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THE

HOMEOPATHIC WORLD.

JANUARY 1, 1898.

THE TYRANNY OF WORDS.

WE are happy to know that our last month's leading article, entitled "A Plea for Solidarity," has met with a very cordial reception in many quarters, and is bearing good fruit. We believe it has struck a true note which will be responded to by all classes of homeopathists, and we trust also by therapeutists of all descriptions. We look to our contemporaries to join us in the work of closing up the ranks and organising the body so that the highest possibilities of individual members may attain their fullest development and the influence of the whole body for good may be consolidated and emphasised.

It has occurred to us that it would be useful in this connection to point out one of the hindrances that lie in the path of those who would make for harmony and peace. We allude to the stumbling-block of what we may term fetishised words.

We are all more or less under bondage to some word or other—most of us to many of them—which dominates some part, if not the whole, of our lives. We are not free agents at all, but are fettered and cramped in our mental life by some dominating word, to which very likely no two individuals of us attach identically the same meaning, but which, nevertheless, all have conspired to invest with a number of awe-inspiring attributes. When we come to think of it, there is no greater tyranny

in the world than that of Words. Words are one of man's own inventions; and yet, time and again, like Frankenstein, man has quailed before some wordmonster of his own creation. Putting aside the story of the tower of Babel—which has a vast deal of essential truth in it, whatever may be said of its historical value it is probable that words have caused more strife and bloodshed than all other causes put together. Perhaps by the end of another century man may have devised some other invention by means of which a direct interchange of ideas may take place independently of their present external embodiment in the combinations of sounds and signs called words. In the meantime it would be helpful in the cause of unity and amity if we could learn to estimate words at their proper value, and not to mistake the symbols for the things they ought merely to represent.

Like the fiery element, with which they have so much in common, words, though good servants, are very bad masters. There is one in particular against which it is necessary at the present day to be on our guard if we would preserve our independence of character and our peace of mind. We refer to the word "scientific." We are all proud of the fact that ours is an age of science. This being the case it naturally follows that we are all more or less anxious that our actions and ourselves should merit the title of "scientific." To be deemed "scientific" is to have found salvation—from the prize-ring upwards; and nowhere is the possession of this reputation more essential than in the medical profession—notwithstanding Sir Samuel Wilks' energetic protests to the contrary. Now, before we bow down blindly before this fin-de-siècle idol, it will be well to see exactly what it is made of. For, after all, it is not these poor bogeys that that are to blame for their fearsome proportions, but ourselves who manufacture both them and their trappings.

The first thing to be noted about the word "scientific" is, that it has no absolute meaning whatever: it is entirely

relative. It is rightly used to describe any method or action which is in accordance with the laws of the universe so far as they have been at present spelled out in the department to which the matter described belongs. But as we are every day learning more and more about these laws, it follows that what is truly scientific to-day may, in the light of some new discovery, be utterly unscientific to-morrow.

The next thing to be noted is that the word is apt to be used by each person from the standpoint of his own position in science; and thus the tower-of-Babel episode comes to be enacted over again in another sphere. And it is here that it is so essential for homeopathists to remember that as they are so much ahead of the ordinary practitioner in point of knowledge, the word as used by the one and by the other has an entirely different signification.

We cannot undertake to say just what might be called "scientific" treatment on the part of an old-school practitioner by the authorities of his school, but perhaps the administration of purgatives for constipation, astringents for diarrhea, antipyretics for fever, and narcotics for neuralgia would be in accordance with their science. For a homeopath scientific treatment is something absolutely different. It is the administration of remedies selected in accord with a law of correspondences and given in such a form that they are capable of bringing about the healthward vital reaction without any concurrent harmful results. Therefore to the homeopath and to the allopath the word "scientific," as applied to treatment, has no meaning in common.

Further, the word is used in very different senses by homeopathists themselves. One who looks for his points of correspondence chiefly in the region of coarse pathological change will not mean the same thing by "scientific" practice as the one who seeks his points on the plane of symptoms, and attaches most weight to those symptoms which appear rarely in the provings and have been called "contingent." For either of these to use the word

"scientific" as his own personal property is to submit to word-idolatry, and run the risk of taking a share in the world-old Babel contention.

But there is another peculiarity about words which must not be passed over—the adventitious meanings attaching to them are in a way infectious. For instance: a homeopath, although well aware that he has a science far in advance of that acknowledged by the old school, may be unconsciously affected by the meaning which he feels is attached to the word by the less advanced but very much more numerous class: and in some cases a homeopath will actually be impelled to endeavour to square his practice to the old-school notions of what is "scientific." And even when homeopaths are not so word-ridden as this would imply, they frequently use the word with a good deal of the unction displayed by the confessed devotees of the old-school "scientific" cult, thereby betraying their own subjection to the bondage of the tyrant. Now if it could always be borne in mind that the word "scientific" is a purely questionbegging term unless it is (either explicitly or implicitly) qualified by a statement of the precise sense in which it is used, and of the personal equation of him who uses it, the occasion of a vast amount of personal bitterness and misunderstanding would be got rid of.

We have indicated but one of the fetish-words which tyrannise over the minds of the world in its present phase; but there are thousands more which will readily occur to our readers. Some of the most harmful are those coined from the names of personalities and nationalities. They abound in the profession, in politics, in religion, and in every section and coterie of human society; and they are never so tyrannical as when they have completely lost the meaning they once embodied. The medical profession has more than its share of these ogres of the most terrifying kind, and our own department is by no means free from their influence. The only way of escape is by keeping our attention steadily on what

is meant by the word in the relation in which it is used, and by wasting no energies in useless fighting over empty symbols.

THE DRIFT OF MEDICINE IN ITS SOCIAL ASPECTS.

ONE prominent fact stands boldly forth, and puzzles not a little the modern statistician, especially in regard to the more civilised races of the world, and this is the marked decrease of crime side by side with an equally marked increase of insanity. This is especially so in England where the influence of the Board Schools has led to a very gratifying diminution in juvenile depravity, leading to a lessening in the number of habitual criminals, and the closing and demolition of prisons all over the country.

As insanity and crime go hand in hand, the tendency obviously being for criminality to lead to insanity, and, vice versa, it ought to follow that the diminution of the one would be commensurate with the decrease of the other. And yet we find that it is not so, but that while insanity raises its head and advances with rapid strides, the extraordinary phenomenon is to be witnessed of a singular diminution in the number of criminals throughout the country. Is there any explanation to be given of this singular coincidence?

In order to explain its cause we must look for the factors that are sufficient to afford a reasonable explanation; to begin with, admittedly, the effect of the School Boards and of a more methodical system of education has undoubtedly contributed, as just stated, to lessen criminality; but the cause of the simultaneous increase of insanity is not so obvious. To our minds, however, among the very serious and widespread reasons for there being an increase in the number of mental disorders must be reckoned the increasing tendency of persons

when worried, or in any way distressed, to resort to the agency of overpowering drugs rather than avail themselves of really curative remedies combined with that quietude and rest that are so essential for the rehabilitation of an exhausted and disordered nervous system.

The influence of these powerful drugs is so seductive, and the temptation so great to have recurrence to them in times of worry and upset, that it is almost impossible to find any argument against their use that will have any avail, or at least that will have a deterrent effect suffi-

ciently strong to prevent recourse to them.

When, therefore, we find the habits of the people have not altered, and that there is no great change in the commercial activity and the fiscal condition of the country, we are perfectly justified in looking for the cause of the increase of insanity in other directions; and that this increase is in a large measure attributable to the evil effects of overpowering and narcotising drugs we are perfectly justified in affirming in face of the fact that the weight of evidence favours such affirmation.

It is the object of this journal to promote as much as possible the advocacy of the employment of the direct and true curative forces of drugs, and to discountenance all resort to drugs that interfere with the natural functions of the body, and which, under the specious term of palliatives, are in far too general use even among homeopathic practitioners.

It is for this reason that we open our columns to the narration of all cases that go to illustrate this direct curative action, whether the choice of the remedy be dependent upon the assemblage of the symptoms or upon one particular keynote, or whether the dose be one that is material or one highly attenuated.

A great truth ought not, by any action of ours, to be hindered or obstructed, and consequently we welcome facts, provided these facts are instructive, whether culled from organopathy, from arborivital medicine, or even from the so-called dosi-metric system, or the scheme proposed by Schuessler.

We look upon it that for the complete eradication of disease the principles proposed by Hahnemann stand out far more boldly in prominence than they did in the beginning of the century, and that any really successful system for the treatment of disease can only be a modification in detail of his teachings.

It is not for the homeopathic school to obstruct real progress, and we have no sympathy with those who limit and curtail facts where the practical observation of men like Hahnemann allows of no such limitation or curtailment; still more do we protest against the exclusion of valuable evidence in favour of Hahnemann's teaching for no better reason than that there is not tacked on to it the adjective "homeopathic."

Sepia in Hematuria.—A coppersmith, aged 50, has for a fortnight suffered from passage of blood when urinating, especially in the morning. If no blood passes, before urinating a few drops of purulent fluid are discharged; there is some scalding when urinating, sometimes a feeling as if drops came from the bladder and a sensation of pressure or weight on the perineum. Prescribed Sepia 6 every three hours. After four days no more blood was passed, and all the other symptoms went off in fourteen days.—J. B. H. S.

ZINCUM.—Mr. Sch., aged 39, has for a long time had pain beneath both costal arches, causing a feeling of anxiety rising up through chest with oppression of breath. Worse when lying, so that his nights are thereby disturbed. Relieved after stool, and also after urinating. Slight varices, otherwise nothing morbid. October 13: Zinc. Met. 20 once a day. November 8: anxiety and oppression gone. For a slight relapse in December he got a dose of Zinc. Met. 20

(Dahlke, Arch. f. Hom., vi. 108).

Mrs. K., aged 34, for years has suffered from profuse menstruation. The discharge, though occurring regularly, is copious, lasts long, dark, in clots, without much pain. In the interval she suffers much from pain in the right side of abdomen, which goes off whilst menstruating. After the menses great weakness. For some weeks has had pain in lowest vertebræ in the morning after getting up, which goes off after moving about for an hour. November 10: Zinc. Met. 20, a dose once a day. December 18: pain in back gone, otherwise the same. Continue medicine. February 12: considerable amelioration of general health. Pain in right side of abdomen nearly gone. Menses shorter and more moderate. Continue medicine. March 15: well in every respect (Dahlke, Arch. f. Hom.. vi. 108).—J. B. H. S.

NEWS AND NOTES.

"THE DOCTOR IN FICTION."

In wishing a Happy New Year to our readers, old and new, we are glad to be able to present them in our New Year's number with the brilliant article by Dr. Dudgeon bearing the above title. We are quite sure they will enjoy its perusal as keenly as we have done.

What Constitutes the Quality of "Largeness" or "Smallness" in Doses?

In an interesting note commenting on Dr. Proctor's address communicated to the Homeopathic Review of December, Mr. Buist Picken maintains that the theory of wave interference in explanation of the law of Similars includes the theory of the opposite action of large and small doses. "A dose," he says, "is 'large' (whatsoever its physical quantity) when it is less or more positive to the organic forces, and 'small' (howsoever 'low' or 'high') when it is negative to the organism." For example, as we understand his argument, when Opium produces stupor in a patient, no matter how much or little may be given, the action is positive, and the dose to that individual 'large'; when it relieves a condition of stupor its action is negative, and whatever the quantity, or attenuation, the dose is 'small.'" Mr. Picken further maintains that if this is the truly scientific view of the case (which can hardly be denied, seeing that the response to any given quantity of drug material varies indefinitely in different individuals) our terminology must be changed. The formula, "the opposite action of the large and small dose," is founded on the idea that a given quantity of any drug will produce a given effect on every individual—which is not the fact. Therefore this formula must be abandoned. If we substitute the word "effects" for the word "action" and say, "the opposite effects of large and small doses," the terminology is correct; but this means something quite different, leaving the "largeness" or "smallness" to be determined in each case by the positiveness or negativeness of its action. Mr. Picken will further elucidate this point in an article which will appear in our February number.

OLEANDER.

Dr. Cooper's article on *Oleander* not being ready for this month he has given us another in its place. In the meantime we take the following note from an exchange:—

"OLEANDER POISONING.

"A boy in perfect health, four years of age, put a broken oleander leaf into his mouth, but quickly spit it out again. In a few minutes the tongue became red and raw where the oleander came in contact with it. The patch affected was about one-half by one inch in extent, involving the side and a portion of the upper surface of the tongue, and had the appearance of being denuded of mucous membrane. One year later the patch remained the same, being altered in neither size nor appearance. The child, however, had all the time been perfectly well. Ten months after the occurrence a general roughness of the skin had developed, and a papulo-pustular eruption had appeared on the ankles and calves of both extremities. Could so transient and apparently light contact of that broken oleander leaf have produced these conditions? Allen and Cowperthwaite describe such skin symptoms as arising from oleander, but not that condition of the tongue."—Am. Hom.

SIR SAMUEL WILKS ON "SCIENTIFIC THERAPEUTICS."

THE world of medicine would be much the duller without the enlivening utterances of our good friend Sir Samuel Wilks. According to Sir Samuel "Scientific Therapeutics," on which topic Dr. Brunton has recently enlarged, is an irony in terms, and only to be permitted on the lucus a non lucendo principle. He speaks for old-school physic, of course, which he knows all about. He takes the trouble to show that he knows nothing about homeopathy by his absurd description of it. We are indebted to the Pharmaceutical Journal of December 11th for this delicious excerpt:—

"The President of the Royal College of Physicians on Physic-giving.

"Sir Samuel Wilks, at a recent meeting of Guy's Hospital Physical Society, advised his hearers to read Dr. Lauder Brunton's recent article on 'Scientific Therapeutics,' and incidentally remarked that one of the hindrances to the elevation of the medical profession was the question of physic-giving. When therapeutics came to be founded on a really scientific basis there would be an end to all quackery. At present it was not so. Nowadays the idea seemed to be that where there was a wrong there was a corresponding right; when there was disease there was a remedy for it, and all we have

to learn is how to apply the remedy. This is the foundation of homeopathy, the treatment of symptoms, the pathology of the various cases being ignored. He then referred to an extraordinary prescription recently brought under his notice, and said it was clear from it what kind of patient the prescriber had to deal with, and enumerated his various symptoms: cough, pain in the limbs, quickened pulse, thick urine, weakness; treated respectively with Acetate of Ammonia, Potassium Iodide, Digitalis, squills and sp. Ammoniæ Aromaticus; together with Ipecacuanha as an expectorant, Senega as a tonic, tinct. Chloroformi co. to combine the lot, with a little aqua Menthæ pip. added in case of wind, which latter evoked a good deal of merriment amongst his audience.'

We are not quite as clear as we might be as to the kind of patient, but we have met the doctor pretty numerously in the ranks of the self-styled "scientific" practitioners, and we know very well what the patient would be like after a course of his treatment. By a due regard to symptoms homeopathy is able to correctly estimate and remedy morbid conditions in a truly scientific fashion; whereas the truly unscientific practitioners known to Sir S. Wilks mistake individual symptoms for isolated and substantial disorders treating them collectively in a beautiful mixture containing a "separate remedy for each symptom." Long life to Sir Samuel Wilks!

HARD HIT.

WE found this "bitter cry" from Leeds in the British Medical Journal of December 18th:-

"CONSULTATION WITH HOMEOPATHS.

"SIR,—What is the attitude at the present time of the profession towards homeopathy? I ask this question because I have been credibly informed that a London consultant bearing a well-known name, an equally well-known Manchester consultant, and an eminent Bradford practitioner, have severally of late been acting in consultation with one who for many years has represented homeopathy in a large manufacturing town in Yorkshire. The relations between regular practitioners and those professing homeopathy have been discussed again and again, but so far as I know not for a decade or more, and as we live in an age of change it may be useful—it certainly will be interesting—if the opinions of some of the leading representatives of the profession upon the question could be elicited. "I am, &c.,
"T. R. Jessop.

"Leeds, December 6th."

We cannot think why our northern colleague can have required the assistance of such a galaxy of allopathic

talent; but that is his own affair. We can nevertheless appreciate Dr. Jessop's feelings, and offer him our sincere condolence on being left out in the cold at this festive season. We can do more; we can give him a little advice which he may find useful. Instead of writing to the British Medical Journal, which has no sort of authority, let him write and ask the General Medical Council this question: Does it constitute the crime of "covering" for an allopath to meet a homeopath in consultation? or can it in any way be construed into "infamous conduct in a professional respect?" If he gets a reply in the negative, we advise him to pocket all the fees that come in his way, asking no questions for Mrs. Grundy's sake. After all, the General Medical Council may not be without its uses; at any rate, it is not exactly a pocket committee of the Royal College of Physicians.

As You LIKE IT!

HERE is a true story. A gentleman arrived in a southern port, from a cruise in his yacht, in a serious state of illness. A practitioner of the old school was called in and a consultant from town duly summoned. In spite of these precautions the patient grew worse and the friends took counsel together. They decided to put the patient under homeopathic treatment, but were very loath to hurt the feelings of their kind old friend the doctor in charge. However, they felt the patient's life was at stake and that it must be done. The situation was therefore explained to the doctor. "Oh!" said he, "I can treat him homeopathically—Which medicine would you like me to give?"

KALI CHLORICUM.

In view of the importance given to the salts of *Potash* and *Chlorine* in Schüssler's therapy a case of poisoning recorded in the *British Medical Journal* of November 20th is of importance:—

"POTASSIUM CHLORATE POISONING.

"P. Jacob (Berl. klin. Woch., July 5, 1897) records a fatal case. A patient aged 39 was admitted almost comatose, thirty hours after taking about 25 gr. of this drug. The face, ears, fingers, and toes were blue.

There was much dyspnea, and the pulse was thready. Camphor injections were given, and the stomach washed out with water to which Sodium Bicarbonate had been added. Venesection was performed on two occasions, and 1,000 c.cm. normal saline solution was infused. Some considerable improvement was noted on the third day. 50 c.cm. urine of a brown red colour was drawn off, and was found to contain both albumen and blood. From the time of admission a marked methemoglobinuria existed, but after the second day a distinct hemoglobinuria. Six days after taking the poison the patient died suddenly and unexpectedly. Only an incomplete necropsy could be made fifty hours after death. The spleen was enlarged, the lungs deeply engorged with blood, and the kidneys swollen. The changes in the blood were interesting. There was a very marked leucocytosis at first. The red cells were paler than usual, and showed marked degenerative changes. The leucocytosis gradually diminished, so that on the day of death the leucocytes did not exceed the normal, but the changes in the red cells gradually increased, so that eventually hardly a normally coloured red cell was to be seen. The red cells which escaped the destructive changes nearly all showed poikilocytosis. The author's observations thus agree with these of Riess and Krönig. The hyper-leucocytosis is a reactive change. The author would go so far as to say that the use of *Potassium Chlorate*, even as a gargle, should be entirely given up and forbidden. Even in small doses it is a severe blood poison, and may produce a hemorrhagic nephritis."

Homeopathic Hospital Dinner.

A NEW departure, and a very happily conceived one, in connection with the London Homeopathic Hospital was inaugurated on the evening of Wednesday, December 15th, at Kettner's Restaurant. The acting and consulting staff of the Hospital, together with some former house-surgeons, twenty-two in all, sat down to dine under the presidency of Dr. Burford, Dr. Galley Blackley occupying vice-chair. Songs and recitations (in which Drs. Blackley, Wright, Wheeler, Cox, and Rowse took part) were more in order than speeches, though these were not lacking; the chairman and vice-chairman, Drs. Dyce-Brown, Moir, and Hardy, with Mr. Knox Shaw (with whom we understand the happy idea of the dinner originated) being the speech-makers. An altogether enjoyable evening was spent, and we have no doubt the L.H.H. Staff dinner is an institution that has come to stay. Such gatherings are eminently successful in strengthening the bond of good-fellowship, and by a no means insignificant agency in advancing therapeutics.

FOLKESTONE HOMEOPATHIC DISPENSARY—SALE OF WORK.

WE are glad to see that things are moving in Folkestone. We take the following account of a recent "Sale of Work" and Exhibition which took place at that town in aid of the above-named dispensary from the Folkestone Express of Saturday, December 4th:—

"Folkestone Homeopathic Dispensary.

"This society, which has done excellent work during its existence, finding itself in debt to the amount of £37, held a sale of work on Wednesday and Thursday, at the Town Hall, Folkestone, for the purpose of wiping out the deficiency. It was opened on the first day by the Mayoress (Mrs. Penfold), and on Thursday by the ex-Mayoress (Mrs. Banks). The stalls were prettily decorated, and attracted a goodly number of purchasers. There was a very interesting exhibition. consisting of models of beds and other appliances used in the London Homeopathic Hospital. They were the exhibits which received first prizes at the Chicago World's Fair and other exhibitions. The tiny cots contained dolls, seemingly under treatment for various illnesses. The method of curing typhoid fever and pneumonia by means of icepails was shown, the cap formed of tubes through which ice-water continually flowed, in the case of brain fever; vapour baths, for kidney disease; the various appliances for broken limbs, &c., &c., formed a most attractive feature. A nurse was in attendance to explain the various treatments. Concerts were given at intervals under the direction of Mrs. and Misses Palmer, at which the Brindisi Pierrot Troupe and Miss Head, a talented whistler, appeared. An orchestra, under the direction of Mr. George Grace, also contributed selections. There were also a burlesque art exhibition and other attractions. Stalls were held by the following ladies: Stall No. 1, the Misses Murray (2), Miss Churchill, and Mrs. Wilson; No. 2, Miss Usherwood, Miss Vickery, Miss Iverson, and Miss Burgess; No. 3, Mrs. Wood, Miss Lane, and Miss Lukey; No. 4, Miss Rogers, Mrs. H. Jenner, Miss Beall, Mrs. Underdown, and Mrs. Piggott; refreshment stall, Miss Pope, Miss Waite, Miss Hands, and Miss Randall; burlesque art exhibition, the Rev. A. L. Innes. A bouquet was presented on each afternoon by Miss Marjorie Wood to the lady officiating at the opening ceremony. The clinical exhibition was under the superintendence of Sister Lydia, from the London Homeopathic Hospital. At the opening ceremony on Thursday, Dr. Murray stated that on the previous day the sales had realised between £70 and £80."

HOMEOPATHIC LEAGUE OF TASMANIA.

WE said last month in referring to the odium medicum controversy in Launceston that the last had not been heard of the fight. Neither has it; for we are glad to learn that it has culminated in the formation of a Homeo-

pathic League. We have no doubt that the new League will find the publications of the British League of great service in their propaganda. Here is the account from the Launceston Daily Telegraph of October 22nd:—

"Homeopathic League.

"A well-attended meeting of homeopaths of this city was held in the lecture-room, Mechanics' Institute, last evening, when it was decided to form a Homeopathic League, having for its objects the furtherance of the spread of homeopathy and the resistance of any attacks made upon that system of medicine, and to organise and keep its adherents in touch with each other. Mr. Henry Ritchie was elected the first president, and Mr. F. Styant Browne secretary, with a strong and influential working committee. A large number of members were enrolled in the room, and much enthusiasm was evinced by those present."

CRITIQUE, LATE DENVER JOURNAL OF HOMEOPATHY.

YET another journalistic change of name. The Denver Journal of Homeopathy appeared under this title for the last time with its September issue. Its present volume—the fourth—appears under the title, The Critique, which at least has the advantage of brevity over its old one. In the three years' course of its existence our contemporary has attained a growth of commendable vigour, and we wish it a long and prosperous career under its new ensign.

Calcarea in Polypus Narium.—A young lady suffered from nasal polypus, which had been operated on five or six times, but always returned. On the last relapse she got *Calc.-carb*. 10 and 12. The polypus disappeared in a short time and did not recur (Kranz, *A. h. Z.*,

cxxxiv. 203).—J. B. H. S.

AGARICUS IN HEADACHE.—Waldemar K., aged 12, a scrofulous, delicate boy, with rachitic skull and bad teeth, suffered from chronic headaches, for which he got Natr. Mur. 30. On January 31st he was attacked by fever and sore throat. The next day the following symptoms appeared: extremely violent pains in head, constant; occasional jerking boring through head into ear. When the head pains were most intense he rubbed his head to and fro on the pillow. Eyes staring, glassy. For some weeks past the parents noticed that he had twitchings in the right hand when writing. February 3rd he got Agaricus 3 every two hours. Improvement followed promptly. He slept well that night. Next morning quite well (Dahlke, Arch. f. Hom., vi. 108).—J. B. H. S.

ORIGINAL COMMUNICATIONS.

THE DOCTOR IN FICTION.

By R. E. DUDGEON, M.D.

THE doctor is treated variously in novels and dramas—sometimes seriously, and then he is occasionally the hero of the tale, or a principal character endowed with all the virtues and skill of the profession, or he may appear as a sort of deus ex machina to perform some miraculous cure of an impossible disease. But the chief use that has been made of doctors by writers of fiction is to turn them and their practice into ridicule. It is impossible to allude to more than a tithe of the comic doctors who have entertained the public in novels and on the stage from the time of Plautus to our own day, but I shall mention some notable instances.

Shakespeare's doctors are not comic, with the exception of Dr. Caius in Merry Wives of Windsor, and his comicality has no bearing on his medical art. Dr. Butts, in Henry VIII., is only a political character. The doctor in Macbeth only gives sensible medical advice, which is not very well received by the ferocious usurper. Dr. Cornelius, in Cymbeline, tries to dissuade the Queen from her vivisectionist experiments, telling her they will only "harden her heart," just like a modern anti-vivisectionist platform orator. Bacon sneers at the profession when he quotes approvingly the remark of some learned Jew, that the doctors are like the bishops, who have the power of binding and loosing, but nothing more; but Bacon had great faith in the remedial powers of drugs, especially saltpetre.

Rabelais—a doctor of medicine himself—has many hits at the medical profession. The discourse of Dr. Rondibilis, when consulted by Panurge as to whether he should marry or no, is a masterpiece of medical pedantry, and is probably a caricature of the pretentious doctrines of the school of Montpellier, or perhaps of some one of the professors. The value of the advice he gives is not equal to the amount of learning by which it is supported.

The doctor in *Don Quixote*, who gives elaborate physiological reasons, and pretends to quote the authority of Hippocrates himself, for refusing to allow the unfortunate

governor of Barataria to partake of any of the tasty dishes brought to his dinner table, had probably his counterpart in one of Cervantes's contemporaries. Sancho would have been starved on scientific principles had he not threatened

to break the learned pedant's head.

Le Sage's Dr. Sangrado, whose medical treatment consisted solely in bleeding and copious draughts of hot water, is no doubt drawn from the life slightly caricatured. His rules for the diet and regimen of the healthy were strictly vegetarian and teetotal, meat and wine being absolutely forbidden. His treatment of diseases, though almost invariably resulting in the death of the patients, he declared to be the very best possible. "I have not often the satisfaction to cure the patients who come under my care," he says, "and were I not so sure of my principles as I am, I might think that my remedies were contrary to all the diseases I treat." But he refused to try any change as he had written a book in which he had recommended repeated blood-lettings and hot water as the proper treatment of all diseases, and he was not going to decry his published method, for thereby his reputation might suffer. The lives of patients were of no account in comparison with his reputation for consistency and infallibility. Now that the practice of blood-letting has been almost completely abandoned, it is difficult to imagine that the sanguinary treatment of Sangrado could ever have been resorted to by rational practitioners, but indeed there were many during the first half of the present century who carried it out to almost as great an extent as the renowned doctor of Gil Blas. I well remember that it was the favourite, though perhaps not exclusive, remedy of our family physician in my youth. He bled all cases of measles, however slight. and when they died, as they usually did, far from thinking that his treatment was to blame for the fatal result, he used to lament that he had not bled early enough, or taken a sufficient quantity of blood. This I was told by the late Dr. R. Walker, who was his assistant for some On one occasion I was the subject of his bloodthirsty zeal. I had got a slight wound on the knee from a toy arrow. The injury was trifling, only skin deep, but for this I was put to bed and a dozen leeches were applied, to prevent inflammation, as the sapient doctor said. The vegetarian diet, the total

abstinence from alcohol, and even the copious draughts of hot water of Sangrado are modes of treatment held in great esteem by many in the present day; and even his repeated blood-lettings could be paralleled by the venesections coup sur coup of some illustrious professors of the

first half of the present century.

The comicality of Sterne's Dr. Slop is displayed more in the theological than the medical field, though the jealousy of midwives he shows is a failing not unknown among the obstetricians of to-day. His theoretical preference for Mr. Shandy's proposed mode of delivery by extracting the child feet foremost, though not for the purpose of preserving the brain from injury, like Mr. Shandy, but for reasons merely obstetrical, is no doubt a hit at some eccentric practitioner of that period.

The doctor in Humphry Clinker who discourses so learnedly on the wholesomeness of stinks was no doubt drawn from the life by Smollett, who was himself a member of the medical profession. The doctor's name is only half concealed under the description, "the famous Dr. L—n." A counterpart to the surgeon who was so anxious to trepan the head of the Yorkshire squire, in spite of the patient's objections, might easily be found among the operation-maniacs of more modern times.

Scott has many doctors, but they are generally grave and reverend seignors, and do and say nothing unbecoming their beneficent calling. The only exception I can remember is Dr. Quackleben of St. Ronan's Well, who is evidently drawn from a real character, though his confident assertion that feeling quite well is a dangerous morbid symptom reminds us of the doctor in Molière's

M. de Pourceaugnac.

Burns's Dr. Hornbook is a ludicrous and probably over-drawn picture of an unscrupulous quack who cheats death of his lawful prey, but is ready, for a consideration, to send to their "last hame" any inconvenient person whose removal might be desired by his employers.

The doctors in Dickens's works are not good specimens of the medical profession. There is the great metropolitan physician who, called in to consult with his provincial colleague, can think of nothing to prescribe except toast-water, but, imagining apparently that he has not done quite enough for his big fee, returns to impress on the attendants that the toast should be made of bread.

Bob Sawyer and Ben Allen are amusing fellows, but are hardly advanced beyond the stage of medical students of

a rather rowdy character.

Bulwer, himself a consistent believer in homeopathy, in his Dr. Morgan, in My Novel, satirises not unkindly a homeopathic practitioner, a regular symptom-hunter, who would like nothing better than to be travelling physician to a lady, evidently of a highly nervous and hysterical nature, whose symptoms are constantly changing, necessitating an inexhaustible variety in the medicines to be selected for the different phases of her protean malady, which would give complete and constant occupation to her medical attendant. This is not the only homeopathic doctor of fiction. In a novel called Who Wins? the hero is a doctor of the Hahnemannian school, who cures the most desperate cases where allopathy has completely failed, and wins fame and a wife by his wonderful skill. But he is not a comic character—very much the reverse.

In George Eliot's *Middlemarch* we have a lively description of the jealousies of the conservative members of the profession when a doctor presumes to think for himself and adopts novel methods of treatment. It is a good satire on the prejudices of the adherents of the so-called orthodox school against any innovation that would tend to discredit the traditional therapeutics.

The novel of Fair Oaks, by Max Lyle, has, like Middlemarch, a doctor for a hero, and we are introduced to a number of medical men who all have their peculiarities. There is Dr. Shortcut, whose "chief solicitude appeared to be, not so much to cure the patients, as to make out a clear, coherent diagnosis." His specialty is phthisis, and the ingenuity with which he makes out every case to be either latent or developed phthisis is very amusing. Then there is Dr. Darling, whose practice lies chiefly among the "hupper succles" of Belgravia, and who cannot give his opinion at a consultation without introducing an array of irrelevant cases occurring among the duchesses, marchionesses and other exalted personages whom he had among his clientèle. "Dr. Darling's patients were chiefly ladies, and it was a remarkable fact that each one thought herself his chief care—his most interesting case." "'Acute cases Dr. Darling did not like. He seldom treated one alone. He always said

with his pleasant smile, 'In the multitude of counsellors there is safety'; and so there is—for the counsellors. However, as the practice of calling in a second or third doctor is one very popular with patients and their families—whose importance it marks (and with the doctors called in, of course)—he lost nothing by that plan. But it was chronic cases without danger which he really enjoyed; and now that he could choose his own practice, he retained only such as he liked. He liked wealthy patients, titled patients, distinguished patients of all kinds. Others were discouraged by being told that their cases were 'nervous-entirely nervous,' which is disheartening; or they found themselves strongly recommended to the sea-side, or the South of France. or the German baths; or 'candidly' informed that he found that it was not in his power to afford them relief-which they said was 'so liberal and disinterested of him.'" Dr. Badgerby is a practitioner of a totally different stamp. "He was a strong, wiry man, with a dark complexion, hair like a hearth-brush, stiff black whiskers, a large broad face, and a very large mouth, with plenty of large white teeth, of which he was proud." "His ungentlemanly appearance was seconded by corresponding manners; but he turned his natural roughness to account by affecting additional rudeness. He took the 'honest and plain-spoken' line, and many worthy souls liked and employed him, because they thought a man who said such excessively disagreeable things must be extremely truthful and sincere." "It was perfect enjoyment to him to cut up people's feelings, and then say, with his disagreeable smile, he was perhaps too candid, but he was a plain man, accustomed all his life to speak 'the honest truth,' and too old now to mend." But, notwithstanding his rudeness, or perhaps in consequence of it, Dr. Badgerby was a success so far as his practice was concerned. Several other doctors, some of them not successes, are described in this novel, which, though little known, is well worth perusal.

I have left Molière, the greatest of all the satirists of the medical profession, to the last. His satire is not so much concerned with the personalities of contemporary doctors as with the doctrines and practice of the whole medical faculty. The five doctors in L'Amour Médecin are doubtless portraits of medical celebrities well known to the court of Louis XIV., for whom the comedy was written and before whom it was performed. The rivalries and mutual contempt of the four medical partisans of blood-letting, tartar emetic and purgatives lead to unseemly disputes, for which they are soundly rated by the prudent Dr. Filarin, who dreads the bad effect such exhibitions of disagreement among doctors may have upon the public, who may thereby cease to have the blind confidence they have hitherto had in the medical profession, and so imperil the gains they derive from the foolish credulity of patients. In M. de Pourceaugnac the two doctors, having to do with a perfectly healthy subject, attempt to prove by the most ingenious reasoning that he is seriously ill, and that he requires for his cure copious blood-letting, purgatives of a chalagogue and melanogogue character, and, above all, medicated clysters. "But, parbleu!" says the victim, "I am not ill." "A bad sign," says the doctor, "when a patient does not feel his malady." The discourse held by these two learned physicians is hardly a caricature of the language employed by distinguished members of the Faculty in Molière's time. Dr. Brown, who has recently published a work on Molière and his Medical Associations, gives us an extract from the Health Journal of Louis XIV., kept by one of his physicians, which bears a striking resemblance to the oration of M. de Pourceaugnac's doctor. I can only give a portion of it, but that will "The king is subject to vapours—vapours which proceed from the spleen and the melancholic humour whose livery they wear, in the chagrin they impart and the desire for solitude which they engender. They permeate by the arteries to the heart and to the lungs, where they excite palpitations, disquietudes, lassitudes, and dyspnœa; from thence, proceeding upwards, they even reach the brain, and then, by disturbing the spirits of the optic nerve, they set up vertigo and swimming in the head, and colliding elsewhere with the nervous principle, cause weakness of the limbs," &c., &c. Nothing more grotesque is to be met with in Molière. M. Purgon, of the Malade Imaginaire, amuses us by his furious rage when he finds that his patient has not allowed the apothecary to administer the clyster he had prescribed. But this play is chiefly interesting to us by its burlesque ceremony of conferring a degree upon a medical candidate. The response given by the latter when asked as to the treatment of the most diverse diseases—"Clysterium donare, postea seignare, ensuita purgare"—was probably not very different from the usual treatment of the physicians of that day. The oath taken by the candidate—"de non jamais te servire de remediis aucunis, quam de ceux seulement doctæ facultatis "-is almost identical with the promise sought to be obtained by the Aberdeen examiner from our colleague Dr. Harvey not many years ago, and is very like the resolution adopted by the Irish College of Surgeons about the same time. In the Médecin malgré lui the drunken fagot-cutter, forced to become a doctor, finds it easy to to gain the reputation of being an able physician by assuming an air of great consequence and rattling off a farrago of incomprehensible stuff interspersed with a lot of Latin words remembered from his school days. Finding that his assumption of the rôle of physician gets him honour and money, he resolves to stick to the profession that has been forced upon him. "'Tis," he says, "the best of all trades; for, whether one does good or harm, one is always paid all the same." Molière's contempt for medicine and for the pretensions of doctors is perhaps justified by the condition of the healing art in his day. He shows it even in plays where we should least expect to find it. Thus we find Don Juan saying: "They" (i.e., the doctors) "have as little to do, as you, with the cures of patients; their art is all pure grimace. . . . Medicine is one of the great errors of mankind."

There is not much in Goethe's works about the art of medicine. This passage, however, in Faust is contemptuous enough: "The spirit of medicine is easily comprehended; you study thoroughly the macrocosm and microcosm (i.e., Nature and man), and in the end let things take their course as God may please." To be sure this was said by Mephistopheles, "who, saving your reverence, is the devil himself." When ill, Goethe resigned himself, if not with confidence, at all events with docility, to the treatment of his doctors, who bled and dosed him secundum artem, and medicine at the beginning

of the century was not a gentle art.

There may be many other instances in novels and dramas where the doctor is represented as a comic personage, and some where the practice of medicine is

treated satirically; but Molière stands alone, or almost alone, as the satirist of medicine in all its branches. Physicians, surgeons and apothecaries all come under his lash. It may be thought that Molière's satirical depreciation of the art of medicine, though warranted by the state of the art in his day, would be quite out of place if applied to the medical art of our time; that, in fact, the art is so much improved, and has been brought to such a state of perfection, that it no longer admits of the contemptuous estimate implied in Molière's satire. But, alas! the medicine of the latter half of the nineteenth century is as open to ridicule as that of the

seventeenth century.

No writer of fiction nowadays thinks of ridiculing the doctrines and practice of medicine, nor would the public tolerate Molière's method of exposing the defects and pretensions of medicine. But what our dramatists and novelists shrink from doing has been repeatedly and sufficiently done by eminent professors of the art. Tract No. 9 of the Homeopathic League gives a collection of the expressed opinions of illustrious members of the profession respecting medical practice and doctrines. Some of the most severe of them are by highly placed doctors still living. Thus Sir Samuel Wilks, the President of the London College of Physicians, says: "I deny that we have a scientific use of medicines. To say that I have no principles is a humiliating confession. We have no especial indications whereby we can be certain of the actions of medicine in disease. Our remedies are never suggested by any theoretic considerations whatever. think it is not difficult for us to see that our art has not a scientific basis, but, on the contrary, is formed out of the fancies of the human mind." And so lately as November 24, 1894, in the Lancet, he repeats his censure of medical practice. "What I do object to," he says, "is the attempt to treat cases of disease on principle, when we possess no principles. . . . At present, every man is a free-lance, and treats disease according to his fancy." Equally pungent ridicule of the pretensions of modern medicine to be a true art has been uttered by other highly-placed living members of the profession, such as Sir James Paget, Sir Richard Quain, Sir Thomas Smith, Dr. Lauder Brunton, and by many others recently deceased, as Sir Robert Christison, Sir Andrew Clark, Sir

John Forbes, Dr. James Johnson, Dr. Moxon, Sir Thomas Watson, Dr. Abercrombie, Dr. Bristowe, Claude Bernard, Bichat, and many others. The caustic epigram of Sir Astley Cooper may be quoted: "The art of medicine is founded on conjecture and improved by murder," and that of Dr. O. W. Holmes is still more severe: "If all drugs were cast into the sea, it would be so much the better for man, and so much the worse for the fish." Hufeland, who for long into the present century was looked upon as the greatest physician and authority on medical subjects in Europe, wrote: "My opinion is that more harm than good is done by physicians, and I am convinced that had I left my patients to nature instead of prescribing drugs, more would have been saved." All these authorities were ignorant of, or more or less violently opposed to, homeopathy. It is strange that, with such a low opinion of allopathic medicine, they refused to examine the claims of homeopathy to be a better method.

There is no probability that a farce like Molière's ceremony of conferring a medical degree will be presented on our stage, though the acts and resolutions of our colleges, and the sayings and doings of the examiners of candidates for their diplomas, would furnish as good materials for such a farce as those of the colleges and examiners of Molière's time. We have seen a candidate -Mr. Harvey-required by the examiner of Marischal College of Aberdeen to make "a distinct declaration that, as a man of honour, you have not practised, and do not entertain any intention of practising, the profession on other principles than those taught and sanctioned in this and other legally recognised Schools of Medicine; " and, on the other hand, we have the President of the London College of Physicians denouncing "the attempt to treat cases of disease on principle, when we possess no principles." And we have seen the same President moving a resolution practically excommunicating the only medical practitioners who treat cases of disease on principle, that is to say, homeopathists. We have seen the King's and Queen's College of Physicians of Ireland exacting from candidates a declaration "not to practise any system or method for the cure of disease of which the College disapproved; " and when a candidate requested to be informed what were the systems or methods for

the cure of disease the College disapproved of, replying, "The College has not disapproved of any system." As fashions have changed in the therapeutics of orthodox medicine, examiners would hardly expect a candidate to say that the proper treatment of all diseases is "seignare, purgare, clysterium donare"; but, as bleeding and excessive purgation are no longer fashionable, if he were to say that the proper treatment is to give tonics, antipyretics, stimulants, or narcotics he would be stating pretty accurately

the practice of the present day.

A faithful delineation of the ludicrous assertion of infallibility, and the intolerant self-sufficiency of the colleges, contrasted with the contemptuous depreciation of their own methods of treatment by the most illustrious members of these colleges, and the tyrannical rejection of candidates for diplomas by the colleges for the heinous offence of sharing the opinions of these eminent men with regard to traditional medicine, and for the unpardonable crime of daring to inquire into the merits of a method of treatment practised with great success and a great saving of suffering and life, by tens of thousands of other highly-educated, honourable, and legally-qualified medical men in all parts of the world, would appear too grotesquely absurd and improbable for utilisation by any writer of fiction. And yet it would only be the simple truth. Le vrai n'est pas toujours le vraisemblable, and probability cannot be altogether dispensed with by writers of novels and dramas, even though, as in this case, the improbable is the truth.

Let us suppose a modern version of Molière's burlesque ceremony of granting a diploma to a candidate. It would not now, of course, be conducted in Latin, medical or

canine, but in the vernacular.

The President would commence with a eulogistic account of the state of medicine; he would dwell with enthusiasm on the progress it has made, especially during the latter half of the century; he would prophesy the perfection to which it would attain "in the near future." He would perhaps allude to the contemptible heresy of homeopathy which had so long been troubling the realm of medicine, fleeing away discomfited and dazzled by the brilliancy of the dawn of scientific therapeutics, like a belated ghost at cock-crow. Having dilated on the excellence of modern medicine and the liberality and scientific

spirit of his College, he would proceed to the examination of the candidate:—

President. Suppose, sir, you had before you a case where there was violent fever, pain in the chest, some cough, and rusty expectoration, what is the orthodox treatment for such a state of things?

Candidate. Antipyretics, narcotics, stimulants, and

tonics.

President. Very good; now, tell me, what is the rational treatment for a case where there are the following symptoms: pain in the stomach, vomiting, diarrhea, rigors, and collapse?

Candidate. Narcotics, stimulants, antipyretics, and

tonics.

President. Excellent. Now, suppose a patient had delirium, intense headache, flushed face, dilated pupils, palpitation of the heart, and complete want of appetite. What treatment is the correct one for such a case?

Candidate. Stimulants, antipyretics, narcotics, and

tonics.

President. Quite right. The treatment you have given for these test cases is that of the true and rational medical school. Now, I wish to know if this treatment, which you have so well described, is that which you will adopt when you have received your diploma. I want you to declare, on your honour, that you will never practise the profession on any other principles than those sanctioned and taught in this and other legally recognised Schools of Medicine.

Candidate. Before answering this question may I be permitted humbly to inquire what those principles are to

which you allude?

President (angrily). We have no principles, but that is no matter. I will put the question in another way. Will you refrain from adopting or practising any method or system of which the College has disapproved?

Candidate. I shall be able to reply when you mention to me the methods or systems of which the College has

disapproved.

President. Confound the fellow! The College has not disapproved of any methods or systems, but that is beside the question. You must sign a declaration to the effect I have stated or you will get no diploma from this College.

Candidate. But I cannot sign a declaration abjuring principles and methods and systems which have apparently no existence.

President. Then this College refuses to grant you its diploma. (Exit Candidate.) Now, gentlemen, though, by rejecting this candidate, we lose the fees due from a new member of our College, we have full compensation for that loss in the proud consciousness of having vindicated and maintained the honour and dignity of our noble, learned and liberal profession.

A NOTE ON NATRUM SALICYLICUM.

By John H. Clarke, M.D.

I have found Natrum Salicylicum, in potencies from the 3rd to the 30th, one of the best remedies for the prostrating after-effects of influenza. I was led to it in the first instance by the symptoms of vertigo with noises in the head. These were removed, and the patient was so much relieved of attendant weakness and depression that she spontaneously named the medicine "her tonic." After this I gave it independently of the concurrent head-symptoms. In the British Medical Journal November 30th I found my homeopathic justification as under:—

"Depressing Effect of Sodium Salicylate."

"The profound prostration which followed the exhibition of even small doses of *Sodium Salicylate* in the following case

appears to me to render it of unusual interest.

"An old lady lately under my care suffering from symptoms traceable to the uric acid diathesis had intense inflammation and noctural pain in the tissues surrounding the first joint of the great toe and in the heel, with general edema of the right foot. These symptoms rapidly subsided under treatment with Colchicum and alkalies. Subsequently vague shifting pains of a rheumatic nature developed, and I gave her 10-grain doses of Sodium Salicylate every four hours. This was followed after the third dose by symptoms of the most alarming prostration, mental and bodily. The pulse became weak and compressible, and fell to the remarkably small number of thirty-five beats a minute. Her temperature also became subnormal. On stopping the Salicylate treatment the symptoms rapidly disappeared, and the pulse became eighty per minute. These symptoms could

not be attributed to the action of the *Colchicum*, as I kept her on it for several weeks with complete relief to all the symptoms.

"Coventry.

"W. RICHARDSON RICE, M.D."

ARBORIVITAL MEDICINE.

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

GALL STONES.

Some years ago I gave a dose of Calendula officinalis in the 200th dilution to an old lady for chronic vascular deafness. On her return to see me in two or three weeks she complainingly stated that the dose had no effect whatever upon her deafness, and that the only thing she noticed was that the following morning, when she looked at herself in her dressing-room mirror, "everything looked yellow," by which I suppose she meant that the whites of her eyes and the skin of her face looked yellow.

For many reasons such a statement as this must be regarded as worthless; for, in the first instance, there were only two or three globules of a 200th dilution placed on the old lady's tongue, and we know that, ex cathedrâ, it has been declared that no pathological symptoms obtained from dilutions higher than the 12th are of any use, and that, in fact, the 200th dilution is an impossible potency. Moreover, there are some editors of homeopathic journals who will not admit cases the symptoms of which are cured or produced by such a high potency—unless, indeed, the cases have been treated by the editors themselves, in which event they are of course admissible.

Still more, the observation must be worthless, as it was taken from an unhealthy subject; for, so far from being healthy, the old lady suffered from a very obstinate and serious affection, a deep-seated disease giving rise to a

loss of the hearing faculty.

Then, again, there was no opportunity for testing the state of the secretions and excretions of the body while this symptom was present; it is impossible to say whether the symptom was due to the presence of bile in the blood, or whether, if present in the blood, the bile came there from an excessive secretion of bile in the system, or from an inertia of the liver preventing

the expulsion of the bile, or whether the mischief may have been in the bile ducts, or even, as it might be, in the walls of the duodenum. In fact, to ascertain a matter of this kind satisfactorily so as to satisfy modern criticism, it would be necessary not alone to experiment upon animals, but to cut down upon the bile ducts of human beings. Then, and not till then, would it be worthy of a place in a Pathological Cyclopedia. But my patient would not submit to this—sensible woman! Not being able to fully comprehend modern criticism in matters homeopathic, and not having totally divested myself of Hahnemannian teachings, I went to the trouble of "memorising," as our friends across the herring-pond put it, the above incident, and even went beyond Hahnemann in tacking on to it my own interpretation, and which was that the symptoms pointed to a blockage of the bile ducts, and that if the remedy were pushed further in the old lady it would probably, so I thought, lead on to fits of gall-stones. This was why my attention was riveted to the matter, and it was not till applied to by the following correspondent that I got an opportunity of putting observation and theory to the test of practice. These extracts from the correspondence constitute all the facts known to me of the case.

"Scarborough, October 19, 1897.

"SIR,—I venture to write you, being a sister of Mrs. — [whose case forms Case XIV. in my work on Serious Diseases saved from Operation, J. Bale and Sons, Great Titchfield Street] to ask you if you can do anything for me. My trouble is gall-stones, which the last seven weeks have caused me great suffering; the doctors are now thinking of an operation. I am fifty-eight years of age."

And in a postscript to this letter she says, "I am a

good deal jaundiced.'

Beyond the above, I had no symptoms to go upon; the fact of the jaundice and of the gall-stones led me to forward Calendula officin. ϕ A, with a request to report in four days.

Next letter runs :-

" October 25, 1897.

[&]quot;I am afraid I have no great improvement to report;

after a week's rest and nursing had a return of the pain yesterday, though not quite so violent and not quite in the same way."

From which I inferred she was better, and sent another dose of *Calendula officin*.

The next letter runs:—

" October 27, 1897.

SIR,—If I had waited one day longer I could have given you a better report. The same day I wrote to you I took my food carefully, and have done so since, and am feeling much better, if I do not break down again, which I have done so often."

And the same letter ends: "I think I may tell you I

am very much better."

The last letter received, November 13th, thus runs: "I am wonderfully better, almost myself again; can eat well, sleep well, and am making up my lost flesh.

"There has been no return of the dreadful pain from

which I had become prostrate."

There was, I may state, no change whatever in her diet beyond advising her to drink apple-juice and water for the first four days, and this was afterwards changed to cider.

