutics might, and probably should, include much more; but it has not seemed best to attempt to cover more ground in a limited paper on this subject. The principles that govern the rational treatment of diseases by drugs are of great importance, and these hints are at least pertinent. Notwithstanding the new paths that lead on to unknown fields which promise a rich harvest, it is not possible to forsake the old roads, roads that have been rough and where many have stumbled. This paper may be best finished by quoting from that eminently rational therapist, Dr. J. Milner Fothergill. He says: "There is much to be done, much to be learned, much to be investigated, before therapeutics shall have attained their ultimate evolution and their maximum of utility. But there are ardent minds, enthusiastic and undaunted workers, who form a guild, which will in time, and with infinite patience, lay deep and firm the foundations of a rational therapeusis, and erect there upon a structure which will comprise and hold in intelligent array the facts gathered by a long-existing and industrious empiricism, as well as the information given by enterprising and well-maintained physiological inquiry."—*Philadelphia Medical Journal*, April 19, 1902.

["Would some power the giftie gae us." This lesson of over-drugging, of empirical fad prescribing, of giving a new remedy for every new symptom, even a curative one, applies to the liberal homeopath as well as the modern allopath. How many will take the hint from this, and "when in doubt, don't." If you do not know what to do do nothing, give the patient the benefit of the doubt; give placebo until the symptoms become clear and the call for a new remedy, based on the totality, becomes imperative. This is what Hahnemann teaches from the first to the last page of the *Organon*.—ED.]

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CHARLES E. FISHER, M. D., Chicago.

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No more fitting time could occur at which to say a few words about the value of homeopathic treatment in connection with surgical diseases and operations than now, when our most eminent physician—he who brought surgery and Homeopathy together when it was the ridicule of the old school that Homeopathy had no surgery and no surgeons, and who made even his old school antagonists recognize and bow before his surgical acumen and ability—has been called to the other shore.

William Tod Helmuth died May 14th, at the age of sixty-seven years. His name for a quarter of a century was synonymous with "Leader in Homeopathic Surgery." During recent years he has not kept before the profession so much as an operator and teacher as a poet laureate and distinguished author, yet up to the very last hour of his life he was actively identified with the surgery of our school, and was loyal to his belief that Homeopathy possesses a value that no surgeon, of whatever school of practice, can afford to overlook.

Dr. Helmuth's entrance upon the professional field was made at a day when homeopaths were homeopaths. There was no half-heartedness, no compromise with allopathic heresy, no partnerships with poly-pharmaceutical seductions, no following after every will-o'-the-wisp that glimmered through the darkness of empiricism, and he carried the true article into his surgical practice. He found Aconite just as useful in a fever following an operation as in a synochal fever. He found Arnica just as useful in the bruised, painful, and aching sufferings of surgery as in those of the sick room. He found Hypericum a superb remedy in injuries of nerve tissue and in the surgery of tumors of the nerves, and he found the marigold, our Calendula, a remedy of prime value in lacerated or torn wounds.

Nor did he confine his Homeopathy to external applica-

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\* Kentucky State Society.

tions of the selected agent. *Hypericum* was given internally, both before and after operation, wherever large nerve trunks had to be attacked or were likely to be involved in the operation; not because it was *Hypericum*, but because the pathogenesis of the drug gives so strongly its affinity for nervous structure and its applicability to nerve injuries.

He gave *Calendula* in lacerated and torn wounds while applying it externally. He gave *Symphytum* in fractures of bones because of its homeopathicity to symptoms arising in fractures. *Arnica* for bruised tendons and joints and *Rhus* for similar injuries, when its symptoms covered the case, were among his daily prescriptions.

*Silicea* to prevent suppuration or restrict it; *Hepar sulphur* to hasten abscess formation where its avoidance was impossible; *Mercurius* in bone suppurations; *Hecla lava* in osteitis and periostitis; Nitric acid in cancerous hemorrhages; *Carbo vegetabilis*, *Sulphur*, *Nux* and *Æsculus* in hemorrhoids, in connection with surgery or separate and distinct, these were among Helmuth's early homeopathic sowings, and they helped make him the successful surgeon he was. Never, not even during the height of surgical precision due to asepsis and antisepsis, did he go away from the homeopathic law or depart from the homeopathic way. He stayed a homeopathic surgeon until death, because he obtained better results with homeopathic remedies in connection with his surgery than he did with his surgery without them.

In constructing the Homeopathic Text-Book of Surgery it was my great desire to make it a truly homeopathic volume. In my correspondence with the corps of authors I insisted upon the addition of extensive homeopathic therapeutics covering the subjects assigned them, but only in a few instances could I secure the coöperation of the surgeons comprising the staff of authors toward this important end. On the other hand, three of the best known and best situated surgeons of our profession, men who could have done a great deal for us in this respect if they had been as homeopathic as Helmuth always was declined to recognize the



work of themselves and colleagues because it had attached to their parts suggestive indications for homeopathic remedies in the surgical disorders of which they treated. How opposite this to the surgical indications offered in the early days by Helmuth, upon which Homeopathy won its surgical reputation! He was a surgeon, but he was also a homeopath. And I have heard him say many a time that without his homeopathic remedies to aid him he would have been but a very ordinary surgeon at that. This can hardly be granted, because we cannot conceive that Wm. Tod Helmuth could have been "ordinary" in any part of his professional work. But he gave great credit to Homeopathy in connection with surgery, and his experience was so extensive and his success so marked that we who follow him can surely afford to profit by his advice and practice, and be thoroughly homeopathic in all the surgery we attempt to do.

Besides the remedies which have been mentioned there are many others which are of value in connection with surgical diseases and states. Staphysagria should never be overlooked in incised abdominal wounds. It allays the sharp, cutting, stinging pains of the knife, and is an aid of no mean value in preventing abdominal shock. Its sphere of influence is largely with the solar and other abdominal plexuses, hence its applicability in abdominal surgery.

Sulphur and Calcarea, as indicated, prepare their particular types for surgical work. The constitution should never be overlooked in major clinical surgery. The suited remedy, Sulphur, Psorinum, Tuberculinum, Iodine, Calcarea, Kali carbonicum, Graphites, and other polychrests meet the constitutional peculiarities and idiosyncrasies of people who have tumors, rickets, tuberculosis of bone, deformities, carcinomas, glandular growths, unsightly nevi, all kinds of open sores, varicoses, epithelioma, lupus and other destructive degenerations. These remedies, as indicated, and I desire to dwell upon these two words, act as handmaids to surgery, oftentimes assisting materially toward promptness of recovery, and not infrequently greatly minimizing the surgical status of the case. There is a

gold mine of surgical wealth in the homeopathic materia medica in connection with surgery, and that surgeon who searches that mine most diligently will find the most nuggets for his surgical cases. Bear the patient, in his or her entirety, in mind in searching for the surgical simillimum, and its finding will be comparatively easy. For, after all that has been said and done, the wisdom of Hahnemann in relation to therapeutics has never been surpassed. It is the constitution of the patient, the individual himself, who is in ill health, and whether in medical or surgical field we pursue our labors we will get the best returns by exhibiting the constitutional homeopathic medicine in all profound states of the system.

Hahnemannian-Helmuthian Homeopathy has an established and deserving place in the therapeusis of surgery. This has been demonstrated so many times as to have become a truism not to be gainsaid or called in question. It but remains for every homeopathic physician who essays to be a surgeon to continue to exemplify it as did Helmuth, and "Homeopathic Surgery" will become an acknowledged accomplishment that will be the means of saving a great many lives and a great deal of suffering, and of winning encomiums and deserved compensation for those who practice it.

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### MEAT-EATING IS AN ECONOMIC QUESTION.

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DR. SARAH H. STEVENSON.

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The entire subject concerning the nutritive value of foods needs revising. The heat unit is no longer the unit of measurement, according to modern physiological chemistry. Hereafter the value of a food or that of a drug will be measured by its ions.\* In other words the unit of measurement will be electrical. And yet nature has not left

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\*The strength, potency or curative "value" of a medicine since Hahnemann's discovery has been measured by its "ions," its dynamic vitality.

human life unguarded awaiting the discoveries of science. By an unerring instinct animal life everywhere seeks its appropriate sustenance.

In the highest of mammalian class the young life is protected by the supply furnished directly from the mother. This supply not only sustains life, but in the case of the young child increases its growth at the rate of half a pound per week, and no matter how much we "sterilize" or how much we "modify," the original article is still the ideal food for the infant. Science may discover that the difference between "mother's milk" and "laboratory milk" is one of "ions." The instincts of the race have been upon the whole for the good of the race, and so all peoples have evolved a bill of fare more or less nutritive.

The fact that a race survives is proof that its food has sustained life, and in the absence of scientific data it is worth our while to find out what articles of food have stood the test of experience. We find that able, finely developed human bodies may be built up and sustained by vegetable diet. The Oriental races are certainly not lacking in fine muscular development, while among domestic animals the horse and the ox are proof of the same proposition. But for the fact that animal food is supplied by nature for the young animal we should be ready to declare in favor of purely vegetable diet. Those who maintain the vegetarian idea must explain away the fact that nature has provided an animal diet for the mammalian young.

Then we have the egg, another purely animal product; which ages of experience has proven to be most nutritious. While awaiting the analysis of foods according to their electrical values, it would seem only fair to add milk and its products, butter and cheese, and eggs to our vegetable diet. If to these we add fish, we can well afford to bid farewell to pigs, cattle, and sheep as necessities of diet. They are not necessities, as is well proven by the strong people who live and work entirely without them. Butter, cream, olive oil, and nuts abundantly supply the essential amount of fat, while milk, eggs, and the leguminous vegetables, such as

peas and beans, furnish an abundance of albumen, while fruits gratify taste and supply healthful acids and salts. Thus is furnished a variety which experience proves a necessity.

The craving for meat is not because meat is a necessity, but because we like the taste of meat, just as many like the taste of wine or other alcoholic beverages. The taste for an article does not imply its necessity as a part of one's diet. We have classified foods as albumens, fats, and starches, and have prepared tables giving the proportionate amounts of each for a wholesome, nutritious diet.

It will be strange if, when our tables of foods shall be arranged according to their electrical value, they shall differ materially from those tables already established. We find a striking illustration of the instinctive preservation of life in the diet evolved by our New England ancestry. They were little learned in science and knew practically nothing of physiological chemistry, yet we doubt much if the most scientific tables can suggest a better work bill of fare than that originated by the New Englander, viz.: baked beans with pork, codfish, and brown bread. This, with New England apples and cider, has developed a race whose physical and intellectual prowess is unique in the history of man.

The question of meat eating, especially of beef eating, has passed from the world of science into that of economics. The economical question promises to do what science has failed to do, viz.: convince man that he is not dependent upon beef. England, the home of roast beef, has demonstrated through its doctors that this national dish is responsible for a large proportion of the chronic diseases of adult life and old age. Gout and roast beef are the Englishman's guides to the grave. Not content with the roast, the extract is made to do duty all through the invalid years, adding fuel to the flame.

The ethical question involved in the slaughter of animals is an important one, but it is not involved in the present controversy. Education has been gradually leading up to the present crisis, and the trust is about to become the ally of science.

S. E. CHAPMAN, M. D., Napa, California.

S. A. B., aged 80, has been a great sufferer from eczema since 18 years of age. The first manifestations of the skin disease appeared soon after vaccination. There was no history of heredity, and Mr. B. positively asserts that he owes all his many years of suffering to inoculation. It is needless to say that during this period of more than sixty years he has suffered many things from many physicians without permanent relief. He came into my hands a few months since for the treatment of a very troublesome cough. All external symptoms of the eczema were entirely absent at this time, and the chest symptoms had immediately followed its disappearance—about four weeks prior to my first interview.

THE ANAMNESIS.

1. Cough < at night > on ying down and on rising the morning.
2. Coughs a long time before expectorating.
3. Sputa yellowish, salty; sometimes puriform.
4. Sense of pressure on the chest. Can expand the lungs, but with great effort.
5. Chest sore, < from coughing.
6. Exhausted after every attack of coughing.
7. Malaria; tired and sleepy all the time.
8. Very sensitive to damp, cold air.
9. Loss of appetite.
10. Mucus rales all over both lungs.
11. The eczema has always been < in winter.
12. Intense itching, nights, has been a chief feature of the eczema.

Psorinum cm., one dose.

Within forty-eight hours there was marked improvement in the chest symptoms, but the eczema reappeared all over the body. The itching drove him nearly frantic, and only a liberal use of Sac. lac. prevented him from resorting to his former topical applications. He is at this writing quite comfortable, eating and sleeping well. I do not doubt

that he can be kept quite comfortable so far as the eczema is concerned by an occasional dose of Psorinum—possibly Sulphur.

This is but one case among multiplied thousands which exemplify the evils chargeable to vaccination. If the evil began and left off with himself it would be bad enough; but I am acquainted with four generations of this patient's progeny, and there are distinct psoric manifestations running through the whole line, all traceable to the one simple act of vaccination.

CASE II. Dottie S., aged 18 months, was attacked with whooping cough when three or four months old. Has never been free from cough since.

Cough usually dry.

It is < evenings, awakens her immediately on going to sleep. This occurs many times until near midnight.

Cough sometimes has croupy sound.

Hepar sulph. cm. one dose. This dose was given about three months ago with immediate relief, and there has been no reason to repeat the dose.

CASE III. J. L. came to me three weeks since for treatment of paraphymosis. He is an old sinner, having but a few weeks previously been cured (?) of gonorrhœa. He was suffering from pains in groins, extending into testes. Also general muscular soreness; joints stiff and lame. The urethral discharge had been suppressed *secundum artum*.

The paraphymosis was reduced by the use of olive oil and manipulation.

Medorrhinum 1m., three doses at intervals of one hour Sac. lac. three times daily.

He returned in three or four days with a profuse cream-like urethral discharge. It was so profuse as to alarm him saying that in all his numerous attacks of gonorrhœa he had never seen anything like it. I explained matters to him, congratulated him, and gave him a liberal quantity of Placebo to be taken frequently, owing to the urgency of the symptoms. At the end of another week he returned, flow about stopped, and there remained but a slight burning at the meatus on urinating. Medorrhinum cm. one dose.

At this writing he is entirely cured.

## ACUTE INDIGESTION: CACTUS GRANDIFLORUS.

D. OG DEN JONES, M. D., L. R. C. P., (London,) Toronto.

Z. J., aged 64 years, rheumatic diathesis, energetic, was suffering intense *constricting*, clutching pain in region of stomach, going through to back between the shoulders after everything she ate, no matter how simple her diet. She was afraid to eat anything and was starving herself.

Her expression was *anxious* and *distressed*.

Face dark red, vessels turgid.

Intense congestion of head, with heat; rest of body cold, had to put on wraps.

Hands icy cold.

Flatulency; obliged to loosen her clothes.

Was < at 3 A. M. Would have a very severe attack at this hour with retching.

Pain caused intense vomiting and retching on one occasion.

The infra-orbital capillaries were ruptured with hemorrhage into the cellular tissue.

Intense congestion of retinal vessels with pain in the eyes, so much so I was afraid of a retinal hemorrhage.

The vessels of the head were so congested apoplexy was threatened.

One dose of Cactus 200 relieved in a few minutes and eventually cured. She had one or two slight attacks following for which a placebo was given. She can now—three weeks since severe attack—enjoy her ordinary diet without any discomfort whatever.

### LACERATED CORNEA.

H. H., aged 11 years, came to my out door eye and ear clinic, Grace Hospital, April 23d, and was admitted at once as an in-patient. On the 21st a younger brother had thrown a piece of broken bottle striking him in the right eye, causing a jagged wound from the center of the cornea downwards and inwards into the "dangerous zone" for about a

millimeter. He was seen the day before by Dr. Evans who prescribed Aconite, and referred him to me.

The eye was internally congested, the cornea wrinkled, as the anterior chamber was empty, the aqueous having escaped, and was kept drained by the iris which had prolapsed into the wound, and was firmly held between the cut edges. The next morning, two days and a half after the injury, under cocaine, I drew the iris out of the wound with iridectomy forceps and cut off all I could. I may say the night before I had ordered two drops of Atropine, four grains to the ounce, to be dropped into the eye every hour on the chance of its dilating the pupil sufficiently to draw the iris out of the wound, but without effect. I gave a dose of Calendula cm. and continued the Atropine as a splint to keep the iris quiet. Both eyes were bandaged and he was placed in a dark room. Within twelve hours the anterior chamber had refilled and there was no more leakage. The eye was washed out once a day with normal saline solution. On the 30th there being an excessive amount of lymph between the edges of the wound he received Silicea cm. which quickly removed it. He was discharged on the 9th of this month with of course a scar, but with normal vision. The lens may or may not have been wounded, though there is at present a posterior synechia.

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### A SIMPLE DRESSING.

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J. A. KIRKPATRICK, M. D., Chicago.

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To avoid sutures in closing superficial wounds take strips of aseptic adhesive plaster three-eighths of an inch wide and proper length. Trim the edges at the middle until only a good thread is left. Take two such strips, fasten one end of each on opposite sides of the wound so the narrow portions will cross the coated edges and pull the parts together, and use as many pairs as are necessary to coapt the edges of the wound perfectly. Then apply the absorb-



ent dressings outside the straps and fasten the compress by bandage.

The most perfect results can be obtained by this method without stitches. The coated edges are open to inspection and the dressings can be changed as often as necessary.

#### TO AVOID CIRCUMCISION.

Fill an ordinary piston syringe with sterilized warm water. Insert the end of the nozzle into the prepuce; grasp with thumb and finger, then force in water and distend the foreskin. If there are firm adhesions it may be necessary to withdraw the syringe, still holding the water in, and use a probe to assist in breaking up the adhesions. In case of phimosis use Olive oil, sterilized, instead of water until inflammation subsides, then break up the adhesions by the hydraulic pressure as described above.

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### THE HOMEOPATHIC TREATMENT OF FEVERS.

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BY W. D. NORWOOD, M. D., Shreveport, La.

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For decades the word "Fever" in the South has carried with it an idea of calomel, purgation and quinine saturation. Within the last few years a better light has dawned and the doses of these drugs have been steadily decreased until the best allopaths of our most malarial districts now give calomel in  $\frac{1}{16}$  grain doses, the homeopathic 1x, where five years ago they gave it in ten and even twenty grain doses.

That a malarial fever could be cured without quinine in large doses was laughed to scorn by men who to-day never think of prescribing it in continued fevers. I remember well the first epidemic of chills and fever I treated after coming south, as a young doctor. The homes of my friends' plantation negroes, lay some ten miles from my location. A medical friend, a man of my own age and a recent graduate of an allopathic college, became interested in reports I made of cures without quinine. After some persuasion he agreed to accompany me on my next visit to

these ague cases, promising to believe what he saw of my cures and that only.

All the "hands" on a large cotton plantation were affected with chills and fevers that were marked by characteristic "break-bone" symptoms. The chills would come in the forenoon of each day and be accompanied by most intense aching all over the body. The patients complained of great thirst during the chill; but every sip of water caused "shivers" to chase one another so rapidly up and down the spine, water was dispensed with for the time at least.

*Eupatorium Perfoliatum*, the old "bone-set" of our forefathers' medicine chest, cured these patients, one and all. It was given in a dose, too, that my friend declared was "no medicine, and only poor sugar." To this day, Dr. R., still a staunch allopath, has not understood "what broke those chills."

Continued Fevers, be they typhoid or malarial or neither, recover more promptly and more thoroughly under homeopathic medication than under any other system now or ever in vogue. A proper selection of the remedy, together with a skin kept active by warm or cool sponging and plenty of pure water for drinking, will bring about results that are superior to those obtained by any drugging indulged in by the best posted allopathic physicians in any community. I append indications for a few remedies from which a selection can be made. Results are eloquent.

#### SOME FEVER REMEDIES.

**ACONITE**:—This remedy, the "monkshood" is usually the first thought of in fevers which come on from cold or originate from some cause other than a deeply-acting poison. Aconite is usually a surface remedy. Its fevers are accompanied by restlessness and impatience. Fear of death or impending disaster is present. The skin is hot and dry and the pulse is quick and snappy.

**BELLADONNA**:—Just a step further along in the febrile process, Belladonna is needed to quell the storm. Here the excited circulation has localized in an inflammation of some part of the body. An abscess may be forming, the skin

may be suffused with a red rash, or the brain may show its congestion by excitability in the patient's thoughts and acts. Headache of a throbbing nature is complained of and all the arteries are full. If there is bleeding from any organ, the blood is bright red and hot.

**FERRUM PHOSPHORICUM:**—The Phosphate of Iron lies midway between Aconite and Belladonna. In a way, it may be considered a substitute for either. Possibly it is a little more inflammatory than Aconite and shows less inflammation than Belladonna. It is the remedy for catarrh of the chest of infants and young children when this dire disease is in its first stages. The little patient breathes with great rapidity and shows need for more air than can be crowded into the congested lungs.

**VERATRUM VIRIDE:**—This remedy finds its use in those intensely hot fevers which threaten life immediately by reason of spasms which are present or impend. It has some of the Belladonna symptoms to a magnified degree.

**PULSATILLA:**—The fever which Pulsatilla cures does not run very high. The tongue shows a heavy, yellow coat and the bowels are apt to be loose. Thirst is almost absent. Pulsatilla's most prominent symptom is its mental state— one of tearful despair. The patient has tears and is "prepared to shed them now." Many decided blondes require Pulsatilla and are benefitted by the remedy when this tearfulness is present.

**MERCURY.**—This abused liver-purge of the old school becomes a valuable remedy in the hands of men who are guided by the clearer medical light. The fevers in which we prescribe this remedy present a physically depressed patient. The tongue is heavily coated yellow or brown and the skin and eyes are bile-tinged. The perspiration is profuse at times and has a bad odor. The fever runs higher at night.

**NATRUM MURIATICUM.**—In this substance we have a remedy which does for us what Quinine so often fails to do for the allopaths. Those chills and fevers which are accompanied by fever-blisters on the lips, and which recur

again and again despite a "cure" by Quinine, are most readily mastered by Natrum muriaticum. The fever patient is often a malaria-soaked fellow; one whose skin is sallow and whose blood is thin. He often comes from a swampy district or has broken down his constitution by a trip to the seashore in search of health. The chills are apt to occur about 10 or 11 A. M., and fever then runs riot all afternoon.

**ARSENICUM.**—Arsenic is indicated in those fevers of a malarial or typhoid type in which the patient is possessed by a demon of restlessness. He tosses and turns and demands sips of cold water; although he already looks weak and worn enough to be quiet and give rest to his depleted body.

**GELSEMIUM.**—The Yellow Jeasemine is a plant which has in the last decade gained great prominence as a remedy in these fevers in which the patient is drowsy and sluggish. The patient wears a besotted look as though he were drunk, and feels a leaden heaviness very different from that active excitement of Aconite. Gelsemium is a sovereign remedy for children who contract continued fevers during the hot summer days when the little fellows have been much out of doors.

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### PRACTICAL LETTER TO A PROSPECTIVE STUDENT LEANING TOWARD ALLOPATHY.

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PARKERSBURG, W. Va., April 10, 1902.

Dear William:—Your letter does not surprise me. If that is your conclusion 'twere better so. Of one thing do not deceive yourself; Homeopathy is not a belief, but an experience, and for an honest man to say that he does not or can not believe is equivalent to saying that, come what may, he will not believe; for the rock-ribbed allopath that truly is the case.

Whenever a man shuts up his brain and closes his eyes so as to limit his mental and physical vision to only what he can see and feel he is only part man, and when he essays to call himself a scientist or specialist the gods weep and the stench of his achievements pervades every murky stratum

of our lower existence, but his vision will never extend beyond the microscope, the scalpel and other equally material things; he is a materialist of the worst type and an unbeliever without compare; a practical atheist.

Modern medicine has become extremely nihilistic. The old school mind naturally drifts toward the knife or narcotic medication. Of cure there is no conception. As a rule the student is beguiled into its study largely by the glamour and glitter of its surgical achievements. These spectacular effects impress some minds very forcefully, and few there be, especially of the young, that are able to look behind the scenes and grasp the full meaning of all this. They do not see the endless procession of incurables moving with ever increasing volume toward the grave, the result of suppressed diseases, suppressed gonorrhœas, suppressed eruptions, suppressed secretions, all kinds of suppressed things, but to their own suppressed common sense. They are especially blind. "Eyes they have, but they see not."

No! young man, upon entering the study of medicine you should be prepared to follow the truth let it lead where it may. All preconceived ideas and notions should be cast aside and all its results looked upon with an unbiased mind. Any other position is unworthy of you and your best manhood.

There is nothing so hard to shake off as a wrong process of thinking and reasoning, once acquired. It is almost never fully gotten rid of and there is no sorer sight than a brilliant intellect so encumbered and handicapped as to be incapable of reaching a just decision in such matters.

Homeopathic cures are made in consonance with nature, and her methods, although not always rapid, are most thorough. This can be said of no other system of practice, all others being of necessity artificial and productive of more or less illusory effects. Cures along the line of similia are essentially eradivative, removing the internal causes and essence of disease. This being true, how great must be the man's responsibility who ventures to dabble in nature's lab.

oratory with remedies of whose ultimate effects he is ignorant, or affects to be.

Bright minds have espoused our cause, or come under its care. Napoleon was one; the professor of chemistry in a university that graduates more practical every day chemists than any other in America, is a homeopath, to my personal knowledge.

There are many things that we don't know, but this is self-evident. Every perceived thing is the result of action and reaction. Action is the projection of force and tends to destruction; reaction is the conservation of energy and tends to stability or fixity. Both are necessary to the establishment of a normal equilibrium. It is always, however, the reaction that we look for in the human economy and you expect it in chemical work. Its absence portends death to the patient, and failure in your experiments. Therefore, when we give a remedy to the sick patient we endeavor to incite a similar action (to the disease action) in order that a dissimilar reaction may ensue which latter is an effort of nature to rest upon a normal basis or stable equilibrium. That is the case in a nutshell, and how any sane man can give purgatives to cure constipation, diuretics to cure dropsy, hypnotics to induce sleep, etc., passes my comprehension, provided, of course, that he is endeavoring to cure his patient and not to make a temporary impression upon him.

It has long been asserted that medicine is not a science. From the old-school standpoint that is doubly true. From the homeopaths point of view it is incontestably false. The allopath follows no rule but his individual whim, or idea. The new-school man follows one of nature's laws, proven and re proven true countless thousands of times, and yet many will stand aloof and not try because perchance they can't find particles of matter in our potencies. Can you find particles of iron in the Faunhofer lines of the solar spectrum? And yet you know iron is there. Believe me, but unbelief should oftener be written "unknowledge."

Recently a consumptive asked my aid for a persistent vomiting and purging which had quickly reduced his

strength. A few doses stopped both, but of course left the original disease uncured. He now returned to his original allopathic prescription of morphia every four hours and whiskey ad libitum, and that is the practice of medicine! Heaven save the mark! When the day comes that I must treat poor sick people, delude them and send them to the grave in such a besotted, befuddled state because they perchance have an incurable disease, I will stop and go to farming or some other honorable calling. Is this then the monument to allopathy perforce? What a travesty.

Perhaps I might write you of many more things, but if this is not enough more would be superfluous. Allow me to say in conclusion that Homeopathy offers the golden reward of a good clear conscience, and the opportunity of taking up a branch of medicine not yet overcrowded and one in which you will quickly obtain a livelihood. Many towns are anxiously awaiting good men and will pay them well.

Very truly yours,

C. M. BOGER.

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## A NEW PERINEORRAPHY SUTURE.

CHARLES E. FISHER, M. D., Chicago.

Until recently perineorrhaphy has been my bete noir in plastic gynecology, nor have I been overwhelmingly impressed with the repairs I have seen others do, or with the results in many cases observed wherein the operators are unknown. The chief faults with this work lie in a submucous gaping of the deeper perineal structures, the leaving in the vagina of redundant cicatricial tissue, and in an ostium vaginæ following operation that does not commend itself from the domestic viewpoint.

In simple cases the Tait flap has been found to be a very satisfactory dissection, and his four-suture repair has afforded a sufficient apposition of the denuded tissues. But for old cases with considerable redundancy, as also in those in whom there are extensive cicatrices, it fails to equal the

Emmet bat-wing dissection. The objections to this latter procedure are that it unnecessarily sacrifices the vaginal floor, exposes too large an area of denuded surface, requires more suturing than seems to be demanded, and the use of silver wire is contemplated. In the days of the metal suture Emmet's operation was the most generally accepted of any. It demanded from six to a dozen sutures, these serving as a metallic truss, as it were, on either side and below the divided perineum, this girder or bridge holding the structures in firm juxtaposition while healing occurred.

But wire has long since been discarded by most operators, as cumbersome, painful in removal, and as requiring too much vaginal dressing. While with it I have secured some excellent results I have also seen some of the worst meltings of the repaired perineum, from infection occurring because of the presence on the wound, and in the vagina, of the rubber tube or gauze dressings used to shield the tissues from the coil of wire rope incident to the twisting of the metal suture, to avoid irritation of the tissues.

Since discarding wire I have used silk, silk-worm gut, and sheep-gut, the latter carbolized, chromitized, formalinized, and alcoholized. My present preference is for alcoholized tissue, No. 2 for deep stitches, No. 1 if superficial are required.

Of stitches and knots I have tried all kinds with varying success, none altogether meeting my ideas of what we ought to attain in perineal operation. Finally, however, and by accident more than by intent, I have hit upon a stitch which is serving me well and from which I hope to get even better results as time goes on. It may not be new, though I have not seen it employed; and I have witnessed a large number of operations. The procedure I have adopted is as follows:

After a most painstaking disinfection of the field of operation and entire vaginal tract, which by preference extends over a period of from twenty-four to forty-eight hours, the patient is placed in dorsal decubitus in the perineal position and the extent of retraction of deep perineal tissues is



noted, as also the amount of vaginal cicatrix and redundancy. The degree of retraction, which is the important feature, of the perineal fasciæ and muscularæ, is best determined by lateral retraction with the thumbs, the firmness of resistance or lack thereof being diagnosed to a nicety. It is also well to trace from the lateral walls of the vagina backward and inward to the apex of the perineum, in order to decide how deep may have to be the sweep of the needle in its circuit of the tissues, that enough may be included to make a strong ano-vaginal bridge.

The more careful and thorough the mental mapping out of the work in hand the easier it will be of fulfillment. Only by knowing in the concrete just what is being attempted can satisfactory results be attained. A careless survey of the operative field and a failure to bring within the circuit of the needle the deep fasciæ and muscularæ is sure to result in disappointment to the patient and chagrin to the surgeon, if he really understands what a desirable perineum is—too often, unfortunately, not the case with automatic copyists styling themselves gynecologists. Having already performed the operation in one's mind the work can be done with confidence.

The rectum having been prepared; into it two fingers of the left hand are inserted and the floor of the vagina is raised and put upon the stretch. The fingers may be gloved, wrapped in gauze, or left bare, as preferred. Their palmar surfaces should be upward, of course. With the vaginal floor stretched a straight incision is made, laterally on either side, beginning at the raphe and extending perhaps a quarter of an inch beyond the line of fascial and muscular resistance previously noted, care being taken to keep the incisions just within the integumentary border. When completed these basal incisions form an almost straight line across the operative field, the outer one-third, on either side, curving slightly upward. In making it I use scissors. Some operators employ the bistoury.

The second step begins at the outer terminus of one of the lateral incisions, from this point an incision being di-

rected toward the center of the vaginal floor, back in the vagina far enough to include all cicatricial tissue. The same procedure is followed on the opposite side, the result being that a triangular flap has been mapped out, of which the base is across the vaginal ostium, the apex pointing toward the cervix uteri.

This flap is in reality a modified Emmet bat-wing. Different cases will require different degrees of modification, depending upon the nature and extent of the cicatrix and the degree of retraction of the perineal structures. In the main it is a triangular flap, the lateral incisions being slightly longer than the transverse.

With the operative site thus outlined the cicatricial flap is carefully dissected from the vaginal floor. In this I employ curved, blunt scissors. Extra care is exercised that no little islands of scar tissue or vaginal membrane are left to interfere with union. Some vaginæ bleed freely during the denudation, but a stream of hot water directed upon the wound, or the pressure of hot sterile sponges against it, will readily control undue sanguinary weeping and keep the field clear.

If the perineal body has been completely split, or nearly so, it is well to incise the vaginal fascia also, laterally, in order to bring up the muscularis beyond doubt. A long curved needle, directed well back latterly, and carried through deeply to the other side, care being taken not to pierce the rectum, will embrace the necessary amount of fascia and muscle in its sweep. I here use an interrupted suture, making three, four or half a dozen separate stitches, as may be required to build up a firm bridge in the centre of the operative area. If the retraction is inconsiderable this is not necessary.

#### THE NEW SUTURE.

Next follows what I believe to be a new stitch for this work. A short curved needle is armed with a long suture of No. 1 or No. 2 sheep-gut and a running stitch is begun at the apex of the dissection. The needle is passed through the vaginal membrane only, or is made to embrace the

fascia when the primary bridge is not required, is brought out at a point immediately opposite its entrance, and the suture is tied. The needle is again inserted, a quarter of an inch down the denudation, carried out as before, and is drawn through the suture loop, thus making a knot, which is drawn taut on one side of the central line of the incision, the idea being to have the gut lie to one side of the wound and not directly upon it. I never tie a knot over an incision if it can be avoided, in the vagina or anywhere else.

As many stitches are taken as may be required in an individual case, close together, the loop and knot forming a chain-knot suture down to the ostium from the apex of the denudation. If the punctures are close and if too much tissue is not embraced in the bite of the needle there will be no puckering or ectropion and only a fine line of incision in the centre of the floor of the vagina is seen when the wound is closed. If thought desirable this may be dried and covered with sterile collodion as a further safeguard against infection.

I have not known any other perineorrhaphy to close the wound as completely, to leave it as unpuckered, to so take in redundancy, and to minimize the subsequent scar as this chain-knot stitch. I have employed it in several cases and have obtained excellent results in each. The ostium is apposed satisfactorily and no integumentary perineal seaming has been required. I can readily conceive, however, of cases in which integumentary support might be advisable.

If objection is made to sheep gut for suture then softened silk-worm gut may be employed. A two per cent. solution of lysol will render this suture perfectly pliable in twenty-four hours without destroying its integrity. It may also be preserved indefinitely in the same solution. If preferred, softened silk-worm gut may be used as a sub-mucous suture in the vagina and the central incision be covered with collodion, there being absolutely no puncture or exposure of the vaginal membrane. In this case the suture should be knotted or shotted at either end and subsequently be withdrawn, say after eight or ten days, as one long

thread. It does not swell or infiltrate the tissue, does not have to be absorbed, and for either mucous or sub-cutaneous suturing is the ideal ligature. I employ it in radical hernia and wherever a sub-cutaneous nature is desired, I have not yet used it in vaginal surgery.

103 State Street.

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### IT PAYS TO BE HONEST.

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Last week Thursday I was called to a family, says Dr. Kraft, of Cleveland, in a recent letter, and found that while I had been absent at Ann Arbor recently, another and an *alleged* homeopath was called. Being told that I was the family physician, he said: "Well, Kraft only uses one medicine and only a very small amount of that, but I use two and sometimes more, so I think I can do better for you by giving you more medicine, and, of course, getting you well sooner." He did not know where Kraft lived nor what I was doing in Ann Arbor.

He lives within three blocks of me, was graduated in one of the classes to which I was permitted to "preach."

He had the house placarded for "Measles." I found two of the children peeling, scaling, clothes filled with "dandruff," at large outside mingling with other children.

The third "measles" patient had an abscess under the left mastoid process, pronounced "mumps," a sequel of measles, which, under a high potency of *Silicea*, broke during the past night, discharging about three tablespoonfuls of pus. This patient is now also beginning to peel.

On the dresser I found a certificate from the health officer testifying to the complete recovery of the children from "measles," and that they might now return to school.

It seems not to have taken this "homeopathic" graduate very long to unlearn the little Homeopathy I tried in my weekly two hours to pump into him, and he promptly denied his professor.

He found it a fine opportunity, however, to give the single remedy and the high potency a villainous rap.

But it will be a cold day when he is called to that family or that neighborhood again.

SHELDON LEAVITT, M. D., Chicago, Ill.:

DEAR DOCTOR:—Let others experiment with "The New Psychology." We have a system of medicine founded on facts, subject to no man's opinions, the Homeopathy of Hahnemann. We can not compromise. Let our allopathic friends grope on till they have found the truth as we have found it.

No more can be expected in the future of allopathic methods, nor of hypnotism, magnetism, spiritualism, clairvoyance, Christian science, osteopathy, theosophy, suggestion, etc., than has been realized in the past. The founder of osteopathy is a confirmed spiritualist. The fakirs in India have brought out all there is in "The New Psychology" long ago. No larger per cent of cures can come from it than has come from the bones of the saints, holy shrines, Bethesda pools, etc.

Prevision proves a power beyond any our own minds can have. No work on Psychology explains prevision. None even attempt it. Why confine a part of these powers to man's subjective mind when all can not be so confined?

Behold, how all things out of Christ in the religious world, and out of our Divine Homeopathy in the medical world, lead into quagmires!

THEO. H. WINANS, M. D.

Mexico, Mo.

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### CROUP.

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By S. G. A. BROWN, M. D., Shippensburg, Pa.

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Where is the mother who does not fear that word? For most mothers know that croup is no trifling disease. Yet there is none that is so quickly, certainly and beautifully controlled as this one if the proper homeopathic remedy be administered. Allopathy has absolutely nothing to compare with it.

If the child has been exposed to a dry, cold wind, and suddenly develops a high fever, becomes restless and thirsty,

has a dry, croupy, metallic cough and tosses about, give it Aconite.

Hepar is indicated when the child is sensitive to cold air; there is rattling of moist mucus in the throat; croup comes on after midnight.

Give Spongia if there is a short, hard, barking cough, and the child seems as if it might strangle. Here, however, the attack comes on before midnight, and the child wants to bend the head backward in order to breathe better.

If there is a violent jerky cough, the little patient gets blue in the face and the throat and chest seem sore, give Iodine. Especially is it of value in dark-complexioned children.

Kali bichromicum may be thought of in fat, chubby children, with a constant, hoarse, barking cough, and also later on, when a tough stringy mucus is coughed up.

Ipecac, although a household remedy, is useful only when there are shocking coughs, especially on falling asleep, with some strangling and more or less nausea and vomiting. The child is usually worse early in the evening.

Lastly, I would mention Lobelia. If there is a constant ringing cough, with much shortness of breath, and the child seems in great anguish and catches at its throat, try it and be convinced.

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### AMERICAN INSTITUTE; NEW SCHEDULE.

The Institute Committee on revision of the by-laws have, as per instructions, prepared a schedule which will be found in the secretary's annual circular.

As space there would not permit of a thorough explanation of the plan proposed we desire to present the same to the profession through the journals, that all members may study and understand the plan before the meeting.

1. The schedule has been arranged so that all meetings may be held within the week.

2. It has provided seven hours for the general business of the Institute—ample time.

3. It has provided one whole day, six and one-half hours, for the sole consideration of *Materia Medica*—the keystone of our faith—and without it we have no reason for our distinctive organization.

4. It recognizes the fact that the majority of our members are general practitioners and that their rights must be protected. We have therefore provided for them six and one-half hours of *Materia Medica* and one and a half hours upon each department of medicine, and in which practical rather than technical papers should be presented. They also have the right and privilege of attending any or all of the special societies they desire.

The committee believe that any schedule providing for special societies alone should not prevail, because it takes from the general practitioner and adds to the specialists the benefits of membership. The Institute cannot publish in any way the transactions of all the special societies and their own without increasing its dues. This makes the general practitioner pay more than at present and the specialists less, as it cuts off the dues of his special society. Under the proposed schedule the Institute would publish its general business, statistics, etc. All the *Materia Medica* meetings and the general scientific meetings held daily from 10.30 to 1.30, so that the Institute members would receive in return for their dues a volume of transactions of about the same size as at present, while the special societies would be allowed to publish their own transactions.

5. This schedule gives the special societies what they want, ample time to hold their meetings during the week of the Institute, and we believe will be entirely satisfactory to them.

Lastly, it does not saddle the expense of the special societies upon the Institute, which it cannot stand without increasing its dues, and we believe any increase of dues would greatly cut down our membership and in that way injure the life of the Institute.

THEO. Y. KINNE,  
Chairman.

## EDITORIAL.

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All Contributions, Exchanges. Books for Review and other communications should be addressed to the Editor, 5142 Washington Ave., who is responsible for the dignity and courtesy of the magazine, but not for the opinions of contributors.

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### A VERY HEALTHY SIGN.

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The Homeopathic Medical Society of the county of New York proposes to devote a portion of each of its monthly meetings hereafter to the discussion of homeopathic therapeutics. At a recent meeting, Dr. Nash, of Cortland, N. Y., read a paper in the department of materia medica and therapeutics, which created an unusual interesting discussion, and which has resulted in his call from the trustees of the New York Homeopathic Medical College to the chair of materia medica in that institution. The New York Society has taken a step in the right direction. For several years past homeopathic medical associations have been directing altogether too large a share of their attention to the discussion of surgery, gynecology, bacteriology, and other special departments at the expense of an almost total neglect of homeopathic materia medica and therapeutics, the very foundation stone upon which our system rests. The essence of Homeopathy lies in treatment, and unless our colleges, societies, and journals teach the practitioner and the student how to correctly apply the homeopathic remedy at the bedside, our system of practice will bear no special merit over other systems, which have the same surgery, gynecology, obstetrics, etc., as ours. If Homeopathy is anything at all, and if it stands for anything at all, it is a distinct system of therapeutics and stands for the correct application of remedial agents at the bedside of the sick. Herein lies not only its chief merit but the only reason the homeo-



pathic profession has for separate existence as a medical school.

It is a healthy sign when medical societies like that of New York, Philadelphia, and a few other cities can take up with conscientiousness and honesty the study of homeopathic materia medica and therapeutics. In former years it was a real treat to attend a homeopathic medical society meeting, because it was always possible to get something of value in office and bedside work; and it was refreshing to note the difference between the practical features of the homeopathic meeting and the unsatisfactory nature of the treatment which was advocated at old school societies. Of late years, unfortunately, this difference has not been very closely drawn, the result being that homeopaths have been progressing backwards, and that the success of the average homeopathic physician over the average allopathic physician has not been as pronounced as when homeopaths were such in fact as well as in name.

If every homeopathic society throughout the land will devote one-half of every meeting to the consideration of homeopathic materia medica and therapeutics it will be but a short time until there will be a general revival of interest in the therapy of Hahnemann, and until Homeopathy will again be forging to the front as a much more successful practice than any other.

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### ILLINOIS HOMEOPATHIC SOCIETY.

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The May meeting of the Illinois Homeopathic Medical Association, held on the 13th, 14th and 15th of last month, was one of the most largely attended and generally interesting meetings the state society has held in recent years. Unfortunately it would have been difficult for the outsider to have observed that it was a meeting of a homeopathic body, since there was a very small per cent. of mention of homeopathic remedies or homeopathic therapeutics throughout the session. It was pleasant to observe, however, that whenever a member had the temerity to refer to Homeop-

athy in terms of respect or approval an approving interest was manifested, especially by the general practitioners from the country and some of the lady members. In fact it has almost come to the point in the various so-called homeopathic medical associations of Chicago and Illinois that it is the women physicians who are the Homeopaths, the members of the sterner sex running to the specialties and to so-called progressive medicine. It is this fact more than any other one thing that is enabling our sisters to become well established in the profession. They treat the people homeopathically and cure them, and are therefore steadily making headway in their calling.

The sessions were presided over in the most satisfactory manner by the president, Dr. Pratt, who surprised the society by refraining from participation in any of its discussions. His address was largely an apology for the use of palliatives in connection with homeopathic treatment, but whether the cue thus given the association for a half-hearted homeopathic session was necessary or not is questionable.

The president-elect is Dr. Blackman of Dixon, a thorough-going, whole-hearted, earnest homeopathic doctor, upon whom great store is laid for a homeopathic meeting of this homeopathic society at its session of 1903.

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### TO BE OR NOT TO BE.

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At the Cleveland meeting of the American Institute of Homeopathy that body will be called upon to determine its sphere of usefulness in the future by deciding whether it will continue to be "The American Institute of Homeopathy" or a medical society made of a nominal American Institute and a series of sectional bodies, whose interest in work for true homeopathic principles amounts to practically nothing. The committee of reorganization appointed at the last meeting, consisting of Dr. Kinne of Paterson, Dr. McClelland of Pittsburg, and Dr. Runels of Indianapolis, are divided on the subject, Dr. Kinne favoring a few unimpor-

tant changes and continuing the work of the Institute as a solidified body, Dr. Runnels reporting in favor of the segregated Institute, which shall be in reality a congregation of societies of specialists of limited numbers and practically no disposition to foster and develop the great central truth of the Hahnemannian form of practice. It will be for the Institute to decide its future relationship and value to the homeopathic profession when it convenes at Cleveland.

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Mr. John B. Young, the subject of our June portrait, was born at Paisley, Scotland. When 13 years of age he was pronounced incurable by some of the ablest physicians of Scotland and England, including Dr. Clark, of the Royal household, of consumption. He says: "In the year 1836 I was placed under the care of Dr. Hahnemann, having journeyed from Paisley, Scotland, to Paris, being obliged to travel short distances and then rest a few days. After nine months of treatment I returned to Scotland cured." Mr. Young is an enthusiastic Hahnemannian and is expected to be present at the meeting of the I. H. A. at the Chicago Beach Hotel, June 24, as the guest of Dr. Reininger.

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Our Societies, local, state and national, are sadly in need of some rejuvenating or vitalizing spirit by which the interest in the work may be maintained and an increased attendance secured. The complaint of apathy is heard at every meeting by both officers and members, and how to secure a larger attendance, or how to arouse an interest that will secure it, is the vital question on the part of the officers entrusted with the business management of the society. There must be a legitimate cause or we would not have the effect. Why not begin at the bottom and investigate the pathology of the cause which is slowly but surely sapping the life and vitality of our homeopathic organizations. This chronic disease has been progressing for years, the complaint has been made before, and it will continually be repeated until the remedy has been applied and the disease cured. It is Homeopathy that is wanting.

Homeopathy and homeopathic therapeutics should be a part of every bureau. The society and its work should be so homeopathic that it will be helpful to every member. Give the physician, whether visitor or member, his normal pabulum, pure homeopathy, and he will gladly attend the societies, for he finds there something that will help him in his daily work. The banquet and the pleasure excursion has little inducement for a busy homeopath. He can eat and drink, ride or dance, play golf or pool at home, and when he attends a homeopathic society he expects something more than the label, "This is a homeopathic medical society." A society is what its members make it; the officers alone cannot make it homeopathic. When the members make liberal use of their note-books during the reading or discussion of a paper there is something in it that fits a case they have or have had under treatment. That paper alone paid for the coming. There was Homeopathy in it.

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The International Hahnemannian Association meets at the Chicago Beach Hotel, June 24-28, and from the program of Secretary King bids fair to be one of the largest, most successful and helpful in its history. It is Homeopathy in Obstetrics, Surgery, Gynecology, Ophthalmology, Pediatrics, Philosophy, Materia Medica and Clinical Medicine. From first to last the praises of Hahnemann's therapeutics are to be sounded and his teachings verified in every department and emergency of medical practice. There will be something to note, something to take home and apply in the daily work of every member that will repay a hundred fold for the coming. Its four-days' session will be almost equal to a post-graduate course in homeopathic therapeutics. You cannot afford in justice to yourself or your patients to fail to attend. The only outside inducement will be the first reunion of the Alumni of Hering College, for which the resident graduates are making due preparation.

## CURRENT NEWS-NOTES AND ITEMS.

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Dr. M. R. French, ophthalmologist (with Boericke & Tafel, 44 Madison St.), has a private office at 8 Campbell Park, from 7-9 P. M.; Sunday, 10-12 and 2-5 P. M. for the accurate fitting of glasses.

Dr. Hermoine W. Andrews, who has been visiting her father, Dr. S. H. Washburn, Elmwood, Ill., will return to Spokane, Wash., in June to resume practice.

Dr. W. J. Hawkes, formerly of Chicago, but now of Los Angeles, announces his intention of attending the American Institute of Homeopathy and the International Hahnemannian Association this month. Dr. Hawkes will be welcomed by his colleagues after his three-years' absence in the west.

Virginia City, Nev., is said to be in need of a good homeopathic physician, the occupant of that field, Dr. Packer, having died recently.

The Northern Indiana Homeopathic Medical Ass'n. now numbers an even one hundred members. At its meeting last month Dr. Julia D. Godfrey was elected president; Dr. George F. Washburn, vice-president. and Dr. S. A. Clark, second vice-president. Dr. H. A. Mumaw was retained as secretary and treasurer.

At the May meeting of the California Homeopathic Medical Society Dr. E. C. Manning of Los Angeles was elected president and Dr. Guy E. Manning of San Francisco was elected secretary for the ensuing year. The sessions were among the most profitable and well attended that the California Association has ever held.

The New York Board of Health has found about 22 per cent of the children attending public schools of that city to be suffering from ophthalmia, and have catalogued it among the contagious diseases which shall hereafter be reported to the health authorities.

At a recent meeting of the superintendents of the various Elemenary Institutions of Illinois, Dr. Whitman, who is the homeopathic superintendent of the Elgin society, was elected chairman of the association. The next meeting will be held on the third Thursday of August in Jacksonville.

Dr. Emmet Enos, formerly chief of the medical staff of the Kankakee Insane Hospital, has become violently insane. Another supposed case of "infection by the insanity bacillus."

The largest class that has ever been graduated from the Hahnemann

Hospital Training School for Nurses received diplomas this month. The graduating address was given by Dr. Frank W. Gunsaulus. Harlow N. Higginbotham, who is a member of the board of trustees for the hospital presented the diplomas. Those who received diplomas were: Esther Rydbeck, Laura B. Delp, E. A. Doolittle, H. M. Traut, Edith S. Dillon, M. E. Jones, A. E. Penney, F. W. Hoes, M. J. Forrest, E. C. Raycroft, Bertha Purcell, Gertrude Meer, Alice E. Dillon, M. T. Kocurek, A. M. Hamilton, Eliza A. Beale, Cora A. MacAfee.

The American Congress of Tuberculosis, which held its annual meeting the first of this month in New York, elected the following officers for the ensuing year and proclaimed its convictions and recommendations in regard to tuberculosis:

Honorary President—Dr. H. D. Holton, of Vermont,

President—Dr. Daniel Lewis, New York City.

First Vice-President—J. E. Egan, Illinois.

Second Vice-President—Frank Paschal, Texas.

Third Vice-President—E. J. Barrick, Toronto.

Fourth Vice-President—L. A. Watson, New Hampshire.

Fifth Vice-President—Senor Romola, Guatemala.

Secretary—Dr. George Brown, Georgia.

Treasurer—Dr. P. H. Bryce, Toronto.

The following are the resolutions which were adopted:

**WHEREAS**, Tuberculosis is an infectious disease, ordinarily communicated from person to person by means of the dried sputum of a consumptive patient; and

**WHEREAS**, The spread of tuberculosis could be largely controlled by proper care of such sputum and the enforcement of comparatively simple measures; therefore be it

*Resolved*, By the American Congress on Tuberculosis, that the health authorities be urged to disseminate to the widest extent possible, through the public press and otherwise, correct information as to the manner in which this disease is produced and the means to be employed for its prevention.

*Resolved*, That we believe it to be the duty of the national, state, and municipal governments to enact rational methods for the prevention of tuberculosis, and we recommend the establishment of institutions for the care of indigent consumptives.

*Resolved*, That there should be state and municipal supervision of all public conveyances for the transportation of passengers, and in view of the fact that spitting on the floors of public conveyances favors the spread of tuberculosis and is injurious to the public health, it is recommended that transportation companies be induced to press and to enforce rules against this act.

*Resolved*, That appropriations should be requested from state and municipal governments for the publication and distribution of literature as a means of education in the prevention of tuberculosis.

*Resolved*, That all cases of tuberculosis should be reported by the

attending physician to the health boards for the purpose of disinfection of houses occupied by consumptives.

The annual announcement of the College of Homeopathic Medicine of the State University of Iowa is the first of the college catalogues for 1902 and 1903 to be received. It offers an excellent presentation of the advantages and curriculum of our Iowa state school. Copies may be had by addressing Dr. Royal, the dean at Des Moines, or Dr. Gilchrist, the secretary at Iowa City.

A criticism may be offered of the spelling of the word "Homeopathic" on the title-page and in the text. The correct Latin form is "H-o-m-o-e-p-a-t-h-i-c." The correct anglicized form is "H-o-m-e-o-p-a-t-h-i-c." It is never "H-o-m-o-e-o-p-a-t-h-i-c." It is unfortunate that a state university should make this mistake. In the running title throughout the catalogue the word is correctly spelled, as also on the inside title-page. It is a mistake which is very often made, but it is wholly inexcusable.

In order to give a practical working to the Bureau of Obstetrics of the International Hahnemannian Association at its meeting on the 24th of this month in Chicago, the chairman, Dr. Reiningger, has issued a circular requesting answers to the following series of practical questions, from which there will doubtless be developed a fount of helpful information. It is expected that the discussion of this bureau will be among the most practical of the forthcoming session:

1. What success have you had in clearing up any disturbances of mind, skin, digestion, nervous and urinary systems during gestation?
2. Do you give any remedies during the latter part of gestation for the purpose of "easing" labor?
3. Have you had satisfactory results from prescribing during and immediately after labor?
4. Do you do anything before labor to prepare the mother's breasts and nipples for nursing?
5. What has been your experience in helping to increase or improve the mother's milk by prescribing?
6. What about baby; its sore eyes, vomiting, diarrhoea, colic, constipation, urinary difficulties, or any other afflictions baby is liable to? Do you prescribe for them and obtain satisfactory results?

One of the ugliest problems for the medical practitioner to solve is the method of combatting meddlesome interference of the patient's would-be friends and relatives. It is useless to say that such and such a tonic is ruinous to health, for cousin Mary has tried it; it is folly to argue that it contains harmful drugs because uncle John's physician indorses it. In short, if you oppose the desire for "something to build the patient up," it thrives secretly—the vile preparation is taken without *our* knowledge. It is better to resort to homeopathic principle and *sure the desire* for some tonic, any tonic, a harmful tonic, by *prescribing* one that will really do the patient good without interfering with the highest potency, and such a one is Perfection Liquid Food.

## HAHNEMANNIAN DIRECTORY.

For the convenience of readers who desire to recommend their patients to Hahnemannian physicians we publish a list of those who to the best of our knowledge, use the single remedy. We ask assistance in correcting, extending and perfecting this list in order to make it more useful. These cards, including subscription, \$3.00 per year, but names of all Hahnemannians will be retained in the Directory whether subscribers or not.

### Arkansas.

#### Eureka Springs,

Ellis, C. F.

#### Hot Springs,

Biggs, E. L.

Halman, H. V.

### Alabama.

#### Normal,

Ford, Justina.

### California.

#### Healdsburg,

Huffman, J. E.

#### Los Angeles,

Glidden, J. I. Mackay, Henne Bldg.

Hawkes, W. J., 620 Laughlin bldg.

Waddell, W. E., 431 Douglas Bldg.

#### Marysville,

Tapley, J. F.

#### San Francisco,

Martin, Geo. H., 606 Sutter St.

Martin, Eleanor F., 606 Sutter St.

McNeill, A., 611 Van Ness Ave.

Selfridge, C. M., 400½ Haight St.

Ledyard, W. E., Oakland.

Underwood, Maro F., 21 Powell St.

#### San Luis Obispo,

Winslow, T. Hartley.

#### Santa Barbara,

Crooks, E. W.

Stambach, Henry L.

Balch, E. T.,

#### Woodland,

Martin, J. T.

### Canada.

#### Hamilton,

Wickens, A. E.

#### Ottawa,

McLaren, D. C., 133 Maria St.

Quackenbush, Arnley, 131 Main St.

### Toronto,

Adams, E. T.

Hardy, E. A. P., 605 Spadina Ave.

Hearn, Robert.

Jones, D. Ogden.

Tyrell, J. D. 589 Sherbourne Ave.

### Colorado.

#### Denver,

Shannon, Sam'l F., Jacobson Bldg.

#### Victor,

Lane, Frances Margaret.

### Connecticut.

#### Bridgeport,

Gregory, Edward P., LaFayette St.

#### Hartford,

Case, Erastus E., 902 Main St.

#### Middletown,

Griffin, Louise A., 198 College St.

#### Milford,

Nahm, Ida M., Laurel Beach.

#### New Haven,

Goodrich, L. R., 93 Lake Place.

#### Torrington,

Pulver, Grace C.

#### Waterbury,

Morgan, A. R., 50 Leavenworth St.

### Delaware.

Wilmington. Mullins, J. W.

### District of Columbia.

#### Washington,

Custis, J. B. Gregg, 912 15th St.

Riggs, D. H., 1410-11th St.

### England.

#### London,

Berridge, E. W., 48 Sussex Gardens. (W)

Clarke, John H., 30 Clarges St.

Heath, Alfred, 114 Ebury St.

Lewin, Octavia, 25 Wimpole St.

Skinner, Thomas, 25 Somerset St.

Thornett, A. Marian, 25 Wimpole.







• WE. JEFFERSON GUERNSEY, M. D.

# THE MEDICAL ADVANCE

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## AFFIRMATION VERSUS NEGATION.

S. E. CHAPMAN. M. D., Napa, Cal.

The enthusiastic, fearless affirmationist! What a time he has had of it in the world! He fights against a swift-flowing current, an object of derision and scorn to those floating so pleasantly with the tide. We are familiar with the histories of the great thinkers and reformers in all ages. We know that the world was not worthy of them, and that appreciation has been awarded the majority of them only after they had long ceased from their labors. We know that the greatest of them all, the man of Galilee, was crucified upon the Roman cross; that Samuel Hahnemann was expatriated; etc. Human nature changes not. He who courts social, political or physical death needs but to promulgate a thought or doctrine which shall prove iconoclastic in the religious or scientific world. Anyone who has taken a decided stand for Homeopathy as taught and practiced by Hahnemann has run up against this spirit of intolerance, persecution and unreasoning negation. Stand for the single, indicated remedy before any state homeopathic society and note the result. Report a cure of cancer with a potentized drug if you wish to see the heads of negationists popping up on all sides. Some of them will be wildly and vociferously blatant in their denunciations, others indifferent and listless, while not a few will look upon you with a pitying eye, believing you to be either a prodigious liar or mild idiot.

In a presidential address delivered before one of our

state homeopathic societies this year is the following gem. It should be framed and hung up in the office of every good homeopath. It would be so helpful and comforting, you know.

"The light of experience must also dispel some of the cherished illusions of our youth; for instance, in regard to *Dosage*. This has ever formed the perennial storm-center in our school, and a generation occupied itself with fantastic notation of indefinite attenuation. This, together with reports of marvellous cures of incurable diseases, is one of the things we have outlived, and substitute therefor rational and less occult views of our work. We have learned to be guided by the relative value of facts and the need of discrimination. The sense of proportion had to be cultivated. For while it may be a fact that a higher attenuation of Arsenic or other drug has cured cancer in a given case, it is a much greater fact and more universally true that cancer is not so cured; and to give unworthy and unreal prominence to the exceptional is hurtful to the cause. The same holds good of much of the published clinical work with other hitherto incurable diseases. I do not deny the possibility of the cures, but surely this must be met by the larger experience and accumulation of wholly different facts by equally fair-minded and capable observers. Not to do so is misleading to the younger members of the school; misleading because the exceptional, the occult, the bizarre, is made paramount and elevated to the rank of the scientific."

I have been plodding along the medical road for a considerable term of years, but nowhere in all the journey have I seen so bland and childlike a specimen of utter simplicity as exhibited in the above. In the name of suffering humanity to whom are these reports of beautiful cures "exceptional," "occult," "bizarre" but to the men who assume the role of the pig-headed negationist? Every such report is a loud-sounding reproach to them. It is plain enough that these reports are exceptional because the negationist will not be governed by the law when prescribing for "incurables."

While on this subject, about how many negations would equal or nullify one good, hearty, well-substantiated affirmation? No conceivable number of them can have any such effect, my friends. The higher mere negations are piled in rebuttal of a valid affirmation, the more contemptible the former, and the brighter by contrast will be the luster of the latter.

Now there is the Negation of Ignorance, and the Negation of Dereliction. With the first class we have nothing to do in our argument, for no graduate of a homeopathic college is ignorant of the tenets of Homeopathy\* if he be in any degree entitled to the diploma awarded him. So it is with the second class we have to deal, those who know the way but refuse to walk therein. These latter ones cannot do less than hate everything and everybody that make manifest the error of their way. That is human nature from Adam to this day.

But let us consider one or two points (?) in the foregoing extract. He admits the possibility of cancer cures with high potencies, but reprehends giving undue and unreal prominence to them because it might prove hurtful to the cause. Heard ye ever the like of that? The poor tuberculous, cancerous, psoric creatures about us are not to hear of the marvelous possibilities of the indicated potentiated drug! If a great and wonderful cure result from the administration of the indicated drug, tell it not in Gath! publish it not in the streets of Askelon! Why, good friend? Because it is exceptional, occult and bizarre! not good for the cause! thousands of Negationists of Dereliction will not treat their patients in accordance with the law, and because they fail the man who *does* cure on homeopathic lines must keep his glorious Affirmation a close-locked secret! Is any other business in this world run on any such lines. Not one. The very best wares or results are crowded to the

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\*With due deference to the author we maintain that a large per cent of the graduates of our homeopathic colleges are ignorant of the tenets, principles and practice of Homeopathy as expounded in the Organon.—ED.

front with the result of stimulating students and inventors to their utmost endeavors, and the world is looking for and receiving richer and better things with each succeeding day.

Doubtless each of my readers is familiar with the ostensibly homeopathic journal that never reports a good homeopathic cure or drug proving. And you have had more or less experience with state society meetings where such reports are received about like an old-fashioned Amen in a Presbyterian prayer meeting. What sort of comfort or profit is to be derived from such journals and society meetings by the men and women who are endeavoring to practice the Homeopathy of Hahnemann, Hering and Lippe? On the other hand how welcome to our desks the journal that is filled with beautiful verifications of our potentized drug! And with what mutual profit and pleasure we meet and tell of the marvelous results we have seen follow the administration of the indicated drug, even in cases that are indeed incurable in the hands of the Negationist.

No two truths ever run counter to each other. They always run on parallel lines, and I honestly believe that for one truth to invalidate another would wreck the throne of the eternal. When the writer of the extract under consideration opposes the fact of cure of cancer by what he is pleased to term "the much greater fact that cancer is *not* so cured by the majority of homeopathic physicians," he indulges in sophistry and equivocation that I cannot suffer to pass without challenge. Allow me to formulate the case:

AFFIRMATIONISTS.

"I follow Hahnemannian rules and cure cancer, etc."

NEGATIONISTS.

"I do *not* follow Hahnemannian rules and do *not* cure cancer, etc."

I need say no more. The weak, illogical character of the whole extract is too apparent to require further comments. And yet, friends, it was unanimously voted by the members before whom this address was read that one thousand copies of it be published by the society for distribution!

Well, let them scatter. They will deceive only those who wish to be deceived. The greatest fact in medicine—if facts be comparable, and surely one fact cannot be truer than another—is that the highly potentiated drug *does cure cancer*, or any other pathological condition when the case has not been spoiled by surgery or drugging, or the vital forces too far spent! Let all Affirmationists say Amen!

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**HIPPOMANES MANCINELLA** (Manganeel Apple.)

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A. R. MORGAN, M. D., Waterbury, Conn.

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To identify the tree under consideration we introduce below a botanical description of it which agrees closely with that in Dr. Mure's *Materia Medica*. (Wm. Radde, N. Y., 1854).

“*Hippomanes Mancinella*—MAN-CHI-NEEL a ‘Manganeel’ euphorbaceous tree, 40 or 50 feet high. growing on the sandy coasts of the West India Islands, Venezuela, Panama, etc. It has ovate or elliptical shining leaves with small inconspicuous flowers.”

During my last winter's sojourn on the Island of St. Croix, D. W. I., I had an opportunity to learn some interesting features belonging to the pathogenesis of this virulent member of the vegetable kingdom, which from its poisonous character has been called the Upas Tree of the West Indies.

I was astonished on finding that the skin symptoms familiar not only to every man, woman and child living where this tree grows, but also to the brute animals roaming the high ways who have learned to shun the vicinity of these trees, for the same reason that “a burned child dreads the fire,” i. e., they had learned by painful experience that suffering follows contact with the fruit or foliage.

One of our early warnings on starting for a drive on the island was from our livery man cautioning us to avoid passing underneath Manganeel trees, especially during or after a shower, for he told us that wherever the skin was

wet by water dripping from the trees the hair would be taken off from cattle and horses, leaving sore spots, and if the wet branches slapped our faces or hands inflammation would ensue and troublesome blisters would form.

These statements were verified by general consent. Every person with whom we talked about it seemed familiar with these peculiar toxicological effects.

The vesicles and blisters produced vary in size, from the small ones of eczema and the larger ones of herpes to the large blebs or bullæ of pemphigus—large blisters distended with serum, as from scalds.

When these blisters are ruptured, red, oozing and smarting surfaces remain.

The exudations speedily dry into heavy brownish crusts and scabs, the latter sometimes crumbling.

The Rev. Jacob Howard, Moravian Minister of Frederiksted, St. Croix, a very intelligent, conscientious homeopathic layman, who not having passed the Danish Board of Medical Examiners at Copenhagen has no legal status as a practitioner, called my attention to a remarkable pathogenetic effect that I have not seen mentioned in any of the provings, viz. loss of sight without the appearance of any external lesion of the eye; no opacity of the cornea, only simple loss of vision, a condition apparently quite similar to amaurosis.

I expected farther details in this direction in time for this paper, but have been disappointed, however I have made arrangements by which I hope to secure this information in the near future, and which, when it arrives, I will furnish to the editor of "The Medical Advance."

Dr. Mure's preparation was made by triturating the fresh leaves of the plant. I had some fresh leaves gathered which together with three or four of the small apples were put into a common glass fruit jar closed with a screw cap and then covered with alcohol. After arriving home the alcohol had become a dark colored tincture—but upon dampening the skin with it I found that it had entirely lost



its irritating properties leaving the quandery in my mind whether I had not discovered another antidote.

It is very poisonous. If a single drop of the white juice fall upon the skin it will cause a wound extremely difficult to heal.

It is curious to note how nature has provided an antidote, for standing by its side and in its immediate proximity are the *Bigonia Seneoxylon*, i. e. the White-Wood Tree, and Sea Salt Water. "The juice of the former is said to be the best antidote, while the latter used, either cold or warm, affords much relief should the juice fall in the eyes or upon the face or hands.

The tree is so poisonous that any one sheltering under its branches from rain may get blistered from the rain drops falling from the leaves.

The fruit is about the size of a small guava or English walnut. It has a sweet but faded smell, and when eaten blisters the mouth and inflames the alimentary canal, causing an incessant burning and thirst.

If much of the fruit has been eaten death ensues, but if only a small quantity, an emetic and milk diet for a few days produce a cure, using also the juice of the White-Wood Tree.

The older people in the Island of Barbados—who seemed to have a greater knowledge of it than their neighbors in the other colonies—were very fond of bruising the leaves and applying them, often with success, to the skin whenever a blister was required.

The wood when worked up rivals Satin Wood in color and grain and is very handsome to behold, but there is hardly one worker in a hundred that will undertake to work it. To me the dust has an odor like "our early harvest apples, when from the sawing it penetrates the nose and the eyelids and causes severe burning, itching, and eventually blistering. When the wood is worked or even when a tree is being felled gloves and a mask have to be worn to protect the workman from the ill effects arising, while some rub oil on their face and hands, and washing as well at intervals in

the sea water while rubbing with the leaves of the White-Wood Tree."

Out driving one day we came upon quite a grove of these trees, and for the purpose of a closer examination of the innocent looking little apples scattered under the trees, we alighted and were about to pick up a specimen of fruit when we were startled by an excited voice shouting, "Hi! there, don't touch them, dangerous."

Looking around we became aware of the presence of a benevolent appearing black man who was gesticulating violently to attract attention. I had already picked up one of the little apples and held it between the thumb and two fingers, and notwithstanding the warning of our colored friend smelled of the fruit cautiously and cast it aside.

After riding a short distance I was seized with an urgent desire to urinate and for relief entered a dense wayside thicket. Continuing the drive I soon became aware of a disagreeable irritation in the genital region which gradually increased to a decided smarting sensation, at the same time my right nostril became stuffed and hot with a thin watery discharge therefrom; there was also a smarting at external canthus of right eye with profuse lachrymation.

Upon local examination at first opportunity half an hour or so after handling the fruit, I discovered two red streaks extending up the anterior surface of the scrotum where in arranging the clothing the fingers had probably come in contact; there were also other spots and patches arising from same cause, all of which were covered with fine vesicles. At this stage there was little or no itching of the affected surface, but a persistent burning and smarting instead.

The vesicles were easily ruptured by friction of the clothing and exuded a sticky moisture which speedily dried into crusts that adhered quite tenaciously to the clothing causing much discomfort in being detached or separated therefrom, particularly the capillary adhesions.

For four or five days this annoyance continued accompanied by smarting and burning; there was relief from hot

sitz-baths. The eruption lasted about ten days and then these surfaces returned to their normal conditions.

From many of the conditions carefully described to me, I have no doubt but that *Hippomanes Mancinella* will be found an efficient remedy in *Dermatitis* accompanied by excessive vesiculation, and the oozing of sticky serum with formation of heavy crusts and moist scabs, particularly in the different forms of pemphigus.

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### LACHESIS—A VERIFICATION.

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E. A. P. HARDY, M. D., Toronto.

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December, 1898. Mrs. B., aged 40; had two children, both delivered with forceps.

The following symptoms were obtained only after several visits, as patient was in a highly irritable and nervous state and disliked having discussed her symptoms relating to her menstrual functions. Only the more or less characteristic symptoms are given from among a mass in my note book covering several pages.

History of suppressed *Tænia Tonsurans* and of an accident when eleven years of age, when she was run over the abdomen by a cart.

**HEAD.** Pain above eyes as if in a vice, sometimes beginning in occiput and extending over to above the eyes; < Spring, Fall; morning on rising; noise; > after menses appeared; sleep; quiet.

**HEART.** Pain through to left scapula with fluttering and palpitation; " during menses; lying on left side; raising arms above head.

**SEXUAL ORGANS.** Menses began at fourteen, very regular, "to the hour;" flow dark red; profuse.

**Metrorrhagia** beginning one week after menses had stopped and lasting one week.

Pain < left side with vertigo and weakness; pain < for two or three days before menses and > by flow.

Bearing down, < two or three days before menses and > by flow.

Eyes puffy with dark rings under them.

**NERVOUS SYMPTOMS.** Flashes of heat about face and head. Unconscious spell lasting from one to five minutes; always falls straight forward; < beginning of menses; morning, riding in street cars; raising arms above head as in picture hanging (had fallen from step ladder more than once); > rest; even a short sleep which always follows attack.

**MIND.** Suspicious of husband and friends; generally < Spring; Fall; left side; < tight clothing about abdomen or neck. Lachesis cm.

Was inclined to think the attacks hysterical reflexly from ovaries, perhaps injured in the accident, but the two falls from a ladder and one fall on a hot stove by which she was severely scalded and cut about the face, rather changed that idea.

Patient showed signs of decided improvement almost at once and a psoriasis had developed on both elbows and knees, and from 1898 to May 1901 had three prescriptions of Lachesis cm, at which time was apparently well and was advised to continue monthly treatment for a year longer, but ceased taking medicine at that time.

In January, 1902, her husband told me she had not been feeling quite so well and after a trip to the country would call on me.

While on her visit and dressing her hair the old attack came on and patient fell, upsetting the lamp and burning herself so severely that she died in three days. Perhaps if she had followed advice and received treatment for another year the attack would never have returned, as she had been free of them for over a year, and it was only during the last four or five months that any of her old symptoms showed signs of returning.

It may be added that she had been under doctors of the

other school almost continually since she was fourteen years of age, at no time receiving any definite relief and always having a bottle of soda brom. near at hand.

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## THE UNIFICATION OF THE SCHOOLS OF MEDICINE.

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E. P. HUSSEY, M. D., Buffalo.

President of the Central New York Society.

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The change of attitude towards homeopaths by our friends of the old school, calling for unity in the medical ranks, which has become increasingly pronounced of late, has to us been a very interesting development. It has assumed such a plausible appearance that it has attracted the attention of the community at large, and has even had a surprising effect upon some of the elect in our own ranks. Developments in my own city have called forth editorials in two of our daily papers and a letter in the *Buffalo Medical Journal* for June, and there appears to be danger of a general misapprehension of our position in the matter.

Such a unification is to be sincerely desired and sought, and undoubtedly will ultimately come; but it is not yet "an established fact," and probably will not be for many years. The efforts to repeal the proscriptive "code of ethics" which have been made by some of the state medical societies are an advance in the right direction, but more must be done before the medical profession can be the unit which it should be.

As such a consummation will appear to depend upon the sentiment and attitude of the homeopaths it is due to us that the reason for our existence as a separate school, and for past and present sentiment, be quite fully understood. We have suffered too much from misrepresentation and intolerance in the past to desire now to appear as obstructors to any real movement in the progress of medicine.

We have been unjustly represented as being "sectarian." It is not true that we practice an "exclusive dogma,"

nor exclusively a dogma. It may be of interest to state that we define a homeopathic physician as one who besides a thorough education in all branches of medical science adds to that a special knowledge of homeopathic philosophy and therapeutics. We practice medicine in its very broadest sense, having at our command all of the means known to medical science, and are liberal enough to use everything in its appropriate place, recognizing above all, in efficacy to cure, the law expressed by "Similia Similibus Curantur" as the veritable law of therapeutics.

One hundred years ago Samuel Hahnemann formulated that law and directed its practical application, and since then thousands who have been actuated by sincere desire to fulfill their mission of healing the sick in the quickest, safest and most pleasant manner, have applied it with such satisfaction and wealth of results that they no more question its verity than they do that of the law of gravitation.

The history of the persecution and ostracism of those who have applied the law of cure is well known. It began early and waged fiercely, forcing them, for mutual protection and advantage, to associate themselves together under a distinctive name—the name which expresses the law. Primarily they did not seek nor wish that, and it did not make them "irregular," "exclusive," "sectarian," nor "dogmatic," but, more than ever before, physicians.

That a body of men whose relations to science and to the community were of such a nature and importance could have held such an intolerant attitude towards those of their fellows who were, in all honesty, using means to heal the sick that were simply different from the traditional, seems, in this day, almost incredible. And I am sure that in this day it never would have been done. There never should have been such a thing as schools in medicine. The positive, unvarying action of drugs upon the system, in health and in disease, which constitutes the homeopathic law of cure, should have been investigated in the truly scientific spirit, in the only scientific manner, its value acknowledged, and every physician should have been allowed the

means to heal the sick which his knowledge and ability would enable him to do.

Many of the "old school" physicians to-day are pursuing special lines of study, and unquestioned, are treating the sick in ways that differ greatly from the ways of the majority. As well exclude and ostracise them as the homeopaths.

While upon principle and in a general way, the forcing of us into a distinctive organization was to be deplored it has had the good result of developing the law as it probably would not have been developed otherwise, until today we are pre-eminently specialists in therapeutics.

But, after a long time of this separation, light appears to be dawning upon the members of the "old school." Our results have many times surprised them. They have discovered that there is a dual action of drugs: a primary and a secondary, and that the curative effect of the secondary action might sometimes appear to resemble Homeopathy—but of course it could not really be that. Many of our measures are tacitly recognized and quietly appropriated by them; "though other means were found for administering them" than the acknowledgment that they were given homeopathically (so hard does a prejudice die), and we are asked to join with them.

Local interest has been given to the subject by an invitation which the Erie County Medical Society has sent to every homeopathic physician in the county to join it as a step towards becoming eligible to membership in the American Medical Association. But what is the spirit with which this change of attitude and invitation comes? One of the requisites specified for eligibility to membership in those societies is that the applicant shall not claim to practice an "exclusive system of medicine" or "exclusive dogma." As they (wrongly) accuse us who are daily using the law of therapeutics of practicing an exclusive dogma we are not eligible, and have always been denied membership in those societies for that reason. Instead of acknowledging their mistake of the past and

asking us, unreservedly, to come and benefit each other by mutual exchange of ideas and experiences, we are asked to drop our claim to practice according to the law of cure. Now this invitation puts us in the peculiar position of either accepting and so declaring that we will no longer claim to prescribe homeopathically, thereby acknowledging that we were mistaken in making that claim, or have made it from ulterior motives, or, by declining, appear in the eyes of an interested community as being too illiberal and prejudiced for the spirit of the age. In other words, we must acknowledge that we are fools, knaves or bigots. Surely, Homeopathy must be in extremis, that our friends should think such a thing possible of us. But it is not yet dead.

We hear about "taking down the barriers." No barriers to the unification of the medical profession have ever existed so far as homeopaths are concerned, except the intolerance of those who would have none of us. Is that intolerance now gone? Have the requirements for admission to the Erie County Medical Society and the American Medical Association changed? I have not learned that they have. Perhaps a ray of light as to the spirit which prompts these invitations may be found in the words of the president of the American Medical Association, who, in the annual address a year ago, advocated inviting us to his fold because it had been found that opposition to us "had exemplified the law that always makes the blood of the martyrs the seed of the church." As opposition has tended to our phenomenal growth, we are asked to allow ourselves to be benevolently assimilated.

The result of our acceptance of this invitation, and dropping our distinctive societies and colleges, since in so doing we must keep silent about the grand law of cure, would obviously be our annihilation. We would see our purely inductive system supplanted by one almost wholly empirical, and the world would be the loser.

Can we renounce that which we know to be true, which has guided us in thousands of battles with disease, to the



success which could have come in no other way? Can we see the structure which we have reared with so much wisdom and labor deliberately destroyed, that we may be less truly physicians than we now are?

Gentlemen, we have a law of cure which is the science of therapeutics and as immutable as any law of nature. A law whose limitations to cure appear to be limited only by the ability of the prescriber to comprehend and apply it. A law which some of us have used for nearly half a century with such results and increasing satisfaction that we are constrained to thank the Giver of all Good for revealing it to him who first formulated it and made the application practical. It is useless to ask us to bury it in the grave so invitingly opened for it. While the spirit of intolerance and bigotry which give us existence as a school has become very much modified, and under the influence of the increased knowledge and the spirit of liberalism and eclecticism so prevailing in all of the affairs of the world will ultimately cease, it is not yet dead. Let us stand firmly upon the principle of truth that has supported us so well in the past, until full recognition is given to the principle upon which sound therapeutics must finally be based. Then, and not until then, will there be a united profession standing upon the broad platform of acknowledged facts, whatever their source, and of tolerance to individual experience. Then can all men qualified to practice as physicians stand shoulder to shoulder and work in unison for the welfare of the race. The reception which I am sure most of us will give this peculiar invitation will not surprise those who know us and our work.

Until the law of therapeutics is recognized, acknowledged and taught by those who have persistently arrayed themselves against it, and given simply the position justly due to it, there will be—from necessity—two schools of medicine. Let the invitation to join with the old school come in the form in which it should come, with the assurance which would naturally follow, and none will be more willing to help make the medical profession a unit than the homeopathists.

**THE MILLENNIUM.**

BY S. L. GUILD-LEGGETT, M. D., Syracuse, N. Y.

The invitation of the Erie County Medical Association to all practicing physicians, in good and regular standing, of whatever cult, to unite in swelling the membership of that association, of the New York State Society, and of the American Medical Association, sounds to the initiated much as if the millenium had arrived and the lion and the lamb were about to lie down together.

But when the layman understands that this proposal is invalidated by the position in which a homeopathist finds himself when requested to no longer practice an "exclusive system of medicine," or to be the representative of an "exclusive dogma," it will seem to him that the lamb is about to lie down *inside* the lion, as an able homeopathist puts it.

To lie down *inside* the lion would seem, also, much like death to all that is highest in the aim of medical therapeutics and a reversion to empirical prescribing, which, after hundreds of years has resulted in so infinitesimally small advance over old methods. True, dosage has decreased, but why? Simply because the homeopathist has shown the possibilities of cure under the administration of a smaller dose.

Granting this much progress over old methods, what becomes of the discovery of potency under the proposed "unification"? Has the reason for the prescription of any known drug by old school physicians changed during the last of the century? Does he recognize the fact that sickness is but the perverted action of the vital force, or that the needed relief must be administered upon a plane upon which the vital dynamis can make use of and so right itself. Does he realize that the "bugs" upon which he dotes are but the results of this perverted action, which, continued too long dams, the stream of life here and there throughout the system with refuse which it is unable to rid itself.

Indeed, no. To him the "bugs" are the cause of the

perverted action, and to kill the "bugs," without killing the patient, becomes the aim and end of his medical practice.

The astonishing discovery and practical demonstration of the similarity of action of drugs to certain sicknesses; the early demonstration of this action upon the human organism under the most careful observation; the early demonstration of the smaller dose; the later demonstration of the power of the drug as developed by potentization; the positive cure of chronic diseases heretofore unmanageable; the cures of acute diseases in stages hitherto unknown are still enigmas, and sometimes it seems they are problems in therapeutics which he is determined not to solve.

These are but a few of the points to which the old school physician must rise before we have a "unification of medical schools." As to specialists in pathology, in surgical measures the homeopathic colleges today have graduated their proportion, who stand as high in their ability to diagnose pathological changes and to operate as do the graduates of any school; and these attainments are crowned by specialists in therapeutics who constantly inform themselves of the power of known drugs in their action upon the human system. The millennium will dawn and there will be "unification of all medical schools" when the stupendous work of drug proving, which alone reveals the action of drugs, and so leaves possible a comparison of the action of sickness, is appreciated and made use of by the representatives of the school now arrogating to themselves the name "dominant" and "regular."

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### MATERIA MEDICA—A STUDY.

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BY J. C. FAHNESTOCK, M. D., Piqua, OHIO.

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"When the mind with great earnestness and of choice fixes its views on any idea, considers it on all sides, and will not be called off by the ordinary solicitations of other ideas, it is that we call intention or study."

When the word study is used in this paper it will imply

the mental effort of understanding, and an earnest and protracted examination of the *materia medica* by reflection, collection, and scrutiny of evidences obtainable.

By the way of prelude it is well to repeat again the first, the most wonderful and magnificent truths of the philosophy of Homeopathy; the foundation upon which our *materia medica* is constructed, without which there can exist no science of therapeutics.

First. "The body of man in health is animated by a spiritual, self-moving, vital power, which holds it in harmonious order."

Second.—"The spirit-like power to alter man's state of health (and hence to cure diseases) which lies hidden in the inner nature of medicines can never be discovered by us by a mere effort of reason; it is only by experience of the phenomena it displays when acting in the state of health of man that we can become clearly cognizant of it."

To the earnest and true physician the study of *materia medica* is one of the most fascinating works that can be imagined. Its field is so broad and varied that any student can easily be satisfied, for it takes into account the boundless creation of God, with man as its chief concern.

Its importance can be fully realized when it is taken into consideration that when medicines are *properly selected* and applied, it precedes, accompanies, and follows every procedure used for the relief of suffering humanity.

A review of the study of *materia medica* is quite in keeping at the present time, as a wave of discontent has again swept over a few of the homeopathic ranks.

For this I am truly glad, for such a feeling is a certain indication that the lesson has not been *thoroughly learned* or properly applied—errors have crept in or evidences are lacking.

In the reproofing of the *materia medica* there cannot exist the least doubt in the minds of any of its great value in the thorough study of the inherent dynamic property of each drug in question, providing the rules laid down by Hahnemann are strictly followed.

The method presented by the founder of Homeopathy stands to-day pre-eminently above all others. Every means known to man must be used to ascertain the entire sick-making properties of a drug, for it is then only that the exact fulfilment of his matchless methods are fully realized.

In section 141, Hahnemann tells us the best way to study a remedy is for the physician to make a reproving upon himself, providing he be healthy, sensitive, and has an unprejudiced mind.

“By such observations upon himself he will be brought to understand his own sensations, his mode of thinking and his disposition (the foundation of all true wisdom), and he will also be trained to be what every physician ought to be, a good observer.”

In the examination of the true sick-making powers of drugs, Hahnemann demands on the part of the physician an *unprejudiced mind*, some understanding, attention, and fidelity in observing the images produced in all the drug trials.

An unprejudiced mind! Sound understanding! Attention, and fidelity in observation! An unprejudiced mind is hard to find—the majority of us are full of prejudice and endless shades of belief. It is very evident that they are not all facts, but they come from what each one has laid down as facts. Each one desires to have peculiar ideas, facts, etc.

Here we see cropping out the worst kind of prejudice. A true man is certainly one freest from prejudices and one who can observe evidences. The unprejudiced mind is the one to occupy the seat of judgment and make decisions.

An unprejudiced mind can only be attained by learning all the truths and doctrines of Homeopathy.

If we study carefully that part of the Organon included in the sections 118 to 145 we can learn how the materia medica was formed, and also its best methods of study.

In section 118 it is clearly pointed out to us that each remedy must be treated as an individual, and that one individual can never be taken for another, which should ever put an end to substitution, alternation or combinations.

It should be clear enough to any of us when the founder of Homeopathy said when speaking of the proving and study of drugs, "That everything conjectural, all that is mere assertion or imaginary, should be strictly excluded; everything should be the pure language of nature carefully and honestly interrogated."

Having a *materia medica* constructed upon the above principles, it can be readily noted by repeated provings that all the different phases of the drug are not brought out in one prover, but it takes many provers to fully note the entire sick-making powers.

This peculiar fact will teach the close observer that each one of us is living on a certain plane and in a certain atmosphere of his own.

Of the many methods employed in the study of *materia medica*, from Hahnemann down to the present, there is one that surely takes the lead of them all, while at this same time any method which gives us aid must not be ignored.

The method to which I refer is the getting of the complete symptomatology of a drug, as the totality of the symptoms is the *ne plus ultra* in the homeopathic *materia medica*.

It will not take an observer very long to note that the symptoms can really be arranged into different classes, according to their importance and occurrence. These different classes of symptoms can best be divided into those that are general, those that are common, and those that are particular. These classes in turn are subdivided into first, second and third grades, according to their degree of importance.

The general symptoms of any remedy stands first in importance. All symptoms that are predicated of the patient himself are general; all symptoms predicated of any one organ are particular.

When the ego is brought into use the symptoms mostly are general, for example when he says, "I see," "I do so and so," "I feel so cold," or "I feel so hot," "I am thirsty," "I am wakeful," or the lady says, "I menstruate," referring to her general condition and not to any special organ.

To illustrate: One of the general symptoms found in Apis is a burning, stinging sensation. The patient says, "I have a burning, stinging sensation all over my body." "I feel a neuralgic pain in my temples like a bee sting." "I have a burning, stinging in my eyes." "I have a burning, stinging in my face." "I have a burning, stinging along the edges of my tongue."

So, these symptoms of burning, stinging pains are noted all through the remedy and constitute the general symptoms. The generals are the ones which control the army of symptoms noted in Apis, and in like manner all other remedies. The generals are the ones related to the patient himself, to his very being. And these very important symptoms are just the ones that so many want stricken out, "the would-be chaff," as they call them. What do you think would be left if these chaff-blowers could only have their way in this matter?

The common symptoms are those which any one would naturally expect in a remedy. Take for an example, remedies which produce fever. We naturally expect thirst, and thirst would be a common symptom.

I have heard it repeated so many times that such and such a symptom can be found under a dozen different remedies, and they should be expunged from the books, they are all worthless.

The cavillers did not recognize the fact that these were all common symptoms and belong there naturally, and that the symptomatology would not be complete without them.

Again, all remedies which produce eruptions are classed as causing a common symptom. What would we think of the symptom of "dragging down" in the pelvis? Why, it would be a common symptom, common to many remedies, but to study out the exact place of each one of them we must get the generals and possibly the particular, strange, or uncommon ones.

Now as to the particular symptoms. They are the ones that cause you to stop and meditate. You naturally would say to yourself, "this is strange," "this is something peculiar

indeed." Take the case of Apis again. The patient has a high fever but does not drink; how strange that is. That would be a peculiar symptom, a particular symptom, or as the students of materia medica would say, one of the characteristic symptoms of Apis.

The general, common or particular symptoms can be arranged according to degrees. In either class, those symptoms found the most frequently or constantly are of the first degree, those less frequently of the second degree, those occasionally of the third degree.

Now, if we diligently study all our remedies in the above manner we shall be able to get a very clear picture of all well-proven remedies. Then, to verify or prove them homeopathically by the correct application of them, we fasten those images so that they can be recalled when their use is required.

At this place in my paper I feel like the minister who attempted to make a speech before a large audience and his hearers were very anxious to hear another gentleman in his stead. When the minister arose the crowd began to hiss and shout "Sit down!" He did not sit down but raised both hands high in the air as if he were in the act as pronouncing the benediction and said: "Keep quiet! I do not want to make a speech, but I want to tell you something."

I want to tell you that the materia medica is studied very little by the mass of homeopathic physicians of to-day. You can go into three-fourths of the offices of this fair land and not see a materia medica in sight, or if it is you could write your name on the dust on the covers.

Further, how many repertories will you see, and how many know how to use them? How many do you suppose have studied one remedy thoroughly this year. You know very well that many materia medicas are not opened once a week or once a month by the majority of physicians.

These are the men that want to use the pruning hooks, and blow chaff—principally the latter—blowing all the time. In those offices you will find the combination tablets, and if the dispenser happens to run out of them he will put



two or three remedies in a glass or give half a dozen remedies in two days.

Then there goes up a great howl about the pharmacists selling all kinds of combinations. Why is it that these pharmacies make these combinations? Simply because they have sale for them; a demand from their patrons. Who buys them? These men who never study their materia medica—the lazy men.

“When we have to do with an art whose end is the saving of human life, any neglect to make ourselves thoroughly master of it becomes a crime.” May the good Lord have mercy on the criminals of this country!

It is only constant effort that leads towards perfection in any calling in life.

Those of you who take part in the re-proving of drugs with unprejudiced minds and will look up all the original matter upon the drug in question, especially that of Hahnemann, will then learn to know the greatness of the men who formulated the law of “*Similia similibus curantur*,” and that he was one of God’s grandest noblemen.

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### THREE-AND-A-HALF REMEDIES IN TYPHOID.

BY FRANK KRAFT, M. D., Cleveland, Ohio.

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The chief merit of this paper, I think, will be its brevity. At the last meeting of the Cleveland Homeopathic Medical Society, its president, Dr. W. T. Miller, asked of me to discuss some of the remedies in typhoid fever. I selected the remedies herein to be treated. And hence, I may premise, that I do not treat every case of typhoid fever with three and a half remedies.

In the majority of typhoid cases I have found that Belladonna, which does not get a seat very far front in the text-book therapeutics of this disease, has served me in the beginning most excellently well, and in two cases in children was the only remedy throughout. The symptoms are the classical ones, especially the puffed-up, red face, the

red, sparkling, quick-moving eyes; the inability to sleep; the dryness of the mouth and lips; the twitching of the body, and sometimes, noticeably, the face only; the spasm of the bladder; the sweat about the head; the inclination to be sharply and suddenly angry, and the characteristic thirst for lemonade. (I am not unmindful of the fact that some of the book-writers and not a few article-writers forbid the use of lemonade. If I find bad results from the sliminess following upon the drinking of the sweet lemonade I substitute Horsford's Acid Phosphate, or a few drops of nitro-muriatic acid). [Better leave out the sugar than complicate the case by mixing drugs.—ED.]

A good second with me is Bryonia. Some of the authors place this in the lead in typhoid cases. And it is, truly, a well-indicated remedy in those who have come down gradually; who have been ailing for weeks or even months; where the stomach and liver ailments have been always in evidence. The characteristic constipation at first—later the equally characteristic diarrhoea—the indifference to surroundings, except when moved, this latter followed, unless absolutely unconscious, with resistance and bad words, because it hurts everything and everywhere. There is the heavy sleep, the unmusical snoring, the stupor and stupidity even when awake, the beginning yellow color slowly merging into the purplish or very dark face, with the Sepia color surrounding the eyes; the face is bloated, the lips are thick, and so is the speech because of swelling and of the great dryness of the mucous membrane; the desire for a large "gob" of water occasionally, which may satisfy and may not, the patient complaining of its foul or bitter taste.

The third of my remedies is Baptisia, which, paradoxical as it may sound, I use but rarest of all. I was taught at school that this wonderful remedy was facile princeps in typhoid; that, indeed, there were but few cases which could not be advantageously opened up with Baptisia. However, I was also taught to prescribe homeopathically in typhoid as in other cases, thanks to H. C. Allen and others, and, hence, Baptisia has been the last resort in most of my cases.

Really, I cannot imagine where the classical indications for a homeopathic using of *Baptisia* could be found in the beginning of typhoid, unless the case had been treated as and for something else, and then supplemented with this foul and stinky remedy. This has, in fact, been the occasion of my using *Baptisia*. I was called to finish up an old school doctor's case—one which he had practically abandoned and which he was in no wise loth to part with. Here I found the principal symptoms as laid down in the books, which I will not repeat; they are familiar to every homeopathic student of his *materia medica*. I am inclined to the belief that *Baptisia* was a routine remedy at one time—one which had, in some specific epidemic, in some specified place, been found the genus epidemicus, and hence had been so highly lauded that it was incorporated in the therapeutics. I will add one more reflection—based upon some cases in my practice—that when *Baptisia* is clearly indicated the case is most grave, and the probabilities are plentiful of the early demise of the patient.

The half remedy, I may almost say, is my best remedy. It consists of local treatment and feeding. Locally I use alternatively the hot and the cold bandage around the body from the umbilicus to the symphysis pubis. I find this a great relief to nervous patients, and that it will induce sleep. It tends to relieving the soreness and dissipates the gases. I do not favor the daily or twice daily bath all over. There is too much handling and irritating of a weak and helpless body.

For diet, I have not known, since my entrance upon the medical field, anything better than Bovine and Mellin's Food. I use the former with fresh milk, making it palatable with salt or a few drops of lemon. I have once or oftener tried it in a bit of port wine, but have not received the same happy results as when used with milk. I have some fear of using any alcoholics in this disease. Mellin's Food comes in as a happy help in children. I make it cold, even ice it at times, with a dash of something that will take away the insipidity. And I feed this in teaspoon-

ful doses. In short, I have become an alternator. I use a teaspoonful of the indicated remedy one hour and a teaspoonful of the Bovine or Mellin's Food the other hour. In this way I overcome the tendency to refuse to drink the "half" remedy, especially when some meddlesome Matty, of either sex, has kindly informed the patient that Bovine is nothing but raw beef blood. Milk, so persistently recommended in the books, I find to be one of the few things which the majority of people "cannot eat." But I also find that most of these objectors will take buttermilk, or the sour milk, called "clabber" in the country; and I permit the giving of these or either of these *ad libitum*. Ice cream is another grateful makeshift not forbidden. Water drinking is encouraged, nay enjoined; but I want water, not the boiled and strained stuff which is put into a Mason jar and stood outside the window for cooling. In our city we have a number of excellent waters taken from springs, put up in bottles; which I use in all my cases. Ice, I notice, has been discovered to be microbe-laden and hence dangerous. And as it cannot well be subjected to a heat intense enough to destroy these awful animalculæ it is usually prohibited. And yet I prefer to risk the possible dangerous results from the insect world, when it is a manufactured ice, and is finely crushed, place in a "sugar teat," and the patient permitted to suck it.

I am not of the latter-day nihilists in medical treatment of typhoid; and yet I believe in being much more watchful of the temperature of the body externally and internally, keeping it cool and comfortable, than I am in the giving of Baptisia to every case. And here, in closing, let me say that the only case in which I permitted counsel (from the old school) to give rectal injections of cold water promptly collapsed and died. A very few remedies, lots of pure water, a quiet, well-lighted room, a not too fully trained nurse, a judicious feeding, and a not over-anxious watching of the temperature thermometer have given me most satisfaction.

## THREE CASES OF CANCER.

BY DR. VON VILLERS, DRESDEN, SAXONY.

CASE I. An old man of 74 years came to see me October, 1901. His complaints were a burning sensation inside the abdomen. He told me upon being questioned that he had formerly hemorrhoidal knots, which were destroyed by an unguent.

Now he was constipated, only drugs helped him. Sitting or lying down he felt quite well. Standing or walking he had an urging necessity to go to stool and deposited slime with blood. He is obliged to continually wear bandages.

Objective examination: Outside the anus two empty hemorrhoidal piles. Inside in the front wall of the rectum 6 cm. over the second sphincter was located a hard lump with uneven surface. Merc. cor. 30.

October 21. He reports that he has no slime nor blood and that he has given up his bandages.

November 8. Without ricinus oil easy stool. *Hydrocotyle asiatica* 6.

November 20. Afternoon four or five passages with blood; urine scanty, difficult to pass. Thirty tablets of *Mer. bij. rubr.* 30.

Jan. 1. Urine easy to pass. Dizziness and losing much pure blood. *Phosporus* 30.

Jan. 27. Much irritating itching on the wall front of the abdomen inside. Appetite good. *Merc. jod. rubr.* 30.

Then followed a period of changing symptoms. *Hydrocotyle asiatica* 6 glob.

Feb 6. Appetite continues to be good. Burning by passing urine has stopped. No pain in the anus; stool voluntary without pain; continuation.

I was quite sure that I would keep the old man living and that I could hold the growth not to grow, when I saw that an old symptom came back again. Chronic cases can

only be cured if they go back to the old symptoms the way on which they came to the newer symptoms.

CASE II. A lady of 44 years of the Calcarea type, whom I had cured from a bad form of pleurisy ten years before, came from Brussels to consult me and to stay under my control as long as I wished.

Left breast, hard lump located in the superior external quadrant. Three fingers under the clavicula large induration; axilla free. This form the French doctors call cancer cuirassé, like the cuirasses of the men of war. Good surgeons refuse the operation, but the Brussels surgeon had insisted that she must be operated on. She refused sternly, mostly because she was afraid that her daughter would be ruined if it became known that her mother had been operated on for cancer.

In general she was very weak and pale. In the general information which I tried to get, she told me that she suffered much from the cold and damp climate of La Haye which is situated near the sea, and that she only felt very well in a hot climate like Crimea, her home.

This idiosyncratic oversensibility for cold and dampness is a symptom for Natrum sulph., which was given in the 6th, four tablets a day.

After three weeks of daily use the retracted nipple came out again and won her old form back again. Till end of November she remained quietly in Dresden, then came suddenly the restlessness of the slavin blood to an outbreak and she left for the Riviera. As long as she was under my treatment the induration in the skin and the cancer in the breast did not increase. I gave when she parted *Hydrocotyle asiatica* 6, trochisci. She was very thankful and promised to write to me and to be always under my treatment. Her husband, a garrulous man, induced her to call in a Prussian rural doctor, who boasted in popular papers that he could cure cancer of every part of the body by three injections of Acid formic tincture. After the first injection both injected places began a rapid growth, and the poor,

deluded lady died a victim of the insanity of the new doctor.

CASE III. A woman of 47 years had to undergo three years ago the amputation of the right breast. After the microscopical examination the surgeon told her that it was a beneficial growth. Now she came with the complaint that she feels hard knots in the left *mammæ*.

Objective examination: In the middle between the two external quadrants a hard lump 6.5: 6 cm., with uneven surface and not fixed to the chest walls.

Jan. 26, 1895. *Conium mac.* 30, *trochies*.

February 16. Undressed, under influence of cold weather and from touch, painful aching. *Silicea* 30.

March 9. Lump not so hard as in the beginning of the treatment. *Carbo an.* 30.

June 4. Internal heat in abdomen. *Belladonna* 30.

June 13. Lump reduced to the point that it cannot be distinguished from the soft tissue of the *mammæ*. *Carbo an.* 30.

September 23. The very little tumor is sore to the touch. The patient looks quite well. *Nihil*.

Jan. 24, 1896. Tumor swollen to the size of a potato, very sensitive to touch; nightly sweat. *Belladonna* 30.

January 27. Aching almost gone; sweat at 3 a. m., tumor diminished. *Continue*.

February 8. No sweat, no pain. One drop of *Thuja occ.* 200.

Healthy till August, 1897.

August 8. Tumor growing with one hard part and another not so hard. *Conium mac.* 30.

August 28. No change.

October 10. At the upper end of the tumor tendency to suppuration. *Hepar sulph.* 30.

October 26. Altogether tumor soft, skin fixed to it. *Fluoric acid* 30, tablets.

December 1. Breast very heavy. Tumor fixed to the skin, divided in two parts. *Belladonna* 30.

December 22. No heaviness, nipple inside the breast  
Continuation.

March 3, 1897. Breast shows no symptoms.

Dec. 2. Nipple again normal.

Healthy till June, 1898.

June 21. Heaviness of the breast. Lycopodium 30.

December 9. Tumor divided in four parts. Phytolacca.

Healthy till February, 1899.

September 14. Breast sound. Continued Phytolacca.

October 21. Breast continues to be normal. Nihil.

Jan. 20, 1900. Heaviness without aching. Bella-  
donna 30.

February 2. Breast normal.

Since then no relapse till now, June, 1902.

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### THE POTENCY QUESTION, WITH TEST.

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We gladly publish Dr. Chapman's latest challenge for a scientific test of the potentized remedy. Put the dynamic remedy to the test and publish the failures. Every one will not obtain results for all are not susceptible to every drug. The following is from the July issue of the *Medical World*:

*Editor Medical World*:—Nothing has been the object of more ridicule and contempt than the homeopathic idea of drug potentiation. Upon its face it bears the mark of not only improbability but of absolute impossibility. That any substance, diluted, attenuated, or "potentiated," by distilled water, alcohol or sugar of milk, on and on until neither microscope, spectroscope, chemistry, nor any other physical means known to science can demonstrate the presence of said substances in any degree, and yet the medicinal characteristics of said substance shall not only be there, but often in a greatly intensified degree, is something that does not appeal to the reason of the average mortal. Yet thousands of capable and conscientious homeopathic physicians know from thousands of experiences that the homeopathic idea of drug potentiation is one of the most demon-



stable of facts. I have fully acknowledged the utter foolishness of the thing upon its face, and the burden of proof lies with us. So I come to the readers of *The Medical World* with the following proposition: I will send to any physician of any school a 2 dram vial of No. 30 pellets, medicated with the thirtieth potency of a given drug. Said physician must pledge his word that he will report results at the end of thirty days to the Editor of the *Medical World*. When the reports are in I will divulge the name of the drug thus proved. Of course I do not need to guarantee that no lasting harm can come to the prover. The prover should be in fair health, and his habits should be at least moderately temperate. If any physician does not care to make a personal proving he might choose a suitable proxy among his or her friends.

And thus I throw down the glove, and let this fundamental tenet of the homeopathic school stand or fall by the result. I only demand and expect fair treatment on the part of the provers, and may the right prevail. If God has planted within every atom of this universe tremendous forces that are developed or liberated by what we have termed drug potentiation, surely every lover of truth and humanity should be willing to know it.

"Come one! Come all!  
This rock shall fly  
From its firm base as soon as I!"

Napa, Cal.

S. E. CHAPMAN, M. D.

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### INDIVIDUALIZATION THE KEY TO SUCCESS.

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The following extract is taken from the journal of Prof. Amiel, which was written during the last four years of his life—years of ill health and invalidism. He was under "old school" treatment, and his keen observation and philosophic mind led him to detect the failure of his physicians to consider his own individuality in the treatment of his disease. This adaptation of the remedy to the individual

constitution of the patient is one of the *keynotes* to Homeopathy.

V. M. HOPKINS.

“Why do doctors so often make mistakes? Because they are not sufficiently individual in their diagnosis or their treatment. They class a sick man under some given department of their nosology, whereas every invalid is in reality a special case, a unique example. How is it possible that so coarse a method of sifting should produce judicious therapeutics? Every illness is a factor, simple or complex, which is multiplied by another factor, invariably complex—the individual, that is to say, who is suffering from the disease; so the result is a special problem demanding a special solution—the more so the greater the remoteness of the patient from childhood or from country life.

“The principle grievance which I have against doctors is that they neglect the real problem, which is to *seize the unity of the individual who claims their care*. Their methods of investigation are far too elementary. A doctor who does not read you to the bottom is ignorant of essentials. To me, the ideal doctor would be a man endowed with profound knowledge of life and of the soul, intuitively divining any suffering or disorder of whatever kind, and restoring peace by his mere presence. Such a doctor is possible, but the greater number of them lack the higher and inner life; they know nothing of the transcendent laboratories of nature; they seem to me superficial, profane, strangers to divine things, destitute of intuition or sympathy. The ideal doctor should be at once a genius, a saint, a man of God.”—*Amiel's Journal*, Aug. 20, 1873.

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### NATURALLY.

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Eddie—“Say, have you seen that new kid that Doc Jones brought the Jenkinsees? It's turrrible small; jest like a midget.”

Arthur—“Well, what do they expect when they hire a homeopathic doctor?”

## PRESIDENT'S ADDRESS.

Michigau State University.

LADIES AND GENTLEMEN:

As literature is the reflection and the reproduction of the life of the people so homeopathic medicine is the record of the thought and feelings and acts of those who teach and practice it, according to the law of similars. It cannot be disputed that we are advancing, and we must admit that the physician of to day shows evidence of advantages that have been placed in his hands that were not in ours. As a result, we find them better equipped than were we when we began. The advanced requirements for entrance to our medical schools are an improvement. The young man with a meager education from the plow-fields of his country home cannot now get admittance to our colleges, and this is as it should be. The better the foundation the better the house, is a reasonable conclusion.

I can look back over my thirty years of practice and note a wonderful advance in the young men of our profession. I find them better able to discuss the various subjects presented at our societies. Therefore, we should welcome the day when our requirements will be a college education instead that of the high school only, as it is at present.

Our homeopathic schools are better. Competition is beckoning on those at the helm. New things are being brought forward, perchance some not to stay with us very long, others permanently. And here comes the question: Is all this glare and glisten justifiable? Will blood therapy stand the test? It may be all right to a certain extent, possibly more so with the surgeon than the medical prescriber. But let us not be too much impressed with it, lest the broken-down corpuscle in malignant diseases fool us. It is not a sure diagnostic indication of cancer, or many allied diseases. Nor is the white cell count as clear as I would hope. It is said that anesthesia will increase leucocytes to quite an extent, and that violent physical exertion will also increase the white cells as to make the blood identical with disease.

Pathology is a good thing. I do not know that we can

have too much of it. But let us not forget that we profess to be homeopathic physicians and not pathologists. *Similia similibus* is good enough for me, although had Hahnemann continued to live to the present time he no doubt would have improved in the law and its application far more than has been done. If modern pathology be true Hahnemann's fine but fundamental theories about the spiritual and dynamic origin of disease are exploded by the revelation that the so-called pathologists have made, and their demolition only completes that of his therapeutical theories which rested upon them.

I am still of the opinion that decomposed matter in the body is the cause of disease, and not germs or microbes, as the would-be scientist would make us believe. To me their opinions are founded on the suggestions of their emotions and not on the suggestions of their intelligence. Do not misunderstand me; I believe there exist such things as germs and microbes and that they are found in abundance in disease as well as in health. When a disease has been established in the body they get there and make cultures by the million, and no doubt to a great extent aggravate the already existing trouble by setting up secondary conditions. They, of course, absorb the poison and become capable of transmitting the disease to others. Originally they migrated to the disease-site because decomposed matter had fertilized it, as in the throat in diphtheria, or the lungs as in consumption. In other words, a suitable culture-medium has been made for them.

When the pathologists or bacteriologists can prove to me that a germ has never been near a diseased person, and yet by cultures of many times can produce disease in a healthy subject then, and not till then, will I believe in the germ theory of disease. That is, I do not believe germs to be pathogenic at this time; they are non-pathogenic until they have been infected by toxine peculiar to them.

The germ theory has deposed disease by inheritance. "The sins of the fathers shall be visited upon their children unto the third and fourth generation." The man who be

lieves this to-day is ostracized, and I beg of our teachers in our schools not to forget the law that has made us what we are—that has given us a foremost position among the professions of the world. New discoveries are inevitable, but the impression on the student body should not be too great. I believe in keeping up with our neighbors, but I fear many of us are going too fast. The sickening thud will come when it is least expected. I have thought that we as homeopaths had passed through the storm and stress period of our existence, but pathologists have made us wink and blink for mercy. Even isopathy has been left bemoaning in the background, while blood-germs and dynamite, nee Benzozone, advances to the foreground like a foaming steed.

Are we going to lay down our birthright to the pathologists of to-day? No! To me it is not in keeping with the fundamental principles of our forefathers. While I do not condemn many things along this line, that are necessary for ordinary purposes, there are so many so-called homeopaths going after false gods today that it seems to me that it is time to call a halt. I would like to speak of them in detail as I know them, but time will not permit. Yet in no unmistakable terms I wish here to record my condemnation of the combination tablet scheme of many of us, brought about by our pharmacists. It is another damnable shame that we have to face, and the quicker we put our seal of condemnation on it the less we will have to bear the taunts and sneers of our enemies. And in order to do this we have only to study a little harder. Could Hahnemann or Hering, or if you please, such men of our own state as Hempel, Lodge and Sawyer, who have passed over the river into the great beyond, be placed in our midst, the wonder and amazement depicted on their faces would be an object lesson that history could not wipe out.

Irregularities have even crept into our text books. Cowperthwaite, in his Practice of Medicine for 1901, recommends bleeding or the administration of chloral hydrate, or the bromides, or a mixture of the two in epilepsy. I shall welcome the day when by a society resolution we will all be

put on record against this and all other homeopathic irreverences. Similia Similibus should not be hypotheticated any longer by the administration of such presumption. This kind of prescribing is simply a lazy man's subterfuge and not the mark of a student. Improvement in many ways should be our aim, and before we digress to strange fields, not only homeopaths in this state, but every state of the Union, should take soundings ere they strike the reef.

J. N. REYNOLDS, M. D.

Grand Haven, Mich., May 20, 1902.

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One of the latest testimonials in the Perfection Liquid Food booklet reads: "For efficacy in doing what it is designed to do, for artistic skill displayed in putting it before the public, and for moderation in cost, it is in every way 'Perfection.' "

Dr. Frank Wieland no longer resorts to general anesthesia for circumcision. He employs a four per cent. solution of cocaine, introduced into the prepuce hypodermically, by two lateral punctures, the base of the penis being slightly constricted by a rubber band to prevent the passing of the cocaine into the general circulation. No pain has been experienced in forty-one circumcision operations by this method.

CARBOLIC ACID ANTIDOTE.—Monday, July 14, Dr. E. A. Taylor accidentally had the two first fingers and thumb of his right hand badly burned by carbolic acid. Almost instantly they became white and numb, showing the characteristic effect of the poison on the skin. He immersed them in a teacupful of cider vinegar and in a few moments the sensations had disappeared, the normal color restored and the next day they were as well as ever.

Dr. Fisher reports a new circumcision tenaculum in the Medical Century for July, a scissors-handled double tenaculæ instrument, which is introduced into the preputial meatus with its hooks closed. By distending them, by means of the scissor-loups, the prepuce is put upon the stretch and held firmly under control, the mucous membrane being kept taut with the skin while the excision is done. The instrument enables the operator to do away with an assistant and keeps the tissues firmly within his grasp, an advantage which will be understood by surgeons. Without this instrument, or something of the same kind, the handling of the foreskin of a small child is often quite difficult.

## EDITORIAL.

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All Contributions, Exchanges, Books for Review and other communications should be addressed to the Editor, 5142 Washington Ave., who is responsible for the dignity and courtesy of the magazine, but not for the opinions of contributors.

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### CONGLOMERATE HOMEOPATHY.

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It is unfortunate for the science that dwells in Hahnemann's philosophy that the trend of the day in the homeopathic profession is so largely toward conglomerateness in practice, and it is equally unfortunate for the patients who are submitted to the care of homeopathic physicians that the profession does not consistently try to give them true homeopathy.

If Hahnemann's dictum that likes are cured by likes was true in his day, that diseases and suffering can better be cured according to this philosophy than by any other, it is as true in this as it was in his. If the remarkable achievements accredited to him by those who were his immediate followers, and by those who were his patients, who went to him for treatment from far and from near, are correct recordings he certainly did for those he treated better work than we of to-day, speaking collectively. He must have done good work, and those who came after him must have done good work, else there would have been no organized homeopathic profession. That there is such a profession, and that our forefathers succeeded in curing the patients trusted to them, is a living evidence of the efficacy of the kind of Homeopathy they practiced.

And what kind of a Homeopathy was it?

Did it consist of drug-store prescriptions, containing several ingredients? No, Hahnemann abandoned all that when he left the old school profession, disgusted with its uncertainties and unsatisfying methods.

Did it consist of the use of several remedies in one glass or bottle or paper at one time? This is not recorded in any of Hahnemann's writings. On the other hand, he specifically states, all through his later writings, that the single remedy in the smallest dose that can be effective is better for the patient than any polypharmaceutical prescription or any mixture.

Did he compound several, or even two or three homeopathic medicines into a tablet or powder and give that, expecting that each remedy in the compound would produce its particular effect, independent of the others? No, Hahnemann was too precise for that. He made it his business to choose the one remedy that was most similar in its symptomatology to the case he had in hand and to administer it.

In this he was scientific, accurate, exact. No conglomeration is taught by him or by any of his immediate followers, who understood his methods and practices and who had seen his results. It was intended to make the practice of medicine as near a precise science as was possible. It was dissatisfaction with the lack of exactness and precision of his day that led Hahnemann to inquire into drug action more carefully, and which resulted in the formulation of the law of cure which is expressed in his maxim. The allopathic profession styled him a crank, a fanatic, an erratic enthusiast, just as that profession so styles those who to-day try faithfully and conscientiously to practice as he practiced, and, unfortunately, just as many of the so-styled liberal homeopaths of the present generation appellation those who are faithful followers of Hahnemann's law.

That Hahnemann cured very much better than his allopathic colleagues is beyond cavil.

That the early fathers of Homeopathy in the United States cured much better than the old school practitioners of their day is also beyond dispute.

That our immediate predecessors in the West cured better than their rivals is also a matter of record.

And all this, or the most of this, was by straight, exact Hahnemann Homeopathy.



Not only did the drug stores not cultivate the pioneer homeopaths of that time, but they scorned them, derided them, and did whatever they could to drive them out of practice, because they were consistent homeopaths, practicing in Hahnemann's way, and curing so well that wherever located they had little difficulty, in spite of opposition of which we know but little, in building up good practices and establishing Homeopathy firmly in their respective locations.

Have the conglomerate homeopaths done better with their conglomerate methods than the pioneers did with their exact Homeopathy?

Does the liberal homeopath cure a larger per cent of pneumonias, croup, typhoid fever and other diseases than the pioneer homeopaths cured?

Is the comparison of results as satisfactory to-day between allopathic and homeopathic treatment as it was when the homeopaths were loyal to their law and faithful in their efforts to select the right homeopathic remedy for their cases?

We do not believe it, and are sure it is because in becoming conglomerate practitioners many of our men and women have abandoned a law that is a correct guide in the administration of remedies, and have gone away from an exactness of administration of medicines which is infinitely better than a haphazard dosage.

The conglomerate homeopath is neither one thing nor the other. He is neither a good homeopath nor a good allopath. He don't know as much of straight Allopathy as the straight allopath, nor does his smattering of Homeopathy offset the harm that he does by trying to mix the two without being master of either.

Sincerely, he is an object of sympathy, if we grant him sincerity of purpose. How much better for the profession and for humanity it would be if every homeopathic doctor was a true believer in Hahnemann's law and a careful follower of his teachings in practice.

## THE UNIFICATION OF THE MEDICAL PROFESSION.

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This is the title of editorials in the *Buñalo Medical Journal* for May and June and of a letter from Dr. Rochester on "The Knell of Sectarianism" in which is the following:

At a general meeting of the medical profession of this city, held in the rooms of the Academy of Medicine last winter, a resolution was presented in which occurred the words "homeopathic physicians." During the discussion of the resolution objection was made by Dr. F. Park Lewis and Dr. A. T. Bull [professed homeopaths] to the use of the word "homeopathic," as indicating that there were any physicians who would allow their field of the scientific investigation and treatment of disease to be limited in such a way as this term implies; that in their opinion it was time to drop such qualifying adjectives; that sectarianism in medicine was really dead and that it was wrong to keep up the semblance of it by the use of such misleading terms; that, so far as they knew, no physician limited himself in his practice in such manner as the word homeopathic implies, and that it was the manly and honest thing to come out openly and say so.

Their words were received with hearty expressions of approval by the members of the profession present at that meeting. As a result of these remarks illustrative of his views, Dr. Lewis was urged by many of his friends to apply for membership in one of the regularly constituted county medical organizations.

At the meeting of the Erie County Medical Association, held May 15, 1902, the name of Dr. Lewis was presented for election to membership. His application was signed by Dr. A. A. Hubbell, president of the New York Medical Association, and Dr. C. G. Stockton, the chairman of the committee on ethics. It was approved by the committee on membership and Dr. Lewis was elected unanimously.

In another part of his letter the doctor says that "the difference between the schools was purely academic"; and that the irregulars use remedies homeopathically, "although other reasons were found for administering them", that "the profession of medicine recognizes no 'pathies' or 'isms' as applicable to the practice of a true science."

We respectfully ask Dr. Rochester to read Dr. Quine's "Why I am not a Homeopath" and see if some of his able colleagues do not recognize "pathies."

A few months since a graduate of the Hahnemann Medical College of Philadelphia, the standing of which is as high as that of any college in this country, after a four years' course applied for terms for post-graduate work in the medical department of the University of Pennsylvania and received this polite, "non-sectarian" reply: "The post-graduate course, which is to begin in May, is designed for graduates of the regular school of medicine."

Here is another:

CLINTON, N. Y., May 8, 1902.

EDITOR MEDICAL ADVANCE: Here is an item of news about one of your Herring College graduates. In a civil service examination for health officer for the city of Utica, Charles E. Alliaume, M. D., led all others. He passed 94.57 while there were two others standing as follows: 88.25 and 77.05. With all this the office was given to the 88.25 man. What a travesty on a competitive examination, especially when the result of the examination has for its object the selection of the best.

I. DEVER, M. D.

Despite the fact that Dr. F. Park Lewis of Buffalo and a few disgruntled homeopaths of Cleveland have abandoned the principles they professed to practice, the millennium in medicine is as far off as when the irregulars from the same spirit of intolerance expelled Hahnemann—the ablest living physician of his day—from honorary membership in the New York Medical Society. The present governor of Missouri, an irregular physician, tried to prevent the erection of the monument in Washington and the episodes at Utica and Philadelphia mark the same spirit of intolerance against any therapeutic progress. Unification, amalgamation, and the medical millennium will remain idle dreams until our irregular colleagues are willing to practice what they preach, for in their empirical therapeutics is to be found everything but a law of cure. We call their practice *irregular* because no two make the same prescription for the same disease or patient. What object, what advantage for the follower of Hahnemann and the sick entrusted to his care to become a member of the empirical cult, for empiricism is empiricism under whatever name it sails, Allopathy, Homeopathy, Eclectic, Christian Science, Divine Healing, etc. The true healing of the sick is governed by natural law.

### THE AMERICAN INSTITUTE MEETING,

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Was a success in every way. The Committee of arrangements headed by Dr. Horner left nothing undone that would contribute to the pleasure of the members. Dr. Biggar's dinner at the Hollenden, to the Seniors; Dr. Woods' reception at the Colonial Club; Dr. Jones' lunch at the Hollenden, for the Intercollegiate Committee; Mrs. Biggar's lunch at the Hollenden for the ladies, followed by a tally ho party; Mrs. Wood's reception at her residence for the ladies; and many other social functions by members of the committee and the profession of Cleveland kept their guests very busy and will remain as pleasant memories of the beautiful city and its ideal convention weather. On the other hand, if one were inclined to find fault with the scant hotel accommodation, the miserable accoustics of the hall for general meetings and which were not improved by the noise of the adjoining sample rooms, the difficulty of finding the various sectional meeting rooms, and the scant time permitted for the reading of the papers and for discussion, it would not be difficult to see a necessity for a revision of the by-laws and more time for the legitimate work of the Institute. These were largely caused by lack of accommodations incident to a meeting of this character in a small city and the success of the meeting demonstrates the splendid executive ability of the Cleveland members. They did all that men could do and will receive what they richly deserve, the thanks of the Institute.

There were many papers, especially in the Bureau of Materia Medica, not read for want of time, and only two that were read were discussed. We trust this arrangement will be remedied next year, under the new rules, giving more time for the discussion; then let the discussions be voluntary so that the experience of our best thinkers and best practitioners may be had. Do not have a member selected to open the discussion.

Dr. J. P. Cobb, Chicago, was elected president.

Dr. H. F. Biggar, Cleveland, vice president.

Dr. Charles Gatchell, Chicago, secretary.

The next meeting will be in Boston or vicinity which may be Nantasket Beach.

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## THE INTERNATIONAL HAHNEMANNIAN ASSOCIATION,

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Held the largest and most successful meeting at the Chicago Beach Hotel June 24-28 that it has had for many years. An excellent programme of practical papers on Obstetrics, Surgery, Practice, Homeopathics, and Materia Medica, abundantly illustrated with the use of the single remedy in the Art of Healing were read, and the discussions bringing out and illustrating every phase of the case by practical experience were instructive. One member remarked that what she had learned from one paper alone would abundantly repay for time and expense of the trip from California. The Bureaus of Obstetrics and Surgery were more replete with valuable papers than for years. A proving of Malandrinum. was read and it bids fair to be a wonderful polychrest when perfected by further work and clinical verifications.

Many new members were added, some of whom—especially Drs. J. T. Kent, C. E. Fisher, G. P. Waring, T. G. Roberts and others—will materially strengthen the Association.

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The reunion of the Alumni of Hering Medical College was a successful event, the first departure from strict business ever attempted by the I. H. A.

The Chicago Beach proved to be an ideal convention hotel, the hall in which the meetings were held being well lighted and not disturbed by noise.

The following officers were elected: President, Dr. E. B. Nash; vice-president, Dr. C. M. Boger; secretary, Dr. J. B. S. King; recording secretary, Dr. \_\_\_\_\_; treasurer, Dr. Philip Krichbaum, and the next meeting will be held in Boston or vicinity.

## NEW PUBLICATIONS.

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**A MANUAL OF LEGAL MEDICINE:** For the use of Practitioners and Students of Medicine and Law. By Justin Herold, A. M., M. D. Philadelphia: J. B. Lippincott Company. Pp. 678. 1902.

This work is written by a busy doctor especially for practitioners and students of medicine, the large majority of whom we regret to say pay little or no attention to this all-important branch of a medical education until by some accidental professional call they are summoned to a case and compelled to face a coroner's inquest. It may be infanticide, a railway accident, accidental or intentional drowning, the latter of almost daily occurrence at this time of the year. Then what a rush for some work on Medical Jurisprudence, for not one in ten of ordinary medical libraries contains a text-book on this much neglected subject. As a rule the well-read physician in all other departments of medicine, is incapable of solving off-hand the important questions of Medical Jurisprudence. The ignorance of medical experts on the witness stand, when confronted with intricate questions in forensic medicine has become proverbial. Many a medical witness has been driven from the stand in disgrace by a sharp well-posted lawyer. This should not be. Graduates should be impressed by their responsibility to the state, and colleges should insist that their graduates are equipped with a respectable knowledge of the more important forensic questions of practical life as found in general practice.

The work is divided into two parts, Toxicology and Forensic Medicine. Under Toxicology we have the medical and legal definitions of a poison, with their administration, effects, absorption, elimination, antidotes and treatment. Evidence of poisoning in the Living, and in the Dead Subject and their respective import with questions of forensic medicine. Then follow the rules to be observed in poison cases, the classification of the most important poisons such as atropine, arsenic, belladonna, carbolic acid, hydrocyanic acid, morphine, nux vomica, opium, phosphorus, strychnine, etc., and embalming in its medico-legal aspect. Toxicology as a science is rapidly progressing and much matter that is new is introduced to meet these changed conditions and bring the work abreast the times.

The second part relates to Forensic Medicine proper, and embraces every subject to be found in this branch of medicine including the Powers and Duties of Coroners; The

Criminal Court; Evidence; Ordinary and Expert Witnesses and Dying Declarations. Then follow the Phenomena and Signs of Death; Presumption of Death and Survivorship; Hairs and Fibres; Burns and Scalds; Death by Heat, Cold and Starvation; Railway Injuries; Feigned Diseases; Pregnancy; Criminal Abortion and Infanticide; Legitimacy, Inheritance; Sterility, Impotency; Rape; Life Insurance; Malpractice and Medical Examination of the Living. A chapter is devoted to personal Identity including a synopsis of the Bertillon System of Identifying Criminals, now in general use by the Police Departments of all the large cities of the world.

The largest part of the work is devoted to the medico-legal consideration of Wounds in General, Gunshot Wounds Regionally Considered. The effects of Lightning and the Medico-legal Aspects of Electricity with special reference to judicial execution are fully considered and in the Appendix some recent decisions in important cases have been added. Taken all in all it is an up-to-date work on Medical Jurisprudence.

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### CURRENT NEWS-NOTES AND ITEMS.

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Dr. Sara E. Allen announces her summer residence and office at Hotel Le Grand, Atlantic City, N. J.

Dr. Emily Dunning has been appointed the first woman physician on the ambulance corps in New York City.

Dr. Hugh A. Cameron, late editor of the *Journal of Homeopathics*, contemplates moving to Waterbury, Conn.

It is stated that but four-and-a-half per cent. of all persons born reach the allotted three-score-and-ten years of life.

The *Hahnemannian Monthly* for June published a very excellent portrait of the late Dr. Helmuth as its frontispiece.

Dr. Dewey, of Ann Arbor and the *Medical Century*, is spending the summer looking after the interests of his journal in New York.

Dr. Krichbaum makes an energetic treasurer for the International Hahnemannian Association, keeping its finances in good condition.

A Mexican woman in El Paso, Texas, has just given birth to a healthy child six weeks after having given birth to a full term infant.

Dr. W. R. Owens, San Antonio, Texas, paid Chicago a call last month. Dr. Owens is spending his vacation in Iowa after a brief visit to New York.

The Otological Society of London reports that fifty per cent. of the children attending the Hanwell District School had suffered otitis media, with partial deafness as a result.

At the Chicago meeting of the International Hahnemannian Association Dr. J. B. S. King was voted the usual vote of thanks upon his efficient services as secretary, and was also voted a testimonial of fifty dollars.

The *New England Medical Gazette* announces the election of Dr. Cobb to the presidency of American Institute, as a former resident of Chicago, now of Lincoln, Nebraska. The *Gazette* has probably got Dr. Cobb and his chief political sponsor mixed.

Dr. Charles E. Kahlke, one of Chicago's rising surgeons, has taken unto himself a bride and gone to Europe for several months, combining the opportunity of becoming acquainted with his new wife with an opportunity for surgical research in the Old World.

The number of clear-headed, well-dressed, genteel and gentlemanly gray-haired veterans who attended the International Hahnemannian Association attracted favorable attention and comment. There are yet a good many of the old-time conscientious homeopaths among us.

The special number of the *Cleveland Medical and Surgical Reporter* for May containing the reminiscences of former presidents of the American Institute, was a most happy thought and a most excellent stroke of journalistic enterprise. The photographs of nearly all of the ex-presidents of the Institute were published in it.

The death of Dr. Selden H. Talcott, of Middletown, within a month after the anniversary dinner spread for him in New York, was a startling illustration of the uncertainty of life. Hardly was the splendid achievement in the line of alienation ended before his death shocked his legion of personal and professional friends. His death robs Homeopathy of its most distinguished alienist.

ANNOUNCEMENT.—The Sixteenth Yearly Post Graduate Course in Official Surgery by E. H. Pratt, M. D., will be held in the amphitheatre of the Chicago Homeopathic Medical College, corner of Wood and York streets, Chicago, during the week beginning with September 8, 1902, having a four hours' daily session. Doctors invited to bring obstinate cases of every variety of chronic disease.

Dr J. P. Cobb, president-elect of the American Institute of Homeopathy looked in upon the International Hahnemannian Association for an hour upon the occasion of its social reception. Chicago physicians generally took no interest in the meeting, to their own loss. It was a representative and highly creditable gathering at which large doses of straight Homeopathy were intelligently dispensed.

Dr. John R. McKenzie, of Weatherford, Texas, one of the pioneers of the Lone Star State, died after a lingering illness on the 26th of May. Dr. McKenzie had been in Weatherford since 1873, enjoying a large practice and the confidence of his townspeople to an unusual degree. He had been a war veteran and had at times held positions of trust in his community. His nephew, Dr. W. Y. McKenzie, succeeds to his practice.

The faculty of the New York Homeopathic Medical College has undergone a reorganization since the death of Dr. Helmuth. Dr. Wm.



Harvey King is the new dean. Drs. Wilcox and Bishop are not on the reorganized staff, at the head of which Dr. Helmuth's son's name appears. The young blood seems to have taken possession of the reins. Dr. Nash, of Cortland, has been added to the materia medica staff, and Dr. Edmund Carleton teaches the Organon. Good additions.

The fifteenth annual meeting of the American Association of Official Surgeons will be held in Chicago, September 10th and 11th, 1902. A program is being made up of lectures and papers by the leading specialists and practitioners in rectal, genito-urinary and gynecological work, and in the treatment of all chronic diseases. The official surgeons are the workers in the great field of the reflexes and the profession generally is every day being brought closer to a realization of the fact that the reflexes play a most important part in the chronic manifestations of disease. Papers and discussions will cover the entire scope of the work, preparatory, operative and therapeutic, and the sessions will be of great benefit to all who attend. H. C. Aldrich, M. D., of Minneapolis, Minn., President; Ralph St. J. Perry, M. D., Secretary, Farmington, Minn.



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GENERAL PASSENGER AGENT,  
CHICAGO, ILL.

## HAHNEMANNIAN DIRECTORY.

For the convenience of readers who desire to recommend their patients to Hahnemannian physicians we publish a list of those who to the best of our knowledge, use the single remedy. We ask assistance in correcting, extending and perfecting this list in order to make it more useful. These cards, including subscription, \$3.00 per year, but names of all Hahnemannians will be retained in the Directory whether subscribers or not.

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**Eureka Springs,**  
Ellis, C. F.  
**Hot Springs,**  
Biggs, E. L.  
Halman, H. V.
- Alabama.**  
**Normal,**  
Ford, Justina.
- California.**  
**Healdsburg,**  
Huffman, J. E.  
**Los Angeles,**  
Glidden, J. I. Mackay, Henne Bldg.  
Hawkes, W. J., 620 Laughlin bldg.  
Waddell, W. E., 431 Douglas Bldg.  
**Marysville,**  
Tapley, J. F.  
**San Francisco,**  
Martin, Geo H., 606 Sutter St.  
Martin, Eleanor F., 606 Sutter St.  
McNeil, A., 611 Van Ness Ave.  
Selfridge, C. M., 400½ Haight St.  
Ledyard, W. E., Oakland.  
Underwood, Maro F., 21 Powell St.  
**San Luis Obispo,**  
Winslow, T. Hartley.  
**Santa Barbara,**  
Crooks, E. W.  
Stambach, Henry L.  
Balch, E. T.,  
**Woodland,**  
Martin, J. T.
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**Hamilton,**  
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**Ottawa,**  
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Quacken bush, Arnley, 131 MainSt.
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Hearn, Robert.  
Jones, D. Ogden.  
Tyrell, J. D. 589 Sherbourne Ave.  
**Colorado.**  
**Denver,**  
Shannon, Sam'l F., Jacobson Bldg.  
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Lane, Frances Margaret.
- Connecticut.**  
**Bridgeport,**  
Gregory, Edward P., LaFayette St.  
**Hartford,**  
Case, Erastus E., 902 Main St.  
**Middletown,**  
Griffin, Louise A., 198 College St.  
**Millford,**  
Nahm, Ida M., Laurel Beach.  
**New Haven,**  
Goodrich, L. R., 93 Lake Place.  
**Torrington,**  
Pulver, Grace C.  
**Waterbury,**  
Morgan, A. R., 50 Leavenworth St.
- Delaware.**  
**Wilmington.** Mullins, J. W.  
**District of Columbia.**  
**Washington,**  
Custis, J. B. Gregg, 912 15th St.  
Riggs, D. H., 1410-11th St.
- England.**  
**London,**  
Berridge, E. W., 48 Sussex  
Gardens. (W )  
Clarke, John H., 30 Clarges St.  
Heath, Alfred, 114 Ebury St.  
Lewin, Octavia, 25 Wimpole St.  
Skinner, Thomas, 25 Somerset St.  
Thornett, A. Marian, 25 Wimpole.