A paramount object for the existence of an improved system of medicine is the lessening of the need for operation, and, were it possible to be consistent, the greatest triumphs of the profession would be considered to be those in which medicine not alone renders useless the knife of the surgeon, but accomplishes that which the knife is powerless to effect. This it was that medicine did in the case just referred to—Case XIV.—where, after careful consultation among specialists at the Samaritans' Hospital, a large tumour pressing upon the bladder had been declared to be of too dangerous a nature to be operated upon, and where, in spite of this, the arborivital treatment almost completely restored the patient to health. That there may be no misconception as to this, I quote from the last two reports received:—

" September 17, 1897.

[&]quot;I know you will be pleased to hear that Mrs.—
never now has to use her instrument [the catheter for

drawing off the water]. It must be about five or six weeks since she left it off."

And on November 16th:-

"Mrs. —— continues much the same as when I last wrote. She does not have to use her instrument at any time, still she is quite conscious of there being an obstruction to the *free* passage of water. This is most noticed after a few hours' rest at night, yet if she could obtain no further relief she feels much has been done for her, for which she is very thankful."

Comment is unnecessary.

30A, George Street, Hanover Square, W.

MATERIA MEDICA MISCELLANY.

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

Carbolic Acid Gangrene.—Dr. Dobrucki has observed two cases of gangrene due to the application of 2 to 3 per cent. solutions of carbolic acid to the fingers. In the first case, after the extraction of the tip of a needle from the second phalanx of the index-finger, a compress wet with 2 per cent. carbolic acid caused a blackish eschar to form after two days, which, after falling off, left a cicatrix adherent to the bone. In the second case, after opening a felon on the middle finger, a 3 per cent. solution of the acid was applied for several weeks with the result that total gangrene of the finger followed. (Przeglad Chirurgiczny.)

Frankenburg states that carbolic acid causes a stasis and thrombosis of the blood-vessels which in certain idiosyncratic states may go on to mummification. Therefore he concludes that the application of compresses wet with carbolic acid to the extremities is liable to produce

gangrene.—Hahn. Mon.

Poisoning by a Picric Acid Salve in Treatment for Burns.—Szczypiorski relates two cases where, thirty-six hours after local application of a 5 per cent. salve of picric acid in vaseline, there was noticed slight icterus and a rubeoliform erythema which covered the whole body, together with an erythema in irregular patches, with well-marked borders, and varying from the size

of a ten-cent piece to that of a fifty-cent piece. They were partially confluent, and did not disappear wholly on pressure. The urine was darkish red, the tongue coated; there was anorexia, with general malaise, so that the patients, men of twenty-eight and thirty-six years, were obliged to remain in the house for two or three days. The salve was replaced by a solution of picric acid in water and a salve of aristol in vaseline. In ten days the symptoms had wholly disappeared. One of the burns healed with astonishing rapidity, while the other cicatrised more slowly. He advises the use of the acid in burns, but rather as an aqueous solution, without addition of alcohol.—Anales Del Circulo Medico

Argentino, Nov. 18, 1896.—Hahn. Mon.

Lachesis: its action on the heart, and its analogues.— The snake poisons exercise a very marked effect on the heart and circulation as well as on the blood itself. Lachesis produces palpitation and a constrictive feeling in the cardiac region. There is a smothering sensation about the heart, waking the patient out of sleep. can bear no pressure on the chest; the pulse is small and weak. Kali Hydriodicum has this same smothering sensation about the heart, waking the patient out of sleep and compelling him to get out of bed. Graphites has a similar symptom, and also a cold feeling about the heart, which is found also under Petroleum and Natrum Mur.

Naja tripudians has been used with good effect in valvular affections of the heart with dry, teasing cough:

there is also a tremulous action.

Lachesis has also the symptom that the heart feels too large for the chest. Atheromatous conditions of the heart and blood-vessels call for Lachesis.—Dewey in Med. Cent.

Scutellaria latifolia: its General Action.—In an interesting study of this drug in the American Homeopathist, Dr. G. H. Royal describes Scutellaria as one of the chief remedies in cases where the symptoms point to no organic lesion. It is characteristically a superficially acting remedy, and one whose action is brief and rapid.

The nervous symptoms of the drug predominate in the provings. It produces throbbing frontal headache, dull pain in forehead and at base of brain; the head feels heavy and full, eyeballs feel too large and ache; the face is flushed-symptoms which all point to cerebral

congestion.

It also produces confusion of the brain, with inability to fix one's attention on one's work, apathy, nausea, sour eructations, gas and uneasiness in abdomen, sharp colicky pains, diarrheic and light-coloured stools. Moreover, in all the provers who examined the urine bile pigment was

present.

Coming now to its therapeutic uses, Dr. Royal says that in cerebral irritation in teething children *Scutellaria* will certainly prove useful in the early stage. It resembles *Chamomilla* in its restlessness, sleeplessness, or disturbed sleep and diarrheic stools, but has no fever and lacks the irritability of its analogue. For sleeplessness, night terrors, hysteria, cardiac irritability, and nervous palpitation, it is a homeopathic and leading remedy.

Its homeopathicity to *Chorea* he questions, only three symptoms suggesting its use in this disease, viz., "occasional tremors, or even considerable twitchings of muscles in different parts;" "uneasiness with twitching

of the muscles; " "twitching of the eyelids."

Eclectics recommend it also for sunstroke (among other diseases), and Dr. Royal points to some symptoms, such as its headaches, flushed face, together with the promptness and short duration of its action, as possibly con-

firming its use for this affection.

An apt conclusion to this extract from his paper is the quotation of a remark with which his paper begins, made to him by a German undergraduate, which led to his study of the drug: "Doctor, when you get a case of nervo-bilious headache, with the nervous symptoms uppermost, and nothing the matter with her, give that patient Scutellaria."

Collinsonia a Cardiac Remedy.—According to Dr. Dewey, Collinsonia is an excellent remedy in functional disorders of the heart, especially when reflex from hemorrhoidal troubles or alternate with them. Although the provings do not indicate a specific action on the heart, it has been useful where is much cardiac irritability traceable to suppressed hemorrhoidal bleeding. There is great sensitiveness about the heart, fulness, oppression of the chest, with difficult breathing and faintness. It cured a case of severe constrictive pain about the heart in a man who habitually passed blood with his stools; upon the disappearance of the blood from the stools the heart symptoms commenced, and disappeared when the bleeding

was re-established. Collinsonia entirely cured both conditions.

A characteristic indication is a persistently rapid but weak pulse.—Med. Cent.

VACCINE AND GLYCERINE.

By Alfred Heath, M.D., F.L.S.

One of the latest discoveries is that vaccine is now harmless, if mixed with glycerine. This means that on the highest allopathic medical authority, without glycerine it is not so, which, in spite of all the abuse and statements to the contrary, is what we have maintained, and in spite of the reiterated assertions of the allopathic profession that it was perfectly harmless. Now we are gravely told that the "adventitious microbes" of the vaccine fluid. which are said to be "invariably present in it," can be destroyed by mixing it with glycerine—a product of animal fat. (Instead of saying "invariably present," would it not be as well to say "always present?") Which microbes it contains we are not told; but we are told that the cow. being an animal liable to consumption, may produce in the vaccine fluid the bacillus of consumption, but it is only inferred; it is not said that bacilli are removed by glycerine, it reads as if all micro-organisms are removed. Up to now most doctors have laid great stress on antisepsis, and the absolute necessity of taking the utmost care to prevent disease germs from entering the blood; at the same time they have advocated the use of vaccine fluid taken from the horse and cow or the human being. which, as I have stated, is known by them to have "adventitious microbes" "invariably present," which seems to me to be something more than accidental.

The anti-vaccinationists, who have always maintained that vaccination caused consumption and other diseases, have been called all kind of names—faddists, fools, &c. Now let us suppose that the bacillus is destroyed by the glycerine, the ptomaine, or poisonous alkaloid, which is formed by the bacillus during the putrefaction of animal matter, still remains, and this very poison is no doubt increased in power by the glycerine (made by decomposing animal and other fats) a natural solvent of animal ptomaines and animal poisons. But if the bacillus of consumption

is dangerous on account of its power of producing tuberculosis, surely what is obtained from the bacilius, the ptomaine, must be so also. Further, how can it be possible to prove that the germs of *consumption* are not sown, as is the case in so many other diseases, without years of experience and of careful observation.

Professor Koch carefully filtered out the bacillus of consumption from his preparation so that it contained none, and he added glycerine to the fluid, but even then

the patients were killed by the injections.

But in what position do the advocates or the introducer of the glycerine vaccine put themselves? The bacillus or the microbe, it has always been maintained by them, are the active disease-producing agents, so that if you take the bacillus or the microbe of vaccine away or destroy them, according to their own oft-repeated statements and beliefs, it ought not to produce the disease cow-pox. As it does do so, it follows, as I have always maintained, that the bacillus is not the primary cause of disease, but a product of it (and all products of disease are capable of transmitting it). It is thus admitted that disease can be produced without the bacillus or microbe, as vaccine without the microbe, of its kind, can produce the vaccine pustule, just as well as with it. If it should contain the bacillus of tuberculosis also, or any other bacillus derived from the horse or the cow, although the micro-organisms are said to be destroyed by the glycerine, the ptomaine of bacilli, whether of tuberculosis or other disease, is not destroyed, and it equally has the power to produce disease and carry infection as the vaccine fluid, free from bacillus, is of producing vaccinosis.

It would be a good test of the efficacy of the action of glycerine to destroy contaminations, if the introducer of this plan were to inoculate himself with the fluid of the "lues venerea," of course mixed with glycerine; he will, according to his theory, destroy the bacillus; will he prevent infection? In this way it could be at once proved.

114, Ebury Street, S.W.

Sulphur in Adenoid.—A boy, aged 9, had a polypus and adenoid of the nose. It was operated on seven times but always returned. After *Sulphur* 6, two drops every day, the disease disappeared in six weeks and has not returned (Fischer, A. h. Z., exxxiv. 203).—J. B. H. S.

SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

The third meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thursday, December 2, 1897, the president, Dr. Neatby, being in the chair.

A report was presented by the secretary of the Section of Materia Medica and Therapeutics re the proving of drugs used in the treatment of diabetes.

The following specimens were shown:

- Series of specimens Mr. Johnstone.
 (a) Diphtheria bacillus in living condition (microscope).
 - (b) ,, ,, stained (microscope). (c) ,, living in cultures on agar-agar.
 - (d) ,, ,, in section of tonsil and membrane.
 (e) ,, ,, in section of gangrenous uvula and membrane
 (f) Apparatus for collecting specimen from Diphtheritic Throat.
 - (g) Antitoxic Serum, liquid form in ordinary use.
 - (h) ,, dried, for export.
 (i) Syringe for injecting Antitoxic Serum.
- (j) Photographs showing preparation of Serum.
 2. Tracheotomy instruments, &c. . Dr. E. Roche, Mr. Dudley Wright.
- 3. Bed and arrangements for nursing a case of Diphtheria after Tracheotomy . . . Sister Marion, Barton Ward.
- 4. A specimen of the Vermiform Appendix removed by operation. Mr. Knox-Shaw
- 5. Two skiagrams showing needles in the hand: needles removed by operation.
- Mr. Knox-Shaw, Mr. Dudley Wright. 6. A Calculus removed by supra-pubic cystotomy Mr. Dudley Wright

The evening was devoted to the reading of three short papers on "The Treatment of Diphtheria." Paper 1, On the Surgical Treatment, with special reference to the methods and anatomical relations of Tracheotomy (with illustrations), by Dr. E. Roche (Norwich), who recommended division of the thyroid isthmus after a double ligature had been passed under it and tied to each side. Paper 2, On the Antitoxic Serum Treatment (with lantern illustrations), by Dr. J. Roberson Day. Paper 3, On the General Medical Treatment; the indicated Homeopathic Remedies and Local Treatment, by Dr. Byres Moir, who mentioned, in addition to the mercury salts, the serpent poisons, which he thought had been neglected and advised they should be given by hypodermic injection if they failed by the mouth. For the treatment of post diphtheritic paralysis he mentioned Gels., Causticum, Nux Vomica, and especially Belladonna.

The discussion was opened from the surgical standpoint by Mr. Dudley Wright, who advised a long incision in performing tracheotomy; and insisted that when the trachea was opened the operator should not be in a hurry to insert the tube. He mentioned the value of oxygen in apparently hopeless cases after tracheotomy has been performed. He also described the

operation of intubation of larynx and its advantages.

Dr. Madden opened the discussion on the medical side and spoke highly of the use of *Mercurius Cyanatus*, and alluded to the results obtained with it by Dr. Villers of St. Petersburg, who used high dilutions, and Snellden of Sweden and his colleagues using small material doses; the former having no mortality in 100 cases and the latter a mortality of 4.9 in 1,400 cases. It does not seem to act in medium dilutions. Dr. Hughes did not think the *Iodide of Mercury* used by Dr. Day as being homeopathic. He thought the high mortality in the Sydney hospital before the use of *Serum* might have been due to malpraxis.

Dr. Dyce Brown recommended Conium for post diphtheritic paralysis Dr. Searson advised the local application of Perchloride of Mercury 1–500. Dr. Stonham always found Merc. Cyanide 30 efficacious till the larynx was involved, when he has seen vinegar vapour effectual. The provings of Acetic Acid show it has produced a false membrane in the larynx. Drs. Blackley, Carfrae, Goldsbrough, Johnstone, and Bodman also took part in the discussion, which showed a reluctance on the part of several members to adopt the antitoxin treatment.

Repercussion.—The following, copied from an old book of travels, illustrates very well the repercussion of diseases and its consequences. It might be added to the cases cited in the introduction to Hahnemann's Chronic Diseases: "I was presented with 'Old Bob,' a splendid English pointer, though his good looks had forsaken him just then. He had caught the mange on his travels, and not having been properly attended to, it had spread till he had not a hair left on him, and his skin was seamed and scarred by innumerable open sores, and it was painful to see the poor beast scratching and tearing at himself, first with one hind leg and then the other. It was a question with me whether I should shoot him to put him out of his suffering, but I determined to have one attempt at curing him first. I procured a quantity of flowers of sulphur, and, mixing it with oil, had him rubbed every day, from head to toe, with it, besides giving him about half an ounce each day internally. In one week he was cured of the mange, and very soon his coat came on him thick and shining, but the horrid disease left him very deaf. This did not much matter, for Bob was so clever he knew quite as much as I did about finding game. He and I had many a good day's sport together, and I was sorry indeed when he was carried off by a dropsy."—Med. Visitor.

EXTRACT.

AMELIORATION BY SECRETIONS.

Dr. Dahlke notices that amelioration by the appearance of a secretion is usually referred to *Lachesis* as an indication, while in reality there is a whole series of drugs having this peculiarity. In making a comparative study he finds them to be—

Lachesis.—General amelioration as soon as secretions appear; toothache during menstruation; the less the flow,

the greater the pain.

Zincum Metallicum.—Pain in the left ovary, disappearing during the menstrual flow. The dyspnea is ameliorated as soon as expectoration appears (compare Stannum and Lachesis); sexual excitement in the male, which is made better by ejaculation (cf. Stannum).

Moschus.—Drawing pains at the beginning of menstruation,

which cease as soon as the flow sets in.

Graphites and Apis—The pains in the right ovary diminish, and a vulvar secretion makes its appearance.

Senecio.—After menstruation commences the thoracic and

vesical symptoms decrease or disappear.

Kreasotum.—During the post-menstrual flow there is a certain pain which becomes decidedly aggravated as soon as it ceases entirely.

Conium, Ign, Lilium Tigrinum, and Sulphur.—Cutting pains

in the intestines, followed by leucorrhea.

Cobalt.—Great pain in the left testicle, which is ameliorated by micturition.

Stannum.—Migraine, which is greatly bettered by vomiting

(cf. Arg. Nitr.).

Plumbum.—The menstruation stops at the beginning of the colic.—Journal Belge D'Homeopathie, vol. iv. No. 3, 1897.—Hahn. M.

Oxalic Acid.—Pain in the upper part of abdomen, in region of navel, coming on two hours after eating, with much flatulence and bitter and sour eructations; worse at night; is aroused about 3 a.m. and kept awake by it. Burning sensation from throat down. Oxalic Acid 3, an hour after meals.—Med. Visitor.

Rumex Crispus for Morning Diarrhea.—The action of Rumex Crispus in a severe case of morning diarrhea, occurring in a woman aged sixty, who had suffered from it for ten years, losing flesh and strength and feeling exceedingly weak from her attacks, is said to be very satisfactory. The stools began daily, about 6 a.m., and continued until about 10 a.m. (Natrum Sulph., Aloes, Podoph.) Rumex gave prompt relief and effected a permanent cure.—Med. Argus.

REVIEWS.

REPERTORY TO THE CYCLOPEDIA.*

Whatever verdict may be passed on the practical utility of the work before us, and on the soundness of the principles on which it has been compiled, none can deny that it is an amazing monument to the enthusiasm, industry, and perseverance of its eminent compiler. The first only of the four parts which will complete the work has as yet been issued, but this contains the Introduction, explaining the plan on which the work has been carried out, and also a sufficient sample of the text to enable any reader to gauge the whole. And we may say at once, we are simply amazed at the amount of labour that the work must have cost. Not only are the symptoms arranged, but each separate symptom is ticketed and, in a way, criticised; for every single symptom admitted has been carefully weighed and annotated by Dr. Hughes. Those who have tried their hand at this kind of work will not need to be told what this means. Therefore, whatever else may be said, Dr. Hughes is to be heartily congratulated on the completion of his colossal task.

And now for the work itself. Our first feeling about it is that Dr. Hughes has tried to do too much; he has endeavoured to make his Repertory take the place of both repertory and schema. To our thinking this is an impossible thing to do, and we greatly fear that the work will follow the usual course of attempts to sit between two stools. But for fear that two stools should not be sufficient to ensure the catastrophe, Dr. Hughes has assembled half a dozen. For instead of taking his Repertory through the schema arrangement in one of the commoner forms, he invents a brand-new one of his own, which he may consider scientific, but which to us seems neither scientific nor He introduces the nomenclature of ordinary physiology, makes "Sleep" an incidental heading under "Nervous System," does away with the section "Fever" and makes it an incident of an incident under "Circula-

^{*} A Repertory to the "Cyclopedia of Drug Pathogenesy." Compiled by Richard Hughes, M.D. Part I.—Introduction—Nervous System—Head. London: E. Gould and Son, 59, Moorgate Street, E.C. New York: Boericke and Tafel, 145, Grand Street. Price 4s.

tion." We shall be glad to hear from the "practical man" how he finds this arrangement assist him to cure.

Let us consider for a moment the Cyclopedia to which this work purports to be a Repertory. As we have often urged, that work is a mine of raw material of very great value. Its value is limited by the artificial limitation accepted by the compilers. However, that being frankly admitted, there was nothing more to be said about it. All that was wanted was that the work should be schematised. each remedy having its symptoms arranged in proper schema form, so that the remedies as presented could be compared with older presentations. But what says Dr. Hughes in his *Introduction* to the Repertory regarding the Cyclopedia? He describes it as "an endeavour to present the materia medica of homeopathy—its collection of the effects of drugs on the healthy body—in the most genuine and intelligible form." There is a good deal implied in this that is not apparent on the surface. It means that Dr. Hughes considers the Cyclopedia as the homeopathic materia medica and the most genuine and intelligible form in which it has been presented. It is true he regards some part of Hahnemann's work as worthy of incorporation with it: but we cannot for one moment allow the claim as he makes it to stand. And for this reason: it is, in effect, branding as untrustworthy all that does not commend itself to Dr. Hughes' precise views of what the homeopathic materia medica ought to be.

But granting for a moment that this view of his is tenable—that the Cyclopedia is the materia medica par excellence—does the Repertory give us an Index to all that it contains? Far from it. It merely indexes such symptoms in the Cyclopedia as square with Dr. Hughes' notions together with such symptoms of Hahnemann's as have passed the same Procrustean examination. As a means for enabling Dr. Hughes and those who accept entirely his standards to find whatsoever Dr. Hughes thinks worth finding either in the Cyclopedia or in Hahnemann, this Repertory may be of service. But even then it will be a difficult business to all, except perhaps Dr. Hughes himself. Dr. Hughes sneers at the Cypher Repertory; but the Cypher Repertory, even to those who, like ourselves, have never mastered the cypher, is infinitely easier to use than Dr. Hughes' Repertory. In the latter the names of the medicines are so overloaded with references, without

anything in the type to distinguish the one from the other, that those who make frequent use of it are likely

before long to need an oculist's services.

It is somewhat difficult for the present generation of homeopaths to properly estimate Dr. Hughes' powers. The bulk of us have been, as it were, "brought up by hand" under Dr. Hughes' fostering care. As a compiler he has done excellent work in providing the only systematic, readable and handy account of the homeopathic materia medica that has been produced—his Pharmacodynamics. The consequence is, the present generation (of British homeopaths at least) live and move and have their therapeutic being in Hughes. But it should be remembered that in its earliest form the Pharmacodynamics was a series of letters addressed to an imaginary allopathic Dr. Blank; and we cannot help feeling that this Dr. Blank is somehow involved in Dr. Hughes' personality—that there is a strongly allopathic or, at least, negative side in Dr. Hughes' writings. One of the first things that struck us in those writings (and in our homeopathic infancy we approved of it) was the alacrity with which Dr. Hughes (like Lord Salisbury) seized every opportunity of making "graceful concessions" to the enemy. Now, while this showed a commendable sense of a desire to be fair, it does not necessarily show that Dr. Hughes is the best critic of the old homeopathic workers. A larger experience has shown us that, on the contrary, he is an eminently unsound one.

Dr. Hughes has a perfect right to discard symptoms produced by 30th and higher potencies if he likes for his own use, but those who have seen positive pathogenetic effects result from those attenuations, and have used those effects for curative purposes, cannot allow him to bring down his Procrustean shears on their materia medica. Dr. Hughes may discard every observation of pathogenetic action observed in patients under treatment, notwithstanding the case of Caspar Hauser and thousands of analogous cases, in which unmistakably pure drug effects have been observed, but he is asking too much when he wishes us to take his own narrow view, and look at the materia medica like himself through the wrong end of the telescope. Most homeopaths who have practised the stricter methods know the value of Natrum mur. in the higher potencies, and many who have used the remedy have at times seen the higher potencies pro-

duce marked if not violent pathogenetic effects. Yet this is the remedy whose pathogenesis as accepted by Hahnemann Dr. Hughes particularly condemns and excludes from his Index. It may be remembered that in the earlier editions of the Pharmacodynamics Dr. Hughes refers contemptuously to Nat. mur., saying that he "knew nothing of the virtues of salt "—leaving it to be inferred that Nat. mur. did not possess any virtues worth mentioning. Well, all we can say in this connection is that those who wish to attain expertness in homeopathic prescribing must take Dr. Hughes' criticisms with some very large grains of Nat. mur. if they do not wish to be misled. For, though Dr. Hughes has learned something of the virtues of salt since then, he has in no vital particular improved as a critic of the materia medica. On his positive side Dr. Hughes is safe enough. When he tells us that such and such results have been produced by such and such a remedy on certain indications we may trust him with safety. And in the book before us, when any one finds a symptom he is looking for accredited to a drug, he may be sure it does really belong to it. But where our author becomes negative and undertakes to say either directly or by implication that certain observations of others have not. or cannot have, taken place, our experience proves to us that he is a most untrustworthy guide. Not in intent, of course,—if ever a writer believed in himself it is Dr. Hughes-but by reason of the negative, candid-friend attitude he has taken up and the mental limitations he has settled himself to work in. For the chief virtue claimed for this work is the unsparing use that has been made of the eliminating shears; and its merits are supposed to lie more in what is left out than in what is actually admitted. It must not be inferred that we consider Hahnemann's work, or any other man's work, beyond criticism. Far from it. Our contention is that the canons Dr. Hughes has accepted are purely artificial, the attitude of his mind predominantly negative, and his view too restricted to admit of fair results. Far more wheat than chaff is sacrificed in the process, and neither the Cyclopedia nor the Repertory can be considered as representing the materia medica; and the danger of allowing chaff to remain unwinnowed is less than might appear if the plan of fitting the remedy to the totality of symptoms in each case is adhered to.

We regret that we cannot give a more hopeful account of this Magnum Opus—for "great" it must be allowed to be —but we cannot help feeling that in spite of it the Cyclopedia is still a sealed book to all but the student. Before it can be anything else each medicine that appears in it must be cast into the form of the Hahnemannic Schema -no new-fangled schema form will do-and then the busy practitioner will have a genuine chance of knowing and using what there is in it.

WILLIAMSON'S DISEASES OF FEMALES AND CHILDREN.*

THE appearance of a new edition of this work, originally compiled in the early days of American homeopathy, is a striking testimony to the vitality of the work done by the pioneers. The only introduction to this volume is the author's preface to the second edition. It would have been better, perhaps, to have put the work into the hands of a responsible editor, who could with little difficulty have brought it well up to date. For there is very sterling material in this handy domestic treatise. A curious omission we notice in the absence of any hint as to the attenuation of the medicines recommended. The dose is given in globules. Perhaps it was understood that the 30th protency was the rule when the book first appeared. The description of diseases and the clearness with which the indications for the various remedies named are given deserves great praise.

SCIENTIFIC BASIS OF MEDICINE.+

The author of this little book has sought in its pages to review the underlying principles and rational practice of homeopathy for the benefit of the profession, because he deplores the fact that many professing to practice homeopathy are in reality dabbling largely in allopathy. So far we heartily go with him, and while trusting his efforts may be successful, we fear that this essay will not do much more than acquaint them of the fact of their hypocrisy and faithlessness to homeopathy.

Philadelphia: Boericke & Tafel. London: Homeopathic Publishing Company, 12, Warwick Lane, E.C.

^{*} Diseases of Females and Children and their Homeopathic Treatment: Containing also a full Description of the Dose of each Medicine. By Walter Williamson, M.D. 4th ed. Philadelphia: Boericke and Tafel. London: Homeopathic Publishing Co. 1897. Cloth. 5s.

† The Scientific Basis of Medicine. By I. W. Heysinger, A.M., M.D.

We certainly cannot commend his teaching on the question of alternation of remedies which he rather advocates than otherwise; and his argument in its favour is feeble enough, being simply the fact that most remedies are compound substances. Moreover, he says, "In prescribing a single remedy for a totality of symptoms we are always of necessity prescribing two at least." Why so? His reason appears to be that "if the drug can lay claim to any symptom besides those of the disease totality it is obvious that by the law of homeopathic 'purism' it is not homeopathic at all; we have in fact two drugs administered in admixture, one of which is homeopathic to the case and the other heteropathic." Such are the arguments adduced to establish the practice of alternation on what we presume he would call a scientific basis. He also claims that by alternating remedies we can accomplish our object (i.e., cure our patients) with a knowledge of fewer remedies and with less trouble. We would commend to his careful perusal Carroll Dunham's writings on the same subject. There is, however, much to commend in the book, the style of which is interesting, and contains many instructive facts, but also too much padding and metaphors ad nauseam.

GENERAL CORRESPONDENCE.

TUBERCULOSIS.

To the Editor of The Homeopathic World.

SIR,—Some months ago, as you are aware, I sought to arouse some interest, amongst those who profess to have faith in those principles which, among practitioners of medicine, are commonly expressed by and included in the word "Homeopathy," in a proposal upon the elucidation of which I spent many hours, the object of which was to demonstrate publicly that the dire form of disease pathologically described as "Tuberculosis" is not only amenable to therapeutic treatment, and that successfully, but that measures for its eradication from the valuable herds of neat stock of which the British Isles can boast are well within the range of practical realisation; moreover, I went further than this, and showed by figures, which my experience has taught me are incontrovertible, that all this could be done at a profit on the capital outlaid in carrying out the aforesaid proposal.

I had the pleasure of submitting my views to several homeopathic medical practitioners and to a layman of high social position, who professed considerable interest in the subject, and also to three other gentlemen of equally high social position with the former, whose relation to the landed interest it was presumed would secure from them at least a favourable consideration, bearing in mind the gravity and importance of the subject, but the papers were allowed to pass unheeded without even the

courtesy of an acknowledgment.

I think that most persons, knowing how awfully fatal tuberculosis is when it attacks the human subject; how exposed to infection mankind is from its earliest infancy through partaking of the milk of tuberculous cows; and what a surprisingly large majority—some say 75 per cent.—of the cows of this country are the subjects of the disease, would come to the conclusion, as I did before the experience now referred to, that the medical profession at least would have entered heart and soul into the spirit of any proposition that had for its object the diminution of such a cruelly fatal disease, and at the very least show some enthusiasm, even to personal inconvenience if necessary, to ensure a thorough investigation and consideration of any proposal that claimed to be able practically to combat it. My own suggestion was to call a special meeting of medical practitioners, and I asked first one and then another if he would take the chair so as to ensure some countenance to the movement; but, like the man who according to the Holy Scripture was invited to a feast, they all with one consent began to make excuse, and I must confess that in disgust I allowed the matter to drop; for I said to myself, if the medical faculty, which prides itself on its disinterested self-abnegation in all that concerns the ills of the flesh, will not even lift one of its little fingers to foster such a movement, what is the prospect of success if undertaken by a practically unknown veterinary surgeon? It is true I have tried in a very unostentatious manner to make known as far as I could the value of the principles of homeopathy, being thoroughly convinced of their absolute truth and reliability, but I very much fear that as things are going now, in this country at least, homeopathy is decidedly on the downgrade, the reasons for which are not far to seek. It was therefore with some anxiety and with no little enthusiasm

that I made so bold as to approach the august presence of some of the leaders of homeopathy in England on this subject, in the hope that I should secure their support in an effort to prove that while allopathy is admittedly incapable of dealing with tuberculosis, as it variously presents itself in its insidious attacks on the human frame, homeopathy, properly applied, can successfully exorcise the demon, and that the arrest of the disease at its source is capable of realisation. To prevent the spread of such a terrible form of disease is not less important than the cure of it when it exists, and though this latter portion of my proposal does not perhaps come quite within the range of human medical practice, I was sanguine enough at one time to think that the bare possibility of effecting such an object would ensure the enthusiastic co-operation of at least homeopathic medical

practitioners.

One gentleman whom you know well, Sir, took exception to one part of the method I proposed to adopt, notwithstanding that I explained that very considerable experience, involving some hundreds of cases, entirely negatived his suspicions; but even though there was not already proof enough at hand I maintain that as the suspicion involved only a doubt, it would have been interesting and instructive to have had an opportunity of proving whether this gentleman's suspicions were groundless or not, and I was sorely disappointed at the lukewarmness he displayed. Three others sought to minister some consolation by graciously approving my suggestions and honouring me with an expression of opinion that I was on the right track, but satisfied themselves by giving me their blessing and telling me to go on and do it. As to the others the less said the better lest I should lapse into sarcasm, and, maybe, give expression to words that would be considered rude; for in these days of ethics there is no knowing when you are going to say something rude, if you are only honest enough to speak out your mind.

Since the time when I first mooted this question a number of influential men who own valuable herds of stock have found out the value of the principles I proposed to adopt, and are in a crude manner carrying them out; but there is still only too abundant scope for such a work, and the needs of the people cry aloud for help in this matter. Is there no one who will come forward to assist in its promulgation?—Yours faithfully,

J. Sutcliffe Hurndall, M.R.C.V.S.

Sussex Villas, Kensington, Dec., 1897.

"RED GUM" AND OTHER PRODUCTS OF NEW SOUTH WALES.

To the Editor of The Homeopathic World.

SIR,—I have forwarded to you this day a packet containing Red Gum, the rosin of the Red Gum tree, a powerful astringent. The aborigines use it for all cases

of violent bleeding after battle.

My wife had eighteen teeth removed and the bleeding was terrible. I tried Arnica, Hamamelis, Millefolium externally and internally, to no purpose, Ipec., and most other remedies for internal bleeding. A single application of the hitherto-despised Red Gum (a teaspoonful dissolved in quarter cup of water) arrested all bleeding, and it did not return. The Eucalypti flourish where Iron-stone lies abundantly around, hence the sap contains Iron in abundance. It is the most powerful astringent in the world, I believe, and as harmless externally as water. It has a totally different action from the essence distilled from the leaves. The presence of rocks of all kinds seems but to make it flourish. Hence it must be rich in flint and other minerals.

I enclose also the Macrozamia Nut—I had the honour to write about it; also Lobelia rubra, and the Drosera (Fly-catcher, or Sun-dew) of N.S.W. This tiny plant grows in groups of about five hundred in damp, low soil, shining resplendent with nature's glittering jewellery of dewdrops, all around our house just now (spring), and seizing and absorbing unwary flies that alight on its fairy form, attracted by the dewdrops which exude all day and night.

I would have sent the packet sooner, but was waiting for a large packet of fresh nuts. I could send you numbers of useful Australian plants and poisons in any quantity should you desire it. The toad-fish causes the neck to go awry when eaten. The red spider causes the limb to mortify with excruciating pain and delirium. The tree-nettle causes a horse's skin to form large blisters full of fluid. I forgot to mention that *Phosphoric Acid*

has the power of making new flesh grow in deep burns, of all kinds, deep wounds in all parts. I first remove inflammation with Aco., Bell., &c., then give three drops $Phos. Ac. \phi$ in a wineglass of water four times a day, and have thus rapidly cured deep wounds under the nail, nearly mortifying, the part returning to a sound, healthy flesh. With Ammonia I cured a case of blacksnake bite after all other remedies failed. Death apparently setting in, I made the patient sip every thirty seconds some strong Ammonia and water. In fifteen minutes a cure was apparent.

Your obedient servant. J. E. C. WHITE.

Public School, Holdsworthy, Liverpool, N.S.W., September 15, 1897.

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET. BLOOMSBURY.

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smith. 36s.

Ziegler (Ernst): A Text-Book of Pathological Anatomy. Trans. and Edit. from the 8th German ed. by Donald MacAlister and Henry W. Cattell. Sections 9-15. Roy. 8vo, pp. 694. Macmillan. Net, 17s.

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All advertisements and business communications to be sent to the "MANAGER" of the Homeopathic Publishing Company, 12, Warwick Lane, Paternoster Row, London, E.C.

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

CORRESPONDENTS.

Communications received from Mr. Fredk. Kopp, Greenwich, N.S.W.; Mr. Erskine Liverpool, N.S.W.; Mr. Williamson, London; Dr. Cooper, London; Mr. Picken, London; Mr. Jos. Collinson, London; Dr. Dudgeon, London; Dr. Murray, Folkestone.

BOOKS AND JOURNALS RECEIVED.

Zoophilist.—Hom. Review.— Allg. Hom. Zeit.—Chemist and Druggist.—Hom. Recorder. Clinique.—Rev. Hom. Belge.—Il Secolo Omeopatico.—Med. Era.— Pacific Coast Jour. of H.—Minn. Hom. Mag.—Archiv. f. H.—H. Monatsblätter.—Hom. News.— Hahn. Monthly.—Critique.—La Homeopatia.—J. of Orif. Surg.— Med. Visitor.—Launceston Telegraph. - Med. Argus. - L'Omiopatia in Italia.—N. A. J. of H. -Chironian. — Med. Century. — Chemist and Druggist's Diary.— Rev. Hom. Française.

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THE

HOMEOPATHIC WORLD.

FEBRUARY 1, 1898.

MIND AND BODY.

WE heartily congratulate our contemporary the Medical Times of New York on the manner in which it has celebrated its silver anniversary. The issue of December last completes the twenty-fifth year of its issue, and that number contained a very remarkable article by a very remarkable man. We have taken the liberty of giving some account of the article in another part of our present issue. The writer of it, Professor Elmer Gates, of Washington, occupies an unique place among men of science. As an observer and experimenter, and as an inventor of instruments of scientific precision, we believe he has no equal. But it is the possession of a quality beyond and in addition to these which gives Professor GATES his separate position in the world of science. He recognises the presence of mind as a substantial fact in the universe—big and little—and is thus untrammelled by the limitations of purely materialistic science.

Not to fall into the error of word-worship, of which we wrote last month, we had better explain that we are now using the word "materialistic" in the sense of those who consider themselves materialists. For our own part we think it the depth of stupidity to make our five senses the measure of existence, which is practically the materialists' creed. Ordinary science concerns itself only with

the known and conjectured elemental bodies and their reactions and combinations. To them all the rest is not material—in both senses.

Professor Gates, on the other hand, recognises Mind as the correlative of matter (to use Mr. Picken's phrase), and equally real and substantial with the tangible universe. And it is the combination in one individual of the highest powers of accurate investigation of nature from the external, tangible side, with the perception of the substantial existence of mind as the moving and animating principle in all which gives Professor Gates the unique position we have claimed for him.

The study of the relations between mind and body is becoming more and more imperative. The spread of hypnotism in medical practice, though fraught with subtle dangers, has at least this good effect, that it makes the study of mental action a necessity when it might otherwise be ignored. The various methods of mind-healing are an outcome of the new movement.

In this connection it may be well to point out that Hahnemann laid the greatest stress on the importance of mental symptoms as guiding the selection of a remedy. His observations have been amply confirmed by the most careful of his followers. Professor Gates' teaching that each cell and each organ has its own "mind" contributing to the consensus of all which makes up the individual mind is on all fours with Hahnemann's doctrine of the vital force, which, according to him, is the real seat of all bodily disease not caused by mechanical injuries.

It is curious to note how this "ghost"—the Vital Force—refuses to be laid. Just at the end of the nine-teenth century, when scientists imagined they had at last got it chained up for good in some safe Hades, out it comes again as lively as ever in the teachings of the foremost scientist of the age. The fact is, mind and matter can never be dissociated. All attempts to dissociate them only succeed so long as observers are blind

to one-half of the facts. The great value of Elmer Gates' work lies in the fact that he has got both his eyes open —his mental as well as his bodily eyes.

NEWS AND NOTES.

THERAPEUTICS OF THE PLAGUE.

In view of the interest manifested in homeopathic circles at the present time in the plague, we cull the following from an article on the "Therapeutics of Plague" which appeared in the November number of the Calcutta Journal of Medicine. The writer says:—

"We ought to make an exception to the statement we have made, that homeopathy has not yet had its trial in plague. The exception is a solitary one, but a very remarkable one. The late Dr. John Martin Honigberger, who says he learned homeopathy at its very source, from 'the father of Homeopathy, the celebrated Doctor Hahnemann,' made trial of its medicines with success in the plague which was raging at Constantinople in 1836. 'In order to have some experience in this matter (of plague), says he (Thirty-five Years in the East, vol. i.), 'I tendered my services at once to the plague hospital at Pera (one of the Christian suburbs of Constantinople, where the patients were left to their fate, as no medical assistance or any other aid was to be had. Without any authority or permission I attended them at my own expense. I proceeded, to the satisfaction of all the attendants and patients, to treat the infected according to the homeopathic principle, and my endeavours were mostly crowned with success. All this, effected by the most simple treatment, did not fail to procure me in a very short time a very great reputation, so that, after the extinction of the plague and abolition of all quarantine, I was in great request among the most respectable private families. But before I proceed to prove the efficacy of the minute doses of homeopathic medicine I must first speak of a special remedy which proved very efficacious employed as a prophylactic or curative; and I dare to say with respect to the plague it might be considered as a specific. During my stay at Constantinople, &c., I frequently had opportunity of making the observation that many individuals. especially Armenians, wore a string to which was attached a bean, called Strychnos Faba St. Ignatii, as a preventive against the plague. Having been informed that this bean was acknowledged to be a very effective one, I administered it in minute doses, as a medicine, and that with the best success. The particulars will be mentioned in the course of this work.'

"The particulars here spoken of are that two years after, on his way to Lahore, he himself caught the plague at Palee and cured himself with 'the small pills of the above-mentioned Strychnos Faba St. Ignatii,' after the second dose of which he relates: 'I began to perspire to such a degree that my mattress was wetted through. In consequence of this perspiration I got rid of the fever and anxiety and entertained the hope of being restored to health, although the pains in the groins still continued. The swelling of the glands remained for three weeks, as I did not employ any local remedy.'"

The writer continues:—

"It is a pity Dr. Honigberger has not mentioned in his book the other medicines which he used with success against the plague at Constantinople; perhaps he did not think it necessary, having found in *Ignatia* almost a specific."

A Proving of Bismuth.

We are indebted to a correspondent for the following interesting extract:—

"Aemmer records in (Cor.-Bl. f. schweiz Aertze, Basel, August 15, 1897): 'He was using gallate of Bismuth oxyiodide (airol) as antiseptic. He injected 10 oz. of a 10 per cent. emulsion in glycerine into the cavity of a psoas abscess after evacuating the pus. Two days later the patient had burning pains in lips and gums, which interfered with chewing; stomatitis and fetor followed. There was difficulty in swallowing, headache, malaise, loss of appetite, nausea, and slight constipation; no fever. Gums, tongue, and hard palate of a bluish colour, pharynx reddened, both lips swollen. Along the inner aspect of cheeks, where the teeth exert a slight pressure, the bluish line was well marked. There were small ulcers here and there, submaxillary lymph glands swollen.

"'The stomatitis improved under treatment with potassium chlorate mouth wash, but the general symptoms continued until the abscess was opened and the airol washed out. The pigmentation remained and was visible four weeks after. No Bismuth was found in the urine. Kocher has reported six cases of Bismuth poisoning when the sub-nitrate was used as a dressing, Weisner one from using dermatol (Bismuth subgallate). The symptoms were much as above, stomatitis being the most marked feature."

The Prussian Police on the Homeopathy of Hahnemann and Mattei's Remedies.

The following from the *Chemist and Druggist* of January 15th shows a nice power of discrimination on the part of our German cousins:—

"The Prussian police authorities have issued an ordinance declaring that the so-called electro-homeopathic remedies of Count Mattei, as prepared by Apotheker Sauter in Geneva, have nothing in common with the homeopathy of Hahnemann, and are quite worthless."

SUICIDE BY NITRO-GLYCERINE TABLETS.

The Chemist and Druggist, of January 1, published this note:—

"Poisoned by Nitro-Glycerine Tablets.

"At an inquest held at St. Paul's Cray (Kent), on December 23rd, respecting the death of Mrs. Ellen Stancliff, it was stated that before death deceased confessed to having taken twelve nitro-glycerine tablets to put herself out of misery. The tablets had been supplied by her medical man, with proper directions as to dose. The medicine produced syncope, which resulted in death."

STROPHANTHUS KOMBÉ.

HERE is some information which it may be well for our pharmacists to note.

"STROPHANTHUS.

"Wilcox (Journ. Med. Assoc., September 11, 1897) supplements his previous studies by a comparative account of the varieties and preparations of Strophanthus. He finds that the tineture of Strophanthus kombé (pubescent variety) is an active and eligible preparation, of which the maximum dose should be 5 minims four times daily. the commercial tinctures of Strophanthus hispidus, many are nearly or quite inert. The fluid extracts of this variety and of both kinds of Strophanthus kombé are unsuitable preparations by reason of the digestive disturbances they occasion, which appear to be independent of the amount of strophanthin contained in the crude drug. hypodermic tabloids of Strophanthin as prepared from all kinds of Strophanthus are not irritating to the digestive tract in doses of $\frac{1}{3.50}$ to $\frac{1}{200}$ gr. The source and percentage of Strophanthin appear to be without influence on their activity. The tabloids do not irritate when given subcutaneously, and the smaller dose $(\frac{1}{3.50} \text{ gr.})$ appears to be sufficient for all practical purposes. The reputation which Strophanthus has of irritating the alimentary canal is probably based on the use of the fluid extracts; the author has not been able to obtain sufficient Strophanthus bracteatus to investigate its clinical uses. He sums up the advantages of Strophanthus over Digitalis under three heads—1. Greater rapidity of action. 2. Absence of cumulative effects. 3. Non-interference with the calibre of the arteries. It is, therefore, particularly indicated in the aged, gouty, nephritic, and atheromatous, besides being the cardiac remedy par excellence for children. Its reputation has suffered in the past from the variability, unsuitability, and unreliability of the commercial preparations, for the improvement of which the present study makes."—Brit. Med. Jour., January 15th.

PATENT MEDICINES—WITH A DIFFERENCE.

It is always a moving sight to see the conscience in action—especially when it is the conscience of a medical journal that is concerned. The *Medical Press*, like a modern St. Patrick, has been banishing from the sacred bounds of Dublin City all therapeutic vermin in the shape of patent nostrums. No; we mistake—not quite all. And here is where conscience came in. It seems to have occurred to the *M. P.* writer that Mr. Brudenell Carter was correct in saying that a large part of the income of medical journals was derived from quack advertisements. Hence this "graceful concession":—

"We, of course, do not suggest that dispensing firms should be debarred from the sale of *all* patent medicines, many of which, such as chlorodyne, bromidia, &c., are recognised by the profession as being scientifically and therapeutically correct, their ingredients being pretty well known in a general way."

"Pretty well known in a general way" is good—very good. We daresay this kind of knowledge is accurate enough for the therapeutic purposes of most practitioners of the old school. But a patent medicine is a patent medicine, whether it is owned by Collis Browne or by Holloway. We are glad to note that the subconscious self of our contemporary recognises this.

THE DIRECTORY.

WE understand that the issue of the *Directory* has been somewhat delayed by the length of time required to obtain the corrections from abroad. The Continental portion of the *Directory* for 1898 will be far more complete and accurate than that of any previous issue.

LILIUM TIGRINUM.—A woman, aged 31, had suffered for twelve years from pruritus pudendi. She had been treated homeopathically for two years without benefit. She had a sudden attack of sensation of prolapsus uteri, relieved by pressure upwards with the hand. Lilium Tigrinum 30 cured the discharge in two days, the pruritus in seven days (Bruckner, Schweitzer Volksarzt, xxiii., 1896).—J. B. H. S.

ORIGINAL COMMUNICATIONS.

CASES FROM PRACTICE.

By OSCAR HANSEN, M.D, Copenhagen, Denmark.

Case I.—O. C., journeyman miller, 22½ years, Herfoelge, near Koege, Denmark. Treatment commenced September 4, 1894; the patient had then been ill for two years. Complains of dull, oppressing pains across mesogastrium. The pains are worse when sitting down, when at rest, and in the morning an hour before getting up. Improvement is felt when the stool is costive; exacerbation if he has diarrhea. Excrements are generally hard, sluggish, but not dark-coloured, stinking or cloddy. They never contain blood or slime. Has lost ten kilos in weight. Appetite and sleep good. He often feels better after meals. As numerous conflagrations (incendiaries) had taken place in his village during the last year without the authorities being able to find out the miscreants, the villagers had to watch during night, and this, he thinks, has made him worse. Prescription: Nux vom., 2 c. dil., five drops three times daily in a tablespoonful of water.

On September 25th the patient came again and stated that the pains had almost disappeared, and the stool was normal. His weight had increased considerably. He continued with Nux. vom. morning and evening. In this condition he remained for some time, and then he complained of a considerable distension of the abdomen, although the bowels were very rarely sluggish. This was always worse during the afternoon between five and seven o'clock, and I therefore, on November 26th, prescribed Lycopodium, 6 c. dil., three drops morning and evening. While taking this prescription a papular and vesicular eruption appeared on the scalp, the face, and the neck. The eruption itched somewhat, but disappeared in the course of a fortnight. I intentionally did not treat this eruption, as I considered it critical. On January 8th the patient had increased eight kilos in weight and his state of health was generally so good that he (April 10th) could enter upon his military service. A fortnight after being enrolled he was put into the infirmary, and remained there five days and was then sent home. The

illness commenced again, as above, and in spite of Nux vom., Calc. carb., Bryon., Lycopodium, Puls., and Antimon. crud., according to the indications, his state of health was, September 24, 1896, far from satisfactory, and he complained of oppression in the epigastrium (worse after solid food) and distension immediately after meals. Feels bad in the morning just after rising, but at this time of the day feels better after having eaten. Feels worse in dry, warm air. According to Bænninghausen's Pocket-book I prescribed Iod., 2 c. dil., five drops three times daily in a tablespoonful of water, and in a month he had fully

recovered. Has been well since.—Journ. 6626.

Case II.—Miss I., 16 years, of Copenhagen, came under my treatment on December 31, 1894, having been ill for six months. She had been in the hospital, but grew worse and worse. The following notes were made: She is pale, and complained of languor and thirst; drinks but little at the time but very often; no pains; menses have not appeared for six months; appetite poor; micturition frequent, especially during night, about 1½ litres every twenty-four hours; regular bowels. There had been edema of the face when she was taken ill, but not now. Mucous membranes are pale; the lungs and the heart normal; urine light yellow, somewhat fallow; contains 3% albumen according to Esbach's method, otherwise normal. Ordered Arsen. alb. 3 dec. dil., three drops three times daily in a teaspoonful of water.

January 18, 1895. Generally better; 1½% albumen only; less languor and thirst; appetite and sleep good.

Same prescription.

February 26th. No change in the proportion of the albumen; urine less in quantity and bloody. Terebinthina, 3 dec. dil., three drops thrice daily. Continued to use this until August 12th. The blood in the urine soon disappeared. Already, towards the end of March, only ½% albumen was found in the urine; in the middle of May the languor and thirst had disappeared, while the quantity of the urine increased considerably immediately after commencing with this prescription, 1½–2 litres every twenty-four hours. On May 29 the menses returned, and she was then quite well, with this exception, that the urine still contained about ½% albumen. As this kept on persistently, on August 12th I again prescribed Arsen. alb., 3 dec. dil., five drops thrice daily in a dessertspoonful

of water, but the albumen continued to appear, sometimes $\frac{1}{4}$ and sometimes $\frac{1}{2}$ %, and I therefore, on October 19th, again gave her Terebinthina as above; and on December 14th there were only slight traces of albumen. But the patient had had a molar tooth extracted from the left lower jaw, and there had appeared a stony, smooth tumour of the size of a walnut on the left side of the inferior maxilla, immediately in front of the angle, the tumour appearing to be fixed to the bone. There was no pain or soreness when pressed. The skin could be moved over the tumour. Prescribed Calc. fluor., 3 c. trit., the size of a pea morning and evening. On January 14, 1896, the urine was normal. The tumour has decreased; otherwise the patient perfectly well. The tumour decreased considerably under the use of Calc. fluor., and by July, 1896, it had disappeared altogether, and the patient was discharged.—Journ. 6699.