**JOHN HENRY CLARKE, M. D., M. B., C. M.**  
Editor Homeopathic World, London.

# THE MEDICAL ADVANCE

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## HOMEOPATHY IN SURGERY.\*

BY C. E. FISHER, M. D., Chicago.

I do not know how I would get along without Homeopathy in Surgery.

It is a veritable handmaid to the operator, second in value to the scalpel only, and frequently of incalculable aid to that instrument.

All surgery except that of accident is based upon pathology.

All pathology, including that second to accident, is based upon dyscrasiæ.

All dyscrasiæ are based upon pedigree.

And only Homeopathy has thus far been proven of special value in combatting pedigree, dyscrasiæ and pathology.

The surgeon can no more afford to ignore, in the best interests of his patient, the homeopathic similimum than can the physician, he being the best surgeon, from the viewpoint of results, who is not only a surgeon but who is also a conscientious and painstaking homeopathic prescriber. For surgery means a great deal more than mechanics and deftness with the knife.

### THE CONSTITUTIONAL SIMILIMUM.

The constitutional similimum has a wide range of application in connection with surgical disorders.

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\*Read at the International Hahnemannian Association meeting, Chicago, June 26, 1902.

Not only should no subject of surgical pathology go untreated for his systemic conditions, prior to and during his bedside period, but also after he has passed from the hospital there should be kept up a veritable bombardment at his constitutional taints, that there may be no further expression of gross pathology or microscopical impairment.

No tumor, sinus, fistula, deformity or other surgical state ever existed without a pedigree to account for it.

Nature takes care that no such ailments develop in the healthy, and also that they shall not follow upon accident unless there exists a something in the constitution of the individual to cause cell-proliferation, cell-exaggeration or cell-degeneration.

These states, when present, are to be attributed to a below-par condition of the protoplasm that forms the basis of human structure, and the essence behind this unhealthiness is the thing that homeopathic remedies get after with a directness unequalled by other medical measures.

Of dyscrasiæ, taints, miasms, there are many which are capable of being classified, described and understood.

But there are others which are but a conglomerate heterogeneousness of tainted histories, in which nomenclature and diagnosis are equally helpless.

With a surgical case, as also with a medical, a grandparent or other antecedent may have had tuberculosis in some form; another may have had engrafted upon his or her system a sarcoma or a carcinoma; another may have had syphilis, or perhaps a gonorrhœa, which tainted his physiology; another may have had psoriasis, eczema, salt rheum, tetter, tinea capitis, or other skin disease, perhaps never properly cured, but only suppressed; throughout the family there may also somewhere along the line have been alcoholism, nicotinism, drug habit or other distorting and debilitating conditions.

The son of such a gynealogy, or its daughter, does not necessarily have tuberculosis; he does not necessarily have syphilis; he does not necessarily have cancer; but he has a something which keeps him from being an ideally healthy

human being, and this something sets up his pathological processes.

Such a man is tainted through and through. There is rot in his constitutional core. And when he comes down with some pathological condition that demands the knife he is an especially fit subject for the best constitutional care and treatment of which the profession is capable.

Such are the subjects of all surgical pathology.

We cannot always tell why women have cystic ovaries nor why men have hydrocele.

We do not always know why a woman who has enjoyed good health all her life should develop a scirrhus. Surgery says traumatism is the factor. But what woman who has breasts has not at some time in life had them bruised and hurt? If the subject were physiologically perfect the ordinary bruise would not have set up an epithelioma or a scirrhus.

Traumatism may have acted as an exciting factor to be sure; but there must have been a dyscrasiæ behind the traumatism, else cancer from traumatism would affect almost every part of the body alike and would be far more common, even, than it is.

The breasts are glands. Most glands are the catch-basins for the deposit of unreduced metabolic ash, magazines for the reception of toxins that our systems do not eliminate. Glands are the lowest type of human cell-structures, the least resistant to external influences of all the tissues of the body, and become the choked sewage-repositories of the human residence.

The breasts become cancerous in women with and without traumatism. If there were no dyscrasiæ, no taints, no pedigrees for disease there would be no cancer, tuberculosis, or other constitutional disorder. For even though in a measure tuberculosis has been proven to be communicable, and therefore a somewhat preventable disease, it is nevertheless quite true that its subject must be in a fit state for infection, else infection would not occur.

If this rather crude presentation of the influence of

pedigree in relation to surgical pathology has any force whatever, and I believe it to be well-grounded and capable of everyday exemplification, then Homeopathy has a decided place in connection with surgery, and her "constitutionals" are capable of incalculable possibilities in connection with the management of gross pathology.

#### SPECIAL SURGICAL REMEDIES.

##### SULPHUR.

The chief constitutional homeopathic agent, the one of greatest value in association with surgical orders, in my experience and judgment, is Sulphur.

It bears a marked relationship to tuberculous manifestations, and also to those of sarcoma and carcinoma, which may be stated to belong in a way to the tuberculous class. For most carcinomas and sarcomas can be traced to a tuberculous history somewhere down the line.

In appropriate cases a dose or two of Sulphur, high, prior to operation, secures better reaction from shock, modifies the ill-effects of the anesthetic, and induces a better wound-state.

A very large proportion of subjects of surgical pathology are Sulphur patients. They are scrawny, unhealthy, stooped, have been semi-invalided for a long time, are dyspeptic, constipated, ill-nourished and have piles. It is very gratifying that a few doses of Sulphur will get up a good reaction in these subjects and do much toward securing good results for the surgeon.

It is the remedy for the patient, for the condition, for the temperament. In some indescribable way it seems to push the button; nature does the rest.

##### *Special Indications.*

Adapted to persons of the so-called "scrofulous" diathesis.

Lean, stoop-shouldered, swarthy, scrawny people.

Ailments all worse from standing in erect position.

Sluggish, mentally and physically. No energy.

Tuberculous, psoric, chronic disorders.

Complaints that are constantly relapsing.

Patient gets better, then slips back again.



Constant recurrence of ill-health, over long period of time.

Malignant growths, especially at climacteric.

Sensation of burning in pathological processes.

Burning of feet; burning of hands; burning on vertex.

Diarrhœa following or preceding operation.

Failure to properly react after operation.

Unhealthy pus, serous and other discharges.

Wounds take on unhealthy appearance and are sluggish.

Sluggish exudations—into pleura, lungs, joints, etc.

Functional dropsical states, as anasarca.

Old hemorrhoidal cases, with rectal inactivity.

Unhealthy states of the skin in connection with pathologies.

Blepharitis marginalis, boils, rhagades.

To secure the best results Sulphur should be given high, the two-hundredth or upward, never lower, and not oft-repeated. From the one thousandth (Boericke & Tafel) up, I give a dose at night, once a week.

#### IODIUM.

Iodine is a most excellent constitutional in glandular and bone surgery, especially the joints in children.

In operations upon the breasts, thyroid, parotids, cervical glands, the inguinals, in fact in all glandular surgery, Iodine should never be forgotten. It is also particularly adaptable to empyemas, effusions, tuberculous infiltrations and chronic diseases of the bones. The red thread of tuberculosis or "scrofula," as known of the people, runs all through the warp of Iodine.

#### *Special Indications:*

Tubercular diathesis. Dark hair and eyes.

Extreme debility and emaciation.

Great weakness. Can hardly breathe.

Hungry, yet loses flesh. Emaciation proceeds steadily.

Hungry in the night; always hungry; craves food constantly.

Hypertrophy and induration of glandular tissue.

Enlarged and hardened thyroid.

Tuberculosis of the testes.

Breasts flabby and dwindled, yet contain hardened milk-ducts.

Right-sided empyema in swarthy subjects.

Hard goitre in dark-haired subjects (Bromine in light).

Palpitation from least exertion (Ex-ophthalmus-tachycardia).

Hardness of ovaries, with ærid leucorrhœa.

Cancerous degeneration of cervix, with breast indurations.

Hypertrophy and indurations its characteristics.

Uncured right-sided pneumonia in dark subjects, with empyema.

Iodine is an element in cod liver oil, upon which great dependence has long been placed in preparing debilitated subjects for severe surgery. Homeopathically it is best administered high, like Sulphur. But excellent results have followed it in the lower potencies, especially in connection with Arsenicum, Mercurius, the Kalis, etc., as Arsenicum jodatum, Mercurius jodatum or bin-iodatus, Kali jodatum, etc. In these various combination remedies the Iodine is the base or strong, deep-acting agent. Herein lies the chief value of Iodoform, also.

#### CALCAREA.

In the surgery of childhood, as also of flabby, light-haired people, particularly women of relaxed tissues, Calcarea, not often thought of by the profession at large except as a teething remedy, has a special field.

It is natural for children to be well. They have no business with surgical diseases of the glands or bones, except as these are but the expression of the pathological sins of their ancestry. Even to the third and fourth generations are they made to suffer the iniquities of their fathers.

Calcarea is their pre-operation and post operation remedy. They are light-hearted, flabby, blue-eyed, glandular. Their bones are soft and yielding, their fontanelles are open late. Teething is slow and difficult; cleft palate their portion.

In bow-legs, knock-knee, hip-joint, Pott's disease, caries and necrosis Calcarea is a valuable surgical helper.

Calcarea is a child's constitutional, just as Sulphur and Iodium are adult constitutionals. Not that all children are Calcareas no more than all adults are Sulphurs or Iodines.

But surgical children rarely need Sulphur. They nearly always need Calcarea, either the carbonica, phosphorica or sulphurica.

*Special Indications.*

Psoric constitutions. Leucophlegmatics.  
 Pale, weak, timid, easily fatigued children.  
 Flabbiness, debility; blear-eyed, pot-bellied.  
 Large head, small neck, open fontanelles.  
 Curvature of bones, whether spine or long bones.  
 Kyphosis, scoliosis, osseous deformities.  
 Cleft palate and harelip in a Calcarea subject.  
 Tall, slender young people, narrow-chested and stooped.  
 "Growing pains" in young girls or boys at puberty.  
 Excessive flow in young women with ovarian degeneration.  
 Mild manias following surgery in Calcarea subjects.  
 Surgical disorders from defective assimilation.  
 Tuberculous diseases of joints in young fair-haired subjects.  
 Debilitating sweats following surgical operations.  
 Chronic lung suppuration in fair-haired young people.

Calcarea subjects crave meat, fish and eggs, particularly the latter, because of the lime they contain. They are non-resisting, consequently sweat easily, have diarrhoea easily, take cold easily, prostrate easily. They vomit long and severely from anesthesia, therefore should have their remedy some days before operation, if possible. In all operations upon bones and joints in children, unless not Calcarea subjects, this remedy is as necessary a part of the treatment as is the knife and the gouge.

**THUJA OCCIDENTALIS.**

Gonorrhœa has so permeated the human family that Thnja seems almost always in order among men, and also among women who have salpingitis and ovarian degenerations of a gonorrhœal origin.

Gonorrhœa was long thought to be the mildest of the venereals. Now it is known to be the most subtle and dangerous. The manifestations of syphilis are apparent. The manifestations of gonorrhœa are hidden. The microscope shows the gonococci in the pericardial fluid, in the meninges, in the synoviæ, in the pleural exudate, in fact in almost every tissue of the body, even to the Haversian canals.

Special harbingers of these little demons of man's iniquity, and of woman's too, for it is women who give

men gonorrhœa just as it is men who give it to women, are the fallopian tubes and their fimbriæ. Salpingitis is almost always gonorrhœal in origin. Likewise certain disorganizations of the ovaries themselves. Hence Thuja is a remedy, often overlooked, which should be useful in these states. Not because Thuja has been found to be routinely good in chronic gonorrhœa, but because its symptomatology and that of many of the conditions named are similar.

The testicles have orchitis from gonorrhœa; the ovaries ovaritis.

The testicles and cord have varicocele; the ovaries have cysts.

The ovaries don't have condylomata, but they have unruptured graffian follicles, scar indurations, and blubber-like distensions.

The husband had gonorrhœa when young. He later had gleet. If a single gonococcus got into his wife's tube it might be enough to set up serious organic ovarian and tubal disease. And how many of the women upon whom ovariectomy is required have suffered because of the sins of their husbands no one knows better than the surgeon. Has he eradicated all the taint when he has cut out the uterine appendages?

*Special Indications.*

The hydrogenoid constitution.

Patients subjects of warts, condylomata, small growths.

Pathologies arising from gonorrhœa and from vaccination.

Unhealthy granulations in wounds.

Excessive granulations following operation.

Disposition of edges of wound to invert or evert.

Ichorous secretions from unhealthy fistulæ.

Anal and preputial condylomata. Uterine erosions.

Everything reasonably directly traceable to gonorrhœa.

Purulent chronic otitis, necessitating surgical measures.

Hard, circumscribed headache, in mastoid area, in gonorrhœals.

Uterine and nasal polypi, soft, spongy, easily bleeding.

History of gonorrhœa in husband, salpingitis in wife.

Cystic ovaries, with dysmenorrhœa, in phlegmatics.

Burning pains in left ovarian region.

Cannot ride or walk because of ovarian pain therefrom.  
 Anal fissures, with or without condylomata.  
 Vaginismus, making coition difficult. Dilatation required.  
 Suppressed gonorrhœa. Orchitis. Chronic urethral discharges.  
 Gonorrhœa-like leucorrhœa, resisting treatment.  
 Cervical erosion, with endocervicitis.  
 Prostatic enlargement due to gonorrhœa and stricture.  
 Cystitis of probable gonorrhœal origin. Burning on urinating.  
 Large deposit of bladder mucus. Straining upon urinating.

Thuja externally as well as internally, is an excellent remedy for warts, moles, pediculated excrescences, polypi and condylomata. It is not a cure-all, but a leading remedy for these conditions, based upon sycosis. It is also adapted to chronic nasal catarrh, internally and as a local application, in sycotic and syphilitic subjects. In gonorrhœal synovitis, necessitating aspiration or incision and drainage, or iodoform injection, it is a remedy of first value.

Thuja should not be overlooked in surgical states following vaccination, as unhealed vaccination sores, sarcoma from this cause, unhealthy conditions of the skin therefrom, and glandular enlargements incident thereto. Here it rivals Iodine.

The gonorrhœal headache that diagnoses mastoiditis, and even meningeal abscess, which calls for Thuja, is as if a nail were being driven in at a particular spot, preferably over the mastoid, or as if a gimlet were being bored into the brain. Thuja may avoid a mastoidotomy.

#### SILICEA.

Not only is Silicea a rival of Calcarea in bone pathology, in fact the adult's Calcarea, but it rivals Thuja in vaccination scars, sores and indurations.

Its scars run to indurations and Keloid. They are tender and elevated. Sinuses following operation are slow to close with healthy granulations, their edges becoming hard and irregular.

Tissues which have been operated indurate, sinuses form, fistulæ follow operations for piles, and everted or in-

verted openings, preferably the latter, characterize the point of incision.

Boils and carbuncles are slow to suppurate, are hard and painful. The latter present many openings, with cheese-like granular matter, slow to break down.

In bone surgery *Silicea* is adapted to necrosis and caries in the adult, especially of the long bones. Ichorus discharges come from fenestræ within the shafts. Caries of the superior maxillary follows dental abscesses. Disease of the antrum. Mastoiditis, with slow discharge. Retarded suppuration anywhere, calls for *Silicea*, as one of the best remedies for this state. *Mercurius* is another. *Hepar* still another.

*Hepar* and *Mercurius* hasten suppuration. *Silicea* aids in closing a delayed suppurative process.

*Special Indications.*

Surgery in subjects of phthisis, especially young adults.

The nervous, irritable, sanguine temperament.

Light complexion, fair skin, pale face, weakly subjects.

Scrofulous, rickety children (*Calcareæ*).

Want of vital heat. Always chilly.

Empyemias and effusions of stone-cutters.

Inflammation and suppuration of glands, slow to heal.

Inflammations and suppurations of bone.

Periostitis, osteitis, osteo-myelitis.

Sarcoma of bone. Osteal carcinoma.

Tuberculosis of spinal column. Slow suppuration.

Chronic hip-joint and knee-joint disease.

Fistula in ano, in phthisical subjects.

Fistulous tracts which do not heal.

Sluggish sinuses following operations.

Unhealthiness of skin. Every little injury suppurates.

Unusually sluggish vaccination wounds.

Recurring panaritium, furuncles, carbuncles, hard and sluggish.

Proud flesh in wounds; excessive and sensitive granulations.

Aggravations from noise, light, draughts of air, odors.

In a general way, *Silicea* women, and they are legion, have migraine, constipation; scanty menstruation, or else excessive, with debility; they are nervous and excitable,

their feet sweat and are cold, like *Calcarea*; they have piles; every little pimple or rhagade is sensitive; the hair is dry; they like to be hypnotized and caressed. They take cold easily, whimper easily, their spines are irritable, and they have a disposition to light manias and to breast indurations. With their menses they are exalted. They are more so at the changes of the moon. Hardly lunatics they are yet "Jooney" at times. They are headstrong, obstinate, abused. They have the *Ignatia* profuse urination after their headaches and exhibitions of temper. Their ovarian pains are burning, aching, dragging. They are sexually weak, even averse.

In the old-fashioned "white swelling"—osteal caries and periostitis,—*Silicea* is supreme. Likewise in panaritium, felons, styes of sluggish natures, and other suppurative states, all within the realm of surgery.

*Silicea* is the chronic of *Pulsatilla*. And it is chronic *Pulsatilla* subjects which bring a large part of the surgeon's crop of ovarian disorganization.

#### **SYMPHYTUM.**

A favorite saw with half-hearted homeopathic surgeons is that "Homeopathy doesn't set broken bones." This is true. But homeopaths set broken bones, and Homeopathy helps heal them.

*Symphytum* has a special field in fractures.

It facilitates union in broken bones.

It reduces the pain, biting, stinging and burning incident to bone breaks, and favors the production of callous.

Excessive irritability at the point of fracture, as the callous is forming, frequently causes the patient a great deal of annoyance. Here *Symphytum* is a boon.

It is the *Arnica* of bone injuries, the *Hypericum* of bone suffering.

It is also a useful remedy in blows upon the head, upon the bones of the face, and for the bruises and soreness of knuckles that follow upon their employment as battering rams.

*Special Indications.*

Pricking pains in bones at point of fracture.

Slow union of fractured fragments, with aching and soreness.

Consciousness of pain at point of injury, weeks after.

Bruised, mashed, battered aching of bones that have been hurt.

Irritability at point of fracture.

Excessive callous at point of fracture, slow in reducing.

Is to the periosteum and bone what Arnica is to the flesh in bruises.

Crushing injuries of bone.

Violent pain from hard blow upon bony structures.

Also for like pain upon injury to eye ball.

Symphytum follows Arnica well, the latter being given for the muscular and tissue soreness and bruising. Symphytum coming later for the deep pain of bone soreness. It may be used in the lower potencies, and also externally, over exposed bones, but is curative in the high. In chronic bone pains the higher potencies serve the better purpose.

**ARNICA.**

A veritable panacea for bruising of muscular tissues and joints. Always to be thought of in wrenches, sprains, bruises, falls, blows and other external causes of injury.

It is a power for good, both internally and externally, as a "first aid to the injured." Traumatism of muscular and connective tissues, as also of tendons, ligaments and cartilages. In extensive bruising apply both locally and internally.

In concussions, shocks, compounded fractures, contusions, and sprains it is without an equal.

*Special Indications.*

Lame, bruised, sore feeling all over.

Special tissues are bruised and lame.

Large ecchymoses, following blows (Ledum).

Eyes black and blue from fist cuffing. Will discolor quickly.

Brain concussion, with unconsciousness, from a fall or blow.

Erysipelatous states of contused or compound wounds.

Tissues remain ecchymosed a long time (Ledum).

Sprains of the ankle, knee or hip.

Severe aching pain following a wrench.



Violent lumbago-like pain from heavy lifting.  
 Muscular soreness following reduction of fractures or dislocations.  
 Hard back-ache after long time on operating table.  
 Intense muscular aching and pain following operations.  
 Unconsciousness and delirium following injuries.  
 Urethral fever of violent and painful type following sounding.  
 Painful, bruised, soreness in pelvis after ovarian operations.

But Arnica is by no means limited to local use for superficial bruises and sprains. Wherever and whenever there may be sore, bruised, aching pain, in surgery or out of it, it is an analgesic of value. Surgical patients are too often allowed to suffer without medical aid, or are given morphine or other narcotic when Arnica is their remedy.

#### HYPERICUM.

No operation is possible without injury to nerve tissue. In lacerations, especially, but also in operations involving large nerve-trunks, or even considerable networks of filamentary nerves, Hypericum makes the patient more comfortable. In neuromata, nerve-stretching, inveterate neuralgias, brain tumors with pain, and other surgical states of the nervous system it is the Arnica of the case. In mechanical injuries of the brain and spinal cord it is likewise par excellence, as also in punctured, incised and lacerated wounds where nerves are injured or exposed. In the agonizing pain from the catching of a nerve in a ligature it often gives relief.

#### *Special Indications.*

Tetanus, from cerebro-spinal nerve injury.  
 Lockjaw from omphalitis.  
 Lockjaw following surgical operation, or injury.  
 Violent pain along nerve trunks.  
 Post-operative neuritis (*Allium Cepa*).  
 Injuries to parts rich in sentient nerves.  
 Intense nervous depression following operation from pain.  
 Patient suffers furiously following injury.  
 Coxalgia, coccyxalgia, and spinal neuralgia.  
 Violent pain, even convulsions, following injuries to spine.  
 Railway spine. Injuries to coccyx from fall or or kick.  
 Hard headache persisting after blows upon the skull.

Pain from laceration of dura or brain tissue.

Convulsions from blood-clot pressure.

Excessive pain in punctured wounds from slight puncture.

Violent suffering from exposure of nerve trunks in torn wounds.

Agonizing pains in finger tips and toes from injury.

#### OTHER PAIN REMEDIES.

Besides Arnica, Hypericum and Symphytum, Homeopathy possesses a number of remedies which are of intrinsic value as analgesics.

*Apis* is of excellent value in burning, biting, stinging ovarian pains, either before or after operation. It also meets highly inflamed, erysipelatous states, with intense redness, great œdema, doughiness and distension of operated parts.

In bee stings, wasp stings, hornet stings, ant bites and the like it is a helpful remedy, quickly relieving the swelling and inflammation.

*Ledum palustre* is also an insect-bite remedy. For spider bites, with large areas of infiltration and ecchymosis, it is particularly homeopathic.

The *Apis* case is more acute and inflammatory.

*Belladonna* may be relied upon for throbbing, beating, thumping pain, coming and going, following surgical operations.

*Chamomilla*, another supposed child's remedy, has no superior for irritating pains of great intensity, drying the hyperesthetic patient almost distracted. It is the *Chamomilla* in the patient rather than in the condition. But it is the patient who suffers the condition, therefore the mild chamomile of the nursery has a well-earned place in the surgical ward. It is particularly adapted to delicate, high-strung, suffering women.

*Aconite* allays pain, nervousness and apprehension better than *Morphia*, and leaves no bad after-effects. In nervous sleeplessness following surgery it is a reliable hypnotic. It is my stand-by for sleep.

Its range of applicability for inflammatory states following surgery is too well known to have to be portrayed.

*Capsicum*, *Kali phosphorica*, *Magnesia phosphorica*, *Colo-*

*cynthis*, *Lachesis* and *Hepar sulphur* may be mentioned as other pain remedies, each having a place and sphere in surgical practice. The striking indication for *Hepar* is excessive suppuration and excessive irritability of wounds. The latter are so sensitive that the patient hates to have them dressed.

*Psorinum* has a special sphere in sluggishness of wounds, with general unhealthiness of the tissues involved. In felon. carbuncles, and periostitis, with profound constitutional deathesis, and exceeding slowness of reaction, it often rivals and excels sulphur.

*Staphysagria* is my abdominal surgery pain remedy.

It has a special affinity to the sexual plexuses of nerves, and these are involved so often in abdominal and pelvic work that the state's acre is almost a routine agent in coliotomies.

It has sharp, incisive, cutting pains in the abdomen and pelvis in its pathogenesis, and clinically has been found useful in ameliorating the suffering of abdominal incisions. Even if the patient has been prepared on Sulphur, Iodum or Psorinum I generally give a dose or two of *Staphysagria*, high, the evening before and morning of operation. It seems to modify abdominal shock and suffering.

#### NAUSEA AND VOMITING.

Post-anesthetic nausea and vomiting is a distressing accompaniment of surgical work. To many patients who have undergone operation it is the bugbear of the hospital. Oxygen, starvation, withholding of water, a most denying punishment, the free use of water prior to the anesthetic, and the best post-anesthetic prescribing are often of no avail.

Just here lies a special field for the chronic remedy. Persistent nausea is usually dependent upon the constitutional condition which prevents reaction. The stomach suffers the depression through the pneumogastric. Odd as it may seem to many the deep-acting remedy, as Sulphur, Psorinum, Calcarea, Thuja and others named, serve better in post-anesthetic nausea than the superficial medicines, Nux, Pulsatilla, Carbo vegetabilis, Veratrum, Ipecac and

their analogues, for vomiting. If the patient is a Sulphur patient this will be his sick stomach remedy, just as it is his constipation remedy.

If he be an Iodium subject, it is his stomach remedy just as it is his glandular remedy.

If he be a Silicea man, his stomach will respond just as it is his general remedy.

The more superficial remedies may help, but they will help better if the patient has had a dose or two of his constitutional, whatever that may be. This I have demonstrated times without number. Prescribe for the patient and the stomach will get all the relief that is possible which is often very considerable.

Special sick stomach remedies are Cocculus, Petroleum Carbolic acid, Petroselinum, Veratrum album and Tabacum. But the constitutional first, to prevent vomiting, just as we give a remedy to prevent sea-sickness or car-sickness.

*Carbo vegetabilis* has recently helped me out in a case of anesthesia nausea unusually prolonged. Violent belching and hiccoughing, with cold sweats and prostration, were the indications. But the patient had Psorinum first. Then the Carbo acted more promptly and successfully.

#### INTESTINAL PARALYSIS.

Sometimes following abdominal operations there will arise a dangerous degree of intestinal paralysis. This under old-school treatment, adopted by too many alleged homoeopaths, calls for high enemas and sulphate of magnesia purges. I have not found this treatment beneficial, except in an occasional case, whereas it is admitted that in more than fifty per cent recovery is impossible.

Here is an excellent field for Homeopathy. Three severe cases which have occurred in my surgical practice, one within a year, in which three excellent surgeons prognosed fatally, *Nux vomica*, high, has saved the patients. In one recent case the distension was so enormous as to balloon the abdomen, distend the wound, cause the most violent anguish, cut off the breath, and collapse the subject. *Nux vomica*, 1000th potency, promptly relieved.

The cause of intestinal paralysis and distention following abdominal operations is evidently central. Therefore, central and not peripheral remedies are required. Purges are peripheral and but add to the danger, though perhaps giving temporary relief. Central prescribing has proven most beneficial in my work. *Nux vomica*, *Belladonna*, *Atropia*, *Hypericum*, *Arnica* and *Sulphur* have all done good in suited cases. I believe the homeopathic remedy the best aid surgery has in all its complications.

#### SURGICAL GANGRENE.

It has fallen to my lot to see gangrene following extensive injury and operation, under both homeopathic and old school care, and it requires no stretch of imagination to justify the claim that homeopathic treatment is infinitely superior.

Extensive areas of soft gangrene, following severe injury, respond to dressing of *Arnica* or *Hypericum*, after necrosed tissue has been removed, in so far as possible, together with the administration of the indicated homeopathic remedy.

I use the word "indicated" advisedly. No remedy is really homeopathic that is not clearly indicated. Nor is it Homeopathy to give remedies from the homeopathic materia medica, as such alone, and without clear-cut indications upon which to base them. The founders of Homeopathy did no haphazard or blundering prescribing.

*Arnica* meets gangrenous conditions of recent age, from extensive crushing and breaking down of muscular tissues, with its characteristic pain, ecchymosis, lameness, bruised sensations, etc.

*Hypericum* is more applicable when to the above is added extensive innervation, from nerve injury. It also has its clear cut indices.

*Apis mellifica* applies to large œdemas, with erysipelatous appearance, small central spots of gangrene being noted here and there, like so many little stings or bites.

*Lachesis* has dark blue, sloughing, foul areas, necrosed to the depth of the derma or deeper, without sensation, but

with a livid demarcation. The slough is sharply defined, as if the slough of a snakebite.

*Crotalus* has more of a typhoid state than *Lachesis*, with extensive lymphangiectasis. The edges of the gangrenous area exude a dark, offensive, decomposing serum. Little blisters form on the skin adjacent to the slough. The tongue is bright red and glistening, the eyes glassy, the mind wandering.

*Arsenicum* has its characteristic restlessness as its guide. The patient is apprehensive, exhausted, prostrated to the last degree. The gangrenous area is foul and severely necrosed, the condition profound. The tissues around the gangrene field burn and are hot to the patient, though perhaps cold to the touch. The skin is waxy, the bowels move involuntarily, the mental apprehension is painful to behold, the conditions are aggravated at two distinct times of day, the middle of the afternoon and after midnight; the parts must be covered.

The *Secale* gangrene is dry, shrivelled, isolated, circumscribed and cannot bear to be covered. I recently observed a case of senile gangrene in a woman eighty years of age, in the practice of Dr. H. C. Allen, with five distinct areas on her right toes and foot, each larger than a silver dime, some as large as a quarter, two as large as a dollar, with well-defined gangrenous centres, extensive infiltration surrounding, the lines of demarcation at first being indistinct but afterward becoming pronounced, in which complete and permanent recovery took place under the homeopathic remedy alone. *Psorinum*, *Carbo animalis*, and finally *Secale* were the remedies which produced this remarkable result. No local treatment was employed except perfect cleanliness, and no surgery was resorted to.

Other remedies worth study in connection with gangrene are Nitric acid, Sulphur, *Carbo vegetabilis*, *Naja*, Muriatic acid and *Kali phosphorica*.

If we stand by a correct, painstaking, homeopathic Homeopathy in surgery it will stand by us, just as such a Homeopathy stands by those who practice it in general medicine.

103 State Street.

## A CASE OF OPTIC NERVE ATROPHY.

*Supervening upon an attack of cerebro-spinal meningitis, wherein vision was markedly improved, and practical usefulness established, through means of the similitum.*

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FREDERICK WILLIAM PAYNE, M. D., Boston.

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Miss L., age 15. At the time of her first report to me June 30th, 1900, had just recovered from what was considered "a bilious attack associated with muscular rheumatism;" this attack was accompanied by a slight rise of temperature, reported as  $100\frac{9}{10}$ . She then suffered much from headache at base of occiput; had stiffness of the cervical region; head being drawn backward, and rather rigidly so; had lameness of eyeballs on motion; eyes smarting; vision much blurred and imperfect throughout the whole field, but more markedly so centrally. Had luminous flashes in the blackness of the retinal area, through which she saw floating dark spots, with eyes either open or shut; had at times, more in the evening, fiery zigzags, occupying the peripheral margin of the retinal fields. Knees give way in walking.

She came to my office with her mother at the time of the first examination, on which occasion I found her vision greatly curtailed in the right eye, while a blurred consciousness of light from darkness was apparent only in the left.

She was guided and directed in locomotion by her attendant, not sufficiently seeing to avoid intervening objects in the room, such as chairs, etc.

Urine escapes involuntarily, without she is able to void it at the very instant the desire to pass it is felt; nocturnal enuresis, passing it five or six times, the first discharge occurring before midnight; difficulty in retaining the urine, it escapes involuntarily when coughing or laughing.

An involuntary stool has occurred once, and that lately.

The pupils respond tardily to the stimulus of light, the left one remaining the larger.

She sees better by artificial light, being very sensitive

to sunlight, and in consequence sees much less well on that account.

The mother reported her daughter as having had what she calls "trouble in her sewing and reading ability for a year preceding this attack," though in what way she does not seem able to define.

On applied tests I found a muscular asthenopia existing, the external recti being the weaker; measurements showing a revealed esophoria of  $3\frac{1}{2}^{\circ}$ .

Hands and feet are cold and clammy much of the time; feet feel numb in the soles, so that she is scarcely conscious of their presence in walking.

Knee reflex is usually wanting, though sometimes exalted; this has gradually improved under treatment and has become much nearer normal.

Has a clonic state of spasm of the muscles of accommodation, causing objects looked at to appear either at varying distances or in a condition of distortion; at times seeming too far or slender in shape, and again looking too near and large.

Pupils dilate and contract alternately at times, in a similar condition and degree of light.

Has by spells phosphenes, or myriads of points of light in motion before her, like those of the electric spark, filling the whole visual area. Vision is much better in a markedly subdued light or in the dusk of evening than in that of daylight, when she is distinctly blinded; the curtailment of visual ability being much more marked at its center as if by a flood of light occupying that area, the peripheral margin of which being much the clearer; objects previously seen are usually retained before the eyes, and seemingly projected onto, and mixing with the next object looked at.

Dreams much, pleasantly and vividly; talks in sleep, answering questions readily and promptly, getting angry if the answer is misunderstood.

Urine has become pungent in odor, "as if having eaten asparagus;" has a red sediment in it.



Acne on face and shoulders, more or less sore to touch, and interspersed with blackheads.

She has a vibration before the eyes in the visual field as of heated air in motion, more marked before the left eye, though seen in each individually when tested independently.

Has not yet menstruated, though she has leucorrhœa instead. She is remarkably developed for a girl of her years.

**Prescribed Graphites.** Under the proving of Graphites we find prominently a delay in the first menstrual effort, with the following accompaniment of symptoms, viz.:

Retarded, deficient, irregular menstruation; discharge watery, with griping; appears after a delay of eight or ten weeks, very scantily, and lasts but a short time.

Constitution feeble; cold hands and feet; acne on face; menses delayed, scanty, serous; pale blood with griping and abdominal spasms.

Sensation as of numbness, lassitude with tiredness; crawling in the lower limbs, and as the time for possible menstruation each month approaches, and during its continuance, she has an aggravation of all her discomfortures.

Hands and feet are markedly clammy during this effort; feet are numb, especially in the soles, and as if the limbs were paralyzed, so that she is scarcely conscious of their presence in walking.

Knee reflex is usually reduced, but varies in degree, sometimes augmented, then again less responsive.

Scanty menses with congestion to the brain.

Menses keep postponing; discharge being scanty and pale; though leucorrhœa is more apt to occur instead of the menstrual secretion.

The establishment of the delayed menstrual function is a marked symptom under the proving of Graphites, and as its prompt establishment seemed imperatively necessary, Graphites was chosen first.

Photophobia, with special sensitiveness of eyes to daylight, more than to gaslight, is also a marked peculiarity of Graphites.

Eyes very sensitive to sunlight.

Sees fiery zigzags, with eyes open, extending around the outside margin of the visual field.

Flickering vibration before the eyes; headache accompanied with mistiness in field of vision.

During menstruation sight vanishes; occasionally has diplopia.

Frequent urination, especially during the night.

Sudden and urgent desire for micturition.

Urine dark brown, fetid, sour, though usually light colored and clear; its specific gravity varies from 1005 to 1015. Triple phosphates present, and a slight trace of albumen was found in the earlier specimens, that finally disappeared.

In December menstruation occurred for the first time, and again in January following; thereafter was mainly regular as to the month, but inclined to delay; flow was pale, watery, painful and postponing; the function finally becoming regular.

Graphites was wonderfully efficacious in establishing general health, and relief to the list of symptoms just detailed, but the amaurotic symptoms were such as to demand a special remedy; these were as follows, viz.:

“Vibration as of heated air in motion before her.

Great sensitiveness to artificial light.”

Has hemianopia, i. e. blindness of one half of the visual field; in this case of both temporal halves; greyish atrophy in appearance of both optic discs.

Pupils dilate and contract alternately; the left one usually the larger.

Myriads of points of light, as of electricity, filling the whole retinal area at times.

Accommodative spasm; objects at times looking too far, or too near, and again too small or too large; sometimes distorted in shape.

Sees better by evening light; less well by daylight.

Pupils sometimes irregular in shape, and respond tardily to the stimulus of light; vision blurred, more centrally, where it is luminous in flashes; sees better at the peripheral margin; has floating black spots.

Left eye much the more defective in visual ability; urine is inclined to escape involuntarily, especially on laugh-

ing and coughing; unsteadiness of vision, objects become confused.

Dim sight, as if looking through gauze or feathers; objects seem as if covered with a thin veil; pupils dilated; asthenopia; drawing, stiff sensation in muscles of eyes.

Retinal images are retained, objects lapping on and over the thing next looked at; vibration before eyes, as of heated air in motion.

Fiery zigzags, at times, before her.

Knees give way in walking.

Atropine sulph. was the first remedy chosen; then *Natrum mur.*, *Jaborandi*, and later *Lac can.* 2m; under this last remedy the visual fields have steadied, and the amblyopia greatly improved, so that in looking with one eye alone, she is unconscious of any disability existing; and were it not for a slightly vibratory motion, as of distant, heated air, she knows of no visual disturbance.

At the time of the present writing she is under treatment, and regularly gaining in general health, as well as in the visual function. The cure of such cases seem little short of the miraculous.

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## TRANSACTIONS OF CENTRAL NEW YORK SOCIETY.

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ROCHESTER, N. Y., Dec. 12, 1901.

The postponed annual meeting was called to order at 11:45 A. M., President Dr. Volney A. Hoard, of Rochester, in the chair.

Members present: Drs. Biegler, Clapp, Dake, Graham, Grant, Gwynn, Hermance, Hoard, Johnson, Leggett, Nash, Ross, Tretton.

Visitor: Dr. Thompson.

The minutes of the June meeting were read and approved. The secretary excused the neglect of notices for September upon the plea that her plans had miscarried until too late to prove effectual.

The President, Dr. Hoard, said that it seemed but a short time since he was informed that he had been elected

to the chair. That the year had been a prosperous one for the society, although it had had several interruptions to the usual order of business and had suffered from a loss both to its membership and to individuals. That the first interruption to the usual proceedings of this society, was the sickness and death of our friend and fellow member, Dr. A. B. Carr. That the sadness of this incident left the society unwilling to carry out its plan of rejoicing in its fiftieth anniversary, so the celebration had been deferred until March. The president said that he had thought, during the hour of waiting for the assemblage of members, how natural it would seem to have Dr. Carr drive to the door as he always did on these occasions. He further said that the idea of a celebration had occurred only after the September session and so had necessarily to be carried out by its several officers, without personal conference. He could say that it was a success in every sense of the word, it having thoroughly fulfilled every ones expectations. He thanked the members for their hearty co-operation under difficult circumstances, both for himself and for their secretary. He said concerning the September meeting that it was late when he received notice of the absence of the secretary, business was very much increased in Rochester, and Buffalo seemed to be the point to which those who had any leisure gravitated. Under these circumstances he had thought best to postpone the meeting until December. He expressed himself grateful for the forbearance and courtesies of the society.

Dr. Johnson then read and re-read §§ III and IV of the Organon, and commented upon the translation as to the meaning intended, as follows: "When the physician can see the totality of symptoms; when he can select the remedy similar to them; when he can remove the obstacles to recovery, then may he, etc." He did not quite like the choice of words in this translation (Stratten).

Dr. Grant had always liked the choice of words in the Stratten better than in other translations of the Organon. He thought the words apt. He said many medicines were

used that were not curative, almost more than in Hahnemann's time.

Dr. Gwynn had thought the expression "curative in disease" incorrect, but the explanation made it satisfactory. Dr. Gwynn drew attention to the fact that the translation says: "when guided by reason." Why then not be guided by knowledge?

Dr. Grant again thought the words apt, and said that reason is that which leads to knowledge, is that which points the way.

Several examples of removable obstacles were given, such as environment, bad air, bad habits, etc.

Dr. Gwynn thought that we too often went into the sick room so intent upon finding the appropriate remedy for the individual case, that we were inclined to forget the removal of "obstacles" that were readily perceptible.

Dr. Grant thought Dr. Biegler an exception in his ability to discover and remove obstacles to the recovery of his patients. He thought much of Dr. Biegler's success is due to his constant search for, and removal of, such obstacles as belong to the environment.

Dr. Biegler thought perhaps it was too frequent a habit to look for a remedy when one should remove an "obstacle." It had been his habit for many years to study the patient and the patient's surroundings, as well as to try and find a remedy. He said that of course the remedy was important, but the fundamental cause must be removed. He recalled a case of melancholia in a man who says. "He is so poor," "fears to use coal sufficient to keep warm," "to use a match for fear he shall want," "to entertain a friend at table because of the extra food necessary." By taking time and carefully studying the man, Dr. Biegler learned that he had had severe losses, had been "on the wrong side of the market," as some one remarked, and had been filled with disappointment, perhaps chagrin. Dr. Biegler said that these cases could be bolstered up and helped along, by having the friends watchful, taking advantage of, and report-

ing to the patient only favorable news upon each rise in the stocks in which he is interested, etc.

Dr. Biegler said that it required many visits and much tact to learn many of these "obstacles." He had before illustrated this paragraph in a local society by the following case: A lady had called him, some twenty-five years previously, for a severe pain in the hip. During his absence another physician had diagnosed a serious condition of the hip-joint and had advised the patient to remain in bed for three months at least. The next morning he saw the patient, and, upon locating the pain, asked to see her shoes, found them to have French heels, set well under the center of the foot, weak shanks, etc. He directed her to a shoemaker, described the shoe she should order, and turned to leave. When asked if he would prescribe, said he had done so, that she needed a shoemaker and not a physician. To show the effectiveness of the prescription he said that she walked all about Europe for two years on the shoes then made, with no trouble because of this pain in hip. Returning, the shoes were cast aside, forgotten. Sometime after, while in California, the patient had return of the pain. Remembering what Dr. Biegler had told her concerning the shoes, she found herself again wearing those of bad construction, and again put on such as he had directed, with perfect relief.

Dr. Biegler further said that one often found cases of indigestion caused by the habit of gulping down food. He mentioned a case to which he was called a few days previously. He had made two visits before he found the cause of the symptoms of typhlitis or inflammation of the cœcum. He had been convinced that it was caused by some indiscretion in food. The patient, a boy, he finally learned had eaten a handful of hazel nuts, husks and all, and had followed that with peanuts. The case was soon relieved.

Dr. Johnson said he had a long time ago sent a family from Pittsford to Dr. Beigler and was told afterwards "*how many questions*" they had been asked, and that the doctor

'had kept them as much as an hour and a half," but the case was cured with one prescription.

Dr. Biegler mentioned a case in which he had difficulty in reaching the cause. The case first reported by mail was diagnosed typhoid by the resident physician, and that "typhoid" kept up all winter. In June the case developed diarrhœa, and Dr. Biegler finally saw it. In the first place the mother brought the vial of medicine prescribed by the so-called homeopathic physician in charge, and learned that she had been giving frequent doses from an ounce vial of the Acetate of Lead. Secondly, he saw symptoms of twitching about the face and asked if the lad had had a fall. At the next visit he asked again, both times receiving a firm negative. Finally a letter came, after the return home of the patient, saying that, in thinking it over, the mother remembered that shortly before his sickness the boy had fallen from a fruit tree, had been taken up lifeless and brought to the house, where he had remained unconscious for a long time, but that she had never thought of connecting the latter sickness with his fall. One prescription cured.

Dr. Grant then continued the subject of these paragraphs by reading a paper from Dr. Dever.

ORGANON, § § III, IV.

Dr. Dever: § III of the Organon gives due notice to those who knock at the door of the healing art, that certain requirements are necessary if they expect a full measure of success in the difficult art of making people well. "Physicians like poets are born not made." However, a strict obedience on the part of physicians to the plain statements of § III will relieve them of much of the embarrassment felt at finding themselves confronted by difficult cases of disease.

A clear perception of the "curative indications in each particular case of disease can only be attained by writing *all* of the symptoms which appear in the case, both subjective and objective, in order that the physician can examine them as a whole, and give due value to all. This is especially necessary of the strange, peculiar, or characterisit

symptoms, as they are leading and important as guides indicating the curative remedy needed.

The next important requirement of § III is that the physician shall be acquainted with the therapeutic (curative) effect of medicines, generally and individually. This requirement makes an inordinate demand upon the physician's knowledge of the *Materia Medica* from which he is to select that medicine which the case demands. Nor is this all, as the physician must exercise much common sense in the selection and application of the remedy in the matter of dosage, its quantity, quality, and repetition. The question of dose here introduced forces us to believe that Hahnemann regarded this question as one vital to the perpetuity of Homeopathy. (See §§ 275-287, inclusive.)

The third admonition is to remove such obstacles to the patient's recovery as are removable. These are of various kinds and degrees, and may exist within the patient as psora, syphilis or sycosis, or they may be due to environment, as bad air, water, food, etc. A thousand different things may act as obstacles, which it is the physician's duty to recognize and remove if he hopes for permanent cure.

§ IV relates to sanitary measures and is of much practical importance. It also stands as evidence of Hahnemann's peculiar foresight as to the requirements of the medical science of the future.

Dr. Grant: Dr. Dever mentions that physicians are born not made. This is particularly true of homeopathic physicians. Unless a man is born with a gift for seeing the small things, and with a special insight into the spiritual things, i. e., into the spiritual side of medicine, he can never become a homeopathic physician, and will only play at being one all his life. The physician without these gifts may be able to do many creditable things without being able to succeed at the greater things the cure of chronic disease.

Dr. Dake: The physician must have intuition, must see the latent energy in all created things.

Dr. Biegler: Another element preventing the development of the homeopathic physician is a lack of common



sense in physicians when they will ride a hobby of science.

Dr. Biegler then read Oliver Wendell Holmes' verdict upon the "Uses of Science." Science is a first rate piece of furniture for a man's upper chamber if he has common sense on the ground floor; but if a man has not plenty of good common sense, the more science he has the worse for his patients, and said, "God help the patients."

Dr. Biegler said for years he had not failed to cure cases of constipation caused by frequent use of cathartics.

Adjourned.

Called to order at 2 P. M.

The following clinical case was reported by Dr. Tretton:

#### HYSTERIA.

On August 8, 1900, I was called hurriedly to see Mrs. B. Found her lying on a couch, drawn across the door of her room in such a manner that she was in a direct draft from the open windows on each side. She was said to have had a convulsion. She was in a highly nervous state, finding it difficult to breathe, complaining greatly of the heat and requiring to be fanned continually.

She told a remarkable story of how she was slowly but surely starving to death, because it was impossible for her to retain the smallest quantity of even the blandest diet. She had fallen away in flesh from 112 to 77 pounds in six months, and as she expressed it, "if something were not done she would soon be carried out in a box."

She had had a number of convulsions of a tetanic character brought on by talking, or on some one coming into the room. And I might say in passing that she remarked that these attacks invariably came on when her husband was away, so that he had to be called home.

She was perfectly rigid and cyanotic during the attack, never losing consciousness.

Was very lachrymose, wanted to be on the move; was not contented in any one place for any length of time.

Tongue coated, thick, white, with foul taste, said it had been so for thirteen years.

Had always been constipated, had exhausted the entire list of cathartics and was in the depths of despair.

Had a great craving for acids, especially lemonade.

I thought it best to get her away from her sympathetic friends and had her removed to the hospital. She had a number of spasms after reaching the hospital, until she heard me instruct the doctor to "pour some hot water up her nose" if she had another one. She had no more. Within ten days her tongue had all cleaned off, her craving for acids had ceased, her appetite had so far improved that she could eat anything that was brought before her, including tomatoes. She remained in the hospital three or four weeks and had gained in flesh to such an extent that she thought her feet and legs were bloated when she discovered that they had increased in size. The treatment besides that already described was two doses of Pulsatilla and one of Sulphur.

Dr. Tretton also reported the cure of two cases in two young men, strangers to each other, of suppurative cystic tumors behind the right ear, with Berberis 3d, the only potency he had at that time.

Dr. Nash recalled a case of simulated epilepsy brought on by the patient having seen the sympathy and practical benefits received by a man who suffered from true epilepsy.

Dr. Clapp once had a patient who professed to have been struck dumb. She revived quickly under a dose of Ammonium. He was discharged.

Dr. Tretton has had some previous knowledge of the patient referred to in his report. He had heard that she would *lose her voice* when her lover called before marriage, and that after marriage she would have *some attack* that recalled him from business. His business took him out of town, sometimes long distances, so of course he was greatly inconvenienced. I took him aside and told him confidentially that a little firmness on his part in not yielding to his wife's demands would cause her to recover rapidly. Unfortunately he repeated the advice to the wife, which ended the influence of both himself and the doctor.

Dr. Johnson questioned whether it was good or right for the physician in such a case to be too honest with the family to the detriment of the patient, who was afterward taken from one physician to another and made eventually incurable. He thought our own care and placebo would be better than that to which they were finally subjected.

Several cases of similar character and results were cited by various physicians.

Dr. Clapp agreed that these were cases difficult to manage, cases that tried ones medical skill, ones diplomatic skill, and ones faith in human nature.

Dr. Nash then presented a case and asked for remedy.

Man, 68 years, usually weighing 160-165 pounds, now 148; short, gray-eyed and blonde.

Abdomen enormously distended.

Abdomen Dull lower and middle portions to palpation.

Abdomen Tympanitic in upper portion.

Described enlargement as a perfect roll, extending round to sides.

Pain < sitting bent.

Pulse 65 < by motion.

Urine, without albumen or sugar; reddish sediment.

Hunger: eats little, so quickly "filled up".

Tongue, white at back.

Food tastes good, naturally, except is so quickly "full".

Nausea. mornings > some.

Nausea at sight of food.

Sickness at sight of food.

Thirstless.

Discharge of quantities of gas upward and downward.

Stools: regular, normal.

Very weak.

Wheezing breathing < exercise.

Skin unnaturally dry.

Sclerotic slightly yellow.

Has had several attacks of migratory rheumatism dur-

ing the last two years: > several times with Salicylate of Soda.

The physicians present were asked to write one remedy upon a slip of paper as a "snap-shot" prescription.

The result was several prescriptions of Lycopodium, Pulsatilla, China, Colchicum, etc.

It was learned that Lycopodium 3), China and Carbo v. had been given without relief, and that the patient was under Sulphur hoping Lycopodium would then follow well.

The secretary then reported that as the March Transactions for Semi-Centennial were largely reminiscent they would hardly be found useful to the ADVACNE in a medical way. She said that Dr. Allen had more than hinted it, and that Dr. Gwynn had desired that the March Transactions should be published separately for the members of the society and their friends.

Discussion was followed by appointment of the secretary as committee to learn the expense of publishing the March Transactions separately.

The report of the secretary and treasurer was accepted.

The following officers were elected for the coming year: President, E. P. Hussey, Buffalo; vice-president, W. W. Johnson, Rochester; censors, Drs. Nash, Ross, Alliaume.

Dr. Leggett was re-elected secretary and treasurer.

The following applications for election having taken more than the usual time were reported by the censors and duly elected: Drs. J. K. Tretton and W. W. Dake, Rochester; W. H. Nickelson, Adams.

Dr. Leggett finding there was still time for brief discussion begged attention to an excerpt contributed by Dr. Porsild to the *Frem* (Copenhagen).

#### EFFECTS OF THE INJECTION OF THE BLOOD OF THE DIFFERENT ANIMAL SPECIES UPON ONE ANOTHER.

In a study of the conditions and limitations of the transfusion of blood as a curative method, the following assertions are made by Dr. M. P. Porsild, in a historical sketch of the method, contributed to the *Frem* (Copenhagen).

"In the middle of the century just passed it was quite

common in certain cases of sickness to transmit to the invalid a quantity of fresh blood from a healthy person. At the same time an attempt was made to substitute the blood of healthy animals, but the attempt was a failure, inasmuch as the results of such transfusions were violent functional disturbance in the urinal channels and, in several instances, death.

“To ascertain the cause of this phenomenon, Aberbold undertook a series of chemical analyses of the blood of various animals, and although he found in the blood of the higher animals, on the whole, it contained the same elements as in man, it became clear to him that the blood of the herbivorous animals is chemically different from that of the carnivorous animals; and that for instance, the blood of the sheep and of the ox were more closely related than that of a horse and a dog.

“In 1872, the physiologist, Landois, experimented with animals, transfused blood from one to another, and closely watched the effect. He found that when a transfusion of blood was injurious *the serum of the blood of one animal dissolved the blood corpuscles of the other*. Landois gave the results of his experiments in one sentence: ‘A transfusion of blood is possible only between representatives of closely allied races.’ The value of this conclusion, says Dr. Porsild, has been further tested by the German physiologist, Hans Friedenthal, who in his experiments included a greater variety of animals, besides especially investigating the relations of human blood to that of animal blood.

“What peculiar element in the blood it is that dissolves the corpuscles is yet undetermined. Friedenthal has shown, among other things, that the serum of the eel dissolves the blood corpuscles of mammals, birds, reptiles and certain kinds of fish; that of the shark dissolves the blood corpuscles of the higher animals as well as that of the eel; that of chicken dissolves the blood corpuscles of other birds; and that of horses dissolves the corpuscles of rabbits, lambs, and *men*, but not of donkeys. The blood serum of hogs is shown to have an injurious effect upon all other ani-

mals, while human serum dissolves the serum of all cold-blooded animals, birds, and the above-mentioned mammals.

“M. P. Ravenal, in the *Lancet*, says, ‘it is a fair assumption from the evidence at hand, and in the absence of evidence to the contrary, that the bovine tubercle bacillus has a high degree of pathogenic power for man also, which is especially manifest in the early years of life,’ and so we vaccinate our youth with virus from the ox.

Further quotation, although interesting in its tracing of the relationship between the various races of the animal kingdom, and the relationship of man to the lower animals, is aside from the point intended. The *why* of fatal results so often obtained by the use of serum therapy-vaccination, etc., seems about to be answered. One of the most eminent physiologists of the day, by repeated experiments, discovers that horse-serum dissolves the blood corpuscles of the human. Another ascertains that the blood of the herbivora and carnivora are chemically different, and that the blood of both differs from that of man. Another shows the result of transfusion of the healthy animal blood into the human.

Why look further than at results obtained by world renowned experimentalists for the cause of the fatal decrease of vital resistance following the introduction of animal products into the human body? The disorganizations, with various high sounding titles, quoted as sequellæ of vaccination, but which, virtually, are vaccination diseases, and which quotation takes no note of the deeper chronic disturbances which leaves the system open to the contraction of various death dealing complaints, the cases of lock-jaw and tetanus reported to have followed the use of anti-toxin vaccination, and the various other conditions met by physicians daily, pointing to its use, would seem to have found answer. The serum of sick animals is no purer than that of healthy animals. Will the nation take heed? Will there be an immediate cessation of effort to spread the seeds of disease by men paid by the cities to protect, by the people who should be protected, by the supply fount of special preparations?

About the preparations: why, if all are good, is one preparation vaunted above another? Is there no inspector for the various "plants" for production of serum, vaccine, etc.? Does not the greatness of the nation depend upon its virility? How then can the barbaric customs of previous centuries, when it was permissible to feed the sick with all sorts of disgusting, nauseating substances—with the probable result of killing them at once, rather than leaving them invalided for life—add to a nation's strength?

A brief discussion by the members showed a clear insight of the subject.

Adjourned to meet at Syracuse, March 23, 1902.

Essayists appointed by the president:

|  |                   |
|--|-------------------|
| Organon § V.....                         | S. L. G. Leggett. |
| Homeopathic Treatment of Rheumatism..... | E. P. Hussey.     |
| A Lycopodium Case.....                   | W. H. Nickelson.  |
| Typhoid Fever Cases.....                 | G. H. Hoyt.       |
| Clinical Cases.....                      | H. W. Schwartz.   |

S. L. GUILD-LEGGETT, Sec'y.

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## HOT FLUSHES OF THE MENOPAUSE.

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BY S. E. CHAPMAN, M. D., Napa, Cal.

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For a number of months there have been running through the *Medical World*, an old school publication of Philadelphia, a series of articles from allopathic physicians all over the country relative to the condition which forms the heading of this paper. Each of them sent a "sure thing" prescription for this annoying accompaniment of the climacteric, and we, who have been in the field any length of time know the utter foolishness of them all. In the last number of the *Medical World* there is an article from me, giving an outline of the homeopathic treatment of these flushes, and I received the following letter from a prominent allopathic physician a few days since:

"Dear Dr. Chapman:

Seeing your letter in the *World* in which you suggest

certain homeopathic remedies for 'Hot Flushes,' I take the liberty of addressing you, and if you please of advising with you regarding my wife who has suffered daily from hot flushes for more than ten years. Perhaps you saw my letter in the *World* a few months ago, in which I requested the editor, or any of our medical brethren, to suggest a remedy for hot flushes. In due course of time a number of physicians kindly wrote personal letters to me suggesting quite a variety of remedies which they had never known to fail. We tried one or two that we had not tested before, but in every case the result has been negative. Would be glad to take a suggestion from you as to the remedy indicated by the following symptoms:

Patient is my wife: have been married 33 years; age 60; never pregnant; present health very good; weight 140 lbs.

Menopause occurred ten years ago, and the hot flushes have continued daily ever since.

They occur at night as well as in the day time.

There is no apparent exciting cause—in an instant her whole body will be so hot that she must get a fan, or seek an open window, and in half a minute she is chilly, and her heart has a harder stroke than natural.

The above may be repeated twenty times daily for days together, and then for a week she may have but half a dozen flushes in twenty-four hours, when she flatters herself that she is going to get better, when on they come again as bad as ever—I won't say worse, for that would seem impossible.

The foregoing are all the symptoms she has. At night the flushes come over her in sleep, then she throws off the cover and awakes chilly and bathed in a clammy sweat."

Now, doctor, if you will prescribe we shall remember you kindly for so doing. We were educated in an allopathic school, but have to date found no remedy that will relieve my suffering wife. I have no professional prejudices, and gladly reach out both hands to Homeopathy with an earnest desire for relief. We see that you have faith in finding the remedy, and I have the fullest confidence in your earnest-



ness and honesty of purpose. If you will kindly name the remedy and potency indicated by the symptoms we have named above, we shall be under lasting obligations, etc."

I reserve the name of my correspondent for obvious reasons. Of course I responded to this "Macedonian cry" instantly. One request I did not comply with; I did not tell him the name of the drug I sent him. I don't mind telling the readers of the *ADVANCE*, however, that I sent a powder of Sulphur cm, and powders of Placebo. I do not entertain a doubt of curing the doctor's wife, and I shall see that a full account of this case is published by the doctor in the *Medical World*.

By the way, perhaps a word of explanation may be necessary. The *Medical World* is the only allopathic journal that I know of that will give us a free field and a fair fight, and I would recommend every reader of the *ADVANCE* to subscribe for it. It affords us an opening for our homeopathic wedge, and I am in almost daily receipt of letters from old school physicians who desire to know more of Homeopathy. I hope to see a goodly number of them in Hering College next term.

P. S.—I should have said that the address of the *Medical World* is 1520 Chestnut St., Philadelphia, price \$1.00 per year. I am not an agent for the *World*, but I think it deserves our patronage on account of its liberality and fairness. Besides it keeps us posted as to how the fight is going, and tells us how *not* to do, and is thus valuable as a negative teacher of Homeopathy.

P. S. No. 2.—Patient better than for years; one month under Sulphur.—Ed.

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### CASES FROM PRACTICE.

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J. C. WHITE, M. D., Port Chester, N. Y.

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RUMEX CRISPUS. Mrs. C. M. B., age 45; dark complexion, dark hair and eyes.

Constant sneezing and coughing; profuse watery coryza, nose, eyes, throat and laryngeal region itch with desire to

scratch; < by cold air, lying (cough); < in June, July and August, > in winter. The dust makes her cough; then occiput and neck sensitive to cold.

Rumex 6 gave speedy relief.

**KALMIA LATIFOLIA.** Miss D., age 14, was found sitting up in bed grasping her instep and pressing her right heel firmly down on the bed, because of severe intermittent pain; could not induce her to move or to remove the pressure because of > of pain. Had suffered pain in cardiac region. Mitral regurgitation was observed with a rapid and spiteful beating heart.

*Kalmia latifolia* 10m relieved in two hours.

**AMBRA GRISEA.** Mr. L. S., coachman, age 45. After a prolonged debauch went to bed with delirium, nausea, vomiting, and a severe paroxysmal cough.

The latter symptom was attended with a sensation of pressure upon the chest, cough < at night, by lying and the least excitement—even my own announcement would start his cough—which was generally dry.

Distorted images disturbed his rest.

Sweat profuse, especially at night.

After the failure of *Hyoscyamus* and *Nux vomica*, *Ambra grisea* 200 relieved quickly.

**CONIUM MACULATUM.** Mrs. A., age 60, had la grippe and suffered severe pain in left ear and finally suppuration. Since then she has had constant ringing in the ear; vertigo on lying, especially when turning to the left. I was asked to prescribe for her cough, the symptoms of which were so very like *Conium* that they confirmed the selection of the remedy.

*Conium* 6 quickly cured the cough as well as the vertigo and ringing in the ear.

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Dr. J. N. Majumdar of Calcutta has had a serious illness, but has recovered and is again at work. Under date July 17th he writes: "During the Plague epidemic this year I have been able to make some wonderful cures with our homeopathic remedies. *Baptisia*, *Rhus*, *Pyrogen* and *Cal-*

care<sup>a</sup> ars, have been most frequently called for. It is very gratifying to be able to snatch a patient from the very jaws of death after he has been pronounced incurable by our allopathic friends. Many a man who has watched a case of Plague treated by us has been charmed with the effects of our medicines and still wonder how it can be possible for these seedlike pellets to effect such miracles in such desperate cases. But for my illness I would ere this have had a paper on this subject for my American colleagues. However, hope to write one on the Plague very soon."

### DONT'S IN TWENTIETH CENTURY SURGERY.

1. Don't criticize any man's work. A silent tongue is better than a glass house.
2. Don't do surgery under contract. Let no man hamper your head or your hands.
3. Don't forget that a poverty-stricken wretch is entitled to the same surgical consideration you would give a potentate.
4. Don't lose your head. You want it in the right place when a scalpel is in your hand.
5. Don't waver over unfortunate results. If you could save all there would be too much demand for your services.
6. Don't borrow too much of the other fellow's thunder. When you can, pay all you have borrowed. You might make some yourself if you would persevere.
7. Don't wash a granulating sore. You tear down what nature is trying to build up.
8. Don't fail to do your own operation if you can't do the other fellow's.
9. Don't tell a patient you saved his life. Let him do that.
10. Don't use too much alcohol in your surgical practise. It is a treacherous article in both health and disease.
11. Don't permit a nurse to be the attending physician. She has her place and should know it.—Dr. Lucien Lafton, in *American Surgery and Gynecology*.

## EDITORIAL.

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All Contributions, Exchanges, Books for Review and other communications should be addressed to the Editor, 5142 Washington Ave., who is responsible for the dignity and courtesy of the magazine, but not for the opinions of contributors.

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### OUR BELIEF AND OUR PRACTICE.

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Nov. 1, 1848, in the introduction to the third American edition of Hahnemann's *Organon*, Constantine Hering made the following statement regarding the progress and standing of Homeopathy in America, as well as the platform of principles upon which all homeopaths may consistently and steadfastly stand in defense of the law of scientific therapeutics. They are as true and as appropriate today as when written fifty-four years ago, and will be as true in the next century as they are in this.

It is now twelve years since the first edition of the *Organon of Medicine* appeared in this country. Since that period, the number of homeopathic physicians in the United States has more than doubled every four years. This increase has been gradual, sometimes more, and at others less rapid, but always without interruption; and at no time, neither in this country nor in Europe, has there been any retrogression from the ground gained. However, there have never been wanting those who asserted that Homeopathy was on the decline, and indeed was dead; which reminds us of the old adage, that when a man is said to be dead, he has usually the promise of a long life. Other opponents have entertained great hopes, when they have learned that the adherents of our school are divided into different parties. This is like the friends of royalty in Europe, predicting the downfall of republican institutions in this country, because there are here various political parties. Among so large a number of physicians it is quite natural that different opinions should be entertained and promulgated, and even that partisan conflicts should arise. But against the stubborn adherents of the old school doctrines, these various parties stand united as the varied wings of one common army.

1. All homeopathic physicians are united under the banner of the great law of cure, *similia similibus curantur*; however they may differ in regard to the theoretical explanation of that law, or the extent to which it may be applied.

2. All homeopathic physicians also acknowledge that provings upon the healthy are indispensable in ascertaining the unknown curative powers of drugs.

3. And finally; all homeopaths concur in giving but one medicine at a time, never mixing different drugs together under the absurd expectation that each will act according to their dictum.

This is the glorious tri-color of our school, which will make the circuit of the world, and in these we are as the heart of one man.

Every physician who professes to be a follower of Hahnemann *believes* in the above "glorious tri-color of our school." Why do not all practice what they believe to be the true principles of the law? One of the chief reasons is that they do not follow the instructions of Hahnemann in the "taking of the case," the first step in the selection of the remedy. If the data, the facts upon which the solution of the problem depends be defective, the selection cannot be correct.

Another reason is that the working armamentarium of the average homeopathic physician, unlike the surgeon whose instruments are complete in every particular, is lamentably defective. The working library contains but one or two text-books of *Materia Medica*, and these practically emasculated by condensation. The average physician also does not use a repertory, consequently is unable to find the remedy for a very sick patient, evidently depending upon a general knowledge of the so-called physiological action of a remedy, that will enable him to make an off-hand prescription, a guess. Is it to be wondered that he alternates, mixes, uses combination tablets or allopathic palliatives? He cannot guess any better than his allopathic colleague and no matter what he *believes*, in practice he descends to empiricism. The law is not a respecter of persons or practice. Like the law of chemical affinity, its details must be complied with in every particular if we would obtain the results.

**The Hering-Dunham Medical College and Post-Graduate School of Homeopathics** is the name under which these colleges, the only representatives of pure Homeopathy, will be known in the future. In union there is strength—both in the faculty and the classes—increased facilities for teaching and increased enthusiasm in both faculty and students. The session opens September 8th, with the students' reception Tuesday evening, September 9th, which we trust and believe will be the first session of a new era in the progress of genuine Homeopathy not only in America but in the world. With increased facilities and abundant clinical and hospital advantages both medical, obstetrical and surgical, not only the student but the post-graduate can see pure Homeopathy exemplified in every department of medicine. Our readers can confer no greater benefit on students than by directing their footsteps to the Hering-Dunham. While they are getting their medical education help them to get the best; for the best there is in Homeopathy is none too good for our students.

Anatomy, Bacteriology, Chemistry, Pathology, etc., are better taught now than they ever have been and in the Hering-Dunham College Materia Medica and Therapeutics will be more thoroughly taught than in any homeopathic college in the world and thus kept abreast scientific progress.

The student will be taught how to select the single remedy and how to use it when selected, in both acute and chronic diseases, so that he need not alternate or use combination tablets. If he is taught how to find the remedy he will never resort to polypharmacy; he can do much better work with his own science.

It will teach him how to cure appendicitis without surgery, diphtheria without anti-toxin, ague without quinine gonorrhœa and syphilis without constitutional sequellæ, and consumption without change of climate. Correct Homopathy will not only do all this in all curable cases, but it will greatly reduce present mortality rates.

Surgery when and where surgery is demanded, but homeopathy with surgery both before and after operations.

## NEW PUBLICATIONS.

**THE LAW OF SUGGESTION**, Including Hypnosis, what and why it is and how to induce it; The Law of Nature, Mind, Heredity, etc. By Santanelli (J. H. Loryea). Pp. 248. Fine antique laid, deckle edge paper, fully illustrated; bound in silk cloth, stamped in four colors and gold. Cover design by Louise Berger Bennett. Price, delivered, \$1.10.

This book is the work of an intensely earnest man, evidently a thinker, and will repay not only a reading but a careful study. The language is not always refined nor the argument scientifically expressed; but these literary defects can be overlooked, when there are subjects of practical value to be illustrated, something to be learned. Here are a few of the terms and phrases discussed and explained:

*“There are no synonyms, as no two things are the same.*

*Suggestion, anything that arouses an action.*

*Hypnosis, a simulated sleep, the subject being the “thought of sleep.”*

*Inspiration, a thought forced by an operator after hypnosis has been induced. Man is ruled by suggestion; we inspire a hypnotized subject.*

*Personal suggestion, where a thought is deliberately forced upon a person free from Hypnosis—exemplified by Christian and Mental Scientists.*

*Post-hypnotic suggestion, a misnomer.*

*Auto-suggestion, can only mean a “sleep walker.”*

*Mind, what is commonly believed to be the seat of intelligence.*

*Sympathetic system, all brain matter contra-distinguished from the cerebrum.*

*Thought, two or more associated ideas. Thoughts are forced not chosen.*

*Thinking, transforming of energy, man only realizes.*

*Memory, registration of ideas. Man never forgets, but fails to recall.*

*Abnormal*, impossible. Everything is normal or a natural result from the cause.

*Will (will power)*, I cannot comprehend it, though every one prides himself on possessing it.

*Law of Nature*, a phrase that conveys no meaning. If you can comprehend the phrase "Law of Nature" then you will know the Law of Suggestion, and it will be a useless waste of time to read the following pages.

No crime has ever been committed in hypnosis.

Prostitution is a curable disease.

The history of the so called advance in medicine travels side by side with the advance in sanitation. Rational medicine has made no progress (in therapeutics).

Insanity is a physical disease; there are no mental diseases.

So-called mental diseases are the result of a physical disease, and the disease, *per se*, is not mental."

This is practically the teaching of Hahnemann nearly a 100 years ago, when he says, *Organon* § 215: "Almost all the so-called mental diseases are nothing more than bodily diseases in which the symptom of derangement of the mind and disposition peculiar to each is increased while the bodily symptoms decline, etc."

These are samples of the subjects discussed and the interesting, even captivating, manner of discussing them proves the author a man who is in search of basic truths, of the causes which lead to sickness, crime, degradation and death. If he continues to think and act on these lines he will eventually find himself in the Hahnemannian Camp. The book is a beautiful specimen of the printers' art, but unfortunately for the reader lacks a table of contents and an index. These may be added in the next edition.

**THE COMPOSITE MAN**, *as comprehended in fourteen anatomical-impersonations*. By E. H. Pratt, M. D., Professor of Surgery in Chicago Homeopathic College. Improved Third Edition. The New Age Publishing House, 100 State St., Chicago. 1902. Illustrated.

This is a successful attempt to popularize the study of



Anatomy and consists of fourteen lectures on: The Bony; Muscular; Arterial; Venous; Lymphatic; Skin; Connective tissue; Cerebro spinal; Tubular; Sympathetic; Organic; Conscious; Subconscious, and Composite Man. It is an admirable attempt to render the study of anatomy both simple and attractive and as the author says: "To secure recognition, on the part of those who have heretofore been inclined to overlook them, of the existence of man's spiritual parts as essential elements in all that concerns his every possible condition."

The lectures on the "Conscious" and "Subconscious Man" are by far the most entertaining in the series and bear the stamp of the author's originality. If it is not in your library it should be.

#### STUDY IN THE PSYCHOLOGY OF SEX. SEXUAL INVERSION.

By Havelock Ellis, L. S. A. (England); Fellow of the Medico-legal Society of New York and the Anthropological Society of Berlin; Honorary Fellow of the Chicago Academy of Medicine, etc.; general editor of the Contemporary Science series since 1899. The "Studies in the Psychology of Sex" will probably be completed in five volumes. "Sexual Inversion" is second volume in the series. Pages xi-272. Size, 8½x5½ inches. Extra Cloth, \$2.00 net, delivered. Sold only to physicians, lawyers, advanced teachers, and scientists. Philadelphia, Pa.: F. A. Davis Co. Publishers, 1614-16 Cherry Street.

This work by Havelock Ellis is perhaps the most complete study of "sexual inversion" among all nationalities—ancient and modern, savage and civilized—among women as well as men, that has appeared in the English language. The history, nature and theory of sexual perversion and its effect on health, race and heredity are discussed and scientific conclusions drawn. The attitude of society and the laws for the punishment of its victims from the time of Justinian and the code Napoleon to those of America, Germany and England of today are explained as guides for the professional, either in law or medicine. It is a valuable contribution to medico-legal medicine that should be found in every library.

**HAY FEVER AND CATARRH OF HEAD AND NOSE WITH THEIR PREVENTIVE AND CURATIVE TREATMENT.** By E. B. Fanning, M. D. Boericke & Tafel: Philadelphia and Chicago. Pp. 170. 12 mo. Cloth, 75 cents.

In the preface the author makes the following statement: "The symptoms are nearly all taken from my own case, but covers about all the pains and ill-feelings this disease produces." We fear this statement is somewhat defective as the ground work on which to erect a treatment that will cope with the varying phases of this hydra-headed affection. "One swallow does not make a summer," neither will the symptoms presented by one patient however varying or comprehensive, form a reliable basis upon which to establish a treatment that will control an acute attack or eradicate the constitutional diathesis upon which it depends.

The cause of hay fever the author ascribes to an "acid in the blood." Well, this discovery is neither new nor true. But if it were, it would not warrant the basing of a system of therapeutics upon the cause or the pathology, under the law of similars. But we are more than astonished that in a professedly homeopathic work in the beginning of the twentieth century, the unscientific and unhomeopathic practice of alternation should be recommended. The alternating or mixing of two or more remedies is wholly uncalled for and hay fever can never be cured by any polypharmacy that is directed at the paroxysm and overlooks the patient.

**A BRIEF MANUAL OF PRESCRIPTION-WRITING** in Latin or English for the use of Physicians, Pharmacists, and Medical and Pharmacal Students. By M. L. Neff, A.M., M.D., Cedar Rapids, Ia. Pages v-152. Size, 8 x 5½ inches. Extra Cloth, 72 cents, net delivered. Philadelphia: F. A. Davis Co., Publishers, 1614-16 Cherry Street.

These practical rules, fragmentary as they must necessarily be, will be found very useful in prescription writing, and are the outgrowth, the author assures us, of experience in teaching medical students. The Latinizing of modern words; Latin phrases. with their abbreviations; incompatibility, etc., will be found very practical for office reference.

## CURRENT NEWS-NOTES AND IT MS.

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Dr. Lawrence M. Stanton has removed to The Osborne, 57th street and 7th avenue, New York.

Dr. Philip Rice (Hering '94), recently returned from Europe, is now located in the Stare-King building, 121 Geary street, San Francisco, Cal., and will confine his practice exclusively to Diseases of the Eye, Ear, Nose and Throat. We vouch for his correct prescribing.

Dr. Belle Gurney and daughter, of 6854 Wentworth avenue, are guests of Mrs. Hughes, of Springfield, Ill., at Harbor Springs, Mich.

Dr. Paul B. Wallace has evidently found, or made, a good business at Waupun, Wis. In referring to some of his cases that are improving under the single remedy and single dose of 1m potency he says: "It does me good to see them get better under the potencies. I am glad I attended Hering."

The latest is a complaint from a physician that one of his patients had to stop taking Perfection Liquid Food on retiring, as it always caused her to awaken with hunger before morning. This sounds very like a joke, but it is an absolute fact which Dr. Guernsey vouches for.

Dr. B. R. Johnston (Hering '93) has been elected professor of Theory and Practice of Medicine in the Homeopathic Department, University of Iowa, and has gone to New York for post-graduate work. The Alumni of Hering are rapidly coming to the front.

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White Wood as a Cure for the Tobacco Habit.—According to the *Electric Medical Journal*, the *Liriodendron tulipifera*, also known under the names of white poplar and white wood, is probably the largest of the lumber producing trees native to this country, excepting of course, the giants of California. The inner bark has been used to a considerable extent in years gone by, as a domestic remedy for malarial conditions, or infused in whisky as a tonic or bitters. This bark also constitutes a very efficient cure for the tobacco habit. The fresh, inner bark may be chewed, or the powdered bark may be mixed with sugar and extract of licorice, and pressed into a tablet, say of five grains of the bark. These tablets are to be allowed to dissolve in the mouth when ever the desire comes to take a chew or a smoke. The man who made the discovery cured himself, and he was a most inveterate chewer. He also gave it to dozens of his friends with fine results, finally selling his receipt to a large drug house for fifteen hundred dollars. While the remedy is cheap it is also harmless.

## HAHNEMANNIAN DIRECTORY.

For the convenience of readers who desire to recommend their patients to Hahnemannian physicians we publish a list of those who to the best of our knowledge, use the single remedy. We ask assistance in correcting, extending and perfecting this list in order to make it more useful. These cards, including subscription, \$3.00 per year, but names of all Hahnemannians will be retained in the Directory whether subscribers or not.

- Arkansas.**  
**Eureka Springs,**  
 Ellis, C. F.  
**Hot Springs,**  
 Biggs, E. L.  
 Halman, H. V.
- Alabama,**  
**Normal,**  
 Ford, Justina.
- California.**  
**Healdsburg,**  
 Huffman, J. E.  
**Los Angeles,**  
 Glidden, J. I. Mackay, Henne Bldg.  
 Hawkes, W. J., 620 Laughlin bldg.  
 Waddell, W. E., 431 Douglas Bldg.  
**Marysville,**  
 Tapley, J. F.  
**San Francisco,**  
 Martin, Geo H., 606 Sutter St.  
 Martin, Eleanor F., 606 Sutter St.  
 McNeil, A., 611 Van Ness Ave.  
 Selfridge, C. M., 400½ Haight St.  
 Ledyard, W. E., Oakland.  
 Underwood, Maro F., 21 Powell St.  
**San Luis Obispo,**  
 Winslow, T. Hartley.  
**Santa Barbara,**  
 Crooks, E. W.  
 Stambach, Henry L.  
 Balch, E. T.,
- Woodland,**  
 Martin, J. T.
- Canada.**  
**Hamilton,**  
 Wickens, A. E.  
**Ottawa,**  
 McLaren, D. C., 133 Maria St.  
 Quackenbush, Arnley, 131 Main St.  
**Toronto,**  
 Adams, E. T.  
 Hardy, E. A. P., 605 Spadina Ave.
- Hearn, Robert.  
 Jones, D. Ogden.  
 Tyrell, J. D. 589 Sherbourne Ave.
- Colorado.**  
**Denver,**  
 Shannon, Sam'l F., Jacobson Bldg.  
**Victor,**  
 Lane, Frances Margaret.
- Connecticut.**  
**Bridgeport,**  
 Gregory, Edward P., LaFayette St.  
**Hartford,**  
 Case, Erastus E., 902 Main St.  
**Middletown,**  
 Griffin, Louise A., 198 College St.  
**Milford,**  
 Nahm, Ida M., Laurel Beach.  
**New Haven,**  
 Goodrich, L. R., 93 Lake Place.  
**Torrington,**  
 Pulver, Grace C.
- Waterbury,**  
 Morgan, A. R., 50 Leavenworth St.
- Delaware.**  
**Wilmington.** Mullins, J. W.
- District of Columbia.**  
**Washington,**  
 Custis, J. B. Gregg, 912 15th St.  
 Riggs, D. H., 1410-11th St.
- England.**  
**Liverpool.**  
 Stuart Peter, Rodney St.
- London,**  
 Berridge, E. W., 48 Sussex  
 Gardens. (W  
 Clarke, John H., 30 Clarges St.  
 Foster, J., 10 St. George's Road.  
 Heath, Alfred, 114 Ebury St.  
 Lewin, Octavia, 25 Wimpole St.  
 Skinner, Thomas, 25 Somerset St.  
 Thornett, A. Marian, 25 Wimpole.
- Plymouth.**  
 Vawdrey, T. G.





S. H. WASHBURN, M. D., Elmwood, Illinois

# THE MEDICAL ADVANCE

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## PRESCRIBING FOR BABY.

DR. LYDIA SCHOLES, Chicago.

Empirical prescribing will not accomplish any more for baby than it will for the adult. It is necessary to individualize and prescribe for the patient, not the disease. No matter how tiny and insignificant the child may appear, it has its individuality calling for a nice discrimination between remedies. Look at it closely, for we have only objective symptoms and the family history to guide us. It may be plump or lean, fresh looking or old and withered, cross or good-natured, stupid or bright. Parts of the body may be emaciated, the abdomen large, the head too big for the body, the fontanels wide open. These various conditions are suggestive of remedies. One of the first things we are likely to encounter is asphyxia. The usual mechanical means of resuscitation will generally suffice to revive the child; but it may remain blue and cold for a long time, when Camphor will restore it. It may even arouse it from apparent death. Where the face is purple and pulse imperceptible, Opium—the potentized, of course—may revive it. I recently revived with whisky an infant that had been cold and apparently lifeless for twelve hours. After a good deal of coaxing it took the breast and is now growing finely. In cases where there has been much loss of blood by the mother, and the infant is pale or anæmic, Cinchona will help it, and, of course, should be given to the mother also. Arnica is the remedy I use most frequently after

labor. It has a most beneficent effect. No one knows how bruised and sore the little babe is after its difficult entrance into this world, even under the most favorable circumstances, so I give Arnica unless some other remedy is clearly indicated. It is good practice to give the medicine intended for baby to the mother, if she nurses it, which, of course, she should. My old friend and physician, Dr. Knechler, recommended this and it works well.

Just here I should like to enter a protest against the practice so prevalent now, of bringing babies up on the bottle. It is fashionable, and mothers imagine that it will be so easy. I am afraid that some doctors advise very early weaning to please the mother or her friends, with disastrous results to the helpless infant and untold trouble to the mother or family. Even when there is no milk at first, and there is seldom much, it will appear in most cases if the baby is regularly put to the breast. The act of nursing sets up vigorous contractions of the uterus which help to restore it to its normal condition. Of course, the young mother does not like it, for it causes her pain; but if she is informed that it is for her good and her child's, she will usually bear the pain courageously.

The eyes of the baby must be wiped as soon as the head is delivered, and more carefully cleansed later. If they become inflamed or discharge, I usually give Sulphur or Mercurius, being guided by the appearance of the child and the family history. I like the old fashioned way of using some of the mother's milk in baby's sore eyes. It is very soothing and healing. Calcarea carb. is baby's remedy par excellence. If I could have but one remedy I would choose that. It prepares the child for the teething period. Antimon tartaricum is most useful in the catarrhs and influenzes of children where there is dyspnœa, with rattling of mucus in chest and throat and blueness of face.

Nux vomica or Kali bichromicum have served me well in cases where the nose is stopped up and the child cannot nurse. In spasmodic croup I find the remedies Acon. Bell., Hepar and Spongia effective. In cases of membranous



croup Kali bichrom, Bromine and Iodine do wonderful work. Kali bichrom has happened to be the remedy for most cases coming to me.

For retention of urine, difficult or painful urination, it has sometimes been necessary to dilate the canal; but Apis and Aconite often relieve this condition, without mechanical interference.

Colic is one of the most distressing ailments of children. It is almost universal and mothers do not often call in the physician to attend to it. This is a good field for the homoeopathist, as our brethren, the regulars, the best of them give no medicine for it and allow the little one to suffer for weeks and months with no relief, more than that afforded by the hot water bag. They do a good deal when they discourage the use of soothing syrups and other anodynes to quiet the crying child. I knew one little child that was allowed to suffer with colic for three months, the parents being told that it was the three months colic, but at the end of that period baby died without any other disease apparently.

I am sure that by prescribing correctly for the infant, inherited tendencies to disease may be overcome, and a happy and healthful childhood and maturity insured to many an unpromising baby. The skin eruptions—what untold misery results from their suppression by all the numerous salves and ointments sold for that purpose; when a dose or two of Sulphur, Calcarea or other antipsoric would completely cure.

Some doctors argue that after giving the indicated remedy for a case of eczema, it is safe to put on a lotion or salve externally. How absurd it is to try to drive a disease out and in at the same time! This was tried on one of my children who had a persistent eruption all over the body. It was driven in and diabetes followed. Before he was cured an eruption again appeared which persisted for years, but his health then improved in every way and finally the eruption was cured. When my eldest child reached the teething period, an intolerable itching appeared on her

cheek, which she persisted in scratching till it bled. Knowing nothing of what I have since learned, I procured an ointment which healed the sore. Soon spinal disease developed which was diagnosed Pott's disease. For many months she wore a plaster cast, which finally had to be taken off for an abscess near one of the lumbar vertebra. It is a long story, but it is sufficient to say that under internal treatment this child grew to maturity with a straight though shortened back, and enjoys comparative health. There is no deformity, aside from the shortened trunk, which an ordinary observer would not see. She has been for years a teacher. What years of suffering the suppression of that discharge caused! She was a perfect picture of *Calcareo* when a baby, large head and abdomen; had much sweat about head and neck, fontanelles wide open and long in closing, flaxen hair and blue eyes with dilated pupils; precocious mentally; learned to walk for a short time, then could not for years, or until the plaster cast made walking possible. The internal remedy, given at the proper time, instead of the external application would have cured that child. Who can doubt it?

I have in mind a child of the slums, cared for at the time by the Salvation Army, its mother a *Mary Magdalene*. Little *Mary* was a pitiable object. Her eyes were inflamed, eye-lashes gone, eruption about mouth, very large abdomen, teeth defective, always cross and unhappy. *Sulphur* and *Calcareo carb.* made of this unpromising subject a nice rosy cheeked, clean-faced, happy child. It was permanent, too, for I saw her two years later, and the sister called my attention to her to see her improvement; she had no other physician, nor treatment.

I will note another child of the same neighborhood but whose parentage was good. She was large and fleshy, of light complexion, and had a profuse and gummy discharge from behind both ears, sufficient to saturate the entire hair, which was heavy. Nose was running all the time. A few doses of *Graphites*, high, cured that child in a month. Think of that, with such unsanitary conditions, in a rear

basement in the slums. In contrast to that, I will place a dark-haired beautiful child of good family in a comfortable home, in a nice neighborhood, well fed and cared for. She too had this sticky discharge behind both ears. One of our most successful homeopathic practitioners had charge of that child for years and he prescribed Zinc ointment for it. It would disappear for a time and then return. When she came to me, her general health was bad, and a number of the lymphatic cervical glands were as large as hazel nuts, more and more becoming affected. Graphites in various potencies made a perfect cure. She has just reached maturity, a beautiful healthy miss of sixteen years. Were those glands tubercular? I don't know, but I do know that many a physician would have advised their extirpation with the knife.

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DISCUSSION.—E. B. Nash, M. D.—The chairman (Dr. Reininger) says that the writer of this paper is so nervous that she would faint if she tried to read it herself, but I do not think that the lady need be afraid to read such a good paper as that. I thank her for it. I place particular stress upon the first part of the paper, that treats about understanding the personel of the patient. The temperament, general moods, etc., of the patient are to be considered when you come to select the remedy. I remember a passage at arms that occurred between myself and Dr. T. L. Brown that may illustrate it. He got to talking about the personel of remedies and patients and said: "Doctor, your remedy is Aconite." I asked why: "Oh," he said, "you are so damned afraid of dying all the time." Well, he was right about that. The last thing that I will do is die, you can bet on that. He was the most egotistical, conceited man that ever drew the breath of life; and when he asked me for his remedy I was ready for him. I told him that it was undoubtedly Platina because it has pride, over estimation of one's own powers, and self-conceit. "You think so," said he. "Yes," I told him, "and everybody else thinks so too." It is very seldom that you will find a pa-

tient with thin visage, stooping shoulders, with red lips, nose and ears calling for *Calcareo carbonica*, no matter what his symptoms may be. The burning of Sulphur will come to the fore in that kind of a temperament. I do not wonder that hell is represented by a fire of brimstone, because it is eternally burning, in the human economy. On the other hand coldness is the grand characteristic of *Calcareo*, coldness of the hands, feet, calves and everywhere else. Coldness is as prominent under this remedy as burning is under Sulphur. These considerations of temperament often help us to select the right remedy when the choice without them would be very difficult indeed.

I once had a case that puzzled me very much. It was a young lady with skin disease. I tried to cure the eruption for over a year, with no results. I hated to look at that patient; it made me disgusted with myself and I do not doubt but what she was disgusted with me. One day while I was surveying her I noticed all at once that there were dark lines under the eyes that lead me to *Lycopodium*. I found that her symptoms were covered by that remedy, but I had never thought of it before, because I did not find the particulars of her skin symptoms to suggest that remedy, and yet there it was. I gave her one dose of *Lycopodium* and the father of the girl said to me two weeks later, that that last medicine had done her more good than the whole treatment of the year before.

C. W. Butler, M. D.—I like that paper and this discussion largely because there has nothing been said about nosodes. The old remedies, well proved and well known, can be depended upon, and we all do depend upon them. I fear that we are getting to look too strongly towards the nosodes and insensibly to depend upon the *name* of the disease without regard to the symptoms. There is something about the nosodes that leads us to think of kindred diseases by name as soon as the diagnosis is made. Prescribe the nosodes upon symptoms and not upon pathology, then nobody can find any fault with them.

## LABOR COMPLICATED WITH MALARIA.

BY E. E. REININGER, M. D., Chicago, Ill.

There are complications occasionally arising in obstetrical practice that are trials to our courage and ability. When one does arise, how the mind craves a commanding knowledge and experience to successfully terminate it.

I shall not forget one of that order coming my way nearly two years ago in a strong and well-nourished woman of about twenty-eight years of age, of dark hair, eyes and skin, who was in her second labor.

She is the possessor of a fine mind and a charming disposition, consequently had the ability to keep herself calm during the trying ordeal of hard labor.

The following conditions were present: cervix three-quarters dilated, a ruptured sack, a right brow, which later was reduced to a face presentation.

The labor had been on for several hours, the pains were hard and tedious, keeping up uninterruptedly without apparent progress being made, terminating in about five hours after seeing her.

Soon after second stage of labor had been completed the patient complained of coldness all over body, which shortly after eventuated in a terrific chill.

The air was hot and sultry that July night. The heat of the room, the hardness of the birth, the copious sweating, the draft of air passing on patient, covered with a moist sheet, which was so from perspiration, the subsidence of mental tension, all, as I thought, had much to do with inducing that chill.

Aconite was given with apparent good results. The third stage of labor having been completed, no further attention being required from myself, the patient was assigned to the care of a nurse who called me in about an hour after leaving the lying-in room to inform me that patient had a temperature of 105 and much mental excitement. I sought

the bedside of the afflicted one and questioned her as to her feelings, thereby hoping to find an appropriate remedy covering this extraordinary phenomenon coming on so soon after the termination of labor.

Patient complained of frontal and occipital headache, with vertigo, like floating away, chilly feeling in the back moving upwards, numbness and trembling of body and extremities, no thirst, a moist hot skin, a rapid bounding pulse, a slow action of mind and a labored use of tongue, for which group of symptoms Gelsemium was suggested to mind but not given, trusting that Aconite would relieve the patient temporarily at least.

There had been no perverted feelings noticed just before labor began, nor during the previous weeks, leading to clue as to this manifestation of disease. Before leaving patient that morning she expressed herself as improving. The day passed with no new developments, Gelsemium was left to be given later if necessary. The following morning at about the time previous chill came on, a slight chill occurred, a fever developed and continued till latter part of forenoon when I saw her.

The situation had changed from day before in that there were tenderness and pain in abdomen on pressure, some tympanites and an arrest of usual lochial discharge. I now thought it wise to make an examination of uterus, after which, a curettement was decided upon and made, revealing no indications of there having been an infection induced through the birthtrack to show cause of disease. The third morning following birth there was another terrific chill and fever, the latter lasting the greater part of forenoon, some tenderness and pain with tympanites continuing.

The fourth morning was practically a repetition of the third. With this addition, the disease had now made a change in patient's appearance which was noticeable in the color of skin and marked prostration.

I realized that I had a hard problem to solve in curing the sufferer of a depressing illness and that something must be done as soon as possible to check its progress. The

family became anxious about prognosis and sought speedy relief for the afflicted one.

An obstetrician of experience was asked for by husband and relatives, to which request I yielded. Medical literature has on record cases of inactive pelvic abscesses resulting from previous infection, specific and otherwise, which remain dormant until aroused by the bruising incident to labor, some becoming active immediately, and others following within three days to some weeks after labor.

In this particular case I had no definite knowledge precluding any previous infection resulting in a latent abscess, therefore held to the theory that an abscess might be the cause of trouble, being partly confirmed in the idea by the course of treatment pursued, although her health had been good during gestation.

Infection can be conveyed to patient by attendant, a common source of such unhappy occurrence. It may happen through meddlesome interferences from one having no business to interfere; I had had one such in a nurse making repeated vaginal examinations at the request of patient and without my knowledge, till after an infection had taken place.

As to my having been the cause, that might be a possibility, and yet I had not been exposed to an infection of any kind during the previous several weeks, neither in private nor in hospital practice. It has been my habit to carry out strict aseptic precautions in personal cleanliness, no digital examinations of birth-tract being made till after thoroughly scrubbing arms, hands, fingers and especially finger nails, to avoid a possible chance of conveying infection. My desire was to make another thorough physical and uterine examination, including curettement as well as one of the blood, before counsel came in to see patient.

The former was made immediately, but there was nothing found worth mentioning in addition to facts known. The fact that I had had experience in examining blood to determine doubtful conditions of similar character, led me to do so in this case; that it would confirm the diagnosis

only, is to be admitted; but what a relief to the mind to even have that consolation in a case of this kind of complication. This I did, and to my satisfaction there were found plasmodium malarix in profusion and in several stages of development, clearly demonstrating the disease to be one of malaria and not one of infection following labor.

I was satisfied now that more study given toward finding the indicated remedy and its application would successfully cure the patient and restore hope in the minds of all concerned. The common way of handling a condition of this sort is by large doses of Quinine and the majority of medical men would have selected and given this drug for treatment, irrespectively of consequences. Is it not far better to actually cure a disease, rather than to suppress it?

Why engorge liver, spleen and blood with a drug which takes a long time to eradicate itself from the system? There are instances, and they are not rare, where that drug never can be eradicated from the body, but remains in the form of quinine cachexia.

Why not accept and apply Hahnemann's teachings as the standard in therapeutics, where life and health, in the present and future, are at stake? He declares that "the highest aim of healing is the speedy and permanent restitution of health, or gentle alleviation and obliteration of disease in its entire extent, in the shortest, most reliable and safest manner, according to clearly intelligible reasons." The image of the disease having been obtained in the following prominent and characteristic symptoms, the prescriptions which cured the patient, was based upon it.

Chill beginning about 2 a. m. each night, being regular as to time.

Chill beginning in lower extremity and going upwards.

Chill lasting a long time.

Chill being hard and producing terrors in mind of patient.

Fever lasting a long time.

Sweats profusely all over and lasting a long time.

Thirst little or none, during chill, fever and sweat.



After comparison with a few remedies, choice was made of *Sabadilla* which was given and promptly cleared the case of all pathological symptoms. There was not even the slightest return of any of them on the following morning, nor since; patient making a good recovery on this one remedy alone. My consultant pronounced the disease pyæmia. I asked him on what he based his diagnosis and he replied upon the history of the case and the tympanites. I called his attention to examination made of blood and finding plasmodia in it, proving illness to be malaria; to which he would not listen. My reason for following course as stated, was a desire to do rather than not to do what would aid me in getting at etiology of disease.

I am well aware that the procedure followed was not in accordance with the teachings of Hahnemannian Homeopathy. I am equally aware that the findings in uterine and blood examinations would not aid me one iota in making a homeopathic prescription, but I had in my favor an unquestioned right, and besides felt it my duty, to use methods of accuracy, confirming diagnosis made, when same was not harmful to patient, and not interfering with treatment; besides by so doing, the good will and future patronage of family and their friends were retained, which was worthy of consideration.

It may be well to state, that in several conversations had with Mr. John B. Young, of Clinton, Iowa, who is as far as known to me the only surviving patient living in America, of Dr. Samuel Hahnemann's, he informed me that Hahnemann had him strip body of all clothing, then began a physical examination that lasted over an hour, during which he percussed and auscultated front and back of chest in lying and standing positions. This Hahnemann did repeatedly, inducing an exhaustion, from which patient thought he would collapse, before completion of that first examination. This shows to my mind conclusively that Hahnemann knew the value of a thorough physical examination in his study of diseased conditions.

By way of explanation mention should be made of the

fact that Mr. Young was then a boy of thirteen years of age, and that he had to travel from Scotland to Paris by boat and stage in relays; that he was said to be consumptive and reduced in physical strength from a long continued illness and long travel, accounting for exhaustion at time of Hahnemann's thorough examination.

The third paragraph of the Organon plainly teaches me that in order to be a master of the art of healing, one ought to know "What is curable in diseases in general and in each individual case in particular." It does not say how that knowledge is to be obtained. I take it to mean by any method not harmful to patient and yet an aid in the study of disease.

My mind naturally speculated as to the etiology of such an unusual train of symptoms, occurring at a time when they did; I never had such an experience before nor since, nor can I recall reading anything descriptive of such phenomena; it is a common occurrence for patient to complain of feeling chilly and to actually shiver immediately after the close of labor. The fact that the patient's health was restored by the single remedy demonstrates that Hahnemann's law of the similar is a safe method of cure for the patient, assuring the greatest good in the end obtained.

The restoration was speedy, permanent and complete the disease having not returned in nearly two years. The treatment did not jeopardize the health of either mother or babe, it cut short a vitiating disease, and left no after depressing effects. The theory that malaria infects persons living in swampy sections or where the soil is being newly broken, or where surface water is drunk will not explain the cause of the disease in my patient; she has always lived in Chicago and was not out of the city for several years prior to her illness. Why should she have a disorder of the blood when all known causes of such a malady have been excluded? Was the disease caused by a bite of a mosquito?

Malaria is not common in Chicago. Malaria complicated with labor, as this case was, is an exceedingly rare occurrence in our city, this is so, at least in the part of the

city I live in. All cases of malaria I have treated in hospital or private practice, in our city, have come from malarial localities, except this one case.

Examination made of blood by microscope, demonstrated what the disturbing element was due to, and had it been made the first day of pathological manifestation the useless examinations of uterus and curettements would not have been undertaken, they were uncalled for and should not have been made.

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DISCUSSION—J. B. S. King, M. D.—One would not suppose that that would be a very common thing to meet and yet I had just such a complication during the last fall. I was sent to see a Polish woman supposed to be suffering from blood poisoning after labor. The child was eight days old and doing well; the mother was having recurring chills and high fevers with headache and copious sweats. The doctors who had attended her evidently thought that it was a case of septic or at least sapremic poisoning, for I was told that the uterus had been subjected to two operations of curettage in the eight days since the birth of the baby. Knowing that Drs. H. C. Allen and Boger here recommended Pyrogen very highly in sepsis, no matter what the symptoms were, I gave Pyrogen without the slightest benefit. One day after having a discouraging report I made a blood examination and found without the least difficulty the plasmodium of malaria. This put a new light on the case and relieved my mind about the prognosis. Prescribed for according to the symptoms, without the bugbear of septicemia in my mind, she made a quick and satisfactory recovery and my reputation in the Polish district was established.

A. P. Hanchett, M. D.—I am glad to hear a paper in which the trouble was taken to make an accurate diagnosis. As a rule we attend too little to that part of medicine. Every resource of science that is reliable belongs to us, as much as to anybody in the land. We should put them in practice and give our patients the benefit of them.

The paper reminded me very vividly of a case that I had

a good many years ago. It caused me a great amount of anxiety and disturbance at the time. I did not have a blood examination made, that was a point not known so well then as it is now. After a long time I decided that it was, possibly at least, a case of malarial infection, instead of sepsis, and taking down the symptoms carefully I prescribed for her with the best results. One peculiar symptom was, the chill came every time she took a drink of water.

E. B. Nash, M. D.—I enjoyed the paper very much, but I noticed that when the doctor had discovered the plasmodium and thus convinced himself that it was malaria, he sat down and studied the remedy that covered the symptoms and cured in the old way after all. Why did he not do that before the plasmodium was discovered; both the paper, and also Dr. King acknowledge that the plasmodium did not help them to discover the remedy. I have no fault with scientific means of diagnosis, and believe that it is our duty to know everything possible about our cases for purposes of prognosis, diagnosis, hygienic management, etc., but these things, valuable as they are, must not be allowed to encroach upon the field of selecting the remedy. The latter generally lies outside of the symptoms upon which the diagnosis is formed. The minute symptoms that are apparently trivial, that escape the attention of the diagnostician are often the important ones for the selection of the remedy. I heard a paper discussed at one of the meetings of a New York society last April, in which the speaker endeavored to slight the selection of the remedy from symptoms rather than from diagnostic and pathological points. He cited a case of a sick child suffering with convulsions, and after thorough inquiries he discovered that the child had swallowed a lot of cherry stones. As he learnedly said the convulsions were reflex from irritation of the cherry stones, and when they were removed by a cathartic the convulsions were cured, without any symptomatic remedy at all. This proved to him that the symptoms did not amount to much in comparison with the pathological consideration of the case. I replied that it did not require much science to

know that the cherry stones had to be got rid of, almost any old woman would have known as much as that. A scientific doctor should have intelligence enough to take the whole case, including the cherry stones, before he can be called a homeopathic physician. The whole case must be taken whether you get at it by the examination of the blood, urine, sputum and what not, but you must understand all about the case as a physician, and only then can you be said to base your prescription upon the symptoms.

E. E. Reininger, M. D.—I at first thought that Aconite was a proper choice, but after studying some time I found that the picture was as near to Gelsemium as possible. It was given and you will notice that the following morning there was only a slight chill. I then thought that Gelsemium covered the condition. The chill was repeated on the third and fourth mornings, and it was then that I retook the case and made another prescription. I did not find the remedy as easily as you pick up pebbles on the sea-shore. But I found it after hard study.

H. C. Allen, M. D.—I have been interested in this paper and discussion. I just want to say that if Dr. King had followed Hahnemann's instructions and also mine, he would not have prescribed Pyrogen in that case, but would have sat down and taken the symptoms and got the remedy in the first instance, with or without the examination of the blood. The reason that Pyrogen cures some of my cases is because it is indicated and I esteem it because it has been indicated in a good many cases of a serious nature.

C. M. Boger, M. D.—I have noticed several times that foreign bodies are ejected under the action of the homeopathic remedy. Under the action of Belladonna I have noticed that the patient vomited up foreign substances. It was a critical action and came suddenly, and was in the nature of a relief. Hahnemann was requested to cite cases and replied that it was of no use. I think that it is useful and interesting to relate cases, not that you may give the same remedy, but that the principles of selection may be illustrated. It is the object and the benefit of all our meet-

ings to show how the selection of the homeopathic remedy is made and to illustrate the power and beauty of its action.

The best working method is to write down all the symptoms and stick to the facts of the case before you, without running into theories. I have rarely to give a second prescription in intermittent fever. It is a disease in which you are compelled to give a wide range of remedies. I have even cured a case with Stramonium. It should be impressed upon the mind that there is nothing good for malaria, any remedy in the books may be indicated, and it is a misfortune to get a few remedies in one's head for this disease.

E. B. Nash, M. D.—Or for any other disease.

A. Donald, M. D.—My experience with malaria is very limited, and both the paper and discussion are very interesting to me. I like the method of making the diagnosis, because it puts us in condition to talk back at old school criticism. The few cases that I have seen were not difficult and were cured by a single remedy.

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### LABOR MADE POSSIBLE AND EASY.

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BY P. C. KRICHBAUM, M. D., Upper Montclair, N. J.

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I do not report this case for its merits, or because it was characterized by any brilliant prescribing, but simply record it that our recent graduates or the timid, may take courage, and not give up the battle because obstacles to the action of the indicated remedy, in the form of mechanical obstructions, are by excellent authority said to exist.

Mrs. M., dark complexion, tall, large hips, aged 30, consulted me early last year about the cessation of her menses. She informed me that there was but little, in fact no likelihood of her being pregnant, as Dr. So and So had said that it would be impossible for her to give birth to a child, hence she had used the strictest measures to avert pregnancy, and knew what she was talking about.

Close questioning revealed the following history. Ma r

ried three years, living then in New York. Shortly after marriage became pregnant. About the sixth week had so much pain and vomiting that she called in her physician, a homeopath. He prescribed for her for several days without any effect. Her condition then became so alarming that the doctor in charge asked to have a specialist see the case. As a result of said consultation it was decided that an abortion was imperatively called for. The patient objected, and the advice of a second specialist was sought. The diagnosis was confirmed. The uterus was said to be too small to perform its part in the gestative function. Mr. M. at this juncture offered some objection, and his wife was finally sent to Albany for the verdict of her old doctor. But this last opinion only bolstered up the proposed measure of the others, and so the abortion was performed.

Now the complication was again confronting her, but my earnest advice was to defer any radical procedure for a time at least. She complained of nothing, hence received as much in medicine. When the six weeks were up, back came the old nausea and pain. She was tearful, nervous and restless, pains coming on suddenly and going away gradually.

I kept the patient in bed, gave Puls. 2m. and left instructions for them to report to me later. Relief at this time was soon obtained. We then moved along comfortably till the third month, when the above condition returned so nearly the same that she received another prescription of the same remedy. At the fifth month, I was sent for in a hurry. Mrs. M. was having pains about every fifteen minutes. Examination revealed no dilatation consequently I ordered her put to bed upon a board with thin mattress in between. Her skin was mottled, some constipation, which with the characteristic bearing down sensation called for Sepia. The sixth month gave very little trouble but the seventh came on with a series of difficulties. Having found some sugar in the urine, and as there were rheumatic pains present which Colocynth had relieved before, I gave her Colocynth cm. When I dismissed her this time, I asked

her if she felt satisfied with the size and capacity of her uterus, and she assured me that she did.

When the final day arrived, excitement ran high. The attendants were very eager for my presence, but upon reaching my patient, two and a half hours of the three hours of her labor had passed, and Mrs. M. gave birth to an eight pound boy in a perfectly normal manner.

Up went Homeopathy and the last doctor, and down went Allopathy and Specialists. I did not mention the sleepless nights, loss of appetite, and peculiar cravings which Placebo in a few doses always promptly relieved.

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DISCUSSION.—C. M. Boger, M. D.—That paper was instructive, and reminds me of a case in which there seemed to be an undeveloped or infantile uterus. The woman had aborted. By careful prescribing things were fixed up so that she became pregnant and finally was delivered after a difficult labor of a large child. Both the mother and boy are alive today. It shows that we should not be too ready to interfere with mechanical aid. Nature is wonderful in her recuperative powers. It is just as well to wait a while and give nature a chance.

Alex. Donald, M. D.—I am pleased with the paper. It brings up general principles. Ladies have come to me frequently, with the verdict of the family physician that owing to ill-health it was impossible for them to be delivered of a healthy child. I have always found that the trouble was in the mind, rather than in the body and I have generally succeeded in persuading them to go through with the process.

There was a woman near me who wanted to have a child after two or three miscarriages. She had been told by the doctor who attended her that nothing could save her own life, except an abortion. Some relatives who knew me, advised her to try a change of venue and she applied to me. After making an examination, I assured her that she was all right, and gave her one dose of *Lycopodium*. The nausea was overcome, her mind quieted and in due time she was delivered of a healthy boy. That case made many con-



verts to our school from Allopathy. We have too little faith in nature, and too little courage in trusting her. It is very easy to be mistaken about the size of the pelvis and I would not put much faith in measurements of that kind; rather encourage the mother and treat her homeopathically and as a rule, all will be well.

P. E. Krichbaum, M. D.—This party was very anxious to have a child, and this labor proved so easy that she told me that she would like to have nine more.

H. C. Allen, M. D.—When you come across a difficult case of obstetrics, there is nothing that you can do so wonderful and so effective as to give the indicated remedy. We must be fairly posted of course in our materia medica in order to make an effective prescription. It is wonderful what a dose of Sepia or Belladonna or Pulsatilla or other remedy will do. One reason why we have so many ruptures and lacerations of the perineum and cervix is the widespread subtle dyscrasias, syphilitic, syctic and psoric. There is no time in a woman's life when these will be so easily ameliorated or cured as during pregnancy. The baby will be healthier, and right here is the beginning of the regeneration of the race.

P. E. Krichbaum, M. D.—Not all of my cases are easy, even with the homeopathic remedies during gestation. I have had to deliver several cases with the forceps. In a case with a history of syphilis, which I treated all during the pregnancy, the labor was very difficult and after waiting a long time I finally had to deliver with the instruments.

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### ABORTION AT THE THIRD MONTH.

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BY J. FITZ MATHEW, M. D., West Sound, Washington.

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Patient a delicate multipara with a history of previous abortions and hemorrhage.

Symptoms: Passive hemorrhage of dark, *very offensive blood*. Chills, vomiting with sweat; temp. 105°. I prescribed Secale 30x in water. The second dose in half an

hour, then every hour. I returned in two hours and found some improvement, temp. falling, no more vomiting and patient calm. I continued medicine every two hours till night arrived and left orders that I was to be called immediately, if any change occurred. Next day I found that a dead foetus had been discharged during the night. Temp. 102°; patient calm and fairly comfortable. Examination (external) revealed the womb still large and firm. Continued Secale every three hours. During the ensuing night a second dead foetus was discharged. Sac. Lac. ad. lib.; two days elapsed; no placenta; husband anxious to have it removed. Declined to do so, and begged him to wait: 101°. Placenta was discharged on the 6th day. Patient recovered rapidly and received no more medicine.

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### A GELSEMIUM CASE.

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C. M. BOGER, M. D., Parkersburg, W. Va.

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Mrs. H. P. C. Pregnant five months.

1. Sick headache, pains ascend from neck, accompanied by profuse urination.
2. Sleepy faintness, sometimes fainting, better from motion in open air.
3. Constipated, much flatulency.
4. Deep yellow, acrid, adhesive leucorrhœa.
5. Formerly had diarrhœa from emotions.
6. Has lately returned from the tropics.

Gelsemium 200 cured.

After delivery the child showed severe brain symptoms, rolling the head, screaming constantly and vomiting hard curds of milk. *Æthusa* helped for a little while only. I now found great dread of downward motion present, sleeplessness also appeared. Part of the mother's Gelsemium state seemed to show in the infant, for this it received Gelsemium 200 (B. & T.) with prompt relief.

We are all accustomed to look upon this symptom as distinctive of Borax, but from several late experiences I am

persuaded that it is equally characteristic of Gelsemium, provided of course that the other symptoms confirm the choice.

While making a practical application of our materia medica I have found many symptoms of pronounced value upon which doubts and aspersions have formerly been cast. It is therefore to be earnestly hoped that none of us will be guilty of casting out these provings until their unfitness has clearly been proven. The pathogenesis is a rich mine and it is our plain duty to develop and determine its drift. The gold is there but we must mine it.

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### THE REMEDY IN LABOR.

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BY W. L. REED, M. D., St. Louis, Mo.

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CASE I. I was summoned in great haste to attend a case of labor in a primipara, aged 25 years. I was greeted at the door with "Doctor, hurry up." The whole household was in a state of consternation. Found her with pains insupportable, as she expressed it, weeping and lamenting fearfully. Although the pains were severe they were not efficacious; very restless, throwing her limbs about rapidly. Complete despair, exclaiming, "I can't stand it; I will surely die." I supposed from the fearful outcry that she needed my immediate attention, and that the child was about to be born. Upon my instituting an examination I found the parts very moist and the os dilatible, although very high up, almost out of reach. No signs of an immediate birth. She did surely need the attention of a physician, but in a medical point of view only. I gave her one dose of Coffea 200, and immediately the storm ceased and there was a great calm. True labor began at once. She had one long, protracted, expulsive pain and the child was in the world. From the time I entered the house till the child was born did not exceed fifteen minutes. Not a whimper during that long pain. I brought the child upon the abdomen thereby protecting the perineum from laceration. I had

been actively engaged in obstetrical practice for *thirty five* years, and had never witnessed such a speedy labor even in multipara. The pain of labor ought to be endurable if we only could select the similimum to the case.

CASE II. Called last November, 1901, to see a lady who said she was seven months pregnant, suffering with severe pains as though she were on the verge of labor. She is the mother of two grown children, both of them seven month babies. Said she would like to go to full term, as she always had such lingering labors. Says the child is constantly on the move, sometimes very violent, which made her abdomen sore. Painful walking about. Had varices on her lower limbs, worse when her limbs were hanging down. Has distension of abdomen as if incarcerated flatus. Considerable nervous debility. I gave her one dose of *Lycopodium* 43m F. Took out my obstetrical calendar and told her she would not need me till the 20th day of January. On the afternoon of said day she sent for me. The child was born in due season. Said she had never had such an easy labor, although she had been attended by homeopathic (?) physicians. I know that the physician she employed seldom, if ever, made a scientific homeopathic prescription. I have never given anything to ease labor, unless as in this case there is an indication strikingly calling for some remedy.

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### THE REMEDY IN MALFORMATIONS.

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BY L. P. MUNGER, M. D., HART, MICH.

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Can a patient be so prescribed for during the period of pregnancy that the offspring may be devoid of the more glaring and serious malformations. This is a subject upon which I need a good deal of light. I cite the following cases:

CASE 1.—Mrs. B. came to me some six years ago during her fourth month of pregnancy, with a history of three previous confinements and no living children. All three

had been more or less deformed and had not survived many hours. Pulsatilla was her indicated remedy and she received it along with plenty of placebo and gave birth to a normal child which continues well, along with its brother and sister that have come in due time. All perfectly formed and vigorous.

CASE 2.—A Mrs. S. history of one child perfectly normal. This lady had very prominent upper incisor teeth; they stuck out at quite an angle such as one sees in cleft palate. Patient was prescribed for once or twice during pregnancy, in fact I had treated her before she was married and had given her the indicated remedy as best I could. She seemed perfectly well during pregnancy, yet gave birth to a boy having a decided lump in the lumbar region. This lump consisted of the two halves of one spine of a vertebra separated about  $\frac{1}{4}$  inch, clearly a spina bifida. But the membrane never ruptured through, no sack of water ever formed, so my dark predictions failed to come true and in fact the youngster grew and grew and is still growing, with no more trouble than that he can not lie flat on his back. He is now four years old.

CASE 3.—A Mrs. C., whom I had treated whenever anything was wrong, for the previous two years, became pregnant and applied to me to give her such attention as she needed. I prescribed for her occasionally and kept her in perfect health; the baby when born came breech first in spite of Pulsatilla, and was so fragile that the large bones would break with the least manipulations. The head was about the size of an adult's head and full of water, with no bony formation to speak of. There have been no succeeding pregnancies.

CASE 4.—A Mrs. R., a twin, became pregnant for the first time about eleven months ago. This was another case where I had looked after her welfare for the preceding four years. I gave her such remedies as seemed indicated, but motion was never very vigorous. At nine months she continued well and the expected event failed to materialize. At nine and one-half months she had slight twinges of pain oc-

asionally, but continued her house work. I made up my mind that she had miscarried, but at just ten months she was taken sick and on reaching the house and making an examination I found dilatation complete, but encountered a soft yielding tumor which could not belong to any child that I had ever seen. In fact there were several tumors, but one larger than the rest. I could not make out anything by the speculum except that the tumors were a bluish red; I waited an hour for harder pains but they grew lighter. Finally in making a very careful examination, I made out what I thought to be an ear. I applied the forceps to the whole mass and delivered a child alive, with no skull cap, imperfectly formed brains, no covering over the brain, the division between the lobes being deep, a very much distorted face, no eyes, very extraordinary fat body and a spina bifida. The case had gone ten months, the membranes looked yellow and about ready to decay, the child lived and cried for a few hours. Perhaps the father of these babies needed prescribing for.

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### OBSTETRICAL EXPERIENCE.

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BY JEAN I. MACKAY-GLIDDON, M. D., Los Angeles, Cal.

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The subject suggested by Dr. Reininger is a wide one and will undoubtedly start a reminiscent mood in the minds of the experienced practitioners present. Each of us could tell the young practitioner many things of value not found in books, and the knowledge of imparting information would lend a pleasurable impetus to the telling. But when we think of repeating the experiences that occur to each of us in the routine of work our "tale wearies in the telling." We all know that the indicated remedy works and does so every time; and that if we do not get the result looked for, we must remove, if possible, the obstruction to its working out a perfect cure. The reasons why, at times, we do not get results from an indicated remedy belong to another another department to consider, but this knowledge is as essential

in obstetrical work as in other branches of practice. The great difficulty is to get the remedy. As the late Dr. Ludlam used to tell us frequently in college, "it is only the young doctor who can always do this." I have often thought that we learn as much from our failures as from our successes.

On looking backward we see that our growth has been gradual:—"here a little and there a little." We must learn to study and to observe and to draw correct conclusions, and so make this knowledge assist us in applying the great law of cure. We have each of us at times been afflicted with a great obtuseness, scarcely credible, that has prevented us from seeing a remedy, when later reflection revealed it appealing to us in almost every symptom of the patient. Nor is this to be wondered at when we consider the overworked condition of so many practitioners. I recall one of these cases that may interest some of you.

Several years ago the mother of many children called upon me to engage me for her confinement which was to take place in three months. She reported a pain in the region of the right kidney, dull and aching, aggravated slightly by jarring motion, increased desire to urinate with burning in the urethra during and after urinating. I prescribed Cantharis, examined the urine, and found it normal. I thought lightly of the case, ascribing the symptoms to the condition of pressure from the enlarged uterus. This same prescription was repeated at intervals during the three months, with amelioration of the symptoms each time. Urine remained normal. During her confinement I was not available, so she called another physician. I did not see her again until her baby was five months old, when she called at my office and gave me this history. Hæmaturia developed during confinement and continued with but slight remissions. She thought the quantity of blood passed was gradually increasing. She considered labor normal, but more tedious than usual. She was much reduced in weight and anæmic, almost exsanguined; altogether the case looked grave.

I took the symptoms very carefully and wish I had access to my notebook to give them to you *in toto*, but many of them were indelibly stamped on my memory as I tried to diagnose the remedy. Pain in the region of the right kidney, aggravated by any motion of the arm. Pain, as she expressed it, in "the right ovary" greatly aggravated by any jarring motion, and by the use of arm. Constant urging to urinate, with straining, aggravated when first lying down in bed at night. Difficult to find an easy position. Much tenesmus during and following urination. Shooting pains, with great burning during, but especially after urination. Could not ride on street cars for aggravation of pains from jarring. Walking did not affect her if she was careful in stepping, and so occasioned no jarring. She was very irritable and discouraged. Examination of the urine revealed quantities of blood and pus. When the urine stood, two-thirds of its volume would be bloodclot and pus.

I could not satisfactorily explain the cause of the hæmaturia, nor could I see the picture of any drug in this complex of symptoms. No casts appeared. My first prescription was Belladonna which relieved the sensitiveness considerably. She had then Muriatic acid, Cantharis and Pulsatilla successively; remedies as carefully selected as I knew how, but not satisfactory to me in result. Each remedy in turn seemed to relieve some of the symptoms, but made no complete cure. She had many general Pulsatilla symptoms, was fair-haired, blue-eyed, plump when in health, had the intolerance of heat and was easily discouraged; also the burning during and after urinating, tenesmus after urinating and hæmaturia. After taking this remedy she reported several points of gain, less blood, less pain, and more self-control. I was called hastily one evening to her home and found her in paroxysms of pain located in the right ureter. I prescribed Terebinth and soon a calculus passed into the bladder and later through the urethra, with quantities of sandy deposit containing minute calculi. To some degree the blood and pus diminished in quantity. The large



calculus was  $\frac{7}{8}$  of an inch in length and  $\frac{3}{8}$  of an inch in width by measurement.

Now I saw why the aggravation occurred contrary to all rules and why remedies that made such contradictions seemed indicated. Motion, especially jarring, disturbed the foreign body—the calculus and thus lacerated the tender tissues and increased the hemorrhage. So that the symptom, produced by Terebinth, “aggravation by rest and amelioration by walking in the open air” that seemed to me to rule this case, did not apply to it, and when prescribed speedily, easily, and to all appearances permanently affected a cure.

After beginning the remedy every urination brought perceptible quantities of sandy deposit, and sometimes small calculi, with accompanying spasmodic pains, but no calculus as large as the one first passed. The improvement was so marked and so rapid that no question remained about Terebinth being the remedy.

Two years ago last May I took care of her in another confinement which was perfectly normal, and she enjoys to-day the best of health.

CASE II. Mother of two children, youngest 17 years old. She was attended in her third confinement by an allopathic physician of ability. Labor rapid, with very severe pains. Three months after she came to me for examination. She had discovered a “lump” in the left side and wanted to know what it was. The enlargement lay above the left iliac region, could be grasped by the hand and carried upwards under the floating ribs; it could be moved around freely. Was larger considerably than the hand. Urine loaded with pus. Temperature  $101\frac{1}{2}$ . Entire body covered with small, angry looking pimples. Had been having slight, chilly feelings. My diagnosis was dislodged kidney suppurating possibly from bruising during the rapid and severe labor pains.

The woman was Cornish, and I suspected would prefer to resort to heroic measures. I gave a dose of Hepar sulph. cm. and a dram vial of medicated disks of Hepar 30x, and recommended her to take the medicine, at least until her

septic condition improved. I heard nothing more of her for several months. One day I was called upon by a venerable and honored allopathic physician of our city who said to me: "Did you hear the joke on us?" I assured him I had not that information to date. He said: "Do you remember Mrs. R. that we, noted few, took our turn at diagnosing. Well, you and myself agreed on the tumor being a kidney, the others differed as to the kind of tumor, but all agreed on a tumor. After she got your opinion she went to Dr. M., who advised an operation at once. She got ready and in one month was in London in a hospital, for the operation. She was examined by a number of noted English surgeons, but none of them could find the tumor. "However," said the old doctor, "she HAD a tumor there. What became of it?"

I believe the Hepar, with the elastic bandage, was the instrument in effecting the cure.

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## ANSWERS TO THE QUESTIONS OF THE CHAIRMAN.

BY T. M. DILLINGHAM, M. D., New York.

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First. I have no trouble in managing the disturbances you speak of under this number, although I have had some pretty severe cases.

Second. I do not give remedies to produce easy labor. My effort is to keep the patient in as perfect health as possible, and the labor will take care of itself. It is not a disease.

Third. Having never lost a patient in twenty-six years of practice, I claim that prescribing during and immediately after labor, accomplishes satisfactory results. I sometimes use low potencies in severe hemorrhage.

Fourth. I do not find that preparing the mother's breast and nipples for nursing amounts to very much and do not bother myself about them any more.

Fifth. I have not had satisfactory experience in increasing or improving the mother's milk after labor. Whether

previous prescribing had anything to do with successful cases or not, I cannot prove, but I believe it had.

Sixth. I have no trouble in looking after all ailments of the baby with potencies over 30. The results are entirely satisfactory.

Frequently artificial feeding has to be resorted to in this section of the country. I do *not use* the Walker-Gordon modified milk.

I recently had brilliant results in a case of puerperal convulsions where Belladonna 200th proved to be the necessary remedy. I prefer to say the necessary remedy rather than the indicated remedy, because I sometimes find the indicated remedy is not really indicated and I never feel that I have selected the indicated remedy until I see satisfactory results. This case of puerperal convulsions I took from an allopathic specialist who predicted terrible results if his methods were not followed out. The patient was the wife of a homeopathic physician. The calling of the specialist was an accidental necessity.

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### **OBSTINATE CASE OF NAUSEA AND VOMITING: PRE-NATAL TREATMENT OF ISCHURIA IN THE NEW-BORN INFANT.**

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BY LESLIE MARTIN, M. D., Baldwinsville, N. Y.

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The first thirteen years of my obstetrical practice in the old school was very unsatisfactory. We were taught and we told our patients that they must submit and bear their sufferings as time and the completion of labor would bring them all right. In severe cases I used to give Opium, Morphine, Laudanum, Assafoetida, etc., and my experience with them was far from being satisfactory. Now for over twenty years in a large and varied obstetric practice, not only of my own, but also in frequent consultations with other physicians of all schools, I have in the light of Homeopathy had very marked success and have no reason to complain as to results of treatment with the indicated remedy.

As to the six questions suggested by you, I shall embody them all in one and state to you that I have prescribed for all of the conditions that you have named in all of the periods of gestation and labor, both mental and physical, and have met with grand results, which proved to be far in advance of allopathic treatment. As for the treatment of the baby in all of his diseases I can truly say that I have had very marked results in prescribing the indicated remedy on a careful study of the case.

I feel that I cannot praise Homeopathy enough for the grand results that I have observed in over twenty years of thorough trial. I tried Allopathy for thirteen years and found it wanting.

**OBSTINATE CASE OF NAUSEA AND VOMITING.** Mrs. B., primipara; light complexion, spare habit, weight 90 lbs.; tuberculous tendency. The first three or four months was attended by nausea and vomiting which increased gradually becoming very severe. She had to go to bed. Even the smell or thought of food would bring on vomiting. I gave Colchicum, and later Zinc. These remedies did not produce the desired result on account of the psoric condition. I therefore gave a dose of Sulphur cm. In questioning her if she could think of anything that she thought she would relish in such a nauseated condition. In a day or two there developed a strong desire for bean soup. It was prepared for her and she ate it with relish. After this craving the nausea and vomiting was fully controlled, and she went through the remaining months of gestation and was delivered of a strong healthy child. The child is now about twelve years old.

**PRE-NATAL TREATMENT.** Mrs. B., multipara, tall, slender, black hair and eyes, bilious temperament. She seemed to be of the right conformation to have an easy labor, but she informed me that her other three labors had been attended during the latter months of gestation with many severe pains through hips and abdomen, great soreness of abdomen, painful movements of foetus, and all combined, rendered her life during the period of pregnancy al-

most unbearable, both mentally and physically. She also informed me that she had severe and protracted labors of fourteen to sixteen hours, besides a long lying-in period, during which she was very slow to regain her health. I found to my full satisfaction that her statement was true. When I had finished my visits and attendance in her case I informed her that if she ever became pregnant again to inform me when three or four months advanced and from that time to let me have full charge of her case.

Not many months elapsed before I had an opportunity to test what homeopathic treatment would do to control mental and physical suffering, also to produce an easy labor. Now for a full test and proof of what I could never accomplish in my thirteen years of old school practice. I told her to be cheerful and to keep me well informed as to her mental condition. In diet, I ordered her to abstain strictly from meat, white bread, graham, oatmeal and foods rich in phosphates, no coffee. I allowed a full vegetable diet, with the exceptions noted. Sleeping room well ventilated, clothing suspended from shoulders and body perfectly free. For the great soreness of abdomen I ordered a free use of olive oil each night on retiring.

For the severe shooting pains in her hips and abdominal walls and great soreness, I prescribed *Caulophyllum* and later *Pulsatilla*.

This patient resided about three miles from my office at the time of her confinement; when labor began the husband came promptly for me, and although the roads were good, before the husband or myself arrived at the house, the child was born, and no physician ever saw a more surprised or grateful patient than Mrs. B.

She informed me that during the last months of pregnancy, she had had none of her old pains or aches, felt none of the old "blues," as in her former pregnancies. She made a quick and rapid recovery and could not praise Homeopathy enough.

This is only one of many severe cases where I have had

full opportunity to test the superiority of homeopathic treatment over the *Regular Scientific School*.

In all my after years of practice I demand full care and treatment during the last four or five months of gestation if possible. I have now been engaged in quite a large obstetric practice of nearly forty years, and I declare that I am fully satisfied with the homeopathic treatment of pregnancy and its complications.

ISCHURIA OF THE NEW-BORN INFANT. Mrs. H. was delivered of a well-developed male child for the third time. On my next visit was informed by the nurse that the child's bowels moved freely, but he had not voided urine. I gave Aconite. On my next visit no improvement. I examined penis carefully but could detect nothing abnormal. Prescribed *Nux vomica* which did no good. I now gave *Ipec.* and on the fifth day of suppression the child voided urine freely and recovered with no other untoward symptoms. *Ipecac.* was the indicated remedy.

DISCUSSION.—J. H. Allen, M. D.—It is a matter of surprise to many of us, to notice the wonderful effect of the homeopathic remedy during gestation and in delivery. It is only in accordance with true philosophy that this should be the case. When we assist the woman with the homeopathic remedy we are giving nature aid in that which she is always trying to do.

### ANSWERS TO THE CHAIRMAN'S QUESTIONS.

By B. LEBARON BAYLIES, M. D., Brooklyn, N. Y.

“What success have you had in clearing up any disturbances of mind, skin, digestion, nervous and urinary symptoms during gestation?”

The common ailments of the child patient which have been frequently aggravated during gestation, are hepatic, cutaneous, nervous, catarrhal, digestive, and urinary troubles. *Sepia* or *Kali bichr.*, *Lycopodium* or *Nitric acid*

have often been indicated and successful; always in any case one remedy. Pulsatilla, Apis, Lycopodium and Sulphur; Kali carb. most indicated for renal obstruction and dropsy.

Do you give any remedies during the latter part of gestation for the purpose of easing labor? Answer: No.

Have you had satisfactory results from prescribing during and immediately after labor? Yes! Arnica, Pulsatilla and Belladonna have aided labor. Hyoscyamus or Lycopodium have relieved retention of the urine; after forceps cases, paralysis of bladder succeeding requires the catheter, gum elastic or soft rubber much preferred. Pulsatilla, sometimes Belladonna or Secale aid, according to indications, expulsion of placenta. Phosphorus, Belladonna, Sepia or Arnica may be required to arrest hemorrhage. Arnica for injury or contusion of vulva or perineum.

Do you do anything before labor to prepare the mother's breasts and nipples for nursing? Ans.: If the nipples are of good shape, do nothing; if very much contracted, endeavor to draw them out once or twice a day by suction through a pipe bowl, or better the similar instrument with rubber tube and mouthpiece attached, employed to relieve a breast overcharged with milk. The bowl should not be so large, nor the suction so forcible, as to draw up the integument and embed and compress the nipple.

What has been your experience in helping to increase or improve the mother's milk by prescribing? Ans.: The mother's milk is often increased and improved in quality by Calcarea, and rendered acceptable to the child by Mercurius. The medicine selected will often especially depend upon the nervous and digestive symptoms of the mother.

What about baby; its sore eyes, vomiting, diarrhoea, constipation, urinary difficulties, or any other afflictions baby is liable to? Do you prescribe for them and obtain satisfactory results? Ans.: Baby's sore eyes will most frequently when new-born require Sulphur; later Calcarea, Pulsatilla or Borax; the stomach and bowels Calcarea, Chamomilla, Nux vomica, Colocynth, Kali carb., sometimes Mercurius, Sulphur, Gratiola, Gamboge, etc.; for urinary dif-

faculties Aconite, Kali, Lycopodium. I always obtain satisfactory results.

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### RESOLUTIONS OF THE A. I. H. REGULATING THE CONDUCT OF ITS AFFILIATED COLLEGES.

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1. *Resolved*, That this Institute condemns the action of any college which graduates an unsuccessful candidate from another college, unless he attends at least one full course of lectures at the college where he applies for a degree.

2. *Resolved*, That beginning with the session of 1895-96, all colleges recognized by the Intercollegiate Committee of the American Institute of Homeopathy shall require attendance on four courses of lectures of not less than six months each, in separate years.

3. *Resolved*, That the Institute grant permission to all Homeopathic Medical Colleges under its supervision to give advance standing of one year, only, in a four year's course of at least seven months each, in a given twelve months, to graduates of accredited colleges who have completed courses in Chemistry, Biology, Physics, Botany and Microscopy, equivalent to the maximum required in the Freshman year in said colleges, providing other subjects taught in the Freshman year be completed during the second or Sophomore year.

4. *Resolved*, That the teaching of the Principles of Homeopathy as enunciated in the Organon, the Homeopathic Pharmaceutics and Homeopathic Materia Medica be continued throughout the entire four year's course. The Organon and Homeopathic Pharmaceutics at least one year, the Homeopathic Materia Medica at least three years.

5. *Resolved*, That the clinical teaching in our schools should be brought into the greatest attainable harmony with the teaching of Materia Medica.

6. *Resolved*, That we disapprove of and discountenance all teaching which gives approval to what is known as the purely empiric use of medicine, or the use of proprietary



medicine and combination tablets, believing that such teaching is productive of confusion in the minds of students, subversive of the principles of Homeopathy, and tends to retard the progress in the establishment of a Scientific Materia Medica and Therapeutics.

7. *Resolved*, That each college represented in the Intercollegiate Committee be required to furnish annually, before the opening of its session, a copy of its last announcement to the Secretary of said Committee and to report to the same officer within ten days after commencement on a blank, to be furnished by the Institute, the name of its new graduates, the time each spent in college work in separate years and the name of the Institution attended in the several years or periods of study.

8. We recommend that the requirements for registration with the Regents of the University of the State of New York be complied with in all the colleges represented in the Intercollegiate Committee of the A. I. H., excepting as modified by the mandatory laws of the individual states.