CASE III.—N. N., railway foreman, 46 years, from Gjentofte, came under treatment June 15, 1895. He has for a long time suffered from diarrhea; had influenza four years ago, and the present illness commenced soon after. He now complains of strong, cutting pains around and below the navel, worse during night while at rest. The pains are alleviated by doubling himself up. The stools are sometimes yellow, sometimes dark, the fecal matter being sometimes thin, often slimy, frothy. He has six to eight motions in twenty-four hours. Only once, three months ago, blood appeared in the excrements. Much rumbling in the abdomen. The passage of flatus alleviates the pain. Feels thirsty; appetite good. Excrements have often a mouldy smell. The patient has lost 12½ kilos in four months. Ordered Colocynthis, 2 c. dil., five drops

every third hour in a dessertspoonful of water.

July 6th. Has gained $2\frac{1}{2}$ kilos in weight; action of the bowels normal; pains considerably decreased; same pre-

scription, twice daily.

July 27th. Weight increased one kilo; no pains; bowels normal; urine normal; complains only of a burning thirst; drinks very often, but only a little at the time; otherwise well. *Arsen. alb.*, 3 c. dil., three drops thrice daily in a teaspoonful of water. In September he was quite well and had attained his usual weight.—*Journ.* 6830.

TUMOUR OF BREAST CURED BY PHYTOLACCA.

By Charles E. Wheeler, M.D.

The following case is from Dr. Burford's clinic, but I had the treatment of it, and Dr. Burford has kindly given

me permission to publish it.

Mrs. —, 37 years old, came to hospital complaining of lump in left breast. Noticed it for three months growing steadily. Examination showed in upper half of left breast a soft mass, the size of a Tangerine orange; not clearly defined; no retraction of nipple, nor puckering of skin over growth; lymphatics felt distinctly in lines running along edge of pectoralis major, and in axilla a small gland felt. Diagnosis adenoma, though one doctor thought commencing to be malignant from the lymphatic involvement. Hydras. ϕ and Bry. 1x, each for a fortnight, had no effect. Phyto. \(\phi\) miij. t.d.s. at once produced improvement. Now, after four months' treatment (three months on *Phyto.*), mass has practically disappeared. There were no symptoms except objective ones. Hydras. was given first, by suggestion of the one who feared malignant growth.

155, London Road, Norbiton.

THEORY OF THE LARGE AND THE SMALL DOSE.

By W. BUIST PICKEN.

The question of the rationale of homeopathy has again come to the front, each revival of it taking us one step nearer to a settlement that is much to be desired. One of the fine points in Dr. Proctor's able paper just published, entitled Hahnemann and Darwin, is his bringing to a focus of this dark problem. "After a host of theories have been constructed and abandoned," says Dr. Proctor, "there remain two that appear to hold the field, viz., that of wave interference and that of the opposite action of the large and the small dose."

In this short article I shall deal briefly with the theory last mentioned. Having in another place (Mon. Hom. Rev., December, 1897) lately taken exception to the current terminology of this theory as mischievously

unscientific, I need but remind my readers that the only scientifically small dose is the negative dose, as the moderate is the passive, and the large is the positive dose. It is the organism, as constituted and conditioned at the time of our dealing with it, that alone can determine what to it is a large dose or a small one. A dose is "large" when it is positive (self-determinative), and "small" when it is negative (self-effacing). The former represents drugselfishness, the latter drug-altruism. In this truth may be seen the explanation of the fact, regretfully admitted by Dr. Proctor, that the formula of similia, unlike that of contraria, does not appeal to common sense as a natural law.

But the ethical law of self-renunciation no more than its drug congener appeals to the natural man as a rational mode of augmenting individual harmony and happiness. They both belong to ultra-individualistic evolutionary states. Homeopathy naturally amongst the most enlightened and progressive people simply because of its advanced evolutionary status. It has long been known, as the Golden Rule has long been known. Both Rules have yet to become generally known, understood and practised, and for the same reason. In all kinds of rudimental government the principle of contraria is conspicuous; in proportion as forms of government progress, of necessity the principle of similia emerges. beautiful freedom which flows from impersonal, harmonious self-government is the ideal state for individuals and societies, in medicine as truly as in religion and politics. But it is for ever impossible under systems of contraria, whether of person or populace. The glory of homeopathy is its embodiment of this great spiritual truth in systematic medicine. Positive drug medication is "of the earth, earthy"; the idea of practical negative medicine is truly "from above."

From this point of view it should now be easy for us to measure the validity of the received theory of the large and the small dose as an explanation of homeopathic thera-

peutics.

In current phraseology, the large and the small dose are said to have opposite *actions*. To say that they have opposite *effects* would be correct.

In a matter of this kind, great precision of perception and expression is necessary. These so-called opposite

drug-actions are commonly thought of as if they were alike direct drug-actions, which would be to imply that they are both positive drug-actions. For whatever determines action is positive. The real action of the large dose is obvious. Bearing in mind the equivocal character of the popular use of the terms "the large" and "the small" dose, and remembering the scientific equivalents which I have introduced, we shall soon perceive how confusion of thought has given rise to the familiar theory of the large and the small dose.

Being that which on the physiological organism will produce its characteristic effects, and on the pathological organism can exhibit the phenomena of contraria, the large dose is evidently a true cause. Its action is under general laws, is comparatively calculable in terms of its own force, and relatively unconditional. In accurate language, it is positive, and therefore determinative of its own effects on the organism. Its force, moreover, is chemical. And the chemical principle in nature is manifested typically in decomposition, not integration. rules supreme in the dead organism alone. In this truth, again, is found the physiological explanation of the inevitable failure of a system of positive medicine. If the chemical principle in nature acted typically in composition, then would the law of contraria yield the results in medicine that for centuries have been sought from it in vain. The chemist then could achieve in synthesis what as things are he can accomplish in analysis only.

The passive form of drug-action has its type in food, not medicine. This fact explains why the old school of medicine has so long and tenaciously clung to the belief that its method is rational; it also shows why the failure of this school has been so great. The difficulty of finding the true contrary, and of applying it passively (which unconsciously to the old school is its ideal), is enormous, to mind in the ordinary state. Because by this method symptoms must be construed into pathology and etiology, and as there is no necessary direct expression of one by another, there is here infinite scope for the commission of error, as the whole history of orthodox medicine has shown. Pathological causes and conditions have to be cancelled physiologically, for which drugs are not typically adapted, while symptomatology may mislead more

than guide.

The passive and the negative systems of medicine have, however, their superiority over the positive one, as therapeutic or life-preserving forces, established by their different polar relations to the organism, or life.

The same substance, say phosphorus or lime, may be poison, food, or remedial medicine, according as it functions to life positively, passively, or negatively. The typical positive drug is poison; the passive, food; the

negative, medicine.

The small dose of any substance is therefore that which on the physiological (or approximately healthy) organism is incompetent to cause any sensible effect. Its so-called action is not action of the drug, as such, at all. Instead of being direct, a necessary consequence of mere relationship with the organism, the therapeutic action is derivative, as by induction, and specific to only one form of relation. The influence of the drug is not general, but particular, its specific effect absolutely dependent on the fulfilment of a unique condition of relationship to the organism in its abnormal state. This condition of therapeutic action is strictly comparable, as regards correlativity, to the conditioning of generation by union of the masculine and

feminine principles of life.

Neither positive nor passive, the homeopathically small dose has no action properly its own. It does not oppose force with force, the equation of which may be regarded as a problem in physics, nor so balance chemical action and vital reaction that their equation is to the organism a sum of plus in its physiology. The typically small or negative dose acts spiritually, i.e., the converse of materially. It may be said to have a spiritual, impersonal action, of which the material reaction is physiological. It elicits normal organic action by renunciation of itself for its "otherness," precisely as the typical "soft answer turneth away wrath." Every "soft answer" will no more turn wrath away than will every small dose of medicine cure. In both cases alike, the positive, contrary, repulsive force is renounced for the negative; but in both cases also this negative must bear a specific relation to the disordered correlative. It must by impersonal action call forth similar action, the two converging and combining in restored unity. peculiar operation of the homeopathic remedy, more than its properties of attenuation, although these are naturally concomitant, marks its spirituality.

The homeopathic remedy has not, per se, a reaction; its therapeutic effects are consequences of specific relations to life. The real therapeutic action, which must be positive, is that of the organism itself—of liberated life.

The theory of the large and the small dose has thus no scientific validity, save as a component of the larger theory of homeopathy of which this paper is a slight incidental

exposition.

MATERIA MEDICA MISCELLANY.

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

Magnesia Phos. in Convulsive Sobbing.—Dr. F., of Also, Hungary, reports the following interesting case: I was requested to go into the country to see a man who had been suffering for the last three days from spasmodic convulsive sobbing. He was lying in bed. Subcutaneous injections of Morphia, friction with Chloroform and Sinapisms were all of no use. Although the sobbing was mitigated for two or three hours, it returned with more violence than ever. I gave him a powder of Magnes. Phos. in half a tumblerful of water. After the second tablespoonful the sobbing ceased altogether, to the astonishment of all present (From Schuessler).—Hom. News.

Rhododendron in Affections of the Ears.—Dr. Kallenbach recommends Rhododendron in the 3rd and 4th potencies in cases of difficult hearing, with whizzing and ringing in the ears. As special indications he gives: determination of blood to the head, with vertigo, and the condition that the hearing is better in the morning, and the noises in the ears come on after the patient has been up a few hours. He also warmly recommends Rhodod. 1 or 2 in hydrocele (Pop. Zeit.).—N. A. J. H.

Antipyrine in Collapse.—Antipyrine is highly recommended in collapse occurring during cholera by Dr. Bhaduri, who ascribes its use for this condition to Dr. Salzer. He uses the 6x potency, and gives it whenever Carbo. Veg. fails, unless there are indications for another remedy, and he claims to have saved several lives by its use. The principal symptoms indicating Antipyrine are continual cold and clammy sweat, with sinking of the pulse, with long, sighing breathing at gradually increasing

intervals; burning sensation all over the body, and some restlessness. He has also used it in collapse during defervescence of fever, especially malaria, with high temperature, and also in phthisis (Ind. Hom. Rev.)—Med.

Argus.

Silica and Calcarea Carb. in Neuralgia.—Dr. Mayntzer, of Frier, reports the following interesting case. He was consulted by letter by a patient, aged 19, for a neuralgic trouble which appeared every evening in both arms and lasted all night, but disappeared during the day, being followed by a sensation of paralysis and relaxation. The tearing pains passed through both arms. Pressure and motion were both painful. The hands were seized with trembling, formication, and numbness, and often the fingers were spread out and could not be bent. Silica 6 (No. 1) and Calc. C. 6 (No. 2) were sent to the patient with instructions to take five or six pellets of No. 1 morning and evening, and to use strengthening diet, and if no favourable action resulted to use No. 2.

Some time later he saw the patient, and learned that she had suffered for two months, and been under allopathic treatment without relief. The second night after commencing the *Silica* she had less pain, and was able to get some sleep. The next night the pain was very slight and she slept well, and so improvement continued till, on the sixth day, all symptoms had disappeared. On the fifth day she took the *Calc. C.*, which Dr. Mayntzer

believes assisted in the cure.

Comparing the symptoms of the two medicines, Dr.

Mayntzer says, we find—

1. SILICEA: Tearing pain in the upper arm. Sprained pain in the wrist. Cramp-like pain and paralytic sensation of the hand at the least exertion. The hands go to sleep; at night there is numbness and formication in the hands. Sensation of numbness in a finger, as if it were thick, and as if the bones were tumefied. Restlessness and trembling in the right arm.

2. CALCAREA CARBONICA: Bruised pain in the arms; on moving and grasping, a sprained pain in the wrist, with stitches and tearing therein on moving. Tearing in the whole of the arm. Shooting, tearing pain on the upper arm, on the elbow-joint. Nocturnal tearing and drawing in the arms. Cramp-like tearing pain on the outside of the lower arm, from the elbow-joint into the wrist. Cramp

in the whole of the one or the other of the arms. Cramp in the hands at night until rising in the morning. Cramplike contraction of the fingers. Pain and relaxation of the hands. Trembling in the hands in the morning. Weakness and a sort of paralysis of the arm. Turgidity of the

fingers.—Hom. News.

Viscum Album: its Therapeutic Sphere.—According to Dr. W. Huber, who proved the several dilutions on himself and others, the symptoms of Viscum Album are similar to those of Aconite, Bryonia, Pulsatilla, Rhododendron, Rhus, and Spigelia, i.e., are in accord with our antiarthritic and anti-rheumatic remedies. Viscum is thus particularly useful in gouty and rheumatic complaints, in acute as well as in chronic cases; more particularly in those having pains in no matter what part of the body. It follows well after Aconite in acute rheumatism. It is also very effective in different neuralgias of a gouty or rheumatic origin, as in ischia, prosopalgia, periostitis, and especially in earache, tearing pains in the ear, and otitis. It is a sovereign remedy in rheumatic deafness. As causa excitans of diseases amenable to it may be regarded high winds, or all gouty, rheumatic, or other ailments which, similarly to Rhus and Rhododendron, are aggravated by sharp north or north-west winds, such as we have in winter. For this reason Viscum is more often applicable in the colder seasons than in summer, or at the time when gouty or rheumatic affections or pains are usually aggravated. It has also been found beneficial in asthmatic complaints if connected with gout or The mistletoe, moreover, stands in a rheumatism. peculiarly close relation to the female sexual system (uterus), and especially to the climacteric period, when women cease to menstruate, and chronic or periodical hemorrhages are often met with. Viscum also promotes labour pains similarly to Pulsatilla and Secale, and is especially efficient in effecting expulsion of the placenta, also in incarcerated placenta. Dr. Huber employed it chiefly in the third and sixth decimal triturations.—Hom. News.

Peripheral Neuritis from Tobacco.—Dr. J. S. Bury, mentioning the well-known fact that tobacco may give rise to neuritis of the optic nerve, with consequent amblyopia, points out that peripheral nerves may also be affected, though rarely, by this drug. A great smoker of

thirty-seven years who had suffered for two months from sensations of cold and formication in his fingers and toes, had noticed for several years a diminution of his visual power. Careful examination revealed a decrease of strength, especially of the left hand, decreased mobility of the fingers, slight atrophy of the interossei as well as of the muscles of the thenar and hypothenar eminences. The sensibility of the hand was diminished, the patellar reflex absent, marked decrease of visual acuity, double and great scotoma (central) for green, and on the left side small central scotoma for red. The optic discs were pale and seemingly atrophic. With stopping the use of tobacco there was rapid amelioration. In two other cases he met with symptoms of peripheral neuritis, yet they were not as marked.—Anales Del Circulo Medico Argentino, No. 7, 1897.

Prof. Kobert, Lehrbuch Der Intoxikationen, p. 620, 1893, cites Walicka (Vrach, No. 18, 1887), who had examined one thousand workmen in forty Russian tobacco factories, to the effect that this occupation chiefly causes affections of the nervous system, as mydriasis, palpitation of the heart, tremor, dyspnea, increase of the reflexes, headache, vertigo, gastralgia, and twitching of the extremities. Picric Acid gives a characteristic precipitate in the urine of tobacco-users, if nicotine be present.—Hahn. M.

Phosphorus in Rickets.—The observation that the use of Phosphorus in rachitis brought about, even after a short time, an amelioration of symptoms of nervous irritation, and in backward children frequently a marked improvement in their mental condition, led Hartcap (Münch. Med. Wochenschrift) to use the remedy in older non-rachitic children with cerebral irritation either congenital or produced by acute or chronic diseases.

He also uses it in children with weak minds, who are mentally and bodily incapacitated for life; further, he finds it of use in cases of headache in children which is due to cerebral anemia, saying, "that a great number of children are markedly benefited physically and mentally by the use of *Phosphorus*.

The dose prescribed ranges from 0.0006 to 0.0005 grams of *Phosphorus* three times a day, an amount about equalling our 2x potency.—N. A. J. H.

PROFESSOR ELMER GATES ON THE CAUSE AND CURE OF DISEASE.

THE Medical Times of New York in its December number published a notable article, the first of a series, by Professor Elmer Gates, of Washington, entitled "Experimental Researches into the Cause and Cure of

Disease along New Lines and by New Methods."

Professor Gates was led to this study by a series of observations systematically made on the conditions of his own working powers. The result of his observations and experiments on himself was the development of an art of "brain-building." He says: "I discovered the art of promoting mentation by a proper regulation of the bodily and environmental conditions, and this led to the conclusion that the mind of the human being is functionally connected with the Cosmic Whole, and that the human being is an organ in a Larger Organism."

Having observed that animals specially trained showed a large increase of brain cells in the part of the brain corresponding to the function exercised, Professor Gates

was led to develop an art of-

Brain-Building.

He says:—

"This led to the beginning of an art of brain-building for the purposes of embodying more mind. Inasmuch as mind creates every science and art, and constitutes the basis of all effort and of all enjoyment and suffering, it follows that to secure more mind becomes a fundamental opportunity and duty; and it follows that the animal organism is nothing more nor less than the mechanism for the manifestation of mind, and that evolution is a process of mind-embodiment—the embodiment being created by the mind's own activities. Quite recently I succeeded in showing that the same process is applicable to unicellular organisms. The simplest cell is capable of feeling a stimulus and of adapting acts to ends. Only Mind can feel and make such adaptive reactions. A cell remembers its experiences, and only Mind can remember. An inanimate piece of gelatine does not feel a stimulus and remember the meaning of such an experience, and adapt acts to ends with reference to such a memory; but a piece of protoplasm can do these things, and therefore it is animate. It follows that Life is Mind, and that the vital or physiologic processes are simply psychologic processes. When unicellular organisms are caused

to perform different mental activities correspondingly different structures arise in these cells; that is, if one group of cells is caused to feel and respond to some stimulus, and if another group of the same species of cells is caused to feel and respond to a different stimulus, and if these activities are kept up in both groups for several months, there will arise structural differences between these two groups of cells which correspond to the differences between their mentative activities. Even in these physiologic units it is the Mind which creates organic structure and regulates the metabolism. As is well known, all the organs of the human body are made up of cells, and each cell, as is shown by the above experiments, has its own mental life, and it is this mental functioning which constitutes its vitality. The conclusion is, that the physiological processes are explicable only as psychologic functions."

Cosmos and Microcosm, or the Influence of Environment on the Individual.

Here is another extract which will enable readers to follow the Professor's line of investigation and thought:—

"The relation between the animal structures and environmental conditions, and the resulting mentation in any given organism, is causative and quantitative. I have done much work in this domain, with new instruments and methods, and am convinced that when once these researches have been completed, we will be able to predict the precise mental change which will result from any given environmental or bodily change. And the mind is not transcendently above these changes—it cannot function independently of structure. A vacuum cannot mentate—only a materially organised being can mentate, and such a being has its mentation causatively related to its structures and its physical environment. The medical aspect of these conclusions is obvious. By a proper regulation of the environmental forces and bodily structures the mind-activities of the cells of an animal body can be appropriately modified, and so can that consensus of the psychic activities of all of the cells of the body called the personal mind of the animal. Chemicals are environmental conditions; so are medicines and foods and radiant energy, and all of these affect the minds of the cells of which the human being is composed, and thus directly change the physiologic processes by changing the constitutive psychologic activities of the cells.

"Another line of work I have called Subjective Biologic Psychology. It consists of a variation of environmental and bodily conditions, one at a time, to determine the concomitant changes which occur in the consciousness of the pupil or subject upon which the experiments are made—changes known

only to the pupil himself as he introspectively views his own conscious states. He thus learns, in the terms of his own conscious states, how each environmental variation and bodily condition affects his mind, and through the changes in his 'physiologic' processes, he learns how these environmental and bodily changes affect the minds of the cells of which he is composed. By the state of his mood and by the changes which take place in his consciousness, he learns to know what environmental and bodily variations have occurred. not so much to the sanatory value of such an experience, as to the fact that it proves the organic connection of the mind with the Cosmos—that mentation, that is, vitality, and consequently all there is of health and disease, is a product of mind-activity as influenced by environmental and bodily conditions, and that when once we know the precise effects of each environmental and bodily condition on the mind, we may utilise such conditions to fundamentally regulate the psychologic activities of the cells of the organs of the animal body, and thus promote health and cure disease by controlling directly that which constitutes life itself, namely, the psychic activities of protoplasm."

A NEW SOCIOLOGY—GROUP MENTATION.

A very important passage follows the above, which bids fair to supply the life principle to the study of Sociology, the dead anatomy of which Herbert Spencer and other writers have worked out with infinite patience and skill. It is very true that "group mentation" is very different from individual mentation. Individuals acting as units in a larger movement are capable of actions sometimes much better, sometimes much worse, than they would think of performing when isolated. It is only by taking this into account that the remarkable imperviousness of some persons to certain ideas can be understood. On some points they are not capable of individual mentation; they can only think with their group.

"Still another line of research arose out of the application of the art of mentation to myself: namely, what I have called Sociologic Psychology, in which environmental conditions and the social anatomy of social groups of creatures are varied to determine what are concomitant changes in the group-mentation of these colonies or societies. The group-anatomy of an ant-colony, e.g., is varied if they are supplied with slaves, or if the queen be removed, or if a bee-hive be deprived of its workers, &c. A social group of creatures, like a herd or tribe

or mob, have a mental activity different from that of the individuals which compose it, and that is partly what I mean by group-mentation. Its dim beginnings are seen in the esprit de corps, in the class spirit of a college, in the enthusiasm of an audience, in social belligerent revolutions, &c. I can show that in every variation of the social anatomy of any group of people or animals, there occurs a corresponding variation in their group-mentation, which also affects the mentation of the individuals composing that group; and that every environmental change affects the group mentation. Here are the dim beginnings of a higher hygiene and social science; and also the germ of an important new principle in the attainment of highest health, and in the cure of disease—social or groupmentation can aid in effecting desired changes in the individual mind, and these changes in the individual mind mean physiologic changes."

PSYCHOLOGY AND PSYCHURGY.

Here is a summing up the Art and Science of Life.

"Mind creates every science and every art, and therefore the science of mind—Psychology—is the Science of the sciences; and therefore the art of using the mind and the art of getting more mind—Psychurgy—is the Art of arts. Mind is life. Life is not something different from mind. The life of a cell is its mind. The activities of a cell are psychologic activities, and therefore the regulation of the psychologic activities of cells and of multicells is the basis of the long looked for fundamental law of cure. Therein lies the key to the mystery of disease and pain and evil, and therein, also, lies the Ariadne's clue to health and happiness and success."

"DIRIGATION."

We will conclude by quoting at length a portion giving one of the most important practical bearings of the subject. In this respect Professor Gates' teachings can be put to the test by any one without the aid of delicate laboratory apparatus.

"Dirigation.—By dirigation I mean the voluntary power of the individual to confine his consciousness exclusively to the feelings and sensations which may be noticeable in any selected part of the body, and by practice to send to those parts more blood, and to alter therein the lymphatic and thermic functions. If I confine my attention to my thumb and inhibit my attention from all other sensations and feelings in other parts of the

body, and from all intellections and emotions which may tend to spontaneously arise in the mind, and if I thus continue to rivet my attention to my thumb, I soon will become aware of an increased amount of feeling in that organ. If this is continued for some minutes, a sense of fulness and pressure arises, and a delicate thermo-electric thermometer will record the fact that the temperature in that thumb has risen a fraction of a degree centigrade higher than the temperature in the other thumb; and if a plethysmographic measurement be made of the volume of the thumb to which dirigation is made, it will be

found to have become larger than the other thumb.

"I have elsewhere published an account of these experiments, but I will briefly repeat them. Into a glass vessel, wider at the bottom than at the top, I introduced my right arm and filled the vessel with water, and allowed the arm to rest in the liquid, without motion or any straining of the muscles. Without making the slightest movement I began to dirigate to the right arm. The vessel had previously been filled with water, so that the addition of another drop would have caused it to overflow. The water was at the temperature of the arm. After eleven minutes' dirigation I succeeded in becoming conscious of nothing but the feeling of sensation in that arm, and shortly thereafter the water began to flow over the top of the vessel, and in twenty-one minutes six hundred grains of water had been displaced by the augmented volume of my arm. Then I dirigated to the other arm, forgetting all about the right arm. It took some time for me to lose consciousness of my right arm. Those parts of my brain in which the right-arm sensations were enregistered had become functionally active and filled with blood, and it took some time for the blood to leave those brain-areas, and also for the blood and metabolism to cease their dominant functionings in my right arm. We may call this phenomenon functional persistence. That is, a functional dominancy tends to maintain itself. After some minutes of effort I succeeded in overcoming the functional inertia of my right arm and to get a functional dominancy in my left arm and in the corresponding brain areas. Now my left arm had previously been placed in a similar apparatus, and after some further effort the water began to assume a lower level in the vessel in which the right arm was placed, showing that the right arm was shrinking in volume, and the water began to run out of the top of the left-hand vessel, showing that the left arm was augmenting in volume.

"By placing a surface thermometer upon any part of my body I can in from five to twenty-five minutes raise the temperature of that part of the body by persistently dirigating to that part. I can also alter the character of the perspiration of that part, and by continuous dirigation to any one part of the body, it can be caused to grow larger in size than the other

corresponding part of the body.

"Mrs. K., of Philadelphia, having previously been trained in the art of thus dirigating to any part of the body, was the subject of the next experiment. She had an almost entire absence of the mammary glands, and by dirigating continuously for one hour each forenoon and one each afternoon to the left gland, it became in fourteen weeks of a size more than four and a half times larger than the right. She then dirigated to the right gland, and in nine weeks it became of the same size as the left.

"Mr. F., in a similar manner, dirigated to his left arm, and to that part between the shoulder and elbow, and in four months it had increased 6 per cent. in its circumference, and the strength of the muscles in that arm had been greatly augmented. I tested my hand upon the dynamometer several times each day for six consecutive days, so as to find the utmost power of my grip, then I dirigated to the muscles in my hand five or six times daily for two weeks, but without using my hand in any form of muscular exercise whatsoever, and at the end of that time the strength of my grip had been

increased sixteen per cent.

"Mrs. S., afflicted with severe chronic constipation, had to have the stools mechanically removed every other day for over two years. Of course all usual remedies had failed, including the various enemas and massage. I began by giving her sensation-memories of touch and temperature in that part of the rectum which lies below the sigmoid flexure. done by means of warm and cold water sprays, which were gradually increased in coldness and warmth up to the point of giving pain, and the warm and cold sprays were rapidly alternated. This process created, in the corresponding parts of the brain the sensation memory-structures of the sensations which I had succeeded in producing in this atonic part of her intestine, and the libero-motor discharges from those brain structures to the rectum enabled the brain to send more blood and metabolism to those parts; but the main object of this training was to enable her to get enough feeling in those parts so that she could dirigate thereto. She was then taught the art of dirigation, and four times a day she dirigated to the rectum, and in eleven weeks she was perfectly normal.

"The next step in the art of dirigation consists in repeated practice so as to be able to get the fullest and completest feeling in any part in the *shortest possible time*, and this should be practised with reference to all parts of the body. This practice gives the pupil skill in willing the dirigation, and

it also gives the person a marvellous control over the body the mind takes, as it were, conscious possession of parts over which it previously had but little governing power, and the

health of every part of the body is augmented.

"The next step in the practice of this art consists in securing a change of dirigation from one part in which the dominancy has already been established to some other part of the body, so that the full change may be completed as quickly as possible and completely as possible. This develops the power of the system to centre all of its forces upon any one part, and augments its capacity for correlation of functions. For example, after such a dirigation to a bodily area the sudden exposure of the body to a draft of cold air will be much more quickly followed by a vaso-motor sending of the blood to those parts so as to prevent chill.

"A still further practice develops the power to differentiate the feeling which arises in the dirigated part, and what was previously a simple sensation becomes a more complex state of feeling, that is, several sensations can be discriminated instead of one, and if the pupil dirigate to a particular one of these sensations, a different result is obtained than if the dirigation be to some other one of these sensations, and at this stage arises a complex state in the art, requiring a small volume for

its description.

"It is well known that in the hypnotic subject the attention can be confined and directed in such a way to different parts of the body so as to render them insensible or to produce other interesting effects. But hypnotism produces evil results in the brain, and I think that the testimony of scientific experiment is such as to prove that hypnotism is nearly always dangerous, and should be used only when it is a choice between two evils. One skilled in the art of dirigation can accomplish much more profound effects, and without the danger of hypno-I first studied this matter in 1876, and made my most important experiments in this line about 1890, especially the experiments herein recorded. I have been able to show that by dirigation it is easy to produce an action similar to that produced by most drugs. Thus, it is very easy by dirigation to produce emesis and even sudoresis. A tribe of American Indians, whose name I have forgotten, can vomit at will. I had one patient who could produce in twenty minutes catharsis, and another who could in two minutes' time produce upon most of the surface of his body either pallor or blushing. There are many people who can shed tears at will. I simply call attention to these facts to show that in a scientific art of dirigation there lies a marvellous power over all of the functions of the body.

"In connection with brain-building the art of dirigation opens an entirely new field for the cure of disease, and the study of

the subject is of imperative importance.

"A systematic series of researches upon the effects of dirigation of different kinds to different parts of the body by persons properly trained, constitutes one of the lines of researches soon to be commenced in this laboratory. It will involve a careful psychologic measurement and a careful analysis of the excretions and secretions, so as to determine the precise effects of particular dirigations."

KEYNOTES.—PRACTICAL ONES.

By AGRICOLA.

DILUTE IODINE AS A LOTION.

I CLAIM to have made a marvellous hit therapeutic. Of course it will be said, "Oh! we knew all that before." Well, let any British homeopath produce a quotation from any one of the Standard Works on the art written at any one period during the present century identical as to fact with my said discovery, and I am prepared to present to that one, be this which it may, most useful (as to its cures) dispensary in the British Isles the sum of £50.

In February last, requiring some of the succulent leaves of the beautiful cyclamen for the purpose of making with the said green leaf a series of triturations—1–10x with loaf sugar—I made the acquaintance of the head gardener at an establishment a mile distant, a bonny Scot, born and bred amidst the mists of the Grampians, and who supplied

my wants.

To my astonishment this gardener had already some slight knowledge of homeopathy, learnt from his wife, who had, as lady's maid, picked up *her* knowledge in the

service of, I believe, the Campion family.

Now comes an instance of what may result from the propaganda of the grand ART. This gardener, who managed the hay harvest, an operation extending over some ten days, suffered severely every summer from hay fever—it began in the lower forehead; then the nose, then the eyes were attacked; then it travelled down to the throat, which became inflamed; then the chest became its seat, causing asthma-bronchitis, and which continued for weeks, making the man quite hors de combat.

In July last, when an attack had already been in existence long enough to lay him up, this gardener came to me in the hope that homeopathy could lessen his discomfort.

Strange to say, at that time I was studying the literature, from every source chemical and medical, of *Iodine*, and the action of *Iodine* on myself in one ounce sips of water containing *Iodine* tincture B.P. five drops to the pint.

Amongst my symptoms causative was an agonising molar neuralgic toothache. After a few doses of this dilute *Iodine*, placed in the stomach or used as a lotion on the lower forehead, this toothache always came on. Now it occurred to my mind that this frontal lotion

may cure the hay fever.

So I sent him an ounce phial thus: Iodine tincture B.P. 5 drops, Glycerine 50 drops, water q.a.s., and directed him to moisten his lower forehead, i.e., eyebrows, root of nose, &c., with the lotion by means of his finger-tip every few minutes until he found medicinal action or relief, then at greater intervals. The patient became well in practically a few hours! I now find that cold in the head in its most extensive range is cured by dilute Iodine lotion on the lower forehead like magic itself, while nasal catarrh has found its panacea at last.

After twenty days' vain search for a cure for my Iodine-

toothache Chelidonium gave me prompt relief.

Iodine is very diffusive, therefore let the lotion be made at short intervals, i.e., a day or two only.

SENECIO GRACILIS—A PROVING.

By Frederick Kopp, Greenwich, N.S.W.

Among the many newly-discovered remedies that have been added to our materia medica of late years I feel justified in asserting that Senecio gracilis (natural order, Compositæ) is not one of the least important. Its success in those cases to which it has been homeopathically related has been placed beyond a doubt. Having properties identical with Senecio aureus, as has been borne out in the proving of both plants, physicians have made use of both, some preferring aureus and others gracilis. It is my intention in the present article to treat on the action of Senecio gracilis on the human body in health, as well

as to point out those diseases or their symptoms in which the drug has proved successful, and in which the greatest benefit has been derived from its use. Senecio gracilis is known by various English names, the most popular being Ragwort, Liferoot, Squaw-weed, False Valerian, Ragweed, and St. James's Wort. The leaves of the plant are many, large, long, of a dark green colour, and lie close to the ground; they have also a very ragged appearance; hence the English name, "Ragweed." From the midst of the leaves rises one, and sometimes two or three, square stalks of a purplish colour, from three to four feet high, which are sometimes branched, bearing ragged leaves up to the top, where it usually branches out into many stalks, bearing yellow flowers made up of various leaves set as a border. with a darker shade of yellow in the centre. The root is of a very fibrous nature, and the seed is downy. medicinal properties are analogous with those of Sanguinaria Canadensis, Pulsatilla nigricans, Calcarea carbonica, Sepia succus, Cannabis sativa, Erigeron Canadense, Helonias dioica, Asarum Canadense, Copaiba, Cypripedium pubescens, Caulophyllum thalictroides, Trillium pendulum, and Eupatorium purpureum. The officinal preparations are the ϕ tincture, made from the whole plant with strong alcohol, and the various dilutions prepared from this; also triturations of the various potencies of the alkaloid—Senecin.

The effect of Senecio gracilis on the mind during its proving is very decided. There is a great depression of the spirits, which is alternated with elevation and great cheerfulness. It is impossible for the prover to fix his mind on any one subject for any length of time, and there is also a constant feeling present greatly resembling homesickness. In the evening the mood becomes desponding,

sad, and meditative.

In the head it produces fulness, accompanied with a very dull and stupefying headache. There is also vertigo, and a pressing-forward sensation in the head. A wave-like feeling of dizziness is felt from the occiput to sinciput, and there are lancinating and very sharp pains over the left eye, and also through the left temple. In the front of the head are developed cutting, and sometimes shooting, pains, passing outwards from within. It will be seen by the above symptoms that they very closely resemble those common to headaches of a catarrhal nature,

and it is in this class of headaches that Senecio gracilis has proved to be a very useful remedy. It is also very effective in those headaches resulting from suppressed

secretions of any kind.

The facial symptoms of Senecio gracilis are sharp, cutting pains inside of the left angle of the lower jaw. There are also darting pains in the left side of the face; sharp and cutting pains in the face, accompanied with similar pains in other parts of the body, are also very prominent and constant. The left side of the face is the most severely affected. The appearance generally of the face is very pale and depressed-looking. It is very effective in neuralgia, especially that affecting the left side of the face.

The symptoms affecting the eyes are lancinating and very sharp pains in the left temple, the inside of the left half of the lower jaw, and in the upper part of the left eye; lancinating and very sharp pains in the left eye, darting from within outwards. Very sharp and sticking pains in the forehead, and in both eyes, passing from within outwards. In catarrhal affections of the eyes Senecio gracilis is often of great value, more especially in catarrhal ophthalmia, resulting from suppressed secretions.

In the nostrils there is a sensation of fulness and burning, accompanied with sneezing. These symptoms are followed by a profuse flow of mucus, which temporarily relieves the other nasal symptoms. There is also a continual inclination to sneeze, and great dryness of the nostrils. It has proved of great service in coryza, even in those cases in which bleeding from the nose is also a

prominent symptom.

During the proving there was great dryness of the fauces, throat, and mouth, and the gums and lips assumed a very pale hue. The teeth also became affected. They were very sensitive and tender and there was a digging, and at times almost throbbing, pain in those molars that were decayed. It is useful in that class of toothache in which acidity of the stomach is an accompanying

The symptoms affecting the abdomen and stomach are constant eructations of sour ingesta and gas, and nausea on rising in the morning. There are sharp stitches in both the right and left hypochondriac regions, with sharp pains in the epigastrium. There are colicky and griping pains in the abdomen, which are only relieved by bending forward. There is much rumbling of wind in the abdomen accompanied with sharp griping and pinching pains. There is also a pain around the umbilicus, which spreads out from thence all over the abdomen, and is only relieved by a stool. Senecio gracilis is useful in those forms of indigestion in which the patient is greatly troubled with acidity of the stomach and flatulency. It is a prime remedy in the nausea peculiar to women during pregnancy, and also in the nausea dependent on derangements of the

kidnevs.

The action of the drug on the bowels is also very marked. It produces very thin and watery stools, intermingled with very hard lumps of feces; hard lumps of feces mixed with small quantities of mucus of a yellowish Stools attended with great straining are also very common throughout the proving; these stools are generally of a dark colour. There is also very severe and copious diarrhea early in the morning, accompanied with very great prostration and debility. Some of the most important symptoms belonging to this group are thin. dark-coloured and bloody stools, accompanied with great tenesmus. These latter symptoms at once show Senecio gracilis to be a very important remedy in the treatment of dysentery, and such, indeed, is the case. It is one of the best vegetable remedies we possess for the treatment of dysentery and catarrhal diarrhea. The straining, or tenesmus, so common to dysentery is a very prominent symptom in the proving of Senecio gracilis, as are also the bloody stools. The drug is also very beneficial in those cases of diarrhea in which the patient is greatly prostrated and debilitated.

Senecio gracilis has a very decided action on the urinary organs, and is therefore of great value in renal affections. In the proving of the drug the urine is at first very frequent and profuse, and also very clear and limpid. It afterwards becomes very scanty and of an exceedingly high colour, and even tinged with blood. There are also large quantities of mucus sediment in the urine. There is also great tenesmus of the bladder, accompanied with great heat and constant urging to urinate. In the right kidney there is an intense pain, which is very severe during urination; the urine itself is acrid and scalding,

and of a reddish colour, and the bowels are constipated. In the treatment of chronic inflammation of the kidneys Senecio gracilis, in a great number of cases, has proved a very valuable remedy. Even in nephritis itself it has done great service, and, if it does not cure that dreaded disease, it at least very often palliates its most prominent and distressing symptoms. It is also useful in cases where the neck of the bladder is in a state of chronic inflammation, where the urine is bloody, and there is great tenesmus of the bladder. In these cases it has proved very effectual, curing a large number of cases, some of them being of a very obstinate character. Children who suffer from irritation of the bladder, accompanied with or preceded by pains in the head, derive great benefit from its use. It is a prime remedy in renal colic, whether accompanied by nausea or not. Sometimes young women suffer from dropsy and swelling of the lower extremities; these symptoms will often be found amenable to Senecio gracilis. It will thus be seen that the symptoms affecting the urinary organs are very important, and, for this cause alone, should Senecio gracilis not possess any other valuable medicinal property, in would occupy a very important position in our materia medica. Bloody urine is one of the most important of the secondary symptoms of the drug, and adds greatly to the importance of the remedy in the treatment of those diseases in which the urine is passed either bloody or else only tinged with blood.

In the treatment of gonorrhea and gleet Senecio gracilis has been used with very satisfactory results, and also in cases of prostatitis of a chronic character. During the proving it induced lascivious dreams, with involuntary emissions of semen, and the prostrate gland became enlarged, and felt hard to the touch. There was also a dull and heavy pain in the left spermatic cord, which moved along the cord to the testicle. In the female generative organs it has the power of both inducing and suppressing or retarding the menstrual flow. It has, therefore, proved very effectual in cases of amenorrhea, especially in young girls, in which dropsical symptoms are also present. In anemic dysmenorrhea it has earned for itself a good name. It is especially useful it strumous cases, and where the symptoms are aggravated in the night. It is also effectual in other cases of dysmenorrhea, in which the flow is either profuse or scanty, and where urinary troubles are present. In retarded, scanty, or even profuse menstruation, it is very rapid in its action, often proving of great efficacy, and rivalling some of our most prominent uterine remedies, such as Pulsatilla, Caulophyllum, Calcarea carbonica, Erigeron Canadense, and Sepia. It is also useful during menstruation when it is premature and too profuse. It is also often indicated in irregular menstruction, when the menses come on either too early or too late. Where the menses have been suppressed through a cold Senecio gracilis often speedily restores them to their natural state. Very often, in some girls, leucorrhea takes the place of the catamenial flow, and the patient suffers greatly from urinary troubles. These symptoms may promptly be met by a short course of Senecio gracilis. is also a very valuable remedy in chlorosis in girls having a scrofulous taint. A dropsical condition in such cases is an additional indication for its use. It is sometimes indicated in the complaints peculiar to the critical period, especially in those cases in which great sleeplessess is a most prominent and distressing symptom. In such cases it very often restores the menses and induces sleep. By the above it will be seen that Senecio gracilis is a very important remedy for the treatment of many of the complaints peculiar to women, having a special affinity for the female generative organs. It is a valuable remedy, whether the patient is suffering from amenorrhea, dysmenorrhea, or menorrhagia.

Senecio gracilis affects the respiratory organs by increasing the secretion from the bronchial mucous membrane. It also produces a loose cough, with mucous rales, accompanied with laboured inspiration. It is a prime remedy in mucous catarrhal coughs, especially those (in the case of woman) where amenorrhea is also a prominent symptom. It is also effectual in the treatment of chronic hemorrhage from the lungs, accompanied with the following phthisical symptoms: A dry, hacking cough, great sleeplessness, hectic fever, and emaciation. It is also indicated in those coughs, generally following a cold, which are at first dry, but soon become loose, accompanied with a very copious expectoration of a thick vellow mucus, of a sweetish taste, and often streaked with blood: there is also a soreness or rawness in the chest with emaciation and great prostration; flashes of

heat in the face with hectic flushes and night-sweats, and (in the case of females) very irregular menstruation.

In the back and extremities *Senecio gracilis* develops pains in the small of the back, in the back, and in the loins, accompanied with pains of a rheumatic-like cha-

racter and soreness in the joints.

The generalities noticed during the proving of the drug were: Great sleeplessness, accompanied with unpleasant visions; affections of the mucous membranes, of catarrhlike character; great thirst and feverish heat, most prominent between 12 noon and 6 p.m.; a feeling as if there were a ball rising from the stomach into the throat; sharp pains and stitches in different parts of the body; great nervousness, and a mood of a decidedly hyterical tendency; and hemorrhage from the nose, lungs, bowels, kidneys, and uterus.

The mother tincture was used in the above proving, fifteen to twenty minims being taken at *frequent intervals during each day* for a period extending over three or four weeks.

TUBERCULOSIS.

To the Editor of The Homeopathic World.

SIR,—I enclose herewith an article culled from the Veterinary Record of the 15th instant, which I shall be glad if you will publish in the HOMEOPATHIC WORLD; it may serve the purpose of additional evidence to the minds of your medical readers that when I brought forward this subject on several previous occasions, I was not calling out "wolf" without good reason.

Yours faithfully, J. Sutcliffe Hurndall, M.R.C.V.S.

Sussex Villas, Kensington, Jan. 20, 1898.

TUBERCULOSIS AND MILK SUPPLY.

Extract from a paper read before the American Public Health Association at the twenty-fifth annual meeting, Philadelphia, October 26–29, 1897, by Mazyck P. Ravenel, M.D., Bacteriologist of the State Live-stock Sanitary Board of Pennsylvania;

Instructor of Bacteriology, Veterinary Department, University

of Pennsylvania.

The danger from milk was first pointed out by Professor Klencke as early as 1846, who gave the clinical histories of sixteen children who had been fed from the milk of cows, some of which were stable-fed and some swill-fed, all of which pointed to tuberculosis either of the intestines, glands, skin, or bone. This virulence of milk was confirmed by Gerlach in 1869, and later by others. The discovery of the tubercle bacillus by Koch in 1882 proved the possibility of what these men had found to be true clinically, and in the same year both Virchow and himself pointed out the possibility of the danger of infection of milk by the tubercle bacillus.

Among those who have given further clinical evidence of infection by means of milk may be mentioned Dr. Stang, of Amorback, who mentions a case of a well-developed five-year-old boy from sound parents, whose ancestors on both sides were free from hereditary taint, who died after a few weeks' illness of acute miliary tuberculosis of the lungs and enormously enlarged mesenteric glands. A short time before the parents had had a milch cow killed and found her the victim of advanced tuberculosis. Brouardel cites a case where five out of fourteen young girls living together in a boarding-school became consumptive subsequent to the daily use of milk from a tuberculous cow (Pearmain and Moor).

Dr. Demme records a case of four infants in the Child's Hospital at Berne, without tuberculous ancestors, who died of intestinal and mesenteric tuberculosis, as the result of feeding

on the unsterilised milk of tuberculous cows.

Professor Law states that after a lecture at Providence, Rhode Island, a gentleman of North Hadley, Mass., publicly stated that his only child, a strong, vigorous boy of one and a half years, went to an uncle's for one week and drank the milk of a cow which was shortly afterwards condemned and killed in a state of generalised tuberculosis. In six weeks the child was noticeably falling off, and in three months died of tuberculosis of the abdomen. There was no tuberculosis on the father's side, but some on his mother's, although she herself was in perfect health.

Dr. E. O. Shakespeare attributes one-fifth of all deaths in infants and young children feeding on milk to tuberculosis, usually commencing in some part of the digestive

organs.

Woodhead has recently stated "that from his experience in two large hospitals he has been much struck by the fact that in children who had died from other diseases during the course of tubercular disease of the abdominal glands there was frequently not any trace of tubercular disease in any other part, thus pointing to the intestine as a channel by which the bacillus made its way into the body." He also remarks that in a large number of cases of general tuberculosis, where the possibility of infection by the pulmonary passages was evidently excluded, the tuberculous process appeared to have invaded the body by the intestinal canal. These facts, taken in connection with the occasional existence of tubercle bacilli in milk, went far to prove in his opinion that milk was a source of tubercular infection, especially in young children. Woodhead found that out of 127 cases of tuberculosis in children the mesenteric glands showed tubercular infection in 100, and that there was ulceration of the intestine in 43. It is especially in children that this mode of infection occurs. In the adult, ulceration of the intestine is rare as a primary infection.

Direct evidence of the infection of adults by means of milk is wanting, and we should expect to find in such cases that primary tuberculosis of the intestine would be a common manifestation of the disease; but such is not the fact as shown by clinical evidence. That such infection does not take place in adults more frequently may, perhaps, be accounted for to some extent, at least, by the fact that a strong, vigorous digestion seems in some measure to protect the consumer. Peuch fed a two-months' pig in five days with four and a half quarts of milk drawn from a tuberculous udder, and when killed after fifty-six days it was found quite sound. Four rabbits inoculated with

the same milk all became tuberculous.

The infection of animals by means of tuberculous milk, either by ingestion or by inoculation, is beyond question, different observers all agreeing on the main fact, their percentages of successful inoculation merely being different. It was formerly taught, and is still held by some experimenters, that the milk does not contain the tubercle bacillus, and is therefore not infectious, unless there is coincident disease of the udder of the cow producing it. There is, however, very strong evidence against this opinion. Ernst found in 33 per cent. of the cows examined by him, in which a careful post-mortem examination was made, which showed that the animals were widely affected with tuberculosis, but that the udder was free from disease, that the milk contained the tubercle bacillus. In 1893 Theobald Smith showed that the tubercle bacillus may be present in the milk of tuberculous cows when the udder, so far as the naked eye could tell, was free from disease. Other observers have given similar results.

The most positive evidence, however, is given by inoculation-experiments. Hirschberger, by inoculation of rabbits in the abdominal cavity with the milk of 29 tuberculous cows, of

which the udders were, or appeared, sound, produced tuberculosis 14 times. Bang inoculated from 63 tuberculous cows selected for their sound udders, and found the milk of nine of them infectious. A subsequent microscopic examination showed the udders of three of these cows to be deceased, leaving six which gave infectious milk in which even after death no tubercle bacilli could be found in the udder. Ernst found ten cows in 35 with infecting milk, though the udders were sound. Of 103 animals inoculated, 17 contracted tuberculosis, and of 12 calves sucking the cows, five became tuberculous.

It is also known that the primary seat of tuberculosis in children is so frequently in the intestines and their related glands, and milk forms so large and essential an element in the food of children, that we cannot avoid the conclusion that it is

to them a frequent source of infection.

Dr. Russell, Health-officer of Glasgow, is so impressed with the danger of tubercular infection by milk that he regards the supervision of the milk-supply as of at least equivalent importance with the regulation of the expectoration of consumptives and as being a much more practicable matter of sanitary administration. He says: "There is no need for argument in reference to the milk of tuberculous cows. The facts are so universally accepted, and so grave, that the administrative effects shine through them. It is practically the Glasgow position—that a tuberculous cow must not be retained in a dairy. There is a remarkable consensus of opinion as to the influence of milk in disseminating tuberculosis, especially among the young. The pathologist finds that of the total deaths under ten years of age among the mass of people, about a third are due to tuberculosis, and the usual seat of the disease at that age points to food as the medium of infection. The prevalence of tuberculosis among dairy cows is notorious."

Dr. Martin, in the report of the Royal Commission on Tuberculosis, writes: "The milk of cows with tuberculosis of the udder possesses a virulence which can only be described as extraordinary; all the animals inoculated showed tuberculosis in its most rapid form." Dr. Woodhead, investigating for his own purposes the effects of unboiled milk, speaks in similar terms of this virulence of milk derived from tuberculous udders

and inoculated into test animals.

The identity of tuberculosis in cattle and in man seems to be beyond question, although the manifestations of it may differ at times to a great extent. A few cases showing direct transference of the disease from cattle to man by inoculation may be quoted.

Tschermig, of Copenhagen, attended a veterinarian who had

cut his finger in making a post-mortem examination upon a tuberculous cow. After healing, the wound began to ulcerate, and the finger was finally removed. Microscopic examination revealed a tuberculous process with the presence of the tubercle bacilli.

Pfeiffer attended a veterinarian thirty-four years of age, with a good constitution and without hereditary predisposition, who cut his thumb in making a post-mortem examination of a tuberculous cow. The wound healed, but six months later the cicatrix still remained swollen, and in the fall of the next year the man developed pulmonary tuberculosis, bacilli were found in his sputum, and death occurred two and a half years after the wound. Post-mortem examination revealed tuberculosis of the joint of the wounded thumb.

Professor Law quotes a case of a young veterinarian, a friend of his, who was inoculated in the hand while opening a tuberculous cow, and who suffered from a tumefaction of the resulting cicatrix, which showed tubercle bacilli.

To these cases may be added one which came under the observation of the writer recently. Dr. E., a veterinarian of Downingtown, Pa., cut the knuckle of his fore-finger while making a post-mortem examination of a tuberculous cow. The wound healed badly, remained swollen, and showed decided tendency to ulcerate. Removal of the cicatricial mass was practised and the tissues sent to me for examination. They showed typical tubercular lesions, with giant-cell formation.

Further evidence is given by the condition of our north-west Indies. Dr. Holder, in the Medical Record, gives the Indian mortality from consumption as 50 per cent. of all deaths, at Green Bay, Wis., Tulalip, Wash., and Western Shoshone, Nev. He says that at lower Brulé, Dak., scrofula is present in 60 per cent. of the Sioux under twenty-one years, and that at Crow Creek, Dak., 50 out of a total Indian population of 1,200 die yearly of consumption and scrofula. The animals furnished to these tribes are said by Dr. Treon, an American practitioner, to be poor, emaciated, and diseased. He describes how they eat liver, tallow, and entrails, raw and fresh, and how the carcase is dried, pounded, and packed in the skins to be eaten later without cooking. The meat is eaten, even though the animal may have died of disease. (Law.)

I have given in these pages only a part of the evidence that is at hand on the question; but enough has been said, I think, to show the soundness of the conclusions arrived at by the

Royal Commission on Tuberculosis, that,

through his food or through other means, we can form no definite opinion, but we think it probable that an appreciable

part of the tuberculosis that affects man is obtained through his food.

And "no doubt the largest part of the tuberculosis which man obtains through his food is by means of milk containing tuberculous matter."

The remedy lies in the careful inspection of milch-cows and the immediate weeding out of all diseased animals found. Milk from suspected cattle should be carefully sterilized before using, and especially should not be given to infants and invalids. The inspections of the animals should be at intervals frequent enough to keep the disease from gaining headway before being discovered.—Jrnl. Comp. Med. & Vet. Arch.

INSTITUTION.

THE FAKIR'S POOR DISPENSARY, AMINABAD, LUCKNOW—AN APPEAL.

We have received the following appeal from Lakshman Prasad, Brahmo missionary in medical charge of the institution:—

"There being no good homeopathic charitable dispensary in the town of Lucknow, I opened one three years ago, in a prominent part of the city. More than twelve thousands poor men receive medicines gratis every year from the dispensary, and are mostly relieved of their sufferings. But this work cannot be carried on by a poor Fakir like me without the public help. I therefore appeal to the general public for help and generous hearts to purchase medicines from this dispensary, the proceeds of which go altogether to feed the abovenamed charitable institution, and to collect subscriptions from friends and send them to me. Any sum, however small, will be thankfully received, acknowledged in a local paper, and used bona fide for the above charitable purposes. "Lakshman Prasad."

[Copies of letters by Government officers and other public men in Lucknow accompany this appeal, which show that the institution is a charitable one and really deserving of support.]

Salvia.—An old-school physician, M. Degny, following Trousseau and Pidoux, has reminded us of the anti-sudoral virtues of the common sage—Salvia officinalis. Max Krahn, of Greifswald, has verified on his own person the admission of the former authorities that the sage acts as a sudorific in health. It seems also, according to Cadéac and Meunier, to have an action on the nervous system resembling that of absinthe (Revue hom. Belge, June).—J. B. H. S.

SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

The fourth meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thurs-

day, January 6, 1898, at a quarter to eight o'clock.

The following specimens were shown: 1. Ovarian Cyst: removed on account of pain, Dr. Burford; 2. Ovarian Cyst: removed on account of hemorrhage, Dr. Burford; 3. Gall-stones removed by Cholecystotomy, Dr. Burford; 4. Specimen of lintus susception of the bowel removed from an infant five

months old by Mr. Knox-Shaw.

The meeting under the auspices of the Section of Materia Medica and Therapeutics, was devoted to a consideration of the subject of the nosodes and commenced by Mr. Edward Mahony (Liverpool), who read a very good paper on "The Therapeutic Use of Nosodes," of which the following is a synopsis: Hahnemann's reference to such as distinguished from *Isopathy*, and included in the laws of similarity and potentisation. Definition of the therapeutic use of nosodes. The position of vaccination. Objections amongst ourselves to the therapeutic use of nosodes. Answers to such. The laws of similarity and potentisation lie at the root of the question. Cautions to avoid routine treatment. Hahnemann's allowance of clinical symptoms. References in journals to provings and clinical uses of nosodes. Position of the question in the general body of the profession.

This was followed by an interesting paper by Dr. Richard Hughes (Brighton), entitled, "On the Use of Nosodes in Homeopathic Practice," in which he took up first Hippozenine and Psorine, giving the history of the former, the nature and origin of the latter, and Dr. Gailliard's views as to it. He then discussed the general question of the nosodes, and distinguished their isopathic and homeopathic employment. He then took up Tuberculinum Kochii et Heathii, the nature of the latter, and the experience with either of Sinclair-Coghill, Arnulphy, Burnett, Clarke, and Mersch, and finally alluded to Dr. Cartier's views and the results which he had obtained with Tuberculin.

The discussion which followed revealed a good deal of ignorance on the subject and very little experience, indeed none, except with *Tuberculinum* which some of the speakers had used. Dr. Dudgeon opened the discussion, and said that Hahnemann used the term clinical symptoms very differently from the way it is commonly used to-day. He also said that potentisation was not practised according to Hahnemann in making the very high dilutions, and he therefore did not agree with Dr. Mahony

that potentisation altered the nosode and made it homeopathic instead of isopathic. Dr. Jagielski spoke enthusiastically in favour of *Tuberculin* in high dilution at long intervals. Drs. J. G. Blackley, Dyce Brown, Goldsbrough, Newbery, Jones, and Neatby, also took part in the discussion. Dr. Hughes then replied, and finally Dr. Mahony.

REVIEWS.

PIONEERS OF HOMEOPATHY.*

Dr. Bradford has very fitly and most successfully followed up his biography of Hahnemann by bringing together all the information that is to be obtained concerning those who shared his labours and who must share his glory; and those who took up his work and spread his doctrines and his practice all over the world. The Pioneers of Homeopathy is indeed a Book of Heroes; and reading the records of what these men went through, whilst filling us with admiration for their achievements and endurance, is also sufficient to raise a blush that with our easier times and increased facilities we do not Dr. Bradford has done a notable accomplish more. service not merely to homeopathy but to medical history in collecting these fascinating records from many journals and other sources inaccessible to the great majority of readers; and in years to come, when the great truth for which one and all laboured has been acknowledged, as it must eventually be, it will be to Dr. Bradford's pages that the medical world will turn for the full elucidation of the rise and progress of the greatest reform in therapeutics the world has yet seen. But Dr. Bradford and his publishers must not be allowed to wait for posthumous honours to crown their work. The homeopathic world is already vast and constantly extending. This work of Dr. Bradford's is one which should be in the library of every homeopathic practitioner, and also of every lay homeopath who has a soul capable of being stirred by the stories of great deeds.

^{*} The Pioneers of Homeopathy. Compiled by Thomas Lindsley Bradford, M.D. Philadelphia: Boericke & Tafel. London: Homeopathic Publishing Company, 12, Warwick Lane, E.C. Price 15s. net.

The first part of Dr. Bradford's volume is devoted to biographic sketches of the provers who assisted Hahnemann. Of these forty-nine names are given, and in a tabular list each prover is credited with the drugs proved by him. The history of these provers occupies 135 pages of the text.

The second part of the book is devoted to "The Pioneer Practitioners of Homeopathy," among whom the names appear of Jahr, Hartmann, Bænninghausen, Curie, Hering, Quin, Mure, Luther, Wesselhoeft, Wolff, and many others, including some famous lay homeopaths like the late Mr. Leaf. Dr. Bradford mentions "a Dr. Roth, of Paris," of whom he is unable to give any particulars. He was Dr. David Roth, an elder brother of the late Dr. Matthias Roth, of London, and was the author of a classical collection of cases from homeopathic practice, entitled Clinique Homeopathique. It was published in the years 1836-1840, in nine volumes (by Baillière), under the nom de plume of "Le Docteur Beauvais (de Saint-Gratien)." Why Roth chose to publish his work anonymously we cannot tell. It remains unique as a collection of clinical cases, and deserves to be better known than it is.

The volume is one of absorbing interest open it where we will. Take as an example the story of Gustav Adolph Schroeter. His cure of a Polish countess given up to die of carcinoma uteri; his consequent removal to Lemberg; his successful fight with cholera there, and the fame he won in consequence; the bitter persecution that followed, and his determination to emigrate to America; his birthday present of an Imperial decree granting free permission to practise homeopathy in Austria to Schroeter and all others, obtained through a petition to the Emperor got up by Schroeter's ardent friends, which changed his determination; the gallant struggle he made in later years against failing bodily powers, worn out by his unstinted labours, especially during the two epidemics of cholera all this record of character and incident is found in a few graphic pages of Dr. Bradford's book.

By the way, it is to Schroeter that we owe one of the most useful keynote symptoms of the materia medica.

We quote from Dr. Bradford:—

[&]quot;Hering says: Schroeter, one of the provers most objected to by the purificators, next to Nenning, proved Borax on

himself, and also collected symptoms observed in sick children, and corresponding to the other symptoms of *Borax*. He published the following: 'No. 4. Very anxious when riding quickly down hill; it is as if it would take the breath away, which was never the case before.—5. The child, when dancing it up and down, is afraid; when rocking it in the arms, it makes an anxious face during the motion downward. (Observed the first three weeks.)' These two observations strengthen each other. Hence, lecturing on *Borax* in Allentown in 1835, the attention of the students was called to the fact. There was nothing like it in our whole materia medica. . . . This one symptom has been the source of an infinite number of cures in this country."

COMMON SENSE HOMEOPATHY.*

WE congratulate Dr. Moore on the success of his little work which has found its way into a second edition. He has been able to enlarge the scope of it somewhat, as will be seen by his preface to the new edition, which we have pleasure in reproducing.

"That this unpretentious little book has served some, at least, of the objects which the author had in view, is proved by the rapid exhaustion of the first edition. Among those who have been powerfully influenced by its arguments and clinical illustrations in favour of Homeopathy, have been two practitioners who have wisely changed their practice to the method of Hahnemann.

"New sections have been added (on Nursing, Feeding of Infants, a Table of the Infectious Eruptive Diseases) and five fresh cases of great interest; besides considerable enlargement of the old sections. The author hopes that the intelligent lay public, the nurses and managers of public institutions, as well as liberal-minded medical practitioners, will each and all find herein something useful, practical and suggestive."

KEENE & ASHWELL'S DIARY AND CASE-BOOK, 1898.+

This Annual comes to us year by year with only such alterations as the general information contained in it

+ Physician's Diary and Case-Book. Keene & Ashwell, 74, New Bond

Street, W.

^{*} Common Sense Homeopathy: Addressed to Non-medical Readers. By John Murray Moore, M.D. Second Edition. Liverpool: Thompson and Capper, pp 87, 1s.

requires, so that we can but repeat the praise bestowed on it on previous occasions. Messrs. Keene and Ashwell render a good service by this publication, and we trust it is well used, especially the Case-Book, for every homeopath ought to take notes of his cases; but we fear there are some who fail in this respect.

APPOINTMENTS, REMOVALS, VACANCIES, ETC.

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

Mr. Herbert Bishop, of 29, Ludgate Hill, informs us that he has ceased to act for Messrs. Radcliffe & Tilly, of Adelaide and Perth.

Obituary.

CHARLES FREDERICK WATTS.

Another veteran has passed away in the person of Dr. Watts, of Thames Ditton. Dr. Watts commenced practice in London, and in 1840 removed to Thames Ditton. There he remained in practice till he retired in 1881, having been a homeopath for the last twenty-one years of this period. In 1887 he removed to Redhill, where he resided until his death.

Dr. Gilbert, of Reigate, who attended our late colleague in his last illness, writes to us: "A brief memorial service was held at St. Matthew's Church, Redhill, by the Vicar, and the funeral took place in Reigate Cemetery. I have attended him for several years. He has been bedridden for many months, but his mind kept clear till a comparatively late period, and he just simply ripened and fell. He died of natural old age decay, and suffered from little except weariness."

Dr. Watts passed away on January 7th last at the age

of 83. His widow survives him.

GENERAL CORRESPONDENCE.

HOMEOPATHIC PHARMACY AND DISPENSING IN SOUTH AFRICA.

To the Editor of The Homeopathic World.

SIR,—The "Homeopathic World" includes South Africa, and your readers will sympathise with us in the difficulties of securing the proper and reliable dispensing of homeopathic remedies. There is no homeopathic pharmacy in Cape Town, or indeed in South Africa as far as I know. The public are in consequence dependent upon allopathic chemists, who take no further interest in the circulation of homeopathic remedies than as a mere item of trade. Some do a little dispensing on their own account, but such specimens as $Arsenicum \ \phi$ and $Sepia \ 1x$ (fluid), so demoralise one's confidence in them that we cannot trust them.

Cape Town is very rapidly increasing in size and importance, and has been designated "the New York of South Africa," I suppose from the fact that it is the gateway of the great bulk of the passenger traffic for the colony. A greatly additional impetus has been given to the activities which go to make a city through the opening of the railway to Rhodesia, and the fact of its being the seat of Parliament and the Governor's residence makes Cape Town the first city in importance in the colony.

I feel there would be an excellent opening for a thoroughly qualified, enterprising homeopathic chemist who would be prepared, like all pioneers, to wait for success and to face the usual difficulties attendant on such an undertaking. It would be a great relief to both Dr. Kitching and to me, not to mention the homeopathic public throughout the colony, to know we could depend at last upon a genuine homeopathic chemist, and any one who seriously entertains the suggestion might rely upon our support and recommendations.

I will be happy to supply any further information in my

power to those desiring it.

Yours faithfully, ROBERT H. FALLON, M.D.

14, Church Street, Cape Town, December 29, 1897.

THE MAYOR OF BATH AND THE HOMEO-PATHIC DOCTORS.

To the Editor of The Homeopathic World.

SIR,—A rumour that I am about to retire from practice having been widely circulated for some time past, and having lately been given great prominence by a public statement of the mayor of this city, I am compelled to take notice of it.

The mayor, in a recent speech concerning the desirability of admitting homeopaths to a proposed medical advisory committee on the subject of the Mineral Baths, said "he believed there were only four homeopathic doctors in Bath, and one of these was about to retire, so that Dr. Wilde and his partner were the only two who really used the Baths." I at once wrote to the local papers stating that I had not the least intention of retiring, that I was constantly sending patients to the Baths, both for the ordinary and the Nauheim treatment, and that, as a former member of the Baths Committee of the Town Council, I was quite as interested in the Baths as any one. I also intimated that the mayor had been misinformed by certain interested persons with whom the wish was father to the thought.

The mayor has since expressed his regret at having been so misinformed, but as I do not know the extent to which this misinformation may have spread, I shall feel much obliged if you will give this letter the publicity of your journal.

Yours truly,

GEORGE NORMAN.

12, Brock Street, Bath, Jan. 15.

REPERTORY TO THE CYCLOPÆDIA.

To the Editor of The Homeopathic World.

SIR,—There are amongst us homeopathic practitioners both materialists and immaterialists (vital theorists, if you will); and I am afraid there always will be so long as the mental faculties of "causality" and "wonder"—of demonstration and credulity—are small in some of us and large in others. The former—perhaps the great majority—

require demonstrable results, but to the latter the marvellous, mysterious, and wonderful in Nature are very fascinating. Perhaps the so-called Phrenologists would be able to pick out amongst us the individuals belonging to the two classes; they profess to be able to do so. Any way, it would be well did we recognise that there may be natural mental causes for the existence of the two classes, and for us to agree to differ rather than go on injuring our cause by throwing mud at each other on every possible occasion. I am inclined to think that those of the former class view the subjects of health and disease, and life and death, too seriously to trust to possible "chaff"; and that they think all chaff should be winnowed away, or at any rate the bread of life should be made of pure wheat only.

I am lead to these reflections by the tone adopted by your reviewer of the above-named book and of the Cyclopedia itself in your January issue. To my mind the Index or Repertory has been prepared by, and is intended to serve the needs of, the former class of practitioners; and neither intended for, nor expected to serve the purposes of, the latter; for these there are materia medicas and repertories plenty; and it would be little more than generous if they would allow the former class to prepare books for their own use without making their doing so serve as an occasion for mud-throwing. Surely our monthly meetings should make us more tolerant of each other's opinions; just as isolation is apt to engender

feelings of self-sufficient superiority!

May I ask your reviewer to read over again the discussion that took place at our Clifton Congress on Dr. McLachlan's paper, and to remember the motto of the late British Journal of Homeopathy?

Yours truly,

JOHN W. HAYWARD.

61, Shrewsbury Road, Birkenhead, Jan. 15, 1898.

SIR,—I have read Dr. Hayward's letter, and much regret that either he or any one else should feel aggrieved by my criticisms of Dr. Hughes' *Index*. I must protest, however, that the review contains no real justification for personal grievance; and if Dr. Hayward's remarks about mud-throwing are intended to apply to the article, I am sure, if he will calmly consider it, he will find the mud is a

figment of his own vivid imagination. With the main contention of his letter I cordially agree. There are two main sections of the homeopathic body, one of which regards as the genuine wheat of homeopathy only observations on healthy persons with drugs in potencies below a certain limit. The other section (including Hahnemann, Hering, and a number of other respectable homeopathic practitioners) think the materia medica can be enriched by observations of the actions of remedies when given to the sick, and puts no limit to the possible sensitiveness of the human organism. If the former section like Dr. Hughes' Index, in the words of Artemus Ward, "it is just the sort of index they do like," and I have nothing whatever to say against their choice. If they find it of service in curing the sick I shall be very glad, and I am sure, sir, you will be happy to publish their cases in your journal. There is not the smallest call for quarrel between the two sections, as you have clearly pointed out in your article on "A Plea for Solidarity in your December issue. trouble with the *Index* is—and this is what alone gives point to my strictures—that its compiler tacitly condemns the other party by claiming for the Cyclopædia that it presents "the materia medica of homeopathy in the most genuine and intelligible form." If he had stated that it was an endeavour to meet the views of a section of the homeopathic body, as Dr. Hayward understands it to be. and did not pretend to dictate to the whole, I should have had no criticism to pass upon it on this head. As Dr. Hayward has come forward to champion the new work I hope he will let your readers have some practical evidence of its utility. That is what is wanted from both sides. Neither side has any right to dictate to the other, and if I have in any way given the appearance of this in my article I have to that extent missed my aim. Let each side do its work with the means it can use best, and cast no reflections on the views and methods of the other side. It is because it seems to me that the compiler of the *Index* has by implication transgressed this canon that I felt called upon to point it out. I must repeat here the opinion I expressed in the article, that until the remedies in the Cyclopædia are schematised (as was done with the Kali bich. provings, for instance, in the Hahnemann Materia Medica) the Cyclopædia will remain a sealed book to all but the student notwithstanding Dr.

Hughes' herculean labours on the *Index*. I may be wrong, of course, but at any rate I have a right to express my opinion, and that is it.

I am, &c., Your Reviewer.

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET, BLOOMSBURY.

Hours of Attendance:—Medical (In-patients, 9.30; Out-patients, 2.0), Daily; Surgical, Mondays, Tuesdays, Fridays, and Saturdays, 2.0; Diseases of Women, Tuesdays, Wednesdays, and Fridays, 2.0; Diseases of Skin, Thursdays, 2.0; Diseases of the Eye, Mondays and Thursdays, 2.0; Diseases of the Throat and Ear, Wednesdays, 2.0; Diseases of Children, Mondays and Thursdays, 9.0 a.m.; Operations, Tuesdays, 2.30; Dental Cases, Thursdays, 9.0 a.m.

MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Anders (James M.). A Text Book of the Practice of Medicine. Illust. 2 vols. Roy. 8vo, pp. 1,290. (Rebman. 36s.)
- British, Foreign, and Colonial Homeopathic Medical Directory for 1898. Fcap 8vo. (Homeopathic Publishing Company, Net. 2s.)
- ing Company. Net, 2s.)

 Brodie (T. G.). The Essentials of Experimental Physiology for the Use of Students. 8vo, pp. 246. (Longmans, 6s. 6d.)
- Browne (O. A.). Aneurysms of Aorta:
 Being an Exercise for an Act for the
 Degree of M.D. in the University of
 Cambridge. 4to sd. (H. K. Lewis,
 2s. 6d.)
- Burnett (J. C.). Vaccinosis and its Cure by *Thuja*. Fcap 8vo, pp. 145. 2nd. ed. Homeopathic Publishing Company. 2s. 6d.

- Cory (Robert) Lectures on the Theory and Practice of Vaccination. 8vo, pp. 132. (Baillière. 12s. 6d.)
- Parkinson (J. Porter). The Diagnosis of Disease. Cr. 8vo, pp. 178. (Baillière. 4s.)
- Walsham (W. J.). Nasal Obstruction: The Diagnosis of the Various Conditions Causing it, and their Treatment. 8vo, pp. 264. (Baillière. Net,
- Retrospect of Medicine (The). A Halfyearly Journal. Edited by James Braithwaite, assisted by E. F. Trevelyan. Vol. 116, July-Dec., 1897. 12mo, pp. 456. (Simpkin. 6s. 6d.)
- Year-Book of Treatment (The) for 1898. Cr. 8vo, pp. 492. (Cassell. 7s. 6d.)

TO CONTRIBUTORS AND CORRESPONDENTS.

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

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

envelope.

All advertisements and business communications to be sent to the "Manager" of the Homeopathic Publishing Company, 12, Warwick Lane, Paternoster Row, London, E.C.

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

CORRESPONDENTS.

Communications received from Mr. Fredk. Kopp, Greenwich, N.S.W.; Dr. Gilbert, Reigate; Dr. Wheeler, Norbiton; Dr. Hansen, Copenhagen; Dr. Fallon, Cape Town, S. Africa; Dr. Heath, London; Mr. Norman, Bath; Dr. Hayward, Birkenhead; Mr. Hurndall, London; Mr. J. Meredith, Lydney.

BOOKS AND JOURNALS RECEIVED.

Hom. Review.—Chemist and Druggist.—Zoophilist.—Animals' Friend.—Allg. Hom. Zeit.—Med. Era.—Med. Argus.—N. Y. Med. Times. — Amer. Homeop.—Calcutta J. of Med.—Vacc. Inquirer.—Med. Monad. f. Hom.—Il Secolo Om.—H. J. of Obstet.—H. Maandblad. — H. Envoy. — Amer.

Med. Monthly.—N. A. J. of H.— Maanedsckrift f. H.—H. Physician.—Clinique.—Archiv. f. H.— Med. Counsellor.—Minn. H. Mag. Hom. News.—H. Monat.-Critique. — J. of Orif. Surg. -Pacific Coast J. of Med.—Public Health J.—Indian Hom. Review. -Med. Times.—Rev. Hom. Francaise.—New Eng. Med. Gaz.— L'Art Médical—A Manual of Genito-Urinary and Venereal Diseases. by Bukk G. Carleton, M.D., with Venereal Diseases of the Eye, by Chas. Deedy, M.D.—Facts concerning Monte Carlo.—Common Homeopathy, by Sense Murray Moore, 2nd edition.

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THE

HOMEOPATHIC WORLD.

MARCH 1, 1898.

CONFRATERNITY.

Since our plea for unity in the profession appeared in December last we have been glad to note many indications, both within our own body and in the old school camp, that things are tending in the direction of our hopes.

In the January number of L'Art Médical is an article by Dr. J. P. Tessier, entitled De la Confraternité en Médecine, which does us the honour of embodying a translation of our article almost entire, and which eloquently backs up our plea. We are glad also to note that Dr. Tessier promises to return to the subject in which he is in such close sympathy with ourselves.

From many private quarters we have received words of approval and encouragement, including one from Dr. George G. Shelton, of New York, Registrar of the New York Homeopathic College and Hospital.

The American Homeopathist of January 15th, alludes to the article in these terms:—

"A Plea for Solidarity, being the leading editorial in the December Homeopathic World, printed and published in London, is a strong appeal to the homeopathic profession everywhere for a union of forces in destroying the influence against the law of similars. Dr. Clarke has drawn the advantages to be derived in vivid colours, and we hope the profession will give its undivided aid."

But perhaps even more significant than the notes of approval from within our own school is the appearance

of signs of a broader spirit working in the ranks of our opponents. To whatever cause it may be attributed, the new Editor of the *British Medical Journal* has recently admitted to his columns a number of letters (to be presently quoted) which we do not think would have been found there a little time ago. The correspondence arose out of the letter of Dr. Jessop, quoted in our January issue, on the subject of "Consultation with Homeopaths." Dr. Jessop's query drew various answers, some of them very different from what he probably expected.

Dr. Jessop appealed to the "leaders of the profession," and the first who essayed to help him was Dr. T. Whiteside Hime, "President Bradford and District Medico-Ethical Society" (Brit. Med. Jour., Jan. 22nd.).

Basing himself on certain of the rules of his society, one of which is to the effect that "No member shall meet in consultation other than a registered regular practitioner, Dr. Hime concluded his letter as follows:—

"An honourable man could hardly belong to a society which has adopted the above rules, as understood by us, and at the same time meet homeopaths in consultation. If it were supposed that there was any loophole for such a thing, I have not the least doubt the rules would be altered to specially prevent it."

Dr. Hime's letter was dated January 16th. In the next issue (January 29th) the first note appeared on the other side in the following remarkable letter:—

"SIR,—I am rather surprised that any one at this time should again raise the question, 'Should homeopaths be met in consultation?' Are the homeopaths bigoted or narrow-minded? If any should think so let them read the introduction to Dr. R. Hughes's Manual of Therapeutics. I did so accidentally when a student, and was so pleased with it that I resolved to study it after I qualified.

"I wonder if the extremest fancies that ever entered into the mind of a homeopath are more chimerical than the grave and laboured speculations of the lights of our profession, which are received with acclaim to-day and discarded to-morrow. Do we not use the remedies which they have introduced or rescued from oblivion, and shown us how to employ with advantage, and that without acknowledging their source? Do we not read of a new remedy introduced by Dr. So-and-So,

when it has been employed by the homeopaths since the time of Hahnemann, and oftener with more success by them, as they discriminate when it should be used, whereas those of the orthodox school employ it in all and every case, and being disappointed soon relegate it to the region of forgotten remedies—for example, potassium bichromate, cactus grandiflorus.

"Are our text-books free from the teaching of homeopathy? I would ask those gentlemen who have written to the British Medical Journal on this subject to study carefully the Medical Annual for 1887, Dr. Sidney Ringer's Handbook of Therapeutics, and compare them with Dr. Hughes's works, and tell us what opinion they come to. A number of medical men have told me they have been indebted to the homeopaths for some of the best hints they ever got, and I have learned more of the treatment of disease from some of these men than from those from whom much more was expected.

"I think the time has now arrived when doctors should be bent more on relieving human suffering, and advancing their profession, than standing on their dignity, and should not be above learning from all or any source.

"What about the new serum treatment? Does it not savour of similia similibus curantur? I think a great number of us, consciously or unconsciously, practise a little homeopathy, and I think it is not becoming in members of a liberal profession 'to denounce Hahnemann' as a charlatan, while presenting their patients with a plateful of crumbs furtively swept from Hahnemann's floor."

"I have never met a purely homeopathic doctor in consultation but will be very pleased to do so.

"I am, &c.,

"AN OPEN-MINDED GENERAL PRACTITIONER.

"January 24th."

The following week two letters appeared rather in the contrary sense. One of them, signed "Arthur Wiglesworth, Liverpool," and dated January 31st, the salient part of which we will now quote:—

"SIR,—Like your correspondent, 'An Open-Minded General Practitioner,' I am much exercised at the reopening of the question, 'Should homeopaths be met in consultation?' but from a very different point of view than that seen by him.

"I claim to have some small right to speak on this subject, because in the early stage of my career much pressure was put on me to induce me to become a homeopathic practitioner. I was introduced to a gentleman practising on Hahnemann principles, and I read much literature upon the subject.

"True homeopathic treatment—not the bastard homeopathy now generally practised—rests on the due observance of these two axioms:

1. That a drug which will induce a given disease in a healthy subject will, when that disease spontaneously arises, be a specific for its cure (giving rise to the formula, similia similibus curantur).

2. The more minutely the drug is divided into doses the greater its potency for effecting a cure," &c.

After this the homeopaths had two weeks of the *British Medical Journal* to themselves. On February 12th this appeared:—

"SIR,—In common with many others, I welcome the appearance in your columns of the letter signed 'An Open-Minded General Practitioner,' as an indication that a better state of things in the domestic

policy of the profession may be at hand.

"Your correspondent, Dr. WIGLESWORTH, has evidently taken some pains to understand what homeopathy is, but I must ask your readers to go to Hahnemann's works rather than accept Dr. Wiglesworth as a competent interpreter of his doctrines. For I do not wonder that with Dr. Wiglesworth's misapprehensions of them, he declined to become one of the body he imagines homeopaths to be. But homeopathy is not what he paints it. For one thing, homeopathy has no 'specifics for diseases.' It has a method by means of which a probable specific may be found for any given case of disease; but the remedy in every case must be selected in accordance with the particular disease-manifestations present. Corrosive sublimate produces symptoms found in many cases of dysentery, and will cure cases, otherwise arising, in which these particular symptoms are prominent; but it will not cure all cases by any means, and it is therefore no 'specific for dysentery.' Rhus and Bryony produce rheumatic symptoms, but neither the one nor the other is a specific for rheumatism. The pains produced by Rhus are relieved by motion, and those produced by Bryony are increased by motion, and each drug will only cure those cases in which the corresponding characteristics are met with. The great virtue of homeopathy lies in this, that it supplies a method by which the appropriateness of any remedy may be ascertained beforehand in any case. The question of dose is a matter for experience to decide, and until the limit of the sensitiveness to drug influence of the human organism is ascertained it is useless to dogmatise on this point.

"I should like to remind Dr. WIGLESWORTH that the practice of homeopathy is not quite as simple a matter as 'falling off a log,' that there are many degrees of adeptship among those who accept the truth of the doctrine on which the rule of *similia* is based, and also that there are many degrees of similarity between drug effects and

disease conditions, any of which may be utilised for therapeutic

purposes.

"With regard to the question of consultations between allopaths and homeopaths, I should like to suggest that the point be referred to the General Medical Council. Should the Council decide that it constitutes 'infamous conduct in a professional respect,' that will practically settle the matter. On the other hand, supposing a registered practitioner of either school should be in need of professional help in any case and should be refused the same for doctrinal reasons, I should like to know whether or not the Council would deem the conduct of the refuser to be 'infamous.'

"Clarges Street, W., February 5th." "John H. Clarke.

On February 19th these were published. It will be noted that they were written on January 31st, and are replies to the earlier letters.

"SIR,—I venture to think that the letter of your correspondent, 'An Open-Minded General Practitioner,' fairly expresses the views of many of the more enlightened members of the profession. That his letter should have appeared in your columns augurs well for the future, and seems to herald an era of tolerance and even of goodwill towards men who are working honestly according to their convictions in therapeutics. It is now too late in the day to characterise such practitioners as either 'fools or knaves.' They have graduated (some with distinction) in the regular schools, and there are no grounds for the uncharitable assumption that they are actuated by other than honourable considerations.

"Looking at the situation from the standpoint of one conversant with the inner facts, your correspondent suggests that the antagonism to homeopathy, to say the least of it, is rather unseemly. The majority of those who stigmatise homeopathy as something akin to quackery, and its practitioners as 'irregular,' have extremely vague notions of the doctrine and no experience of the practice which they denounce. Those who have carefully worked at the subject, as your correspondent has done, recognise the great acquisitions to our knowledge of therapeutics which have resulted from the labours of the homeopathic school. The extent to which such knowledge has been utilised is set forth in the standard text-books on treatment, but is clearly legible only to those who have studied homeopathy.

"The real truth of the matter is that the so-called 'irregular' therapeutic method of one generation is placidly accepted as sound practice by the next. And so it is obvious that in the domain of therapeutics (the proverbial 'backward boy') there is no room for dogmatism. Let us, therefore, as members of a liberal profession,

relegate penalties for heresy and schism to another tribunal, 'prove all things and hold fast that which is good.'

"I am, &c.,
"M.D.

"January 31st."

"SIR,—The 'bell, book, and candle' sort of tone of Mr. Burnie's letter on the above subject is distinctly funny. Dr. Hime is a contributor of a different calibre, and condescends to give reasons for his conclusion that 'allopaths' (do Dr. Hime's colleagues accept the designation?) should not consult with homeopaths. The question of consultation argued as Dr. Hime argues it is, however, in the main an academic one at the present day. In practice the question has been decided against Dr. Hime, and Bradford is one of the very few places left where homeopaths have any difficulty in obtaining the professional advice and assistance of men of eminence, and of wide clinical and therapeutic experience, when they require it. Dr. Hime's statement that the consultant's treatment 'would not be carried out, and that his therapeutical advice would be laughed at and ignored so far as the administration of drugs is concerned,' is as baseless as it is offensive.

"Dr. Hime says 'allopaths cannot possibly believe in homeopathy." It would be as reasonable for a man whose study of algebra had been confined to the section dealing with algebraical addition to say that he could not possibly believe in the binomial theorem. Dr. HIME simply has no right to an opinion on the matter. The truth or falsehood of homeopathy, and its value as a principle of drug selection, can only be determined by actual experiment, and dogmatic opinions such as that expressed by Dr. Hime, based, not on experiment, but on assumptions, are of profound scientific worthlessness and unimportance. If Dr. Hime can for a moment drop the 'medico-ethical' and assume the scientific habit of thought, he must see this for himself. Dr. Hime falls into the common error of supposing that homeopathy involves the infinitesimal dose. This is an entire delusion, as has been many times pointed out. A man may be a consistent homeopath without ever using or even believing in infinitesimals. At the same time the evidence in favour of the action of infinitesimals is practically overwhelming, and much of it has been provided by authorities whose orthodoxy Dr. HIME could not impugn. DARWIN, for instance, in his work on Insectivorous Plants, describes. the vigorous physiological reaction exhibited by the leaf glands of drosera rotundifolia to 1-20,000,000th of a grain of phosphate of ammonia.

"Naegeli's more recent experiments on the power of dilute solutions of metallic salts to inhibit the growth of certain vegetable organisms, such as spirogyra, carry the proof of infinitesimal action far beyond Darwin's twenty-millionth of a grain, and should remind

Dr. Hime that in matters admitting of the experimental test the 'cannot-possibly-believe' attitude is foolish. It was adopted by certain very positive gentlemen who had a controversy with one Galileo, and its appearance in Dr. Hime's letter only shows how very thin is the scientific veneer on some of our latter-day 'scientists.'

"I am, &c.,
"F. S. Arnold, M.B.

"Manchester, January 31st."

We think our readers will agree with us that the appearance of these letters in the *Journal* of the British Medical Association is in itself an augury of the approach of a better state of feeling in the profession at large. The old spirit of persecution is not dead by any means, but the number of those who are disposed to take the larger view, we are convinced, is clearly increasing.

NEWS AND NOTES.

HAHNEMANN'S TOMB.

WE have much pleasure in calling attention to Dr. Hughes's letter on the above subject in another part of our present issue, and sincerely hope that his appeal may meet with a very hearty response. The subject of Hahnemann's monument is of international interest, and now that Dr. Cartier's labours, undertaken under the auspices of the late International Congress, having been so far crowned with success, that the necessary legal rights in the tomb have been secured, we feel that homeopaths all the world over should join to put into the hands of the Committee a sufficient sum to secure a fitting mark of the master's resting-place. Those who have followed the persistent efforts Dr. Cartier has made in the face of difficulties of the most vexatious kind, know how well he has discharged his share in this office of piety. We hope our readers will contribute to this worthy object according to their means. Dr. Hughes, 36, Sillwood Road, Brighton, will be happy to receive and acknowledge subscriptions. Or, if it is preferred, we shall be glad to receive and transmit any sums sent to us at 30, Clarges Street, W., and acknowledge them in any way that may be desired in our pages. We hope that none will be deterred by the smallness of the amount they can afford. It would be better to have a wide subscription of small sums than two or three large ones.

MIND AND BODY—THE OTHER SIDE OF THE QUESTION.

Whatever may be the ultimate fate of the much-debated and ever-reappearing "Psyche," we are sure our readers will enjoy the racy article by Dr. Dudgeon which appears in our present issue. It may be granted without demur that the pineal gland, that "rudimentary eye," will no longer suffice for the soul's corporeal resting-place; but whether Dr. Dudgeon has succeeded in ferrying this persistently returning ghost to the other side of the Styx for good and all may well be doubted. Perhaps if the pineal gland will not suffice for the headquarters of Archæus, he may some day be found entrenched in the so(u)lar ganglion?

QUINSY.

It is very commonly asserted in allopathic circles that it is impossible to cut short a quinsy; the statement was made to me as coming from a doctor quite recently. There is, however, every reason to suppose that the indicated remedy is capable of "jugulating" it in its early stages; but as comparatively few of the public know of, or are in a position to estimate the part taken by the appropriate remedy, I think it well to suggest a rougher means of arresting it. This is to cut in halves, transversely, a large onion, and to apply the raw surface of both these divisions directly to the skin behind the angles of the jaws, and to keep them thus firmly applied a good half-hour or an hour. This relieves the tension felt, and often arrests the progress of the swelling. It is better to apply the onion to both sides from the first.

ROBT. T. COOPER.

Is this Allopathy or is it merely "Scientific Medicine"?

A CORRESPONDENT writes: "I send you two extracts from the *Edinburgh Medical Journal* for this month (February). A. C. Dutt, M.B., of Hull, writing on summer diarrhea in children, states that in seventy cases last July and August he has not had a single death.

"His treatment is a teaspoonful of castor oil or two grains Calomel; if there be dry putty-like masses passed, Nestlé's food is substituted for milk. There is one drug which the writer has found most useful in such cases—Chamomilla.

"He says it acts as a specific in the summer diarrhea of children, and in many of the nervous affections during dentition.

"In the case of a baby five months old he had rung the changes on zinc oxide, Catechu, Bismuth (carbonate, subnitrate, salicylate), tannic acid, chalk mixture, aromatic chalk powder, listerine, &c., but without producing any impression. Milk and lime-water, white wine whey, peptonised milk, Allen & Hanbury's food, were all rejected by the stomach. A drop of Chamomile tincture was given in water every hour. After six doses had been taken convalescence was rapid, and no other treatment was required."

SOLUBLE METALLIC SILVER.

LIEBREICH (Therap. Monatsh., Berlin, December, 1897) describes the recent researches of Credé, Lea, and others on a soluble allotropic form of silver, and draws attention to its possible therapeutical usefulness. It is well known that silver placed in organic fluids causes a brownish colour due to the silver going into solution. Lea and others have been able to convert this into the solid metal. The preparation is in small hard pieces with a peculiar greenish metallic lustre, and can readily be reduced to powder. When the powdered metal is treated with water, it dissolves as a brown solution. Warmed with nitric acid, a whitish opalescence first occurs, then it dissolves to a clear solution. Hydrochloric acid precipitates it as silver chloride soluble in ammonia. Heated in a platinum dish it becomes ordinary silver insoluble in water. Credé has used it by subcutaneous injection, and finds

it remains soluble in the albuminous fluids of the body, and does not produce argyria. At the Moscow Congress he exhibited ascitic fluid holding silver in solution, thus proving it absorbable and non-poisonous. A solution of 1 in 100 can be given subcutaneously to the extent of several grammes, without causing any pain. He has used it in the form of ointment, when it is absorbed through the skin.

He believes it is useful in cases of lymphangitis, phlegmonous inflammations, septicemia, and scarlet fever, diphtheria, &c., greatly lessening the virulence of the

poison.

Liebreich thinks it is well worthy of extended investigation.

A Mode of Giving a Vapour Bath to a Patient in Bed.

We take the following from the Medical Argus:—

"A writer in the *Presse Medicale* for June 19th recommends the following mode of giving a vapour bath without removing the patient from bed: A woollen blanket is placed on the bed under the patient, who keeps on his night-robe. Under each foot and at each side of the body a stone bottle containing boiling water is placed, each bottle having previously been wrapped in a very wet towel and the whole covered with flannel. After the bottles are placed in position the woollen blanket is wrapped around the patient, and another blanket

and an eiderdown quilt are put over him.

"At the end of fifteen minutes the patient is in a veritable vapour bath, which induces a profuse perspiration, and he is kept in this condition for a varying length of time, according to the case. In order to favour sweating, one or two cupfuls of some hot infusion should be taken. After the patient has remained a sufficient length of time in the bath, the woollen blanket under him and the bottles are carefully withdrawn without exposing him, and he is then wiped dry under the other blanket and the quilt. At the end of twenty or thirty minutes the patient may have a change of linen."—N. Y. Med. Journal, July 24th.

ANILINUM.

The following appeared in the British Medical Journal of February 19th. Anilinum has not yet been put to the homeopathic uses its evidently active properties suggest.

"ANILINE POISONING.

"Frank and Beyer (Münch. med. Woch., January 19, 1897) report case in a woman, aged 52, who took 100 g. of a 5 per cent. solution

of aniline oil. The stomach was washed out within a quarter of an hour. The wash water as well as the breath smelt of aniline. In an hour's time she complained of prostration and nausea, and the face became blue. Later vomiting occurred, and the cyanosis was pronounced. Somnolence with frequent yawning supervened. The rectum and bladder acted involuntarily. The pulse was small, rapid, and occasionally intermittent. The extremities were cold. The pupils, moderately wide, reacted sluggishly to light. The patient was transfused with an alkaline solution. The blood was of a dark brownish-red colour, and coagulated rapidly. There was no marked dyspnea. Injections of camphor were also used, and wine and coffee administered by the rectum. Ten hours after taking the poison the patient was still somnolent. A warm bath produced improvement, the pulse becoming stronger and the stupor less marked. Fourteen hours later the patient was much better, the cyanosis having diminished, but headache and giddiness persisting. A few hours later she was practically well. Here the symptoms of intoxication developed rapidly, notwithstanding the gastric lavage. The cyanosis appeared in an hour and a half, soon became marked, and was unaccompanied by dyspnea. This cyanosis must be referred to the development of a blue colouring substance in the body from the aniline. The next most important symptom was the stupor. Vomiting and diarrhea were less prominent symptoms. The intoxication symptoms disappeared with much rapidity. The beneficial action of the transfusion is difficult of explanation. The warm bath with warm douching was also of value. When chloroform and caustic potash were added to the blood the characteristic smell of phenyl-iso-nitrite was observable. Another portion of the blood in alkaline solution was shaken up with ether, and the extract obtained, after evaporating the ether, was treated with calcic chloride solution, when a bluish-violet colour appeared. The urine gave similar reactions, but contained no albumen or blood, and did not reduce Fehling's solution. Very little preformed sulphuric acid was found. The presence of paramido-phenol was demonstrated.

ANILINE DYES AS FOOD.

Read in connection with the above a paragraph from a contemporary is not without significance.

"The Medical Officer of Health for Marylebone, in a recent report, calls attention to the dangers of aniline dyes in food, and expresses the sincere hope that it will be made an offence to colour foods with any aniline dye, unless the purchaser is informed of the fact. The aniline dyes possess such great tinctorial power that, even with those that are poisonous, the quantity taken in the consumption of any one ordinary coloured article is most minute, so that in few cases could decided symptoms be produced. On the other hand, when sugar, butter, milk, cream, sausages, confectionery, and a number of other things, all have a small trace of aniline, these traces in the day total up. Observation and experiment have shown that the aniline dyes in small doses interfere with digestion. It is, indeed, the doctor's opinion

that the increase of maladies of the digestive organs is in part due to the increasing use of the aniline or tar colours, and to the use of antiseptics, such as boracic acid, formalin, and salicylic acid."

Picric Acid.

The Paris letter in the Medical Press of February 2nd gives this account of poisoning by absorption of picric acid applied for the relief of burns:—

"BURNS AND PICRIC ACID.

"M. Walther reported to the Société de Chirurgie two cases of poisoning by picric acid. Two children were burnt on the face and hands, and a saturated solution of the acid was applied. Great pain was complained of at the time, but the dressing was renewed three times in the space of ten days. At this period vomiting set in, accompanied by abdominal pain and serous diarrhea. The skin and the sclerotic assumed a yellow tint, and the urine was found to be charged with picric acid. Both children ultimately recovered."

Whose Property is a Prescription?

WE reproduce the following from the *Chemist and Druggist* of February 19th, as it brings up a point of considerable importance. Some medical men refuse to give prescriptions to patients on account of the improper use often made of them. It would seem that in this they have the law on their side.

"On February 8th, in the Birkenhead County Court, before Judge Wynne Foulkes, Mrs. Emma Thorne, of Liscard, claimed from Mr. Arthur Dand, chemist, 61, King Street, Egremont, the return of three prescriptions, or £5 for their value, and £5 for detaining the same. Mr. Ross Brown appeared for the plaintiff, and Mr. Collingwood Hope (who was instructed on behalf of the Liverpool Chemists' Association) was for the defence. It appeared that Dr. Napier had been attending a patient, and had written out the prescriptions for the medicine in Mr. Dand's shop, and the medicine had been supplied, for which an account amounting to 16s. 2d. had been sent in, and had not been paid. On Dr. Napier visiting the patient he asked to see the prescription, and was told that it was not there. He then told Mrs. Thorne she had better ask for it. Several visits were paid to Mr. Dand's shop for this purpose by the plaintiff and her brother, Mr. Lancaster, and Mr. Dand on one occasion promised to send it by a boy. Later on Mr. Lancaster called, and said their solicitor had written, saying that the prescriptions were to be given up, to which Mr. Dand replied that the solicitor had written under a misapprehension, and that he could not say anything further. "When the plaintiff's case had concluded, his Honour said it was a great pity that the action could not be settled. He could quite understand why the prescriptions were not handed over, but he thought the matter might be settled by proper safeguards being introduced. They might be given up on certain conditions, and then the

account might be paid.

"The parties, having consulted, were unable to come to any agreement, and Mr. Collingwood Hope then submitted that the plaintiff had not established her case. Although it might be quite true that the doctor had told her to send for this prescription, a verbal authority communicated to the plaintiff, and not communicated to the chemist, in law and in fact afforded no justification to his client. It was not a communication from the principal, who was the doctor.

"His Honour said in the absence of the authority of the doctor he

must give judgment against the plaintiff.

"Mr. Ross Brown applied for an adjournment, but his Honour declined, and said he should nonsuit the plaintiff. She had not made out her case."

ORIGINAL COMMUNICATIONS.

NOISES IN THE HEAD.

By Robert T. Cooper, M.A., M.D., Late Physician Diseases of Ear, London Homeopathic Hospital.

THE difficulties to be met with in the treatment of noises in the head is a well-worn theme of discussion; of more utility would it be to help to remove these difficulties, and this I propose doing by singling out one very marked case which I consider a typical example of drug action.

It illustrates the action of Kali Hydriodicum and the need for unit dosage. Mrs. H., aged about 43, has had a singing, boiling sensation, worst in her left ear, for two years, along with a certain amount of deafness in conversation. Bowels are inclined to constipation, about once in three days; and monthly period is too free, once in three weeks, with tendency to leucorrhea; urine clear. A good deal of headache, chiefly on vertex, with soreness of the scalp and painfulness to the touch; easily takes cold.

The above were her symptoms. The leucorrhea, the diffused soreness of the scalp—periostitic—along with a marked tendency to take cold, and a very shrill and painful variety of tinnitus, all pointed to Kali Hydriodicum. I gave two tabloids of the 30th dilution three times a

day, sufficient for ten days.

The first tabloids did not relieve, and it then occurred

to her, as the noises were worst at night (which she had not told me), to get a second supply, and to take them during the night. This at once brought great relief, but did not really disperse the noises, and, moreover, the other symptoms got better—the constipation, the head-

ache, and even the leucorrhea.

The effect, then, of Kali Hydriodicum thus given was that of marked relief but not that of real cure. Towards the end of a month I gave Acer. Macrophyllum Off. O.A., which had no marked effect, followed in a week by some tabloids of the Kali Hydriodicum, to be taken at night, but from this prescription she derived no benefit, showing that the palliative action of Kali Hydriodicum was wearing off. This, at all events, was my inference, and for this reason, at the end of two months I administered, in single dose, three globules of Kali Hydriodicum 30. This was on April 23, 1897, and from that time until now the patient has remained absolutely well, except for a very occasional threatening of the noises, too trivial to justify her, she thinks, troubling me about it.

This patient had been under allopathic and homeopathic treatment before seeing me, and was really a great sufferer

from these noises.

My contention is that we may fail to accomplish the cure of a case even with the properly selected drug in consequence of a faulty method of giving it; and that while the repetition of the remedy tends to develop the palliative action, the administration of the single dose, allowed to expend itself in the system, tends to secure the direct and complete curative effect. In other words, that, having secured the right remedy, our care ought to be to administer it in a way most conducive to the complete annihilation of the disease, and this can only be done by allowing it to expend itself in the system.

Here was a case in which the Kali Hydriodicum afforded no relief whatever until given during the violence of the suffering, and when thus gone on with, lessened in influence, and, finally, ceased to relieve. This all pointed to palliative action. It was then given in single dose, and completely cured the case: I say completely as I do not consider an occasional threatening to return of this one very sensitive symptom, the tinnitus, under circumstances of provocation, can alter the fact that the patient is really

cured.

Since writing the above her husband has told me she never has more than a threatening of the noises, and then

only at the monthly periods.

In dealing with the complicated manifestations of diseases and the dispersal of them under medicines, it is very difficult to distinguish between direct curative and merely palliative action. When a case is met in which this is possible it presents to us a very interesting and noteworthy feature.

30A, George Street, Hanover Square, W. January, 1898.

January, 1090.

MIND, MATTER, AND THE VITAL FORCE.

By R. E. DUDGEON, M.D.