9. We recommend that the colleges represented in the Intercollegiate Committee be required to issue credits to the students in duplicate and under the seal of the college; and, further, that no student not so provided shall receive advance standing in any college represented in this committee.

10. We recommend that each college, as soon as practical, establish a department of physiological therapeutics including manual therapeutics.

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### DR. GORTON APPLAUDS THE MERGER.

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Austin, Tex., Sept. 1, 1902.

EDITOR MEDICAL ADVANCE:

I congratulate the faculty and graduates of the Hering-Dunham College, Homeopathy at large, and especially suffering humanity. Now that we have a union of the only colleges which are capable of stemming the tide that has been forcing our schools outside the pale of the law of cure,

our expectations are great and we trust our ideals will be realized. The world is waiting for just such men and women as shall go out from the teachings of such a combination of talent.

Fraternally Yours, W. D. GORTON, M. D.  
 President Texas Homeopathic Medical Ass'n.

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### INTERMITTENT FEVER.

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The paroxysm of the Sepia intermittent strongly resembles that of Arsenic in the mixed, irregular character of its different stages. As a rule neither stage is prominent nor well-defined in Sepia, but is a very good picture of what is known as an undeveloped, partially suppressed or "spoiled case,"—or as Hahnemann calls them "cases of Cinchonism,"—by the use of quinine or some other anti-periodic. The symptoms are so mixed with drug effects as not to appear to call for any particular remedy. The complexion in this class of cases strongly resembles that of Sepia. It presents a sallow, dirty, doughy, sickly appearance, and in all old cases of so-called "malarial" poisoning we no doubt have portal stasis or congestion as the pathological basis. The abdominal vessels in both these class of cases are engorged, and they often find their simillimum in Sepia. In homeopathic practice, however, there is no such thing as "always will." There must be some symptomatic indication in harmony with the condition presented by the patient, or the remedy will not, cannot act. In many of these cases a few doses of Sepia, high, will clear them up, effect a return of the symptoms of the original paroxysm so that the curative remedy may be readily selected. This class of cases, in the writer's experience, are more frequently met with in the South than in the North, but wherever found and correctly differentiated good results will be obtained. Sulphur should not be over-looked here, if the symptoms correspond.

—Exchange.

## EDITORIAL.

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All Contributions, Exchanges. Books for Review and other communications should be addressed to the Editor, 5142 Washington Ave., who is responsible for the dignity and courtesy of the magazine, but not for the opinions of contributors.

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### HERING COLLEGE OPENING.

The eleventh annual session of Hering Medical College began September 16th under the most favorable auspices. The matriculation and enthusiasm thus far in evidence point to the most prosperous year in the history of the college. Owing to the affiliation of Dunham college with Hering the opening date had been postponed a week.

The new order of things makes the college the strongest in Homeopathy in the world. It stands almost alone as a teacher of true Homeopathy, and with the increase in numbers and interest will mark an era in the annals of Homeopathic progress. The students are of the right sort to promulgate the science—live, active young men and women who are enthusiastic over the work they have taken up. The alumni of the colleges may feel justly proud that their Alma Mater has been elevated to a point where its power and influence will be strongly felt in the future moulding of the profession. In union there is strength—and while this “merging” may simulate suspiciously a “trust” in the medical ranks—yet the college has but one end in view, the promulgation of a principle in the healing art as exemplified by Hahnemann.

Besides the amalgamation with Dunham the affiliation with Midland University is proving a potent factor in its work. Already at the University department scores of men and women are taking the preparatory work for entrance to the medical department. These will make excellent stock to carry on the work that Hering has on hand.

The faculty has been completed by the joining of the two forces, there being but few in either school that will

not continue in the work. The chair of *Materia Medica* comprise the following well-known teachers: Drs. Kent, Allen, Tomhagen, Taylor and Farrington. The various other chairs have been materially strengthened in a like manner.

About one hundred students have matriculated thus far, and daily additions are being received. A spirit of good will pervades among all, and from the busy scenes in the various lecture rooms, work has already begun in earnest.

The opening reception was held Tuesday, September 23, with a large number of laity, faculty and students present. A program of music, elocution and short addresses was carried out, after which there was a general reception. The opening was a great success in every particular.

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### OUR HAHNEMANNIAN DIRECTORY.

It has been a perplexing question with us for many years—and if we may judge from our correspondence it has been with all who use the single remedy and practice Homeopathy—what to do with our patients who remove from one city to another. We have answered scores of letters on this delicate subject, for we dislike to question the practice of a graduate of a homeopathic college or a member of the American Institute of Homeopathy. Yet it is a lamentable and undeniable fact that a college diploma or membership in a recognized homeopathic society is no guarantee of the practice of the holder thereof. Many a patient has not only been seriously injured but has become thoroughly disheartened and righturously indignant at the villianous compounds received from some so-called homeopathic physician to whom he had been referred in good faith; and some new converts have in consequence renounced Homeopathy as a delusion and a fraud, not any better or more reliable than the empiricism from which they were trying to escape.

For the convenience of our colleagues and the benefit of our patients we have compiled the Directory from the best information obtainable, viz., the writings, reports of cases, etc., etc., in current literature. We have solicited the aid of our colleagues in completing and perfecting the list, but

we must have evidence of purity of practice or the Directory would be worthless. This explanation is made because of the following protest from the president of the Iowa State Board of Health.

DES MOINES,, August, 29, 1902.

Dear Dr. Allen:

I notice your Directory of "Simon Pure" homeopathic physicians in the ADVANCE. Your Directory as it is now run is likely to do harm to some good men in our school. There are many good and conscientious men in Iowa who use the single remedy, some like myself, perhaps, who are subscribers for your journal and who are discredited by your giving a single name and asking others to send patients to him. Certainly it may work harm, more harm than good to good men.

Yours very Truly,

A. M. LINN.

We do not intend to do any homeopathic physician an injustice, but we must have some evidence of the Homeopathy he or she dispenses, and our columns are open to every "good and conscientious man" to demonstrate similia similibus curantur, simplex similia minimum. Being on our subscription list is not essential, for many names in the Directory are not readers of the ADVANCE.

Is not the following chapter from the experience of Dr. J. C. Fahnestock, as published in the *Medical Visitor*, a sufficient justification for the Directory and answer to the criticism of Dr. Linn? A man may be "good and conscientious," but that does not prove he is practicing Hahnemannian Homeopathy. "Good and conscientious men" practice other systems; even some of our irregular colleagues would be included, for they could not write any thing more unscientific than these members of the American Institute of Homeopathy. It is from such professed homeopath, we would protect our patients. We are glad Dr. Linn is not of them.

A few years ago I had an occasion to refer a patient to a physician in a neighboring city, a physician who poses as a homeopath, and his name is recorded in the Transactions of the American Institute of Homeopathy.

Later I saw the patient, and among the many compounds administered here are a few, (sometimes seventeen doses were administered in one day).

Parke Davis & Co.: Normal Fl. Ergot ʒ iii.

Sig. Take 60 min. in water every morning.

With this was given the following:

Sodii iodide  $\zeta$  i.  
 Hydr. iod. rub. grs. i-iv.  
 Liq. pot. ars.  $\zeta$  i-iv.  
 Succus alterans (qs.)  $\zeta$  i-ix.

M. Sig. Six. min. after each meal.

At bed time was given a teaspoonful of—

Strontium bromide  $\zeta$  i-i.

Daniels tr. passiflora (q. s.)  $\zeta$  i.i.

You can imagine the result of these prescriptions.

To another physician comes the following:

Sanmetto 1 bottle.

Sig. Teaspoonful three times a day.

And with it was used the following:

|                                   |   |          |
|-----------------------------------|---|----------|
| Tr. Clematis erect. $\mathcal{D}$ | } | a a 3 v. |
| Thuja $\mathcal{D}$               |   |          |

Ham.  $\mathcal{D}$   $\zeta$  xx,

Thirty drops every three hours.

The results were equally as good as the first.

From another would-be representative of Homeopathy one of my patients was given Arsenicum 3x morning and evening. A tablespoonful of aqu-solution of Digitalis before each meal; and between the intervals. (I will allow you to figure that out) a teaspoonful of Cactus grand  $\mathcal{D}$ ,

In a few days the patient complained of a severe constricting pain around the heart and chest, so bad was it that he said it felt as if "I would be squeezed in two and could not get my breath."

Results—not hard to guess.

From another patient comes the report, "Why doctor, what kind of a physician did you send me to? He must have been an allopath, for I took about seventeen kinds of medicine in one week, and some of it was—oh, my!"

We want more names of *conscientious Homeopaths* for our Directory.

## THE ROENTGEN RAY IN CANCER.

The following deductions as to cause and cure of cancer are from a paper read at the May meeting of the Illinois Homeopathic Medical Society, by C. E. Fisher, M. D., Chicago. They go to the bottom of both: ED.

I hardly feel justified in leaving the subject without expressing two positive convictions:

First, I believe one of the causes of the rapid increase in cancer to be the introduction into the human system of

bovine toxic products, as in vaccination, the use of antitoxins, and the like.

The human family attains physiological development at the age of twenty-three to twenty-five years. Bovine development occurs at from four to five years. Carcinoma and sarcoma are characterized by overgrowth or overproduction of cells. In general the human race has never been better fed, better clothed or better housed than at the present moment. Sanitation and hygiene are at a higher state of perfection than ever before. Many of the malignant diseases of humankind are being subdued and others held in check. Yet cancer goes on apace, increasing with lightning-like rapidity. Thus early in the history of the Rockefeller Institute it has been shown that there exists a striking resemblance between the cancer cell and the vaccine cell. In my individual experience a number of cases of cancer and sarcoma seem to have been directly traceable to vaccination as a cause. The number of physicians who have come to believe there is the relationship of cause and effect in this direction is greatly increasing, and I verily believe there should be the most painstaking investigation along this line.

My second strong conviction is that there is something behind the observable pathology of cancer, and other constitutional diseases, to which we must give attention. Cancer is but a product. To remove it and leave the basis upon which it developed is not to cure. To amputate or dissolve the growth is but to pluck the fruit and leave the tree to decay at its core.

All pathology is but the product of a constitutional miasm of some kind. Hahnemann called it psora. It has also been denominated sycosis. But no matter what it is, except as a plank in the great storehouse of knowledge, no man or woman ever had cancer, with or without traumatism as a discovered cause, whose constitution did not possess a taint. Given, an antecedent who had cancer, or tuberculosis, or an uncured syphilis or gonorrhoea, a salt rheum, a suppressed itch or eczema, a psoriasis, and so on, or antece-

dents combining two, three or more of these diseases, and the family tree is tainted. The new generation may not have either of the constitutional disorders above classified as its portion, but it is tainted nevertheless, and affords a good subject for carcinoma if the taints or miasms be sufficiently pronounced to impair the resisting powers of the system.

Herein lies a strength in homeopathy that is not sufficiently availed of. No treatment, surgical or radiotherapeutic, meets this constitutional requirement. It is necessary to go behind the returns of recognizable pathology and introduce the great search-light of the homeopathic constitutional remedy to strike at a root of the trouble. Surgery has issued the dictum "Operate first and treat afterward." In the main it is correct. But the dictum may well be paraphrased to read, "Treat constitutionally every time, whether you operate or not."

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### A BETTER HOMEOPATH THAN EVER.

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The following communication from Philip Rice, M. D., 121 Geary Street, San Francisco, an alumnus of Hering Medical College, will be read with interest by his classmates and every loyal homeopath who, having gone through the mazes of allopathic institutions has come out of the fire unscathed and more deeply grounded than ever in the true homeopathic faith.

The glitter and glamour of the "scientific course," of which the old school is so boastfully proud, has won many a careless Homeopath away from the teachings of Hahnemann. Not so with Dr. Rice. Although he has taken special pains to qualify in all the departments of "scientific medicine", in the best allopathic institutions of the United States and the old country, his letter testifies that after all the best curative and the best palliative agency known to therapeutics today is that which is possessed by the Homeopathy of Hahnemann.

It is also gratifying to note that as a loyal alumnus of



Hering College our correspondent is pleased at the union of Hering and Dunham, pledging his hearty support to the new consolidated institution.

“My Dear Doctor Allen:—Today two very pleasant surprises came to me: namely, two copies of the Medical Advance, and in one the announcement that Hering and Dunham colleges have come together.

The latter fact I am more than glad to know. My very best wishes go to the new institution, and that my support, though weak, goes also, I suppose is needless to mention. The Advance is better than ever, and you can count on me as a regular subscriber dating from July 1st. You may also put me down in the Hahnemannian Directory.

The yast year has been a profitable one with me in study, and now that I am again in the harness things are coming my way very satisfactorily.

The entire year was spent in old school hospitals, and yet, do you know, I am a better Homeopath today than I was a year ago.

Nothing can excel the “similimum” in speed of action or anything else. And why men make the practice of medicine hard for themselves, as well as for their patients, by palliation and crude dosing is more than I can understand. It shall be my continued purpose to teach and preach a pure and uncontaminated Homeopathy.

Faithfully yours,

PHILIP RICE.”

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### A COMMENDATION FROM INDIA.

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The following letter from Sakhira P. O., Calcutta, India, under date of Aug. 19th, 1902, speaks a story of satisfaction on the part of its author with the Medical Advance as an exponent of pure Homeopathy which is exceedingly gratifying:

“My Dear Doctor Allen:—I am glad to see upon arrival here from an inland town, after an absence of about three months’ duration, the Medical Advance from January to June, five numbers in all. I have gone through some of

them and have found that the Advance is truly for the improvement of pure Homeopathy. This is what everybody wants. A mixture of many things never intends for the advancement of knowledge of any of the ingredients. A homeopathic journal or a homeopathic book should, for the improvement of Homeopathy, contain only Homeopathy. If anyone wishes to learn something more than Homeopathy he should learn it outside. Now should I try to learn electricity in some homeopathic book? Nay, but only Homeopathy, pure and simple. I like your journal and wish to be counted a subscriber until I advise you to discontinue, and I also promise occasional contributions therefor.

Fraternally yours,                      A. W. K. CHAUBURY."

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LECTURES ON HOMEOPATHY. By James Tyler Kent, A. M., M. D., Professor of Materia Medica and Homeopathics in the Hering-Dunham Medical College, Chicago. Published by the author. Pp. 290.

These lectures were originally delivered in the Post-Graduate School of Homeopathics at Philadelphia, and are now put in book form at the request of friends and students for convenient reference. They are not intended to take the place of the Organon, but rather to elucidate and emphasize its teachings, to apply its profound philosophy in every day practice in the cure of both acute and chronic ailments. By the masses of the homeopathic profession the science of Homeopathy is not understood; is practically a sealed book. Without a thorough comprehension of the science of the law of similars it is a mere sham to attempt to successfully apply the art in the highest of all callings, the healing of the sick. We may have a pretty complete knowledge of Materia Medica and be able to select the remedy for the patient, but if not proficient in the art of applying it we may make a miserable failure of a curable case.

This work, like the great original from which its lessons were taken, teaches both the science and art of applied Homeopathy, and every homeopathic practitioner will find

here much that will be helpful in solving many of the intricate and involved problems of his daily work.

The titles of some of the most striking lectures are:

The Ideal Cure; The Unprejudiced Observer; On Simple Substance; Disorder First in Vital Force; Materialism in Medicine; Sickness and Cure on Dynamic Plane; Susceptibility; Protection from Sickness; Oversensitive Patients; The Science and the Art; The Examination of the Patient; Idiosyncracies; Individualization; Characteristics; The Value of Symptoms; The Homeopathic Aggravation; Prognosis after Observing the Action of the Remedy; The Second Prescription; Difficult and Incurable Cases—Palliation.

These last three lectures are, to every homeopath seeking light on obscure and vital subjects, each worth five times the cost of the volume. From the "Action of the Remedy," either in acute or chronic cases, we may predict with unerring certainty whether the patient will recover or not. "The Second Prescription" is often a vital one, especially in acute cases when the patient is hovering on the borderland. Here "fools rush in where angels dare not tread." The patient has received the correct remedy, is slowly but perceptibly improving, when the doctor in his over anxiety repeats the dose or changes the remedy, with perhaps fatal results. The question of "Palliation in Incurable Cases" is treated from the standpoint of Hahnemann, not that of Allopathy, and is of vital interest to every homeopathic physician.

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#### NEWS NOTES AND ITEMS.

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Sept 1902

Dr. B. G. Clark announces his removal from 162 West 122nd Street ✓  
to 25 West 74th Street.

Dr. J. T. Kent, Dean of Hering-Dunham Medical College, is spending his vacation in the mountains of Wyoming.

The profession will understand better even if it does not appreciate more the Genius Eraticus of the Medical Era after reading its leader for September.

Among eight hundred and fifty students at Zurich two hundred and

fourteen are women. Of these one hundred and twenty-eight are studying medicine.

Hahnemann College of Chicago has returned to the straight winter course system, her continuous course not having been the success that had been hoped for.

Dr. J. F. Beaumont, one of Chicago's well-known oculists, spent a part of his vacation in the woods of Minnesota, the rest of it on a lake trip to Buffalo and back.

Dr. Jas. A. Campbell, the well-known oculist of St. Louis, has taken city offices at Room 206, the Mermod-Jaccord Building, corner Broadway and Locust streets.

Pulte Medical College, Cincinnati, has remodeled her building and added a hospital story, so her students can have hospital advantages without going outside for them.

There are twenty-five hundred hospitals and asylums in the United States, giving employment to 65,000 people and paying in salaries the enormous sum of above \$23,000,000.

Dr. H. C. Allen, editor of the MEDICAL ADVANCE, did himself the pleasure of attending the New York State Homeopathic Society meeting at Utica the 16th, 17th and 18th of September.

It is said that the raw white of egg spread over a burn or scald is most soothing and cooling. The albumen also acts as a protection against infection from the air and as a food for the injured tissues.

Dr. Wm. Maclay Lyon, Hering '01, is now located at 1116 Main St., Kansas City, Mo. He will lecture on *Materia Medica* at the Kansas City Hahnemann Medical college, which is a union of the two K. C. colleges.

Six hundred and eighteen women have attended the German Universities this year, though but nine of them have entered thus far as regular students. Austria has also decided to admit women to the universities.

On dit that Hahnemann and Chicago Homeopathic Medical College may consolidate after a little more house cleaning, such as Chicago Homeopathic exhibited in the reorganization of her faculty last spring. Speed the day.

The hospitals of the United States have an aggregate of above 600,000 beds, in which are cared for annually above one million patients. Thirty-seven thousand five hundred physicians are engaged in caring for the sick in these institutions.

Dr. Samuel F. Shannon, for years of Denver, well known as a conscientious homeopath, has removed from that city to Sewickley, Allegheny County, Pennsylvania. THE ADVANCE wishes Dr. Shannon unbounded success in his new home.

Dr. W. A. Dewey, the genial editor of the *Medical Century*, who spent his summer vacation on his farm near Middlebury, Vermont, attended the New York State Society meeting at Utica last month on his return to Ann Arbor to resume his college work in the University of Michigan.

Hering-Dunham Medical College opened its regular course of lectures and clinics, the first under the consolidation, on September 16th with a greatly increased class over any previous year and with most excellent prospects for a splendid session. Physicians, alumni and homeopathic students visiting the city always welcomed.

The two homeopathic colleges of Kansas City have amalgamated into one stronger and better institution, under the name of the Kansas City Hahnemann Medical College. The new college occupies the building of the old Kansas City Homeopathic Medical College. The faculty contains most of the best of the two old faculties. The consolidation is commended.

A new test for albumen consists of the use of an emulsion of equal parts of carbolic acid and glycerin. The addition of an equal part of non-albuminous urine will clear up the emulsion, upon agitation, leaving a transparent fluid. Whereas, equal volumes of the mixture and an albuminous urine will leave it cloudy upon agitation, as small a volume as one-tenth of one per cent. of albumin preventing the transparency of the mixture.

Messrs. Boericke & Tafel have in press a new work, *Diagnosis*, by Dr. Clarence Bartlett, from whose stenographic notes Farrington's *Clinical Materia Medica* was published and who, later, wrote the neurological section of Goodno's *Practice*. When published this new work on medical diagnosis will constitute one of the largest, and certainly the most complete, ever published on that branch of medical science; it will include every important modern diagnostic fact, and will at once place the members of our school beyond the need of referring to old school textbooks on the subject, for they will have the best one in their own ranks. The book will probably run between 1,000 and 1,100 pages and have a most thorough index. Ready in October.

## HAHNEMANNIAN DIRECTORY.

For the convenience of readers who desire to recommend their patients to Hahnemannian physicians we publish a list of those who to the best of our knowledge, use the single remedy. We ask assistance in correcting, extending and perfecting this list in order to make it more useful. These cards, including subscription, \$3.00 per year, but names of all Hahnemannians will be retained in the Directory whether subscribers or not.

### Arkansas.

#### Eureka Springs,

Ellis, C. F.

#### Hot Springs,

Biggs, E. L.  
Halman, H. V.

### Alabama.

#### Normal,

Ford, Justina.

### California.

#### Healdsburg,

Huffman, J. E.

#### Los Angeles,

Glidden, J. I. Mackay, Henne Bldg.  
Hawkes, W. J., 620 Laughlin bldg.  
Waddell, W. E., 431 Douglas Bldg.

#### Marysville,

Tapley, J. F.

#### San Francisco,

Martin, Geo H., 606 Sutter St.  
Martin, Eleanor F., 606 Sutter St.  
McNeil, A., 611 Van Ness Ave.  
Selfridge, C. M., 400½ Haight St.  
Ledyard, W. E., Oakland.  
Underwood, Maro F., 21 Powell St.

#### San Luis Obispo,

Winslow, T. Hartley.

#### Santa Barbara,

Crooks, E. W.  
Stambach, Henry L.  
Balch, E. T.,

#### Woodland,

Martin, J. T.

### Canada.

#### Hamilton,

Wickens, A. E.

#### Ottawa,

McLaren, D. C., 133 Maria St.  
Quackenbush, Arnley, 131 Main St.

#### Toronto,

Adams, E. T.  
Hardy, E. A. P., 605 Spadina Ave.

Hearn, Robert.

Jones, D. Ogden.

Tyrell, J. D. 589 Sherbourne Ave.  
**Colorado.**

#### Denver,

Shannon, Sam'l F., Jacobson Bldg.

#### Victor,

Lane, Frances Margaret.

### Connecticut.

#### Bridgeport,

Gregory, Edward P., LaFayette St.

#### Hartford,

Case, Erastus E., 902 Main St.

#### Middletown,

Griffin, Louise A., 198 College St.

#### Milford,

Nahm, Ida M., Laurel Beach.

#### New Haven,

Goodrich, L. R., 93 Lake Place.

#### Torrington,

Pulver, Grace C.

#### Waterbury,

Morgan, A. R., 50 Leavenworth St.

### Delaware.

Wilmington. Mullins, J. W.

### District of Columbia.

#### Washington,

Custis, J. B. Gregg, 912 15th St.  
Riggs, D. H., 1410-11th St.

### England.

#### Liverpool.

Stuart Peter, Rodney St.

#### London,

Berridge, E. W., 48 Sussex  
Gardens. (W  
Clarke, John H., 30 Clarges St.  
Foster, J., 10 St. George's Road.  
Heath, Alfred, 114 Ebury St.  
Lewin, Octavia, 25 Wimpole St.  
Skinner, Thomas, 25 Somerset St.  
Thornett, A. Marian, 25 Wimpole.

#### Plymouth.

Vawdrey, T. G.





EDWIN A. TAYLOR, M. D., Chicago.



# THE MEDICAL ADVANCE

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NUMBER 10

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## MALANDRINUM.

BY H. C. ALLEN, M. D., Chicago.

Assisted by students and Alumni of Hering College.

### *A Nosode from the Grease of Horses.*

The crusts vary in form and character, and the appearance differs as much in animals as many skin diseases of the same family do in the human. Dr. W. P. Wesselhoeft reports a case in which: "The crust assumed a conical form; a thick layer of crusts, if allowed to remain without removal, heaped up one-half an inch. They were fragile, moist, yellow, about the consistency of honey-comb. When removed a raw surface remained with deep fissures and thick crusts reformed into their original size in 48 hours. There was evidently no itching, but some soreness after removal of the scabs."

These crusts resemble some forms of eczema and rupia.

From Jenner we have it that the origin of cowpox is infection of the udders of cows by contact with grass, on which a horse infected with grease has trodden; while the other historical origin from a similar source of infection, also from Jenner, is that it was from the unwashed hands of the stable boys who milked the cows after grooming the horses infected with grease. These assertions are to some extent confirmed by the clinical experience of many homeopaths, who have successfully used Malandrinum against in-

fection with small-pox, and for the bad effects of vaccination.

Jno. H. Clarke says: "It has been used on inferential grounds with great success in bad effects of vaccination. I have cured with it cases of unhealthy, dry, rough skin remaining for years after vaccination; in small-pox, measles and impetigo."

Burnett cured with it a case of knock-knee in a child who was constantly handling his penis. His indications are; "Lower half of body affected, greasy skin and greasy eruption. Slow pustulation never ending, as one heals another appears."

We consider it a deep long acting remedy, to be repeated not oftener than once a fortnight.

Impetigo, ecthyma; fat, greasy looking pustular eruptions are especially affected by this remedy. A. L. Marcy, H. R. Vol. XIV p. 530 relates a singular experience with Malandrinum 30. During a small-pox epidemic he vaccinated himself, taking at the same time Malandrinum 30 night and morning. The vaccination did not take. It was twice repeated and still did not take; nor was small-pox contracted. Called to vaccinate four children in a family whose parents had small-pox, he vaccinated all and gave Maland. 30 to three of them at the same time; the remaining child was the only one whose vaccination "took." This was so severe that Maland. had to be given to modify its intensity, which it did effectually. The other three were re-vaccinated but none "took." Of five children from six to seventeen years of age, only the eldest had been vaccinated, and he had a good scar. All except the eldest were given Maland., and were vaccinated and none of the four "took." The eldest took small-pox. Maland. was then given, and in a few days he was convalescent. In another case of small-pox Maland. was given, and the disease only lasted a few days, the eruption drying up.

The only previous attempt at proving was made by Straube with the 30th potency, published in the H. R. Vol. XV p. 145 and the H. W. Vol. XXXV p. 504. These symp

toms are included. The 200 was used in these provings; no prover knew what was being taken.

**MIND.** Confusion and lassitude of the mental faculties with a dread of any mental exertion and a lack of concentration, an entirely new and unusual experience which continued several weeks after stopping the remedy.

*Comprehension difficult.*

Memory weakened and impaired; great difficulty in remembering what was read.

Confused feeling in head with severe pain in left temporal region, finally located in left eye and felt as if a saw was being drawn up and down vertically through globe, < by light and reading.

Sharp darting pain first in left temple then in right. Confusion and lassitude of mental faculties; lack of concentration and a dread of any mental exertion.

**HEAD EXTERNAL.** Pustular eruption on scalp. Sensation of weariness at junction of atlas with cranium, every morning on rising,

Itching on scalp, especially in the evening.

Excessive oily dandruff (an entirely new experience) the fourth week after pustules dried up.

Prover contracted a digital chancre, from surgical infection in May 1891; was treated homeopathically. Ever since a tendency to crusty pimples on the scalp, chiefly on vertex; discrete, scattered, entirely free from itching, neither painful nor sore, small at the base but considerably elevated in form of a dry crust. Condition had existed eleven years. Malandrium 30, three times a day, caused the eruption to disappear entirely for three months, after which it gradually re-appeared.

Impetigo covering head from crown to neck and extending behind ears.

Thick, greenish crusts with pale, reddish scabs, itching < in the evening.

Impetigo, covering back of head, extending over back to buttocks, labia and even into vagina.

**EYES.** Red stripes under eyes. Severe pain in left

eye as if a saw was drawn up and down vertically through eye ball.

**NOSE.** Dry rawness in floor of left nares, more marked on left side.

**EARS.** Profuse purulent, greenish yellow discharge, mixed with blood.

Left ear painful on waking.

**MOUTH.** Tongue, coated yellow; with red streak through middle, cracked and ulcerating down middle; swollen.

Horribly offensive breath.

Canker on left border of tongue, which spreads in all directions; tongue sore, unable to speak.

**THROAT.** Sore and swollen < left side. Left tonsil swollen; yellow ulcer with clear cut, well defined edges persistent for several days; rough scraping sensation like a corn husk or a foreign body, which must be removed mechanically; painless swallowing.

January 24 commenced taking Malandrinum 200.

Thursday, Feb. 6th, awakened with first sore throat of my life.

Left tonsil swollen and inflamed.

Left ear ached and gums on left side of mouth inflamed and swollen; marked salivation.

These symptoms continued and severely < until March 5th, when they became so severe that he was compelled to seek antidote (Mer. s. cm.)

Throat symptoms and pains in throat begin on left side, and extend to right. Ulcerative patches, grayish in color, on tonsils and fauces, with a tickling [sensation on swallowing.

Ulcerated sore throat had tendency to extend downward, invading the larynx.

Severe ulcerated sore throat beginning on third day, worse on left side.

**TEETH AND GUMS.** Teeth covered with viscid mucus; must clean them with cotton several times daily.

Gums swollen, ulcerated, receding from teeth; bleed

easily when touched; unable to brush the teeth from sore and bleeding gums.

A dark, brown, tenacious mucus mixed with blood and pus exudes from ulcerated gums.

Sordes on the teeth.

STOMACH. Nausea after eating; vomiting of bilious matter. Very hungry. Empty "all gone" sensation, with faintness and trembling, not > by eating, though desire for food is very marked.

ABDOMEN. Pains around umbilicus.

STOOL. Dark cadaverous-smelling stool.

Diarrhœa; acrid yellow, offensive, followed by burning in anus and rectum.

URINE. Great sensitiveness of bladder on walking; bladder irritable, frequent desire to urinate.

MALE SEXUAL ORGANS. (Child constantly handles the penis.)

Violent erections the seventh and eighth nights.

Painful erections second night with great sensitiveness of bladder.

Sensitiveness of bladder.

FEMALE SEXUAL ORGANS. Vagina closed with thick impetiginous crusts, yellowish, greenish, brown in color.

BACK. Intense pain across small of back.

Pain along back as if beaten.

UPPER LIMBS. Impetiginous crusts on extensor sides of forearms. Rhagades in palms and fingers.

LOWER LIMBS. Pains especially in left tibia, with petechia-like patches on anterior aspect of left leg from knee to ankle. Petechia on both thighs < on left. Knock-knee. Weak ankles, easily turn on making a false step.

A sore spot in r. quadriceps extensor femoris as eruption disappeared, later it changed to muscles of left leg with increased pain and tenderness.

Dull pain in crest of left tibia for several days before sore throat and headache began.

Left foot drenched with sweat; right foot dry. Four

days later (after dancing 2½ hours) both feet drenched with perspiration.

Toes felt as if scalded and itched terribly underneath; was compelled to change hose twice a day, and bathed with cold water morning, noon and night which gave relief.

Intense itching  $\bar{z}$  by rubbing or scratching.

Skin underneath toes cracked and bled.

Profuse foot-sweat with carrion-like odor; toes so sore unable to walk; only  $>$  was when feet were bared and elevated.

The itching and sweating would return on covering or letting feet hang down.

Soles of feet bathed in sweat, scald and burn  $<$  when covered or warm.

Large blisters on soles of both feet—no change of shoes—skin exfoliated, on both feet.

Feet "go to sleep" upon least provocation, a sensation never before observed.

Cold perspiration on soles of feet; sensation of a draft of air blowing on the feet at night, must get up and tuck in the bed clothes which relieves.

Deep rhagades, sore and bleeding, on soles of feet,  $>$  in cold weather and after bathing.

SKIN. On the 6th day a pustular eruption covering chest and shoulders with hard nodules and intense itching; eruption began to crust with little or no discharge from pustules.

Two ladies had taken the 200th, one dose, daily; on the third day with one and on the fourth day with the other, a slight pustular eruption appeared on the face and chest. The eruptions were similar in character and ran their course in a week.

A sensation of rawness of the skin over chest and shoulders, after bathing, as if the skin had been scraped with burning acid, smarting  $>$  by covering parts.

A nodular eruption over chest and shoulders, extended down the arm to elbows, with slight vesication, disappeared leaving thin crusts.

A burning itching sensation beneath the skin in the palm of the hand, appeared upon contact; after the eruption had disappeared, continued for several weeks.

Impetigo on extensors of forearms.

Small dusky red spots on legs, not disappearing on pressure.

Dry, rough, unhealthy skin remaining for years after vaccination.

Blood boils. Malignant pustules.

A CASE. Mr. H.—aged 42, American, youngest of ten children; father died at 45, of pneumonia; a brother died at 20 of pneumonia; mother died in old age. Two sisters complain of rheumatism.

Brunette, black hair, dark blue eyes, healthy and athletic, until 21 years old. Never used tea, coffee, alcoholics or tobacco; lived a chaste life; fathers and brothers the same.

From birth his skin has been rough, dry, harsh; one brother has the same. Skin of palms and soles thick, cracks in cold weather; deep rhagades, sore at bottom; < dry cold weather; < when using soap or any alkali; skin of face and neck chap and smart after shaving. Must choose moist warm days for shaving.

At 21 had malaria, and was given very large doses of Quinine. Never had another chill; but has been constipated ever since, and sciatic rheumatism then set in, < in cold weather, < before storms.

Was nearly crippled from it for ten years.

Had sphincter dilated; papillæ removed at two different times, but with no permanent benefit.

Bowels inactive, no desire for stool. Move after an enema, but leave a sore bruised feeling in rectum; dread of stool.

*Thirstless*; water nauseates.

Was vaccinated Feb. 1901. A slight "take."

February, 1902, commenced taking Malandrinum 30; noticed improvement in bowel condition. Skin improved

March. Malandrinum 200, with continued improvement in condition of skin.

April. Malandrinum 500, repeated; hands and feet nearly well. Skin growing thin and smooth, Bowel movement nearly comfortable, and three or four times a week. Could drink several glasses of water a day.

Palms crack some yet when exposed to strong alkali or sharp winds. Rheumatism practically gone Has not been so well for twenty years. Says he feels like a boy again. Can work without weariness, and is becoming agile once more.

REMARKS: For the bad effects of vaccination, especially the dry, scaly, itching eruptions, with tendency to rhagades of hands and feet in cold weather and from washing, Malandrinum bids fair to challenge the laurels of Thuja and Silicia. This characteristic skin is peculiar and differentiates from each, giving us another valuable remedy for some of our most obstinate chronic effects of a popular fad.

DISCUSSION.—Mark M. Thompson, M. D.—I have a case cured by this remedy, that confirms some of the symptoms, which occurred in the proving. The patient came to me six months ago, with symptoms that pointed to eczema of the face. There was oozing of a sticky, viscid fluid, with intense burning. Also much edema in the skin; small scales exfoliated, aggravation from bathing, cold air gave great relief, it was worse at night. My success had been so meager that I was well-nigh disheartened, when I saw in the *Medical Advance*, the result of the empirical prescribing of this remedy by our Boston friend and I gave the patient one dose of it. Later the patient came into my office in a great hurry, saying that some strange gypsy had performed an incantation over her and on awaking in the morning she was well. She stayed away three months and when she came back she was still perfectly well. A few weeks later she returned with a slight aggravation and as she told me of it she wept bitterly. Pulsatilla cleared up the case beautifully.



## PUERPERAL MANIA.\*

BY L. C. FRITTS, M. D., Chicago.

It is not the purpose of this paper to discuss the entire field of puerperal insanity, but to cover the limited field of my experience with cases occurring within the thirty days following parturition.

Text-books and authors in general have done little to help in this peculiar field of medical practice, and indeed most that has been said would better have been unsaid, so far as help to the general practitioner or the welfare of the victims of this peculiar affection is concerned.

Authors of some of the text-books on obstetrics do not make mention of mania, while some give it but passing notice, and others drop it as insanity per se, and leave the poor victims to the insane specialist and ultimately the insane hospital, where the life is made darker and darker from neglect, and the restraining drugs used to bring the mind into subjection. In this way an acute curable case is made chronic and incurable.

Recently a case of this kind came to my notice:

A young woman of 26 was delivered of a healthy child at term, and for a few days all seemed well, when she was seized with acute mania and in less than three weeks landed in the northern hospital for the insane, where she still is, with little prospect of relief.

Puerperal mania is not a disease but a symptom, and amenable to treatment and recovery in most instances. It takes the various forms of insanity, including the maniacal, melancholic and emotional. The symptoms are many and variable, and the patients should be carefully guarded from excitement and worry.

Little has been said as to the cause or causes of puerperal mania, and much less said would have been better

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\*Read at International Hahnemannian Association, June, 1903.

One case coming under my observation had been seen by several others before me. One had said that the mania was due to a deep laceration of the perineum, another to grief over the loss of the child. Another said it was due to suppressed lactation, made necessary by the death of the child, while one who did not guess cured the case with the indicated remedy. Infection it would seem is a potent cause for some cases. Two cases which have come to my notice were likely caused by the passing of a silver catheter that had been used on a previous case of mania. Excitement and worry might be the present or exciting cause of some, but it is the belief of the writer that the cause in most cases is constitutional or hereditary and hard to determine.

To illustrate, I will cite two cases which have come under my observation in the past four years.

Mrs. M. H., 29 years of age, tall, slender, brunette, gentle disposition, nervous temperament, general good health; became pregnant in July two years ago. For the first half of term she suffered a great deal from nausea and vomiting. For this Pulsatilla and Cocculus had given relief. The last half of term was without suffering and her health improved. Labor began at 6 a. m., and at 4 p. m. was terminated at the hospital under chloroform and forceps. Labor was at no time severe nor were forceps necessary. Child weighed eight pounds. There was a slight rent in the perineum, which was closed with a single suture and union was perfect three days later. All went well for the first three days, when lactation began with an unusual flow of milk. The breasts grew to an enormous size, and the pain from pressure was intense. The excessive flow of milk was relieved by the use of a breast pump. On the sixth day I noticed that she was very quiet and sober, and her pleasing countenance was supplanted by a sad face. She would say nothing except to answer questions.

Before I left the room she complained that her nurse had neglected her, and was inclined to lachrymation and nervousness, with tremors of the whole body. There had been no neglect, for at this time two nurses were attending

upon her. She made no complaint except a pressing pain in the head. Upon inspection I could elicit no other symptoms, except a strong pulse of 90 from the hard working heart, sleeplessness and deep sighing respiration. Pulsatilla was given and placebo for two days but with no relief. She refused food and grew worse for the next two days, when it was plain to be seen that her suffering was from mania. At this time I made a more thorough search for the remedy. The tongue became coated, much saliva, foul breath, complained of choking nausea relieved by eating or drinking. Pressure and pain in stomach, stool scant but soft, lactation much reduced. Lochia suppressed for three days, when it returned naturally, with no odor. Temperature rose to 104, pulse to 120; pain in the whole body, great prostration. Sleepy, but could sleep very little: would waken at the least noise.

Lost interest in her child, would not notice it when brought to her. Said the doctor was cross to her. After careful search Ignatia 50m. was given, one dose and placebo.

Improvement began soon after, and in five days nearly all the symptoms had passed away. Lactation and lochia were reestablished, and on the 24th day after labor she left the hospital cured.

Mrs. M. F., 32 years old, primipara, brunette, healthy, strong, even temperament, had been lying-in two weeks when I was first called to her. Labor was said to be normal, and a healthy girl baby was the result. Her physician said that the placenta was expressed complete with ease, directly after labor, and all went well for the first five days. She then became nervous and excitable and was inclined to talk a great deal. Lochia and lactation ceased with odor from vagina. Curette was used with the removal of some muco-pus and blood which was not bad. At this time I was called. She would neither talk nor smile. Face looked serious and upon attempting to examine her she became extremely nervous. Her whole body was in a tremor. She would try to get away from us, and

failing would become angry and fight us off. Her pulse was slow and circulation sluggish; temperature subnormal a degree and half, body was dry, cold and blue in spots. At all times she would keep her eyes on those near her, as if to escape any effort to seize her. Anything that was done for or with her had to be by force. After such efforts she would be extremely weak and nervous, with highly flushed face. Tongue was coated brown, with sticky saliva. Foul odor to breath, refusal of food and drink, forced to take water which would choke her. Bowels inactive with distention of abdomen, urination by catheter, scant, highly colored, odor foul.

Uterus was large and soft. No sleep for several days. Lachesis 1m. (B. & T.) was chosen as the remedy and given in repeated doses for one day. After that placebo. I did not see the patient after the following day, but the physician in charge kept me informed and helped me in obtaining notes. She recovered and was in her normal health in three weeks from the time I saw her, and has since been well.

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## OBSTETRICAL CURES.

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By LAWRENCE M. STANTON, M. D., New York.

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I. False labor pains and absolutely no progress made with them; the bag of water had ruptured and the liquor amnii mostly escaped, so that I feared a case of dry labor; the patient becoming exhausted, drowsy, sleeping into a decided aggravation of the spurious pains.

Lachesis 10m, a few doses, brought on true expulsive pains and the child was soon born.

II. Aching of the back, with marked feeling of weakness in back occurring during pregnancy. Kali carb. 4m. cured,

III. Constipation in the mother after child-birth. Collinsonia 6 cured. Hering says of Collinsonia: "Obstinate constipation *during* gestation; diarrhoea *after* confinement.'

But Hughes, always delightful and sometimes helpful, as far as he goes, speaks well of *Collinsonia* for constipation after confinement, especially if the rectum be at fault, which seemed to be this patient's case.

IV. A very bad case of nausea and vomiting of pregnancy; the smell of cooking aggravates. *Sepia* 10m cured.

V. Neuralgia of breasts some months after confinement, brought on, apparently, by nursing; the characteristic pains of *Belladonna* were present. *Belladonna* 10m cured.

VI. Two cases of caked breast and mastitis cured; the one with *Phytolacca* 5c, the other with *Lac cannum* 1m. The Poke root is indicated in single, uniform indurations. The Dog's milk where the induration is nodulated.

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### A LYCOPodium CASE.

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BY J. N. LOWE, M. D., Milford, N. J.

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It has been our experience to achieve such marvellously good results in many cases, in apparent *extremis*, or when rapidly merging into such a condition, that we shall never cease to remember and to be grateful for the masterly therapeutic action of this, seemingly insignificant, but really magnificent remedy.

The indications impressively suggesting its use are "during labor pains, must keep in constant motion, with weeping." "Labor pains run upward." Declares "that she cannot stay in bed; weeps and must get out of bed." "Pain goes upward, and sometimes from right to left, across hypogastrium and abdomen." "I can't stand it; I must get up or I'll die." When any of these states prevail, give *Lycopodium* at once, and you will be surprised and charmed at the instantaneous calming effect that it will have on this tempestuous outburst of misery. And not only this, but the case goes on in harmonious energy, efficiency and comfort until labor is normally completed.

We had a case of premature labor, which during its course, developed the above cited symptoms, until convul-

sions were plainly imminent. The patient was about to lapse into unconsciousness. She said: "I feel so queer; I am losing my senses; I seem to have no feeling, am numb. My brain is numb. O, doctor, can't you help me?"

We said to her, "Have you any pain?"

"Yes, a little; it goes from my right, across my abdomen to the left side."

Quickly as possible I gave her *Lycopodium*, 30m. on tongue dry. Response was simply immediate and all that could be desired. Silently within our heart we said, "Glory to God, who has given us this eternal and immutable law of cure."

This case cleared up, permanently and rapidly, after the use of two or three powders of *Lycopodium* 30th. It was indisputably the true *similimum* for this case. Suppose that we had not given the always demanded *similimum* in this case. What then? A limping progress of wretched results must have eventually followed, perhaps a fatal issue at its close. Amazing and wonderful is the power of the true homeopathic similar.

Do not let us forget *Lycopodium* when we are confronted with the sometimes desperate straits and emergencies of the lying-in room. In many instances it may not be suitable or required at all, but when it is, you will need it extremely, if you do not have it in your pocket case, for no other remedy can take its place.

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### TARENTULA.

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By C. M. BOGER, M. D., Parkersburg, W. Va.

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The original poisonings recorded by Nunez and others show the presence of lymphatic involvement and inflammatory areas around the bite. In the case of the Cuban spider this area was of extreme hardness followed by the characteristic pepper-box openings and necrotic changes, with septic chills and sweats just like carbuncle. Many poisonings show intense pruritus, especially about the genitals;

restless feet and an intermittent type of fever are symptoms verified by these cures. Mammary abscess is quickly matured and caused to discharge by its use. The same effect is noticed in quinsy. In a former communication I called your attention to coughs ameliorated by smoking—cured with this remedy; the *Aranea diadema*, another spider poison, has headache, better from smoking.

I would suggest its use in scarlet fever when complicated with the diphtheritic throat deposits. These cases usually show a profound depression due to the absorbed poison; here the intense pruritus also indicates it.

We have then the following characteristics to indicate *Tarentula cubensis*:

Septic states with inflammation and throbbing (*Belladonna* lacks true sepsis).

Pruritus, especially about the genitals; pruritus pudenda.

Restless feet.

Intermittent types of disease, therefore the intermittent septic chill.

Amelioration from smoking.

The nearest relative here is *Belladonna* which it supplants completely. By the use of this spider venom we will accomplish more in twelve hours than *Belladonna* formerly did in twenty-four. *Apis* also looks like it but the spider has slightly more pronounced redness and less oedema; the redness is also more diffuse upon a hard base, taking the long streaks often seen in *Apis*.

#### SOME TARENTULA CASES.

CASE I. *Diphtheritic Vaginitis*.—Entire vagina and inside of labia covered with a solid butter colored membrane, which came away in flakes. The labia were greatly swelled and pendant, being of a rosy red color; great prostration, loss of appetite and restlessness of the lower limbs were present; the face was flushed and the temperature elevated by two degrees; there was pronounced itching of the entire pudendum; patient six months pregnant.

*Tarentula cubensis* 30 cured in four days.

CASE II. *Blood Poisoning*.—A young man noticed a pimple in front of the left ear; after scratching, it suddenly inflamed and the parts assumed a board-like rigid hardness, with much general oedema of the face and neck; pulse 145 and had a shot-like feel; the temperature ranged close to 104; there was extreme physical prostration with a cold sweat on forehead; the face had a peculiar cadaveric tint and expression. Evidently no time could safely be lost here; the first prescription did nothing. He now received *Tarentula cubensis* 80; in a few hours he felt himself better and the next day a watery discharge, which gradually became profuse and purulent, appeared. At the end of a week an intermittent fever which had been suppressed two years before reappeared; the remedy however was not interfered with and the patient slowly got rid of his fever and recovered completely.

CASE III. *Palmar Abscess*.—A railway fireman got a palmar abscess near the base of the left thumb; it seemed so large, threatening and deep that the railroad surgeon treated it expectantly, hoping to avoid what seemed to necessitate an amputation. Upon receiving this information he came under my care. There was pronounced swelling, a rosy redness and deep vesicles upon the part with violent throbbing and burning pains. The patient was very restless, more so at night; this prevented all sleep. He had lately returned from the Cuban war since which he has suffered with excoriating sweats and a bad muddy complexion. Allowing the part to hang down gave him great distress. For this he received *Tarentula cubensis* 30, every two hours. In eight hours he went into a profound sleep during which the ulcers broke and discharged profusely. The most remarkable part of the affair was the rapidity with which the pus was evacuated and the parts healed up, for when the prescription was made there was no evidence of an opening forming as yet. This rapidity in maturing suppuration I have noticed in quinsy, mammary abscess, etc., in fact it always seems to limit and evacuate the pus cavity with a rapidity I have never before seen.



DISCUSSION.—P. E. Krichbaum, M. D.—I have a case under treatment now, that the paper brings to my mind, for which the remedy was Tarentula; it was a boy about nine years old; every evening he had a spasm lasting about an hour, generally from eight to nine. His grandfather said that he was possessed of a devil. It took me six weeks to find out what the remedy was, but when I did find it and administered it, that was the last of the spasms. It cleaned out the devil if that was what was the matter with him.

H. C. Allen, M. D.—I have made one of the most beautiful and convincing cures with Tarentula. There was extreme sensitiveness of the palmar surfaces of the tips of the fingers of both hands. The sensitiveness was so extreme that to touch her clothes, a knife, a fork, or indeed anything, caused a sharp thrill quite painful. She was under allopathic treatment for a year, she went around wearing gloves in order to protect her abnormal sensitiveness. I found that Tarentula was her remedy and gave her the 200th. It relieved, but did not cure; then I sent to Dr. Fincke for the 3cm, and it was a permanent cure.

J. H. Aller, M. D.—What Tarentula was it?

H. C. Allen, M. D.—It was the Tarentula cubensis.

C. M. Boger, M. D.—Tarentula is a wonderful remedy for pruritus pudendi, one of the most distressing affections; those afflicted with it will resort to anything in search of relief. A few doses of Tarentula in the 30th to 200th will relieve it very quickly.

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### BREECH PRESENTATION.

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W. W. GLEASON, M. D., Provincetown, Mass.

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Mrs. S. has had several children, and invariably the presentation has been breech. I always know what to expect when engaged to attend this patient. She has no trouble during her pregnancy until the last two weeks. The abdomen is then of peculiar ovoid shape, the long axis directly crosswise from side to side. About fourteen days

before the natural term of birth severe labor pains come on. Sometimes the bag of water will break at this time; sometimes not. Pains will continue for twenty-four to forty-eight hours, and then under indicated remedies, (Puls., Cim., Bell.) the pains cease and everything goes on favorably again. She goes about her housework as usual until full term, when labor pains come on again naturally, and in from eight to twelve hours the child is born; but as I previously said, the presentation is invariably breech.

I never interfere in the least with the method or procedure of birth. In her first labor I tried to produce version but could not. Since then I have always allowed nature (for I think that in the case of this woman it is natural) to take its course, and so far I have had no serious complications to meet. This woman, when quite young, had one ovary removed. Can it be that this circumstance has anything to do with the peculiar nature of the presentation of her children? The cause of her having an ovary removed (probably removal was unnecessary) was severe ovarian neuralgia at the menstrual period, every other month. Since then she has been in ordinary good health.

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### ALBUMINURIA DURING PREGNANCY.

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BY W. B. KLINETOP, M. D., Charles City, Iowa.

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July 21st, 1901, was called to see Mrs. T. who was nearing confinement. Her past history showed good health until eight years before, at which time she had general dropsy, especially of the abdomen, so much so that for nine months it was thought that she was pregnant.

Three years later she had a miscarriage at third month. Then a year later, she thought she was again pregnant, but it proved to be a return of the dropsical condition.

Her attending physician did not explain to her the cause of the dropsy on either of these occasions. Although this condition disappeared under treatment, she never regained good health.

July 21st I found the following symptoms: Severe pain in head, beginning in occiput and coming up over head.

Mind confused, dizzy, and very drowsy. A weak, trembling sensation through whole body.

A feeling as if lower part of abdomen would burst. False labor pains. Not much thirst, feet badly swollen. With these symptoms I did not hesitate to give Gelsemium 200.

On examination of the urine later, I found it heavily loaded with albumen, and I informed the husband of the dangers attending such a case. Watching her closely I occasionally repeated the remedy, as needed, changing to the 1m potency.

On July 30th, nine days after first visit, she was confined. She jerked and showed signs of convulsions but Gelsemium cm acted like a charm. I think she received a dose about every twenty minutes, just as the jerking returned.

Evening of the second day after confinement the mother was very nervous, sleepless, greatly worried over the serious condition of child. Lay with hands clinched, feeling if she allowed herself to relax she would lose control of her muscles. She also complained of sharp cutting pains in left ovary.

Prescribed Lachesis 1m, which relieved the pains and she went to sleep and passed a very comfortable night. Four days later, the pains in left ovary returning, Lachesis was repeated with success.

Eleven days later, Aug. 17th, the Gelsemium condition returned and she received the 1m potency.

Aug. 24th, repeated Gelsemium 50m.

Sept. 9th, the indicated remedy not permanently relieving, prescribed Sulphur 50m.

Sept. 20th, gave Gelsemium cm.

Sept. 22nd, examination of urine showed no albumen.

Oct. 5th. On account of relapsing condition gave Psorinum 50m (Sk), which greatly benefited her. She has

had few prescriptions since. The urine has remained free from albumen and at the present writing she is in fairly good health.

The baby was very poorly nourished, weighing only four pounds. There seemed to be nothing wrong with it the first day, but the second morning about nine o'clock it had convulsions and I was called in a hurry. I found it rolling its eyes, pupils dilated, face distorted and purple, convulsive movement of limbs; prescribed Belladonna 30 but the convulsions continued for some time and I was somewhat uneasy as to the choice of my remedy.

Between the convulsions the face was very pale, heart rapid. I thought several times it was dying. I continued Belladonna 30th, and about 4 p. m. the convulsions ceased. Then it lay as if dead, not a movement nor sound, part of the time with eyes staring and the rest of the time seemingly asleep. Limbs cold, inability to swallow. Continued the Belladonna 30th occasionally during the night whenever the staring condition came on or when there was convulsive movement of eyeballs.

In the morning it looked better, did not stare so, but still not a movement nor sound, seemingly lifeless, limbs cold. Gave it some China 3x. Watching it closely that day and the next, it occasionally received a dose of Belladonna, changing to the 200 potency, which was afterwards followed by Sulphur 200. Improvement was slow. It was two days before it was able to swallow without choking, and more than a week before it was strong enough to nurse at the breast. I have since had it under my care and Sulphur, Psorinum, Lycopodium and Calcarea have developed it into a fat, healthy child.

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### A TOUGH CASE.

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BY D. C. McLAREN, M. D., Ottawa, Canada.

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Was called the 28th of November, 1900, to see a young woman suffering from the vomiting of pregnancy. The

case had already been three weeks under allopathic treatment, and was much worse rather than better. Constant empty retching, vomiting of mucus and water. The case at my first visit showed all the usual acute symptoms indicating Belladonna, which was given with decidedly beneficial results. But in 24 hours the trouble returned again as bad, or worse.

The indications were the same and the remedy was repeated with little or no effect; from that time on for nearly three weeks several remedies were given in vain, as the case constantly reverted to its original Belladonna type, and this remedy failed utterly. At last, however, one new and striking symptom began to manifest itself, the feeling of a cord tight around the head, principally forehead. On inquiry about the family history, I found consumption on one side and insanity on the other. These factors, added to the constancy of the Belladonna symptoms led to the choice of Tuberculinum, which was given at first daily, then every second day, and later at longer intervals or as long as each dose held the case. A steady recovery was made, no other remedy at all being required.

Having had such a troublesome experience with this case in its early stages, I did not look forward to an easy time at its close. And this is what happened on July 18th, 1901, when I was again called to attend her. She had had some pressing pains for a week before, during which time she had evidently lost all of the amniotic fluid; the foetus was wedged down in the pelvis, one leg protruding from the half-open uterus. The patient was already much fatigued and tearful, so a dose of Pulsatilla was given. The only result after several hours' waiting was a little further dilatation of uterus and stronger and more regular pains, but no attempt at turning, which indeed was impossible at that stage. I proceeded to assist labor as much as possible, using very gentle traction, and keeping my forceps handy for use when needed. When the body was fully delivered I flexed it over the os pubis of the mother and quickly applied the instrument and lifted the head out of the

vagina. Both mother and child fared well, and are numbered among my warmest friends and patients.

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DISCUSSION —L. P. Munger, M. D.—I had a case of confinement not long ago in a woman who had had several children, but had never had a doctor at any of them. The pains came on naturally, but at the end of twenty-four hours nothing had appeared and I could not make out the presentation satisfactorily by examination. I waited for twelve hours longer, as no serious symptoms were evident; at the end of that time I applied the forceps; they had to go so high up that even the handles were out of sight. It proved to be a case of twins. After I got the first out the second came easily. I do not know whether I was correct in that procedure, but I got them all right and everybody did well.

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### A FEW PRACTICAL OBSERVATIONS.

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BY B. LE B. BAYLIES, M. D., BROOKLYN, N. Y.

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The physician is often obliged to energize, to arouse the perceptive powers of the patient, and without intimating his object, direct his attention to the symptoms and their conditions; and knowing himself the connection of certain drug-symptoms with certain modalities, he will then frequently anticipate the similar affiliation in the case, and determine the remedy.

This knowledge of the *Materia Medica* prepares us for the study of morbid symptoms; and the investigation of these, for broader and deeper research in the *Materia Medica*. Were not Homeopathy so conservative of life, the minutely distinctive study of symptoms it demands, would develop more exact and profound knowledge of pathology; which besides assisting prognosis, would direct our attention to the modalities of drug action, relatively to the parts affected by the structural lesions. Our *sine qua non* how-

ever is the study, jointly and comparatively, of the symptomatology of the sick with that of the drug.

We know little or nothing of the proximate cause of the symptoms; but Homeopathy provides the means to cure, and to prevent, or to enable the natural forces to heal the pathological lesions.

The resources of our *Materia Medica* are as yet, inadequate to arrest, in all cases, the destructive processes produced by sudden and violent, or inveterate and chronic disease, but our failures are oftenest due to neglect of intelligent and methodical search for the remedy, and its correct and prompt application. Next to error in choice of the remedy, we err as to the dose; the repetition of the dose; and the time of its administration. Experience has taught us that the high potencies produce in general, a more vigorous and vital reaction, and that the least quantity most seldom repeated, should be given to persons who are naturally hypersensitive, or have been rendered so by the nature of their disease. A person affected with an acute inflammation, a carbuncle, an erysipelas, or a fever, will suffer for a period aggravation from the first high, potential dose of the remedy; and increased and more prolonged constitutional disturbance, pain, and local aggravation, if the dose be too soon repeated; and disaster will be averted, if we wait for the first even slight indications of normal vital reaction and improvement; and still wait, during as many hours or days as this improvement continues; Thus will we often cure a fever, a diphtheria, a carbuncle or an erysipelas, an impetiginous eczema, or a psoriasis inveterata, by a single dose of the indicated remedy.

All normal and all morbid vital processes, like the eflux and reflux of the tide, have their diurnal revolutions; their periods of remission and exacerbation, and drugs show a similarly modified activity. We have been advised to apply them during the remission, but although the homeopathic medicine may be applied in any stage, it should certainly not be withheld when its intervention is most required, during the exacerbation; a temporary aggravation

will foretell its beneficial operation, and forbid us to repeat the dose.

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### CONCERNING DRUG PROPHYLAXIS.

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BY ALICE B. CAMPBELL, M. D., BROOKLYN, N. Y.

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To rouse an expression of thought on a much misinterpreted subject, rather than for the exploitation of ideas, the following few detached suggestions are presented:

Drug prophylaxis is unhomeopathic, having not even a remote relationship to the law of similars; is based upon no hypothesis. Its foundations exist solely in the imagination, fostered by superstition and tradition, and without the slightest proof of coherency with the truth as it is in Homeopathy. Homeopathy deals with facts and not with fancies; with what IS, not with what may never be; while drug prophylaxis adds not one jot to our knowledge or wisdom.

Drug prophylaxis is unscientific because undemonstrable. Uncertainty and doubt is the inevitable outcome; unlike Homeopathy it can produce no voucher for its practice in the fiat of inexorable law.

Drug prophylaxis is unhealthful. Prompted by fear it projects the sick thought and leads the way to the development of that which it professes to prevent. It is a gross violation of the healing principle in suggestive therapeutics; and no genuine follower of Hahnemann who recognizes and utilizes all psychic methods, can afford to dispense with this subtle factor for good, in his practice of the healing art.

Drug prophylaxis is unintelligent, inasmuch as it is dealing with an unknown quantity, both as regards the sick-making power of the drug, and the susceptibility to disease of the patient. The mission of drugs is the repair of damage already done. A desire to enlarge our scope of power is no warrant for branching off into regions chimerical and suppositious. It is the anxiety to provide against contingencies, to include supposable conditions with the real, to



propitiate all the demons of disease, that has reared this "mystic shrine" to the "unknown God" in medicine to whom a majority of the people have been kept in servile bondage.

The prevention of disease depends more on mind than on drugs. Mental attitude attracts or repels disease, favored by bodily states that are either for or against health. "Know thyself" is an injunction that few heed. An understanding of hygiene and dietetics is the crying need of the people. Through the prevalence of this ignorance the drug habit is increasing its hold upon the community, and all those claiming to avert disease by drugs are fostering the delusion.

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DISCUSSION.—Mark M. Thompson, M. D.—The idea of drug prophylaxis seem to be a reasonable one, but Dr. Campbell's essay tends to make us think about it with some caution, if not to overthrow it. The administration of a drug for that purpose, with the full knowledge of the patient for the reason of it, tends to do away with fear. Most people will refuse to take a prophylactic until they are under the influence of fear and the idea of protection takes away the fear and puts in its place a feeling of security and hence does good in that way, quite independent of the drug given. A little hydrant water will do just as well as the medicine, as the tranquilization of the patient's mind is what does the work.

H. W. Pierson, M. D.—One of the thoughts that arises to my mind from the last subject, is that the true idea of prophylaxis is perhaps missed by some. The patient seeks for protection and the physician having a knowledge of the susceptibility of his patient and of the conditions liable to bring on an attack, by careful consideration of the picture presented—the totality of symptoms—is enabled to select a remedy that really does afford the protection sought. It is not the idea at all of some remedy for a disease, but an adaptation of a remedy to the case in question only, and may be any remedy in the materia medica. It is not prophylaxis; it is prescribing the true similitum in the case and

it may be needed where there is no impending danger at all except in the patient's own mind, but that state of mind needs a remedy just as much as a case of scarlet fever does.

When we give a remedy that is simply good for a disease many mistakes are made and though a variety of remedies may be given we fail to discern the indwelling condition by which the susceptibility is caused. The statement has been made here that susceptibility is due to dyscrasia, and that is true and nine-tenths of our scientific work is done right in that line. We must study deep enough to find out that the symptoms upon the surface are only the effect of underlying dyscrasiæ.

J. W. Krichbaum, M. D.—I have recently been through an epidemic of small-pox in the town of which I am the health officer. I am employed by the month, so that there is no incentive to have sickness at all or to prolong a case. As usual the disease was chiefly among the ignorant classes. I did not try prayer or Christian science, I treated it vigorously and in a material manner. I do not know whether philosophy would have helped the cases or not, but I do know that Antimonium tart. did prove to be a genuine prophylactic for that epidemic, and with two exceptions, I did not have a case of small-pox develop where it had been given. Remember this included the children, who were not frightened, so that Dr. Thompson's idea that it is the tranquilization of the mind and not the medicine falls to the ground. The other doctors in the town vaccinated right and left and it seemed to have no effect whatever. The tartar emetic prophylaxis had more effect than any other means that were employed, and there was no suggestion in it either.

I employed it in the three thousandth, usually one dose.

C. M. Boger, M. D.—Dr. Campbell took my breath away, when she read that paper and Dr. Thompson nearly finished the job. It is a fundamental rule that two bodies cannot occupy the same space at the same time. I do not see how these two doctors are going to get around that proposition. If we have scarlet fever to look after in an epidemic say,

and give Belladonna to those exposed, how can the disease occupy the house already occupied by the Belladonna image. Two things cannot occupy the same space, especially when the things are similar.

Alice Campbell, M. D.—The fact that those under the influence of Belladonna do not happen to take the disease does not prove much, for we frequently treat families where there is only one case, among a number; one of my families had it, three children were affected, the father and mother also had it but one little fair-haired girl was not in the least affected by it, and yet nothing was given in the drug line as a prophylactic.

C. M. Boger, M. D.—That might be in one case, but my experience in a large number is just the opposite

J. W. Kirkpatrick, M. D.—I had a small-pox case, in which seven people were thoroughly exposed to the contagion from Friday until the next Thursday. Only one of the seven was vaccinated at the time of the exposure. The health officer was not called until the case was in full eruption, and then the whole were immediately vaccinated. Not one of these took the disease.

J. W. Krichbaum, M. D.—How long had the eruption been out when it was recognized.

J. A. Kirkpatrick, M. D.—The eruption was out somewhat on Sunday, considerably on Monday and in full bloom on Tuesday.

J. A. Krichbaum, M. D.—Then the patient was hardly in a condition to spread the disease until Tuesday.

W. H. Leonard, M. D.—A few weeks ago, I had a case of scarlet fever in a family in which there were three children. I separated them as much as possible, although they all had to sleep in the same house. I gave Belladonna to them and there has been as yet no symptom of the disease. I believe that Belladonna answered the purpose.

C. F. Friend, M. D.—I have recently had quite a number of cases of scarlet fever, some quite severe ones. In one family there were two children, one having the disease, the other not. to this latter one I gave Belladonna, as soon as

a diagnosis was made. Notwithstanding, the third day after, he came down with it; it did not act as preventive in that case. In marked contrast, however, to the first case, it was very mild. At about the same time I had a family of six children, one of whom was down with scarlet fever. None of them received Belladonna and as yet I have not been called to see them and presume that they have not had it. I have had other similar experiences, so that there is a great doubt in my mind as to whether Belladonna has any influence over the disease or not. Some of these cases called for Kali muriaticum; in these cases I gave that remedy to the rest of the family as a preventive and none of them came down with the disease. It is a question that requires a considerable amount of experience before we can settle it.

H. C. Allen, M. D.—Hahnemann explained the matter one hundred years ago. Belladonna is a prophylactic to the smooth scarlet fever of Sydenham, a variety of the disease that is now seldom or never seen. Belladonna is rarely indicated now-a-days for scarlet fever. Sulphur is frequently indicated and may be a prophylactic for modern types of this disease.

J. W. Hingston, M. D.—It has been my observation that the greatest trouble in scientific circles is a lack of science. It has been suggested by some former speakers that there must be a fair sprinkling of Christian scientists in this society and it seems so to me also. We have been told that as a man's mind is, so is his body; by others we have been told, that the reason that many persons take contagious diseases, is because the idea has been projected towards them that they were liable to take it and therefore they did. In other words they have been scared into it. These principles both belong to Christian science, if I know what Christian science means. We have been told that it is not scientific to prescribe a prophylactic remedy, that we have no data to act on. I think that matter has been cleared up by those that have already spoken.

Dr. Pierson has said that the proper prophylactic will put the patients in a better condition of health than they had

before. That means that they had some symptoms to prescribe on and why is it not as scientific to prevent them from getting a disease that threatens as it is to prescribe for them after they get very sick. It seems to me just as scientific and a good deal better sense. It is a fact that can not be questioned that in some, if not in most epidemics, a single remedy is apt to be indicated in almost every case; it runs like a red letter remedy all through that epidemic. It may not be always the remedy but it is in nine times out of ten. Now why is it not a good practice to give the epidemic remedy to persons in that epidemic, even although they have no symptoms.

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### A PLUMBUM CASE AND ITS DIFFERENTIATION

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BY W. E. LEDYARD, M. D., Sunol Glen, Cal.

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1901, Sept. 15th. Mrs. A. A., of slender build and sallow complexion, aged 43, the mother of four children, the youngest being five years of age, came under treatment.

Having been troubled many years with obstinate constipation, she resorted, with temporary benefit, to "Hall's Method" of large rectal enemata of warm water. This was kept up for a long time, until finally there was no evacuation of the bowels without it. We warned her of the danger of permanently paralyzing the rectum, and she desisted.

The symptoms being decidedly nondescript, we cast about for the cause of the illness. It had been of nine days duration, dating from a return from the country, where drinking water from a well was suspected as the cause; the more so, as several members of the household were somewhat similarly affected. However, investigation seemed to prove that no grounds existed for such a suspicion.

The open hopper of a sewer in an adjoining room also came under our surveillance, only to be dismissed as properly trapped, on the reliable authority of a competent plumber.

For days the patient hung in the balance, lying on the back; part of the time in a semi-stupor, and part of the time suffering intensely from abdominal pains.

Whether from physical inability or from want of knowledge, she failed to give us the characteristic symptoms necessary for the choice of the indicated remedy.

The trained nurse was much in evidence also, and, whenever severe abdominal pains came on (which invariably happened in our absence) instead of sending for us, and giving us an opportunity to properly "take the case," relieve the distress, and incidentally score another visit, the aforesaid nurse gave transitory relief by applying hot applications with great assiduity. Moreover, if our patient (from her position on the back) was unable to urinate, the urine was drawn off by the catheter. We were afterwards informed by the patient herself that she could have voided the urine if she had been allowed to sit up.

Notwithstanding the very close and unremitting attention of the trained nurse, the lightest kind of food was not retained by the stomach, and we permitted nutrient rectal enemata.

In the deft hands of the nurses (for from first to last our patient was the happy possessor of three) the temperature, which of course had been taken with all diligence and accuracy, continued to mount up until things began to look as if a "pull through" were somewhat dubious. At this juncture, a neighboring physician, professedly homeopathic, was called in consultation. With mien grave and wise, he percussed the chest, applied the stethoscope, and shrewdly diagnosed the case as one of "ptomaine poisoning" from pears, eaten during the sojourn in the country some three weeks previous to this, and glibly mentioned six or seven remedies, while we, always "thankful for small mercies" should have been abundantly satisfied with one.

The bunch of suggested remedies being, each by itself, weighed in the homeopathic balance and found wanting, was laid aside. This consultant being interrogated about a little child in the same family, whose abdomen was distend-

ed and sensitive, gravely recommended the liberal application of "antiphlogistine" or Fuller's earth and glycerine.

After this little episode we made our visits more frequently, and happened to catch our patient in an attack during which she said: "Doctor, if you will *roll me hard* I think it will help me." We complied with the request, decided relief resulting. She also suggested rubbing and kneading the abdomen. This, too, afforded relief. Here were two important symptoms, being in plain English: (1) relief from physical exertion, and (2) relief from pressure.

In Kent's Repertory, under the first rubric, we have nine remedies:

Canth., Ign., Nat., Plb., Rhus, Sep., Sil., Stan., Trill.

Under the second rubric:

Canth., Ign., Nat., Plb., Rhus, Sep., Sil., Stan., Trill.

(3) Colicky pains in abdomen superadded, and the following seven remedies remain: Canth., Ign., Nat-m., Plb., Rhus, Sil. and Stan.

Having satisfied ourselves that Plumbum was the remedy, we hastened to the bedside for a demonstration.

Accordingly on Sept. 24th, at 9:53 p. m., during a very severe paroxysm, we gave a dose of Plumbum 40m. dry, the nurse as usual using hot applications.

At 10:15 p. m., there being little if any relief, we administered the same in solution, requesting the nurse to omit the hot applications.

In ten minutes complete relief came and our patient slept for half an hour.

At 10:55 p. m. another attack seemed to call for a repetition of the dose.

Five minutes after, the patient had again sunk into a quiet, natural sleep, during which we watched her for nearly an hour, when we retired, leaving her still sleeping.

In the morning the joyful report greeted us of a peaceful sleep until 3:30 a. m., when another attack came, but shortly passed off without further medication, and sleep

supervened until morning. This was the first night's rest obtained for three weeks, and from this time on the improvement was rapid and permanent.

Does it not appear from the above case that a patient may actually receive too much care, or, so to speak, be "killed with kindness," to wit, the hot applications; that she may be deprived of making the effort so necessary for her restoration to health and general well-being, as in the removal of the urine in a mechanical way; and that, until the indicated remedy is given the relief is, at the best, but transient, and may entail such a loss of the vital force as to place the life of the patient in jeopardy?

It was a terrible surprise to us to have the case drag along in such a tedious manner, for the rule is, a speedy response and quick relief from the beneficent action of the indicated remedy.

Let us consider the differentiation of remedies under the two above modalities of colicky pains in the abdomen, viz.: Relief from physical exertion and relief from pressure.

Cantharides, with its burning, stitching and tearing pains, urinary distress, and power to promote fecundity expel moles, dead fetuses and the placenta, had nothing to recommend it in this case.

As for Ignatia, there was no evidence of suppressed or deep grief manifested by frequent sighs or sobs, even tho' under this remedy the patient lies better on the painful side, which is equivalent to relief from pressure, nor did hysteria or convulsions bring this remedy to the fore.

Then, the colicky pains of Natrum muriaticum are accompanied by nausea, with a great longing for bitter things beer, farinaceous food, salt things, oysters, fish and milk. Our patient had an aversion to milk, and there was lacking a history of chills and fever and Quinine.

As far as Rhus-ox. was concerned, our attention was not directed to that remedy by an account of getting wet while perspiring, nor from foggy or wet weather, or a sprain, nor from intolerance of cold water, nor a suscepti-



bility to poison oak; and yet our patient experienced particular relief from continued motion, and would frequently lie on the back with lower limbs extended.

Silicea would be brought to mind by the hard, hot, distended abdomen of children; by flatulence with rumbling and incarceration, very offensive, shifting and difficult to discharge, with costiveness and a fetid odor like wet brass, all of which were "conspicuous by their absence."

Lastly, Stannum, like Plumbum, has relief of abdominal colic by pressure, but the colic usually occurs in infants or young children. Unlike Plumbum, there is an aggravation from the use of the voice, and a weak feeling in throat and chest.

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DISCUSSION.—C. M. Boger, M. D.—That Plumbum case was very instructive. Plumbum is a deep acting remedy, and I have come to the conclusion, during the last year, that it is not prescribed often enough. One of the main indications is contractions. In common with the other soft metals, it has the symptom of boring pains. Gold, Silver, Zinc and Tin are all soft metals, and they all have boring pains, of an intense character. This character of pain led me to prescribe Plumbum in a case of very virulent dysentery. It cured promptly. A year after, she went to another place on the coast and while there had another attack or a relapse of the same condition. The physicians there, were not able to cope with it and her mother wrote to me for some of the same medicine. I sent Plumbum 200th, and it cured her again. All other remedies that had been tried had failed. Under the head of contraction, we have sensation as if umbilicus was drawn to the spine, also as if sphincters were contracted, as if rectum and anus were contracted and drawn upward. In constipation with colic there is the same sense of contraction in the intestines and on examination you will find that the intestines are actually drawn up into knots, which can be felt sometimes in one place, sometimes in another. Plumbum cured a case of colic for me after the failure of the old school; there was

severe contraction of the circular fibers of the intestine. It was a complete cure in a case that was confined to bed by the disease. She had been taking *Cascara sagrada* for a long time.

In cases of chronic lead poisoning we are apt to have the wrist-drop; that is one of the chronic effects of the metal, due to its deeper action. The first action is retraction of fibers, especially of the circular ones.

J. H. Allen, M. D.—A case in which I used *Plumbum* with success, occurs to me. The patient was a lady, who about twice a year was in the habit of getting attacks of severe colic. There was dreadful nausea and vomiting, the pains were relieved by the vomiting; cold sweat on the forehead, and great prostration, were the symptoms in an attack in which I saw her. One dose of *Plumbum* cured her, not only of that attack, but of the tendency. I have noticed a peculiar symptom in gouty conditions; namely, gouty pain in the index finger and thumb accompanied by numbness, also gouty concretions about the thumb, with numbness, without pain; numbness in the great toe, constipation, coldness and inability to stand; no desire for stool for many days, coldness in the lower extremities.

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#### N. Y. STATE HOMEOPATHIC MEDICAL SOCIETY.

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The Homeopathic Medical Society of New York held its thirty-sixth semi-annual meeting at Utica, Sept. 16th and 17th. In the attendance, number and scientific character of the papers, it was one of the most successful meetings in the history of the society. The physicians of Utica, with Dr. Haines as chairman of the local committee, were such hospitable hosts that every one was welcome and well cared for.

Those in attendance were: M. C. Ashley, Middletown; T. D. Buchanan, New York; Wm. M. Butler, Brooklyn; J. W. Candee, Syracuse; C. C. Capron, Utica; B. C. Carleton, New York; John G. Chadwick, Buffalo; C. E. Chase, Utica; F. J. Cox, Albany; Geo. R. Critchlow, Buffalo; W. C. Daley,

Rochester; L. L. Danforth, New York; L. W. Dean, Utica; Walter G. Crump, New York; W. A. Dewey, Ann Arbor; J. I. Dowling, Albany; F. LeC. Dowe, New York; J. W. Dowling, New York; Wm. P. Faust, Schenectady; W. S. Garnsey, Gloversville; C. Cennerich, New York; A. D. Getman, Oneonta; G. L. Gifford, Hamilton; W. B. Gifford, Attica; G. E. Gorham, Albany; A. R. Grant, Utica; C. A. Gwynn, Auburn; J. T. Greenleaf, Owego; C. T. Haines, Utica; J. H. Hallock, Saranac Lake; F. W. Hamlin, New York; E. L. Hill, Gloversville; W. F. Honan, New York; R. B. Howland, Elmira; S. W. Hurd, Lockport; C. G. Jeffery, Brooklyn; J. M. Keese, Syracuse; Wm. Harvey King, New York; Geo. F. Laidlaw, New York; Charles E. Lane, Poughkeepsie; J. M. Lee, Rochester; Jno. W. LeSeur, Batavia; Fred D. Lewis, F. Park Lewis, Buffalo; L. A. Martin, Binghamton; J. A. MacKenzie, Lima; Geo. W. McDowell, New York; Walter S. Mills, New York; C. J. Miller, Mt. Kisco; John L. Moffat, Brooklyn; Geo. T. Moseley, Buffalo; E. B. Nash, H. P. Johnson, James Walsh, Cortland; P. W. Neefus, Rochester; W. H. Nickelson, Adams; E. H. Noble, Elmira; C. H. Otis, Honeoye Falls; A. P. Powelson, New York; E. G. Rankin, New York; W. S. Rambo, Rochester; E. S. Randall, Waterville; Jos. Rieger, Dunkirk; D. J. Roberts, New Rochelle; G. W. Roberts, New York; F. E. Roper, Norwich; J. H. Schall, H. D. Schenck, Brooklyn; H. C. Scudder, Rome; F. W. Seward, Jr., Goshen; J. W. Sheldon, Syracuse; B. F. Sherwood, Syracuse; J. T. Simonson, New York; E. A. Simonds, Carthage; S. R. Snow, Rochester; E. E. Snyder, Binghamton; A. B. Southwick, Rome; T. D. Spencer, Rochester; M. O. Terry, Utica; A. B. VanLoon, Albany; C. A. Ward, Binghamton; D. G. Wilcox, Buffalo; H. C. Allen, Chicago; H. F. Biggar, Cleveland; Frederick Hooker, Syracuse; L. C. Crowell and C. E. Alliaume, Syracuse.

Very little general business came in for attention, hence full time was given to the scientific work. The papers in general were good. Perhaps the most notable paper and discussion was that of Dr. F. Park Lewis, rela-

tive to the union of the two schools. It was a cool and dispassionate effort, well written and well read. We regret that we have space for only one reply to the able argument of Dr. Lewis, that of Dr. E. B. Nash.

#### WHY SHOULD WE AMALGAMATE?

We ought to be very careful how we take steps in the direction of the amalgamation of truth and error.

We have stood for a hundred years against the most unreasonable persecutions, and fought for principles that we knew to be true, until we are the peers of all other schools in the eye of the law and the confidence of the public. The law of cure promulgated by Hahnemann has stood the test, and we are not driven every decade to resort to some system of microbe-killing or seropathy.

The only law of cure ever discovered that stands today as it did a hundred years ago is that represented in the formula, *Similia Similibus Curantur*. We are its sole custodians; not that everyone has not a legal right to avail himself or herself of its beneficent possibilities, but that no one has a moral right to do so without open acknowledgment of its truth.

We follow in the steps of Hahnemann, our Herings, Raues and Lippes, our Joslyns, Dunhams, Bayards and Wellses, gone to their rewards. Our Helmuths, Allens and Descheres of later times, who have placed our school in a position where it has, does, must and will command the respect and recognition of the people in spite of all possible opposition. Now, if the old school, or as they delight to style themselves, (as a reflection upon us) the regular (?) school, have come so far as to invite us to their society meetings, *allowing* (mark the word) us to retain our name, etc., we ought to hail it as a forward movement on their part, and accept the invitation. Yes, and return the compliment. But it is due to ourselves, the government that recognizes us and the public that appreciates and patronizes us, to abate not the tithe of a hair from a full claim to recognition of the truth of principles that have made us distinctive as a school. Homeopathy is a success. No

sane man can deny it; and it has come to stay. There is no good reason why this amenity should not have been extended to us before. There is nothing but an unwarranted prejudice that has ever stood in the way of a recognition of Hahnemann's teaching, potency and all.

In the name of general medicine we have even admired, accepted and studied the anatomies, physiologies, chemistries and operative surgeries of those who are recognized lights in all so-called schools of medicine. There ought to be no such thing as different schools of medicine, and when the dominant school shall honestly investigate the claims of Homeopathy and as scientifically apply it to the cure of the sick as they divested of prejudice are capable of doing, the time is not far distant when there will be but one school and that will be *homeopathic*. When the time shall come that a man may display the works of Hahnemann, Hering, Raue, Guernsey, or any or all of the now large and able works on the homeopathic treatment of disease on the shelves of his library, or deal out the sugar globule, disk or tablet according to his judgment of the needs of his patient, without being "called down" by his county, state or United States society for irregularity, then will there be some reason for us to accept in good faith courtesies extended to us, and less reason for our continued existence as a separate school.

Until then we must stand on our dignity assured as we ever have been, that:

"Truth crushed to earth shall rise again,"

And just as surely that:

"Error wounded shall writhe in pain,  
And die amid her worshippers."

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The report of the Necrologist included the names of Wm. Tod Helmuth, S. H. Talcott, Martin Deschere, Henry M. Smith, C. W. Cornell, Geo. H. Church, and Geo. H. Doty.

There was a lamentable absence of women members, so different from our Western societies.

Dr. Moffatt is an excellent presiding officer and Dr. Wilcox one of the most able secretaries of which any society can boast. He should be retained for another decade, at least.

In our opinion the practical advantage to be obtained from attendance was seriously marred by too many papers, hence too little time for discussion; e. g. Bureau of Gynecology, four papers, one hour; Bureau of Neurology, two papers and discussion, twenty minutes; Pediatrics, forty-five minutes, five papers; Surgery, four papers, one hour; Materia Medica, three papers, one hour; Clinical Medicine, four papers one hour. This is a fault of other societies. New York is not alone. The best part of a society is the practical experience of the practical members expressed in the discussion, and the interest and attendance is best maintained in a society from which something helpful is learned. Not so many but better papers and more thorough discussions should be the watchword.

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### IM MEMORIAM.

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And the Reaper Death is busy,  
With his sickle red with blood.

The fatalities among some of our ablest and best known homeopaths in the past few weeks has been unprecedented. The loss of recognized leaders not only in the United States but in England has been keenly felt. Helmuth, Talcott, Hughes, Haynes, Martin Deschere, Henry M. Smith, and Duncan have closed their earthly careers. But in our professional life, as in battle, the lines close up, as fast as men fall others will fill the vacant places in the ranks and the work goes on; yet the memory of our colleagues will be green and deeply cherished. What a shock in the nation's life when Lincoln, Garfield, Grant and McKinley were laid low, yet others were ready to fill their places. They disappear from the arena of earthly activities, the waters close over them as over a pebble, and the tide ebbs and flows as before. These sad scenes remind us that no man is indis-

pensable either in public or professional life. The survivors will rally round the flag of similia and the roll call will go on while the list is extended.

Charles Carleton Smith, 875 North 20th street, Philadelphia, died Sept. 23rd, aged 66. He was born in Philadelphia, and graduated from the New York Homeopathic Medical College in 1862. He established himself in practice in Bridgeport, Conn., and later removed to Milwaukee. For several years he was a member of the faculty of the Chicago Homeopathic Medical College. In 1871 he accepted a call to the professorship of Special Pathology and Diagnosis in the Hahnemann Medical College in Philadelphia, but four years later resigned to resume private practice. He is survived by his widow, who was his second wife.

Dr. Smith was a faithful disciple of Hahnemann, and among the strictest interpreters of the law of similars in the country. He had the reputation of being one of the most helpful in consultation in Philadelphia since Hering and Lippe.

Emma Nickerson Warne died at her country residence near Flushing, Mich., Oct. 7th, aged 48, after a few months' illness. She was an enthusiastic homeopath. She graduated from Hering College in 1897.

William B. Cowan of Guelph, Ontario, died Oct. 4th after a lingering illness, aged 62. He began study in the office of Dr. Husband in 1863 and graduated from the New York Homeopathic College in 1866 and after receiving his license from the College of P. & S. of Ontario, began practice in the city in which his entire professional career of 35 years was spent. His widow, two sons and a daughter survive him.

## EDITORIAL.

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All Contributions, Exchanges. Books for Review and other communications should be addressed to the Editor, 5142 Washington Ave., who is responsible for the dignity and courtesy of the magazine, but not for the opinions of contributors.

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### WANEED, A HOMEOPATHIC JOURNAL.

In the *Hahnemannian Monthly* for October, a correspondent addressed Dr. Bartlett, the genial editor, as follows:

"I have had specimens of your *Monthly* but am not satisfied that it is what I want. I am looking for a *Homeopathic* journal, and must confess I am disappointed. Should I not find what I want you will probably get an order from me as coming nearest to what I seek."

Here is a note of warning that our journals should heed. The applicant is evidently an allopathic doctor. He has been up and down the line of febrifuges and antifebrifuges, toxins and antitoxines, and has been disappointed and wants help. He has heard of Homeopathy, has probably read something of it; has perhaps seen it practiced by some conscientious and painstaking homeopathic physician, and maybe has seen its efficiency demonstrated by some intelligent mother in his community who has been supplied with her case and little book of directions, to which she has adhered loyally because she has known nothing more, and now has come to the point where he desires honestly to obtain practical homeopathic information and to learn what is really a good and correct, helpful and curative, homeopathic method. The *Hahnemannian Monthly* has been recommended to him in some manner and he has sent for sample copies, but is disappointed. He wants, as he says, a "Homeopathic" journal, and the *Hahnemannian* hardly fills his bill.

It is a "Homeopathic" journal he is looking for. What is a "Homeopathic" journal? Or, more properly, what has just such men as the *Hahnemannian Monthly's* correspondent a right to expect of a "Homeopathic" journal? Of so-styled "scientific" journals there are plenty in his profession. If he wishes to learn of the theory and action of



toxins and antitoxins he need go no further. In fact, that is exactly the place to look for such knowledge, not in ours.

Should he wish to learn of quinine, calomel, strychnine and digitalis he need go no further, for these are the chief elements in the so-styled "scientific" practice.

If he cares for surgery he needs no homeopathic journal for his purpose, even though we have able and accomplished surgeons who can doubtless give him many a practical point in this line.

If he is after gynecological and obstetrical periodicals he can find them in plenty in his own school.

And so on down the list. He has been led to want a "Homeopathic" journal because he wants to learn of Homeopathy, of its tenets, of its theories, of its laws, of its methods. He wants to know what Hahnemann enunciated, and why he enunciated it. He wants to know of what the homeopathic materia medica consists. He wishes to understand our pharmaceutical methods, of our processes of potentizing drugs, of what is to be gained thereby, what the theories of potentiation may be, of what our proofs of the action of the attenuated remedy consist, why we should never mix, compound or alternate remedies, why the single dose is invariably better than the indiscriminately repeated dose, how it is that the right remedy at the right time, to the right patient in the right potency, can be so permanently effective where careless Homeopathy and criminal allopathic medication have failed.

These and many other essential points in the art of medication according to the law of similars is what such inquirers are invariably after. We have had such inquiries by the hundreds and have succeeded in making many a convert to Homeopathy by giving them respectful and serious answer, and it is to be regretted that the *Hahnemannian Monthly*, instead of attempting to define Homeopathy according to the alleged modern and subterfuge definitions, did not come squarely out in the open and give its correspondent some of the very things for which he was looking, and did not resolve then and there to hereafter be more of a

homeopathic journal itself, such a Homeopathic journal as Hahnemann would have it were he its editor, such a homeopathic journal as Hering would have it were he its editor, such a homeopathic journal as Carroll Dunham would have it were he its editor, such a homeopathic journal as Baron Von Bönninghausen would have it were he its editor.

The *Hahnemannian Monthly* is an excellent medical journal, one of the best of many good ones. But it takes no homeopathic physician to see that it is not much of a "Homeopathic" periodical, in the strictest sense.

How many editorials have appeared in it in recent years expounding the homeopathic faith? How many studies of the homeopathic repertory have appeared in it in modern times?

How many provings of drugs or re-provings of homeopathic medicines have its pages given their readers in the last decade or two?

In homeopathic polemics the *Hahnemannian Monthly* stands well at the head.

As a defender and propagator of our material welfare it has few equals.

As a periodical of "scientific" proclivities it vies with able allopathic journals.

As a teacher, exemplifier, expounder, explainer and illustrator of accurate homeopathic practice it is feared the verdict of its allopathic inquirer, "weighed in the balances and found wanting" is not far wrong.

A "Homeopathic" journal is a "Homeopathic" journal. That's all there is to it. Styling a journal a homeopathic periodical does not make it so. Proclaiming it the organ of the homeopathic profession does not make it a "Homeopathic" journal except by association.

For practical purposes, for bedside work, for real teaching of Homeopathy, straight, pure, unadulterated, the Homeopathy of Hahnemann, the Homeopathy which the allopath who is dissatisfied with his own miserable methods is looking for, we have altogether too few.

It is not to be understood that the **MEDICAL ADVANCE**

accounts itself an ideal homeopathic periodical. No one regrets its weakness more than does its editor. No one would be rejoiced more than we could we find an earnest, zealous and competent devotee of Homeopathy to take up the work, and make of it such a homeopathic journal as would meet the requirements of just such honest and earnest inquirers as the correspondent who turns the *Hahnemannian Monthly* down as not filling his bill.

Homeopathy needs a dozen out-spoken exponents, who will preach and teach and exemplify Homeopathy in every issue.

No doctor is more certainly responsible for the maze of uncertainty and contamination, which has hovered over Homeopathy in recent years than our half-hearted journals.

We have become too corpulently "scientific" and not sufficiently forceful homeopathically.

We have let the pure gold of *similia similibus curantur* become contaminated by catchy procedures, which have no substantial foundation upon which to rest.

We have drifted away from *Organon*, repertory, proving and corroborative study, and have run after surgery, gynecology, electricity and the specialties when in our *ateria medica* and *Organon* we have a veritable mine of sick-room wealth.

And we must come back to Homeopathy, pure and undefiled, else we will ever be open to the criticisms of honest men, that we are not sincere in our belief and practice, or are not sufficiently intelligent to so explain them that others, seeing their good works, may become homeopaths also.

There is a crying need for reform in the circles of homeopathic journalism, that the voice which cries out from the wilderness may meet with definite and satisfactory answer.

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### CHICAGO'S CITY SOCIETY.

The Homeopathic Medical Society, of Chicago, which has for the last three or four years dragged along in a

wretched existence because of too little Homeopathy and too much politics, has tried to redeem itself, maybe, by electing a lady physician president. Now if Dr. Hanks will have the courage to arrange practical homeopathic programmes occasionally, perhaps the meetings of the society will be worth going miles to attend. Recently they have been of the 'alf and 'alf order, neither good Allopathy nor good Homeopathy, in fact almost none whatever of the latter. Without the courage of our conviction and well-grounded reasons for the faith that is in us how can we hope as a profession to withstand the proselyting efforts that are constantly being directed at our younger members? The Homeopathic Medical Society of Chicago, could become a power for correct Homeopathy and the good of humanity if it would but do so. Let us hope that under Dr. Hanks' administration, it may be redeemed and fulfil the objects for which it was founded.

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### CORRESPONDENCE.

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#### PYROGEN OR SEPSIN?

EDITOR MEDICAL ADVANCE:

Dr. Clark, in his valuable and most excellent "Dictionary of Materia Medica," thinks I made a mistake in stating in an article on *Pyrogen* that it was "pus from a septic abscess." I know there has been some confusion as to the origin of this frequently indicated remedy, and many suppose that Sepsin and Pyrogen, as introduced by Dr. Samuel Swan, were identical, and they may be in action so far as I know, but I am inclined to think there is some slight difference. When I prepared the article mentioned above, I wrote Dr. Swan, stating my purpose and asking for information. It will be seen that I used Dr. Swan's own language, and that he gave the origin of the preparation as potentized by him. That the profession may have the benefit of the letter I give it nearly in full, as written by Dr. Swan. Sepsin is used but little in this country, where as the proving of Sherbino and nearly all clinical data as given

in the Journals and by Dr. Swan, are based upon the use of the Pyrogen as prepared by him, the same substance about which he writes in his letter as here given. I feel sure Dr. Clark will be as glad to get this information as any one.

DR. SWAN'S LETTER, DATED OCTOBER, 7, 1892.

"Many years since, when Dr. Helmuth kindly sent me the pus from "*The worst case of septic abscess he had ever seen,*" I took a dose after potentizing and got the aching pains in the limbs so graphically described by a patient with malarial fever. I gave him two doses and that cured him. I began to think and came to the conclusion that all zymotic diseases were caused by blood poisoning. I then began to test my theory by giving a dose of Pyrogen in all cases of scarlet fever, measles, intermittent fever, in fact in all diseases where the pains in the limbs appeared first in the attack. I was delighted with the result. Intermittent fevers were in most cases checked at once, and in all the diseases I gave it, either it was sufficient to cure the case or else remove the worst symptoms, and one or two other remedies affected a cure. \* \* \* \*

"As a disinfectant it is wonderful. A child had diphtheria, a malignant case, and the stench from his breath was awful. One dose of Pyrogen dry on the tongue was given, and in half an hour the rotten odor was all gone. In a case of puerperal peritonitis where the lochia had that rotten odor and abdomen greatly distended, two doses made her a well woman in eight hours. This was reported to me by Dr. Carr, of Galesburg, Ill., since dead. \* \* \*

The italicized quotation near the beginning of the letter is the language of Dr. Helmuth, and placed in quotation marks by Dr. Swan, but the italics are mine as this sentence is that which I gave in my article and is called in question by Dr. Clark.

Dr. Swan may have been visionary as some claim, but I believe he did more to advance the cause of pure Homeopathy than all those who ridicule him combined. He had the philosophical mind necessary to comprehend the principles of Hahnemann. Instead of denying or rejecting the

apparently absurd, he put it to the test of experience and proved it false or true. The tenets of Homeopathy are just as absurd to the intellect of allopathic physicians, and I am sorry to say to many professed homeopaths, as the supposed absurdities of Dr. Swan. He had errors, he made mistakes, as do all pioneers and real scientists, but no one was freer to acknowledge them and reject them, when proven to be errors, than Dr. Samuel Swan. Experience is a better and safer guide than the puny reason of most men, and when combined with knowledge and judgment is the basis of all true science. W. A. YINGLING.

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### A PERTINENT QUESTION.

116 West Walnut Lane, Germantown, Philadelphia.  
Editor MEDICAL ADVANCE.

#### VACCINATION—APPENDICITIS.

GEO. H. CLARK, M. D.

[The above inclusive, suggestive and comprehensive title speaks loudly for itself. Does the clinical observation of the advanced thinkers of the homeopathic school warrant such a deduction? Has preventive medicine and therapeutic and scientific prophylaxis made no greater progress in the last century? Is this the legacy on which the fame of Jenner will rest a century hence? Does vaccination *equal* apendicitis. ED.]

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### NEW PUBLICATIONS.

BÖNNINGHAUSEN'S CHARACTERISTICS AND REPERTORY: A Working Manual of Materia Medica. By C. M. Boger, M. D., Parkersburg, W. Va. 900 pages. Price \$5.00.

"This work is an unabridged compilation of the contents of Bönninghausen's Characteristics, Pocket-Book, Intermittent Fever, Whooping Cough, Domestic Physician, Sides of the Body, Kindred Remedies, Table of Aggravations and Ameliorations, Apsoric and Antipsoric Repertories, arranged in the form of a manual for ready reference. The pathogenesis of every remedy is characteristically epitomized as well as may be, the repertory is very volumi-

nous, covering a large part of the materia medica; seventeen new remedies have been added, including the best proven of the later drugs, no clinical symptoms have been admitted to the new text, and all additions have been properly designated; the complete volume will contain approximately 900 pages."

From an examination of the schema and sample pages of this work we are convinced of its eminent practical value. It will be one of the most helpful ready reference works of Materia Medica and Repertory combined that has ever been devised in the homeopathic school. It will be published by subscription by the author, not as a money making venture, but as a help for himself and every busy doctor to more easily and readily find the similimum. The compilation has cost an immense amount of labor by one of the best prescribers in our school, and we earnestly urge our readers who desire something better and more practical than is now in print to send in their subscriptions at once as the MSS. is about ready for the printer, and the book cannot be had in any other way. The ADVANCE will receive subscriptions.

TRANSACTIONS OF THE AMERICAN INSTITUTE OF HOMEOPATHY. Fifty-eighth Session, Cleveland, Ohio, June 17th to 21st, 1892. Pages 860.

This volume is well printed on good paper, the proof-reading has been well done, few typographical errors are found, a fine portrait of President Wood as a frontispiece, and good portraits of the honored dead, a valuable and thoughtful addition to the report of the necrologist, are also found. The list of members and their states and post office addresses are alphabetically given, making the most convenient register that has ever been given in a volume. And then the surprise of the members to receive such a volume within three months of the close of the session. We knew it could be done in Chicago if anywhere in America, and Secretary Gatchel has demonstrated the ability of an editor to do his work well and do it in record-breaking time. The pace has certainly been set for future officers. Hurrah! for Chicago.

### NEWS NOTES AND ITEMS.

Dr. Lawrence M. Stanton has removed to The Osborne, 205 West 57th Street, New York.

Dr. G. J. Waggoner has removed from Larned, Kansas, to 612 East 13th street, Kansas City, Mo.

Dr. Thos. H. Winslow removes from San Luis Obispo, Cal., to Evanston, Ill., 304 Century Bldg.

Dr. Frank C. Titzel, Surgeon, 6413 Kimbark Ave., announces a consultation hour from 3-4 P. M., at 100 State street.

Dr. S. L. Guild-Leggett has recently removed to her office and residence, 352 West Onondaga street, Syracuse, N. Y.

Dr. Hugh Kenneth Schussler and Miss Georgia Louise Kober were married August 25th, 1902, and are residing in Chicago.

Dr. Harriett S. Taylor, on returning from her tour in Europe, has removed from Springfield to 27 Fifth Ave., La Grange, Ill.

Dr. H. S. Llewellyn, La Grange, Ill., has retired from practice and is succeeded by Dr. Chas. W. Becker, of Lake View, Chicago.

The Chicago Homeopathic Medical College opened its twenty-seventh session on September 16th with a slightly reduced class over last year.

The latest retirement from Chicago Homeopathic College is Dr. Sheldon Leavitt, his retirement being based in part upon legal proceedings against a medical company with which it is stated he is connected.

Mr. Scott Parsons, St. Louis, announces exclusive attention to surgery and gynecology from September 1st. His office and residence number is 3131 Washington Ave., his lamented father's former location.

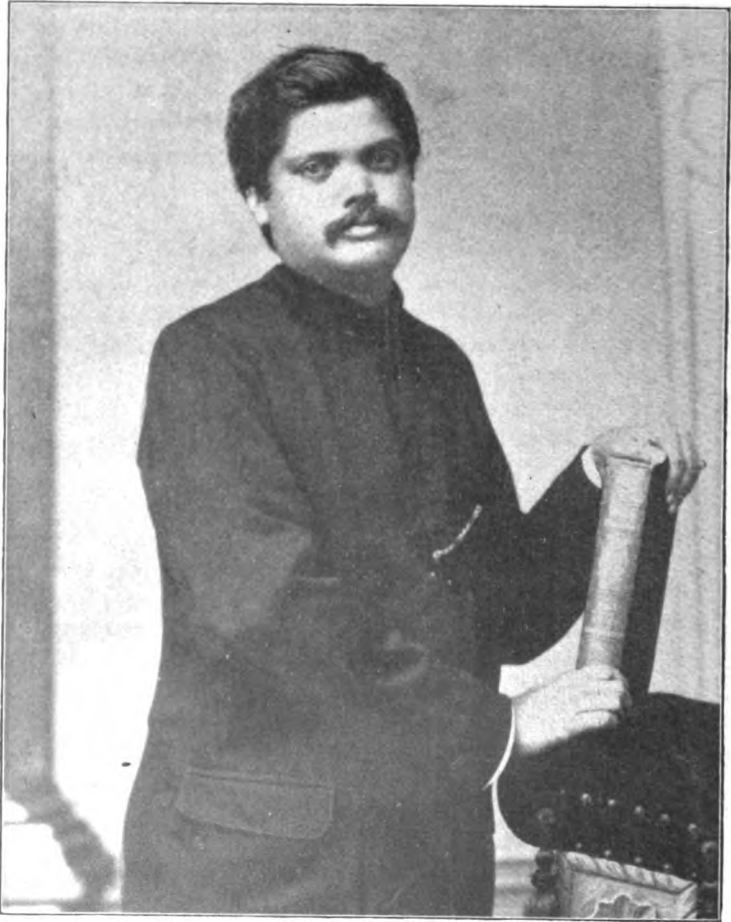
It is said in the *Medical Era* that Dr. Gatchell, for many years connected with the Chicago Homeopathic Medical College, has become a member of the faculty of Hahnemann College, though the report is denied by officials of that institution.

The Southern Homeopathic Medical Association will meet at Louisville, Ky., on the 21st, 22nd and 23rd of this month. Dr. Susan J. Hicks, of Atlanta, Georgia, is president. A large attendance of visiting and local physicians is expected to attend the sessions.

So-called "tonics" are often consumed by our patients secretly, they knowing full well that we would object. Why not advise them to satisfy this craving and yet not interfere with our remedies? Perfection Liquid Food meets this demand and possesses real merit in itself.







P. C. MAJUMDAR, M. D., Calcutta.

# THE MEDICAL ADVANCE

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## THE RELATION BETWEEN SURGERY AND MATERIA MEDICA IN THE TREATMENT OF CHRONIC DISEASES.\*

BY MARK M. THOMPSON, M. D., Chicago.

In presenting this paper the writer will attempt to show the importance of both medicine and surgery in the management of chronic diseases.

The object of the paper is to elicit a candid consideration of the place which each of these great remedial agents should occupy, in the work of the physician and surgeon, as he goes in and out among men and women who suffer from lingering diseases.

To do this intelligently we must look briefly into the nature of the disease, and ask critically what is nature's method of curing disease, and of ridding the system of conditions called pathological, and inquire thoughtfully how medicine and surgery play their respective roles in restoring the sick to health.

### DEFINITIONS:—

*Health* consists in the normal expression of all the functions of the mind and body, under the guidance of a spirit-like energy, called vital force, or our subconscious spirit-like being, which presides over and controls all the involuntary processes of the mind and body.

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\*Read and criticised at International Hahnemannian Association, Chicago, June, 1902.

*Disease* is a disturbance or perturbation of the vital force, caused by an unperceived spirit-like force acting upon it or upon the body in such a manner as to interfere with its control of the functions of the organism. Disease may consist in (1) The inharmonious manifestations of the vital force (caused by psychic or electric influences); (2) It may consist in the presence of an unperceived miasm, which may prevent the proper expression of mental and bodily functions, or (3) The whole organism may become sick because of pathological conditions existing in one or more of the organs of the body.

*Pathological Conditions of Organs* are abnormal conditions produced by disease or injury.

With this homely but explicit statement of the thing with which we have to deal, we may apply ourselves to the task of answering the oft repeated questions: How do medicine and surgery cure disease, and what is the place of each in so great an undertaking?

*Nature's Methods:* Before the thoughtful physician and surgeon assumes the responsibility of standing between health and disease, or between life and death, with human devices of cure, he will seek diligently to know nature's methods of self defense, and he will work in harmony with her, as far as her methods are curative, or he will at least see to it that he does no violence to her benign efforts.

It is the office of the strange God-like principle of which we have spoken, not merely to guide the ship of human health over a pacific sea, but its energies are brought to the fore as soon as the adverse winds or storms of disease beat against the bark which it seeks to steer. This it does by promoting an excess of physiological activity.

The slightest wound or injury elicits an unusual flow of blood to the suffering part, whose office is to control hemorrhage by congesting adjacent capillaries, and to furnish added nutriment to replace the destroyed or injured tissue; as soon as the system feels the irritation of the invading miasm, the respiration and circulation are quickened to unusual activity, so that their offices may be fulfilled in

throwing off the intruding poisons. Nature left to itself will rid itself of a surprisingly large per cent of diseases

That the quickened activity of the vital forces is the greatest remedial agent known to the diseased organism, is the opinion of the writer of this paper. Through its influence all curable functional derangements may be corrected, and many pathological conditions may be cured. Whether this force be brought to bear by some heroic mental process on the part of the patient, or perchance it may be quickened into its normal condition by direct suggestion offered by a skilled operator, or whether it be brought to the rescue by the power of a homeopathic remedy, will matter little; it is still the supreme power behind the throne, upon which the diseased organism depends for its restoration to health.

The degree to which this spirit-like force can be affected for good, by the above mentioned agencies, is to be determined by the onward march of scientific research.

*The Physiological and Remedial Sphere.* The power of the objective mind to intensify the activity of this self-preserving principle, is claiming a wider consideration as the science and art of healing advance apace. So important is that to which it lays claim that no college will long have a right to lay claim to a place in the front ranks of educational institutions until it has a chair well manned and equipped, to teach the laws of psychic phenomena.

This truly professional livery has been stolen from us by the Christian Scientists, Spiritualists, Divine or Faith healers, and every other class of deluded enthusiasts, who believe they have the power to heal in a supernatural way.

*The Sphere of Medicine.* 1. The action of medicine upon the mind.

The most analytical thinker the world has ever known says on this subject: § 212 of the Organon: "The effect upon the state of mind and disposition is the principle feature of all diseases, and it seems to have been especially ordered by the creator of all healing powers. There is not a single potent medical substance that does not possess the

power of altering perceptably the mental condition and mood of a healthy person who voluntarily tests a drug; indeed, each medical substance affects the mind in a different manner."

When the carefully selected homeopathic remedy is exhibited, its power to control the mental processes and through them the activity of the subconscious forces is most potent; hence the value of mental symptoms in the selection of drugs.

2. The direct action of medicine upon the physical organism.

How potentized remedies act directly upon functional derangements, or that they act at all other than in the manner above described, is an unsettled question; but that functional diseases that are curable, yield as by magic to the power of truly homeopathic medicine is attested many times every day in the experience of every true Hahnemannian physician.

That highly potentized drugs have any power to cure serious organic lesions, except as they accomplish that end in the manner above indicated, is open to serious question. Be that as it may, it is still evident to the experienced practitioner that there are many pathological conditions with which we are daily called upon to deal, that are quite unaffected by our medicines, or if they seem to improve for a time they come back to us with added virulence.

3. The doctrine of organopathy and crude physiologically acting drugs.

There is a large class of physicians, who do not belong to this society, who interpret disease from a very different view point. They believe that a single organ or set of organs become abnormal, and that such abnormality constitutes disease, and that the administration of medicine in material doses, that are supposed to act directly upon diseased organs, in such a way that the diagnosed disease will be cured. Upon this subject there are extreme views that I do not need to discuss before this society further than to say, that while we may not believe in the theory of organ-

opathy, we should not be blind to the fact that any organ of the body may become so pathological as by its reflexes to interfere with every function of the body. This statement leads me naturally to the discussion of the second feature of my paper, viz.: "The proper place and function of surgery in the treatment of chronic diseases."

Surgery is indicated in all chronic diseases whose symptoms and lesions linger persistently in spite of all efforts at removal with medicine, from the most delicate derangement of brain-substance, that induces insanity, and the various forms of neurasthenia, to the great variety of morbid changes repeatedly found in the coarser structures of the body. In such cases there will invariably be found more or less irritation in the orifices of the body or elsewhere. In other words, there is one predominating cause for the persistence of most chronic diseases, and that is a nerve waste occasioned by irritation produced by pathological conditions in the orifices of the body or elsewhere. These conditions sympathetically affect the rest of the involuntary functions of the body, steadily draining the nervous forces until the whole struggle terminates in a rigor mortis or tiring out in a hopeless grip, it relaxes into the inertia of paralysis or hopelessly chronic, passive invalidism.

It may be said further that surgery is indicated when the condition of any organ or set of organs interferes with the function of that organ, or when such diseased state of an organ produces irritation that is reflected to other parts of the body or upon the whole organism. Such pathological states do not constitute disease, but they are the results of disease, and these conditions may be so extensive or profound as to seriously interfere with the functions of the whole organism, even though such organism may be under the profoundest influence of the most powerful potencies. The presence of a cicatrix which has formed in the healing of a lacerated cervix may communicate its irritation no further than to the other sexual organs, or the constant "nagging" at the peripheral ends of the delicate nerves that

have become involved in such scar tissue, may spread its irritation over the whole nervous system to such a degree as to interfere with all the mental and bodily processes. The presence of papillæ or redundant tissue in a sensitive rectum may so derange the nerve forces as to drive the unhappy victim to an insane asylum in spite of the good offices of well selected remedies, while in a less sensitive subject the same conditions may exist with no appreciable results. An adherent clitoris may drive an unsuspecting youth to the shame of nymphomania or masturbation, while in others these conditions of the sexual organs might produce no symptoms. What shall be our guide in this class of cases? Ans. "When the well selected remedy fails to cure or to permanently relieve," give them SURGERY.

Before any case can be properly treated it must be properly taken. The symptoms should be carefully noted, and all of the pathological conditions should be critically examined by one who knows the difference between conditions that come fairly under the influence of medicine, and those which can be remedied only by surgical interference.

The surgeon should have a knowledge of medicine that will debar him from the use of the knife, when medicine is capable of curing the case; while the Materia Medica enthusiast should know enough about surgery to save himself from the egregious blunder of spending his time and his patient's money in long and fruitless administration of remedies in cases where the surgeon's knife would remove all sources of irritation and exhaustion, and leave but little for Nature to do but to pursue the peaceful tenor of her way. And both physician and surgeon should have the good sense to know that in many cases a perfect cure can be effected only by the employment of both surgery and medicine. Much well indicated surgery is done by men who have allowed their enthusiasm to so run away with their good judgment, as to believe they can cut away all the symptoms of deep seated disease, whose tap-root sucks its deadly virus from inherited psora, syphilis or sycosis, by removing some offending portion of the patient's anatomy. whose only sin was



that it suffered the results of a constitutional condition, which could be reached only by the deep acting potentized drug. Such surgery may have been well indicated and may have been well done, and the results may have seemed brilliant for a time. The flushing of the capillaries, the relief of nervous tension, the psychic influence of a surgical operation, all conspire to give new hope to the patient and self congratulation to the shorted sighted surgeon, but unless these temporary results are supplimented by a wise administration of well indicated constitutionally acting remedies, in most chronic cases in which surgery is indicated, our work will be unsatisfactory to our patients and to ourselves.

CASE I. I beg to submit the history of a few cases taken from my note book, to illustrate the subject.

Mrs. D., age 45, married, bore one child, has been a divorced widow 22 years; family history good. When this patient was 20 years old she suffered from great physical and mental strain, that wrecked the finer sensibilities of her nature and put the whole nervous system upon a tension that made life distressing. An unfortunate marriage two years after dethroned all her lofty ideals of the marital relation, and precipitated the dregs of a wrecked life in a cup of bitterness such as is too often pressed to the lips of modern womanhood.

The recital in this brief paragraph tells the sad story of so many lives, that we are forced to believe that nerve exhaustion lays the decaying corner stones of more chronic invalidism, premature decay and death than all miasms, contagions, injuries and inherited tendency to disease.

I was called to see this patient the first of last November, found her helplessly crippled with rheumatism from which she had suffered for three years. The joints were badly swollen and stiffened with indurated deposits. The case had been abandoned as hopeless by some of Chicago's noted physicians. This patient was removed to the West Chicago Sanitarium on November 1st, 1901, where a most careful analysis of her symptoms was made, and carefully selected remedies were given until Feb. 1st, 1902, with no

improvement, then surgical interference was accepted. Examination showed that a cicatrix no larger than a common grain of corn had formed in the cervix in the healing of a slight laceration twenty-three years ago. This was so hyperesthetic that when touched by the digital finger it caused great pain.

In the rectum was found six sharp indurated papillæ and a small mass of redundant tissue. The cicatrix was dissected out, the wound stitched with cat gut. The lesions in the rectum were removed and the sphincters thoroughly dilated, and the patient put to bed for two weeks.

One hour after the patient was taken from the operating table I visited her in her room, where she told me she felt that she had been released from bands of steel that had held her fast for twenty-five years. In two weeks she was walking about the sanitarium and in four weeks her joints were reduced to normal size, and she was so far recovered from her lameness, under the same remedies she took before the operation, that she took charge of the home of her two sisters (artists) with whom she was living.

CASE II. Mr. H., Hartford, Wis., age 43, bachelor, family history good. Five years ago he slipped on a wagon wheel and fell astride; the tire bruising the left testicle. No inconvenience was experienced at the time, but some months after the organ began to swell, soon becoming as large and as hard as a man's fist. So little local inconvenience was experienced that his family physician advised him not to interfere with the growth. Not many months later pains in the stomach and gallstone colic developed. The attacks of colic were followed by a jaundiced condition of the skin and eyes, and much debility and melancholy were present. One year of medical treatment by his home doctors left the last condition of the patient worse than the first. This patient entered our sanitarium, April, 2nd, and on the 14th, I removed a cyst as large as a goose egg, that was attached to the epididymis and to the whole length of the cord and the accompanying vessels. The sack of fluid was removed without rupturing it. The wound

was saturated and dressed aseptically. In three or four days an ichorous pus had appeared, emitting a putrid odor and the testicle was badly swollen. Upon my moving around in the surgical ward that day, I asked the head nurse about the condition of Mr. H., and she told me she had bathed him with hot water and soap in abundance. She had rubbed him with alcohol; had changed linen and his bedding; had aired his room and used strong disinfectants, and yet he offended. One dose of Sulphur *lm.* was given. The next day when I entered his room I was met with a hopeful smile; a clear countenance and the fragrance of pure air, and my patient's inquiry as to when he could go home. Under this all purifying antipsoric, such a rapid recovery was made that in a few weeks he went home.

CASE III, was one of gunshot wounds in my neighbor, the much advertised Board of Trade broker, Mr. Hill whose private sleeping room was entered at 1 o'clock in the night of May, 25th, by three burglars. He was shot three times. The first bullet entered the scalp above the right ear, and made its exit two inches below. The second passed through the left wrist transversely entering above the end of the ulna and coming out below the head of the radius; the third entered the upper lip close under the left nostril, tearing its way into the Antrum of Highmore, making its exit in the soft palate, and bruising all of the structures of the mouth and throat in a merciless manner. The shock to my patient was so profound that there was much doubt about a favorable reaction for several hours.

The lips were blanched, a deadly pallor overspread the face, the skin was cold and clammy, drops of cold perspiration appeared upon the forehead, a dull leaden hue overspread the face, the extremities were cold, the nose was pinched, the eyes were glazed and turned in their sockets with drooping lids. The pulse was fluttering and tremulous, and the heart was feeble and irregular in its action. There was extreme restlessness and thirst. This appalling condition yielded to the power of Arsenicum in a strong potency.

The wounds were dressed aseptically and the patient protected from all mental excitement. In six days all the wounds were healed, without a degree of fever or a drop of pus. On the seventh day at the location of each wound there appeared evidences of irritation with extreme tenderness, and the patient showed much exhaustion and mental depression, was over anxious about himself, felt as if he would die. One dose of Silicea, cm. was given. The next day each of these wounds discharged a few drops of bloody serum mixed with burned powder, after which they closed up with no further symptoms.

In each of these three cases, there is a lesson of value for the physician and the surgeon.

In the first case; let us honestly ask why Nux vomica did not sweeten the bitter cup, which Mrs. D., had been draining to its very dregs for twenty-five years? Only because the organic lesions above described so prostrated the nervous forces that nature had no power to respond to the helpful offices of that mighty drug. But when these had been removed, the same drug that had been powerless for good in a long and persistent struggle, now won a most brilliant victory.

In the second case, why did not this fine piece of surgical dissecting, which removed all irritation from my patient's testicle, restore Mr. H's. nerve forces to a perfect equilibrium, and through its kind functions bring back the digestive and secretory organs to perfect health? Surgery standing alone in such cases is like the helpless bird that seeks to soar aloft when one wing is broken; it can never *complete* such a cure until it has been supplemented by its truest helpmate, which alone can reach to the very depth of our being and antidote that psoric principle, whose deadly virus feeds most chronic diseases.

In the third case, the aseptic surgery that guided Mr. Hill's gunshot wounds to healing in six days could never have been accomplished without fever or pus, if his nerve forces, which had been so profoundly shocked, had not been calmed and strengthened by a well selected remedy.

This ought ye to do and not to leave the other undone.

DISCUSSION.—J. A. Tomhagen, M. D.—To my mind there is no such thing as a surgical disease. I think that I followed the doctor's paper closely and in it he led up from the functional affection to the organic change in the tissues and then by removing this concrete result of the trouble by means of the knife he thinks the whole disease may be removed. It seems to me that disease proper is something that cannot be appreciated by the senses except in its results and that by removing the organic results of disease, we do not at all remove the disease itself. In rare instances it may be feasible to do so but it is not the rule by any means.

Four or five years ago a young married woman, who had been flowing for years, was operated upon in this city, with hopes of relief. The trouble was diagnosticated to be ovarian in its seat. She was then sent south for the benefit of climate. There she fell into the hands of a homeopathic physician, who prescribed Medorrhinum for her and advised her to call on me on her return. I re-examined her and concluded to let her alone, as she was improving on the Medorrhinum. After this there were some symptoms that led to the fear that the other ovary—the only one that she had left—was becoming affected in the same manner. However she felt better in her general health and the Medorrhinum was left to do its work. In three months she came to my office, and I found her in a much better condition in general but she said she was sure that there was a tumor of some kind in the vagina. I examined her and sure enough, I found a large polypus, extruded from the tissues, like one of those electric bulbs. She was greatly exercised about it and was inclined to have it cut out at once. My advice was to let it alone. but she insisted on its removal. I rather expected that some symptoms would return, but none ever returned, at least none of a syctic nature. I explain that unusual result, by the probable fact, that that polypus was the final expression of the internal trouble, all brought out by the remedy, so that its mechanical removal

was not prejudicial to the health of the patient. In a case like that it is all right to operate, but only because it is quicker; it was ready to drop off anyhow. I could not make her understand that it was the last line of the volume, and as the knowledge that it was there, reacted badly upon her mind it was all right to have it removed.

The first operation was premature, and was a failure and that is the case in a vast majority of operations. It removed a syctic ovary, leaving the system full of the taint and of course it was an egregious, an ignominious failure. The second operation occurred after the syctic trouble had been all got to a point, so to speak, by a proper remedy. Hence it was a success. That is the only kind of surgery I believe in.

A man who had been probed and probed for some real or imaginary urethral trouble for four years off and on, came to me, as a last resort, I suppose. I found that his remedy was *Natrum muriaticum* and gave it to him. The result was that after a few months he walked into my office well, and announced with delight, that his wife was in the family way. The *Natrum* had done more for him in a few months, than four years of bad surgery. When the knife is necessary, it is the result of disease that it treats and not the disease itself. It is one of the necessities of a good surgeon that he should be able to distinguish between the true disease and the outward results thereof.

A. Donald, M. D.—I am much pleased with this paper; it is my ideal of the method of carrying on surgery without conflicting with the laws of Homeopathy; if we had more surgeons built on the lines laid down in this paper, thousands of people in the world, now mangled by the knife of the surgeon, would be sound in body and limb, without the use of the knife but by the action of the correct remedy.

In the first place, when we can discover a mechanical cause for the condition, it is the field of surgery to remove it. The cause once removed, the efforts of nature, aided by the homeopathic remedy, come in and recovery takes place. Select your remedies carefully; make your diagnosis care-

fully and you will cure the most difficult cases, for I believe that cleanliness, asepsis, and your well selected remedy will do all that can be done. It is an excellent paper and I only wish that our surgeons would carry out some of the ideas that are expressed in it.

W. H. Leonard, M. D.—I find the paper interesting in many respects; one point is the suggestion for the establishment of a chair of Psychology in our colleges, in order to interest and instruct our graduates in psychic phenomena. It would be an excellent move for our colleges and would put them ahead of their allopathic competitors. To me it seems an immensely important subject. We are teachers and practitioners of law, let us study the law in its full scope and meaning. It is our privilege to find out and to know all that we can and we should make good use of our opportunities in order to succeed. The paper was of great importance, and should be suggestive to members of a society like this.

We want to get rid of the knife as much as possible, but we must have it when necessary. We all believe that the best cures are made without its use but we all confess that it is occasionally necessary.

G. L. Barber, M. D.—Notwithstanding the excellence of the surgeons, it sometimes happens that the physician is called in to help them out of a tight place. The surgeons cannot always find the cause of the trouble. I recently treated a case that illustrates this point. One of my patients on the West Side asked me to look after his father. I found that three years before his leg had been cut off by one of the leading surgeons of our city. Since that time, there had been a continuous discharge of pus from the flap of the wound. For three years, the pus had flowed and nothing that they could do had been able to stop it. The various surgeons called in consultation could not find out the cause of this chronic flow. I made a careful examination of the case and finally told him that I would undertake the treatment of his case for sixty or ninety days. The symptoms called for Psorinum. I gave him one dose of

the 45m. Three weeks later he came to my office and said that he had removed twenty inches of surgeon's gauze from the wound. I gave him a second dose of the same remedy. A little later he came down and told me that twenty inches more had been removed. I repeated the dose but was unable to get any more gauze but I did succeed very shortly in stopping the discharge. The surgeons had all failed to find the cause of the trouble.

J. W. Krichbaum, M. D.—I want to take exception to that chair of Psychology. What we need much more than a chair of Psychology is real downright common horse-sense. The students would get just a smattering of that abstruse subject, that would do them more harm than good. I, for one, do not like this far fetched stuff in a homeopathic society about something that the wisest know nothing about. We have also heard discourse on warts that seems to me rather trivial. The warts, the mental influence, and all that rot will keep until another time. Let us teach our students how to treat their cases of pneumonia and of typhoid fever; it will be far better. I hope sincerely that that idea of Psychology will keep far away from our colleges.

There is knowledge of infinitely greater importance, that our students are turned out of college with very little of, and I am sure that what we need is not a new branch poorly taught but the important standard branches better taught. Such knowledge begets real confidence in the doctor's mind and that is better than any of the artificial and spurious devices of Psychology. (Applause.)

C. M. Boger, M. D.—Of late years there has been a large movement towards nature and natural things. One important expression of this movement is Father Kneipp's cure; there have been other expressions but this has been the most important one, as far as we as physicians are concerned. It is a most beneficial thing—this harking back to nature—there is nothing that the worn and weary business and society people of today need more than that; it is the most important help, aside from Homeopathy, that a physician can have and it works perfectly in conjunction with



Homeopathy. We have been leading artificial lives in every sense of the word and it has strained our nerves and ruined our health; let us go back a hundred years and see how our forefathers lived in Germany and France and England, in thatched cottages, walking or running barefooted, eating plain hearty food and dressed in loose clothes of bearskin. Of course we cannot transform our nature in a short time, after years of artificial living, but it is a great help to make a move in that direction. You will find, if you take the trouble to look it up, that your best cures are made in country people who are living nearer to nature than their city relations. All our chronic cases should have plenty of oxygen and outdoor exercise.

H. C. Allen, M. D.—All this is very fine, but it is difficult to get teachers in a college who can and will teach all these various branches and the old standard ones as well. Dr. Leonard and Dr. Thompson want us to institute a new chair, Psychology; Dr. Krichbaum wants more attention paid to the old studies and Dr. Boger wants to teach a return to nature's laws. The great trouble is to get good teachers. As far as this bare feet business goes, our Chicago ladies have too small feet for it; they would not do it. I am proud of Dr. Thompson's paper because it embodies the principles on which surgery is taught in the Hering college. Many of these so called new studies are included in a broad view of Homeopathy and were taught by Hahnemann one hundred years ago. He taught the value of mental therapeutics and hypnotism under the name mesmerism. If we can get a man to teach Psychology without teaching theology, Christian Science or any other fad we will seize upon him. As for surgery, it will always be with us; the allopaths are making surgical cases for us all the time.

Mark M. Thompson, M. D.—The time for the discussion of this paper is necessarily somewhat limited, in order to give a fair chance to the papers that are to follow it. Otherwise I would like to say something to the criticisms that have been offered. It has been so kind that it has not raised the Scotch in me to any considerable extent; but per-

haps I may refer to one or two points. Dr. Krichbaum, of Kentucky, said that he did not believe in establishing a chair of Psychology. Now I do not think that he should give a dose of Nux vomica unless he knows all about its action, because it is a powerful remedy; no more should he use suggestion, as he says everybody does, without understanding about it, and it can be best understood by taking a course in it. It, like Nux vomica, is a powerful remedy. Those who do not know how to use suggestion had better far let it alone, for harm may be done with it as well as good. No man should attempt to practice medicine and administer remedies until he understands something about the power of suggestion. To study, to know and to master the laws of psychic phenomena is to understand and to master one's self and to bring the influence of a healthy aggressive personality into the sphere of the sick and discouraged. It is to know how to impart new health and energy to others who need it; in order to do this successfully we need to know more about those great laws that regulate our spiritual being. Why not then have a chair in our colleges where these things may be learned. Until we have teachers who are broad enough to teach it, without bringing in any of their own fads and fancies, we must be content to allow our students to grope in ignorance.

The administration of this great curative agent is a part of our business to learn. Something has been said about our being Christian Scientists, spiritualists and so on. Now, ladies and gentlemen, it is to our shame that we have allowed these deluded, misguided enthusiasts to steal the livery that belongs to us by right. It is neither Christian nor scientific, it is simply the use of a great curative agent known to us under the name of suggestion. You will find great churches in this and other cities, and large religious congregations of enthusiasts devoted to this so-called fad, filled with people who are ready to testify concerning the wonderful things that it has done for them. And these wonders are true; you cannot successfully dispute them. They are as genuine and wonderful as your own cures with

the high potencies or with surgery. We must find out the law and use it when indicated, just as we use our potentized remedies when they are indicated. What we need as doctors is intelligent teaching concerning the principles of the art.

Such teaching would save our graduates from the delusions that are so prominent in these modern times.

One of the misfortunes of my paper was that it is so close to lunch time. I am sure that my learned friend must have eaten a large lunch or he would have recognized that the point that I made was that the organic lesion was not the disease, as he says, but only the outcome of the disease. In that we agree perfectly. The case of the polypus cited by Dr. Tomhagen, fairly illustrates the principle that I was aiming to bring out. God bless *Natrum muriaticum* that brings a baby where there has been none for four years.

E. A. Taylor, M. D.—As I listened to this paper of Dr. Thompson, much that was said made me think that we are being drawn into a vortex of unsound, fanciful theories that are being grafted upon the face of Homeopathy to the detriment of that great science. I thought that this was a medical society, composed of the best homeopathic physicians in the country. I regret very much that such ideas should be expressed here where we expect to find the best there is in Homeopathy. Do not our old school friends study and make use of suggestive therapeutics? What is it that gives us better success than their's or other systems? Is it our suggestion or is it the remedies we use, according to law? I hope that the day is far off when such stuff as has been talked here this afternoon will be taught in our colleges.

C. E. Fisher, M. D.—Disease means ill at ease or suffering. When a dyscrasia is coming to a focus, in the shape of an abscess or a tumor, these phenomena are no more the disease than the fruit is the tree. But all the same they are the phenomena, that attract our attention and upon which we, to a large extent, base our prescription and diagnosis. The polypus spoken of by Dr. Tomhagen, had a

chance to get out into the world because it happened to present itself in a pocket that opened externally; it would have dropped off in time; perhaps it was as well to take it off in time, too. Suppose that polypus had been inside the pelvis, instead of in the anatomical pocket, it could not have been sloughed off so easily. Nature could not have gotten rid of it unaided. That would have been a different case entirely, as you all can readily see.

Now in this jar I have a human ovary, from one of the opposite sex however, one that I removed from a man; it is nothing, practically, but a bag of water, functionless. It may not have been the disease, but certainly the man was ill at ease on account of it. He could not go to a hospital with a window in the room, because he was afraid that he would throw himself out of it. He was in terror when he passed a high place because of the tendency that he felt, to throw himself to his death. He was a homeopathic physician and had had the benefit of some of the best prescribing. The other testicle that I have here is absolutely degenerated and would soon have become malignant. It could not have sloughed off for its sack opened upwards and not downwards. To my mind it is just as proper to pluck or pick off a rotten apple as it is to let it rot off. If an organ like this gets into a human body it has no business there and should be taken out. This man had the best treatment that a Hahnemannian homeopath could give him.

Surgery has its legitimate place alongside of and with Homeopathy. This is the first time that I ever attended a meeting of this society. I have been to many meetings of the American Institute of Homeopathy, and I believe that what this society possesses should be taken to the other society at Boston. I am not convinced that the administration of Medorrhinum to a patient, simply because he has a history of sycosis, is in accordance with the doctrines of true Homeopathy or with the principles of Hahnemann and I wish that nobody in the world believed it. I do believe in true Homeopathy as it is taught and practiced by this so-

ciety and I could not get along without it, in my surgical practice.

J. A. Tomhagen, M. D.—I would like to ask Dr. Fisher what became of the ovary that was left in my case?

C. E. Fisher, M. D.—Many diseases of the ovary are curable by remedies alone. I presume that in the patient spoken of the disease was of that curable nature, or it would not have been cured. The lumen of the Fallopian tube is large and readily admits infection: if the gonorrhoeal infection gets in there, it inflames and increases the tube until it is the size of the wrist, making a severe tension and is liable to burst, causing immediate death by hemorrhage. I should say that the wisdom of taking it out quickly is apparent to all who understand the situation.

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### KALI IODIDUM.

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BY E. A. TAYLOR, M. D., Chicago, Ill.

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In 1896 a man came into my office to get something for rheumatism. He was a German, 52 years of age, a tailor by occupation, and gave the following history: Seven years previous he had moved into a country town, and as it was raining at the time he became wet, the bedclothes also became somewhat wet, and he slept in a damp bed that night. Soon after he had severe pains in the left leg, from hip down to knee and into the calf, and accompanying this an eruption of a vesicular character appeared upon the body.

His pain was worse in damp weather, worse at night and better from continued motion; he would get up at night and walk the floor to get relief. Frequently the pain would be sharp and catching on first attempting to move, but would improve on continued motion. I assured him that I would cure him and prescribed Rhus tox: 30th. To my surprise, he returned to report no improvement; I gave him higher and lower potencies only to meet with the same result—failure. He became discouraged and I saw him no

more for about a year, when I chanced to be near him and called to inquire how he was. He replied that he was entirely well and had been so for some months.

An old woman had told him of some medicine which he had procured in a drug store, and after three days' use of it, the rheumatism had disappeared. I have seen him occasionally since, and called on him this week and he has continued well. At rare intervals he feels a slight reminder of the old trouble, which promptly disappears on taking a few doses of the old woman's remedy. The pains were of a grinding, squeezing character, worse on beginning to move, better on continued motion, worse at night, worse in damp weather; neither heat nor cold noticeably affected them. They were in the left leg only; "seemed to be only in the bone" and he was afraid if any one approached him, afraid they might touch his leg, it was so sore. The remedy was Potassium iodide, taken in a dose of six grains three times a day. I advised him to take it only until he noticed improvement and then to wait until the symptoms returned. He has done this and now informs me that it has been necessary to repeat the remedy only a few times.

A similar case is reported by Dr. J. B. S. King; "In the early part of June, 1896, I received a letter from Mr. W. S., aged fifty, of Harrison, Ill., containing the following history. During the past winter the patient had noticed a gradually increasing stiffness of the jaw in chewing; it seemed to be centered in the right articulation of the jaw, no pain. About May, 1896, it had increased so that he could just get his forefinger between his teeth, and he noticed a hard lump or tumor just in front of the ear. Two weeks later only a lead pencil could be inserted between the teeth. About the first of June he consulted a local physician who took him to Rockford, Ill., for council; by this time the jaw was nearly tightly clenched. He could only suck liquid food between his teeth. The tumor was steadily growing; shooting pains began to radiate from it to the cheek and nose. An area of numbness and insensibility appeared in lip and chin on the same side as tumor. In all,

three doctors and five dentists examined him that day. The unanimous diagnosis was osteo-sarcoma, with advice not to delay a moment, but to go immediately to Chicago to a surgeon and to have it removed. He was poor and could not go, so he sat down in despair and wrote to me.

I thought of Aurum, Hecla lava, and other remedies. Remembering that I had treated him for a chancre about ten years previous at the skin and venereal clinic of the Hahnemann college, I decided that it was more probably syphilitic, and wrapped up about one-half ounce of Potassium iodide crude and sent it to him with instructions to dissolve it in one half pint of water, and take a teaspoonful after each meal and at bedtime, the dose to be gradually increased to two teaspoonfuls.