THE extracts given in the February number of THE Homeopathic World from Professor Elmer Gates's essay in the Medical Times of New York show that he confounds two distinct things with one another, mind and life or vitality. Mind is the product of the vitality of the brain. We cannot conceive of mind without the organ by which it is produced, and seeing that it is the product of this organ it would be arguing in a vicious circle to assert that it makes the organ which produces it. It is just the old puzzle: "Where did the first hen come from? An egg. Omne ab ovo. Who laid the egg? A hen." What the professor calls "mentation" (what a hideous word!) is what others call vitality or irritability. which Beale tells us resides in the protoplasm or bioplasm that pervades every structure of the animal and vegetable body. "Mind and matter can never be dissociated." True, because matter produces mind. But all matter does not produce mind, only brain matter, as liver matter produces bile and kidney matter urine. But to say that "each cell has its own mental life, and it is this mental functioning which constitutes its vitality" is a contradiction or, at least, a confusion in terms. Nearer the truth is the ancient gag: "What is mind? No matter. What is matter? Never mind." Better stick to the received idea of mind as the conscious will—mens conscia: and vitality or irritability as the equivalent or the unconscious manifestation of life, when acted on by its appropriate stimuli. Among the stimuli of vitality we

must reckon the mind. Professor Gates's instances of "dirigation" are illustrations of the influence of mind on the vitality. Other instances of this power of the mind over the vitality-of this "dirigation," to use the professor's term—are the production of stigmata in religious enthusiasts and the cure of warts by directing the patient's earnest attention to them—a fact familiar to most medical practitioners and to many old wives. Mind as a stimulus to vitality is probably only met with in animals, the vitality of vegetables is perhaps only subject to ordinary stimuli—their "environmental conditions," as Professor Gates would say. I say "perhaps" because some of the phenomena of plant life seem almost to imply the possession of a purposeful will or directing mind. Professor Gates's "mentation" is merely another name for the manifestations of vitality in organised matter, and these manifestations vary according to the character of the structure of the organised matter in which they take place and the kind of stimuli acting on it, whether normal or abnormal, healthy or toxic; but the source of the vitality which produces them is the universally distributed protoplasm without which the structures are mere dead matter. Mind, properly so called, has nothing to do with the production of vitality, is, in fact, the product of vitality acting on the appropriate organised structures of the brain. A paralysed limb, removed from all influence of mind, retains its vitality unimpaired independently, and so also does a detached portion of the body for a time. Even after what is called death the hair and nails continue to grow for a time. The rigor mortis itself is a vital act. White blood corpusclesmicrobe-devouring phagocytes—have independent life; so also have pus corpuscles, as their ameba-like movements testify. The idea of a vital principle or force variously named archæus, psyche, pneuma, lebenskraft, seele, as a sort of "sweet little cherub placed up aloft to watch over the life of poor Jack," has fascinated physiologists of all times. Some have even thought to locate it in a particular organ or part. A favourite seat for it was the pineal gland, which is now known to be a rudimentary or decadent eye. It is said to be a nearly perfect eye in the so-called blind worm (though why this legless lizard should be called blind when it has two

perfect eyes and an imperfect one into the bargain is difficult to comprehend). The pineal gland, as a disused and useless visual organ, would be a most appropriate seat for such a mythical entity, as it is now generally held to be "all my eye." Hahnemann, who spoke very disrespectfully of the vital force in the fourth edition of the Organon, makes a complete volte face in the fifth edition. He there says it is "a spiritual vital force, the dynamis that animates the material organism, rules with unbounded sway and retains all the parts of the organism in admirable, harmonious, vital operation, as regards both sensations and functions." Having adopted this idea of a spirit-like vital force which was primarily concerned in the production of disease, he naturally ascribed to his pharmaceutical processes in making his dilutions the power of changing the medicines into a similar spirit-like condition, in which condition they were best adapted for acting on the spirit-like vital force. I remember hearing old Constantine Hering say that Hahnemann was the best of observers but the worst of theorisers, and it seems a pity that in his later years he departed from his early abhorrence of theory and conjecture in reference to pathological and therapeutical phenomena. Better would it have been had he stuck to his original Cartesian resolution: Hypotheses non fingo.

The difficulties in the way of accepting the vital force or principle as a spiritual entity are insurmountable. Is it the cause or the product of organisation? It cannot be both, for that would be another instance of the hen and egg paradox. It cannot be a product of organisation, for its function, according to its advocates, is, in Hahnemann's words, "to rule with unbounded sway and to retain all the parts of the organism in admirable, harmonious, vital operation," to preside over and determine the operations of organised structures. Besides. how could a material organism secrete or create a spiritual vital force? The only way out of the difficulty seems to me to hold that vital forces, like microbe germs, are everywhere lying in wait for, and ready to pounce on all new-born organisms, whether animal or vegetable. It is pleasant to think of these "vital sparks of heavenly flame" darting hither and thither, invisible and inaudible -not going about like roaring lions seeking whom they may devour-but benevolently and silently watching for

nascent organisms to whom they may serve as guide, philosopher and friend, personally conducting them, like a spiritualised Cook, from the cradle to the grave. What becomes of them after they have assisted at the final obsequies of their hosts we need not stop to inquire, more particularly as, like Betsy Prig in the case of Mrs. Harris, we "don't believe there never was no such a person." A course of reading of Fletcher and Drysdale, particularly Drysdale, would, I think, speedily bring any belated believer in the vital-force myth to the same conclusion. So we may say the claim to existence of an automatic, autocratic, spiritual vital force as an actual entity is a *chose jugée*, and he, she, or it may be confidently relegated to Hades, the appointed abode of lost spirits.

THE PRESENT STATE OF HOMEOPATHY IN BARCELONA.

By Dr. José Sanlléhy.

A PREFERENCE for homeopathy has for some few years been increasing here in a noteworthy manner. At the present day the number of homeopathic doctors practising in Barcelona is more than fifty; none of them holding any official position, all living on their private practice and without any assistance or patronage of any kind from the State or Government. For the last eight years they have had an Association (Accademia) in one of the central streets of the town (Calle San Pablo, 28, first floor). There the homeopathic practitioners meet at least once a month to discuss the questions of the day and interesting clinical cases; and on the 19th of April every year they hold a great annual meeting to commemorate the birthday of Samuel Hahnemann. To this the municipal authorities are invited, with representatives of all the scientific bodies, including physicians and a large number of the public. The governing body of this society comprises the following gentlemen: President, Dr. Juan Sanlléhy; Vice-Presidents, Drs. Javier de Benavent and Francisco Derch; Treasurer, Dr. Amado Gost: Secretaries, Drs. José Giro Savale, and Aniceto Suriol. The organ of this society is the Revista Homeopathica, a monthly journal which has already existed for ten years and is the successor to a

periodical which was begun so long ago as 1846 by the homeopathic faculty in this city. The editorial secretary is Dr. Don Angel Olivé y Gros, and most of the homeopathic doctors of Spain are among the contributors. Besides this association there has been in Barcelona for six years past a public dispensary for the gratuitous treatment of the poor. Here, in the course of 1896, 11,725 visits were attended to, and all the patients received the medicaments they needed. There are in this city other dispensaries for the benefit of the working classes in the districts where they reside. Such are the Clinica Medica Homeopathica, supported by Doctors Cahio, Giro, Pinart, Derch, Suriol, and Olivé (Ronda de San Antonio, No. 7); that established by Doctors Comet and Bertram (Calle de Sicilia Gracia); and that of Dr. Bonell (Calle Major San Jenasio) and Dr. Roig in Sans. There are many homeopathic chemists supplying medicines to practitioners and their patients; the more important are Doctors Dimenech and Sabater (Calle de la Union) and Dr. Amado Gost (Calle de Santa Ana).

CASES FROM PRACTICE.

By OSCAR HANSEN, M.D., Copenhagen, Denmark. (Continued from p. 57.)

Case IV.—Miss G., 17 years old, Copenhagen, came under treatment May 20, 1895, and had then been ill for some time. A strongly itching and burning, dry, papulous eruption appears on the lower side of the fingers and on the back of the hands. A slight eruption at the left corner of the mouth and below the right eye. The eruption burns and itches, especially during night, when she has gone to bed, the itching increases if scratched. Otherwise well. Functions and menses normal.

Arsen. alb., 2 cent. dil., three drops thrice daily.

No improvement, and on July 18th the eruption commenced to run with water, and I prescribed Rhus tox. 1 cent. dil. in the same manner and an ointment for exterior use of one part Rhus tox. tinct. and ten parts Lanoline, to be used morning and evening. On August 10th she was greatly worse. The eruption runs very much, burns and itches during night, and I therefore again prescribed Arsen. alb., but in 3rd dec. dil., three drops thrice daily and for exterior use Mercur. precip.

ruber, one part to thirty parts Axungia porci lota every ovening. Already, on September 2nd, the eruption was dry, but the skin very rough and scaled off considerably. The prescription was continued, and on October 26th the eruption had diminished considerably, but herpes zoster had appeared on the right side of the breast, four groups of herpes vesicles, one below the collar-bone, one in the armpit, and two on the left scapula. The pains are burning and stitching, worse when at rest, less when walking about. Prescription: Rhus tox., Icent. dil., three drops three times daily in a teaspoonful of water. By November 2nd the herpes zoster had disappeared and she kept on using Arsen. alb., 3 dec. dil., three times daily, for the eczema, and was completely cured by December 2nd.

Has been well since.—Journ. 6843.

Case V.—Mrs. K., 36 years old, Roeskilde, consulted me in July, 1895, she having then been ill for a couple of months. Has formerly suffered from nephritic colic, but has never passed renal calculi, and for this Podophyllum helps her. She now complains of nettlerash, which consists of white elevated blisters which sting, burn and itch considerably, but which only appear for a short time, one to two hours. The eruption appears on arms and legs and spreads about the body. She is depressed in spirits, with a tendency to weeping. The eruption is worse when she is warm, and the itching is alleviated by bathing with cold water. The appetite is often variable. Menses normal. Otherwise well. Prescribed Apis, and later, according to the symptoms, Arsen., Sepia, and Sulph., but without any improvement, and on November 11th the condition was as follows: the wheals now appear often, the burning and itching is worse after scratching. prescribed Calcarea sulphurica in 3x trituration as much as a pea thrice daily. Already, by December 13th, she felt much better, in good spirits, and the eruption had decreased and did not appear so frequently. Same prescription. On January 14, 1896, only very slight eruption appeared on the hands and in the face. She kept on using the medicine morning and evening and was well by the middle of March.

Case VI.—A little boy, two years old, had on August 8, 1895, been suffering from a skin disease for a year and a half. Has been treated allopathically without any improvement. On the scalp there is an eruption which,

according to the mother, originally showed itself as pustules, which were close together and burst now and then, so that the whole scalp is one great running surface, here and there scurfy, and which runs with water as well as with pus. The hair is matted and pus leaks out from several of the yellow scabs. Several hard, swollen glands are found behind the ears and in the submaxillary regions. An ulcerating eczema appears on antibrachia. The eruption itches somewhat. Otherwise the child is well, but fretful and restless during night. Merc. precipit. ruber 2x trituration as much as a pea thrice daily in a teaspoonful of water.

Exterior use: Merc precipit. ruber ointment (one part to forty parts Axungia porci lota) morning and evening. The scalp to be washed with tepid water and lanoline soap twice weekly.

August 26th.—The eruption does not run any longer, and is considerably on the decrease. Same prescription.

September 25th.—Only a little dry eruption on antibra-

chium. The scalp is well. Same prescription.

October 24th.—The swollen glands are very small. The eruption has almost disappeared. The medicine was kept on with morning and evening, and the patient was well and discharged on December 1st. Has been well since.—Journ. 6904.

Case VII.—Tailor B.'s daughter, six weeks, Copenhagen, had, at the commencement of the treatment, been ill for a week. A maculous eruption in large spots appears over the whole body, while the child at the same time suffers from catarrh of the nose with a greenish thick flux. The eruption is reddish brown, but does not itch, and the child has fallen off very much. She is brought up by bottle, but takes very little nourishment. The father has had syphilis. The case being recent I did not prescribe Cinnabaris, but Mercur. jodatus ruber 2x trit. as much as a pea thrice daily.

Improvement set in very quickly, and the catarrh and eruption had abated considerably towards the end of December. By continual use of the medicine the appetite increased and the child was thriving. In February the eruption had paled a good deal and was then only to be found on the arms and legs, while the catarrh had completely stopped. The child was discharged as perfectly cured in the beginning of June, 1896, and has been

well ever since.

Case VIII.—Miss K., 18 years, Copenhagen, has been scrofulous since childhood, and the illness showed itself especially by swelling and inflammation of the glands. Treatment commenced on December 18, 1895, and her condition was then as follows: languor all the day, feels tired at the least exertion, especially when mounting stairs, and then gets violent palpitation of the heart. The blood rises to the head and face and the pallor is then replaced by a bright red colour. Feels sleepy during the day and sleeps heavily and long during night and in the morning. Feels dizzy, especially when indoors. Appetite good. Menses and other functions in order. Perspires at the least movement. By the use of several suitable medicines, as Ferrum carb., Calc. carb., Pulsatilla, and Phosphorus the condition was somewhat improved, but the palpitations of the heart and the congestion of blood to the head were unaltered. The sleepiness and dizziness had disappeared, also the perspiration at every movement. On March 7, 1896, the condition was as follows: Considerable emaciation, strong palpitations of the heart at the least movement, dyspnea, stinging in both lungs, and a dry cough. Does not feel cold nor perspire during night. The heart-sounds are clear but strong and lift the stethoscope, and are strongly transmitted to both lobes of the lungs. Otherwise nothing abnormal. The congestion to the head continues.

Iodium 2 cent. dil., five drops three times daily in a

teaspoonful of water.

March 19th.—The palpitations of the heart have considerably abated, the congestion also. All symptoms better. Same prescription.

April 13th.—No pains in the chest. Palpitations and congestion ceased. Grows stouter and feels well. Same

prescription morning and evening.

By the middle of May the patient was well and has been so ever since.—Journ. 6985.

SALOL.

AN INVOLUNTARY PROVING AND A CLINICAL OBSERVATION.

Communicated by John H. Clarke, M.D.

I am indebted for the following valuable experience to my friend Mr. ——, a patient, who is a practising

chemist, and who made the observations on his own person. The pathogenetic effects ensued after putting up Salol powders, which entailed his inhaling the odour and possibly some of the powder itself. Mr. —— has been subject to headache about the eyes for many years, but the headache he experienced from Salol exceeded in severity anything he had previously had; and since the proving he has been practically free from them. Whenever threatened with a return he has taken one or two doses of Salol 12, with immediate relief.

Before citing the symptoms I will give a description of Salol taken from Newly Approved Remedies, published by Hearon, Squire & Francis, 38, Southwark Street.

"SALOL.—The compound bearing this name was produced six vears ago by Professor Nencki. Its introduction into medicine is due to Dr. Sahli. It is a white crystalline powder, having an odour recalling oil of wintergreen. Its constitution is that of Salicylate of Phenyl, and both chemically and physically it behaves in a manner similar to fats. It is soluble in ether, alcohol, and petroleum spirit; very sparingly if at all soluble in water. Its claim to act as a substitute for Salicylic Acid is founded on the fact that it may be taken continuously in large doses without producing disturbance of the digestive functions. On ingestion it passes through the stomach unaltered, and is decomposed into Salicylic Acid and Phenol (it contains 38 per cent. of *Phenol*) in the duodenum by the ferments of the pancreas. Possessing, as it undoubtedly does, powerful antipyretic and antiseptic properties, it is not remarkable that it should have been found useful in a variety of ailments. action in chronic rheumatism is most marked, and it gives promise of being a certain remedy for neuralgic affections generally. The dose is 30 grains two or three times a day. Its value as an antiseptic dressing for wounds has been put forward by Mr. Corner, who noted its effects when used on patients at the Poplar Hospital. He remarks that it has the power of preventing putrefaction, but not of destroying it when once it is established. He recommends that the wound be first rendered aseptic by washing with a 1 in 20 solution of Carbolic Acid, and then dressed with Salol."

THE PROVING.

Friday, October 22nd.—Put up Salol powder.

Tuesday.—Feeling of stiffness in joints as though they want oiling.

Wednesday.—Same, but more pain in the wrists. Cramp in hand on writing.

Thursday.—Hurts to carry even a book in hand.

Friday.—Dreadful headache, especially over eyes. Could hardly walk or hold head up for pain. Relieved by three drops Bryonia and wet compress.

Saturday.—Dull aching in head and all over body.

Sunday.—Headache still same, but worse at intervals.

Monday.—Stiffness in knee-joints and in the buttocks.

Worse in the evening. Headache better in evening.

Tuesday.—Can hardly go upstairs, and it is dreadfully

painful to sit on hard stool. Headache better.

Wednesday.—Stiffness in joints better, but buttocks still sore. Extremities sensitive to touch. Put up more Salol powders. During whole time hands shrunk up when cold, and could not straighten little fingers without much pain.

Thursday.—No pains at all, except in right arm in

evening, and then very slight.

Friday.—Pain in left buttock, especially on walking; slight headache. The threatened headache passed off. Rheumatic pains in left knee-joint, thigh, and arm, the pain being on the inside of the joints.

Saturday.—Slight pain in the left arm.

On a former occasion, while making up the same remedy, Mr. —— had pains in the shoulder. The urine smelt slightly of violets. This was the first symptom noticed, and it was not until the odour passed off that the rest of the symptoms came on.

MATERIA MEDICA MISCELLANY.

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

The Curative range of Bacillinum.—Dr. Marcy, writing on this subject, expresses his opinion that Bacillinum should only be used in cases where the expectoration is yery profuse and usually of a greenish-yellow colour and of the consistency of thick, heavy pus; the cough sounds loose and rattly and there is laboured breathing. In many cases the cough is loose and rattling and expectoration scanty for want of power to raise it, but in most cases it is very profuse. He says it is the only remedy he has found which materially changes and controls the expectoration and cough. It stops the secretion, gives increased strength and appetite, and renews in a marked

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degree the spirits and hopes of the patient. In those who are too weak to cough and raise the secretion from over-filled lungs it gives them the strength to do so. It also alters the character of the secretion from a greenish-yellow pus to a more watery mucous secretion, with occasionally hardened pieces of yellow-grey matter. He has used this remedy with marked success in pneumonia and in asthma in old people where the symptoms are as described above. He also claims to have cured several bad cases of phthisis.

He uses the 200th potency and gives a dose every four hours till improvement sets in, and then repeats it less frequently. He has not obtained the same results from

other tuberculous preparations.—Hom. News.

Tabacum in Seasickness.—Dr. J. T. Kent has had some most astonishing results from Tabacum used for seasickness, based upon the close resemblance between that malady and the provings of the drug. One case of a business man who makes two or three transatlantic trips each year, with former constant and severe illness, has of late been infallibly relieved by one powder of Tabacum 70m. He can take his meals all the way over. Car sickness is also often relieved by Tabacum. Other remedies often useful are Petroleum and Cocculus, but Tabacum is a broad remedy that seems to cover most of the symptoms. Dr. Kent never uses the remedy lower than the 70m. (Journ. Hom.).—Am. Hom.

Ferrum metallicum for Vomiting.—Wassily reports the case of a woman, aged thirty-two, who has suffered for nine months from periodical vomiting of mucus and food, feels weak, has ebullitions of blood, palpitation of heart, circumscribed redness of cheeks, in the morning cold feet to above knees. In her childhood had glandular affections. Prescribed Ferr. met. 30, a dose every fourth evening. Three weeks later she reported that she had only vomited twice in the first week, but not again. Her general health is much improved; she has still palpitation on walking quickly. The remedy was continued, and three weeks later she had no complaints to make. (Arch. für Hom.).—Am. Hom.

Iodic purpura.—Dr. Chavoix reports a case of purpura which supervened on the puncture of a hydrocele and the injection of *Iodine*. Eight days after the operation (which was done under *Cocaine*) the patient was taken

with violent chills and the body became covered with petechiæ. After this epistaxis came on, and hematuria and hiccough. The temperature was all the time rather subnormal. A case of generalised purpura over the trunk and extremities from the injection of one grain of *Iodide* of Sodium is also reported by Professor Lemoine. In this case the eruption was quite confluent, forming arborizations and streaks over the skin. In this respect it differed from other reported cases also in its generalisation and in the intense itching produced. The eruption appeared twice under the influence of the Sodic Iodide at an interval of fifteen days. The patches came on a few days after the administration of the drug, and lasted about a week. The patient had congestion of the kidneys and liver, and had previously suffered from albuminuria and jaundice. These latter organs could not perform their excretory functions, and it is probable, according to the author, that the drug had to be eliminated by the skin, and that the eruption was thus produced—Am. Hom.

Anacardium: a proving.—The following accidental proving of Anacardium is reported by Dr. M. Louise

Turton, of Brooklyn:—

"While running up this drug in my office, a few drops fell upon my hand, and without thought I touched the left side of my face. The next morning I found my left eye swollen and inflamed, having paroxysms every half hour of great burning and itching, which would frequently last about five minutes, passing off, leaving no other symptoms than a feeling of fulness and heaviness.

"The following morning my face was greatly swollen, almost entirely closing the left and partially the right eye, producing a leathery feeling of the skin. By the third day the face was highly inflamed, presenting a condition

simulating that of erysipelas without the fever.

"To the naked eye there appeared only a smooth, deeply red surface of the epidermis (aggravated by cold air); but on touch a sticky substance oozed out, which showed evidence of very minute vesicles.

"This condition lasted about five days, when the edema subsided, redness faded, the epidermis began to dry and

scale off in small flakes.

"This scaling process took several days. The face and small portions of the neck and back were the only parts affected.

"No rash appearing on the hand which touched the drug, and no other symptoms of *Anacardium* were experienced.

"Remedies used in promoting relief were Apis and Arsen., which did good work in a short time. It was difficult to ascertain whether this condition could have been produced by Rhus tox. or Anacardium, as they

produce a similar rash.

"But not having handled Rhus tox. for some time previous, and being fully aware of having used the Anacardium the night before the rash appeared, left no doubt but that Anacardium did the mischief, which kept me somewhat retired from business for nearly one week beside causing sleepless nights, and the intolerable burning and itching as before stated. I have on three occasions been poisoned with Rhus tox., and though the edema, scaling, and itching were similar, there was no oozing of a sticky substance as that produced in the poisoning by Anacardium."—N. A. J. H.

Opium, skin symptoms of.—Dr. H. A. Hare says of the

skin manifestations of Opium—

"Opium, on the other hand, is not usually suspected of causing eruptions on the skin. As a rule, the eruptions produced by it are limited to the face, but sometimes they are generalised. More commonly they are true erythemata and sometimes scarlatinal in type. In some cases there may be great redness of the skin, abundant sweating, acceleration of the pulse, heat of the skin. According to Brugisser, these symptoms often ensue after small doses, such as ten drops of Laudanum. In the great majority of these cases the eruption ends in desquamation, and it may be furfuraceous or in large plaques, according to Lanz, and resemble in every particular the desquamation of scarlet fever. In one case seen by Guinard the desquamation lasted over a period of eight days. These Opium eruptions are not only produced by the single dose, but in some cases each subsequent dose so results. Thus Berenguier reports the case of a patient who had an eruption three times in one week from the use of doses of Opium, and Brugisser records the case of a patient who developed an eruption on one leg from the use of four grains of Dover's powder, another eruption the next day from another dose of one grain of Dover's powder, and a third eruption after five drops of Laudanum.

THE HEAD SYMPTOMS OF SANGUINARIA CANADENSIS.

By Frederick Kopp, Greenwich, N.S,W.

Sanguinaria Canadensis (natural order, Papaveracea) is familiarly known by the English name of Blood-root, and grows very commonly in most parts of Canada and the United States of America. The root, which is the officinal portion of the plant, is from one-quarter to about half an inch in diameter, and is very fleshy, succulent, and knotty, containing numerous radicles. It is oblong in shape, horizontal, and perennial, and about from two and a half to three inches in length. The external colour of the root is a reddish brown, being slightly paler internally. The root, when wounded or broken, emits a juice or sap of a dark vermilion colour, which has a very acrid and bitterish taste, and leaves a burning sensation in the throat, of a very persistent character.

The officinal preparations of Sanguinaria Canadensis are the mother tincture, made from the root with strong alcohol, and the various dilutions prepared from this; and the triturations of the dried root. The nitrate and sulphate of Sanguinarin are also officinal, and are sometimes used.

The following are the principal head symptoms developed during a recent proving of Sanguinaria Canadensis (mother tincture, 10 minims taken eight and nine times a day for two weeks), by which it will be seen that the drug covers the symptoms of a large variety of headaches, and is, therefore, a valuable addition to our materia

medica in the treatment of these complaints:—

Pain of a pressing, drawing character in the forehead, with a sense of heaviness in the head; ameliorated by walking. Vertigo, accompanied with headache and great nausea, followed by vomiting, the nausea not being diminished or ameliorated by the vomiting. Vertigo, with impaired vision (these symptoms generally precede the vomiting). Vertigo, with singing noises in the ears. Great determination of the blood to the head, with flushes of heat, and buzzing noises in the ears. Vertigo, on turning the eyes upwards, or on suddenly turning the head. Terribly severe headache; sensation as if the head would split, with attacks of chill, and burning in

the stomach. Rheumatic-like pains in the head, accompanied with stiffness and pains in the limbs and the neck. Stitches in the forehead and left temple, of a periodic character, aggravated in the evening. Small, painful. and sore spots on the temples. Darting, ray-like pains in the head, extending upwards from the neck. Terribly severe headache, ameliorated only by pressure. Headache of a paroxysmal character, occurring once a week, or even at longer intervals, commencing in the morning, worse during the day, and lasting until the evening; the pain is most severe on the right side, and is of a throbbing, digging, lancinating and piercing character, extending through the forehead, top of the head, and the brain, the head feeling as if it would burst; these symptoms are followed by nausea, vomiting, and chills, and are ameliorated by sleep. Migraine, the pains coming on in the morning, and lasting until the evening; accompanied with vomiting (of a bilious nature), the pains being aggravated by motion. Sensation as if the eyes were being pushed out from their sockets. A feeling as if the scalp were loose, especially felt on turning the eyes upwards. Very quick and sudden darting flashes of pain in the back of the head. A peculiar sensation as if the head was drawing forward. Very severe beating headache, with vomiting of bitter water or matter, and throbbing of both temporal arteries.

It will thus be seen by the above symptoms that in Sanguinaria Canadensis we have a very valuable remedy. It is very effectual in migraines and neuralgic headaches. It is also of great efficacy in dyspeptic headaches, especially those principally indicated by nausea, vomiting, great weakness of the digestion, loss of appetite, and pyrosis. Its usefulness in rheumatic headaches is borne out by the following symptoms of the proving: "Rheumatic-like pains in the head, accompanied with stiffness, and pains in the limbs and neck." It also developed during the proving the following symptoms of a rheumatic tendency: "Stiffness, soreness, and pain in the left side of the nape of the neck on being touched; rheumatic-like pains in the shoulders, neck, and both arms: rheumatic-like pain in the sacrum, relieved by bending forward; lumbago-like and myalgic pains in the small of the back, affecting the great muscles; rheumatic-like pains, coming on suddenly, in the shoulder-joints; rheumatic-like pains in the hands and arms; stiffness of the joints of the fingers, accompanied with stitching and lancinating pains; rheumatic-like pain in the upper portion of the right arm, and also in the right shoulder, aggravated at night, with great difficulty in turning round in bed; towards evening, rheumatic-like pains in the left shoulder; rheumatic-like pain in the right arm, extending to the shoulder, the arm being completely helpless, and the symptoms greatly aggravated at night when in bed; very severe, rheumatic-like pain in the hands, extending into the arms, coming on suddenly when in bed; rheumatic-like pain in the inside of the right thigh, followed by pains in the chest; rheumatic-like pains in the left hip; stiffness under the knees; sense of tightness and stiffness in both knees; swelling of the joints in the extremities." Its great affinity for rheumatic symptoms will be seen by the above, and it has, beyond a doubt, cured many cases of genuine rheumatism, generally when that affection has been of an acute character.

Sanguinaria Canadensis has also proved of great service in congestive headaches, characterised by a determination of blood to the head, and accompanied with throbbing of the temporal arteries. In women it is very useful in the headaches peculiar to the change of life, and and those arising from menstrual suppression. In sick-headaches also it is often of great benefit, as is borne out in the proving, namely, "nausea" and "bilious vomiting." It has proved of great service in hemorrhagic apoplexy, in those cases in which the following were the most prominent symptoms: "Dimness of the sight, distension of the temporal veins, vertigo, burning in the stomach, and

vomiting."

Undoubtedly the beneficial results obtained from the use of Sanguinaria Canadensis in dyspeptic and sick-headaches are due to its action on the stomach, which it greatly strengthens, at the same time stimulating digestion, and exciting the appetite. It at the same time acts also beneficially on the liver, and has been successfully used in biliary concretions, atony of the liver, hepatic torpor, and jaundice.

Next month I propose to deal with the action of the drug on the throat and chest, as per present proving.

PHOSPHORUS.

By AGRICOLA.

In September, 1896, one of my nephews called upon me while on a bicycle tour through the Forest of Dean, accompanied by a young friend, a London scientist. This young gentleman proved to be a veritable star as to what can be accomplished when the success consequent upon self-denial of the social pleasures and seduction of metropolitan life is contrasted with the causes of the 95 per cent. failures of the Science and Art students who enter upon the three-year curriculum of South Kensington Institute for the advancement of Technical Education.

During dinner I noticed that he frequently shaded his eyes with his hand from the glare of the bright lamp-light reflected from the white surface of the tablecloth. Upon examination I found the whites, &c., of the eyes to be injected with bright-blood streaks. Of course I asked the cause. "Oh," he said, "my eyes are weak, due to a close examination under a powerful artificial light of the angles of crystals, a subject of study I am pursuing under the instruction of Professor Armstrong, of the South Kensington Central Technical College (whose assistant I have the honour to be) in order to settle certain points long in dispute."

Now, I found that in spite of a month's rest to his eyes the symptoms did not improve. This led to a further inquiry. Result, his enclosed paper; cause of eye-trouble, Phosphorus fumes. Belladonna 3x four times daily during daytime and a wet compress saturated with a one per cent. aqueous solution of Iodine tincture worn over eyes during night soon put my young friend's eyes all right; but my endeavours to make him a student of Hahnemann and of his therapeusis met with—well, young men and still more so young women won't study disease-causings, nor yet disease-curings. No, no; proselytism in medical matters homeopathic is not encouraging. Let Hahnemannian chemists do this—there is no hope from its M.D.s nowadays.

PROVING OF PHOSPHORUS PENTACHLORIDE.

Phosphorus Pentachloride fumes in moist air, giving off fumes of Phosphorus Oxychloride and of Hydrochloric Acid.

When *Phosphorus Pentachloride* is ground up, the operator inhaling only very slightly the fumes, for say ten to thirty minutes, the symptoms experienced are:—

(i) During use and for hours afterwards, great soreness of the mucous membrane of the eyes and nose, with

copious intermittent runnings.

(ii) In the night the eye soreness in undiminished; the intolerable smell of the fumes cannot be forgotten, and

sleep is impossible.

(iii) In the morning breathing seems a trouble; the sufferer is very wheezy on the lungs; also there is throat and chest soreness.

(iv) During the day the soreness of the eyes is still con-

siderable, and people notice it at once.

The effect lasts fourteen days at least.

W. T. GIDDEN.

"Those Marvellous Solvents the Animal Juices!"

Having drawn Mr. Gidden's attention to my experience, causative and curative, first upon my own system and then upon the disordered health of other people, of that remarkable product of chemical research and experiment *Phosphorus red amorphous* in one-grain doses ranging from 6 to 20x attenuations, I requested his valued opinion as to what chemical change, re-combination, &c., this form of *Phosphorus* would probably undergo in the human body. "Ah!" he replied, "who can even guess at what those marvellous solvents the animal juices may effect?"

A CASE OF GASTRIC ULCER.

By John H. Clarke, M.D., Consulting Physician to the London Homeopathic Hospital.

THE following case seems to me worthy of being put on record for several reasons, and more particularly for the diagnostic points brought out. In many gastric cases it is practically impossible to be certain whether actual ulceration is present or not. The history of this case may add something to the clearing up of doubtful cases.

Mrs. —, aged 43, consulted me on November 10, 1892. Three weeks before she had been present at an operation, and had felt rather unwell since. She was subject to

attacks like that for which she consulted me, but had

been better the two previous years.

She was the mother of nine children, the youngest being six years old. Her father had died of what was called "suppressed rheumatic fever" after two years' illness. Towards the end he had had several apoplectic seizures. One of her two sisters had died at the age of 33 of "cancer of the liver," leaving four children. The other sister had died of "cirrhosis of the liver," it was said, at the age of 35. This sister had nursed her father in his last illness. Her mother had noticed her to be low-spirited; she perspired at the least thing. Her lips swelled. At the last she had ulceration of the bowels.

My patient complained of pain causing her to double up; and she felt too weak to walk. The pain goes up to the r. shoulder-blade. Had no appetite; all food caused her to feel sick. All at once her mouth would fill with bitter, sour fluid and part of food taken. Tea aggravated; coffee caused pain and made the bowels act. Milk and eggs <. The symptoms were < one hour after food. Bowels very constipated; at present more so than usual; stool yellow. Urine diminished. Last monthly period ten days late, then excessive. In the attacks the feet are cold and clammy; sleepless, very disturbing dreams; spirits depressed, cries at everything, > from consolation; continuous dull headache goes up the back of the head. Better in summer, worse in late autumn.

Chelidon. 1 m. every three hours.

November 14.—Felt brighter immediately she began the medicine. Pain left r. shoulder as if by magic. The head was very bad all night. Next day head better and pain returned to chest, but not at all sick. Tongue rather white, no appetite. Feels better after solid food than after liquid. Bowels have acted; this morning loose. Feels discomfort across abdomen, > after getting up wind.

Repeat.

November 19.—Better; appetite returning. Bowels moved once, rather confined after being loose. Head better; aches slightly after dinner. A little sore spot over left lobe of liver.

Repeat.

November 28.—Has not had pain but discomfort in l. side after almost all food. Head very well; bowels con-

fined; stools like sheep's dung. A little burning in abdomen (before the pain after meals came on, used to have dreadful burning in upper abdomen from exertion or after meals).

R. Magnes. Mur. 12 four times a day; Chelid. 12 if

required.

After this I did not see the patient again for four

months.

March 31, 1893.—Has been better, but never well. At the time of the last monthly period (four weeks ago) was greatly upset by a death. This made the period worse, caused great depression, and she said a swelling formed in the right ilium. She comes over hot perspirations; sudden hot flushes; nerves very bad.

Lying on the left side causes palpitation and breathless-

ness.

She has a sort of "giving way feeling." Pricking pain. Appetite quite poor. Bowels irregular, stools yellow. Burning across lower abdomen. Urine hot. Wakes feeling depressed. Wakes in frights. Pulse 84.

R. Laches. 30 every three hours. I now saw nothing

of her after this for over two years and a half.

October 21, 1895. — Still has great pain across the abdomen after eating; like a knife going through left hypochondrium. Rising of very sour, watery fluid very soon after dinner. Vomiting does not relieve as it used to do. Never hungry. Bowels acting, either constipated or very loose. In the summer were more relaxed, compelling her to rise early. Pulse 84. No headache, but had attacks of depression with crying.

(She told me she had had pain all the previous winter. In May the sickness ceased, and in June the pain also. This had only just re-commenced a week before the time

she came to see me.)

I did not see her again till January 13, 1897, when I found her in collapse. She was under the influence of

opium at the time.

She told me she had been constipated some time. The aggravation from lying on the left side had been very noticeable; it caused a suffocating feeling, which compelled her to turn instantly. On the night of the 11th she went to bed very tired after a fatiguing day with irregular meals, having had toasted cheese and beer for supper, and a small bit of apple. She awoke at

March 1, 1898.

4 a.m. and found herself on her left side. She experienced violent pain all over, and was greatly distended. Her local medical adviser saw her at 2.30 p.m., and administered an enema. Only a few small pieces passed. A second enema brought away neither motion nor flatus. *Morphia* was given, which relieved the pain, and she was after that constantly sleepy. I saw her on 13th. She was then much changed; there was no pain, but excessive distention. The only part where there was any tenderness was the r. iliac region.

She was removed to hospital, and after consultations with surgeons it was decided to open the abdomen, on the chance that there might be volvulus. There was enormous distention of the intestines and very acute inflammation discovered, but no definite obstruction, though there were a few scybalous lumps, below which there was no distention. No perforation was discovered then. The patient died the following day, and the autopsy revealed an ulcer of the cardiac end of the stomach, at the portion covered by the spleen. The ulcer, about the size of a crown piece, perforated all the coats of the stomach, and was closed by the spleen as by a valve. On the day in question the connection between stomach and spleen had given way. This accounted for the peritonitis and collapse. The position of the ulcer accounts for the aggravation from lying on the left side, which should serve as an important diagnostic sign in similar cases. It is plain that ulceration had been present for many years, at times arrested, at times progressing. The effect of remedies on the condition was very marked at times.

Hypericum in Tetanus.—Dr. Majumdar relates a case of traumatic tetanus in a young lady, the lesion being a jammed finger, which was very painful. Hypericum 3 relieved the pain in a couple of hours, and soon dispelled the spasms (Indian Hom. Review, May).—J. B. H. S.

CROTON IN PROCTALGIA.—Dr. Conrad Wesselhæft has written an excellent essay, in the New England Medical Gazette for July, on this affection, which he claims as a true neuralgia of the rectum. In his first case the pain seemed to have been brought on by the use of croton oil as a habitual aperient, and several of those subsequent illustrate the homeopathic application of this experience. He gives Croton in the 3x dilution. His other remedies are Strychnia-sulph. and Atropia-sulph., generally in this same potency.—J. B. H. S.

SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

THE fifth meeting of the session was held at the London ·Homeopathic Hospital, Great Ormond Street, W.C., on Thursday, February 3, 1898, Dr. Neatby, the president, being in the chair.

The following specimens were shown:—

1. Two kidneys from the same patient: one Atrophied and containing Uric Acid Calculus, the other Hypertrophied and in the condition of Large White Kidney

2. Appendix Vermiformix and Cæcum from a rapidly

. Dr. Galley Blackley.

fatal case of Perforative Appendicitis . . . Dr. Byres Moir.

Dr. Edward Blake then read a paper on "The Study of the Hand for Indications of General Disease," which, like all Dr. Blake's papers, was full of interest and brimming over with more or less useful facts. He discussed changes in the colour and texture of the hand; changes in form, especially of finger-tips; modifications of secretion and sensation; perverted motion; and abolished motion. The positions, &c., of the hand in various nervous affections he purposely omitted, having found an able article on the subject in Medical Annual of 1891.

In the discussion which ensued Dr. Blackley spoke of the diagnostic value of a tracing of the hand in rheumatic and gouty affections. Spindle-shaped fingers, he said, show gonorrheal rheumatism, symmetrical enlargements of fingers show osteoarthritis, and asymmetrical enlargements gout. Drs. Dudgeon, Byres Moir, Knox Shaw, Stonham, and Neatby

also took part in the discussion.

Mr. F. A. Watkins then read a paper on "The Homeopathic Treatment of Broncho-pneumonia in Infants," comparing it with allopathic treatment, his conclusions being greatly in favour of homeopathy. All his cases were under four years of age, and all recovered except two, which were admitted in a moribund condition, and one had a temperature 108·4° F.

In the discussion which followed Mr. Dudley Wright mentioned a case, while he was resident at the London Homeopathic Hospital, in which the temperature reached 108.6 F., and which recovered. Mr. Knox Shaw and Drs. Johnstone, Byres Moir, Epps, Hughes, Jones, Blackley, Blake, Macnish, and Neatby also took part in the discussion.

INSTITUTION.

LEAF HOMEOPATHIC COTTAGE HOSPITAL.

WE quote the following from the Tenth Annual Report, issued under date December 31, 1897:—

"In presenting to the subscribers and donors who have kindly supported the work at the Leaf Homeopathic Cottage Hospital their Tenth Annual Report, the Committee have

again to record a satisfactory amount of relief afforded.

"The total number of patients treated at the Hospital has been 112, of which 80 occupied beds in the wards and 32 were out-patients; against 124 cases in 1896, of which 89 occupied beds in the wards (showing a decrease of nine in-patients during 1897) and 35 were out-patients.

"Dr. A. H. Croucher and his colleague, Mr. S. C. Elgee, are the Hon. Physicians and Surgeons, and Mr. H. Turner

has consented to act as Hon. Dental Surgeon.

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

50 patients cured.

19 ,, relieved. 2 ,, unimproved.

2 ,, removed or discharged.

7 ,, remained in the wards on Dec. 31, 1897.

80

"There have been no deaths. Fifteen operations have been performed with success during the year.

"The average number of patients in the wards at the end of

each week has been 4.2, against 5.4 in 1896.

"The balance carried forward in the balance sheet includes the Jubilee Fund, which, being an exceptional thing, will not occur another year, and without it our funds would have been low, thus showing the need of additional subscriptions and donations.

"The donations have increased £25 2s. 6d., and amount to £75 4s. 3d., against £50 1s. 9d. in 1896, which included proceeds of collection by the Friendly Societies, £11 2s. 4d.

"The Hospital still has only a small share in the large official Hospital Sunday and Saturday Collections made in the town, but the Committee wish again to express their best thanks to those incumbents who have set apart a portion of their offertories on their behalf, the amount being £38 7s., against

£36 17s. 9d. last year. The donations received for Hospital Sunday and Saturday amount to £20 2s. 6d., against £43 4s. 9d. in 1896, and the amount collected by cards, £119 0s. 11d., shows an increase of £97 14s. 2d. upon the year 1896, when £21 6s. 9d. was collected. The Committee desire to thank all those who have so kindly contributed in this way. The Hospital boxes have produced £7 11s. 7d., against £6 3s. 8d. last year.

"The expenses of management have been £9 6s. 5d. more than last year, and the average cost per head has fallen to

£5 9s. 1d., against £5 12s. 4d. in 1896.

"There are four wards in the Hospital, containing eight beds and one cot. Patients are admitted by letters of recommendation, which can be obtained from subscribers, who are entitled to one letter for each guinea subscribed. Letters are only available for the current year. Admission can also be obtained by payment of a guinea, if applicants have no letter of recommendation.

"No charge of any kind is made to patients, the supply of necessaries, medicine, and advice being entirely gratuitous."

REVIEWS.

THE HOMEOPATHIC DIRECTORY, 1898.*

After considerable delay, due mainly to the new departure in the local revision of the Continental matter, the *Directory* appears for the fourth time under its present auspices, and we are glad to observe that a great advance has been made on the last issue. To begin with it runs to 116 pages instead of 107. This is largely due to the increased Continental and Colonial lists, which should be carefully compared with those of last year by any who wish to convince themselves both of the work done in the compilation of the *Directory* and of the changes that take place in twelve months. Instead of three pages the list for France now fills nearly six. There is a new Colonial list for the West Indies. The British list is also considerably increased.

^{*} British, Colonial, and Continental Homeopathic Medical Directory, 1898. Edited by a Member of the British Homeopathic Society, and Dr. Alexander Villers, Corresponding Member of the British Homeopathic Society. London: Homeopathic Publishing Company, 12, Warwick Lane, Paternoster Row, E.C. Cloth. Price 2s.

In point of fact the opposition to the *Directory* is gradually dying out. Those who formerly held aloof are coming in as they discern the delusive nature of the reasons which formerly kept them in the outer circle. Conscientious objections must always command respect; but the fact that any one acts according to his conscience does not necessarily make the act a wise one. As Mr. Ruskin said somewhere "How, my friend, if your conscience is the conscience of an-", animal more remarkable for obstinacy than intelligence. Some of these conscientious ones, we believe, regard the Directory as "sectarian." Now, as we have said before, that is no crime in our view, but the contrary—division being essential to progress. But supposing it were a crime of the deepest dye, how can the nice consciences of our very particular confrères allow them to be members of a sectarian society and have their names flourishing in a sectarian directory issued by that society and sold to the public in the specious form of a classified list of its members? But these are difficult problems better not inquired into too closely. The funny part of the business is that a number of these puritans among homeopaths (if we may so term them) make use of the Homeopathic Directory which they nevertheless decline openly to support. However, as we said above, conduct dictated by conscience, however illogical or unintelligent, must command a certain amount of respect. But we believe there are some who withhold their names for no better reason than that they once thought well to do so, and now, though quite aware that the policy of abstention is a mistaken one, still keep aloof for the sake of preserving the appearance of consistency. We have much more sympathy, we confess, with those who withhold their names frankly for convenience' sake. Practicing in a community away from the support of homeopathic colleagues, they may find it undesirable to run the risk of ruffling the susceptibilities of their allopathic neighbours (whose help they may at some time need) by allowing their names to appear. We have never met with an instance where this has caused a real difficulty, but each man must be the judge of his own surroundings, and such a reason we consider perfectly valid.

In conclusion, we commend the *Directory* to the support of all homeopaths at home and abroad, first on the ground of its utility, and second as being a bond of union

and a common meeting-ground of those who are spending the best part of their lives in practising and promoting the reformed therapeutics.

INDIGESTION.*

A NEW edition of this work having been called for, we make the announcement in the usual way by quoting the Preface.

"The continued popularity of this treatise, as evidenced by the exhaustion of another edition, is a gratifying circumstance in itself, and at the same time it enables me to keep it thoroughly up to date. In the present revised edition will be found much additional matter, including several new cases, which I hope will still further increase the usefulness of the work.

"JOHN H. CLARKE."

SAW PALMETTO. †

This fascinating little volume is all that its full title claims for it, and more too. It is the story of a new remedy told in most lucid style by a past master in the art of drawing medico-botanical portraits. As a frontispiece there is an excellent photogravure of the plant itself, which plays such an important part in the geography of the south-eastern seaboard of North America, and which is destined to play a no less important part in therapeutics. Dr. Hale gives some excellent provings both by men and women, which will form the foundation of its pathogenesis. The symptoms produced confirm the uses to which the drug had already been put, and prescribers will be able by means of them to cure cases with the attenuations. For the most part the drug has hitherto been used in the crude on rough indications as an organ remedy. The clinical experience cited is of very great value. A series of very striking cases is contributed by Dr. Eldridge C. Price. In two of them the most distressing symptom was: "On being

* Indigestion: its Causes and Cure. By John H. Clarke, M.D. Fifth edition, revised and enlarged. London: James Epps & Co., Limited, 170, Piccadilly, and 48, Threadneedle Street. 1898. Price 1s.

† Saw Palmetto(Sabal Serrulata—Serenoa Serrulata). Its History, Botany,

[†] Saw Palmetto(Sabal Serrulata—Serenoa Serrulata). Its History, Botany, Chemistry, Pharmacology, Provings, Clinical Experience and Therapeutic Applications. By Edwin M. Hale, M.D. Philadelphia: Boericke and Tatel. London: Homeopathic Publishing Co., 1898. Pp. 96. Cloth, 3s.

raised up to urinate pain so excessive that she fainted away." This symptom may turn out to be characteristic. So far as appears, Dr. Price's brilliant cures were effected on the strength of an article by Dr. Mullins giving a proving under his observation by a woman. But we do not find in that proving this exact symptom, and Dr. Price seems to have generalised. The curious part of his narrative is that he tacks on to it a tirade against "slipshod provings as Hahnemann made them." Well, if Hahnemann did not know how to make a proving it is hardly likely that Dr. Price could have taught him. It may be that he took some symptoms from sources not free from suspicion; and it is also true that he did not despise cured symptoms nor symptoms observed on the sick. Dr. Price may think it very "slipshod" of us, but the next time we meet that cured symptom which he relates, "Faints from the excessive pain on being raised to urinate," we shall give Sabal Serrulata, and if we get the same happy result we shall put it in our materia medica and repertory just as confidently as if it had been produced on an unimpeachably healthy prover, and we shall thank Dr. Price for having recorded it.

This by the way. We have only to say, in conclusion, that Dr. Hale has never done a better piece of work in this line than in writing this book. No one can peruse it without obtaining a clearer insight into the possibilities of one of the most important additions to the materia

medica of recent years.

THE HOMEOPATHIC JOURNAL OF SURGERY AND GYNECOLOGY.

In addition to the many homeopathic journals in America, a new one has just come upon the scene under the above title, and, judging from its first issue, it will no doubt rapidly come into favour among the surgically disposed in the ranks of homeopathy. It is under the editorship of Dr. C. E. Fisher, the able editor of the Medical Century, and is published by the same company as that journal. Not only does the first copy contain very excellent matter, but the journal is very well got up, the paper, type, and numerous plates being all of the first quality. We wish our new contemporary a very successful career.

EXTRACTS.

TWO CASES OF POISONING WITH CARLINE THISTLE.

I THINK these cases are worth recording. They occurred at Bahria, Citta Vecchia, in the third week of November. The carline thistle (local name, Xeukit-il-Miskta) is the carlina gummifera (Dec.), atractylis gummifera (Lin.), a plant common in Malta and in other countries on the shores of the Mediterannean. It is notable for its root, which can grow to enormous proportions, and for its purple composite flower

surrounded by radical spinous leaves.

Three children ate the root of one of these plants, which they cut with a knife; two of them, a girl aged eight years and a boy aged nine, eating it rather freely. They ate it on a Wednesday afternoon, and did not complain at all before the catastrophe came on. On Thursday evening the girl was taken ill, and the parents were soon alarmed at the stertorous breathing and at the drowsiness of the child. There was some retching, but no actual vomiting. Early in the morning the child became collapsed and died before any medical aid could be got. In the evening of Friday the boy returned home and refused to eat. He was told that the girl had died, and he confessed that they had been eating some roots the day before. He went to bed, and soon after the family were startled at his difficult breathing. The father of the girl (the children were cousins) was sent for, and he declared that his daughter had suffered in the same way. The district medical officer was hastily called, but it was too late, as the boy died a few hours after comatose and with marked signs of asphyxia.

At the post-mortem examination the two bodies had the same appearance. The tongue protruded slightly between the lips, the pupils were greatly dilated. The appearance consisted in a general congestion in the venous system. In the girl all the organs were highly congested, the lungs and the brains especially so. The stomach showed capillary injection in limited areas. It contained a brown liquid in which fibres of the ingested root were identified. The intestines were congested and contained abundant solid feces. The heart in both cases was flaccid, and contained a little dark fluid blood.

In the boy the congestion was not so well marked in the organs, with the exception of the brain, of which the veins were injected to the extreme. No trace of the root could be found in the stomach, but the fibres were found abundantly in the intestines, which contained a very great quantity of solid feces. No attempt was made to examine chemically the organs,

as the poisonous principle of the plant is not known to me. I have searched all the books of botany and medical jurisprudence which I could find here, but no cases of poisoning by this plant are fully described, nor is the active principle of the plant mentioned anywhere. The only literature on the subject I am aware of is an article in the Barth, September, 1875, an extinct local medical paper, which, among others, refers to a communication by Lefranc in 1866 to the Botanic Society of France. No definite notions on the active principle of the plant can be gathered from that article, and I could not obtain the Bulletin of the Botanic Society of France.