Result: July 8th all signs of the disease had disappeared; no tumor, no stiffness, no numbness, and he could open his mouth as wide as ever."

The following case also reported by Dr. King. "Mrs. L., aged 40, a very pronounced brunette, called in 1896, complaining of pains in the eyes and face. Eyes felt as if the lids were squeezed tightly together when they are simply shut. Left nostril stopped up, many sharp pains in the malar bone, especially the left. Aurum 200th. Week later case much worse, face swollen, nose presents a swollen almost deformed appearance like that of chronic nasal catarrh; swollen under the eyes; pain continues and increases. Urine examined but nothing abnormal found. A few days later a left incisor became loose and dropped out. A day later the left canine followed the same course; both teeth were perfectly sound. Nose absolutely occluded on the left side and externally decidedly deformed. Eyes much swollen, pieces of bone and curded pus came from the cavity formerly occupied by the teeth.

Soon a dark, tough, smooth body could be seen just within the left nostril. Took the woman to a nose and throat specialist, who was much puzzled, but finally pronounced it malignant. It seemed to me to grow much too rapidly for a malignant tumor. The woman's face was now

so deformed that she was scarcely recognizable. All the pains and symptoms were worse. The various remedies prescribed had had but the slightest effect and as a last resort I gave Potassium iodide in small doses of the crude drug, about one grain.

The result was a miracle; in an incredibly short time the growth wrinkled and diminished into nothing, the discharge ceased, the pain disappeared. The patient was transformed from one whose destruction seemed imminent to a well person. She stayed well until about a year had passed, and then she had a convulsive attack. Unconscious, rigid muscles, no fever, on recovering consciousness she had aphasia. Again prescribed Potassium iodide, and in ten days she was at work. The remedy was stopped after the apparent recovery. A month later delusion of the special senses, hears music, babies crying; Potassium iodide again and recovery in a few days. Eight weeks later she had complete aphasia again lasting three days, sensation as if the right leg was made of wood, right arm numb, the Potassium iodide was again repeated and the symptoms again disappeared. After this experience the medicine was continued for a long time and there has been no recurrence of the symptoms for four years." These cures and others that I could relate, caused me to believe that here was a very useful but much neglected remedy. Dunham does not mention it. Hoyne's Clinical Therapeutics says nothing concerning it. Farrington speaks of it only in a fragmentary way. Turning to that masterly production by our vice president "Leaders in Homeopathic Therapeutics" by Nash, I find the key to the situation. With that commendable frankness and candor which characterizes all his writings and makes his works so trustworthy and valuable, he says of Kali hydriodicum: "This is one of the drugs so greatly abused by the old school, that I confess to not having prescribed it much. In the first place from my prejudice against it, and in the second because it never had so thorough a proving as has Kali carb." Again he says of it: "I think that it can be used lower than most drugs, without



injury, and yet I believe that we do not know half its remedial powers, as developed by our process of potentiation."

Hering gives: 'Darting in left hip at every step, forcing him to limp; gnawing, aching, tearing pains in the lower limbs; motion at first painful, is after a moment more bearable. Pain worse at night, not able to remain in bed, must change position often. Chronic periosteal rheumatism of syphilitic or mercurial origin. Intolerable nocturnal bone pains, driving the patient to despair. Bony tumors, interstitial distention of bone, pains worse at night. Distends all tissues by interstitial exostoses. Swelling of bone, etc.'

DISCUSSION.—H. Farrington, M. D.—There is no doubt but that Kali iodidum has a wonderful sphere of usefulness in syphilitic cases. It is one of the three great remedies that unite in antidoting Mercury and syphilis; Nitric acid and Hepar sulph. being the other two. In prescribing it, it is not necessary to know that the disease is syphilitic, if the symptoms are correctly and carefully taken. In the first case Rhus tox. was given on account of the history of a wetting, a vesicular eruption and rheumatic pains worse at night and ameliorated by motion. It seems probable that if the modalities as to heat and cold had been more carefully taken, that the Rhus would have been eliminated and the Kali iod. prescribed. The latter remedy is exactly the opposite of Rhus, in regard to the effects of heat and cold; Rhus is chilly and ameliorated by warmth, Kali iodide is intolerant of warmth or of a warm room, and is ameliorated by continued motion. The Iodine in the combination seems to predominate in that respect.

J. H. Allen, M. D.—My experience with Kali iodide is that the pains are worse by heat; the pains are boring, digging and tearing; they seem to be in the bones, they begin about four in the afternoon and increase until midnight. Sometimes they begin at the approach of dark and get better at day-light like true syphilis. Such patients dread the dark and dread the night and look forward to the morning

light. Generally they are worse by cold but the Kali iodide patient is worse by heat.

Rhus does not have bone pains. the pains of Rhus are in the tendons and sheaths of muscles and in the neurilemma; the Rhus patient is restless with the pains, the Kali iodide patient does not become restless until the pain rises to a very severe pitch. I have seen these pains so severe that the patient became unconscious.

W. H. Leonard, M. D.—I just want to say one word about the attenuation. In 1896 I had a bad case of inflammation of the eye, that I took to an eye and ear specialist for advice. He pronounced the trouble to be syphilitic and said that it could not be cured without Kali iodide in big doses of the crude material. I decided, however, that I would give the sixth one in two hours. It was remarkable how quickly the pains left him and in about a week he was well. It seems to me, that the attenuation is quite as good or better than the crude drug.

Jean I. Mackay-Glidden, M. D.—When I was in London, I visited the eye and ear hospital there and talked with Dr. Cooper. He spoke of the great usefulness of this remedy; he had used it a great many times with success in tumors of the liver and kidneys; cases that had been pronounced incurable. A symptom for it that he placed great stress on was sensitiveness to pressure and to jarring, but not quite like Belladonna. He gave it always in the crude form but never more than a single dose. He allowed that dose to act a long time, until it had exhausted itself.

H. C. Allen, M. D.—The large majority of the symptoms of this remedy that we have are toxic, and that may explain why we are inclined to give it in the crude form rather more than other remedies.

E. A. Taylor, M. D.—I wrote this paper, not with any desire of advocating the use of a crude drug, but only to call attention to an important and much neglected remedy. It happened that the cases accessible to me, were cured with the crude drug, but they were so striking, that I have cited them, as instances of its power. Much of its pathogenesis

is clinical, and it is much to be desired that we have a good proving of it in the potentized form. One of the difficulties in prescribing it or indeed any remedy, is that you cannot always get a satisfactory account of the modalities. The first time that I saw the patient, I asked him about the effect of cold and heat upon his pains but could get no satisfactory points about them. He said that neither as far as he knew, had any effect upon them. I did not have this modality in this case to rule out the Rhus. In regard to bone pains, Rhus has a sensation at least, as if the bones were scraped. That is getting pretty close to the bone, I think. I also believe with Dr. Leonard that the potentized drug will be better than the crude form, but that will be only when we have a good proving of it. At present, with our ignorance of the drug, cases go from us to be cured by some old woman.

A. P. Hanchett, M. D.—I have used Kali iod for a good many years, and in a good many cases and in this experience I have used almost all the potencies. In numerous cases I have been compelled to use the crude drug, owing to lack of effect of the potencies. I have used it, in that way with complete satisfaction. In syphilitic cases, I have never, or at least very seldom, got any result from the potencies, and more especially from the higher ones. The results that I obtained were permanent and there were no evil effects that I could discover.

H. Farrington, M. D.—I am well aware that sometimes the pains of this remedy are ameliorated by heat, but I referred to the general feelings of the patient in regard to heat and cold; although he or she is chilly, there is intolerance of a warm room or of heat. It seems to me that the neglect of certain unusual remedies, spoken of, is due to the tendency to prescribe according to the name or diagnosis of the disease instead of upon a careful comparison of the case with various remedies by the use of repertories. Any case may lead us to an unusual remedy upon such a study, while according to the diagnosis we would stick to the routine remedies.

Jean I. Mackey-Glidden, M. D.—Dr. Cooper, of whom I spoke, almost always gives a single dose of a single remedy, whether in the mother tincture or potency, and he certainly gets excellent results in his specialty, which is not an easy one. I do not think as the last speaker has said, that the neglect of this and some other remedies comes from the lack of repertory study, for you would never come across Kali iodide in the repertory for the reason that it is not there. That is the main reason, in my opinion, why it has been neglected.

What this remedy requires, in fact almost demands, is a thorough proving with the potencies so that the finer shades of symptoms will be developed.

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### IN PRAISE OF PLATINA.

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BY ALICE B. CAMPBELL, M. D., Brooklyn, N. Y.

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The subject for presentation may be "carrying coals to Newcastle;" if so you will at least have the satisfaction of hearing your own experience confirmed and Homeopathy extolled.

In the plenitude of our materia medica, we are sometimes inclined to think that an "embarrassment of riches" is what staggers the homeopathic prescriber and makes his task a laborious one indeed. With hundreds of proven drugs, each very comprehensive in its fulness and extensive in its action, it at first appears that they all would have some relation to any sick case that could be produced. This but proves the legitimacy of drug treatment, and the close kinship between man, plant and soil.

But such a fancy is soon dispelled, and in the exercise of our high function we are obliged to pay tribute to that individuality which distinguishes all things in nature, by finding one drug whose disturbing power comes nearest to meeting the specific demands of the case in hand.

As the importance of a case is measured by the mental inharmony present, so the importance of a drug is measured by its control over that department of our being. Hahnemann gave the cue to the most direct path for finding the drug most like, when teaching that mental symptoms take precedence of all others; all others being subservient to these.

It takes some a long time to incorporate this idea, and to make it their rule of action in the study of the sick and their cure. If this simple though subtle principle had been earlier applied, the thoughts in this paper would be presented with less of a Rip Van Winkle aroma. While better never late, yet "better late than never;" and so I bring this tardy revelation to lay as a trophy at the feet of the genius presiding over the mission of Platina.

Platina reigns supreme over the sexual system, dominating the emotions and distorting the imagination even to within the realm of insanity. Platina fancies are so real as to often mislead the doctor, and unless sexual hyperesthesia is soon discerned, he will be led in a dance upon a kaleidoscopic condition, that will be more complimentary to his endurance than to his skill. Platina may not be capable of causing tissue change, but through excessive nerve irritation the patient is driven close to the danger line. This drug is none the less valuable because less deadly in its nature, nor is its action less profound for being less destructive to organic matter. Any one who has known it to break up the abortion habit, check exhausting menorrhagia, remove distressing rectal pressure, diminish ovarian cyst, allay pruritus vulvæ, regulate the menses, cure ovaritis, dispel hallucinations and overcome spasm; can have only admiration and gratitude for its abundant power.

Peculiar anxiety and fear characterize Platina cases. Danger is always close at hand—not in the future. This is the red thread, on which are strung all its varied and prolific expressions. Only by noting this ever more or less present feature, can Platina cases be successfully met. The quality of fear is extravagant and demonstrative, unsub-

missive and peremptory. With such an exalted state of the nerves, there can be no appeal to reason; any attempt to impress the intellect fails utterly. Egoism belittles and excludes all events outside of self-consciousness. Extreme cases are submerged in self-ness, and can scarcely be diverted from their absorbing theme.

The single drug that can do so much with a class of patients, who are most trying, and with disturbances that are always tedious, is certainly not superficial in its control over that department of our being, whose exquisite sensitiveness underlies the majority of all ailments.

I chased after a train of symptoms and vagaries in the case of Miss R. for many months before deliverance came—to both doctor and patient—through Platina, and the door which led to relief was the corollary: alternation between physical and mental symptoms. When this patient hadn't cough, indigestion, constipation, sick stomach, pain in hypochondria, flatulence, sore front teeth, cracked finger tips, palpitation, sleeplessness, or spasm of throat, she had fear of being alone; "sure she had Bright's Disease, because her mother died with it;" regret for the past; "knew her gums were shrinking, and would lose her teeth; there must be cancer of the stomach, or she will surely choke to death with her throat." She was continually pluming herself on her respectable origin and connections, though full of criticism for their treatment of her. For the last ten years this patient has been easy to handle, and her now infrequent calls are no tax on my cerebral phosphorus.

Mrs. C. came from the hands of many physicians abroad, where she had been subjected to the routine of prominent gynecologists who left her worse than they found her. This was previous to adopting Homeopathy. Dr. Skinner, of London, and Dr. Hermann, of Paris, also Dr. Thompson, of New York, did much to counteract the abuses which the lady had survived, and to modify her condition. Enough, however, remained to be done to more than satisfy any one following their lead. There was lack of physical endurance, with exhaustion from alarming men-

orrhagia attending too frequent and protracted menses, nervous excitability, sleeplessness, and attacks of diarrhæa. A large wart on abdomen suggests cancerous tendency. Dr. Hermann, also has said as much. Within the last year and a half, a right ovarian cyst has developed  $2\frac{1}{2}$  inches in diameter, and she has been getting anæmic. Today the whole situation is decidedly improved, the menses are nearer regular as to time, not so profuse nor long lasting; physical and mental endurance much greater, with better self possession. The cyst also, has greatly diminished. For an oft recurring clutching at the umbilicus, that would waken from sleep and cause nervous depression. I gave Platina, which included in its effects not only the special tormenting symptom for which it was given, but the whole pelvic and reflected conditions, and brought the case to where Murex will have a chance to complete the cure.

Mrs. S., lecturer; 45 years old. Menses have always been too often, too profuse and too protracted. The period, before getting Platina, had already lasted 24 days, then stopped four days and began again. There was pressure on the rectum, severe pain in right ovarian region and in back. Sleepless, restless and easily angered; no appetite, too weak to sit up; full of complaints; fears she cannot fulfil her engagements. An immediate impression was made by Platina, and in a week's time the lady went off for a month's trip, during which time she took but one dry powder.

Miss G. B., recovering from intermittent fever; convalescence slow, being interrupted by many nervous sensations that interfered with complete recovery. Pruritis vulvæ, sensual dreams, inordinate hunger, disgust for people wanting to be alone, dejected: thinks she must give up her business position. Daily periodical attacks of weakness Platina opened up another world to her vision and also removed every vestige of malarial taint in a week's time.

Miss P., a wreck on the shores of official surgery. Hemorrhoids exterminated, prolapsed uterus curetted, pessary introduced, vaginal douches. Symptoms. Aching spine,

swollen genitals, ovarian pains, costive, dyspepsia, pains in eyes, irritable; pruritus vulvæ, no physical endurance. Platina, following *Lilium tigrinum* and Sulphur has nearly completed a cure.

Miss B., sensation of constriction in chest, with palpitation which keeps her awake; < by company, also pruritus vulvæ at night. Platina.

Mrs. E., a lecturer. Has distressing commotion in abdomen during menses; is wakened at night with an irritation at navel, and itching of genitals. Two doses in 24 hours, removed all the trouble.

I expect to continue adding to the laurels of Platina if the success of further efforts is commensurate with past experience and present faith.

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### VERIFICATIONS.

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BY H. C. ALLEN, M. D., Chicago.

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**HYPERICUM: ASTHMA:**—Mr. E. R. S., age 21. Asthma since three years of age. Wheezing respiration < lying and extreme cold. Eating indigestible things or slight physical exertion will cause an attack. Has had nasal polypos removed by cauterly. Hay fever begins in July or August, < from hot sun, bright light; itching in nose is signal for sneezing. Hot day and cold night will close the nose. Sweats easily and profusely

Constipation; Stool dry, hard; sensation as if torn. Eczema, crusty, scaly, in patches all over body; > by cuticura, then asthma is worse. Blind boils and acne indurata on face. Frequent involuntary urine.

For these symptoms he received from time to time as they improved or changed, for he resided in Iowa and was treated by correspondence, *Natrum mur.* *Sepia*, *Psorinum*, until he so far recovered as to resume work. Then he would have a severe attack at five or six o'clock every Sunday morning, being free from suffering and attending to his ordinary duties during the week. This peculiar form I was



unable to relieve for many weeks as I could not obtain anything that was peculiar or uncommon about him. Finally he wrote me that he obtained relief as soon as he could *expectorate freely and the more profuse the expectoration* the quicker the asthma disappeared. Under Hypericum I found the following:

"Spasmodic asthmatic attacks; with *changes of weather* from clear to damp, or *before storms*; cannot lie for any length of time *upon back*; attacks > *by copious expectoration from bronchial tubes*; after lesion of spinal cord, by a fall, years before."

Under "Attacks, Periodicity," in Hering, we have: "Every four weeks; attacks of illness, lasting 4 to 8 days.

Every morning: nausea, weakness. Three days before menses: pinching in abdomen.

Summer: diarrhœa."

The italicized symptoms in the above quotation from Hering's Guiding Symptoms, (not found in Hering's Condensed) were the ones of which my patient complained, and the trend to periodicity of some complaints caused and cured by Hypericum led me to read between the lines in the hope of including the Sunday aggravation in the totality. The hope was realized. Hypericum promptly relieved my patient and I have added the clinical verification to the pathogenesis. "Every Sunday: Spasmodic asthma."

He has remained free from asthma for over two years.

This symptom, invaluable to my patient, is not found in the Condensed Materia Medica, and demonstrates that the self-assumed task of the author of a condensation is a most difficult, even a dangerous work.

DULCAMARA. A boy eight years of age has a number of large, seedy, flat warts on the palmer surface of the finger tips under the nails. Some of them were as large as a dime, very sensitive to touch, bleeding easily when injured in play. As they involved one thumb and four fingers with new ones constantly appearing, three or four having recently been added on the palmer surface of the fingers, his mother was anxious to have them cured. But for several

months there were absolutely no symptoms upon which to hang a prescription except, WARTS, the patient being so far as I could elicit in robust health. Finally in addition to "warts; large, flat, seedy on the palmer surface; bleeding easily when injured," I also obtained the additional one of < *from washing in cold water.*

He had received Calcarea, Causticum Natrum c. Natrum mur. and Thuya, without any relief and this added symptom was welcomed very warmly, for I had assured the boy that his warts could be cured without having them burned off. I now gave him a dose of Dulcamara M. (Fincke) and a vial of pellets to take three times a day, with instructions to report in a month. He then said that two had disappeared, and in the succeeding month the rest vanished and his hands and fingers were free.

From Stapf's proving in the *Materia Medica Pura* we find the symptom: "The hands are covered with a kind of warts, such as he had never had before."

Hering gives us in *Guiding Symptoms*: "Warts, fleshy, or large smooth; on dorsa of hands and on face."

Other works on *Materia Medica* have: "Warts on face" or "warts on hands," but I am unable to find "warts on palmar surface of hands and fingers" in any work of reference in my library. Natrum carb. and Natrum mur. have warts on palms of hands, but this symptom of Dulcamara seems of an additional value when the warts are < by cold washing or cold water.

"Warts; large, flat, seedy; on palmar surface of hands and finger tips under the nails," has been added to the skin symptoms of Dulcamara in my working *Materia Medica*.

PSORINUM. Mrs. L., of Hazlehurst, Miss., 32, mother of three children, has been under my care for some chronic ailments for several years. Calcarea, Psorinum and Sulphur from symptoms given have not only prevented a threatened ovariectomy, but relieved a sterility, the bane of her life, and given her a fairly healthy family. In a postscript to a recent letter is the following uncommon list of ailments for which she wants a remedy.

"You will remember having treated me for what I thought was tetter on my right hand. I have since discovered that it was milk crust or something caused from milking, as it heals up as long as I do not milk the cow. But if the servant is only absent one milking, my hand is as bad as ever and remains indefinitely. I noticed a few days ago that while it was on the mend from last milking I had done, I had to wash up a few vessels that had contained sweet milk, and it was as if I had put my hand into a bed of ants. It breaks out like heat now, chiefly at joint of thumb and wrist, and spreads across back of hand, but only the right hand."

This train of symptoms is always indicative of a psoric or tubercular diathesis. The extraordinary susceptibility to, or aggravation from contact with milk or even with the cow is a marked idiosyncrasy. It is gradually yielding to her constitutional remedy, Psorinum.

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### BACILLINUM OR TUBERCULINUM.

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**In Cases of Malarious Fever With Enlargement of Liver and Spleen.**

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By P. C. MAJUMDAR, M. D., Calcutta, India.

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I do not know whether this remedy has been of much use among the physicians of our ranks for the treatment of malarious fever and its attendant evils—the enlargement of liver and spleen. I have had recently under my care a few such cases of most desperate nature, where the efficacy of this remedy has been clearly shown. I have been led to the administration of this powerful remedy in such cases by an idea in my mind that in these instances the unfortunate patients exhibit the conditions and symptoms very similar to the condition in the last stage of consumption. I have also been in the habit of administering it when I found that well selected remedies failed to effect a radical cure.

CASE I. Dr. — son, aged about ten years, had an

**attack of malarious fever in the month of July, 1900. The boy was very healthy before this attack, and had never been seriously ill. This time he got the fever in a notoriously malarious place. His constitution had been broken down by frequent relapses.**

He came under my treatment on the 29th of January, 1901. Body emaciated but abdomen protuberant. Fever almost continuous but aggravation at noon. Chill, heat, sweat and other symptoms were not very distinctly marked. Sometimes there was a burning sensation over the whole body, at other times chilliness prevailed. Eyes were of jaundiced hue, face pale and anæmic looking. Spleen and liver enormously enlarged, filling up the whole of the abdominal cavity; no pains on pressure over these organs. Spleen was also very hard. Bowels constipated, urine scanty and high colored.

Appetite was not good; patient wanted only unwholesome food.

There was a good deal of cough and wheezing rales audible over the whole chest, both sides. Very much subject to cold and catarrh when fever was also at its height.

He had taken large quantities of allopathic and other medicines. I gave him a few globules of Bacillinum 200, dry on the tongue.

No more medicine for a week; boy continued improving. The father being a staunch homeopath, no placebo was required. In a fortnight amelioration of the condition of my patient was remarkably maintained.

Eyes got cleared of the jaundice, fever gone and appetite much improved.

In the third week of my treatment of the case the improvement seemed stationary, and a dose of Bacillinum 200 was repeated. No more repetition of the medicine found necessary and the boy made a perfect recovery in two month's time.

The enlargement of the spleen remained for some time but now there is no sign of it left.

**CASE II. Babu ——— Lahas daughter, about 9 months**

old, strong built frame and sanguine temperament, had been suffering from malarious intermittent fever and enormous enlargement of both liver and spleen. Three of his previous children died of malarial fever and enlarged liver and spleen.

The child was placed under my treatment on the 25th June, 1901. She was anæmic looking and had considerable enlargement of the abdomen.

Fever generally at night and abated about midday.

Bowels generally constipated.

There was no jaundice or dropsical swelling.

Nux vom. 30, one dose, morning and evening, for two days. No improvement.

Fever ran up very high, temperature 105 F. Chinin. sulph 30, one dose on the 27th June.

No abatement of fever. Bacillinum 200, one dose dry on the tongue, and placebo for two days.

Visited the patient on the 30th. Much improvement noticeable, temperature came down, liver and spleen much softer.

July 6th, patient much better in every respect. Placebo continued.

On the 13th, the patient worse again, it was close to a new moon day; patient perspired more on the head and fever high. Silicea 200.

Not much improved; Tuberculin, cm., one dose. Temperature reduced, and the patient better in every respect. I treated the patient during the whole of July with placebo, only one more dose of Tuberculin, cm., was given. She was perfectly restored to health.

CASE III. Babu Roy's wife, about 25 years of age, had been suffering from malarious fever and enlargement of liver and spleen for upward of a year. I began her treatment on the 20th, Jan., 1900.

Fever irregular in type; temperature did not rise beyond 103 (F) It was 99 (F) in remission; eyes jaundiced, great emaciation; bowels irregular; constipation, alternating with diarrhea.

Bleeding from the gums; loathing of food and great prostration. A dose of Bacillinum 200 in distilled water, followed by placebo. She was much improved after a month's treatment, only another dose of Bacillinum was given. I saw the patient after a month, and she was so much better, that I could not recognize her.

CASE IV. A young married woman, 30 years of age; spleen was so much enlarged that it filled up the whole abdominal cavity; it was also very hard. She came to me on the 2nd of Jan., 1901. Had dry, hacking cough; fever high; anæmic and jaundiced appearance; no appetite or taste for food; bowels constipated. Tuberculin, cm., one dose dry on the tongue.

Reported no better after three days. Placebo.

I visited the patient after a week, and she seemed more cheerful and had improved. Placebo, one dose a day.

No improvement. Tuberculin, one dose, morning.

She began improving, after this dose of the medicine. Perfect cure was effected in four months time, with very infrequent doses of Tuberculin. Placebo was given adlibitum.

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### LABIAL ULCER: PHYTOLACCA.

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BY HENRY NEVILLE, M. D., Jamestown, N. Y.

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I take pleasure in sending you an account of two satisfactory cures.

CASE I. Miss B., æt. 24, tall, well formed, vivacious, well educated and seemingly in good health, save that on the margin of her upper lip was a sore of nine month's standing, which in spite of care and many, various trials and the best advice she could secure, refused to heal.

The center of the sore was depressed about two lines—of a dark color and glistened like pearl.

A drop or two of thick, grayish pus was discharged from the sore each day.

The scab was hard and the sore quite sensitive.

As the lip was swollen and hard, the sore was three-

eighths of an inch in breadth and three-fourths of an inch long.

The sub-lingual gland on that side of the lower jaw was swollen and hard.

No other indications of ill health could be secured.

Phytolacca 3x, four doses daily, and to apply Phytolacca cerate every evening

Result: Next week she went to Duluth. Have heard from her twice in the last four months, each time reporting improvement and the last time that the glands were much smaller and softer, and that the sore was healing without a scar. Was it cancerous? [Not cancerous. The cerate was unnecessary and uncalled for.—ED.]

CASE II. Mrs. W. G. I., æt. 42, tall, spare. Two children, youngest 11 months; health generally quite poor, much troubled with asthma and loose cough.

Has much jerking and twitching of facial muscles, < when excited or weary. Asthma < P. M. and evening and in damp weather. Menses occur too often.

September 3d, 1902 gave Zinc 200, ten doses with Sac. lac. Has had no asthma since the above date.

Muscular twitching >.

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### DID IT EVER OCCUR TO YOU.

That gratitude decreases in inverse ratio with the lapse of time following the beneficent act?

That a favor is soon forgotten, but that an injury is brooded over, making the resentment stronger with the years?

That short accounts make long friends?

That you gain only your patient's contempt for your business methods, when you allow him indefinite time for the payment of his bill?

That medicine is a business as well as a science, and that the physician who is most business like in his methods is most esteemed?

That it is better to make six two-dollar visits a day than a dozen dollar visits?—*Medical World*.

## EDITORIAL.

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All Contributions, Exchanges, Books for Review and other communications should be addressed to the Editor, 5142 Washington Ave., who is responsible for the dignity and courtesy of the magazine, but not for the opinions of contributors.

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### CHICAGO HOMEOPATHIC MEDICAL SOCIETY.

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The first paper on the program was by Dr. R. N. Foster: "The Necessity for a Change of Base by the Homeopathic School of Medicine," and the "General Discussion" promised, was the evident attraction of the evening. But both author and essay were absent and "The Pith of the Matter," by Dr. Sheldon Leavitt, on "Suggestion" was read. It created a discussion of which the following were among some of the vigorous protests:

Wilson A. Smith, M. D.—I feel a good deal as Dr. Hanks does in regard to these questions. I was raised an allopath, and had I remained in that faith I would have been at the present time the successor of an uncle in a large practice in the city of Washington, and the change to a study of Homeopathy has cost me more than it has likely cost any of you. When I hear such papers read, and listen to a discussion such as has followed this evening, I confess that it rattles me. I believe there is something in the presence of a cheerful man that helps everyone he comes in contact with, and I know that a man with bad digestion and a sluggish liver is a mighty mean man to have around. But take a case of a baby suffering with cholera infantum, stools profuse, gushing out like water from a hydrant, the child seemingly exhausted after each stool. I do not believe that if I put a few drops of Croton tiglium 30 in a half glass of water, and direct the mother to give a teaspoonful of medicine every half hour for a few doses, and then stop until I come again, that there is the slightest hint in such directions where suggestion is used as, or credited as being the means of cure. Yet I have seen curative results follow such di-



rections time after time. I certainly am of the opinion which Dr. Hanks so forcibly expressed; I am in a village where we have christian scientists, may the Lord forgive the mis-nomor. and I have told them when they cure an old lady who lives next door, of opaque cornea, I will burn up my medicines, take down my shingle and go to shouting for their ideas. This offer was made several years since, and while they have had meetings galore, and readings, absent and single treatments, the shadow of darkness still hovers over the poor old lady. They say that outside influences are working against them; why do these outside influences work against them in one case and fail in another? Why do these outside influences choose one poor woman to spend their fury upon and let some one else alone? Do you know?

And now, to Dr. Leavitt's paper, a quotation was given from the Bible and I want to impress upon you some of these truths. The essayist said: "According to your faith be it unto you." Let me tell you of some of the cures wrought by Christ. You remember the man who had been sick in bed? He was told to "arise, take up his bed and walk," and straightway he did as he was bidden. You recall the case of the man with eyes that were blind, and Jesus mixed a little clay, rubed it on his eyes and instructed the blind man to go to the pool and wash. He did as he was told and he could see, at once! Did the man in the bed hang around for six or seven months before he was able to obey? Did the man with the blind eyes have to wait for the scales to be removed? No! We are told that the cures followed immediately. I believe one thing that Dowie claims to believe, i. e., that God is the same yesterday, to-day and forever, and if he could cure those sick people instantaneously nineteen hundred years ago he can do like-wise to-day.

Another thing, when they talk about a healthy mind always being an evidence of a healthy body, let me say that history does not bear out such an assertion. Read about Alexander H. Stephens, of Georgia. He was so feeble that he had to employ a body servant to wheel him around in a

chair, and yet when he represented his state in the United States Senate, he often held the senate spell bound with the logic of his utterance and his mastery of rhetoric. You, no doubt, have read his plea for the South to remain in the union. Is a record like that made by Alexander H. Stephens *prima facie* evidence of a diseased mind? If so I believe it would be a good thing if more of us had diseased minds and diseased bodies.

Dr. C. E. Fisher—I am moved to speak, yet after so much eloquence I have a good deal of hesitancy about saying a word. There seems to be something peculiarly appropriate in the title of Dr. Foster's paper, which was to have been read to-night. "The Necessity of a Change of Base in the Homeopathic School of Medicine." It seems to me the change of base, and the only change I would suggest, is for us to get down on earth, where we belong, or we will find ourselves in a more complete eclipse than the moon is to night. These psychic questions are fine—so are astronomy, astrology and physics—but when we get down to the relation of homeopathic *materia medica* to the practice of medicine, or the basis upon which we prescribe, we are belittling our own attitude and making ourselves misunderstood before the profession and the world at large, by dwelling too much on these psychic questions.

Dr. Thompson declared in his discussion of Dr. Leavitt's paper that if one had a good bank account he would increase in weight. I never was so poor financially in my life as I am at the present time and I never have been so stout. There is no relationship, whatever, between my *avoirdupois* and my dollars! Nor is there the least relationship between the question of faith on the part of the patient and physician and drug action.

When Samuel Hahnemann and his confreres undertook to introduce Homeopathy there was not a man, woman or child in the world who had the least shadow of faith, or the slightest confidence in it; they waded through a mass of ignorance, of unreasoning prejudice, and cured as they went. The worst case of colic I ever remember curing was cured

with one dose of Colocynth 30th, and the patient was a poor old mule in the street. Tell me that mule had faith!

Two weeks ago I treated a case of malignant diphtheria involving the whole faucial membrane. I gave the patient Lachesis 1000th, followed three days later with Arsenicum 1000th. I had no faith in the treatment; it was purely experimental on my part. The man did not know anything about my system of medicine, yet I have never had a better result. The patient was an old school patron and he employed me from necessity. He told me frankly that he did not believe in homeopathic treatment. In a case of this kind will you tell me where faith comes in as a curative measure?

Now there can be no question, whatever, that it is eminently proper for medical bodies to study these things; but there is no doubt in my mind that we are hurting ourselves as a profession a good deal, before the people, in so doing by being very largely misunderstood. Because it is already asserted by members of the old school that Homeopathy is simply a system of faith cure. It is this in no sense. There is an ability on the part of remedies to cure symptoms which have been learned, by careful experimentation on healthy human beings, that our drugs will produce. It is the demonstration of the utility of a remedy, by virtue of its affinity for tissues and organs, which makes Homeopathy an art, and you can cure an unconscious man in typhoid fever, a child in convulsions, not old enough to do its own thinking, or a woman in puerperal eclampsia as readily as a conscious and believing individual. Many of my best results have been secured when I have not been absolutely certain that I had the right remedy; many of my failures, absolute, disgraceful, deplorable, disastrous, have been when I had the utmost confidence in the prescription. Then I would grope along with one remedy after another until finally, in doubt and despair, some new symptom would rise; I would give the remedy and the patient would recover. In the light of facts like these it seems to me that we have a field, ladies and gentlemen, of our own to work in.

What is the matter with our profession to-day, that we should even be considering the necessity for "a change of base?" Homeopathy is based upon immutable laws, and laws do not change with the whims of humanity! One reason is because we are getting away, as in this matter of psychic influences, from the milk in our own particular cocoanut.

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### TEXAS HOMEOPATHIC MEDICAL ASSOCIATION.

The 18th annual session convened at Dallas, Oct. 8th. W. D. Gorton, M. D., President, in the chair. Nine names were added to the membership roll, evidencing the fact that some of the physicians who have come into the state during the past year appreciate the advantage of joining the state association, thus beginning right.

This association is falling into line with the East in the matter of examining board reciprocity, the Illinois Medical Board, having agreed to recognize the license issued by the Texas Homeopathic Examining Board, where the applicant is a graduate of a college in good and regular standing, and has passed the Texas examination.

The association declined to recognize specifics in medicine by tabling the petition regarding Arsenic prophylaxis for cholera.

The discussion elicited by the papers was largely along Hahnemannian lines, while therapeutics rather than surgery seemed the topic of interest.

The officers for the ensuing year are:

President, Dr. W. L. Smith, Denison.

1st Vice President, Dr. H. C. Morrow, Austin.

2d Vice President, Dr. Emily Shedd, Brenham.

Secretary, Dr. Julia H. Bass, Austin.

Treasurer, Dr. E. V. Dickey, Dallas.

Dr. W. D. Gorton, Austin, is the state "immigration agent" for the association, and invites correspondence from all prospective locators regarding conditions in the medical Eldorado of the southwest. J. H. BASS, Sec'y.

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**SOMETHING FOR HOMEOPATHS TO COGITATE.**

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No less an authority than the London Lancet, gives a hint for the present and future which the so-called "liberal Homeopath" may sleep on to advantage. In a recent issue that bible of allopathic periodicals predicts the early doom of antitoxin treatments, admitting that they are both disappointing and unscientific, and certain to go the way of various fads and fancies in medicine which have preceded.

Citing the fact that but a few years ago the profession relied chiefly upon antipyretics, it calls attention to the additional fact that when these were in the very height of their glory, the antitoxine theory came to the fore-ground and antipyretics were abandoned as dangerous, depressing, and often-times fatal. Now, it says, the antitoxin idea has reached its crest and already the decline has begun. It frankly states that antitoxins have had their day, and that in a short while something else must take their place, as they are not meeting the requirements of advanced science and the demands of an exacting profession and public. Unfortunately, it gives no hint of what the next foible may be, but it speaks the doom of the present fallacy in no uncertain voice.

The candor of the Lancet is commendable. Everywhere, with men who are sincere, antitoxin, whether of the diphtheria variety or of other disease, has not been satisfying. In individual cases it may have seemed to have served better than previous treatments. But this is not because it has been scientific and rational, but because those which preceded were barbaric and disastrous. It surely cannot be taken seriously that the human family is to be compelled to look for its medicines to the blood-serum of animals which have been poisoned by the disease-products of the human family. The idea smacks of the superstitious and astrological. Nature must have provided remedies for the diseases of her children, without this round-about process.

The "hair-of-the-dog cures-the-bite" theory has long been talked as a huge joke, in medicine; yet the old-school

profession has actually taken it seriously, and has attempted to establish a treatment based upon the idea that the blood of an animal can be so saturated with poison as to be curative in poisonings with the same toxin. The thought at first glance seems somewhat akin to the idea behind Homeopathy, yet it is altogether different, and the method is repulsive and dangerous.

It means progress when journals like the *Lancet* admit the error of the toxine treatment and predict its early supplanting. And it will be well for homeopaths who are late in accepting and advocating allopathic treatment to keep their eyes open to the signs of the times and the diagnostic indications the allopathic profession throws out. For hardly is one of their vaunted specifics put upon the market and heralded with trumpet flares to the profession before its tests at the bedside are found wanting in substantiability and it goes the way of all the earth.

In the law of similars lies the only true way in medicine, and the world is gradually finding it out. It will pay us to stand by our colors and let the allopaths continue their experiments. We have the law, and the law will carry us through.

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### THE NEW BUREAU OF HOMEOPATHY.

After weary years of trials and tribulations, of fruitless efforts to utilize the modern discoveries in pathology and build thereon a system of therapeutics, not in accord with the teachings of Hahnemann; after many vain attempts to become scientific (?) by adopting the vagaries of the germ theory and the uncertainties of antitoxins, serum therapy and other will-o-the-wisps; after wandering in the desert of empiricism for nearly "forty years," and partaking of the bitterness of its mortifying failures, the American Institute of Homeopathy by a unanimous vote decided to return to the practice of its founders and establish a bureau for the study of Homeopathy and Homeopathic Therapeutics. Although this step should have been taken many years ago—

or rather it should never been called for by any action of the Institute—it is well to take it at the beginning of the twentieth century; better now than never. There is more inquiry now among members of the Institute for literature that will enable them to practice a better Homeopathy than ever before in its history, and why not give them what they are searching for, and what they failed to get in their college course, a knowledge of the Organon.

Our esteemed contemporary the *Medical Century* makes the following pertinent suggestions:

“What is the function of the Bureau of Homeopathy? In this issue of the *Medical Century* will be found a brief report of the twenty-third annual meeting of the International Hahnemannian Association. This association we believe was a deflection from the American Institute twenty-three or twenty-four years ago. Be the cause of the deflection what it may, as at present constituted the most prominent members of the International Hahnemannian Association are members of the American Institute of Homeopathy, and it seems to us that the moment has arrived for this association to come over in a body to the American Institute of Homeopathy, appropriate the Bureau of Homeopathy as its own, and become a part of our great national organization. The suggestion that the Bureau of Homeopathy be added was made by a prominent member of the I. H. A., and it was received with applause. Not only this bureau, but that of *Materia Medica* and *General Therapeutics* need the I. H. A. at this present moment. The inspiration of these faithful followers of Hahnemann is needed to uphold the central objects of these bureaus, and consequently that of the American Institute. There is no Homeopathy in the I. H. A., that is too good or too pure for the A. I. H. And the former association will uphold the Homeopathy of the latter, make it better, and the cause will be far better served by the combination.

Horace Greely once said that: “The way to resume specie payment, was to resume;” so we presume the “function of the Bureau of Homeopathy,” is the study of Homeopathy. Under the guidance of its able chairman, we hope to have a paper or papers, on some of the vital questions of the Organon read and thoroughly discussed, and we predict it will mark a new era in the work of the Institute. Post-mortem reflections on its past work can do little good except to stimulate to better work for the future. It was a sad day for the American Institute when its first president

walked out, never to return, on account of its polypharmacy and empiricism. It was perhaps a sadder day when the scientific (?) element declared there was no curative power in a remedy when the microscope failed to detect it, and that cases of reported cures made with potencies about the 12th decimal be not published in the transactions. Then it was when the so called "Milwaukee Test" was thrown down as a challenge, that the International Hahnemannian Association was organized in June, 1880. It has done a grand work: its teachings have permeated both colleges and societies, and we do not think the members are prepared to give up its organization, at least until it is seen what reception the Bureau of Homeopathy meets in the institute.

The president of the I. H. A., has recently received a very cordial invitation from the president of A. I. H., to meet with and affiliate with the Institute at its next session in Boston. Both societies meet there next June. The reception given the Bureau of Homeopathy may be the entering wedge to drive them farther apart or the welding of the broken link to draw them together. Time will tell.

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**The Medical Advance.** Among many notes of commendation and encouragement we are constantly receiving we publish the following with the assurance of our appreciation, for they stimulate to better work and help us make a better and more practical magazine, to which end we solicit the assistance of all our readers.

NEWTON HIGHLANDS, MASS., Oct. 30, 1902.

MY DEAR DR. ALLEN:

In sending the amount due on my subscription, I want to thank you for the good work you are doing for the cause, and to express my pleasure at seeing the **ADVANCE** appearing with all the vigor which characterized it when I first subscribed, some sixteen years ago. It is a most interesting and stimulating journal, and its monthly visits are highly prized.

Yours sincerely,

S. L. EATON.



## NEW PUBLICATIONS.

**OUTLINES OF ANATOMY:** A Guide to the Methodical Study of the Human body in the Dissecting Room. By Edmund W. Holmes, A. B., M. D., Demonstrator of Anatomy, University of Pennsylvania, Etc., Pp. 185. Second Edition. Published by the Author, 1930 Chestnut St., Philadelphia.

The "Outlines" is by a teacher and demonstrator of many years' experience, and is an attempt "to introduce method and discipline into the dissecting room, thus securing cleaner and more systematic work and increased interest in practical anatomy." It is not a quiz compend, nor does it take the place of the larger works of Gray and others; but is a practical and valuable guide with the cadaver in the anatomical laboratory, mapping out the day's work of the student.

After nearly twenty years of active work as a teacher of practical anatomy there is more truth than poetry in the following: "That the average medical student is eager and willing to learn if he can do so without too great personal inconvenience, but the methods of anatomical instruction in many of our colleges are not provocative of extraordinary enthusiasm. Too often we find the rooms inaccessible and uncleanly, without proper facilities for instruction; the bodies imperfectly preserved or poorly injected; the students not required to attend except as they please; no notice taken of their presence or absence; it is expected that their knowledge of human anatomy shall be attained by a single dissection of each part, made without system and often unaided. We do not know of a more helpful guide with the cadaver than this little book of Dr. Holmes'.

**A LECTURE ON HOMEOPATHY.** By John Henry Clarke, M. D., London. Homeopathic Publishing Co., Pp. 65. 1902.

This lecture is dedicated to the sisters and nurses of the London Homeopathic Hospital, for whom it was written, and is a clear exposition of similia for popular reading. There is an easy directness in all the author's writings that captivates the readers.

## NEWS ITEMS.

Dr. E. A. P. Hardy (Hering '97) has taken his M. B. degree from the University of Toronto.

**WANTED.**—A successor to the late Dr. C. E. House, of Canton, Ohio. The practice of from \$4,000 to \$6,000 per year, with the home and office attached is for sale. Address Mrs. House.

Hahnemann taught that as the art of healing had to do with the saving of human life any failure to make ourselves masters of it is a crime; and many of his followers feel pretty much the same about the duty of investigating the merits of Perfection Liquid Food.

The Chicago Pasteur Institute was established in July 1890 and up to date has treated 1,538 patients, with 7 deaths, a mortality of 0.45 per cent. The bites are not all by dogs: 1,382 persons were bitten by dogs, 48 by cats, 55 by horses, 15 by skunks, 5 by wolves, 11 by cows, 5 by calves, 1 by a burro, 2 by coyotes, 1 by a rat, 3 by mules, 1 by a pig, and 9 by hydrophobic human beings.

An Organon Society has been formed in Kansas City. The following are charter members: Drs. J. T. Boland, Mark Edgerton, S. J. Boland, W. McC. Lyon, L. P. Crutcher, Caroline E. Putnam, M. E. Waggoner, Geo. J. Waggoner of Kansas City, and J. S. Watt, of Brookville, Kan. The object is the study of the Art of Healing as expounded in the Organon and the society is intended to consist of those who are strict Hahnemannians. This makes the second society for the study of the Organon which has been formed in this state this year.

**FOR SALE.**—A few single volumes and 25 or 30 complete sets of the Transactions of the International Hahnemannian Association are for sale by the treasurer Dr. P. E. Krichbaum, Montclair, N. J. These volumes are veritable gold mines of *Materia Medica* and contain some of the best clinical work to be found in homeopathic literature. There are also some valuable classic papers by Wells, Lippe, Hawley, Biegler, Wesselhoeft, Bell, Kent, Butler, Nash and others. The single numbers, odd volumes, \$1.00 each. For particulars address the treasurer.

"Why medical students should select the homeopathic school" is the title of an essay not to exceed 10,000 words, for which the *Medical Century* offers a prize of \$100 cash. It is intended for the use of all homeopathic colleges, as literature that will convince prospective students, and no work is more needed today in the school than some convincing leaflet of this kind.





**S. L. GUILD-LEGETT, M. D**

# THE MEDICAL ADVANCE

VOL. XL.

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NUMBER 12

## AN X-RAY CASE.

BY B. FINCKE, Brooklyn, N. Y.

*for Rev*

Commentaries on the Organon, § 156, 160, 245, 246, 247.

### *Practica est multiplex.*

A lady, American, 58 years of age, of middle stature, slender, had a lump on the left side of the top of her head, slightly red, solid like muscle, as large as a hickory nut, in February, 1899. In the course of two years it had grown to the size of an oval potato about three inches and a half long, two inches and a half high, and two inches broad, bright red and smooth, with slight nodulation looking exactly like a tomato, with venous ramifications, solid to touch like muscle, some soreness, especially around the lower surface where it rests on the scalp, movable as if it were only attached by a small rim around its circumference to the scalp.

The lady's father once had a large carbuncle on his left side, in the splenic region, which was treated by the old fashioned method of crucial incision, which brought him near death's door. But he got over it somehow, and another carbuncle appeared on the back of the neck. This was cured homeopathically by Dr. Reising, in New York City. Afterward a brother of the lady, had a sore on the lip, and a carbuncle later, on the back of his neck, which was cured by Dr. Bayard, of New York.

May 22nd, 1901. Patient now sought advice to see whether she could venture to go on a tour to Italy. I gave

\*Read and criticised at Hahnemannian Association, Chicago, June, 1902.

her a few powders of X-ray cm., and told her, if she would promise me to use no medicine or application whatever, except my powders I thought she could go and perhaps return cured. She was to take the powders, one every night on her tongue, and to attend to it herself, in case the tumor should break and discharge, without showing it to anybody. I also give her a remedy for sea sickness, which she feared, and beside all the X-ray powders she would need. I then prepared four envelopes each containing thirty powders, one to be taken every night, dry on the tongue. The powders were all of milk sugar, holding some globules of X-ray in the following potencies. The first envelope of 45m., the second of cm., the third of 2 cm., and the fourth of 3 cm.

Patient being of the old Hahnemannian school, promised and began her voyage, June 1st. Hyoscyamus 9c prevented the sea-sickness. Before patient went away a small opening at the top of the tumor had been oozing a little water. This increased rapidly in the first week of her departure, and discharged thick matter and blood. Later an opening formed at the base of the tumor. Unfortunately the patient hurt the tumor against the head of her bunk, which caused a tremendous pain for several days. Gradually the discharge became so offensive that it made her sick, and only by adding a little ammonia to the water used for cleaning could she allay the odor. Under this continuous discharge, the tumor gradually became smaller, till it stopped entirely and nothing more remained except a bony structure with a smooth round convexity on the top, looking like a shell with the edges turned inward, showing a hollow uneven surface at the base, where it was resting on the scalp. The bony formation was like a hickory nut in size and color. The few tiny threads, by which it was attached to the scalp, were easily broken, and underneath the scalp presented a smooth appearance with only a small flat grayish scab, about three quarters of an inch in length and one-fourth in width, which will evidently come off in time and leave the scalp clear and even.

Not all of the powders were used for the fourth envelope was untouched.

Thus the patient was relieved of her burden by the time she came home, September, 15th, therefore in three months.

## COMMENT.

It is with a certain timidity that I approach the comment on this case, because it has become almost an axiom with the true Hahnemannian that the dose should not only be a *simplex simile* and *minimum* but also only one single dose, the action of which should be rigorously guarded against repeating, lest its action might be suspended. Now ever since the application of the higher potencies the phenomenon of homeopathic aggravation has been frequently observed to be so severe, that the desire to avoid it arose in the mind of the homeopathic healer, and many a careful prescriber was almost deterred from using these higher potencies for cure. Yet after this aggravation was passed the remedy proved its curative virtue in all cases where the remedy was carefully selected according to the rule of the art of healing laid down by Hahnemann.

It stands to reason, that the well selected remedy when applied, should be allowed its full sway of action without the interference of repetition or the action of another remedy. Hahnemann says § 245 (organon 5th. ed.) "Every perceptibly progressing and strikingly increasing amelioration in a rapid (acute) or lasting (chronic) disease is a condition, which as long as it lasts, excludes entirely every repetition or any use of medicine, because all the good from the medicine, hastens to its perfection. Every new dose of any medicine even of that given last, which has hitherto proved itself curative, would in this case disturb the work of improvement."

But in § 246 he continues: "Slow progressing amelioration upon a dose of strikingly homeopathic selection, if it is very accurate, also sometimes in its uninterruptedly continued action, accomplishes that help, which this remedy according to its nature is generally capable of rendering in this case, in periods of forty, fifty or one hundred days. But this is seldom the case. It is the interest of the physician, as well as of the patient to shorten this time one half, one quarter or more and thus to attain much quicker heal-

ing. And this, as more modern, often repeated experience teaches, can be carried out very successfully, under three conditions, first; if the medicine selected with all circumspection, was very strikingly homeopathic, second; if it was administered in the finest dose, best adapted to the life-force, and third; if such best-selected medicine is repeated at commensurate intervals, which by experience are pronounced the most suitable for the utmost possible acceleration of the cure, and yet so used that the life-force affected by the similar medicine—disease would not become excited to adverse reaction."

§ 247. "Under these conditions, the finest doses of the best-chosen homeopathic medicine can be repeated with the best (often incredible) success, at intervals of fourteen, twelve, ten, eight or seven days and where haste is necessary, in chronic cases of diseases approaching acuteness, at still shorter intervals, while in acute diseases in far shorter times, after twenty-four, twelve, eight, four hours; in the most acute even after one hour, down to every five minutes."

In view of this advice of our old master, I feel my timidity leaving me, and venture to discuss this subject of repetition at the hand of the X-ray case here presented to the Association.

Now Hahnemann has already in § 160 registered his observation, that a not least possible dose of the homeopathic remedy in the first hour after taking it, may produce a sensible homeopathic aggravation, and in § 156 he mentions the by-symptoms which appear, after the application of the homeopathic remedy in the treatment of the sick, which however soon subside.

Since Hahnemann's time, when the thirtieth centesimal was the generally accepted high potency, the experience of the practice with high potencies has brought out some new facts which may perhaps supplement his observations. The truth of homeopathic aggravation after the well-selected homeopathic remedy, not only in the first hours, but sometimes in the first two or three days, and even later, has certainly been verified by most of the homeopaths, who use high potencies. Then the appearance of by-symptoms in treating the sick with high potencies, which do not lie in range of the symptoms of the sickness, but in the range of



the remedy given, shows another aggravation, the *pathopoeitic aggravation* which, in a measure, can be made use of as proving symptoms.

To these two phenomena of homeopathic and pathopoeitic aggravation, comes the experience of provings with high potencies in a single dose; of this Hahnemann could not know, as the first proving with *Thuja occidentalis* by Dr. C. W. Wolf, with two globules of the thousandth centesimal potency for two full years on his own person, (see *Homeopathische Erfahrungen von Dr. C. W. Wolf*, 2nd to 5th part Berlin. F. A. Herbig 1860.) took place long after his death. Such provings have been repeated and have developed symptoms of definite character, as clear and distinct as those observed from lower potencies and crude drugs and tinctures.

Now, if symptoms of single doses of high potencies are able to distune a healthy organism to such an extent as is shown in their provings, the question arises how the single dose acts in the organism when applied for the purpose of healing? The homeopathic and pathopoeitic aggravations are matters of fact, which nobody can deny who practices intelligently and this brings us to the point, which caused me to try the experiment; whether the accepted dogma of the single dose be true and whether a repetition of the dose before it has finished its action, will spoil the given case? Hence I gave the remedy, as well selected as possible, to the patient in a repetition of doses, one every night, dry.

The fact appeared, that aggravations were very rare, and the case was not spoiled. How can this astonishing result be reconciled with the teachings brought up in the last decades, that only one dose should be given and the action waited for no matter how long it lasts?

There is no doubt, that the cure with one single dose, is the crowning reward of our noble art and that every uncertainty in regard to the truth of the homeopathic law must disappear. I am the last to discourage those who have the nerve to gain their eminent curative effect by patiently waiting for the end of the sickness. At the same

time *experientia docet* and the experiments regarding repetition may allay, in a manner, the anxiety of those who in critical cases ponder on the advisability of repeating without coming to a conclusion. In acute cases the principle of repetition has long been adapted to the benefit of the sick, and in the chronic cases it may be found applicable when a cure with a single dose is impossible.

The case here presented was cured by the method of repeating the dose, one every night for three months. The sixth centesimal potency of the X-ray may already be called a high potency, and its action in a single dose upon the provers of it, which is preserved in the proceedings of the International Hahnemannian Association, is undoubtedly one of the most remarkable in existence. The objection of a German editor that these provings were the results of auto-suggestion falls to the ground after a study of the wonderful effects of the X-ray in Homeopathy in health and disease. They are now corroborated by the application of the high potency, as high as cm. and higher, on the sick. Poor fellows! who now by the German government, are limited to crude drugs and strong tinctures as well as to the triturations and attenuations up to the third decimal potency, subject to the supervision of the medical authorities, and the apothecaries! The fatherland of Homeopathy has wandered from Germany to America, and here it will be developed to further glory by the true adherents of Hahnemann, the great reformer.

When a single dose is given, it depends upon the sensitivity of the patient how it will act. According to the law, it should homeopathically wipe out the sick condition and bring back the normal condition of health in more or less time. But after the remedy is taken and it begins its work, the patient sends or runs to the office for immediate help against the aggravation, homeopathic or pathopoetic. You send a blank powder, the storm is allayed and the remedy works on in its legitimate way. This aggravation however is a great draw-back in the practice with high potencies and I fear makes many shy of them. To avoid it, one may give

the remedy in repeated doses as long as it will do good; of course it must be stopped if it is doing harm. But it will not do any material harm. The solution of the problem, is in the homeopathic action. Suppose the first dose, not repeated to bring on an aggravation, the following dose may react homeopathically against the preceding one and prevent the undesirable aggravation. In this reaction, the remedy exerts all the power lying within its range, and touches all the parts in the organism homeopathic to it, so that the remedy has exerted its healing influence in preventing aggravation; there is no more need of its reaction. And in this way it may be supposed that the continuous reaction serves merely the purpose of blank powders.

Between two points at a distance from each other, there is only one straight line possible. If one point is acting upon the other distant one, it can only reach it, in that straight line when it has the requirement of the homeopathic law expressed in the formula *Similia Similibus Curantur* and dependent upon the general laws of motion, that action and reaction are equal on opposite sides. Equality is the highest degree of similarity, only short of identity. Now when the first dose is taken, it, if selected according to law, will act direct, in the straight line, upon that part of the organism which produces the reaction necessarily following it, and the result is equalization of action, equivalent to cure. This is the prototype of healing, which happens in many cases and forms the glory of homeopathic practice.

But such a prompt action is not always reached immediately owing to some interfering causes, either lying in the quantity or potency of the dose or the varying sensitivity of the organism or the imperfect similarity in the selection of the remedy, the straight line lengthens into a curve, or goes outside of the objective point, without reaching it in the shortest time or not at all; and the cure is prolonged or frustrated. In the latter case, a better selected remedy is required. But suppose the remedy was correct and the dose was adequate, there would be no necessity of giving another dose. Nobody can tell, however, whether the dose

would not produce an aggravation of some kind, interfering with its prompt action. Would it not be advisable to prevent it? I think it can often be done by giving a second dose and consecutive doses. Should an untoward reaction of the organism follow, the second dose of the same remedy would exert its homeopathicity and cut down the undesirable aggravation. The question here arises; does not this second dose of the same remedy nullify the action of the first dose and render it inert? My experience is, that it does not in most cases. The first dose by virtue of its homeopathicity has got the start, before the second is given and the straight line of action continues, leaving the curve of overaction or by-action to the reaction of the second dose, and this process goes on until the action of the first dose is exhausted. The second dose does not interfere with the main action of the first one because it offers not the necessary condition of opposition, and opposes only the deviations from the straight line of healing by nullifying them in its homeopathic reaction. Thus it happens that the case may go on improving under a continued opposition by repetition of the same remedy as experience teaches. If it does not so happen, the fault lies not in the repetition, but in the selection of the remedy and another remedy of better homeopathicity must be chosen. All this of course, applies to the practice with high potencies, the dynamic nature of which, does not allow an accumulation of action, such as may take place with repetition of crude drugs.

In the case before us, the repetition of the high potencies of the X-ray each day for three months removed the large tumor on the scalp in a manner which can not be explained. The fact is uncontrovertible. however, that the cure of this strange outgrowth of the organism was not interfered with by any aggravation whatever, and went off in the straight line of healing, which was introduced into this science and art by Hahnemann.

It is assumed that the modern *modus operandi* of the homeopathic high potency is by the impression made upon the termination of the nerves at the point of application.

But how could this assumption be acknowledged to be true, when considering that the high potencies of the X-ray were instrumental in removing a tumor, situated on the scalp and in connection with its tissues, only by an adherence of its circumference which seems to preclude any presence of nerve-terminations in the tumor. It appears to be a marvel, how the dynamic power of a high potency which precludes all notion of materiality could have reached the material, measurable outgrowth and make it disappear. Nay, more, how marvelous is the remainder of a bony structure hanging only by a few tiny shreds, which easily broke when it was taken away! This is wireless homeopathic healing, and is no more wonderful than the late invention of wireless telegraphy, which just now agitates the world. After the feat of telegraphing without wires o'er the broad Atlantic Ocean, and lesser distances, will anybody be brazen enough to deny the fact? As well they may doubt the action of homeopathic high potencies, not only in removing tumors like the one here presented, but also removing any ailment the human organism is liable to. We may be content with the fact and the truth of the great Waller: "In's innre der Natur dringt kein erschaffner Geist." No created spirit will penetrate into the interior of nature.

*Ceterum censeo macrodosiam esse delendam.*

DISCUSSION.—P. E. Krichbaum, M. D.—Dr. Reininger has the tumor, if any one wishes to see it. It is certainly a remarkable cure.

E. E. Reininger, M. D.—Dr. Fincke gave me special charge of that tumor, and asked me to let the members examine it. That is the tumor that was extracted by the X-ray as this article described evidently osseous in character.

P. E. Krichbaum, M. D.—The paper is open for discussion.

W. H. Leonard, M. D.—I remember at the time this Association was formed, this question came up with Dr. Lippe, and he was, of course, like most Americans, trying the high remedies and the single dose. He told me at that time that

Dr. MacFarlane, of Philadelphia, was also using the high remedies in frequent doses, and it staggered him to know how he succeeded so well. He did not attempt to get any reason for it from Dr. MacFarlane, but he was equally successful in using them himself. This reminiscence came up as the article was read, and is it true, that there are more homeopathic physicians that repeat the dose, than those that give the single dose? It is a question we must hold tentatively until we know something more about it.

Dr. Baylies.—I would like to express the opinion that the repetition of the dose, might moderate the action of the first dose or high potency.

Arthur Fisher, M. D.—Can any one tell me how the X-ray is potentized? I would like very much to have explained how they manage to materialize the X-ray into the form of medicine?

H. C. Allen, M. D.—Dr. Fincke says a dram vial of alcohol was exposed to a Crook's tude for half an hour; corked and afterwards potentized it, just as you potentize Arnica, Aconite or any other remedy.

Arthur Fisher, M. D.—Thank you; that is what I want to know.

E. B. Nash, M. D.—This question has been settled long ago by Hahnemann and corroborated by experience. The only time to repeat a dose is after the action of the first dose is exhausted. And there is no exception to the rule.

The repeated dose to the extent of getting an impression is nothing more or less than the single dose. The dose may be given at one time, or at intervals divided until we get an impression. And when that impression is gotten and the reactive powers excited and doing their work, then it is dangerous to repeat our remedy.

J. T. Kent, M. D.—Mr. President, I would like to say a word. The question of the repetition of dose has been gone over and over by men so respectable, so honorable, so full of experience, that it is hardly to be doubted as a general conclusion, that when the action from a single dose has been obtained, to wait upon it, until it exhausts itself. I do

not know of any other homeopathic practice that may be called respectable Homeopathy.

Lippe told me his best results and best cures had come from giving a single dose, and waiting upon the action of that dose. That has been the experience of the best men I have ever known, and I have known most all of them that have lived in the last twenty years. I have always asked that question. The best experience of experienced men that have followed Hahnemann ought to be accepted instead of isolated experiences.

We have had isolated experiences reported in papers, for which we could not account, owing to the fact that we do not know everything that is in the human system, and we do not know all about the ways of life. We can imagine cases, that would be exceptions to ordinary things. But if you throw a pebble into a small pool of water, a regular series of waves is established, running outward in regular circles. Another stone thrown in establishes a second series of waves, which breaks up the regular motion of the first series and establishes confusion. Any practice that deviates from what we believe Hahnemann's last experience and that of the best followers of Hahnemann, is a mistake and we should not undertake to vary from what has been already established as the best. We want the best, the simplest, and the easiest; and that which conforms to the best and simplest.

If you consider the vibratory action of those waves, caused by the pebbles thrown into the water, you will see that they can be applied by analogy in the human economy, to all the actions of life. The second pebble will meddle with the first series of waves. So the second dose is dangerous. I do not dare do it. Some of you may, for want of experience and want of observation, jump into these things. The ignorant will do things, which angels would not dare undertake. I believe in the single dose, or what may be equivalent to the single dose; as soon as the action has taken place; as soon as the remedy begins to act; as soon as it has taken hold and is working, then wait. As

soon as the symptoms begin to change, then stop, and wait, and wait, and wait, and wait, and continue to wait. But when a remedy has changed the symptoms, the remedy ceases to be homeopathic, for it is homeopathic only so long as it corresponds to the totality of symptoms, and who on earth dares administer a remedy to the sick person, that is not homeopathic? What right have we to give medicine simply because of a theory or isolated experience? I should say that that is all a whim of our dear old man's last days and not something to be repeated by Hahnemann's followers.

P. E. Krichbaum, M. D.—I wish to say one word, as a younger member of the profession: And that is that this dose question, and the failing of the older members to get together and agree upon the subject is doing more harm than anything else. I do not know one-half as much about giving the dose as when I started—but here we are tonight, no two men agreeing upon it. Talk about potency and repeating it! And repeating one dose six or seven times. This paper this afternoon favored one thing; some gave the potency for a week; and some say send a dose every two weeks; and a boy says: "Where are we?" I do not know. I have decided I have got to work out my own salvation. I believe everything I hear, but I would like to know what to do when the doctors disagree.

[One object of Dr. Fincke's paper is to prove it possible to cure a chronic case without the < from the single dose of the similimum. May we not learn from the lesson? Ed.]

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### CLEANLINESS AND THE INDICATED REMEDY IN THE TREATMENT OF WOUNDS.

BY PAULINE E. LANGE, M. D. Chicago.

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The very first step in the treatment of wounds, no matter from what cause, is cleanliness, absolute cleanliness, and then the indicated homeopathic remedy.

A CASE. Mr. B., age 19, came to me May 7, 1902, with a history of having had the index finger of left hand badly



crushed between cog-wheels. He had been attended by a corporation doctor for eight weeks, the finger getting worse every day.

The condition presented was as follows: The finger was entirely denuded of integument and exuding a very offensive discharge; the hands, face and neck were covered with pustules that broke down and coalesced, forming large ulcers with bluish inflamed edges, the bases being very dark and quite deep, discharging offensive pus.

The patient came to me saying: "Doctor, I want your opinion, what can you do for me; our company's doctor has been treating me for eight weeks and I am getting worse. I am becoming so weak I can hardly pull myself along. I can't sleep, toss about all night, the finger, hand, face and neck burn like fire, and drive me out of bed. My appetite is poor, I try to eat but as soon as I have a few mouthful down, I have a diarrhoea and that makes me weaker still. I know I'll get blood-poison and that will kill me. I'm so thirsty, but as soon as I drink I feel as though I had a stone in my stomach. I know I'm going to die from this, I feel it."

I examined the parts carefully and found a dry dressing (a powder) had been used; the parts had not been thoroughly cleansed for some time, for the powder had hardened and formed a cast about the finger. The face, neck and hands were covered with scabs, which proved to be the powder hardened, beneath which an offensive fluid oozed.

I then asked the patient to describe the method of treatment from the first dressing on. This is his story: "A few minutes after I had my finger hurt, the doctor washed it with carbolic acid and water, then dried it, (and didn't care if he hurt me or not) put some powder on, bandaged the finger and told me to come to his office in two days. In two days, he took the bandage off, looked at the finger, wiped it with some cotton, put on more powder and told me to come every other day to have it dressed. I went to his office eight weeks, the same thing being done. After seven weeks my hands, face and neck began to break out with

pimples, and here I am ten times worse than the first day. If you can help me, do so. I have told him I was not coming again."

My first step was to give the parts a thorough cleaning with soap and water, then carefully dried and applied nut ton tallow, to prevent the dressing from sticking to the wound. From the symptoms given by the patient, Arsenicum, cm., one dose dry on the tongue with placebo every hour was given. Patient told to return next day. I dressed the parts daily for five days then every other day for a week and after three weeks discharged my patient well and happy. The pustules on the face and neck were stubborn in healing so from the patients general appearance, and a history of recurring eruptions I gave Psorinum cm., one dose. This cleared up everything.

I am positive that if surgical cleanliness had been employed from the very first, the patient would have been spared much suffering and some danger.

Cleanliness is next to Godliness, and the indicated homeopathic remedy.

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### A REMINISCENCE OF HAHNEMANN.

BY MR. JOHN B. YOUNG, Clinton, Iowa.

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While so many have written about the immortal Hahnemann, who were highly qualified for the work in hand, and whose writings have been read by admiring multitudes, it may seem presumptuous in an uneducated and unknown person, seeking to interest you in such a theme as a Reminiscence of Hahnemann.

The paper which I read today is the result of several requests from professors in your college, and this is my only plea in appearing before this intellectual audience.