The third child, a boy of about twelve years of age, ate a small quantity of the root. Up to Saturday morning he did not complain of the least ailment, but he was given a good dose of castor oil, which he very much needed, and is well.—
Them. Zammit, M.D., The Laboratory, Public Health Department, Malta. (British Medical Journal, January 22nd.)

Obituary.

DR. GALLAVARDIN.

It is with great regret that we announce the death of our friend and eminent confrère, Dr. Jean Pierre Gallavardin, which occurred at his residence, 6, rue des Marronniers, Lyons, on January 22nd last. Dr. Gallavardin was in his seventy-fourth year at the time of his death, and was actively engaged in his practice up to the time of his last illness. As a not infrequent contributor to our own pages Dr. Gallavardin is well known to our readers as an advocate of the stricter methods of homeopathic practice and an original worker in lines he had made his own. The "Tuesday Morning Dispensary," which he has carried on single-handed at Lyons, gave him a field of experience in what he termed "psychic medicine" which was probably unique, and which, we fear, no one will be found to carry on, though we hope we may be mistaken in this. His work on alcoholism, which was reviewed in our pages, has taken the place of a classic, and has been translated into English and published in America. On the subject of alcoholism and criminality as well as on hygiene Dr.

Gallavardin was an acknowledged authority, and his articles frequently appeared in *La Lyon Médicale*. His loss will be severely felt in the community in which he laboured, and to his mourning family we extend our sincere sympathy.

GENERAL CORRESPONDENCE.

HAHNEMANN'S TOMB.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—As you have probably learned from the last two numbers of the Revue Homœopathique Française, the negotiations with the hitherto owners of Hahnemann's tomb in Paris have (thanks to Dr. Cartier) reached completion, and the ground with its honoured contents is legally at the disposal of his disciples, who are represented in this matter by the committee appointed for the purpose at the International Congress of 1896. What shall be done with our trust is a matter for deliberation; but ere we can arrive at any judgment it is necessary to know what funds we shall have at our command. The following letter has accordingly been drawn up, and has received the approval and signature of all the members of the Committee:—

"To

"Moved by a sentiment of respect for the memory of the founder of homeopathy, the International Congress of his disciples, meeting in London in 1896, formed a committee having for its aim the raising to Hahnemann a tombstone worthy of him; that which now marks the place of his

mortal remains being rude and poor.

"The Société Homoeopathique Française, working in union with the International Committee, has at last, after fifty-five years of oblivion and neglect, succeeded in obtaining a deed signed by the heiress of Hahnemann, whereby she authorises it to raise a funeral monument over his grave and to maintain this in perpetuity. We propose to raise such a monument by international subscription, feeling sure that all who value homeopathy will acknowledge that there is no burial-place on

earth which more loudly calls for such a souvenir than that wherein repose the ashes of our illustrious master. To this his glorification we invite the homeopathists of the whole world. Will you aid us in our task by employing, as regards your own country, such means as seem to you most suitable for making our project known and collecting subscriptions towards it? And may we consider you (or will you find us another who will so act) as a corresponding member of our Committee, with whom we may put ourselves in regular communication?

"The date of the inauguration of the monument is to be the occasion of the meeting of the International Homeopathic Congress in Paris in 1900. The time before us is therefore short, and we shall be grateful if you will take the matter in hand as soon as possible. You will kindly address your answer to this letter to one of the members of the Committee, preferably the President or the Secretary.

"With the assurance of our high esteem, believe us to

remain,

"Yours very faithfully,

"LEON DE BRASOL, M.D., President,

"8, Nicolaievskaia, Petersburg, Russia.

"François Cartier, M.D., Secretary,

"18, Rue Vignon, Paris, France.

"RICHARD HUGHES, M.D.,

"36, Sillwood Road, Brighton, England.

"Bushrod James, M.D.,

"Cor. 18th and Green Sts., Philadelphia, U.S.A.

"ALEXANDER VON VILLERS, M.D.,

7, Lüttichaustrasse, Dresden, Germany."

This letter, in its original French, or its foregoing (free) rendering into English, will be sent to some society or leading physician in every country not represented on the Committee. The members of the Committee will themselves undertake the work desiderated for their own respective countries; and I think I cannot better initiate my share of the task than by sending the present letter to our British homeopathic journals. I will therefore, sir, beg your insertion of it, and any commendation to your readers you may feel disposed to award it; and remain,

Yours very faithfully,

RICHARD HUGHES.

Brighton, February, 1898.

SENECIO JACOBÆA.

To the Editor of The Homeopathic World.

SIR,—Lest any of your other readers may have been puzzled, like myself, in tracing Mr. Kopp's Senecio gracilis, allow me to say I have referred to a number of Floras, ancient and modern, without being able to find the plant under that name, either as a British or foreign species; but the common names, which Mr. Kopp gives, clearly connect it with S. Jacobæa; although the names Liferoot, Squaw-weed, and False Valerian are not recognised either by Dr. Prior or by Britten and Holland. Culpepper (1770) says of Ragwort: "It is also called St. James'swort, Stagger-wort, Stammer-wort, and Segrum (Seggrum). In Sussex we call it Ragweed. It is under the command of Dame Venus, and cleanseth, digesteth, and discusseth. It helpeth to stay Catarrhs, thin Rheums, and Defluxions from the Head into the Eyes, Nose, or Lungs," &c. He describes another species having the same virtues, evidently S. erucifolius (syn. tenuifolius) the Hoary or Narrowleaved Ragwort. Of S. Jacobæa Dr. Smith (1825) says: "It has been recommended as an application for cancers, by the name of Swine's Cresses, which it bears in Yorkshire." It is said to be remarkable for its strong smell of The achenes of its ray are glabrous, those of the disk being hairy. Bentham says that, when eaten down, or checked in its growth, it will often assume the spreading inflorescence of S. aquaticus, the achenes of which are all glabrous. Those of S. erucifolius are all hairy. I suppose these Ragworts should be called Ragwort Groundsels, the South African genus Othonna being properly called Ragwort.

Loudon says of S. vulgaris, the Common Groundsel: "It is esteemed emollient and restorative; it is employed, in the form of a poultice, in spitting of blood, and against the gout and hemorrhoids. It is given to horses suspected

to be troubled with worms."

Sir, yours very respectfully,

Ferrum.

[Hering (Guiding Symptoms) mentions Senecio gracilis as an analogue of Copaiva, producing like symptoms on the mucous membranes. He makes no mention of it

under Senecio aureus; but the Cyclopædia of Drug Pathogenesy says that Senecio gracilis "is only a variety of S. aureus."—Ed. H.W.

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET. BLOOMSBURY.

Hours of Attendance: - Medical (In-patients, 9.30; Out-patients, 2.0), Daily; Surgical, Mondays, Tuesdays, Fridays, and Saturdays, 2.0; Diseases of Women, Tuesdays, Wednesdays, and Fridays, 2.0; Diseases of Skin, Thursdays, 2.0; Diseases of the Eye, Mondays and Thursdays, 2.0; Diseases of the Throat and Ear, Wednesdays, 2.0; Diseases of Children, Mondays and Thursdays, 9.0 a.m.; Operations, Tuesdays, 2.30; Dental Cases, Thursdays, 9.0 a.m.

MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Besnier (Ernest) and others. A Pictorial Atlas of Skin Diseases and Syphilitic Affections in Photo-Lithocromes from Models in Museum of the Saint Louis Hospital, Paris. With Woodcuts and Text. Edited by J. J. Pringle. Folio. (Rebman. Net, 147s.)

Bradford (T. L.). The Pioneers of Homeopathy. Roy. Svo, pp. 677. (Homeopathic Publishing Co. Net,

Cartleton (B. S.). Manual of Genito-Urinary and Venereal Diseases. Roy. 8vo, pp. 314. (Homeopathic Publishing Co. Net, 15s.)

Chavasse's Advice to a Wife on the Management of her own Health, and on the Treatment of some of the Complaints Incidental to Pregnancy, Labour, and Suckling. Revised by Fancourt Barnes. 14th ed. 12mo, sd., pp. 314. (Churchill. 2s. 6d.)

Fox (G. H.). Skin Diseases of Children. With 12 Photogravure and Chromographic Plates, and 60 Illustrations in the Text. Roy. 8vo, pp. 174.

in the Text. Roy. 8vo, pp. 172. (Churchill. 12s. 6d.)

Freyberger (Ludwig). The Pocket Formulary for the Treatment of Disease in Children. 12mo, leather, pp. 226. (Rebman. Net, 6s. 6d.)

Herman (George Ernest). Diseases of Women: A Clinical Guide to their Diagnosis and Treatment. With 252 Illustrations. 8vo, pp. 902. (Cassell. 25s.)

Macdonald (J. W.). A Clinical Text-Book of Surgical Diagnosis and Treatment for Practitioners, &c. Roy. 8vo. (Rebman. 28s.)

Mackenzie (J. A. Shaw-) On Maternal Syphilis, including the Presence and Recognition of Syphilitic Pelvic Disease in Women. 8vo. (Churchill. 10s. 6d.)

Ramsay (A.). Researches on Tuberculosis. The Weber-Parkes Prize Essay, 1897. 8vo. (Smith, Elder and Co. Net, 2s. 6d.)

Snell (Simeon). A Practical Guide to the Examination of the Eye for Students and Junior Practitioners. With 88 Illustrations. Cr. 8vo, pp. 194. (Pentland. 5s.)

Tallerman Treatment (The) by Super-heated Dry Air in Rheumatism Gout, Rheumatic Arthritis, Stiff and Painful Joints, Sprains, Sciatica and other Affections. Case Notes and Medical Reports. With numerous Medical Reports. With numerous Illustrations. Edited by Arthur Shadwell. 8vo, pp. 186. (Baillière. Net, 3s. 6d.)

Waring (H. J.). Manual of Operative Surgery. Cr. 8vo, pp. 690. (Pentland. 12s. 6d.)
Webster (J. C.). Diseases of Women.
A Text-Book for Students and Prac-

titioners. Illust. with 241 Figures.

Cr. Svo, pp. 712. (Pentland. 14s.)
Whitehead (A. V.). A Treatise on
Universal Algebra. With Applications. Vol i. Imp. 8vo. (Cambridge University Press. Net, 21s.)

TO CONTRIBUTORS AND CORRESPONDENTS.

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

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

envelope.

All advertisements and business communications to be sent to the "Manager" of the Homeopathic Publishing Company, 12, Warwick Lane, Paternoster Row, London, E.C.

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

CORRESPONDENTS.

Communications received from Dr. Corfe, London; Dr. H. C. Allen, Chicago; Mr. R. C. Bayley, London; Dr. Hughes, Brighton; Dr. Dudgeon, London; "Ferrum;" Mr. Fredk. Kopp, Greenwich, N.S.W.

BOOKS AND JOURNALS RECEIVED.

'Chemist and Druggist.—Zoophilist. — Hom. Review. — Allg. Hom. Zeit.—Rev. Hom. Belge. — H. Maandblad.—Il Secolo Om. —Med. Counsellor.—H. Recorder. —H. Envoy.—Gaz. Méd. de Paris. —Vacc. Inquirer.—Med. Times.—Critique. — Minn. Hom. Mag. — Royal Photographic Society's Prospectus of Exhibition. — H. J. of Obst. — Med. Century. — Amer. Medical Monthly. — H.

Monatsblätter.—H. Tidsskrift.— Archiv. f. H.—Hom. J. of Surg.— Med. Times.—J. of Orif. Surg.— Calcutta J. of Med.—Gaz. Médical. -Med. Monad. f. H.—Pacific Coast J. of Med.-Med. Argus.-Hahnemannian Advocate.—New Eng. Med. Gaz. — Zeit. f. Berl. Ver. H. Aerz.—Hahn. Monthly.— N. A. J. of H.—Med. Visitor.— Hom. News. — Saw Palmetto, Hale.—Journal of British Hom. Society, with Society's Directory. — Leaf Homeopathic Hospital Report.—London Homeopathic Hospital Report, Vol. VΙ. — Homeopathic Directory, 1898.— The Secret Cabinet of History.— Therapeutics of Plague, Dr. Sircar.

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Society's Meeting British Homeopathic Society.

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HOMEOPATHIC WORLD.

APRIL 1, 1898.

SYMPTOMS.

One of the chief glories of Hahnemann's system lies in the fact that it teaches us how to make use of Of course, the ignorant have misunderstood symptoms. this, and have poured endless ridicule on homeopathy as caring for nothing but symptoms, and ignoring the scientific beauties of pathology. And not a few homeopaths have been so far influenced by this ridicule as to seek to get as far away from symptoms as possible, and take refuge in morbid anatomy.

But, after all, Wisdom is justified of her children in the In the strange irony of events, just when some homeopaths are deploring the sadly unscientific nature of Hahnemann's schema, we have an old-school authority taking it up and basing upon it (with modifications) a system of medical diagnosis.

A correspondent has sent us the prospectus of a work, by HOBART AMORY HARE, M.D., B.Sc., Professor of Therapeutics in Jefferson Medical College of Philadelphia. &c., bearing this title—Practical Diagnosis: The Use of Symptoms in the Diagnosis of Disease (Henry Kimpton, 82, High Holborn). We will make a quotation from the preface which will show how the significance of symptoms is beginning to be recognised by the old school.

"The object of this volume is to place before the physician and student the subject of medical diagnosis as it is met at the bedside. To accomplish this the symptoms used in diagnosis are discussed first, and their application to determine the character of the disease follows. Thus, instead of describing locomotor ataxia or myelitis, there will be found in the chapter on the Feet and Legs a discussion of the various forms of and causes of paraplegia, so that a physician who is consulted by a paraplegic patient can in a few moments find the various causes of this condition, and the differential diagnosis between each. So, in the chapter on the Tongue, its appearance in disease, both local and remote, is discussed. In other words, this book is written upon a plan quite the reverse of that commonly followed, for in the ordinary treatises on diagnosis, the physician is forced to make a supposititious diagnosis, and, having done this, turn to his reference book and read the article dealing with the disease supposed to be present, when if the description fails to coincide with the symptoms of his case, he must make another guess, and read another article. In this book, however, the discovery of any marked symptom will lead directly to the diagnosis. Thus, if the patient is vomiting, in the chapter on Vomiting will be found its various causes and its diagnostic significance, and the differentiation of each form of this affection from another."

To show how naturally the medical mind takes to Hahnemann's methods when it is not aware that it is doing so, we will quote one of the reviews of this work from an old-school journal:—

"This book is one of the best of its kind we have ever had the pleasure to peruse. It is a great triumph of the author to encompass such an enormous volume of practical points in a work of convenient size. Its great practical utility is suggested by the title. It is unique in many respects, and the author has introduced radical changes which will be welcomed by all. In the first place, the book is written from a clinical standpoint. The logical sequence of the book is to lead to a diagnosis from a study and grouping of individual symptoms. Any one who reads this book will become a more acute observer, will pay more attention to the simple vet indicative signs of disease, and he will become a better diagnostician. The book has two indispensable indexes—Index of Diseases, and Index of Symptoms, Organs The latter makes the work especially valuable as a clinical manual, as the diagnostic worth of any symptom can be found in a moment. This is a companion to Practical Therapeutics, by the same author, and it is difficult to conceive of any two works of greater practical utility. This book should become a text-book at once.-Medical Review.

Having now discovered the value of symptoms in the diagnosis of disease, the next thing will be for some

leader in allopathy to boldly preach the necessity of paying the same regard to symptoms in the diagnosis of the remedy.

NEWS AND NOTES.

PROFESSOR GATES AND HIS WORK.

In the course of a letter addressed to the editor of this journal, dated "Laboratory of Psychology, and Psychurgy, Chevy Chase, Maryland, February 18, 1898," Professor Elmer Gates writes: "If I correctly interpret the experiments I have so far made, I am in sight of a therapeutic law more fundamental than any formulæ with which I have hitherto become acquainted. I shall expect to commence the medical researches some time in the spring, and I shall be glad to keep you informed of the progress." We are sure our readers no less than ourselves will be eager to receive the latest intelligence of the Professor's researches. How great the interest that has been aroused by the article we quoted in our February number is shown by the articles it has since called forth. We quote the following from the Minneapolis Homeopathic Magazine of February last:

"Improvements in Microscopy."

"Professor Elmer Gates, of Washington, has discovered that by viewing the image produced by one microscope through another microscope or series of microscopes, that he can ultimately attain a magnification of no less than a hundred million diameters. He has already magnified parts of a diatom 360,000 times and photographed the same. In fact the least leakage of light spoils all the effect, and by the use of a photographic camera in place of the eye these results are best obtained; and only by the most delicate manipulations can these results be brought about. We quote Professor Gates as follows:— 'This ultra-microscopic domain commences where the best present microscope leaves off, and this instrument opens a realm in the study of cellular life of profoundest importance to the human race; with the present microscope we can indeed see that a cell has a body, nucleus, granules, flagellæ, vacuoles, chromative filaments and a foam-like structure, but of its minuter anatomy we know nothing. The new instrument promises to go as much further into that unknown province as the present microscope goes beyond the province of the eye.' "

THE HAHNEMANN MONUMENT FUND.

WE are glad to say our appeal on behalf of the above fund has met with generous response. We cannot, of course, answer for sums our readers have sent direct to the Secretary, but we have pleasure in acknowledging the following:—

					£	S.	d.
S. S. C.					 2	0	0
Mrs. Drew					 1	1	0

The Editor's contribution had been made and acknowledged before the appeal was published.

Coltsfoot and Diabetes.

Tussilago Farara (Compositæ) should be a useful remedy in diabetes, as witness the following from the Chemist and Druggist of March 5th:—

"GLYCOSURIA FROM COLTSFOOT.

"Dr. A. Schneegans has communicated to the Journ. d. Pharm. v. Els. Lothr. a note on a case of supposed diabetes which is curious as showing how careful the physician must be in diagnosing this disease. The patient had been suffering for a time; when under treatment sugar entirely disappeared from the urine for several weeks. It then returned suddenly in spite of the fact that carbohydrates had been eliminated from the diet. At last the doctor discovered that the patient had been drinking coltsfoot tisane. Could that have caused it? Yes, Dr. Schneegans replied. Flückiger states that coltsfoot flowers contain about 11 per cent. of sugar, and Dr. Schneegans has examined several specimens, finding the percentage to range between 9 '20 to 11'7.'

The fact of the plant containing sugar does not weaken the observation, as the point in glycosuria is the absence of the powers of digesting sugar. If the coltsfoot caused the temporary loss of this power, it should be of use in cases of the disease. Tussilago petasites has been proved, and Allen gives among the symptoms: "Micturition increased." "Urine very profuse, but not evacuated often."

THE HOMEOPATHIC LEAGUE IN TASMANIA.

THE following letter received from the Hon. Sec. of the new Homeopathic League in the far South will show that the friends of progress in therapeutics are not sitting still there under the official ban. Scientific truth cannot remain hidden indefinitely; but it depends a good deal on the efforts of its adherents whether the victory is sooner or later. May it be speedy in Tasmania and elsewhere!

"Dr. J. H. CLARKE, London,

"Dear Sir,—I am directed by my committee to thank you for kind donation of your book, *Homeopathy: All About It*, which will be most useful to us, and which we intend to circulate round amongst our members.

"You will be pleased to hear that so far our little organisation promises well; we have enrolled seventy members, and are doing our best to get them to work for the cause. It must do some good—we

hope a great deal.—I am, dear sir, yours faithfully,

"Launceston, Tasmania, February 12, 1898." "F. STYANT BROWNE,
"Hon. Sec. Homeopathic League
of Tasmania.

WEEVILS AND STRYCHNINE.

The following interesting note appeared in the *Daily Chronicle* of February 24th. We suppose insects enjoy immunity from *Strychnine* poisoning because they are lucky enough to get along without the inconvenience of spinal cords.

"STRYCHNINE AS A FOOD.

"The old proverb that what is one man's meat is another's poison is well illustrated by a fact recently reported in Nature by a correspondent. Some wheat, which had been poisoned by soaking in a solution of Strychnine, and which was intended for killing sparrows, after having been kept for some time in cardboard boxes, was found to have become infested with weevils. On examination it was found that the boxes were full of weevils and their excrement, and the wheat was more than half eaten. Strychnine was found to be present in the wheat which the weevils had eaten, and in apparently still larger proportion in their excrement, so that it had evidently passed through the digestive apparatus unchanged. When we consider that so little as from half to three-fourths of a grain of the alkaloid is sufficient to kill a strong man, the difference between the *rôle* played by the alkaloid becomes very striking. It is not as if insects were universally proof against the actions of poisons, as this is far from being the case. An instance quoted from the same source carries the matter still further. It has been found that the weevil Anthonomous druparum can feed with impunity on kernels containing. hydrocyanic acid, whilst the same acid administered to caterpillars of Deiopeia pulchella caused them quickly to die, although they were quite unaffected by the poisonous principle of the Calabar bean,

known as eserine. It appears, therefore, that what is one insect's food is another insect's poison, and *vice versâ*."

THE LATE DR. GALLAVARDIN'S DISPENSARY.

WE have received a kind letter from M. Jules Gallavardin, son of our late confrère, from which we are glad to learn that the work of the Tuesday morning Dispensary is not to be allowed to lapse. The secretary of the dispensary, himself a medical man, who has been associated with Dr. Gallavardin for twelve years, will carry on the work as usual. M. J. Gallavardin also sends us an interesting reprint of an article from his father's pen published in Le Lyon Médical after the author's decease, and he is now engaged in editing manuscripts left by his father, including a large work on Human Hygiene.

THE MEDICAL VISITOR.

Among many recent journalistic changes it was with something of a shock that we learned that our good friend, Temple S. Hoyne, had severed his editorial connection with the *Medical Visitor*. The journal comes out in a new cover, and is very well got up. Dr. Wilson A. Smith is the new editor, and the publishers are Halsey Bros. Co. Dr. Hoyne contributes one of the articles. Dr. Hoyne promises to pay our country a visit during the summer.

PROBABLY NOT HIGH POTENCIES.

We take this from the *Chemist and Druggist*, of February 19th:—

"A European doctor in Nubia, who treated the natives for various ailments free of charge, was, after a few weeks, besieged by his patients, who demanded money. 'Money!' said the astonished doctor, 'what for?' 'Because,' answered the natives, 'we have been taking your physic for so many days.'"

We have some little sympathy with these simpleminded Nubians. Probably we should ask higher prices than they did if we were invited to take the same physic; only we should want our wages in advance.

SNAKE-VENOM.

On another page of this journal will be found the first part of a paper, written by Mr. Frederick Kopp, and entitled "Snake-venom—its Action and Effect." It replies to arguments set forth by those favouring the blood-poison theory, and also deals with the various antidotes in use, making special reference to the recent experiments made in Victoria on animals.

ORIGINAL COMMUNICATIONS.

ARBORIVITAL MEDICINE.

By Robert T. Cooper, M.A., M.D., Late Physician Diseases of Ear, London Homeopathic Hospital.

SUBJECT: ULCERATION (ANEMIC) OF THE STOMACH.

It would be impossible to adduce more striking and more satisfactory evidence of the great power possessed by plant remedies, irrespective of any special mode of preparation, than is afforded by the following cases:—

CASE I.

The first case is that of a Sister of Mercy, aged 30 (date of coming, November 15, 1897), in whom a strong anemic history existed, and with whom sickness of stomach had prevailed for some twelve years. symptoms began at eighteen years of age with anemia and cessation of menstruation for six months; since then the monthly period ceased on one occasion for about the same time, and now nothing has been seen for $2\frac{1}{2}$ years. She used to have a good deal of left submammary pains, but this is now only felt occasionally. Her principal symptom is that after meals a weight is felt in the stomach; this goes on till froth comes in her mouth with much clear fluid, and then her food is vomited, bringing with it great relief. Stomach sometimes very distended, generally in the morning, and lately the feeling after food has been more of an emptiness than of a weight. Feels frightfully depressed when these sensations come on.

Bowels are regular, but for two years suffered from obstinate constipation; there is no melena, and no uterine

bearing down, or leucorrhea.

Actea racemosa ϕA .—A friend brings report (November 27th) that the Sister "has been much better till last night, when she felt swollen and was unable to eat anything this morning." To come and see me on November 29th. Nothing given.

On 29th reported having been sick on Saturday the 27th, after dinner, the only time within the fortnight. Her spirits are much better, and the principal thing she now complains of is being very flatulent with a sour taste as from fermentation and as if everything turned acid.

For this last symptom I did not think it necessary to

alter the selection, and gave again Actea rac. ϕ A.

One of her fellow-sisters reports (February 15, 1898) that in every way improvement has gone on, and that to all appearances she is in perfect health, though the catamenia are still absent.

In selecting the remedy I had more in view the past symptoms than the present state of the patient. The submammary pain had formerly been a prominent symptom, and this, with anemia and tendency to irregularity of the menstrual functions, was characteristically an Actea condition.

CASE II.—ULCERATION OF STOMACH, APPARENTLY MALIGNANT.

Miss J., aged 50, a thin, spare, drawn-featured woman. Date of case, November 6, 1897. Fifteen years ago vomited blood, and dates her sufferings from this, but has

always been subject to gastric pain.

Symptoms: Pains in the stomach, with sickness; vomiting two or three times a day; feels a pressure in every nerve of the body, sometimes in one part, sometimes in another, with pain across the chest sometimes after food, sometimes at night, and sometimes on an empty stomach; a great deal of wind and sometimes a swollen feeling across the lower chest; occasional heartburn with rising of food; nasty canker taste in the morning; sleep not good from the pains; wandering dreams; bowels are confined. Previous treatment has been at the Kilburn Dispensary, under several doctors, at a homeopathic

dispensary, and at a principal homeopathic hospital.

Ornithogalum umbellatum ϕ \bar{A} .

November 13th.—Not sick since Monday the 8th, but still has pains; the pressure pains are bad; the pain in the lower chest is constant, but it is better at night than before dose; wakes in perspirations at night—a new feature; still dreams; pressure across lower chest same; heartburn and nasty taste much better; bowels confined. Nil.

November 27th.—Has been much better, but to-day had a good deal of pain across the chest when coming here; worse on left side; perspirations at night are less; "goes cold before the pains"; no heartburn, but nasty taste still and confined bowels. Again $Ornith.\ umb.\ \phi\ A$.

December 11th.—Pain across chest much better; perspirations less; coldness same; had much looseness of the bowels next day, after dose; they continued acting three or four times a day for a week; sleeps better and

dreams less. Nil.

January 19, 1898.—Very much better in every way; food keeps down well; vomiting about twice a week;

perspirations less; bowels confined. Nil.

February 8th.—Looks a different woman; has not been once sick; still has some discomfort, but able to bear the pains better; mouth and throat are dry in the morning. Unit dose repeated of Ornith. umb.

The Ornithogalum umb. is a species of garlic (Allium sativa), and like it and Allium cepa, produces indigestion

with excessive eructations of wind.

The sister of this patient has, since this report was written, died of an internal cancer, I am told. I had not treated her.

CASE III. ULCERATION OF THE STOMACH APPARENTLY MALIGNANT.

My third case is in many respects like the last. A

lady asked me to prescribe for the following:—

Mrs. K., aged 62, living at Hammersmith, a widow, a poor tailoress. Last summer twelvemonth was seized with profuse vomiting of blood and became very ill. For a fortnight lay unconscious; her lips only kept moist by ice and brandy, "but was fed artificially." After long months of illness gradually recovered, but has lived since on milk and slops and Quaker Oats.

Is now again threatened with the same symptoms, having lately spat up clots of blood, and feels whenever she turns in bed as if a bag of liquid turns also. Her doctor says it is gastric ulcers and that she will never be cured, but by care may live some time longer. Suffers much with swollen feet and legs and inability to walk with any ease about her work. 12th of January gave

Ornith. $umb. \phi A$.

On January 23, 1898, lady writes:—"Mrs. K. sent me word she took the dose on 12th, and that she could hardly believe it possible it was the powder which had made her feel so much better. I [the lady] heard again from her stating that she continued to improve, and last Friday I called to see her looking so bright and so much stronger. She told me that all that oppression at her stomach was gone, and the 'fluid sack,' as she described it, that rolled about in her inside had seemed to go down, and she felt nothing of it now, and the symptom that particularly struck her was the cheeriness, the freedom from oppression that made her feel so light."

Nothing more was given, and on the 10th of February report came in that she was not feeling so well again, has the same symptoms on the right as on the left side of stomach; a great oppression and a drawing sensation just as she used to feel for a long time before the vomiting

of blood came. Again $Ornith.\ umb.\ \phi\ A$.

On February 17th I received this letter:—

"Dear Dr. Cooper,—Mrs. K. walked here to see me yesterday morning looking really well, with a colour in her cheeks. She told me she had received from you another wonderful powder, which she had taken, and almost immediately afterwards had felt another woman. The drawing pains had ceased, and the dreadful feeling of oppression and illness had been almost immediately relieved. She said she had gone about her work singing, and felt light and happy, and the bag of fluid which she describes as wobbling about in her stomach had gone down into quietness, &c. She really looked so well that I think she must be curable. Do you not think so? The change in her appearance yesterday was so great from the time before when I last saw her."

March 11th.—Report received: Mrs. K. is keeping

perfectly well.

These cases tell their own tale; they need no further

comments. I simply give the facts, and readers may put whatever construction they please upon them. 30A, George Street, Hanover Square, W.

DR. DUDGEON AND PROFESSOR ELMER GATES.

By P. PROCTOR, L.R.C.P.

THE criticism by Dr. Dudgeon of Dr. Elmer Gates's paper, whilst true enough as far as it goes, does not really get at the gist of the matter. Dr. Gates's treatment of his subject was evidently not physiological, but philosophical. One cannot suppose for a moment that the arguments urged against him by Dr. Dudgeon are unknown to the Professor, as they are taught in every text-book and read by every first year's student. Dr. Gates would undoubtedly accept all that Dr. Dudgeon says, but he goes beyond the facts that lie on the surface, and speculates in a philosophical manner on the conceptions that underlie not only physiological science, but perhaps the whole of

physical science as well.

I am not holding a brief for the defence of Dr. Gates's views, but a few words of explanation may prevent any appearance of antagonism between him and his critic. Dr. Gates in his paper is advancing nothing new, for there is a school of metaphysical thought that has long held his opinions, and recently we find that such men as the late Professor Clifford, Dr. Romanes, and Dr. Lloyd Morgan, of the Bristol Medical School, amongst ourselves have entertained the same as a reasonable and scientific hypothesis. It is essentially an attempt to harmonise all the known facts of the consciousness, the subconsciousness, the instinct of animals, the quasi-intelligent movements of plants, and possibly the orderly behaviour of atoms and molecules, in one great scheme of cosmic intelligence. Dr. Dudgeon says "the brain produces but these thinkers go a step further and ask how? Does it produce mind as a new creation of something out of nothing, or are the elements of mind inherent in the physical structure, in a subconscious state, only awaiting a suitable combination of circumstances to present themselves in a state of full consciousness?

If "mind-stuff," as Clifford calls it, be equally distributed throughout the universe along with matter, then every cell in the living body has its share in a subconscious state until by the wonder-working brain cell it is called into self-consciousness. This I take to be Dr. Gates's position, and it is evident there is nothing in it to exclude any of the facts of physiological science, for which it seeks, in fact, a consistent explanation and one of wide application. Dr. Dudgeon's theory of the vital force really helps by analogy to the understanding of Dr. Gates's argument. Dr. Dudgeon has no opinion of the vital force being an independent and autocratic entity, but I suppose holds to the idea that it is correlated to the other forces in the world whereby it is capable of being acted upon by them and of acting upon them in turn. Even Beale, a thoroughgoing vitalist, gives up the idea that vitality is a creator of force, and accepts the view that it is only a transformer of force. Now carry the analogy into the sphere of mind, and we find the brain similarly capable of being regarded as a transformer of previously existing powers belonging to the sphere of consciousness, or "mentation." When Dr. Dudgeon says, "Mind, properly so called, has nothing to do with the production of vitality, is, in fact, the product of vitality acting on the appropriate organised structures of the brain," he speaks the language of the physiologist pure and simple. Dr. Gates, on the other hand, regards the subject from the philosophical standpoint, and would say with Bacon, "I would rather believe all the fables of the Talmud and the Koran than that this universal frame were without a mind," and with this idea in his mind he might ask Dr. Dudgeon how he comes to be so sure that "mind, properly so called, has nothing to do with the production of vitality." However, I am not arguing the point, but simply explaining the position and showing, what I think is pretty evident, that Dr. Dudgeon's criticism is beside the mark; it does not reach the gist of Dr. Gates's argument, and therefore there is no necessary disagreement between them.

The latter part of Dr. Dudgeon's remarks on the nature of the vital force offers a tempting subject for discussion, but I must refrain, as that is too big a thing to be considered at the tail end of an article on a totally different subject. But I should just like to be allowed to say that

when Dr. Dudgeon asks, "Besides, how could a material organism secrete or create a spiritual vital force," he, at least, ought to have no difficulty about it, seeing he has already told us that brain matter produces mind—a somewhat spiritualised product so far as our experience goes.

CASES FROM PRACTICE.

By OSCAR HANSEN, M.D., Copenhagen, Denmark.

(Continued from p. 118.)

Case IX.—P. L., labourer, 35 years, Copenhagen, had, at the commencement of the treatment, i.e., January 4, 1896, been ill for a long time. He thinks for fourteen or fifteen years. He has been treated without improvement by several allopathic physicians. Has never suffered from any serious illness, nor from any sexual disease. The symptoms are: Strong congestion of blood to the head, with heaviness and throbbing in the head. When moving the head he feels as if it was going to be crushed. throbbing is worse in the forehead, the temples, and the crown of the head. The throbbing is accompanied by dizziness. The face becomes dark red during the congestion and the throbbing sensation. Drinking wine increases the symptoms, and these are frequent during summer in sunshine. Otherwise he feels better when out of doors in the fresh air. The heart is normal. Otherwise well. Appetite and functions in order. He is

Glonoin, 3 dec. dilut., three drops daily in a teaspoonful

of water.

January 18th.—After taking a few doses he was almost free from all symptoms, and the congestion and throbbing sensation, as well as the feeling as if the head was going to be smashed, have disappeared. Same prescription.

February 13th.—Perfectly well. He kept on taking the medicine morning and evening, and was discharged the 14th of March. No relapse later.—Journ. 6957.

Case X.—Gardener N. N.'s daughter, 33 years, Charlottenlund, near Copenhagen. Four weeks ago she got a small verruca in the right vola manus just below the fork between the second and third finger. This was pencilled by a physician, but without result, and there now appears

an ulcer on the same spot with prominent granulations, stinging pains, surrounded by redness, and sore when touched. Pains are alleviated by external heat. The ulcer suppurates with a yellow, thick pus, and bleeds easily. Otherwise well. Treatment commenced on the 27th of March, 1896.

Prescribed Silicea, 3 cent. trituration, as much as a pea three times daily, and externally aqua silicat., with equal

parts of tepid water, thrice daily.

April 10th.—Much improvement. The prominent granulations have decreased; no pains, less suppuration. The ulcer is healing satisfactorily. Same prescription.

April 24th.—The ulcer is almost healed. During the last eight days straining, pungent and stinging pains behind the left hip joint, especially when sitting down or when getting up, but disappearing after having walked a little.

Rhus tox., 2 dec. dilut., three drops morning and afternoon. Silicea forenoon and evening. Same prescription for external use.

May 8th.—The pains have almost disappeared. The

ulcer has healed. Same prescription.

Was fully cured and discharged the 28th of May.—

Journ. 7060.

Case XI.—Mrs. N., 36 years, Copenhagen. At the commencement of the treatment, the 16th of May, 1896, she had been ill for four years and three months. Has been confined thrice. The present illness appeared after her second confinement. Complains of lacerating, stinging, shooting pains now in the right, now in the left shoulder, sometimes radiating up into the right or into the left side of the occiput. The pains are worse when at rest during night, so that she must continually shift her position, during day worse from sitting down, and are not alleviated by moving about unless she keeps on moving about. Otherwise well. Menses, functions, and appetite normal.

Rhus tox., 2 dec. dilut., three drops thrice daily in a teaspoonful of water.

May 30th.—The pains are worse. Same prescription in 1 dec. dilut., taken in the same way.

June 13th.—Great improvement. Pains have abated considerably. Same prescription.

The improvement went on gradually; the same prescrip-

tion was kept on, and she was ultimately discharged the

27th of August.—Journ. 7108.

Case XII.—N. N., caretaker, 40 years, Bidstrup, near Nestved. Came under treatment the 18th of May, 1896, having then been ill for six months, and been treated allopathically without any improvement. Complains of a sinking sensation and oppression in the pit of the stomach and down into the abdomen after meals, with distension. Constriction and pains in rectum after having been on the stool. Motions somewhat hard, but not dark nor cloddy. Appetite and sleep satisfactory. Varices appear on the left side of anus. On the posterior wall of rectum, about half an inch above anus, there is a soreness when pressed with the finger, but no hardness or swelling.

Hydrastis canad., 1 cent. dilut., five drops thrice daily. Hydrastis and Glycerine, equal parts of each, for local

use morning and evening.

After taking this prescription there was a steady improvement, and I continued with the medicine until the 30th of November, when the oppression in the pit of the stomach and the pains in rectum grew worse. These pains were burning, especially after stool, but were alleviated by bathing with cold water. Ratanhia, dil., 2 cent., five drops thrice daily. Ratanhia θ and Glycerine, equal parts of each, every morning and evening for local use.

After using this there was again improvement, but when I examined him the 9th of February, 1897, the result was the same as at the commencement. He states that the constriction in rectum is considerably alleviated by the digital exploration. Still burning pains in rectum after stool. Feels as if rectum was filled up.

Æsculus hippocast, 2 dilut., five drops thrice daily.

Esculus cerat., morning and evening for local use.

This brought on a quick and steady improvement, and he was well in the middle of May and has been so ever since.

The medicaments for local use were applied by means of wadding, which was inserted into rectum.—Journ. 7109.

Case XIII.—Mrs. N. N., wife of a teacher, 49 years, Easter Kjaedeley by Rudkoebing. Has borne six children, last confinement nine years ago. Present illness has lasted three years. An eruption, partly papulous, partly ulcerous, with considerable peeling off, appears over the

whole body. The eruption is widespread, itches much during evening and night from warmth of bed. Gets worse when scratched, and is then followed by a stinging pain and burning heat in the eruption. The skin is rough and slightly thickened; otherwise she is well. Treatment commenced the 6th of July, 1896.

Arsen. alb., 3 dec. dilut., five drops thrice daily in a

small spoonful of water.

August 25th.—The eruption disappeared from the body and the arms. The skin grew smooth and soft. The skin on the legs peels off and is red, thick, and rough.

Same prescription. For exterior use: Mercur. præcipit. ruber, one part to thirty parts Axungia porci lota, every

morning and evening.

October 5th.—Condition unaltered. Arsen. alb., 2 dec. dilut., three drops thrice daily. Continue with the ointment.

November 21st.—Perfectly cured. The skin is normal.

Discharged. Has been well since.—Journ. 7200.

CASE XIV.—N. N., gilder, 60 years, Copenhagen. At the commencement of the treatment, the 12th of September, 1896, he had been ill for about nine months. The prepuce, scrotum and the neighbouring parts of the inner sides of the thighs as well as around arms are red and swollen, running with water and peeling. Edema of the foreskin. The eruption itches much and burns. Otherwise well.

Croton tiglium, 2 cent. dilut., three drops thrice daily

in a teaspoonful of water.

September 23rd.—Considerable improvement. Edema of the foreskin has disappeared. The eruption runs less and the itching and burning abated. Frequent want for urination with strong burning pains in urethra. Only a few drops of dark red urine.

Cantharis 2 in the same manner. Discontinue with

Croton tig.

October 5th.—Urination normal. The eruption is now dry and peels freely. Strong itching, which is increased by the warmth of the bed, but is alleviated by slightly scratching it.

Sulphur, 6 cent. trituration, the size of a pea morning and evening. For external use: Sulphur subl. ointment, one part to fifteen parts Axungia porci lota, every evening. October 27th.—Better. The itching has considerably

abated. The eruption on scrotum has disappeared.

Same prescription.

November 7th.—Again worse. The itching is very bad during the night, but grows worse when scratched, and the eruption then burns. It is dry and peeling, only on the thighs, and has spread slightly on the legs.

Arsen. alb., 3 dec. dilut., five drops thrice daily in a

child's spoonful of water.

While using this prescription the eruption gradually disappeared. He stated that a languor of many years' standing and lack of strength disappeared completely. By the middle of January, 1897, the improvement came to a standstill, and I then prescribed Sulphur, 6 cent. dilut., five drops morning and evening for a fortnight, and then again Arsen. alb., and by the middle of May he had completely recovered and was discharged.—

Journ. 7262.

Case XV.—N. N., shoemaker, 24 years, Copenhagen. Has had gonorrhea during four months. Has been treated allopathically with *Balsam Copaiva*, ordinary injections, and strong solutions of caustic, but the flux has not decreased. The discharge from urethra is white and thick, turbid, and contains many threads. Otherwise nothing abnormal. Treatment commenced the 1st of December, 1896.

 $Kava\ Kava\ \theta$, ten drops thrice daily in a tablespoonful of water. $Kava\ Kava\ \theta$ grammes five to 300 grammes distilled water for injection, twice daily.

December 15th.—The flux has decreased. Fewer

threads. Same prescription.

January 5th, 1897.—The flux looks more yellow, is thick. Many threads in the urine. Stinging pains in the posterior part of urethra when urinating.

Cannabis sat., 1 cent. dilut., five drops thrice daily.

Cannabis sat. θ three grammes to 300 grammes

distilled water for injection thrice daily.

Improvement then set in until 18th of February, when the condition was the same as at the commencement of the treatment. The flux was white and thick, but the patient felt no pains when urinating. The urine is very turbid, light yellow with many threads. Although there were no decisive indications, I prescribed Secale, which I have often seen used with success in these dragging cases.

Secale cornut., 3 dec. dilut., five drops thrice daily in a

child's spoonful of water. For injection: Secale cornut. θ , fifteen grammes to 300 grammes distilled water, morning and evening.

The threads disappeared steadily, and the flux stopped after a fortnight. The urine became clear, and he was perfectly well by the 20th of April.—Journ. 7309.

CASE XVI.—Miss N. N., daughter of a manufacturer, 35 years, Ordrup, close to Charlottenlund. Came under treatment the 23rd of December, 1896. The patient has formerly been in the country and has had to work hard by lifting heavy weights. Now has coldness in the left arm from the shoulder to the wrist, and has had this for more than a year. She moves the arm well, but states that the lower arm feels as if sprained when grasping anything, and she feels a weakening of the upper part of the arm. Feels better when constantly moving the arm. Otherwise well. Nothing abnormal found.

Rhus tox., 1 cent. dilut., three drops thrice daily.

January 6th, 1897.—Considerable improvement. Less weakness in the upper part of the arm; nothing else to remark. Same prescription.

January 25th.—Perfectly well. Discharged. Has been well ever since.—Journ. 7318.

SNAKE-VENOM—ITS ACTION AND EFFECT.

Being a reply to arguments advanced by those favouring the bloodpoison theory.

By Frederick Kopp, Greenwich, N.S.W.

I. Introduction.

For a considerable number of years there have been amongst medical men of the various schools two great parties on the important question of the physiological action of snake-venom; one section affirming that it is a true blood-poison, and the other denying this, and asserting that it is a depressing nerve-poison, acting on motor nerve-centres. Unfortunately, a large amount of illfeeling has been stirred up by this rivalry of opinion, and a great deal of dirty water has been thrown about, which, needless to say, has not by any means helped to improve matters. A great many experiments have been made by both parties on various members of the animal

world to prove the correctness of the various theories set forth; but these experiments, instead of settling the matter of dispute, appear to have had the effect of creating still more confusion and difference of opinion; and so the controversy between the two parties as to the true physiological action of snake-venom goes on, and is likely to do so for many a year to come. Indeed, the advent of every new antidote brought forward is certain to be followed by heated arguments between the two sides, as to whether the new antidote in question proves snakevenom to be a blood or a nerve-poison. For instance, the comparatively recent introduction of Chloride of Lime as an antidote in snake-bite was soon followed by an assertion boldly made by the blood-poison advocates that its success (so called) once and for all decided their theory to be the correct one; whilst, on the other hand, the Strychnine treatment has been characterised as a clear proof of snake-venom being a nerve-poison. By this it appears that the introduction of the various antidotes has done little towards solving the great problem of the true physiological action of snake-venom. Ten years ago, I must confess that I was an ardent believer in the bloodpoison theory, honestly believing that death from snakebite resulted from direct blood-poisoning through the inoculation of the venom into the blood. I have, however, all my life been open to conviction on every subject; and, after studying well that of snake-bite and snakevenom, and noticing the only too evident action of the latter on the motor-nerve cells, in lowering their functional activity, and completely suspending it in those cases which proved fatal, without in any way altering the structure of these cells, or by any direct action effecting changes in the blood incompatible with life, I came to the natural conclusion, which any other person in my position would have come to, always providing that prejudice were left out of the question, namely, that snake-venom by its physiological action proved itself to be not a blood, but a nerve-poison. Living for the greater part of my life in situations infested by the various members of the Australian colubrines, it but naturally followed that I should have become interested in their habits, and in the action of their venom and the various antidotes thereto. Once feeling convinced that my former theories as to the physiological action of snake-venom were opposed to facts. I made a special study of the subject, and afterwards made no secret in declaring my allegiance to the new theory, and also gave my reasons for changing my former opinion on the subject. My erstwhile confrères, though now opponents, may stigmatise me as a "turn-coat," but I think every man has a right to change his opinion if he honestly believes that opinion to be wrong. Had I myself not been open to conviction at a certain period of my life, I might never have been converted from being an opponent to the homeopathic treatment of disease to becoming a devoted disciple of Hahnemann and a firm believer in the principle that "likes must be treated with likes" if success in treatment is the object aimed at.

THE STUDY OF SNAKE-BITE AND ITS ANTIDOTES.

Before entering fully into my reply to the various arguments put forward by those who cling to the blood-poison theory, I would draw the attention of my readers to the following lines which appeared in one of the Sydney daily papers, in which the writer alludes to the value of scientific men studying snake-bite and its antidotes: "There is a gruesome fascination about snake-bite, and the antidotes for it, which never grows stale, though, as an actual service to humanity, scientific men might study almost any of the commoner forms of disease with more profit. The percentage of venomous snake-bites that would be fatal if left entirely alone is not a large one, and this, with the comparatively few people bitten, makes it a matter of little importance as far as Australia is concerned, though in some other countries, notably India, the conditions are different. A bushman who, in his ignorance of sanitation, will trifle with death in a score of ways, shudders with horror at the very suggestion of snake-bite, and hacks himself about with a splendid disregard for pain and bloodshed in his exaggerated sense of the risk should he happen to be bitten, even by a non-venomous snake. As long as this feeling prevails the snake-charmer will be an attraction, and the discoverer of an antidote a man not without honour or profit either." Even admitting that, taking in view the population of the Australian continent, there are comparatively few people bitten, I would like to remind the writer of the above that the study of one particular branch of medicine is not to be confined to one particular country, and that the very fact of the conditions in other countries being different (notably in India, where it is estimated that fully 20,000 lives are annually lost through snake-bite alone), there is no reason, therefore, why Australian medical men and scientists should be debarred from carrying out their noble endeavour to discover the most reliable and effectual antidote to snakevenom, if only for the purpose of lowering the death-rate of India. And now as to the statement of the writer that the subject is of little importance on account of "the comparatively few people bitten," and "the percentage of venomous snake-bites that would be fatal if left entirely alone not being a large one," I would beg to draw the attention of my readers to the opinion expressed about two years ago by Mr. James Bray (the eminent Australian naturalist) on the subject, with which I fully concur. Mr. Bray, in making reference to the number of fatal cases of snake-bite in the colony of New South Wales, says :-

"One hundred innocent men, women, and children, the victims of our venomous snake life in New South Wales in twenty years! From the year 1876 to the present time (1895) the following have been the death rates for each year: 1876, 4; 1877, 3; 1878, 7; 1879, 5; 1880, 8; 1881, 5: 1882, 0; 1883, 4; 1884, 8; 1885, 3; 1886, 5; 1887, 3; 1888, 5; 1889, 4; 1890, 10; 1891, 5; 1892, 4; 1893, 7; 1894, 2; 1895, 8; making a total of 100, giving a yearly average death-rate of 5 from snake-bite. The totals given are purely Governmental statistical compilations, with the exception of the years 1894 and 1895. The returns for 1894 are as yet uncompleted, and for the present year the figures are my own, and there have yet to run the last four months ending the year 1895. How many more fatal cases could be added to the list from among the recorded deaths, such as 'unknown causes,' 'found dead in the bush,' &c., it would be hard to say. That these are many is beyond question. The returns prepared by the Registrar-General simply give the deaths recorded from the 1st of January to the 31st of December in each year. This manner of recording the death-rate is scarcely correct, from a scientific point of view, as the terminal half of one year and the first half of the following snake season are given in the yearly total by the Government return, and in this way we really get portions of two seasons, instead of the death-rate for one season. At first

sight the yearly loss of life in New South Wales from snake-bite may appear to be a small one. Comparing it to the Indian death-rate from the same cause, and a comparison with the total population of the whole colony of New South Wales with that of India, as will be seen further on, the total yearly average death-rate is really a large one. A study of facts and figures in connection with the loss of life in India, by way of a contrast, from snake-bite will cause us to open wide our eyes on comparing the figures. India has a population of 240,931,521. In square miles of territory there are 1,474,910, and the density of the population to the square mile is 163. death-rate in India is about 70 in every million of inhabitants. In New South Wales there is a population of about 1,132,234. In square miles of territory there are only 310,000 and the density of the population to the square mile is the small number of 4. The annual average death-rate in New South Wales, by comparison with the Indian death-rate to the million, is nearly 5 as against 70 in India. Then, if we glance at the question further afield, so far as Australia is concerned, and take in Victoria and Queensland, the combined population is 2,666,357; the territory in square miles being 1,066,381, and the density of the population about 12 to the square mile in Victoria, and two square miles to each inhabitant in Queensland. The yearly average death-rates, according to Dr. Huxtable's very valuable paper, read before the Medical Congress in Sydney some few years ago, from 1882 to 1891, equal to ten years, give Queensland 2½ and Victoria slightly over 4½, or an average annual mortality for the combined colonies of New South Wales, Victoria, and Queensland of over 101. It will therefore be seen that New South Wales has the unenviable record of being the highest in loss of life from snake-bite. In studying over the figures already given, the enormous difference will have been noticed between the density of population in India as compared with Australia. It is scarcely to be wondered at that so large a death-rate happens in India through snake-bite, and equally so that our death-rate in Australia, so far as the three colonies above noted are concerned, should total up to an annual average of 101 under the circumstances and by comparisons already mentioned."

Again, Mr. Holsworthy, writing during last snake-

season to the Sydney Morning Herald, refers very strongly to the "summer dangers in the country," gathered from his own personal experience and those of others. He says: "With the approach of the warm weather comes the resurrection of those annovances and dangers to residents in the country and bush, viz., venomous reptiles. During this week a lad in this district was bitten on the arm by a large brown snake, and though, thanks to the skill of Dr. Beattie, of Liverpool, the boy's life was saved, he still suffers from sickness and the pain consequent on the necessary laceration of the arm. Within the period named I have killed two black snakes in the immediate vicinity of my house, measuring respectively, five feet seven inches and five feet two inches, the larger one being so lively and wicked that he sprang at me, and I had some trouble in killing Such experiences as these could doubtless be multiplied indefinitely were information obtained from the colony generally, but, it will be universally admitted, that the venomous snakes are a startling danger and a menace to the public outside the big centres of population. And I maintain, being confirmed in the belief by the opinion of all bushmen of my acquaintance, that, despite the fact that large numbers are destroyed annually, they are increasing. Will you permit me to suggest that the Government should allow a moderate capitation fee, payable at such offices as are open for the receipt of dingo and hare scalps. By the wise liberality of the Government we are rapidly getting rid of the latter enemies, to the interest of the pastoralist and settler, and I think it only reasonable that any person destroying a venomous snake should be rewarded for it. I freely admit that a majority of the men, and even many women, residing in the country kill snakes wherever they can, but a fee of, say, 10s. per head would induce systematic searching for snakes, and the comparatively small outlay would surely be justifiable in view of the consequent saving of life. Not only are lives lost through snake-bite, but very many who, by the application of remedies, live on, are sufferers from the effects of the poison as long as they live. Not one in a thousand who are bitten is provided with any remedy, and in nearly all cases a distance has to be travelled to reach a doctor, so that, in the interim, the poison gets a hold on the system which is not entirely

eradicable. It appears to me that it would be a fitting adjunct to the desirable policy of the Government to settle the lands of the colony as much as possible to subsidise the extermination of the *greatest curse* to the settler, who lives in continual dread that his children or

helpless dependants may fall victims."

Comment on the above appears to me to be unnecessary, as they are the opinions of two very trustworthy and wellinformed men, who would be the last to raise a false Suffice it to say, I have every confidence that my readers, after perusing the two above plain and outspoken facts, will agree with me that it will be well for scientific men to continue their study of snake-bite, snake-venom, and its antidotes in the Australian colonies and elsewhere, so that our hands may be strengthened in our endeavour to reduce the mortality to a mere minimum in all those parts of the globe in which it is the lot of mankind to deal with these venomous and deadly reptiles. It is all very well for the writer first alluded to to make the remark that "as an actual service to humanity scientific men might study almost any of the commoner forms of disease with more profit," but I contend that it is a very bad policy to neglect one branch or section of medical science at the expense of another. According to the writer's argument (that is, taking his views on the matter as being correct, which, I believe, I have shown to be the contrary) it would only be a waste of time and of little profit for a medical man to study and interest himself in any other forms of disease than those peculiar to the country in which he intends to practise. The narrow-mindedness and one-sidedness of the argument at once becomes selfevident to the most casual observer.

(To be continued.)

MATERIA MEDICA MISCELLANY.

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

Thyroidin in Glycosuria.—The Clinique for January has a suggestive editorial on this subject, in which the writer says that there seems to be a close parallel between the glycosuria that is incident to Graves' disease (but not always present in that affection) and that which may be

caused by artificial thyroidisation. The fact that glycosuria is a frequent result of thyroid dosage has, he justly remarks, escaped most observers. He quotes Lépine as saying that while a transient form of glycosuria is frequent in Graves' disease only twenty authentic cases of permanent diabetes associated therewith have been published." He also quotes the following case reported by Professor Lépine as illustrating the value of thyroid extract in a case of diabetes: "Mr. X., at fifty-two, predisposed to arthritis, and whose sister also had diabetes, was seized with that affection eleven years ago. liver was enlarged, but there was neither alcoholism nor syphilis. In July, 1896, his symptoms were: a very painful sciatica; the passage of $4\frac{1}{2}$ litres of urine in twenty-four hours, which yielded 135 grammes of sugar and 1 gramme 35 centigrammes of albumin. The alkaline regimen and antipyrine reduced the quantity of urine to 2 litres, that of sugar to 32 grammes, and of albumin to 1 gramme. This was followed in September by a relapse, when there was 6 litres of urine, 228 grammes of sugar, and 1 gramme of albumin, the pains being very severe again. September 30th the treatment with the thyroid tablets was begun. October 9th the improvement was decided, the pains had diminished, the quantity of urine had fallen to 2 litres, there were only 56 grammes of sugar, and 1.60 grammes of albumin daily. December 10, 1896, one year ago, the record reported 11 litres of urine, 8.75 grammes of sugar, and only 75 centigrammes of albumin." The Clinique adds: "While it is true that a single case weighs but little in favour of a remedy, still there are interesting facts of a kindred nature that may help to establish the clinical value of thyroidin in the transient forms of diabetes especially. The comparative ease with which a temporary glycosuria may be caused in one who has Graves' disease by eating common sugar, or saccharine food, is very suggestive, for it is a possibility that may be of service at the bedside. It certainly shows that in certain cases this peculiar susceptibility has something to do with an excessive development of the thyroid secretion."

Mephitis in Whooping-cough.—Dr. Dewey recommends Mephitis as useful for a cough with a well-marked laryngeal spasm. The cough is worse at night on lying down, there is a suffocative feeling, and the child cannot exhale

properly. Farrington says that this remedy will often apparently make the patient worse, while it really tends to shorten the course of the disease. The catarrhal symptoms are slight in cases calling for *Mephitis*, but the whoop is prominent. There is not much expectoration. The smothering comes on with the cough, while with *Corallium* it comes before it, and is followed by great exhaustion. Fisher prefers *Naphthalin* to *Mephitis* in whooping-cough. One of Hahnemann's therapeutic hints in whooping-cough is *Ledum*, which has a spasmodic, racking cough and should be thought of in this connection.—*Med. Cent.*

Phytolacca in Scarlet Fever.—Dr. McElwee gives the following symptoms as indications for Phytolacca in scarlet fever—scarlet eruption all over the body; headache, high fever, both sides of the throat covered with ashycoloured membrane. Eruption is dry and of a shrivelled appearance, skin feels like brown paper to the touch; urine suppressed; and hands and feet burning hot, cannot keep them covered; restless and sleepless; tongue dry in centre and coated brown at the sides; acrid coryza.

Eruption does not appear properly.—Med. Cent.

The Headache of Lachesis Naja and Crotalus.—Lachesis is useful in headache depending mostly on suppressed discharges for their cause, hence indicated in catarrhal, menstrual, and climacteric headaches. These are relieved by establishing the flow, whether coryzal or menstrual; pain is mostly on left side, and there is aggravation from sleep. Also useful in headaches depending on ovarian and uterine diseases with the characteristic symptoms. In Naja the pain is in the left orbital region, extending back to the occiput, preceded and followed by nausea and vomiting; intermittent, coming every two to four days; worse from sleep as in Lachesis; useful in menstrual and The Crotalus headache has blinding sick headaches. pain in right temple, extending through to left temple and over vertex to occiput, causing vomiting, which does not relieve. A peculiar symptom is that as soon as headache is over the patient can go about work as usual. —Dr. Garrison in American Medical Monthly.

Mygale in Chorea.—Mygale lasidora, the large black Cuban spider, has been found an excellent remedy in chorea of purely nervous origin without organic disease. The symptoms indicating the drug are constant nervous twitching of the eyelids; restless hands; cannot sleep, because he cannot keep the limbs quiet; ridiculous dreams; muscles of the face twitch; puts the tongue out with difficulty, because it jerks so; convulsive movements of the abdomen; hands in constant motion; unsteady gait; limbs in motion when sitting, and drag while walking; cannot put the hand to the face, because it is suddenly drawn back; aversion to food, because so nervous; nausea, with dim sight; weakness; palpitation; sensations of constriction in the throat; pain in the head in the morning, worse in the eyes and from temple to temple; repeated nervous chills, followed by fever, with trembling of the whole body; excessive thirst; flushed face; rapid pulse; tongue dry and brown; despondency and fear of death. It is not to be supposed that all these symptoms must be found in every case in which this drug will prove of benefit. The fact that the chorea is of nervous origin, that the patient has no organic disease, and that there is a great and constant nervous twitching, with restlessness, &c., is sufficient to indicate the drug.— Medical Era.

Vesicaria Communis in Diseases of the Genito-Urinary Organs.—The Homeopathic News recommends Vesicaria for nephralgia when there is acute pain in the region of the loins not connected with inflammation of the kidneys. It is also recommended in acute and chronic cystitis, but no special indications are given for the remedy. Small doses of the tincture frequently repeated are advised in acute cystitis. The plant grows in Germany, where it is a household remedy for all forms of bladder and urinary difficulties.

AS OTHERS SEE US.

Among our visitors from the other side of the Atlantic in 1896 there was none who took a keener or more intelligent interest in the manners and customs of native homeopaths than Dr. Frank Kraft, the brilliant editor of the American Homeopathist. On his own side of the water Dr. Kraft is known as an outspoken writer who is not to be deterred by any fear of the "Prunes and Prisms" cult from saying whatever he thinks ought to be said in the public interest, and for that reason it may be useful to ourselves to know what impression is made

by some aspects of British homeopathy on the candid American mind. We therefore quote from two articles which appeared recently in the American Homeopathist. It will probably astonish our readers to learn from the first, "Foreign Homeopathic Conservatism" (January 1st), "that Boston has more homeopathic doctors and institutions than London and Paris put together." The second article (American Homeopathist, February 15th) is a criticism on the debate which followed the reading of Dr. McLachlan's paper at Bristol in September last. The paper itself was published in our October number last year.

FOREIGN HOMEOPATHIC CONSERVATISM.

Dr. I. T. Talbot—need we say of Boston—in a pleasant letter says, among many other good things, that "in Boston, with perhaps six hundred thousand people, we have more homeopathic physicians and institutions, which are doing more work, than in all London and Paris combined, with five million people." Of course this is true. But why? Is it not because in the countries or, rather, cities named, the younger school is the immediate outgrowth of the old, and is, therefore, in great part filled with the teachings which were instilled in the infant time of its medical studies? Had the student been given the advantages of an independent homeopathic school, and taught homeopathic medicine de novo and not as an appendix to old-school lore, does it not seem probable that there would be more enthusiasm for homeopathy and not nearly so much fear of, and regard for, the frown of the old school? We believe there is one modern ecclesiastical body which says "let us have the first six years of the child; the other sects may have the rest."

There, for instance, are the English homeopaths, many of whom are giants of homeopathic lore, whose writings, and, for aught we know, whose practices, are almost world-famous; yet who, when it comes to doing aught tending to bring homeopathy prominently before the people, shrink as if some crime were contemplated. They defer to allopathic opinion. Instead of making an effort to be free, and becoming a school distinct and strong and noble, they hide behind the ethics of the old school and deprecate the aggressiveness of the younger membership. Note in particular that scandalous conduct of the modern "Prunes and Prisms" Society the B. H. S. in its dealing with that unfortunate but contrite ex-member who once upon a time believed he saw additional light in Matteism! We have said it before, and repeat it because we believe it to

be true, that if England had a few men like Talbot, Dake, Ludlam, Paine, Fisher, Orme, Strickler, the Hanchetts, the Allens, Walton, Green, Lee, Norton, Beebe, McClelland, Van Baun, Bailey, Gatchell, Dale, Comstock, McElwee, Baxter, Price, and others, all good men and true, there would soon be a smashing of that truckling conservatism which discountenances all homeopathic independence, and is content to read lectures to the old-school graduates from behind the arras of a hospital. There would be some memorialising of the proper legislative bodies; there would be such legitimate pressure brought to bear upon the necessary officials that they would be

glad to concede equal rights to the homeopaths.

In our recently concluded pilgrimage to England we were glad to have many preconceived notions expunged. We were pleased, in especial, to note the degree of freedom enjoyed. And it was difficult to understand why, in the matter of recognition as a school of medicine, homeopathy halted, and was serenely happy to bring up the rear. We say again that we believe the fault to be in the practitioners themselves, and for the reason stated—that they are so terribly in dread of the ethical fetich that they fear to speak aloud lest the allopath look not kindly upon them. Allopathic ethics and methods, as well as allopathic medicines, have been ineradicably woven into their professional woof and warp. Of course this does not apply to all English homeopaths. We had personal contact with many, and have had much correspondence with others since, which causes us to feel that, if a few of the acknowledged leaders would really lead, there would soon be a tumbling down of the allopathic walls, in so far, at any rate, as homeopathic medicine was concerned.

Here is the second article.

HIGH POTENCIES IN ENGLAND.

A recent paper and its discussions (published in the *Homeopathic Review*, of London) by Dr. John McLachlan, on "The Use of High Potencies in the Healing of the Sick," is interesting in that it gives a large idea of how *some* of the

English homeopaths regard this subject.

The paper was originally presented to the British Homeopathic Congress at Bristol, September 16, 1897, and is well written. But the subject-matter—high potencies—is as dangerous of handling publicly in England as it has usually been in America. It is an immediate notice for a Kilkenny-cat fight. Every cure cited is either pooh-poohed or denied. There is a fierce determination on the part of many of the profession everywhere to sinister not only the theory, but to

belittle and maltreat the unfortunate proponent. Dr. McLachlan supports his arguments by frequent quotations from the *Organon*; he cites five cases of cures and apparently makes his point—that there is virtue in medicine which has not yet been located by any scientific process so far known. Thereupon the animals are let loose into the arena; then—Lord bless you!—the fur flies; and at the conclusion of the Roman half-holiday naught remains but a few bloody spots

here and there!

The first of these discussions is in the form of an opener by Dr. Richard Hughes, who seems to have had an opportunity to read and digest the paper at his leisure, and so prepare his science, his Latin, and his criticism, that naught remained to be said after his closing sentence, save to accent his points by little pithy anecdotes concerning the washing of bottles a million times, &c. Dr. Hughes attacks Hahnemann and his Organon ostensibly because the Fifth Edition contains the vital-force theory, which by implication, and indeed in actual language, he said was the theory of Hahnemann's later days when he was past his prime, and consequently unsound. But the real reason was doubtlessly that the Cyclopedia of Drug Pathogenesy can find no foothold and no comfort in its pages. He makes large drafts upon modern science to prove the non-existence of a vital force. The great defect in these cases, he alleges, is that there is no evidence that the medicines were homeopathic to the disease! And there you are! But this is not a new argument. Every practitioner of but five vears' professional life has heard that times out of number. and has had to put up his best argument in proof of his position. But, most singularly, it has, as a rule, been uttered by the allopath and not by the competing homeopath. And we hazard the guess that the allopath in England, as in America, got his arrows from the quiver of some pathogenetic homeopath of the olden times.

In each of the cited cases no question is raised as to the recovery of the patient. Is not this evidence that the medicines were homeopathic to the disease? Oh, truly, they may have gotten well of themselves, or by the natural limitations of the disease, or the medicines of the preceding medical attendants might now have begun their curative work; or, possibly even, a bottle of Lydia Pinkham's Compound (taken some several moons ago) was in very deed the instrument in the hands of a benevolent Providence to bring health, and restoration to strength and activity, at the very moment when the high-potency man had given a few doses of his "moonshine." Of course that is not impossible. But that allegation is as pertinent of the 12th as it is of the 30th. The

recovery of the patient is no evidence that the medicines were homeopathic to the disease, certainly not; but that inane fiddlefaddle about the manner in which the medicine was prepared, how it was "proved," and in what form it was administered,

that, and that only is evidence.

In this country we had until recently two mighty giants of learning and vast medical experience: the German nobleman, Adolph Lippe, and nature's nobleman, Constantine Hering. Will any rationalising man dare rise in his pew in the synagogue, having known these men and been participants in their work, and declare that this twain were unable to cure patients with the very highest potencies; or that they did not succeed in innumerable cases where the low-potency men had failed utterly and ignobly? Has the profession already forgotten that Sweet Melanethon of Homeopathy, Carroll Dunham, and his immortal two-hundredths? And that long list of homeopathic giants from Germany headed necessarily by the Master —were all these deceived? Were all their cures imaginary? And that constantly augmenting host of living physicians in Germany and America who find comfort for the afflicted and bread for themselves in the higher potencies—these men who live in this scientific age and know what it is, as Hahnemann could not know—are all these men mountebanks and liars?

Dr. Dyce Brown, one of the distinguished editors of the Review, took up the cudgel (and the only one for the essayist).

He said:—

"Dr. McLachlan speaks of the vital force; Dr. Hughespooh-poohs it and thinks it does not exist. There is no actual proof of it. But say what you will, call it what you like, it seems to me that there is something which is immaterial and peculiar in the reaction of the body to high dilutions. We need not discuss the point whether c.m. or the millionth (as in one of the cases was used) are illustrations of this or not. A sufficient illustration of the wonderful vital reaction—call it that, or vital force, or anything you like, but it is something different from chemistry or from pure materialism—is shown in the 30th dilution. If you admit the curative value of the 30th dilution, I do not see where you are to stop. I should be very sorry to pooh-pooh any cases that are recorded as having been cured by dilutions considerably higher than the 30th; because, if you once admit the 30th, you admit the whole Therefore, I think we must allow the existence of argument. something—call it vital force or what you like—something very peculiar in the vital organism that reacts upon medicines that are absolutely inconceivable when you put them down

Dr. Ord, of whom we expected better things, takes a hand

in making both the essayist and his paper duly ridiculous, and succeeds.

And, lastly, the fatherly and dignified President helps to round out the measure of burlesquerie by pointing out that Dr. McLachlan is still a young practitioner; that possibly, if he lives long enough, he may gather both age and pathogenetic wisdom, and be more worthy to sit in the councils of his peers. The President was quite fatherly in his advice to the essayist, cautioning him not to rationalise too much; to observe more accurately; then his results may eventually square with the preconceived pluperfection of the pathogenetic English homeopath and be found worthy of recording. A pleasant way of saying that he is afflicted with Pitt's disease of youthfulness. Though how an ambitious homeopath may strike the happy mean between extreme youth and the Hahnemannian too-old is nowhere set down in this President's address. It must have been very evident at the conclusion of the Presidential homily that, if a member would insist upon bringing such unpathogenetic trash as the high potency into an assembly of the British Homeopathic Congress, he must not be surprised if not only his paper but his age, his person, and his church

membership are made subjects of popular criticism.

It has always seemed to us as singular that, in America at least, the book-makers and teachers—excluding of course the surgical wing—were and are to this hour high-potency men. Do we not speak truly? Would this tend to show that, perhaps, a specialist knows his specialty best; and that a materia medica man, who is, after all, the true homeopath (with no offence to the surgeons) is better qualified to speak of the action of drugs in the varying potencies than the other wings of the profession. That Dr. Hughes should be alone on the outside in this matter is the exception which proves the In America, nay even in the present American Institute of Homeopathy, it is no longer a bull-baiting occasion to speak of a cure performed by the high potency. And it is no longer an infrequent occurrence to be told by the old-style practitioners that he tried one of those "moonshine" potencies in one of his desperate cases last week or month or several months ago, without a particle of faith in the outcome, and yet the patient recovered! We are convinced that much of the prevalent scepticism in homeopathic circles is the result of just such narrow teachings as were given in evidence in the discussions quoted above. But thanks to the rapidly changing methods of teaching materia medica in the American schools, the alternating, and combining, and scientific pathogenetic homeopathy (Limited) is rapidly disappearing, and the homeopathy of Hahnemann taking its place.

SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

The sixth meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thursday, March 3, 1898, the president, Dr. Neatby, being in the chair.

Dr. Cash Reed (Plymouth) read a paper entitled, "Clinical Notes on Endometritis; Chiefly the Senile Form," the object of which was to prove a connection between senile endometritis and carcinoma uteri, the former affection predisposing to the latter in the author's opinion.

The paper was illustrated with a lantern demonstration of microscopic slides. A short discussion followed, in which Dr. Burford agreed with Dr. Cash Reed's conclusion. Drs. Hughes,

Madden, and Neatby also took part.

Mr. Gerard Smith then read a paper, or rather gave a very able demonstration, on "The Molecular Physics of the X-ray Phenomena." The following synopsis shows the sphere of his subject:—

The subject has important bearing upon therapeutics, especially homeopathic; high tension electric discharge in vacuo; proofs that matter in the radiant state produces the phenomena; molecular bombardment of various minerals in vacuo, and their response by varying fluorescence; clinical future of X-ray

diagnosis.

This subject he dealt with in a masterly way, and every experiment came off beautifully. In fact his whole demonstration was excellent and highly interesting and instructive from a homeopathic point of view, and we can only hope that some of his audience will in future believe in potencies above the 1x, for he proved visibly that matter, when attenuated to the degree represented by a vaccuum of \(\frac{1}{100000000}\) th of an atmosphere, acquires new powers of penetrating substances which we are accustomed to regard as impenetrable.

Mr. Gerard Smith thought this might throw some light on the powers acquired by remedies by means of attenuation.

Cedron.—A mason, aged 21, had suffered from typhoid fever a year ago. For the last month he was afflicted with tertian ague. Some doses of quinine had only caused dulness of hearing and confusion of head, from which he still suffers. The paroxysms of fever began in the afternoon with violent pains in the temples, and ended at night with profuse sweat. A single dose of Cedron 3 cured him completely (Bonino, A. h Z., exxxiv. 152).—J. B. H. S.

INSTITUTION.

THE PHILLIPS MEMORIAL HOSPITAL.

The Annual General Meeting of the governors, donors, and subscribers of the Bromley Phillips Memorial Homeopathic Hospital and Dispensary was held at the hospital on February 17th. The president (Mr. Walter Murton, C.B.) was in the chair, and amongst those present were Messrs. W. R. Hay, I. Gunton, A. Lindsay Bell, T. Langford, Whittington, Mr. and Mrs. A. E. Beddow, Mr. W. Walter, Dr. Wynne Thomas, Dr. and Mrs. Madden, Mr. D. Avis, Mr. J. W. Hose, Mr. W. Petrie, Mr. J. M. Wyborn (hon. secretary), &c. Several gentle-

men wrote regretting inability to be present.

In their ninth annual report (read by the honorary secretary), the Committee dealt at some length with the development of the rebuilding scheme as a Jubilee commemoration, and the acquisition of a more eligible building site in the strip of the White Hart field reserved by Mr. Coles Child on the west side of the proposed public garden, which, the Committee felt, is eminently adapted by its central and quiet position to the requirements both of the hospital and dispensary. It is contemplated to erect the new building on the northern end of the plot close to the entrance from the Market Square. The agreement has just been signed for a lease of 999 years at an annual ground rent of £80, with the option, later on, of acquiring the freehold on favourable conditions. By the end of the year the Building Fund had reached £2,794. In this connection the Committee gratefully acknowledged the receipt in May last of £100 from a generous friend, who desired to remain anonymous, and a like sum had, since the close of the year, been placed to the account of the Building Fund in a similar manner. The number of patients treated in the wards during the year amounted to 74, and of these 50 were discharged cured, and 18 were, in a greater or less degree, improved, while no fatal termination had occurred, though 24 operations were performed. Three cases of accident were admitted into the wards. 1,106 visits were paid to patients at their homes. There were 1,804 attendances at the dispensary, 292 new outpatients having presented themselves for treatment. The total ordinary income from every source amounted to £559 1s. 4d., the average of the previous five years being £558 14s. 9d., while the current expenditure was £549 17s. 4d. The annual subscriptions, always hitherto inadequate to the needs of the hospital, have somewhat increased in amount, the total sum received from this source being £251 14s., as against £238 4s. 6d. in 1896. The donations fell short of the amount received in the preceding year by about £30, only £20 1s. 10d.

being credited under this head. The receipts from patients' payments compare favourably with those of previous years, the total being £190 15s. 6d. The Committee recorded their obligation to numerous friends who have aided the funds by their assistance in special efforts made in their behalf.—

District Times.

REVIEWS.

GENITO-URINARY AND VENEREAL DISEASES.*

Although this book bears on its face the date "1895," it has every appearance of recent publication; and we do not remember to have seen any notice of it before. Its author, Dr. Carleton, holds the chair of genito-urinary diseases in the "Metropolitan Post-Graduate School of Medicine, New York City"; the contributing authors, Drs. Deady and Honan hold appointments in the New York Ophthalmic Hospital and the Metropolitan Post-Graduate School respectively. The scope of the work may be best understood by a quotation from the preface:

"It has been many years since a concise treatise on genito-urinary and venereal diseases, convenient for ready reference, has been offered for public consideration. The fact that many changes in the treatment have become necessary from a better understanding of the diseases themselves, the rapid advance in Antiseptic and Aseptic Surgery, and a better general knowledge of Bacteriology and its relations to cause and effect pointing the way in many cases to their more rational treatment, to say nothing of the new remedies and operations advocated in the past few years, are sufficient reasons, in our judgment, for the presentation of this book.

"General literature has been consulted in the preparation of these pages, and proper consideration given to the treatment recommended. The scope and size of the book have precluded the mention of the details of many operations, some being given only in outline.

"The question of dose has been left almost entirely to the individual prescriber. It has been the author's desire to give only a short resumé of the diseases in question and their latest and most satisfactory treatment.

"By the kindness of the publishers cuts of instruments have been inserted, thus obviating the necessity for their description.

^{*} A Manual of Genito-Urinary and Venereal Diseases. By Bukk G. Carleton, M.D.; with Venereal Diseases of the Eye, by Charles Deady, M.D.; and Vesical Calculus and External Urethrotomy, by Wm. Francis Honan, M.D. New York: Boericke, Runyon, and Ernesty. London: Homeopathic Publishing Co. Pp. 305, long octavo. Price 15s., net.

"The author is greatly indebted to Dr. Charles Deady for the complete chapters on Venereal Diseases of the Eye, as well as to Dr. William Francis Honan for the paper on Stone in the Bladder and External Urethrotomy.

"Extra space has been given to diseases of the eye, as many eyes are ruined which could have been saved had the proper treatment

been instituted early in the disease.

"With the knowledge of its many short-comings this volume is submitted to the profession with the hope that it may prove a useful vade mecum."

The above gives a very good idea of the author's aim, and we may say that his efforts have been amply rewarded. Dr. Carleton's book is truly a vade mecum on his subject, and all conditions coming within the scope of his title will be found carefully described and accounted for. In the matter of treatment he follows the general rule of specialists, and gives much attention to local measures and topical applications in the various diseases and conditions described. At the same time, it must be said that the indications for medicinal treatment are in most instances very complete and comprehensive.

THE MEDICAL ANNUAL, 1898.*

The present volume of this yearly publication fully maintains the excellence of previous issues in every way. For the busy practitioner who has not time to keep up to date with the current medical literature such publications as the Medical Annual are invaluable, and among such books we have not seen its equal. In the therapeutic section, which is compiled by Dr. Murrell, we are glad to find some of our old friends introduced as "new remedies," though, as usual, we regret to say, with no recognition of the true origin of the information. We refer specially to Phytolacca, which has recently been discovered to be a valuable remedy for quinsy, and also for puerperal mastitis, and Senecio for amenorrhea. Rhus Toxicodendron is also mentioned, the active principle of which Franz Pfoff has found to be an irritant oil which he calls Toxicodendrol. The excessive sensitiveness of some skins to this oil is shown by the fact that $\frac{1}{1000}$ of a milligramme in two drops of oil proved as an active irritant in one case. It was found in rabbits to have a marked

^{*} The Medical Annual, 1898. Bristol: John Wright & Co.; London Simpkin, Marshall, Hamilton, Kent, & Co. Price 7s. 6d., nett.

effect on the kidneys, producing nephritis and conspicuous fatty degeneration. The value of these observations to Dr. Murrell is shown by his remark, "It is not unlikely that *Toxicodendrol* will prove of value, therapeutically, especially as a counter-irritant." We would like to suggest to the editors the advisability of grouping together all the articles relating to diseases of the eyes as appears to be done in the case of the ear.

EXTRACTS.

A CASE OF CELLULITIS OF THE NECK.

By JITENDRA NATH MAJUMDAR, M.D.

Mr. N—— aged about fifty, fair complexioned, rather delicate-looking, came to me for the treatment of a cellulitis of the neck which has been declared incurable by our friends of the other school unless they could resort to the scalpel as their last resource. This gentleman, being very much afraid of the knife, came to the homeopaths for treatment, although he had no belief in their seedlike pills and

pellets.

On examination I found this cellulitis to be quite deep, there was a good deal of swelling and some fluctuation; it was intensely painful, so much so that it hurt him to turn his neck. His health was good in every other respect, except that he had had syphilis some years ago and was cured, as he said, by the allopaths, who gave him large doses of Mercury. His teeth, bones and lymphatics were perfectly normal. On these symptoms I prescribed Hepar 30, to be taken twice a day for four days. On his reappearance after the fourth day I found the swelling almost half gone; he could move his neck freely, and he said those powders worked like magic. Contrary to general rules, and being afraid of a recrudescence, I repeated the process and gave him another eight powders to be taken as before. I did not see the patient again for about a week, when he came to me to say that he was perfectly cured and had no more trouble. The swelling, pain, &c., all gone, and he was able to attend to his daily work.— Indian Homeopathic Review.

THE SPIDER-POISONS.

By A. C. Cowperthwaite, M.D. Chicago, Professor of Materia Medica in the Chicago Homeopathic Medical College.

There is probably no class of remedies in our materia medica that are more thorough or certain in their action, when well indicated, than are the animal poisons. That they are too often neglected is an indisputable fact. This probably arises from the fact that they are not remedies npon which one can well generalise. An animal remedy, to be efficient, must be well indicated. Perhaps an exception to this arises in the case of *Apis*, which, when given in large doses, will sometimes produce physiological effects that prove curative where the symptoms of the drug are not closely in line with the symptoms of the disease.

The most profound animal poison that we have belongs to that found in the bite of the Ophidia. These, as you well know, are the snake-poisons. It is hardly worth while for me to enter into a dissertation upon the profound disturbing influences which these poisons exert upon the blood. Their usefulness in the treatment of low forms of disease are too well

known to require mention.

There is, however, a class of animal remedies of which the general practitioner knows comparatively little. I refer to the spider-poisons, or the Articulata Arachnida. These poisons are not so wide-reaching in their effect or in their therapeutic efficiency; they are narrower in their range than are either the snake-poisons or the poison of the honey-bee. But, at the same time, they cover grave and very important conditions for which they should be more often prescribed than they are

or have been in the past.

However, I would reiterate what I have already said, that in order to obtain the desired beneficial effects in any form of disease in which they are to be used, these remedies must be thoroughly indicated. In a general way, it may be said that the poisons of spiders simulate in their effect upon the blood the action of all the animal poisons. It is a general characteristic of all the poisons from the animal kingdom that they act suddenly, act destructively, and that they are apt to be called for in destructive diseases. As a rule the animal poisons decompose the blood and render it blackish and fluid in its character. This is to a great extent true of the spider-poisons, but at the same time we obtain local symptoms which we do not find in any other animal poisons, namely, rapid swelling, streaks of inflammation in the course of the lymphatics, coldness, anxiety and scarcely perceptible pulse. However, these are not the distinguishing effects of the spider-poisons. The

latter may be found in their influence upon the nervous system, especially the motor nerves, which they affect with remarkable intensity. All spider-poisons induce symptoms which strongly simulate chorea, and this is the reason that they are so frequently indicated in the treatment of that disease.

I shall only call your attention, and that very briefly, to four

of the most important of this class of remedies.

First, is the Mygale Lasidora. This is the large, black Cuban spider. From the symptoms obtained it has been found an excellent remedy in chorea of nervous origin, and not due to any organic changes. The symptoms indicating the drug in this disease are, constant nervous twitching of the evelids, restless hands; cannot sleep because he cannot keep the limbs quiet; ridiculous dreams; muscles of the face twitch, puts the tongue out with difficulty because it jerks so; convulsive movements of the abdomen; hands in constant motion; unsteady gait; limbs in motion when sitting and drag while walking; cannot put the hand to the face because it is suddenly drawn back; aversion to food because they feel so nervous; nausea with dim sight; weakness; palpitation; sensations of constriction in the throat; pain in the head in the morning; worse in the eyes and from temple to temple; nervous repeated chills followed by fever with trembling of the whole body; excessive thirst; flushed face; rapid pulse; tongue dry and brown; despondency and fear of death.

Now, it is not to be supposed that all of these symptoms must be found in every case where this drug will prove of benefit; that would be unreasonable. But the fact that the chorea is of nervous origin, that the patient has no organic disease, that there is great and constant nervous twitching, with restlessness, &c., is sufficient to indicate the drug; but if other of the symptoms mentioned are present, it is all the

better indicated.

The next of the spider-poisons I shall mention is the Aranea Diadema. This is the Cross spider. It was selected by Grauvogel as typical of what he called the "hydrogenoid constitution," when there is too much water in the system, and the patient cannot tolerate moisture or dampness. It is a symptom very characteristic, worse in damp, wet places, or in wet weather. Such conditions are eminently favourable to malarial poisoning; every damp day or place favours chilliness. The patient feels cold to the very bones, there are bone pains of a boring, digging character, but no fever. The symptoms return at precisely the same hour, reminding us of Cedron. It has proven especially useful in intermittent fevers which have been checked by *Quinine*. It is especially useful when there are hemorrhages or enlargement of the spleen. From this

description of the drug it will be seen that the general action upon the nervous system, spoken of in the beginning, regarding the spider-poisons, does not altogether hold good in considering this drug. In this respect it differs from all other spider poisons. The first produces only a nervous chill; the chill of Aranea may be termed a malarial chill. It is certainly an invaluable remedy, not only in malaria but in neuralgia and many other conditions where the characteristic of worse in

damp, wet places and wet weather is present.

This spider poison is most strikingly similar to the poison of the Ophidia. The general effects from the bite of the Tarantula are better known to many of us than are those of other spiders, and it is quite well known that it is often difficult to tell whether the patient has been bitten by a Tarantula or by some form of serpent. This drug not only gives us the blood poison before mentioned, but it also follows out quite closely what has been said regarding the effects of the spider-poison upon the nervous system. Its general sphere of usefulness, according to my ideas, is in the treatment of hysteria. Dr. Farrington claims that it is only to be thought of in those cases where the deceptive symptoms are present; the patient tries in every way to deceive those about her, pretends to be very sick; she has a mental aberration which is assumed. It is also indicated, especially in hysteria, when there are organic changes in the uterus and ovaries. The uterus may be enlarged, with a tendency to a fibrous growth.

In the poison of the Tarantula there is a burning and swelling of the glands and a conveyance of the poison to the cellular tissue about the neck, no matter where the seat of the bite may be. There immediately takes place immense swelling of a dark red or purplish hue, choking seems imminent, and at the same time a nose-bleed of dark clots comes on, which usually relieves the choking. Symptoms of cerebral congestion are shown by throbbing carotids, and there is also the pale, earthy face, the fauces appear swellen and purplish, and there is more or less difficulty in swallowing. In paralytic conditions this class of symptoms might indicate Lachesis rather than Tarantula, were there not present in connection therewith all

the characteristic nervous phenomena of the drug.

The patient is nervous and restless, requiring frequent changes of position; he must constantly busy himself or walk, and here, according to Hering, is the keynote for the use of this drug.

The next and last of the spider-poisons that I shall mention is Theridion. This is known as the "orange tree spider," and deserves a passing notice because it is frequently useful in the treatment of nervous conditions, especially hysteria and semi-

hysterical states. The brain is in a state of excitement, the patient is talkative and inclined to hilarity, there is nervous weakness and the limbs tremble, over-exertion causes fainting. There is a dull, heavy headache, the head feels too thick sometimes, more or less throbbing over the left eye, nausea worse on rising from lying down, or nausea from any one walking across the floor; every sound affects the whole body, especially the teeth; sensitive to light, vertigo and nausea worse on closing the eyes; from fast riding or the motion of a ship. The headache is similar in some respects to Belladonna, Sanguinaria, and Spigelia, but only Theridion has the extreme nervous weakness and trembling. Theridion resembles Moschus, which is said to be an efficient antidote.

Theridion has also been successfully used in the treatment of subacute catarrhal conditions, with thick, yellow, and offensive discharges. This is not well worked out in the pathogenesis with the symptoms we have, but has been repeatedly clinically

verified.

This poison also influences deep-seated dyscrasias, it even being claimed that *Theridion* has the power to stay and even cure phthisis florida in its incipiency; a thing I am very loth to believe.

31, Washington Street.

TWO CASES OF NIGHT BLINDNESS.

THE following cases of night blindness are interesting, specially as the subject has been recently brought forward

at the annual meeting in Montreal:-

A. and B., brothers, aged twelve and five years respectively, are said by their parents to have always been quite blind at night, so much so that they are quite unable to find their way home if left alone away from the house after dark. This was noticed from the time that they first moved about alone. These are the only two boys in a family of five, the three girls not having the least difficulty in seeing at night. The sight of the boys by day has always been excellent. They are both quite up to the average in intellect.

I was only able to test the acuteness of vision and fields of the elder boy, the other being too young to give reliable answers. In the elder boy the sight was excellent by day $(V.=\frac{6}{5}$ easily). The fields were much contracted, their diameter not being more than a quarter of the normal. He

distinguished colours perfectly.

186 EXTRACTS.

Both boys were examined with the ophthalmoscope, and in both very little abnormality was to be discovered. There was slight pallor of the discs, and the retinal arteries were perhaps a little small. Tracing the arteries towards the periphery, their sheaths were found in places to be thickened, as shown by white lines running along each side of them, but this was not uniformly the case. At the extreme periphery of the fundus there seemed to be some thinning of the retina, making the choroidal vessels stand out more clearly than elsewhere; but nowhere could I discover any disturbance of pigment or any pigment arranged in the reticulated manner characteristic of retinitis pigmentosa.

Though the characteristic signs were wanting, one must consider these to be cases of retinitis pigmentosa. It is remarkable that the boys only were affected in the family. This agrees with the known fact that retinitis pigmentosa is more common in males than females. I examined one of the girls, and her fields were normal. The parents knew of none of their relatives who were affected in the same way. It is to be noted, however, that the parents were second cousins, and this supports the theory that consanguinity is in many cases a cause of the disease.—H. Symonds, M.D., Kimberley, Cape Colony.—British Medical Journal, January 22nd.

CHELIDONIUM IN RHEUMATISM.

A FEW months ago there was recorded in the Journal a case of rheumatism of the right leg and ankle cured by Chelidonium. Another case of a somewhat remarkable character

has yielded to the same remedy.

If the liver is largely responsible for rheumatism, as many claim, it is not strange that a prominent liver remedy should cure it by going to the fountain-head of the disease. This organ is known to play a prominent part in the formation of urea, and it is a significant fact that uric acid and the urates are in excess in the body in rheumatic conditions, brought about by the use of too much albuminous food.

Perkins, in his work on rheumatism, makes Chelidonium a prominent remedy in the cure of this disease. The pains are of a sticking character, and involve most prominently the

lower part of the leg and the ankle.

Case —, Mrs. —, age 55, is very corpulent, weighing over two hundred pounds. For the last ten years she has been subject to sciatic rheumatism of the right side. A tearing and sticking pain would begin in the back and gluteal muscles, in a few days affect the hip joint and thigh, extend-

ing down into the ankle and foot.

When I was called to see her she had been suffering for ten months, most of which time she was treated by a prominent homeopathic physician of Denver with but little benefit. An old-school physician was next called, who attended her for some weeks, but under his treatment she steadily grew worse. His main reliance was *Morphine*, of which she took freely for the terrible paroxysms of pain which came on in the afternoon and evening of each day and extended into the middle of the night. For many weeks she had been taking from a half to a grain of the opiate, in broken doses, daily. During the repeated attacks of former years she had found relief in this same way, until she had come to believe that nothing else but the opiate would bring relief.

During these paroxysms of pain the outer ankle and lower leg would become cyanotic, with considerable tumefaction around the ankle and some constriction above it. They would last an hour or more, during which she could not bear to move

or have the ankle touched.

Coperthwaite, in his materia medica, gives these symptoms: "The least touch anywhere is exceedingly painful. Rheumatism worse in the lower limbs, especially in the right tarsotibial articulation." She was very nervous during these spells of aggravation and unable to endure any measure of excitement.

The case was an unusual one. Other parts of the body were normal. The kidneys and bowels were acting well and there was but little elevation of the temperature, and the

homeopathic remedy was not apparent.

Cimicifuga and Rhus tox, during the first forty-eight hours, brought no relief, and I gave Chelidonium 1x, although she did not present the most common characteristics of that drug. There was no pain under the right shoulder blade, and the circulation of the portal vein seemed good. There was, however, a slight icterus. I gave the remedy mainly because of

my previous experience with it in a similar case.

In three days there was great improvement, and in five days she was able to lessen the dose of the anodyne. In four days more the pain was nearly gone, but she had become so addicted to the use of the opiate that I left her Avena sativa, five drops to be taken every three or four hours. This enabled her to lessen the amount of the Morphine, and in fourteen days from the first use of the Chelidonium she was able to go to her country home. Two weeks later she was reported as still improving and nearly well.

The unusual symptom, and one not mentioned in the text-

books, was the aggravation during the latter part of the day and extending some hours into the night. For an hour or two during this aggravation the pains would be paroxysmal, and so severe as to be almost unbearable.—W. A. Burn (Denver Journal of Homeopathy).

NOTIFICATIONS.

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

REMOVALS.

Dr. J. Cavendish Molson has removed from Wimbledon, and opened consulting-rooms at 54, Brook Street, W. His hours are from 11 till 2 daily. His country address is East View, Woking.

Dr. Stanley Rendall, Aix-les-Bains and Mentone.—Dr. Stanley Rendall now resides during the winter at Les Palmiers, Mentone and during the summer (from May 15th) at Hôtel Thermal, Aix-les-Bains.

GENERAL CORRESPONDENCE.

MIND, MATTER, AND THE VITAL FORCE.

To the Editor of The Homeopathic World.

SIR,—As you appear to doubt some of the conclusions in Dr. Dudgeon's most interesting letter, I wonder whether you will allow me to call one or two of his remarks in question? Dr. Dudgeon first says that "mind is the product of the vitality of the brain"; immediately afterwards he appears to say it is the product of the brain; and a few lines further on he says plainly, "matter produces mind." Is there any possible proof that matter produces either mind or vitality—i.e., in the first instance? The Student's Encyclopedia (1883) says: "Recent biological speculations have tended to connect life with protoplasm, as a property of that substance: this idea is very far removed from demonstration; and, so long as chemical and physical forces of themselves fail to produce life or vital action, so long must the biologist reasonably regard life as an inde-

pendent force or principle, which invests matter, but is yet not of it." And again, under the word "Protoplasm": "We are obliged to postulate the existence of a new force, in accounting for the actions and development of living matter; and this force we term vital force or life."

Dr. Dudgeon quotes with approval the statement that "mind and matter can never be dissociated"; yet even Socrates believed in the continued existence of the soul. I presume Dr. Dudgeon would not for a moment say he was wrong in his belief; but that, during this life, mind cannot act excepting by means of matter, viz., the brain, as its instrument, with which it is indissolubly associated.

Your learned correspondent asks whether the vital force is the cause or the product of organisation, adding that it cannot be both. But why—may I ask with all deference—must it be either? The blacksmith's arm is neither the cause nor the product of his will, although the two things are as intimately associated as the material organism and the vital force.

The origin of life being admittedly—at least up to the present time—beyond the domain of science, may we not learn a good deal from the simple fact revealed to us, that "the breath of life" came originally from the Author of Life? Although the words appear to refer to the spiritual life, yet I suppose that, in the present state of existence, the spiritual, mental, and bodily life are inseparable; and just as free-will is an attribute of the spirit, so vital force appears to be an attribute—surely not of matter, but—of the immaterial part of man's being. This seems clear from the fact that it is as impossible to add life to, or obtain life from, artificial protoplasm as to discover the philosopher's stone of the alchemists.

May I be allowed to suggest that the special abode of lost spirits is Gehenna; though I presume we shall all take a certain amount of spiritual vital force with us when our summons comes to rest in Hades. May that, to all readers of the H. W., be synonymous with Paradise.

Professor Gates tells us, on p. 66, he has "observed that animals specially trained show a large increase of brain cells in the part of the brain corresponding to the function exercised"; yet Dr. Andrew Wilson says emphatically that the brain cells do not increase in number, as the result of education; but that the cell processes and ramifications connecting the brain cells increase greatly both in size and number, of which fact, in the course of his Gilchrist Lecture on Brain and Nerve, he gives ocular demonstration by means of highly magnified photographs of the brain cells and processes.

Sir, yours very respectfully,

FERRUM.

VARIETIES.

Kali Phos. is valuable in suppurative otitis.—Med. Visitor.

Gelsem.—Thinks some one else is sick; not himself.—Med. Visitor. Cactus.—Diaphragmitis, with great difficulty of breathing. Cactus. -Med. Visitor.

Petroleum.—Patient imagines another person sick in the same bed (verified).— $Med.\ Visitor.$

IRIS.—Deficient appetite. Will promote secretions and aid digestion better than Pepsin.—Med. Visitor.

Baptisia 12 has been used successfully by Dr. Scherzer for convulsive contraction of the esophagus and cardiac orifice.—Med. Visitor. ANTIMON. CRUD. is a grand remedy for rheumatism in the feet,

when the soles are so sensitive that patient can hardly step on them. -Med. Visitor.

STAPHISAGRIA IN CONSTIPATION.—Dr. Oehme finds Staphisagria, two drops night and morning, of immediate and lasting benefit in many cases of constipation.—Med. Visitor.

Salicylic Acid.—Dyspepsia; stomach frightfully distended from putrefactive fermentation, characterised by sour stomach, belching

hot, sour substances. Salicylic Acid 2x.—Med. Visitor.

Badiaga.—Hering says that this remedy is useful in the complaints of adults who had manifestations of scrofula in their youth. Russia it has a reputation for the cure of piles.—Med. Visitor.

SANGUINARIA NIT.—Chronic bronchitis, with nasal catarrh and chronic laryngitis, voice altered—deep, hoarse; severe pressure from behind the sternum. Nitrate of Sanguinaria.—Med. Visitor.

Apis.—The general notion seems to be that the toxic agent in beevirus is Formic Acid. M. Lauger seems to have disproved this hypothesis, and to have isolated a definite active principle (L'Art)Médical, July).-J. B. H. S.

Arnica for Cough.—Dr. Cate finds Arnica of great service in violent spasmodic cough, attended with herpes of the face. neuralgias that have their origin in disturbance of the par vagum,

Arnica is an important remedy.—Med. Visitor.

EUPHRASIA.—A girl, aged 6, with prolapsus ani after dysentery, was treated for nine months without relief. On account of a characteristic attack of coryza, Euphrasia 30 was given every three hours. On the occurrence of a painless diarrhea on the fifth day the prolapsus disappeared. During the whole time the child could not sit down, corresponding to the symptom of Euphrasia—"pressure down in the anus when sitting " (Bruckner, Schweitzer Volksarzt., xxiii., 1896).—J. B. H. S.

ATROPINE.—Dr. von Bakody relates two autopsies performed by him on subjects of Atropine poisoning. (In both subjects this arose from the persistent instillation of the drug into the eye during four to five weeks. They died with delirium and convulsions.) In either case he found a lobular pneumonia present—caused, as he thinks, by the paralytic condition of the vessels of the lungs induced by its action on the vaso-motor nerves. The phenomena were identical with those of catarrhal pneumonia (Journal Belge d'Homeopathie. May-June, p. 157).—J. B. H. S.

TEREBINTHINA.—" A gentleman of very dark complexion informed me that whenever he came in contact with turpentine he experienced the following effects: (1) Frequent desire to urinate, but must wait some time before urine will pass. (2) Sometimes when the urine is half-voided it suddenly stops, and in a few moments starts again; it is then accompanied by a burning pain from glans-penis back to perineum. (3) Occasionally urine can be passed only during stool" (Hom. Physician, June).—J. B. H. S.

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MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Abbotts (W.). Stammering, Stuttering, and other Speech Affections: Their Causes and Cure. 9th ed. Cr. 8vo, 8d., pp. 59. (Savoy Press. 1s.) Bayley (Thomas). A Pocket-Book for

Pharmacists, Medical Practitioners, Students, &c., &c. Obl. 32mo, Roan.

(Spon. Red, 3s.)

Beevor (Charles E.). Diseases of the Nervous System. A Handbook for Students and Practitioners. With Illustrations. Cr. 8vo, pp. 448. (H.

Illustrations. Cr. 8vo, pp. 448. (H. K. Lewis. 10s. 6d.)

Billroth (Dr. H.). The Care of the Sick at Home and in the Hospital. A Handbook for Families and for Nurses. Translated by Special Authority of the Author, by J. Bentall Endean. With Portrait and 52 Illustrations. 5th ed., rev. and enl. Cr. 8vo, pp. 333. (Low. 2s. 6d.)

Campbell (Harry). Respiratory Exercises in the Treatment of Disease, Notably of the Heart, Lungs, Nervous and Digestive Systems. 8vo, pp. 20s. (Ballilère. 7s. 6d.)

Cantlie (James). Report on the Conditions under which Leprosy Occurs in China, Indo-China, Malaga, &c., Compiled chiefly during 1894. Cr. 8vo, sd. (Macmillan. Net, 3s. 6d.)