It is worth much to have books at one's command, whereby we can study the life and work of a great man, and to a great extent familiarize ourselves with the great thoughts that came from his fertile brain. My experiences,

impressions, and what I have known of the man, are not from books, but from a living presence, whose life currents flowed so gently and grandly in my presence for three-fourths of a year.

It is worth more than tongue can express to see and touch the living man, and feel the magnetic thrill from his lustrous eyes. To have his hand in yours, and feel the warm impress from a living soul thrilling your own. To watch the angelic smile sweeping o'er his beautiful face as he discerns that the disease in one of his patients will soon give place to rosy health, is an inspiration and a benediction that never can be effaced. It is in the presence of disease and where the life-blood is oozing slowly away, that you catch a gleam of the healer and perceive the intense hunger of soul to bring relief to the suffering one.

It was impossible to be in his presence frequently without seeing and feeling that he was preeminantly a man first and then a physician. He was in dead earnest, and his love for diseased humanity was paramount and dominated his life and made his practice of medicine a necessity. To be great one must be humble, and to be helpful one must be unselfish.

Hahnemann was never satisfied with mere service or traveling in the foot-steps of others. He was a lover of the truth, and became a Homeopathist because he found laws as a rock on which he could stand and face the severe criticism of the old school. Had he not been a true man he would not have troubled himself about the new principles of cure that through investigation came to him, but would have remained an orthodox practitioner till the end of life.

His greatness comes more into view at this period of his life, when he made the decision to follow the light, and if need be die for what he believed to be a revelation of eternal truth.

Hetrodoxy in medicine had no power to chain him to a dead system; persecution at home did not for a moment intimidate this man of principle; from bigotry and effetism he fled as from a plague, and found in the city of Paris a place

for the developing of the grandest system of cure the world has ever seen. His was a kindly nature—full of sympathy, gentle and loving as a child,—unselfish and helpful, ever eager to succor the afflicted and bear others burdens. But though generous and abounding in simplicity, he yet had the heart of a lion, and the courage of his convictions.

A person who has a mind of such magnitude as to project a new system of healing that is to bless the nations of the earth, has an *influence* and a *personality* commensurate with his discovery, and those whose feet have stood in that august presence are thrilled with the glory of a new dispensation and dazzled with the brightness of a new star in the horizon, that shall shine till time is no more.

The dullest plodder in life's history may know little of method, be indifferent to principle, and may be blind to far reaching results, but if privileged to stand where a great presence lives and moves, his being will be swept and dominated by a power that may be felt but cannot be expressed. Such is the experience that has pervaded my life for over sixty years. Out of that presence I shall never find myself, for it is part of my life and I love to be enveloped in it. To think of him is to be thrilled and inspired, and in a measure to be a partaker of his God-like nature.

I have tried to convey some of my thoughts of the great healer, by what I knew of him through personal contact and personal treatment, and yet I realize that my impressions, though deep and overmastering, cannot be grasped by my mind and made plain to others. I only know that I was once under his majestic spell, and that time nor place has not diminished his individuality or in the slightest dimmed that luminous presence.

Besides these personal impressions, there was that about the doctor which irresistably drew him to you, and compelled your admiration and love. His was an unselfish soul,—his longings were intense to save and heal, and his success phenomenal.

I once said to H. C. Allen, Dean of Hering College, that he was the most divine looking man I ever saw. At this

period he was over four-score years, yet his "eye was not dim, nor his natural force abated."

The youth loved to dwell in his presence as plants turn to the light. The aged and mature felt new life under his touch, and would fain linger under the inspiring spell of his voice.

From many nations far and near, came a great host of invalids, whom the allopathic doctors had pronounced incurable,—many of them so far gone that they had to be carried to this wonderful physician, whose warm heart and cheering sympathy was itself a source of healing.

You who know him as a physician and have read of his marvelous system of cure, and the law by which he was guided in administering to the sick, will readily admit that no other man ever lived who had such miraculous success, and none ever comprehended, as he did, the mystery of physical life.

He had a heart to feel, a brain to plan, a magnetism pure and penetrating, and an individuality far-reaching. The many colleges that have sprung up in this and other lands, filled with able professors, and teeming with a multitude of students, who are giving and receiving the Hahnemann system, are so many rays of light flung out from the great center of healing that has made Paris great and Hahnemann immortal.

#### HIS OWN CASE.

A recital of my own case may prove of interest, and so I will briefly state the facts that you may judge for yourselves. I was born in Paisley, Scotland, December 4th, 1823. My father was a weaver, of what is known as Paisley shawls, and at eight years of age I became a weaver's draw-boy.

Between ten and eleven years of age I took a very severe cold which finally settled upon my lungs, bringing with it the usual night sweats and cough. For over a year I was confined to bed, growing weaker and weaker, and occasionally was visited by the local doctor, who pronounced my case hopeless.

About this time, a Miss Sterling, a lady of wealth, came to see my father about some church business, and during her stay the sick boy was discovered, and from the very first she showed great interest and sympathy. The day following this providential visit, this kind lady returned with her family doctor, who attended me constantly for many months, and on the first day made an examination of my lungs and pronounced the disease fatal.

This devoted friend of mine, shortly after left for a year's visit to Paris, and while there kept up a correspondence with her doctor, and from him received regular reports of my condition.

After several months stay in Paris, my friend became acquainted with the immortal Hahnemann, and shortly after became one of his most enthusiastic converts. Like all new converts, her faith was strong and active, and her loving heart must seek out those who were in the valley and shadow of death, and bring them to the great physician she had found.

Miss Sterling at once wrote home to her doctor, and made earnest inquiries as to my strength and ability to travel to Paris. His answer was emphatic, had no uncertain sound. "The lad's strength is nearly gone, and he would probably die before reaching the city." Such a decision would have chilled almost any heart, but her love grew stronger, and another letter came with this request, "Call in other doctors and let there be an exhaustive consultation, and decide if the trip could be made in safety by the boy resting frequently on the way."

During the period between the first and second letter, I had rallied some, and the consultation was favorable to my immediate trip to Paris. Such a journey in those days was tedious and to an invalid tiresome, and but for love inspired by hope, it never could have been undertaken. In those days travel was confined to stage-coaches and steam-boats, for as yet the iron horse was an unknown factor in the land. After resting a few days in Edinburgh I was taken by a steamer to London, where I rested for two weeks at the

palatial home of Sir Andrew Clark, who after became the Queen's doctor. While staying with Sir Andrew Clark, I was several times examined by him, and at the conclusion of the last, heard him say in a whispered conversation with his lady, "There is not the slightest hope for recovery, he will never return alive, and it is too bad to drag him so far from home."

After a weary journey and painful in the extreme, I at last arrived in Paris, and on the second day Dr. Hahnemann drove in his carriage to pay me a visit, and find my true condition. I was requested to strip and go to bed, so that he could the better have command of my person, and find to what extent the dreaded disease had developed. His examination of my lungs was similar to that of Sir Andrew Clark and others, with the exception that Dr. Hahnemann was longer and more exhaustive. I think that I was in his hands from first to last about one and a half hours.

He would pound me on the front of my chest and then on the back, and have me count figures from one and upwards, then put the stethoscope to my lungs for quite a long time, and listen intently. The whole operation was painful, and I fretted a good deal while it was going on. The darkest hour of the night is just before the light floods mountain and valley, and so it was with me when the ordeal was ended, and the grand old man turned around to speak to my friend, who was anxiously awaiting the result of his examination.

He spoke to the lady in French, but I saw from the luminous glow on his face that it spoke of life and hope. He had been down in the depths of my being, and now knew just what the damage was, and that the craft would yet float free of the breakers, and sail o'er many a sea. You who have been in the storm blast and drifting among the breakers, know something of the joy of the heart, when a ray of light and hope sweeps over the drooping soul. Such was my happy experience when the doctor's face, gleaming with a satisfied joy, brought rest and peace to my lonely heart. And I was not disappointed, for just as soon as he

stopped speaking, my dear friend joyously said to me, "The doctor says, 'I am glad that the lad has come to me in time, I will cure him, but it will take a little while.'"

Dear friends, it took a long time to travel from Paisley to Paris, and to me there was nothing but gloom and death as I journeyed. Besides, I had left home and friends, and was among a people whose language I knew not. Under these conditions I hear words of life and cheer from the great healer, and a glad song fills my soul. I am to live, I shall see my loved ones again, and Scotland shall be dearer than ever to my heart. Home, sweet home, will have a deeper and more sacred meaning as I shall hear the welcome as I return from a foreign shore, to the hills of my native land, and her bonny blooming heather. The sunshine of that glad hour still fills my life, and like a spiritual gulf stream will continue to flow through my sentient being until the spirit shall speed away to a brighter clime, where disease and death are forever unknown.

Such a healer as Hahnemann, was to humanity the brightest star of all the centuries, a star increasing in power and brilliancy as he is studied by the intellectual minds of this glorious age in which we live. How can I be otherwise than grateful to the man who saved me? How can I ever be indifferent to the goodness of heart, who having restored health, and treated me like a prince for nine months, yet refused to accept the slightest recompense for his invaluable service? All hail to our hero! All hail to the man! Though dead he liveth for evermore.

*Young's paper*

DISCUSSION.—C. E. Fisher, M. D.—I feel that we are under great obligations to Mr. Young for being with us today; and I do not know, I am sure, why he should have offered any word of apology on his paper in comparison with those of the rest of the association. It is one of the most eulogistic documents I have ever listened to, and one of the most effective in every respect. There is one thing I would like to say: I number among my very warm, personal friends a man and his wife who were patrons of Hahne-



mann as children, Mr. William Von Rosenberg and wife of Austin, Texas. I cured Mr. Von Rosenberg of a serious heart trouble that a number of physicians had pronounced incurable; he brought to my office one morning, as a gift, a couple of volumes, bound in paper, of a German edition of *Materia Medica Pura* with Hahnemann's name inscribed in the volumes in his own hand writing. Mr. Von Rosenberg offered me those as his testimony for having brought him out of what was considered a fatal illness. In talking with him he depicted, in language almost like that of Mr. Young's, the beauty, simplicity, and sweetness of character of Hahnemann. They had gone from Berlin to Paris to receive treatment at his hands, some of the family having previously been patrons of Hahnemann in Germany. He received no recompense from him. Hahnemann must have had an unbounded purse. I never have seen or heard of anybody whom he charged a dollar for treatment.

We know he was well compensated, but those cases that came from a distance he seemed to have taken to heart and to father them. They were as little children to him. As Mr. Young spoke today it was almost in the same tender, sympathetic language that Mr. Von Rosenberg used, about the time of Mr. Young's experience. They have their general medicine case that Hahnemann gave them more than sixty years ago, and I have the volumes.

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### THE RELATION OF HOMEOPATHY TO PATHOLOGY.

BY C. M. BOGER, M. D., Parkersburg, W. Va.

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Ever since the promulgation of the law of Similia, as the only true method of cure, there has been a cleavage more or less wide between the pathological wing of our school, led by men like Hughes and the symptomatologists, the latter taking their cue from Hahnemann's later and latest utterances.

The distinction between these factions has always lain in the appreciation of the *Materia Medica* as handed down

to us by the master and his successors. Personally Hahnemann, in his later years, denounced the deductions of the pathologists and eclectic, and Lippe in this country followed closely in his footsteps. Hering seemed to occupy a middle ground, his labors towards the enrichment of our available knowledge have been rich in results; his greatest error consisted in the admission of many clinical symptoms and failing to make a clear distinction between pathogenetic and clinical origins. He seems, at times, to have been unduly credulous.

A modality may be, and often is, of necessity clinical, but a clinical symptom should never be admitted as such to the schema of any remedy. Almost every such symptom is already a deduction from a premise and to continue this process *ad infinitum* can only lead to the vilest empiricism and greatest uncertainty. It is no argument to say that many symptoms of the Chronic Diseases have been obtained from the sick, for a careful reading of that great work will convince any one that no true clinical symptom is contained in its pathogeneses, but that they are confined to the prefaces. The doubtful ones of the text are very evidently gleaned as provings, during the administration of remedies to the sick; this process all of us have seen and know it to be most reliable, for at such times the vital force is hypersensitive and its oscillations quickly respond to those of a synchronal remedy, producing the finer symptoms not otherwise obtainable. The accurate outlining of curative action is clearly beyond the scope of the finite mind. Hahnemann despaired of curing extreme varicose conditions, ulcers, veins, etc., but the powers of *Vipera*, *Hamamelis* and Fluoric acid were unknown to him. We now cure these things just as certainly as we do many others of more apparent promise; this is one of the crowning glories of Homeopathy; the application of these remedies to aneurismal conditions of the cardiac or cerebral regions is not yet demonstrated but constitutes the next step and is clearly foreshadowed in their provings. In the venous sphere the highest potencies, at long intervals, have yielded most

brilliant results; in aneurismal dilatation a like precedent is indicated.

The deduction that *Hypericum* must prove useful in tetanus of a certain type has borne abundant fruit, and now every practitioner of large experience recognizes its power. Latterly the bacteriologists tell us that tetanus bacilli can not live in a highly oxygenated medium; now the volatile oil of *Hypericum* is a terbene, one of the oxygenated oils. This is cited merely to show what is constantly happening; indicated remedies attain a certain celebrity; presently the pathologist or bacteriologist discovers in part why this is so, and lo! a specific is born. What memories throng my mind at the sound of that conjuring word. I see the numberless host of syphilitics with dropped teeth and hair, chins running with slaver, their nights rendered hideous by periosteal pains, tottering into mental imbecility, all because Mercury is specific for syphilis. I look again and see jaundiced, sallow, wan faces with pot-bellies from ague cake or swollen livers, shivering with every cool breath of air or drenched with sweat from the least exertion; they urinate blood or pass lienteric stools so great is their debility, all because Quinine is specific for chills and fever. Take a last look and behold a vast host of sodden stupid faces, note how they walk, as if in dreamland, but always with bowed heads and stooping shoulders; their shifting glances reveal their cunning, lying dispositions, all because Morphine is specific for pain.

Kind friends, such are some of the gross effects of specific treatment. Under its benign sway the diagnosis carries the remedy, which will take you back to health or some other place; we even have a new school of specificists that has shifted the matter upon the other shoulder and prescribes for conditions and clinical symptoms. Patients do not count particularly, but palliation immediate must be had at all costs; as for doses the rankest allopath is not in it, they literally follow the old saw:

“I purge, I puke, I sweat 'em,  
And if they die I let 'em.”

in another but more dangerous form.

You will pardon this digression, but out of the fullness of the heart the mouth speaketh; the thought therefore remains that pathology bears little relation to Homeopathy and that of the post hoc type. Pathology has confirmed much that pathogenesis teaches, but has seldom been the initiative of a true cure; by the very nature of things this must be so, not because the Organon intimates as much, but because of the multiplex forms of every disease which must of necessity be met by many remedies.

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DISCUSSION.—J. A. Kirkpatrick, M. D.—One of the fortunate things for Homeopathy is the cellular pathology, of Virchow and modern writers. Modern pathologists are not content to look upon a case in the gross or in a large way. They take the microscope and examine the constitution of the diseased cell and chemically analyze the changes in the cell-substance as far as that can be done but after all they cannot reach the infinite, there is a point beyond their highest powers and that point and all beyond it, they are forced to acknowledge as the unknowable. They come to that which no microscope can see and the only communication with the living cell is not through the microscope but through the sensory nervous system. Homeopathy with its drug provings is the only way to rationally reach that living cell and in their observation, the pathologists have drifted in the direction of our school, at least to the extent of furnishing something of a scientific explanation for its workings.

H. C. Allen, M. D.—I cannot quite agree with Dr. Boger in regard to the injury which Hering has inflicted upon our school by the use and recording of clinical symptoms. The cold, sweaty feet of *Calcarea carbonica*, so useful as an indication of that remedy and one that has been verified a thousand times, was a clinical symptom. It was never developed in the proving. The wing-like expansion of the *alæ nasi* of *Lycopodium* has never been produced in a proving, but it has led the careful observer again and again to

that remedy and cured his patient. And then again Hering is everywhere careful to state in his books, which symptoms are clinical and which are not, so that there need be no confusion. A clinical symptom when it has been verified a number of times, for anything I can see to the contrary, is to all intents and purposes as good as the best proved symptom in the world.

C. M. Boger, M. D.—The only point of difference, seems to be on the subject of clinical symptoms and that I regard as important. Hering does not say clearly in any place, which are and which are not clinical, nor which are pathogenetic, nor does he say how many times each one has been verified.

In regard to *Lycopodium* and the symptom of the wing-like motion of the *alæ nasi*, that symptom is clearly foreshadowed in the proving. It is an alternate action. No remedy shows so clearly as *Lycopodium*, opposite effects, action and reaction; for instance, in the same patient, we may have muscular exhaustion and muscular contraction, one immediately after the other. It is true that we can avail ourselves of clinical symptoms, but it is not the proper way to build up our *materia medica*. Some of the best clinical symptoms that we have are from domestic practice.

At least two thirds of the remedies of the allopathic school, are founded upon old wives' tales and recommendations of the aborigines. *Cinchona* was obtained from the Peruvian Indians and so of the best preparations that they have.

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## SUSCEPTIBILITY.

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BY H. C. ALLEN, M. D., Chicago.

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The sick-making power of noxious agents appears to depend upon the vitality, the resisting force of the individual. The strength of vital resistance depends, in fact, upon the extent to which the system is weakened by some constitutional dyscrasia—psora, sycosis, syphilis, tuberculosis

—hence the more marked the dyscrasia the greater the susceptibility. Our individual susceptibility to Rhus, malaria, or epidemic diseases, as well as the contagious diseases, varicella, variola, scarlatina, rubeola, pertussis, influenza, etc., depends upon this dyscrasia and may be mild or malignant according to its constitutional involvement. Hahnemann's masterly comparison of our susceptibility to morbid and medicinal agents is from the Organon:

§ 31. The inimical forces, partly psychical, partly physical, to which our earthly existence is exposed, which are termed morbid noxious (sick-making) agents, do not possess the power of morbidly deranging the health of man unconditionally; a striking fact in corroboration of this is, that whilst previously to the year 1801, when the smooth scarlatina of Sydenham still occasionally prevailed epidemically among children, it attacked without exception all children who had escaped it in a former epidemic; in a similar epidemic which I witnessed in Königsutter, on the contrary *all* the children who took in time a very small dose of Belladonna remained unaffected by this highly infectious infantile disease. If medicines can protect from a disease that is raging around, they must possess a vastly superior power of affecting our vital force. But we are made ill by them only when our organism is sufficiently disposed and susceptible to the attack of the morbid agent that may be present \* \* \* hence they do not produce disease in every one nor at all times.

§ 32. But it is quite otherwise with the morbid agents which we call medicines. Every real medicine acts at *all* times, under *all* circumstances, on every living human being, and produces in him its peculiar symptoms.

§ 33. In accordance with this fact, it is undeniably shown by all experiences that the living human organism is much more disposed and has a greater liability to be acted on, and to have its health deranged by medicinal powers than by morbid noxious agents and infectious miasms, or, in other words, *that the morbid noxious agents possess a power of morbidly deranging man's health that is subordinate and conditional; whilst medicinal agents have an absolute unconditional power, greatly superior to the former.*

This question of susceptibility and malignancy should be studied more thoroughly, for it is an important factor in the treatment of both acute and chronic diseases in all their phases. The inherited tendencies to tubercular and other constitutional affections, like susceptibility, may be eradicated from the growing child by careful dietetic, hygienic and homeopathic treatment; and this work is the peculiar province of the true followers of Hahnemann.

**CLINICAL CASES.**

BY W. L. REED, M. D., St. Louis, Mo.

**MALANDRINUM.**—A railroad official living in Oklahoma wrote me saying he expected to be transferred to St. Louis, and desired to know whether he could be protected from the vaccination fiends. I wrote him I had a scheme that I had worked quite successfully in thwarting this demon of disease. He brought his two children to my office. I scarified each of their arms, and sprinkled on the denuded surface a little crude Antimonium art. Gave a powder of Malandrinum to be put into half a glass of water, a teaspoonful to be given three times a day. After taking the medicine three days they were compelled to desist as it produced fever and lassitude, aches and pains in limbs and inflammation of arms where I had applied Ant.art., protected by court plaster. The arms became very sore. Large scabs formed after the suppurative process had subsided, as though they had been vaccinated with vaccine virus. It surely could not have been the Ant. tart. that produced such a state of affairs. Malandrinum was the cause of all this constitutional disturbance and a genuine case of vaccination. I believe that Jenner used malanders or grease heal after passing it through the animal for his vaccination virus. An eschar was formed on each arm. Many persons to whom I have given Malandrinum have been quite sick with fever. Severe backache accompanied by high fever. One little girl had a few vesicles on face. Others had no apparent physical disturbance.

I have resorted to this method because the vaccinators insist on examining the arms. I also give a certificate that I have this day vaccinated the child. I feel justified in resorting to any measures to thwart this "rape of the blood." "Personally, from what we have seen of the present day small-pox and of vaccination, we would prefer that our unvaccinated child should have the small-pox rather than the vaccination. Some of the cases of vaccination have been

far more ill than those cases of small-pox we have seen.'

To poison the blood of a healthy child is an infamy which no honorable man ought to justify himself by saying that the laws of the commonwealth command it. "Vaccination is the greatest medical delusion of this or any other age. It implies that good health is dangerous, being the highway to disease, and that disease is safety, being the road to health." It is medical insanity, and the day will dawn when vaccination will be known as a surgical superstition.

I protest against this wholesale pollution of the blood. As an American and a man with a degree of common sense, I deplore and denounce this wickedly tyrannical, this usurping law that forbids perfect health as this law surely does. It is not within the legitimate power of legislation. We have some inalienable rights that cannot be legislated away. The war against this infamy is on, and let him be accursed who says hold! enough! All other wars are toward death, but in this crusade the war is against death. Let all unite in a solemn protest against this usurpation. Exorcise this demon of disease, then the angel of health will hover over our benighted land and purify the sphere.

WHOOPIING COUGH.—The latter part of April I was called to a case of obstetrics. During the night we were very much disturbed by the coughing of the children during their sleep. I proposed a dose of medicine to the worst case. I gave Belladonna 200, dry on tongue, with immediate relief. Only one or two coughs occurred during the rest of night, to the delight of all. The mother demurred at my diagnosis of whooping cough, as there had been no exposure to it. I prescribed Bell, for all of them. One month afterwards I was called to see the father who was sick. I enquired after the children. They told me that they were in a frightful condition, worse at night. The paroxysms of each child, (three of them), coming on at different times they required the attention of some one all the time. They did not send for me, as they had been told "there was no help, and would have to cough it out, which would take



from three to six months," I said "Mrs. T—, if you will give me the symptoms of the children, when they cough and how they deport themselves during the paroxysm, what makes them feel better and what makes them feel worse, I will fit a remedy to their cases and cure them at once." The two year old child wakes up with cough, suffocating, loses breath, turns pale, then claps her hands to her mouth as though she was getting too much air. Pull her hand down she would replace it to her mouth. She had many paroxysms during the night. I prescribed Ipecac 200 in half a glass of water, teaspoonful every two hours. Coughed only once during the night, very few times thereafter, as a result.

The oldest daughter, eight years old, had fearful paroxysms, springs out of bed and gasps for breath, vomiting every time she coughed. Great anguish, wheezing breathing, and suffocation. The other child had similar symptoms but not so severe. I gave Dros. 200 in water, teaspoonful every two hours, with the happiest results. So I cured the three cases with the one prescription, and in one night. They got well at once. The gratitude of the family is very great and the astonishment of the neighbors equally as great.

SANICULA.—I was called the other day to see a little girl two years old, who had been having for three days, small, bloody, mucous stools every fifteen or twenty minutes. They were involuntary during sleep, but not so when awake. She had fever and was quite thirsty for cold drinks, was very petulant and found fault with anyone who looked at her or touched her. Tending to her during sleep did not arouse her. No tenesmus nor tormina. Sanicula 10m(Sk.) was suggested to my mind. This was at noon. By eight o'clock I was 'phoned that the child was much better. Have not heard from her since. A duplicate of the above case was promptly cured this week with Sanicula 10m.

CASE II.—I was called to see a child four weeks old. It was being fed on condensed milk which was almost immediately rejected, sometimes soured. If it did not vomit,

the bowels would run off, the stools partaking of the same character as the vomited matter. It had been in this condition about a week and had become much emaciated. Home remedies had been of no avail. I gave it a dose of Sulphur cm. and awaited results, which were nil. I then gave a dose of Sanicula 10m. (Sk.) The child was vomiting every few minutes, but the relief was immediate, even before I left the house. That night it had another vomiting spell. One more dose. No more vomiting. No more medicine. Child well. Was it the Silicea in the Sanicula?

CASE III. Some months after this, the child had a very severe attack of intertrigo, crying every time it urinated. I gave it a dose of Sulphur without much examination. Two days later I found it no better. The skin was in a high state of inflammation extending down on the thighs, rhagades and roughness. A Sulphur patient is always red and smooth. I gave Sanicula 10m. a dose, three times a day for three days. Health was completely restored. Two months after, I saw the child seriously afflicted with "summer complaint" as its mother termed it. Profuse watery discharges, very debilitating, child quite thirsty. I gave it Sanicula with perfect result. I do not see how I could practice medicine without Sanicula.

VETERINARY CASES.—A gentleman living out of the city wrote me he had a valuable bird dog that was in bad shape, and solicited help for her. "She is high strung, nervous, but very affectionate. She gave birth to a litter of scrub pups. I at once destroyed them. Her mother gave birth at the same time to a litter of "fine-haired" pups. After my dog found her family was gone, she took possession of her mother's family. In a few days the animals got to quarreling and fighting over which should be mother to the pups. So I locked Cricket (my dog) out of the kennel. From this time her trouble began. Desired various things to eat, but when offered food her appetite fails. She has become a mere skeleton; rough hair, eyes glassy, walks zig-zag, when she sits down falls over backwards, vaccillating gait, trembling head and bent back, accumulation of

saliva, putrid odor from mouth, stiffness of neck, jerking of limbs and trembling of body, hides herself. I have given her Bell., Mer., Sulph. and Zinc with no result. Please send me something for her." I sent him Ignatia 200 to be given three times a day till improvement was assured. She was speedily restored to health. His "horse-doctor" friends told him there was no help for the animal. He said "I will see what little pills can do." The results were astonishing to them.

SICK HORSES—A patron, an uncompromising homeopath, came to see me about his family horse. He was in great distress when standing on his feet, especially painful walking on hard pavement. He called in a veterinary surgeon who said he had fever in his feet and that the sole was very tender, as he flinched when punching pinchers were used. He ordered them to dig up the ground and make a puddle and let him stand in it. This he said would draw out the fever. I denounced this procedure in unmeasured terms, as it was liable to produce rheumatism in addition to the existing ailment. He did not consider that there was a dyscrasia in the system that produced the hot feet and tenderness. I ordered three powders of Lyc. 200, one a day. At the end of this period the horse was entirely well.

My own horse was turned out to pasture for one month. When he returned the liveryman 'phoned me to come and see my animal after a months rest and starvation. He was in excellent order when put in pasture. I found him a skeleton, very weak. They said at the stable that he was off feed and that he needed condition powders, which would give him an appetite. I called for a little feed. He took a mouth full and refused to take any more. I gave a dose of Lyc. 43m. Next morning he ate a hearty meal and was soon ready for service.

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DISCUSSION.—C. M. Boger, M. D.—Dr. Reed's last case reminds me of one I have had under treatment for about a year, for a tumorous growth in the ovary. I prescribed rather unsuccessfully, so she went to an allopathic surgeon

and he extirpated it. In a few weeks she sent for me suddenly and complained of acute phlebitis of the left leg, and wanted to know what to do for it. I told her the best thing to do would be to send for the allopathic surgeon to cut off her limb. Finally I prescribed Hamamelis and got rid of the phlebitis, but since its disappearance the irritation and growth in the ovary has returned

In reference to the doctor's cases for which he has been prescribing homeopathically, I would respectfully refer them to our mental-suggestion friends; also the instances where we prescribe for people, who are in a comatose condition, and when we give medicine during sleep. Those are all points for consideration.

L. P. Munger, M. D.—Mr. Chairman, I have my paper prepared but will not read it, as we have many more papers to be read. I had five cases of small-pox last year. Vaccine does not stop it, or the administration of vaccinum in any potency. I found that out to my own satisfaction. Vaccine, vaccinum or variolinum won't stop it. If anybody runs against small-pox you will find out that vaccination will give it the black eye before you get through with it.

H. C. Allen, M. D.—Mr. Chairman, that horse case reminds me of a case that occurred here in the city several years ago. A veterinary surgeon came in to see me one morning and said: "I want you to go in consultation with me and see a horse." I replied that I knew little about horses; I simply treated my own. He said: "There is a good fee connected with it. The man has just paid \$1500 for the horse and he is going to die of pneumonia. Something has got to be done for him before night." I went to see the horse. He gave me the temperature and pulse. Both were abnormally high. The breathing was very rapid; the horse simply staggered in his stall. He was intensely thirsty; had a loose, involuntary diarrhoea, and the anus protruded largely and was wide open—one and one-half or two inches open and had been so for twenty-four hours. I gave the veterinary two powders of Phosphorus; one to be given at once, and another dose of Phosphorus, *cm.*, saying: "Do

not give the last unless this horse gets worse about nine o'clock tonight," as horses very often do with pneumonia. The horse improved during the day, but towards night became worse again; the next morning the doctor came in with a smile on his countenance and said: "The horse is standing up, eating hay, and practically well." The doctor was astonished. He wanted to know what I had given him. I did not tell him the name of the remedy. I gave him the information, and he said he would like to experiment a little with Homeopathy in veterinary diseases. He began his experiments with a case, and finally entered Hering College, took his medical course, and is now one of our best practitioners, treating all his animals homeopathically and with the potentized remedy. (Applause.)

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## SULPHUR.

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By E. A. HEATH, M. D., London, England.

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Sulphur, the old! old! remedy. The remedy. The remedy that our grandmothers used to give us, as the panacea for all ills, the purifier, the "Spring medicine," that was supposed to purify our blood and remove all skin trouble, the remedy we all remember in brimstone and treacle, of milk and sulphur—the greatest of antipsories, the remedy that a follower of Hahnemann finds it impossible to do without; who, that know anything about the Homeopathy of Hahnemann, does not know that his best and most brilliant cures have been made with this very old, very common, and altho' much esteemed at one time, now much despised remedy. A remedy intended for the use of man, for it is found the world over, an elixir of life, for its virtues are many, whether in a pure state or combined with some other mineral. No one could doubt Hahnemann's theory of Psora, if he would study up his cases, to find how many, many times, Sulphur will cover the symptoms, according to the grand "law of similars," and so give him his most splendid cures.

Why does Sulphur prevent intermittent fever, small pox, cholera, scarlet fever and a multitude of other diseases? Simply because it helps to remove the constitutional pre-disposition (*psora*) to these diseases; without the predisposition to disease, no disease can be acquired, there must be the predisposing, as well as the exciting cause. This being so, the microbe theory, if you can call it a theory, is the rankest nonsense. Do we ever think of the vast numbers of healthy people who come in contact with infectious diseases and fail to be influenced by them? But in this 20th century what is the profession doing? Instead of eradicating the morbid conditions that favour disease, and so making healthy human beings—health being their greatest protection against disease—the people are poisoned from their birth upwards, by having diseases put into their blood, thus controverting and subverting all the laws of health. Two wrongs do not make a right.

Even supposing that small pox could be prevented by vaccination, that is not the most important thing to be considered. The first thing to consider is how vaccination affects *mortality*. What advantage will it be to save a thousand from small pox and lose five or ten thousand from other diseases, caused directly or indirectly by the inoculation of animal diseases into human beings? How are we to account for the terrible mortality amongst children, but by the fact that by these inoculations we increase their morbid conditions, and so lay them doubly open to acquire diseases, which otherwise they would not have. Jenner says that vaccination can only be successful if the vaccine is made by taking the discharge from the heel of a horse afflicted with the disease called "Grease," and applying the discharge from this disease to the udder of the cow or calf. The fluid in the resulting blister (called *pure lymph*) is then to be put into the blood of the newly born babe, to protect it from small pox, a disease that, not one in 10,000 people have, and which none would have if the laws of health were obeyed, and the morbid conditions of the human being removed.

Jenner further says, that when vaccinated with lymph

so obtained, the system is permanently altered. I fancy I hear some one say, then if permanently altered by introducing a disease into the blood, it must be permanently diseased? Quite so! This is being proved up to the hilt, every day; but Jenner also says, the person so vaccinated will be *forever* exempt from small pox. In answer to this, let me say that ninety-five out of every hundred admitted into the small pox hospitals of London, with the disease, have been vaccinated.

Can there be any doubt of the terrible increase of cancer, when we know that it has steadily increased since vaccination was introduced in 1807. In 1840 the deaths from this disease had arisen to 177 per million in England and Wales; in 1850 to 279 per million; in 1896 to 760 per million, and is still increasing by leaps and bounds, in spite of external sanitation, the best the world has ever seen. No! the cause of cancer is filthy animal diseases put *into the blood*, internal filth. Who can tell the cause of the terrible epidemics of influenza, unknown till recent years, in the malignant form we now know it assumes. I believe that the new form of influneza is only the old influenza occurring in those whose blood has been contaminated by the inoculation of animal disease, thus forming a new hybrid disease. Do not endless varieties of disease arise by the union of different families, the children partaking of the taints of disease inherited from both parents?

The more we play with the laws of life—the more we interfere in this with human life—the more we shall have to pay and suffer!

What we have to do is to eradicate the morbid conditions under which disease arises, and so produce healthy bodies that will resist disease. Sulphur is one of the chief remedies to this end. It will tend to remove the disposition to African fevers. I have treated people both in East and West Africa with this remedy, and they have lived years in those parts with little, if any, fever, in some cases with none. I have treated chronic African dysentery with this remedy absolutely successfully in a few weeks.

Sulphur is one of the great prophylactics against cholera. It is said that taking it internally, or wearing it next to the skin will protect from this disease. Sulphur tends to remove the morbid state which lays us open to the infection of cholera.

Sulphur is a great remedy for the gout, a sheet anchor in hemorrhoids, in dyspepsia, in constipation, in liver troubles, because all these troubles depend on psora.

The following cases will show its wonderful power:—

The Rev. H.: Large external piles, said by one doctor to be incurable without operation. Sulphur 200 cured within 10 days. No return whatever, now more than 15 years.

Miss F. D.: Gastric ulcer 8 years ago, now severe pains in stomach and abdomen two hours after eating; cannot bear pressure of clothes; severe uterine pains at the time of period lasting all the time. One week after taking Sulphur 200, pain almost gone; at the end of one month perfectly well, and remains well to this time, 9 months. This case caused great anxiety to the friends, who thought her in a very bad way, she certainly looked so, and she suffered four years.

The Rev. S. B.: Chronic dysentery contracted by the river Congo, very much better in one week, well in three months with Sulphur 200.

Lady L. H. æt. 60. Great pain in lower part of abdomen with aching in lower sacrum, feels as if her abdomen was swollen; has weight, or bearing down. Periods used to be excessive. Mother died of cancer. Found organs normal. Sulphur cured the pains in a week; they had existed three or four months.

I never give Sulphur in a lower potency than the 200. It always acts curatively if Sulphur is the remedy, but Sulphur in any potency cannot cure a Psorinum or Nux vomica patient. Many have no conception of what a strong power of Sulphur will do until they try it, when low or weak potencies of the remedy that is homeopathic to the case often gives no result.



## A CASE FROM PRACTICE.

JOSEPHINE HOWLAND, M. D., H. M., Auburn, N. Y.

In my early practice I was asked by the head of a homoeopathic hospital to take a case of obstetrics. She gave me as an excuse that she had something else to do herself. I went to the case at 10 p. m. and found a sixteen-year old unmarried colored girl in labor. She had been in labor three days. There was no progress. The other physician, who claimed to be a homeopath, had given her a dose of epsom salts in the morning. The patient was weeping. Upon examination I found transverse presentation. In a few moments after taking the symptoms I recognized that I had a Pulsatilla case. I, therefore, gave her Pulsatilla 51m. She stopped her crying in a few moments and quieted down.

In a short time the child turned in the uterus about one fourth of the way. There was then no further progress. I waited some time upon the case and concluded that I was unable to deliver her. I, therefore, called back the former physician and she sent for an elderly woman physician who had delivered seventy five cases by forceps and she applied forceps to this case. We tugged and pulled upon this case until toward morning with no progress. I then said I know where I can get a doctor who will deliver this woman. I therefore went to the maternity hospital and asked a doctor whom I knew to come and help us out, which she did. She performed the Braxton-Hicks method of delivery and delivered the woman in a very short time.

I did not know then as much as I do now, or I would have delivered this woman without any trouble. What she wanted was a higher potency of Puls.; 51 m. was used up in a short time and she should have immediately been given a cm. potency and even a 5 cm. or mm. if necessary.

This would have completed the version, and the woman would have been delivered without any trouble.

## EDITORIAL.

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All Contributions, Exchanges, Books for Review and other communications should be addressed to the Editor, 5142 Washington Ave., who is responsible for the dignity and courtesy of the magazine, but not for the opinions of contributors.

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### THE HAHNEMANNIAN PHYSICIAN.

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By resolution the American Institute of Homeopathy has authorized the following definitions:

*Regular Physician*—A graduate of a regularly incorporated medical college. The term also applies to a person practicing the healing art in accordance with the laws of the country in which he resides.

J. W. DOWLING, M. D.

This is the legal definition and has no reference whatever to the mode of practice; for when considered from the standpoint of science there is nothing more *irregular* than the therapeutics of the dominant school. When given the symptoms of a case of pneumonia for instance—as given by Dr. Chapman in the *Medical World* last winter—there were no two prescriptions alike, though many prescribed. Hence the term “regular” means any legally licensed practitioner, and has no reference whatever to school or mode of practice.

*Homeopathic Physician*.—A homeopathic physician is one who adds to his knowledge of medicine a special knowledge of homeopathic therapeutics and observes the law of similia. All that pertains to the great field of medical learning is his, by tradition, by inheritance, by right.

EUGENE H. PORTER, M. D.

This is good as far as it goes, but is neither sufficiently comprehensive nor explicit, for it takes for granted that the homeopathic physician “observes the law of similia” in the practice of the healing art as advocated by Hahnemann in his immortal *Organon*. But do the large majority of the homeopathic profession select the single remedy on the totality of the symptoms? Do they ever use the single remedy selected on any basis, pathogenetic or pathological? There would be no use for the combination tablet if they did,

and the mixture and alternation of remedies would be unknown.

*Hahnemannian Physician.*—The following resolutions express the therapeutic opinions and represent the practice of the members of the Hahnemannian Association.

1. The law of similars is the law of cure.
2. A knowledge of the curative power of medicines is derived from provings made upon healthy persons.
3. Hahnemann's Organon of the Healing Art is the true guide in therapeutics.

4. The totality of the symptoms forms the only basis for the selection of the remedy, and the best results are attained by the use of the minimum dose of a single remedy in a potentized form. Therefore be it

*Resolved,* That the alternating or combining of remedies in a prescription is non-homeopathic.

*Resolved,* That the suppression of symptoms by crude medicines in large doses, and by local treatment is non-homeopathic.

*Resolved,* That mechanical appliances are admissible only when mechanical conditions are to be overcome.

*Resolved,* That we deprecate any practice which tends to the suppression of symptoms, inasmuch as it injures the patient and renders difficult the selection of the remedy.

*Resolved,* That we disavow all connection with that practice which, under the guise of Homeopathy is at variance with the law of similars and its conditions as deduced by Samuel Hahnemann.

This definition is taken from the Organon and is the standard of practice of the Hahnemannian physician, and should be the standard of every man or woman who professes to be a homeopath and a follower of Hahnemann. The large majority of those who have found the true way of the master have become converts to it because of its wonderful success in the healing of the sick, after years of practice of Allopathy, Eclecticism and the mixed alternating, unscientific, guessing practice of the so-called homeopathic physician. They have tried all the others and have found them wanting in the hour of trial in acute diseases and equally unsuccessful when a chronic disease is to be eradicated.

Moreover, the more advanced teachers and practitioners of the dominant school are rapidly tending to the use of the

single remedy, even in the crude form, and abandoning the polypharmacy of their schools so severely condemned by Hahnemann. At Johns Hopkins, we are reliably informed, drugs have been abandoned in the treatment of typhoid, and a strict expectant treatment substituted as much more successful and satisfactory. Why should a professed follower of Hahnemann at the beginning of the twentieth century need such an object lesson from his allopathic colleague?

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Now for the application. Some years ago we referred a patient whom we had recently rescued from the chains of drugs to a well known so-called homeopathic physician in Hot Springs. In due time he consulted the doctor and was referred to the drug store for a prescription that called for a villainous compound of five or six ingredients. He declined to take the drugs and promptly wrote us his opinion of "Hot Springs Homeopathy," as he called it. It was a lesson for us and we have since used more care in our recommendations. That Hot Springs is not alone in such prescribers see a chapter from the experience of Dr. J. C. Fahnestock in our September issue in defense of the Hahnemannian Directory.

Others evidently have met the same question, for we receive many enquiries for the name of "a Hahnemannian Physician," the "best homeopathic physician" or one who "uses the single remedy" in many towns and cities in every part of this country and in Europe, and our Directory is an attempt to furnish our colleagues this information. It is far from perfect, but it is the best we can do at present. We cannot vouch for the practice of all whose names are given. We do not intend to exclude any man or woman who practices pure Homeopathy, nor to include any who alternate or mix if we know it, and we appeal to our colleagues for aid in extending and perfecting the list. But our efforts do not satisfy some of our cotemporaries, evidently, for one resorts to the school-boy-trick of calling names. Yet we presume there must be a distinctive name for each class and "Simon

**Pure** and **‘Mongrel’** may serve as well as any. In the *Critique* Dr. Clark asks for explanations.

## SIMON PURES.

*Editor Critique*.—In your June issue you very kindly gave place to a communication of the undersigned that carries a false idea in regard to the MEDICAL ADVANCE list of single remedy prescribers. We assumed at that time that the directory was simply their subscription list. We desire to acknowledge our error, as the September issue of that very valuable journal informs us that “many names in the directory are not readers of the ADVANCE.” The directory has been compiled from various sources, but no name is admitted without “some evidence of the homeopathy he or she dispenses.”

Colorado is burlesqued in this directory by two “simon pures,” and according to the news department of the ADVANCE, in the same issue, the Denver “simon pure” has moved to Sewickley, Allegheny county, Pa. The other one may be living, and we have tried to secure some evidence of it, but beyond the fact that our letters are not returned, she might as well be dead.

We have a college here in Denver and, according to the ADVANCE, not even one “simon pure” in the whole faculty. The chair of *Materia Medica* and that of the *Organon* one would naturally think, should have at least a glimpse of simon pureness about it. Now, Brother ADVANCE, are you not doing our college an injustice in saying that Dean Willard, Professor Peck, Professor Dodge and Professor Mastin, with Instructor Mussman, are not, any of them, worthy to associate with your “simon pure” crowd? And then there is our Professor Burr, who lectures upon the *Organon*, is he unfit for that job, or has the ADVANCE made a mistake?

The thought comes to us that possibly we are not any worse off than other colleges, so we hunt up the announcements of Boston, New York, Philadelphia, California, Pulte and the Chicago Homeopathic, and we find that there are just two “simon pures” connected with these same chairs in these six colleges. We look for Arndt and find him not; Goodno, not there; Cowperthwaite, non est; Boericke’s principles very shaky; Kent, Kent, the dean of the only simon pure Homeopathic college on this mundane sphere—evidence evidently not all in, but what has been received up to the hour of going to press left him in the not proven class. Come, Brother ADVANCE, withdraw your list until you can publish one that is not a burlesque, for as it stands now we might be accused of being “unfair” because we might send a patient to some mon-

grel like the dean of the only Homeopathic College in Chicago, or the editor of the Hahnemannian Advocate. EDWIN JAY CLARK.

September 29, 1902.

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By the aid of a correspondent in Denver we are enabled to add the names of several physicians in Colorado to our Directory and thus remove to a slight extent the "burlesque" from the homeopathic reputation of the mountain state. Now, as to the faculty of the Denver college, which we admire for its enterprise, energy and pluck, we have added the names of the Drs. Enos very gladly, but a search through current literature fails to produce any evidence that would warrant us in referring a patient for single remedy treatment, to any other members of the faculty, even the Senior Professor of Materia Medica or the lecturer on the Organon. But to those who have attended the American Institute long enough to become a senior, the fine vein of sarcasm in Dr. Clark's letter is really amusing. Compare the Practice of Arndt, Goodno, Cowperthwaite, Anders and Osler with the teaching of the Organon and the declaration of principles of the Hahnemannian Physician, and it becomes more apparent that Dr. Clark is using our Directory to whip the faculty of the Denver College into the homeopathic column, for which we are duly grateful. And we assure him we shall be only too happy to include the entire faculty as soon as its members will endorse the principles of the Hahnemannian Physician. As a preliminary step we suggest the formation of an Organon club with Dr. Enos as president, for the enthusiastic study of the bible of Homeopathy.

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We regret that we cannot include the names of Dean Willard, head of the chair of Materia Medica, or Professor Burr, lecturer on the Organon, for we have never seen or heard of any single remedy work by either of these teachers reported in any homeopathic periodical. nor do we think either of these representative college men claim to do such work. And is not this also true of most of the members of

the faculty of the Denver college as well as the other colleges mentioned by Dr. Clark. No, you will not find Arndt, Goodno, Cowperthwaite, Anders nor Osler in the list, each of whom has written a valuable work on the Practice of Medicine so far as etiology, pathology, diagnosis and prognosis go, but each teaches the treatment of the disease and overlooks and neglects the patient and his or her individuality, just what Hahnemann recommends us not to do.

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### IN MEMORIAM.

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Timothy Field Allen, A. M., M. D., LL. D., Professor of Materia Medica and Therapeutics in New York Homeopathic College died Dec. 6, 1902. He was born in Westminster, Vt., April 24, 1827. His father was a physician and practiced over fifty years. He was graduated from Amherst College in 1858, taking his A. M. in 1863, and from the Medical Dept. University of New York in 1861 and began practice in Brooklyn. In 1862 he entered the army as Acting Assistant Surgeon and was stationed at Point Lookout. In 1863 he resigned his commission and entered into partnership with Dr. Carroll Dunham for two years. He studied Homeopathy under the late Dr. P. P. Wells. In 1866 he was Prof. of Chemistry in the New York Medical College for Women; in 1867 Prof. of Anatomy in the New York Homeopathic Medical College, and in 1871 was made Prof. of Materia Medica and Therapeutics in the same college which he held till his death, and which he honored in the holding. In 1867 he became surgeon to the New York Ophthalmic Hospital for which he secured the endowment of \$100,000 from Miss Emma King. But he was best known and will be longest remembered as the author of the "Encyclopædia," the "Handbook" and the "Primer" of Materia Medica. As a teacher he had few equals and no superiors in the class room, and his death will be lamented by the homeopathic world. His colleagues in the faculty of the New York College will have the sympathy of the profession for in the past few months death has been busy in its ranks.

## NEW PUBLICATIONS.

**BONNINGHAUSEN'S CHARACTERISTICS and REPERTORY: A PRACTICAL WORKING MANUAL OF MATERIA MEDICA.** By C. M. Boger, M. D., Parkersburg, W. Va.

This will form a volume of 900 or 1,000 pages, and in our notice in a former issue we made a mistake in the price. It is to be \$6.50 not \$5.00, and subscriptions may be sent to the author direct. Over one hundred more subscribers are needed to guarantee the publication of what bids fair to be one of the best working manuals on our office table, for it will be a practical *Materia Medica* brought up to date, with a repertory attached. We might as well practice surgery without instruments as to try to practice Homeopathy without tools (books.) You cannot get this book without subscribing, and in our opinion you will not take twice the price for it after you have used it. We urge our readers to help publish it, for it will help them in their daily professional work to make quick and accurate prescriptions and save much valuable time and prevent guessing, and careless "slipshod" work.

**ESSENTIALS IN PHARMACEUTICS.** By L. H. Witte, Homeopathic Pharmacy, Cleveland, Ohio, 1902.

This is a small pocket volume of 80 pages, giving 235 "definitions and elucidations" of pharmacy and pharmaceutical terms. It is brief, epigrammatic and practical, just what a student needs to master some of the essentials of the science.

**MOTHER, BABY AND NURSERY,** By Genevieve Tucker, M. D., Pueblo, Col. Little, Brown & Co. Boston. Illustrated. Small 4to. Cloth; \$1.50.

The object of this work is to furnish a practical summary of the hygiene and physical development of the infant. It is intended to be a guide to mothers, particularly the inexperienced. It purposes to teach and help a mother to understand her babe, how to feed it, to place it in pleasant surroundings, to watch its growth and development with intelligence and thus relieve in a measure the undue anxiety



and nervous uncertainty of a new mother. The book is not intended in any measure to take the place of a physician, but rather to aid the physician in teaching the mother to care properly for her babe when well, that she may better nurse it when sick. It is just the book that is so often asked for and so much needed by young mothers, and it is doubtful if many physicians can give as good advice in such a plain, unostentatious manner. We congratulate both author and publisher, for it is well printed.

The contents are: Heredity, Prenatal Period, The Little Stranger, Growth and Development, Bathing, Dress, Sleep, Crying Babies, The Eyes, Nursing, The Wet-Nurse, Weaning, Feeding after Weaning, Teething, Hand-Feeding, Bowels and Kidneys, Posture, Exercise, Habit, A Study of Babies, The Baby's Basket, Nursery Pointers, Nursery Dont's.

DOCTOR BRYSON: A NOVEL. By Frank H. Spearman. Pp. 308. Charles Scribners' Sons, New York, 1902.

The scene is laid in a medical college in Chicago, the Eye and Ear clinic of which is "the largest in the world." The college is "situated in the very heart of the most typical of the great cities of America, less than two minutes' walk from all surface terminals and within the loop of the elevated systems;" it enjoyed a "large clinic." Doctor Bryson was offered the position of surgeon-in chief for the eye when the aforesaid "large clinic" was in the catalogue only, *i. e.* on paper. The reception room was large; there was a large medical staff and a large body of expectant students, but the clinic—"the misery"—was wanting. How to get it was the problem with which the trustees of the college were wrestling then, just as many are today. This was his reply: "If I take the surgery of the eye, it must be on this condition—that no student of the institution be permitted to touch the eye of a clinic patient. Operations upon the eye, however slight, must be performed by the surgeons and assistant surgeons of the staff, and by them alone. \* \* \* Let the poor be assured that there will be no experimenting in their distress and we can work up a

clinic here that will beat Vienna." This is a post-graduate institution, every student is already an M. D., and the very natural query of the trustees was: "What will become of our classes? What of the school?" But Doctor Bryson's firm reply: "I don't want a student operating on my eye; you gentlemen would not want one cutting into yours," carried the day. The doctor was given the position and one of the largest eye clinics in the world is probably the result. The first unusual operation was for glaucoma by severing "the superior ganglion of the cervical sympathetic." It was of course a great success. The profession of Chicago and surrounding states should certainly read this romance, if for no other reason than to be posted on the latest works of fiction. But it is both worth the reading and the money.

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#### NEWS ITEMS.

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Dr. Chas. W. Johnson, 33 East Monroe St., Jacksonville, Fla., will be pleased to render professional services to any patients who may be referred to him.

John B. Delbridge & Son has opened a homeopathic pharmacy at 65 Washington Street. As the junior partner of the late firm of Gross & Delbridge he is well known to the profession and we wish him success in his enterprise.

E. W. Berridge M. D. London, has a caustic criticism on "Christian Science, Weighed in the Balance and Found Wanting" in the November No. of Anubis. We hope to find space for the entire article in some future issue.

S. E. Chapman M. D. has removed from Napa to Watsonville Cal. his old field of labor, and where he had a lucrative practice in times past, and from which point he sprung his now celebrated "Lycopodium case" upon the sleeping irregulars. A good move.

T. E. Linn, M. D., Ashville, N. C., is the sole homeopathic representative in that beautiful and healthy mountain resort. Insomnia, neurasthenia, melancholia, malaria and incipient tuberculosis are greatly benefited or cured by a few weeks of out door life there. The doctor deserves success for his plucky upholding of the banner of similia

"The True Cause of Typhoid, I have read more than a dozen times and each time I always see new points. I would not take \$100 for that

copy of the *Advance* and the knowledge I have obtained from it, and for fear I might lose the *Advance* I have pasted fly leaves in my working *Materia Medica* and copied most of it so I can see it often." A. C. M.

Citronelle, Ala. is a famous health resort from October to April, situated in the heart of the long leaf yellow pine belt, thirty-three miles north of Mobile, on the Mobile & Ohio Railroad. It is the highest point, equally distant from the coast, between Main and the Rio Grande River. Dr. Duffield formerly of Huntsville, Ala., is the resident homeopath.

Philip Rice M. D. (Hering, '94,) has been elected to the chair of Rhinology and Laryngology in Hahnemann College, San Francisco. One chair at least will have pure Homeopathy in a specialty for which the graduates will be thankful to their Alma Mater; for all diseases of the nose and throat are as amenable and will respond as readily to the simple, single, similar potentized remedy as any other organs of the body, without medicated topical applications.

The *Atlantic Monthly* for November contains an article by Dr. A. B. Norton on "The Care of Eyes." The author calls attention to the increased number of people wearing glasses. He thinks, as do many others, that the deteriorating eyes are due to neglect and the injudicious use of glasses. Why not investigate the effect of coffee and especially tobacco as factors in this general nervous deterioration? But specialists who use these stimulents are not prone to look that way.

Dr. H. A. Whitfield, Garden City Kansas, is much pleased with the climate where he has recuperated and is engaged in active practice again. He writes: "We are rejoiced in the combination of Hering-Dunham College, a great deal better than a combination tablet. In the college combine, union is strength; in the tablet combine, union is discord; discord is weakness and a manifestation of laziness on the part of the physician who prescribes, a delapidated foresight a kind of neurasthenic asthsnopia."

In the Same Situation. A funny story is told about a physician at Monroe City. A resident of the town set out shade trees for the doctor. A short time later the physician was called to attend the mother-in-law of the man who had set out the trees. The old lady died, and the physician presented his bill. After paying it, the citizen thought of the trees and made out and presented a bill for them. "But the trees died," protested the doctor. "So did my mother-in-law," retorted the man. The doctor paid up.

Look out for him: For nearly a year past, many of the doctors and dentists have been victimized by a very clever swindler who has passed

under several aliases among them, R. G. Stearns, R. L. Nelson, and others. He claims to represent The Success Company, publishers of the *Success* magazine, and takes orders for numerous magazines comprised in the Success Clubbing Offers. He works very rapidly, jumping from town to town, and always among doctors and dentists. The Company offers \$50 for arrest and conviction.

Dr. R. N. Tooker died Nov. 9th of apoplexy it is supposed. He was one of the founders of the Chicago Homeopathic College. Professor of Diseases of Children and author of a work on Diseases of Children as well as a frequent contributor on his specialty in the current literature of our school. He was born in Rochester, N. Y., March 28, 1841. After graduating from Genesee college at Lima, N. Y., in 1859, he came to Chicago and studied medicine for two years in Rush Medical college. In 1865 he entered Bellevue Hospital Medical college in New York, graduating a few years later, and then served as acting assistant surgeon in the army. He settled in Chicago in 1873.

Dr. A. W. Woodward, Professor of Materia Medica and Clinical Therapeutics and one of the founders of the Chicago Homeopathic College, died Nov. 9th. He was born July 18, 1839, in Barnstable, Mass. In 1847 he moved to Galena, Ill. He received his preliminary education at Platteville, Wis., under Prof. J. L. Pickard, where he remained until 1857. He came to Chicago in 1860 and was engaged in business until January, 1862, when he enlisted in the First Illinois volunteers. He was promoted shortly afterwards to second lieutenant, and participated in the battles of Pittsburg Landing, Memphis and Vicksburg. Returning to Chicago in 1863, he entered Hahnemann Medical college, from which he graduated in 1865, and has been in active practice until two years ago. We understand a volume on Materia Medica from his pen is now running through the press of Boericke & Tafel, under the title of Constitutional Therapeutics. He was the most noted teacher and writer on the sequence of action of remedies in our school.

The First Annual Dinner by the Editors of the *Medical Critic* to the chief of Staff Dr. F. R. Sturgis was given at the Waldorf-Astoria Nov. 15th and was very enjoyable. Mr. Wm. Purington of the New York bar acted as toast master. In responding to "My Friendly Hosts" Dr. Sturgis said the *Critic* had endeavored to be impartial and justly, fearlessly it commended, defended, denounced whatever called for criticism either in the profession or its current literature. "The Medical Press" called out Dr. H. M. Christian of Philadelphia "The Legal Profession" was responded to by Justice Woodward who recorded some amusing personal experiences with a physician in Buffalo, showing how eminent men may differ. We are indebted to Dr. A. E. Austin of New York for a report of a successful, social and fraternal gathering and the *Critic* has our best wishes for its success.

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H. C. ALLEN, M. D., Editor.

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clinic here that will beat Vienna." This is a post-graduate institution, every student is already an M. D., and the very natural query of the trustees was: "What will become of our classes? What of the school?" But Doctor Bryson's firm reply: "I don't want a student operating on my eye; you gentlemen would not want one cutting into yours," carried the day. The doctor was given the position and one of the largest eye clinics in the world is probably the result. The first unusual operation was for glaucoma by severing "the superior ganglion of the cervical sympathetic." It was of course a great success. The profession of Chicago and surrounding states should certainly read this romance, if for no other reason than to be posted on the latest works of fiction. But it is both worth the reading and the money.

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#### NEWS ITENS.

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Dr. Chas. W. Johnson, 33 East Monroe St., Jacksonville, Fla., will be pleased to render professional services to any patients who may be referred to him.

John B. Delbridge & Son has opened a homeopathic pharmacy at 65 Washington Street. As the junior partner of the late firm of Gross & Delbridge he is well known to the profession and we wish him success in his enterprise.

E. W. Berridge M. D. London, has a caustic criticism on "Christian Science, Weighed in the Balance and Found Wanting" in the November No. of Anubis. We hope to find space for the entire article in some future issue.

S. E. Chapman M. D. has removed from Napa to Watsonville Cal. his old field of labor, and where he had a lucrative practice in times past, and from which point he sprung his now celebrated "Lycopodium case" upon the sleeping irregulars. A good move.

T. E. Linn, M. D., Ashville, N. C., is the sole homeopathic representative in that beautiful and healthy mountain resort. Insomnia, neurasthenia, melancholia, malaria and incipient tuberculosis are greatly benefited or cured by a few weeks of out door life there. The doctor deserves success for his plucky upholding of the banner of similia

"The True Cause of Typhoid, I have read more than a dozen times and each time I always see new points. I would not take \$100 for that

copy of the Advance and the knowledge I have obtained from it, and for fear I might loose the Advance I have pasted fly leaves in my working Materia Medica and copied most of it so I can see it often." A. C. M.

Citronelle, Ala. is a famous health resort from October to April, situated in the heart of the long leaf yellow pine belt, thirty-three miles north of Mobile, on the Mobile & Ohio Railroad. It is the highest point, equally distant from the coast, between Main and the Rio Grande River. Dr. Duffield formerly of Huntsville, Ala., is the resident homeopath.

Philip Rice M. D. (Hering, '94,) has been elected to the chair of Rhinology and Laryngology in Hahnemann College, San Francisco. One chair at least will have pure Homeopathy in a specialty for which the graduates will be thankful to their Alma Mater; for all diseases of the nose and throat are as amenable and will respond as readily to the simple, single, similar potentized remedy as any other organs of the body, without medicated topical applications.

The Atlantic Monthly for November contains an article by Dr. A. B. Norton on "The Care of Eyes." The author calls attention to the increased number of people wearing glasses. He thinks, as do many others, that the deteriorating eyes are due to neglect and the injudicious use of glasses. Why not investigate the effect of coffee and especially tobacco as factors in this general nervous deterioration? But specialists who use these stimulents are not prone to look that way.

Dr. H. A. Whitfield, Garden City Kansas, is much pleased with the climate where he has recuperated and is engaged in active practice again. He writes: "We are rejoyced in the combination of Hering-Dunham College, a great deal better than a combination tablet. In the college combine, union is strength; in the tablet combine, union is discord; discord is weakness and a manifestation of laziness on the part of the physician who prescribes, a delapidated foresight a kind of neurasthenic asthsnopia."

In the Same Situation. A funny story is told about a physician at Monroe City. A resident of the town set out shade trees for the doctor. A short time later the physician was called to attend the mother-in-law of the man who had set out the trees. The old lady died, and the physician presented his bill. After paying it, the citizen thought of the trees and made out and presented a bill for them. "But the trees died," protested the doctor. "So did my mother-in-law," retorted the man. The doctor paid up.

Look out for him: For nearly a year past, many of the doctors and dentists have been victimized by a very clever swindler who has passed

under several aliases among them, R. G. Stearns, R. L. Nelson, and others. He claims to represent The Success Company, publishers of the *Success* magazine, and takes orders for numerous magazines comprised in the Success Clubbing Offers. He works very rapidly, jumping from town to town, and always among doctors and dentists. The Company offers \$50 for arrest and conviction.

Dr. R. N. Tooker died Nov. 9th of apoplexy it is supposed. He was one of the founders of the Chicago Homeopathic College. Professor of Diseases of Children and author of a work on Diseases of Children as well as a frequent contributor on his specialty in the current literature of our school. He was born in Rochester, N. Y., March 23, 1841. After graduating from Genesee college at Lima, N. Y., in 1859, he came to Chicago and studied medicine for two years in Rush Medical college. In 1865 he entered Bellevue Hospital Medical college in New York, graduating a few years later, and then served as acting assistant surgeon in the army. He settled in Chicago in 1873.

Dr. A. W. Woodward, Professor of Materia Medica and Clinical Therapeutics and one of the founders of the Chicago Homeopathic College, died Nov. 9th. He was born July 18, 1839, in Barnstable, Mass. In 1847 he moved to Galena, Ill. He received his preliminary education at Platteville, Wis., under Prof. J. L. Pickard, where he remained until 1857. He came to Chicago in 1860 and was engaged in business until January, 1862, when he enlisted in the First Illinois volunteers. He was promoted shortly afterwards to second lieutenant, and participated in the battles of Pittsburg Landing, Memphis and Vicksburg. Returning to Chicago in 1863, he entered Hahnemann Medical college, from which he graduated in 1865, and has been in active practice until two years ago. We understand a volume on Materia Medica from his pen is now running through the press of Boericke & Tafel, under the title of Constitutional Therapeutics. He was the most noted teacher and writer on the sequence of action of remedies in our school.

The First Annual Dinner by the Editors of the *Medical Critic* to the chief of Staff Dr. F. R. Sturgis was given at the Waldorf-Astoria Nov. 15th and was very enjoyable. Mr. Wm. Purington of the New York bar acted as toast master. In responding to "My Friendly Hosts" Dr. Sturgis said the *Critic* had endeavored to be impartial and justly, fearlessly it commended, defended, denounced whatever called for criticism either in the profession or its current literature. "The Medical Press" called out Dr. H. M. Christian of Philadelphia "The Legal Profession" was responded to by Justice Woodward who recorded some amusing personal experiences with a physician in Buffalo, showing how eminent men may differ. We are indebted to Dr. A. E. Austin of New York for a report of a successful, social and fraternal gathering and the *Critic* has our best wishes for its success.

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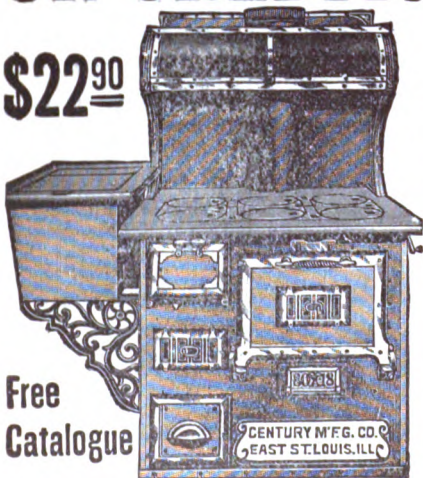
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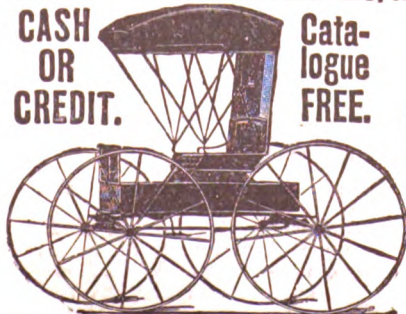
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VOL. XL.

No. 12

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H. C. ALLEN, M. D., Editor.

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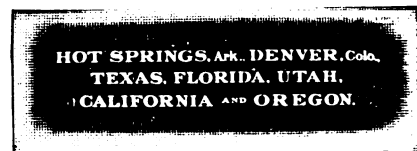
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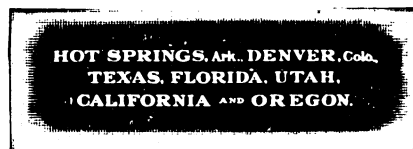
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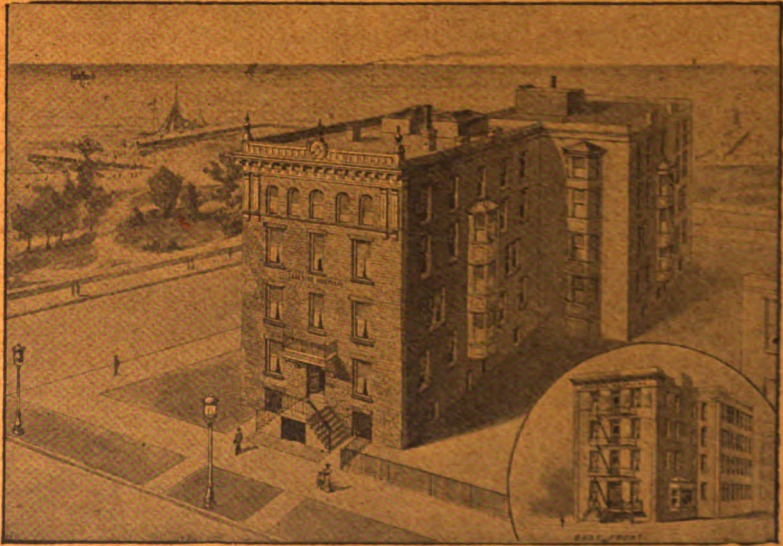
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