Dictionary of Diseases (The), with Practical Treatment. By a Member of the London Royal College of Physicians. 8vo, pp. 192. (Central Publishing Co. 3s. 6d.) K. Lewis. 10s. 6d.) 1roth (Dr. H.). The Care of the Sick

Dowse (Thomas Stretch). Mechano-Therapy and Resistance, Movements in the Treatment of Heart Disease. 8vo, limp, pp. 38. (Simpkin. Net,

Gardner's Household Medicine and Sick-Room Guide. A Description of the Means of Preserving Health and the Treatment of Diseases, Injuries, and Emergencies. 13th ed. Injuries, and Emergencies. 13th ed.
Revised and Expressly Adapted for
the Use of Families, Missionaries,
and Colonists. By W. H. C. Staveley.
With numerous Illustrations. Svo,
pp. xii-511. (Smith Elder. 8s.)
Gemmel (James F.). Idiopathic Ulcerative Colitis, Dysentery. (4to,

12s. 6d.)

12s. 6d.)
Gersuny (Dr. Robert) Doctor and Patient: Hints to both. Translated with the permission of the Author, by A. S. Levetus, with a preface by Dr. J. Leech. Cr. 8vo, pp. 79. J. Wright, Bristol. (Simpkin. Net, 2s.)
Hale (Dr. E. M.). Saw Palmetto and its Therapeutic Application. Fcap. 8vo, pp. 95. (Homeopathic Publishing Co. Net, 3s.)
Hemmeter (J. C.) Diseases of the Stomach. The Special Pathology, &c. In 3 pts. 8vo. (Hirschfeld. Net, 30s.)

&c. In Net, 30s.)

Transactions of the Obstetrical Society of London. Vol. 309, 1897. Edited by W. R. Dakin and Percy Boulton. 8vo. (Longmans. 25s.)

TO CONTRIBUTORS AND CORRESPONDENTS.

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

Letters to the Editor requiring personal reply should be accomstamped panied by directed

envelope.

All advertisements and business communications to be sent to the "MANAGER" of the Homeopathic Publishing Company, 12, Warwick Lane, Paternoster Row, London, E.C.

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

CORRESPONDENTS.

Communications received from Prof. Elmer Gates, Chevy Chase, Maryland, U.S.A.; Dr. R. B. Leach, Minneapolis, U.S.A.; Dr. T. S. Hoyne, Chicago; Mrs. Drew, London; Dr. Tessier, Paris; Dr. Cooper, London; "Ferrum"; Mr. Fredk. Kopp, Greenwich, N.S.W.; Birkenhead; Dr. Dr. Proctor, Gurnee Fellows, Chicago; Dr. Stanley Rendall, Mentone; Mr. Browne, Launceston, Stvant Tasmania.

BOOKS AND JOURNALS RECEIVED.

Hom. Review. - Allg. Hom. Zeit. — L'Art Médical. — Rev. Hom. Française.—Hahn. Advocate.—Chemist and Druggist.— Zoophilist. —Animal's Friend.— Gaz. Méd. de Paris.—Archiv. f. Hom. — H. Maandblad. — La Homeopatia.—Minn. Hom. Mag. —H. Envoy. — N. A. J. of H.— Hom. Phys. — Il Secolo Om.—

Amer. Medical Monthly. — Pub. Health Journal.—Med. Century. -Amer. Hom. - Bromley and District Times. — Med. Monat. f. H. - Healthy Life. - Hahne-Monthly. — Revista mannian Homeopatica.—Clinique.— Hom. News.—Vaccination Inquirer.— H. Recorder. — Journal Belge d'Hom.—Indian Hom. Review. -Critique. — H. Tidsskrift. -L'Omeopatia in Italia. — Med. Times. - Star Argus. — Med. Lore.—H. Monatsblätter.—Pharmacopée Homœopathique Fran-By MM. Ecalle, Delpech, and Peuvrier.-Medical Annual, 1898.—Annual Report Hahnemann Convalescent Home and Dispensary, Bournemouth. -Annual Report Phillips morial Homeopathic Hospital and Dispensary. — Doctor and By Robt. Gersung. Patient.

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The Homeopathic Directory, 1898.

Indigestion.
Saw Palmetto.
The Homeopathic Journal of Surgery and Gynecology.

Two Cases of Poisoning with Carline Thistle.

OBITUARY:

Dr. Gallavardin.

GENERAL CORRESPONDENCE.

MEDICAL AND SURGICAL WORKS.

TO CONTRIBUTORS AND CORRESPON-DENTS.

HOMEOPATHIC WORLD.

MAY 2, 1898.

THE ANNUAL CONGRESS.

WE wish to call attention to the circular by Dr. DYCE BROWN, which we publish elsewhere, announcing the date and place of meeting, with other details, of the next Homeopathic Congress. The meeting is to take place earlier than usual this year—on Friday, June 3rd, at the London Homeopathic Hospital, Great Ormond Street, W.C. When the Congress meets in London there is generally a goodly gathering, and we trust that this year will prove no exception to the rule.

The Annual Congress of Homeopathic Practitioners in Great Britain and Ireland is the most representative body of our section of the medical profession in the country. It is open to all homeopaths who possess registrable qualifications, and is entirely independent of membership of the British Homeopathic Society. We believe this is not always understood as clearly as it ought to be either at home or abroad. The British Homeopathic Society is often regarded, especially by our brethren over the water, as representing the corporate sentiment of British Homeopathy. We doubt very much whether any such corporate sentiment actually exists. It would rather seem that every homeopath claims the British privilege of thinking as he likes, and thinking it differently from everybody else. In any case the British Homeopathic Society (which has some of the characters of an exclusive club) cannot be regarded as its mouthpiece. It is only a

section of the homeopathic body, though it is undoubtedly the most important society within it.

The Annual Congress as an institution has an advantage over the Society in that it includes both those who are members of the Society and those who are not. And by reason of its universality and independence it is deserving of general support. The Congress only exists from yearly meeting to yearly meeting, but for many years it has discharged a most useful function. It has been the means of bringing homeopathy before the public in a series of weighty and sometimes brilliant presidential addresses, and when held in provincial towns it has been the means of giving local colleagues substantial help. From every point of view the Annual Congress is well worthy of patriotic support, and as such we commend it to our readers.

As the Congress comes so close upon the time when our next issue is due, we may be able to give our readers some account of the papers and proceedings. In that event we shall not, of course, be able to get the issue out to date; but our readers will understand the reason of the delay should they not receive their copies in good time.

Hepar in Pruritus Mercurialis.—A gentleman, aged 60, who had been repeatedly treated for chronic cutaneous affections, for which Sepia, Kali-carb., and Sulphur were of use, consulted me on January 2nd by letter, on account of intolerable itching of the skin; Sepia 3 and Apis 3 were given without benefit. He presented himself on the 12th and the following history was obtained: Fifteen years ago he had taken Calomel for relief of constipation, with the result that he developed the same symptoms as he now complained of, viz., loosening of the teeth, salivation, the whole buccal mucous membrane red and tender; the heat of bed made the itching intolerable, and often drove him out of bed. Prescribed Merc. 200. The first night after this he slept quietly, no itching; next night he had some itching for twenty minutes, thereafter the discomfort quite ceased. On the 26th he complained of itching on the thigh, not very violent, and disappearing in bed. Hepar-sulph. 30, a dose once a day, completely removed the itching, but the skin of the whole body desquamated, even that on the soles of the feet; a corn exfoliated with its root (Kunkel, Arch. f. Hom., vi. 118).—J. B. H. S.

NEWS AND NOTES.

THE HUMANITARIAN LEAGUE.

THE Humanitarian League has just issued its seventh annual report, which shows a steady increase in membership and activity, the work done during 1897 having largely surpassed that of any previous year, while the four special departments of the League, which deal with criminal law and prison reform, sports, humane diet and dress, and lantern lectures for children, have an equally full record. A tribute is paid in the report to the assistance given to humane principles by the Press. The League has lately removed to new offices at 53, Chancery Lane.

PERIWINKLE POISONING.

WE quote below a case reported in the Daily Chronicle of March 29th. We recently saw a patient in the last stage of liver disease whose illness dated from a meal of periwinkles two years previously. The immediate result was the appearance of most intense nettlerash. This was treated vigorously with external remedies by old-school practitioners, with the result that it was at last "driven in," and a slow decline of health followed, accompanying hypertrophy of the liver and repeated attacks of biliary colic. After improving somewhat, the patient unwisely went out one cold day, caught a chill and died in a few days.

The following is an acute case:—

"DEATH FROM EATING PERIWINKLES.

"Last evening Mr. A. B. Hicks concluded, at the St. George's Hall, Wimbledon, an inquiry with reference to the death of Andrew Carlin, four, son of a boiler maker, of 32, Victory Road, Wimbledon, who died on February 23rd. At the opening of the case a month ago the mother stated that the deceased was seized with sickness on the 22nd ult. On the 21st her little girl had bought some farthing packets of coloured sweetstuff' cigarettes,' of which she and the deceased partook. The Coroner now elicited that on the Sunday she had given the deceased some periwinkles purchased of a man in the street. Dr. Womack, of St. Bartholomew's Hospital, deposed to receiving the stomach and portions of the viscera, together with some of the sweets, for purposes of analysis. He was of opinion that the child died from

ptomaine poisoning producing gastro-enteritis, aggravated by a fermentative action set up by the saccharine matter. He attributed the mischief to the periwinkles, which were most improper things to give a child of that age. Without the winkles the deceased's death would not have occurred, as the sweets, though common, would not set up The jury returned a verdict of accidental death from ptomaine poisoning through eating periwinkles, and added that they were satisfied the sweets had nothing to do with it."

NEW MATERIA MEDICAS.

DR. OSCAR HANSEN has completed, and will shortly publish, a Materia Medica of the rare remedies. It will form an appendix to Cowperthwaite's Materia Medica, and will contain an account of the characteristic symptoms and therapeutics of 350 remedies.

Dr. Hansen also wishes us to call attention to a Therapeutic Materia Medica by Dr. Jessen, of Santa Barbara, California, and published by the author at \$3.00, post free. It comprises 216 remedies.

PUBLIC HEALTH OF AUSTRALIA.

WE have received an interesting address, reprinted from the South Australian Register of January, delivered in Sydney by the Hon. Allan Campbell before the Australasian Association for the advancement of Science. of which he is President. The address concluded with the following summing-up:

"I will not weary you further. The contention is sustained that the essential weakness in Australian public health administration is the control of communicable diseases. Our death-rate in some of these diseases is even higher than the death-rate of England, notwithstanding the favourable character of many of our conditions and surroundings. For instance, we are young communities, with preponderating proportions of youthful population; we inhabit a new soil, with spaces for air and settlement unknown in the old countries of Europe; while our climate must be said to be conducive to longevity. There is great need for amendment in the control of these active diseases. We undoubtedly make the mistake of following England in her efforts to establish a complete system of local self-government. I am not opposed to local self-government as a working principle, but I none the less regard the inclusion of the administration of infectious diseases as outside its sphere. The light which science has thrown upon public hygiene is comparatively recent; the principle of local self-government in England is very old. Yet in England recently departures have had to be made from the principle, especially in matters of public health. Local self-government covers many things in the management of the common affairs of a community, but it has been clearly shown that it utterly fails to bring about in local authorities in Australia an appreciation of the objects legislation seeks to secure in the control of communicable The State must assume this responsibility. It alone possesses the means of organising the necessary skill, experience, and aptitude required to meet all the contingencies arising in the course of an outbreak of infectious diseases among the public, and further of enforcing the law. The sooner the position is taken so much the sooner will the public see and appreciate the great work that is being done for them. The local health authorities will realise that they are not called upon to undertake responsibilities which many of them have declared to be outside their functions. They will feel under such new conditions that the branches of the public health administration are equitably divided between the State and themselves, and with this condition will they more heartily fulfil the duties appointed to them. In mutual co-operation the two authorities will work together, and they will doubtless succeed in bringing about a condition of the public health of which every sanitarian will be proud. For the starting-point of all this we must rely upon the intelligence, the patriotism, and the earnestness of our legislators. I appeal for a comprehensive consideration of this question—realising that if they once see its urgency, and become roused to the sense of deep responsibility that lies with them to introduce better and more effective legislation, it will speedily come about; and, once accomplished, no service to their country will bring them greater satisfaction, and no labour they could give will reap for the community a handsomer or more permanent reward. One word more. Shortly after this address was written my attention was directed to a speech delivered at the British Medical Congress in Montreal by Dr. Herman Biggs, of New York. I was delighted beyond measure to find that the views expressed in the address now delivered to you had found practical and striking embodiment in the hygienic and sanitary management of that great city of two and a half million inhabitants. Dr. Bigg's speech is an able defence of the position.

PARASITIC HOMEOPATHY.

Dr. Kolbe, of Bad Reinerz, communicates to the allopathic Deutsch. med. Wochenschrift, of January 13th, the following case: A boy, et. 8, was affected with intestinal worms (lumbrici), and for more than a year was subject to violent abdominal pains and frequent attacks of syncope and convulsions. Anthelmintics prescribed by physicians, even in large doses, only expelled single worms. By the advice of a baker his mother administered to him a powder made with a dried lumbricus rubbed up with sugar. This was followed by the

expulsion of two masses almost as large as a child's head, consisting of worms coiled together. The cure was perfect and there was no relapse. The editor remarks, "Quite homeopathic!" Isopathic would, perhaps, be the most suitable term to apply to this treatment, or it may be considered as an illustration of the wisdom of the advice "set a thief to catch a thief," or as an example of the discredited operation of "casting out devils by Beelzebub,"

THE AUTHOR OF THE REPERTORY TO HEMPEL'S MATERIA MEDICA AND THERAPEUTICS.

Our contemporary the Monthly Homeopathic Review has fallen into an error in the obituary notice of the late Dr. Charles Frederick Watts, which appeared in its April issue. It states that he was the author of the repertory to Hempel's Materia Medica and Therapeutics. This is a mistake; the repertory was compiled by William Henry Watts, M.R.C.S., Eng., then (1865) residing at 7, Westbourne Place, Paddington, W. He was at the time assistant Surgeon to the London Homeopathic Hospital. From the 1869 Directory we find that at this date Mr. W. H. Watts had left London and was residing at 57, Montpellier Road, Brighton. We are not aware that he was in any way related to the late Dr. C. F. Watts, whose obituary we published in February.

"THEORIES OF HEALING."

We are getting on. The discovery of homeopathy cannot be postponed long. Professor Behring, of serum fame, has actually referred to homeopathy as among the classic principles of medicine (*British Med. Journ.*, April 9th). Dr. Roux, his brother sero-pathist, recognised homeopathy long ago (see The Homeopathic World, vol. xxx. p. 410).

"Theories of Healing.—Professor Behring, in a recent address (Deut. med. Woch., No. 5, 1898), at the Marburg University, gave an interesting account of the history and development of the etiological and isopathic theories, and of their influence on the thought of the time. Broadly speaking, the etiological theory is concerned with the causes of disease existing outside the body only, whilst the isopathic

theory is chiefly concerned with the means employed for protecting the body from external causes of disease. Professor Behring gave a short history of the earlier theories of healing with the appropriate motto for each. The Hippocratic principle was contained in the words 'aliena alienis,' whilst the opinions of Galen were embodied in the words 'contraria contrariis.' The motto of homeopathy is 'similia similibus,' whilst 'æqualia æqualibus' belongs to isopathy, the most modern development. Professor Behring described the difference between 'old' and 'new' theories by criticising the explanations given by each concerning the action of Quinine in malaria. This drug was used by Sydenham, who was the first to observe the remarkable effect it had on the disease. At one time Quinine was said to 'brace up' the nervous system and thus render the body less 'impressionable' to the action of the malaria poison. In modern times attention has been solely directed to the hæmatozoon in the blood corpuscle, whose vitality is more or less affected by Quinine. Lister is called the pioneer of the etiological theory. The fact that wounds will heal of their own accord if allowed rest and cleanliness was one of the most startling revelations of modern times. The action of antitoxin and serumtherapeutics in general formed the chief part of the address, which contained a summary of the work done by the authorities such as Pasteur, Koch, Ehrlich, Wernicke, Pfeiffer, and others."

HYPERTRICHOSIS TREATED BY ELECTROLYSIS.

Brocq summarises the results of this in 110 cases on which he has operated (Ann. de Dermat. et de Syph., Paris, August to November, 1897). The battery used was one of Gaiffe's, or other capable of giving unipolar electrolysis of two to five milliampères. He employs a mercury bisulphate battery. The needle-holder is connected with the negative pole. The needle is of platino-iridium, very thin, an inch long, and bent at an angle of 45° a quarter of an inch from its point; this facilitates its use. Before undertaking the treatment where there are many hairs the advantages and drawbacks should be explained, and experiment made on a few hairs to ascertain the current necessary and the mode of cicatrisation. A commencement is made with feeble currents, half a milliampère, increasing it rapidly until a suitable intensity is reached. The part to be operated on is steadily supported. The patient should herself control the current. The positive electrode is placed on a thick towel on the patient's knees, resting on silk, to ensure insulation.

After the needle has been introduced into the follicle, she should grasp the positive electrode firmly but gradually, first with one finger then with the whole hand, in proportion to the intensity required. Hardaway inserts the positive electrode in a small basin of water and establishes the connection by the patient inserting one,

two, or more fingers in it as may be required.

When Brocq considers the hair sufficiently acted upon he desires the patient to let go the electrode; thus there is no shock, the needle is then withdrawn. Some preliminary instruction is needed for this, but as pain is diminished it is soon learnt.

To determine the approximate depth of a follicle a hair should be extracted and measured against the needle. For downy hairs currents of one or two milliampères suffice; larger hairs require more. Different individuals

and different regions react variously.

With regard to time of passage of the current, if the hairs be coarse and in positions where a small white scar is unimportant, it may be allowed to go on till a brown circle forms round the needle, ten or fifteen seconds after froth has appeared; if on visible parts where scarring is undesirable, until a yellowish brown halo shows itself: with downy hairs five to fifteen seconds may be enough. The action seems to go on after the needle has been withdrawn, for the alkali set free by the electrode continues to exert its caustic action, so it is best to wait some minutes before exercising traction on the hair or to wait till the end of the sitting. If any then resist, the patient should be instructed to remove them herself in the evening. Subsequent to operation the skin swells, may blister and be indurated, but if care has been taken all these If the hairs are larger a minute white spot remains, perhaps permanently. There is as yet no satisfactory method of obtaining cutaneous anesthesia during operation. Accidents are rare; if hairs in too close proximity are removed at the same time a depressed scar may result. Sometimes keloid results in certain individuals.

After operating the parts should be sopped twice or three times daily with camphorated spirit.

DRY HOT AIR IN TREATMENT OF JOINT AFFECTIONS.

H. C. Wood (Journ. Amer. Med. Assoc., July 31, 1897), in an article on the treatment of gout, records that,

having used the Tallerman-Sheffield apparatus and having given it an extensive trial, dry hot air will not cure the gouty diathesis, and it is of very little value in lessening the chronic gouty inflammation of joints. It was not effective in rheumatoid arthritis nor in chronic joint rheumatism.

The results were often rapid and good in the cases of deposits in the tendons and outside the joints and in traumatic synovitis. In subacute rheumatism it is of value by producing sweating and apparently by a local influence on the joint.

INOCULATION OF INFANTS AGAINST DIPHTHERIA.

RIETHER, being troubled with much diphtheria in a foundling hospital with which he is connected, inoculated all children with 100 units of Paltauf's diphtheritic antitoxin as a prophylactic against the disease, with the result that out of 1,450 children so treated only two developed diphtheria, and in one of these the onset was six weeks after administration. In the two years previous to the adoption of this treatment no less than thirty-one cases of diphtheria had occurred, whilst in the second year of its adoption not a case was recorded.

The author maintains from this that 100 units of antitoxin may be safely injected into the youngest infant, and it is sufficient to give the child immunity for five or six

weeks.—Wien. klin. Wchnschr., No. 28, 189.

Jaborandi, besides Nux. and Pulsat., produces, and therefore cures, semi-lateral sweatings. Left half of body covered with a cold perspiration.—Med. Visitor.

Capsicum in Delirium Tremens.—In the Minnesota Homeopathic Magazine Dr. R. D. Matchan reports excellent results obtained from the use of capsicum in cases of incipient delirium tremens. The dose is one drachm of the tincture to four ounces of milk, repeated every two or three hours until the patient becomes quiet and inclined to sleep. He says: "I have not prescribed a dose of bromide or chloral or any other anodyne for incipient delirium tremens since 1889. Tincture of capsicum in one-drachm doses administered in milk is far superior. Don't use less than one drachm at a dose; give more rather than less; the more serious the nervous state the larger the dose required. Try it. I don't think it will fail you."—New England Medical Gazette.

ORIGINAL COMMUNICATIONS.

LAPSANA COMMUNIS, OR NIPPLE-WORT. NAT. ORDER COMPOSITÆ: A COMMON GARDEN WEED—A REMEDY FOR PILES.

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

A MS., of which the following is a copy, has been placed in my hands, and I consider it of sufficient interest to justify publication, referring as it does to the cure of piles by a remedy of which little is known. I am in no way responsible for the statements made:—

"Take three ounces of the nipple-wort plant (if green), four ounces (if dry), and boil in three pints of thin water-gruel till it is reduced to three half-pints. Strain the decoction and drink half a pint for the three mornings

following—fasting.

"Lapsana, or nipple-wort, is an annual, blossoming in June and July—a weed found in most gardens. It may be had at all times of the year (dry) at the herbalists' [Butler & McCullock (?)—R.T.C.], in Covent Garden, where it has long been sold for the cure of sore nipples. Lord P., a copy of whose letter I (W. J. B.) enclose, had the information, I believe, from Colonel Hawker, of sporting celebrity, and he from an old Highland woman, if I remember rightly. The man to whom he addressed his letter is between seventy and eighty years old, and had been a martyr to piles all his life, and was confined to his bed by them. He is now perfectly cured. The clergyman of the parish where the friend who gave me (W.J. B.) the formula resides had despaired of getting rid of a disease that has made his life miserable. He is perfectly cured, and he has cured the whole parish. "W. J. B.

Lord P.'s letter:-

" August 4, 1852.

"Dear Martin,—I am sorry you have been suffering from such a troublesome complaint; you shall never do so again if you will take the enclosed on the first appearance of piles. I have cured many hundreds of people, and my groom, whom I gave the prescription to thirty-five

years since, must have cured thousands in this country and France. I never knew it fail. The late Sir H. D. H., who has been a great sufferer for many years, and had been attended by the best surgeons in London without relief or cure, was in Paris when I called on him, and he told me his complaint and that he had not been free from piles for any length of time for many years. I wrote him the enclosed, which he took, and was well in three or four days, and was never even slightly attacked again. He has not long been dead.

"This took place in 1818.

"A good time since a medical man came here in a chaise and was shown into my visitors' room; he appeared to walk with some difficulty and to be disinclined to take a chair, and after humming and hawing he told me he was a medical man and had suffered much from the piles; that he had taken and done everything that the faculty were acquainted with without relief of consequence. went on to say that somebody told him that I or my groom had a nostrum that for many years had cured the neighbourhood. I immediately gave it to him. He called a short time afterwards to thank me, and said that it had cured him in three or four days. I (Lord P.) never had occasion to take it myself. I suspect it acts by reaction, as he told me he had not swallowed it more than a few minutes when he felt his stomach as warm as if he had drank a glass of hot brandy and water.

"All old women and nurses know nipple-wort; it is what they bathe the nipples with when suckling when

the child bites the nipples and makes the skin sore.

"Remember, the nipple-wort must be drunk on an empty stomach the first thing on getting out of bed in the morning. My gardener always keeps it, and it is better to be cut green.

"Very truly yours,

The above is a complete copy of this very interesting MS., with a few trivial corrections in the sentences.

It is interesting as being a statement of a definite fact that the *Lapsana* was held in great repute at one time as remedial in cases of obstinate piles. It is significant that but three doses are ordered, and that if not then well the sufferer is advised to wait a fortnight. In

this there is much wisdom; if it be such a powerful curative, the time to look for improvement will be towards

the end of the fortnight.

The disease will then have rested from the powerful stimulation of the doses, and rest from stimulation is a necessity in cases of long-standing disease. That the Lapsana will act in single dose and in much smaller quantity I have no manner of doubt, but whether a "whole parish" would submit to be cured so simply I have the greatest possible doubt.

30A, George Street, Hanover Square, W.

April, 1898.

PHYSIOLOGY OR PHILOSOPHY?

By R. E. DUDGEON, M.D.

DR. PROCTOR tells me I have failed "to reach the gist of Dr. Gates's argument" because "his treatment of his subject is evidently not physiological but philosophical." As Dr. Gates discourses of cells and protoplasm and metabolism and other such physiological structures and processes, I naturally thought his treatment of his subject was physiological. Had I known it was philosophical I would have left it severely alone, for I am not a philosopher—quite the contrary. It would have saved me some trouble if Dr. Gates had followed the laudable example of his illustrious compatriot, Artemus Ward, who, in order to prevent his reader taking him too seriously, would add parenthetically: "this is meant sarcastic." Had Dr. Gates only indicated that his argument was to be taken philosophically or metaphysically and not physiologically, I would have given it a wide berth, as it is well known what strange unphysiological ideas philosophy has put forward respecting the human organisation and its functions. The common language of to-day still retains the impress of those philosophical ideas. Thus we talk of high spirits and low spirits; we still locate certain mental qualities, passions and emotions in certain organs, sadness in the liver, when we call it melancholy, i.e., when its bile is black. Shakespeare says, "cowards . . . have livers white as milk," and he makes Macbeth call the affrighted reporter of the

enemy's approach "a lily-livered boy." We talk of the spleen and splenetic when we mean ill-humour or fretful-This organ used also to be credited with the production of mirthfulness, "their over-merry spleen" is a Shakespearean phrase. To the reins or kidneys King David seems to have ascribed certain mental qualities. but what they were exactly I cannot make out. The bowels were and still occasionally are credited with being the seat of compassion. The heart is in daily use to represent love, courage, gratitude, and other noble mental "I thank you from the bottom of my heart" is the stereotyped phrase to express gratitude for favours or applause. It is a bit too precise to be satisfactory, for it is not very clear where the bottom of the heart is. The lowest part of the heart, which ought by position to be the bottom, is unfortunately the apex, which means the top, unless we take it that the heart is like an inverted pyramid, where the top is the bottom and vice versâ. Perhaps it should be understood figuratively, like the expression "bottom dollar" of our American cousins. Nowadays we all hold that the brain is the seat of the mental qualities—as we show by our expressions, longheaded, lots of brains, applied to intelligent persons, and numskull, thick-headed, addle-pated, &c., applied to fools—so, when we credit other organs with these qualities, we should say or imply that we mean the expression to be taken figuratively, or metaphorically, or philosophically, or metaphysically, or anything but physiologically. Being ignorant that Dr. Gates was discoursing in this vein, I looked on his "mentation" as a revival of the old vital principle under a new name. That "life is mind," as Dr. Gates asserts, cannot be admitted, for life is the manifestation of the vitality or irritability when acted on by its stimuli normal or abnormal, which are entirely different from the stimuli of the mind, which are sensations conveyed through the organs of sense, viz., touch, taste, sight, hearing, smell (for we need not now consider innate ideas), and the manifestations of the mind when acted on by its stimuli are consciousness, thought, memory, passions and emotions.

That life can exist independently of the mind is evident in the case of idiots, acephalous monsters, and comatose conditions. No doubt Dr. Proctor will say

that all I have said is known "to every first year's student," still the knowledge does not seem to prevent students of maturer growth from holding views which may be very philosophical, but which seem to me to be opposed to physiological facts. Dr. Proctor says: "He [i.e., I] ought to have no difficulty about a material organism secreting or creating a spiritual vital force, seeing he has already told us that brain matter produces mind—a somewhat spiritualised product so far as our experience goes." I suspect this is an unconscious illustration of the "Tyranny of Words" that forms the subject of the excellent article in the January number of this periodical. I should like very much that Dr. Proctor would show us from his experience what a spiritualised product is, and how the mind can be so regarded. As the mind is a property of a certain kind of organised matter, perhaps he will explain how a property of matter can be a spirit, or a "spiritual product" if he prefers that term. Possibly the French word esprit, signifying (among other things) spirit, mind, intellect, understanding, wit, may have influenced him in his conception of the nature of mind.

Dr. Proctor speaks of my "theory of the vital force"; but, as I deny the existence of a vital force or principle, I cannot see how I have a theory of it, nor how I can "hold to the idea that it is correlated to the other forces of the world." Vitality is not a force, but is a property of a peculiarly organised matter which, like all other matter, may certainly be acted on by the forces of nature, but whose property of vitality is not correlated to them. Of course the protoplasmic idea is a theory, insusceptible of proof, but it is a good working theory, and is applicable to all the phenomena of life, which the

theory of a vital principle is not.

My critic who writes under the pseudonym of "Ferrum" seems to hold that the life is the soul. But life is mortal, and the soul is generally held to be immortal. Physiology has nothing to do with immortal things, and knows nothing about the soul, which belongs to the domain of philosophy or faith with which physiology has no concern. He talks about protoplasm being made artificially, but that is impossible; only protoplasm can make protoplasm. Omne vivum a vivo. Protoplasm is a peculiar organisation whose chief and characteristic property is vitality.

Its action is vital or metabolic, but not chemical. When protoplasm dies it ceases to be protoplasm and becomes merely a chemical compound subject to chemical influences and performing chemical actions, which was not the case when it was alive, *i.e.*, when it was protoplasm. But I must now stop, or Dr. Proctor will be shocked to think that I can only repeat what "every first year's student is taught in every text-book."

A FUNCTION OF THE TONSILS: THE POLICY OR UNPOLICY OF EXCISION.

By C. E. WADDINGTON, M.R.C.S. ENG., L.R.C.P. LOND.

[Dr. Waddington has given me permission to publish his letter relating an observation of no small importance bearing on the present fashion of whipping out the tonsils whenever they appear to be somewhat larger than normal.—J. H. C.]

"DEAR DR. CLARKE,—I had a most interesting case yesterday bearing on your theory of the filter-like function

of glandular structures.*

"A girl (18) came to consult me, and the history was that two years ago she was operated on for adenoids and nasal stenosis. The right tonsil was excised, but the left was not operated upon. I found all her nasal and pharyngeal troubles had returned, and on examining the throat the right tonsil was non est, and the left hypertrophied, nearly filling the opening of the pharynx. But here comes the point of interest: The right side of the neck was full of strumous glands in every stage of disease, but the left side was quite free from enlarged glands. This is so striking I thought you might be interested.

"Yours very sincerely,
"Chas. E. Waddington.

"2, Marlboro Road, Manningham, Bradford. "March 22, 1898."

^{*} See Glands and Bones, by J. H. Clarke, M.D. (James Epps & Co.), chap. ii.

MATERIA MEDICA MISCELLANY.

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

Phytolacca in Rheumatic Pains.—Pains simulating rheumatism and gout are often of a *Phytolacca* type. does not make any difference if the trouble is of a psoric. or syphilitic origin. The pains may be located in almost any tissue. It has cured rheumatism of the scalp, arms, chest, back, and lower extremities involving the muscles, periosteum, and nerves. The character of the pain is dull, drawing, aching, and at times lancinating. The pains have a tendency to change from place to place, or else alternate in severity with some other complaint of the patient. The rheumatism is worse at night, from warmth of bed, in damp weather, from motion, pressure, and usually from applied heat. If we study this description carefully we shall see that Phytolacca different from all other remedies. The most similar remedies in this connection, however, are Staphisagria and Mercurius. In Mercurius there is no tendency for wandering pains, and there is profuse sweat without relief. This is different from *Phytolacca*. In *Staphisagria* there is a tendency for the disposition to be cold-blooded, in Phytolacca to be hot-blooded—that is, one can endure the heat better than the cold and the other the cold better than the heat. In Phytolacca rheumatism there is apt to be present some other trouble, as enlarged glands or catarrh of the throat.—Prof. Clinton Enos in Critique.

Rhus in Pemphigus.—A boy, æt. 15, had for four years suffered from an eruption that continued to spread over his body. It began with blisters of various sizes, at first filled with clear serum, which grew turbid; then the blisters burst, became covered with scabs, spread over the surface, secreting much fluid, and causing burning and itching. The whole scalp, abdomen, lower portion of the chest, portions of the lower extremities and back, were covered with a moist, corroding eruption; large portions of the surface were entirely covered with it. He had hitherto been under old-school treatment, and had had Arsenic and various unguents, but the eruption had continued to spread. He received Rhus Tox. 30, five globules twice a day, from the first of July to the end of August, by which time he was quite cured, and had no

relapse.—Allg. Hom. Zeitg.

Arsenicum Iodatum in Cancer.—The following case is reported by Dr. Kruska, of Eisenbach: Mrs. C., æt. 48, came under treatment April 15, 1890. Previous to this the left breast had been removed for cancer. The wounds from the operation were still suppurating, and there were cancerous tumours far advanced in the right mamma, and countless nodules in the skin, varying in size from peas to lentils. For the last half-year there had been vomiting daily whenever she took nourishment, and neither of her previous allopathic physicians had been able to remove it. Dr. Kruska gave first Ant. T. and after three powders the vomiting ceased. She then received Ars. Iod. 6x, and though she seemed to be on the point of dying she visibly improved. Her appetite returned, her strength increased, and in a few months she was able to resume her domestic duties, and could walk a considerable distance without trouble. Early the following year, he adds, the tumour in the right breast had not increased but rather diminished, and the nodules in the skin had largely passed away. The diagnosis of cancer was absolutely established by microscopic examination.—P. C. J. H.

Iris in Eczema.—A fat boy, age eighteen months, had for fifteen months an eruption all over the hairy scalp, which is covered with thick, greyish, rather hard crusts, under which the skin is red, shining, and covered with small vesicles or papules. In several spots the growth of the hair is quite destroyed. The ears are raw, and the secretion is so acrid that it irritates the skin; the cheeks are red and scaly; there are some pustules on the back and arms. Iris was given internally, and applied externally in the form of an ointment made by mixing the fresh roots with butter. This cured the disease.— Mossa, A. h. Z., cxxxv. 120. J. B. H. T.

Hyoscyamine in Disseminated Sclerosis.—Dr. Delamater says that Hydrobromate of Hyoscyamine is a good remedy for controlling the tremor in cases of disseminated sclerosis. He uses the 4x made from Merck's Hyoscyamine, and gets results from it which he does not obtain from any other preparations. If too much is used aggravation will follow.—Med. Century, August.

We have in a previous issue referred to its use in the paralysis agitans, in drop doses of a solution gr. i-zi

instilled into the eve.

Borax in Leucorrhea.—A victim of leucorrhea of a year's standing, who had endured a long course of tampons and douches without relief, presented herself to Dr. Wilson A. Smith last spring. It had been diagnosed areolar hyperplasia and ulceration of the cervix. An examination presented a red, inflamed mucous membrane, partly covered with a secretion resembling the white of an egg. She said that it made her sore, and that she was worse just before and after the menstrual flux. It was accompanied with a sensation as of a hot fluid running down the thighs, and she complained of a sticking pain in the clitoris at night. The menses were too soon and too profuse, although she never thought of them as being like a flooding. She was exhausted during the flow.

The guiding symptom in this case was the stitch in the clitoris at night, a characteristic of *Borax*. Upon searching, all the other symptoms were found under this drug, and she was cured with but five powders of the medicine, and, strange as it may appear, was cured to stay cured. Nearly four months have elapsed, and not a single appearance of a discharge except the normal menstrual flow has been noticed since that date.—

Am. H.

CHELIDONIUM AND CANCER.

By R. H. Bellairs, M.A.

Some months ago I was much struck by a report in the Daily Graphic which ran somewhat as follows: "Scientific medicine has not infrequently been glad to accept the services of popular medicine in enlarging its horizon of remedies. A notable example of this has just been recorded in a St. Petersburg medical journal, where a Russian doctor describes the success which has attended the use of wart-wort sap in cancer. As its name implies, this plant has long been used both in Russia and in this country as a popular remedy for warts ('Celandine for corns' is known to the writer as the best 'corn solvent'), but it remained for M. Denisenko to turn it to account in combating cancer. The seven cases cited by this authority are of very great interest and importance, for in every instance, whether the growth was external or internal. it yielded to prolonged treatment in very small doses (!) of a preparation of Chelidonium sap."

Side by side with the above I venture to quote a recent extract dealing with one who died of cancer of the liver, the great Johannes Brahms to wit. The Vienna correspondent of the Standard wrote: "Musical Vienna learned to know and then to admire the compositions of Brahms, and finally to take such personal interest in the middle sized, powerfully built, long bearded, blue-eyed musician—the very type of a North German—that when the first signs of his serious illness appeared last year, and his face turned yellow and then brownish, and his strong frame shrank visibly from month to month, it was the talk of all classes."

Finally, let us look at the provings of Chelid. majus:

"Whites of the eyes dirty yellow."

Face: "Greyish yellow, sallow, sunken yellow, especially of forehead, nose, cheeks."

Tongue: "Coated thickly yellow." Stools: "Bright

yellow."

Skin: "Yellow, yellowish grey." Spare subjects: "Disposed to abdominal plethora."

Who that has seen a true case of cancer has failed to be

struck with the "yellow-grey" complexion?

The above is, to say the least, suggestive of a possible homeopathic cure for the direct of diseases.

SNAKE-VENOM—ITS ACTION AND EFFECT.

Being a reply to arguments advanced by those favouring the Blood-poison Theory.

By Frederick Kopp, Greenwich, N.S.W.

II. THE SNAKE-VENOM EXPERIMENTS IN VICTORIA.

I WILL now, before going any further into the question, deal with those recent very interesting experiments made with snake-venom in the sister colony of Victoria, the result of which, it is claimed by the advocates of the blood-poison theory, has fully proved the correctness of their opinion and the fallacy of mine as to snake-venom being a nerve-poison. At first sight I must admit that their theory does truly appear to be the correct one, but it must be remembered that things are not always what they appear to be at the surface, and I shall, later on,

endeavour to show by scientific facts that cannot be denied, and by infallible proofs, that snake-venom is purely and simply what I have declared it to be for the past twelve years, namely, a depressing nerve-poison. The series of experiments alluded to above took place at the Veterinary College, Brunswick Street, Fitzroy. There were many members of the profession and students present, including Drs. Doolan, Gresswell, Hodgson, Liddle, Miller, Mullen, and T. Ryan, Professor Davies, Mr. Lethall Oldfield (dentist), Messrs. Kendall and Ruddock (veterinary surgeons), and Mr. Price (one of the demonstrators at the University). Professor Davies excited much interest by the fearless manner in which he handled the reptiles made use of in the experiments, and by his assertion that all antidotes hitherto discovered were absolutely useless, and he alone was in possession of the true antidote of snake-venom. In the handling of the snakes Professor Davies showed that a thick woollen stocking is about the best protection against snake-bite that a man can desire, and, to prove this, the Professor, after baring his arm and pulling an ordinary woollen cuff over it, he took a large tiger snake (one of the most venomous members of the reptile world which we possess in the colonies), and let it bite him. The snake bit with a vengeance, and a large number of those present actually saw the snake hang on after biting. The skin, however, was not broken by the fangs, and Professor Davies stated that during all his experiments in this way he had never known the skin to be broken. The Professor next dipped into his box for one of about a dozen tiger snakes.

I will now proceed to give a brief account of how the experiments were carried on, according to the statement of an eye-witness, for whose accuracy I can vouch. First, a mongrel collie of a joyous disposition was brought out—a good healthy dog weighing 36 lbs. The hair was shaved from a spot on its side, and the Professor held one of the biggest of his tiger snakes within reach of it, taking a short hold of the neck, and pricking it on the nose with a pin to excite its anger. The snake simply took hold of the flesh as the dog itself would have done, but while it hung on the pressure of the thumb at the back of the head forced a larger dose of poison through the fang than would have flowed from a natural bite. In less than three minutes the symptoms were apparent.

The dog became drowsy, its hind-quarters collapsed first, and in twelve minutes it was dead. A subsequent postmortem examination showed the left auricle of the heart empty, but the right full of a stringy fibre, the blood being dark in colour, but not clotted—the inference from the examination being that "the blood had been completely disorganised by the heavy dose of poison, and consequently had become unfit to support life." In reference to the result of this examination I shall have something to say further on, when I shall explain the true cause of this complete disorganisation of the blood, and also the manner in which snake-venom causes death. It is all very well to jump at conclusions, but the correctness of every theory must be able to be proved by scientific facts. Without this all argument sinks to the ground. But to proceed. It appears that with the second dog death was very sudden. It was a strongly built dog, suffering from mange, and weighing 34 lbs. After it had been bitten by a rather under-sized tiger snake, about two feet long, the symptoms of the poison were manifested in about five minutes, when Chloride of Lime was injected, but in ten minutes the dog was dead, and apparently died almost painlessly. The third was a little dog of 18 lbs. weight. As soon as this one had been bitten, the wound was excised, and Underwood's Antidote rubbed in on the raw surface, a drachm of the antidote being at the same time given through the mouth. It was ten minutes before any symptoms of poison were apparent. The dog lived a little over an hour after being bitten, though for the last ten minutes the beating of the heart was the only sign of life. A little black dog, weighing 11 lbs., having been bitten, a hypodermic injection of Strychnine was immediately given, and the symptoms of snake-bite were slow in development. In ten minutes the temperature had increased considerably. and ten minutes after it was bitten the Chloride of Lime was also injected. Eighteen minutes after being bitten, and with few premonitory symptoms of snake-poison, the dog stretched itself in a couple of quick spasms and died —it was generally assumed by the medical men present as a consequence of Strychnine poisoning. In this case the dog soon after death became rigid, while with the others there was no sign of rigor mortis—a sure sign of death from snake-bite. The last experiment tried was

with a strongly built field spaniel, 29 lbs. in weight. An ounce of the Chloride of Lime solution was first injected, and ten minutes afterwards the dog was bitten by the last and largest of the tiger snakes Professor Davies had brought with him, which, it was discovered, had only one fang. The head was pressed so hard, however, to discharge every drop from the poison sac, that, on being returned to its box, the snake itself did not seem to feel well. In ten minutes the respiration increased, and there were signs that the poison had taken effect, so another half-ounce of the Chloride of Lime was injected. The dog recovered rapidly, and at the time most of those witnessing the experiments left was apparently all right. Later on it was reported, however, that the dog had died —three hours after having been bitten. This closed the experiments, which Professor Davies is said to intend to continue later on with larger animals, when he proposes to illustrate the virtues of a specific that he declares he has discovered. It has also been stated that the medical authorities at the Melbourne University, who are experimenting with snake-venom, are in hopes of solving the question by making an animal poison-proof with small doses of snake-venom constantly repeated and increased, and then extracting an antidote from the animal's blood, to be injected in cases of snake-bite—briefly, an application of the ordinary process in calf-lymph vaccination. The tiger snakes used in the above experiments were all caught at Pental Island, on the River Murray, which is said to be a favourite spot with these reptiles, and producing, perhaps, more venom to the acre than any other locality in Victoria. Whether Professor Davies and the learned doctors and students who took part in and attended the above experiments are members of the Pasteur Institute I am not aware; but, judging by the manner in which the above programme was carried out from start to finish, they appear to me to be treading remarkably well in the footsteps of that infamous institution, whose claim, Mr. Howard Willoughby, when speaking of the Institute's experiments on animals in the hope of finding an antidote to snake-venom, declared that it "demanded attention." Of the antidote of which Mr. Willoughby spoke so highly at the time I shall have to say more anon, as it (Chloride of Lime) played a very important part in Professor Davies' experiments, more

especially in the last case. In Vol. XXX., No. 355, p. 313, July, 1895, of THE HOMEOPATHIC WORLD, I made use of the following words: "I confess I have but little faith in the experimenting on animals with drugs, as it has been proved over and over again, beyond a shadow of a doubt, that in such experiments it is very often a case of 'one man's meat, another man's poison'—in other words, there are certain drugs which, although capable of producing fatal effects in man, are non-poisonous to certain members of the brute creation." I also drew attention, as a proof of my assertion, to the instance of the non-poisonous influence of Morphia on fowls, mentioned in The Homeopathic World of December, 1894, and gave it as an example of the common fallacy (which in our day is so extensively practised) of taking animals as the basis of the action of drugs on man. I concluded by saying that perhaps, however, a little margin might be left in experimenting with snake-venom, as that poison has been proved to be fatal in its effects both to man and beast. Be that as it may, however, when one judges from the above results, it appears to me that things are looking very gloomy indeed if we are to look for an antidote in any one of those used by Professor Davies in his experiments on the dogs, and one naturally comes to the conclusion that if a person should have the misfortune to be bitten by a tiger snake, it would be just as well for that person to say goodbye to the things of this world, as there appears to be very little consolation or benefit to be derived from the use of any of the antidotes used in the cases of the four members of the canine family bitten by the snakes. If the above is all the result and benefit gained by torturing and destroying poor dumb brutes, the sooner the Society for the Prevention of Cruelty to Animals is empowered to step in and put a stop to this inhuman and brutal business the better. And now a word or two as to the antidotes used in the above experiments.

THE CHLORIDE OF LIME ANTIDOTE.

Dr. Calmette's new antidote appears to have been allotted an important part in the experiments made by Professor Davies. It may not be out of place here to mention the way in which it is recommended by its advocates to be prepared, and the manner in which it is

to be used in cases of snake-bite in human subjects: "Make a solution by thoroughly stirring up one part of Bleaching Powder (Chloride of Lime) with twelve parts of water, straining off the sediment, and then diluting the solution so obtained by adding one hundred and eight more parts of water—in other words, first make a solution of one part of the powder to twelve parts of water, and then dilute the other by adding nine times its volume of water. This diluted solution is to be injected by means of a hypodermic syringe into and round about the bitten part (between which and the heart a ligature is in the first place to be tied very tightly, so as to stop the circulation of the blood and of other fluids from the bitten part, which is also to be freely cut into and around it to a depth of a quarter of an inch or so, and the wounds so made well sucked). Half an ounce of the diluted solution, or 30 drops of the stronger solution (1 in 12), may be thus injected at one time, and be repeated once or twice, or oftener, if the symptoms of snakepoisoning continue. If the symptoms show that the poison has been absorbed into the general system, it is as well also to inject the solution under the skin in some other part than that below the ligature, and similarly to repeat the injections, if the symptoms continue. Remove the ligatures as soon as the injections have been made. Wash the wound with an abundance of the concentrated solution of the Bleaching Powder." The heart's action in the meantime is to be sustained by injecting a feeble dose of Morphia (about one-seventh of a grain) or Caffein, subcutaneously, and it is advised to give also a certain amount of Brandy — for an adult, about one tablespoonful for a dose, and, if thought necessary, to repeat that dose two or three times at intervals of three

Out of the five dogs killed during the experimenting by Professor Davies, the first one had no antidote whatever administered, and died in twelve minutes, symptoms of poisoning from snake-bite first setting in three minutes after receiving the bite. In the case of the second dog Chloride of Lime was injected; the animal died in ten minutes (or two minutes sooner than the dog who received no antidote), the symptoms setting in in five minutes after the infliction of the bite. In the case of the third dog Underwood's Antidote was used. The dog

lived a little over an hour, the symptoms setting in in ten minutes. The fourth dog had Strychnine injected, and then Chloride of Lime; but the animal died in eighteen minutes—as the result of the first-used antidote. there being very few premonitory symptoms of snakepoisoning present. In the fifth and last case the dog had Chloride of Lime injected both before and after being bitten, so that the antidote was already present in the system when the snake-venom was introduced, the antidote having been given a ten minutes' start. Symptoms of snake-poisoning set in in ten minutes, and the animal died in three hours. Dr. Calmette, Professor Halford, and Mr. Howard Willoughby ought to feel highly flattered at the important part played and the position occupied by their new antidote in the above experiments —one subject actually living for three hours after having been bitten, and after receiving an ounce and a half into its system. Perhaps, if another half a pint or so had been injected, the poor brute might have managed to live a few hours longer! But perhaps it was just as well that the unfortunate victim's agony was not prolonged.

(To be continued.)

ANNUAL CONGRESS OF HOMEOPATHIC PRACTITIONERS.

THE following circular has been issued:-

BRITISH HOMEOPATHIC CONGRESS.

President—Dr. Eubulus Williams, Clifton; Vice-President—Dr. T. W. Burwood, Ealing; Hon. Secretary—Dr. Dyce Brown; Hon. Treasurer—Dr. E. M. Madden; Hon. Local Secretary—Mr. C. Knox Shaw; Council—The President, the Vice-President, the Hon. Treasurer, the Hon. Secretary, the Hon. Local Secretary, Dr Hughes, and Dr. A. C. Clifton.

29, SEYMOUR STREET, PORTMAN SQUARE, W., April, 1898.

DEAR SIR,—The Annual Congress of Homeopathic Practitioners will be held this year in London, at the London Homeopathic Hospital, Great Ormond Street, W.C., on Friday, the 3rd of June, at ten o'clock punctually.

The Presidential Address will be delivered by Dr. Eubulus

Williams, of Clifton, at ten o'clock.

Any strangers, ladies as well as gentlemen, who may desire

to hear the President's Address, will be welcome.

After a short interval, to enable the Treasurer to receive the members' subscriptions, Dr. J. H. Clarke, of London, will read a paper on "The Doctrine of Signatures and the Law of Similars."

This will be followed by a discussion.

The members residing in London and suburbs invite the members of Congress to luncheon at the Holborn Restaurant, at one o'clock.

At two o'clock punctually the Congress will re-assemble, and will select the place of meeting for 1899, elect officers, and transact any other business which may be necessary.

Dr. T. W. Burwood, of Ealing, the Vice-President, will then read a paper on "Some Interesting Facts, not strictly medical, having an Important Bearing on Disease and its Treatment."

To be followed by discussion.

The third and last paper will then be read by Mr. Clement J. Wilkinson, of Windsor, on "Associated Symptoms in both Provings and Disease without obvious Pathological Basis."

To be followed by discussion.

Afternoon tea will be provided at the Hospital about

four p.m.

The members of Congress, with their friends, ladies as well as gentlemen, will dine together at the Holborn Restaurant at seven o'clock.

The subscription to the Congress is ten shillings and sixpence. The dinner ticket alone, for quests only, will be

seven shillings and sixpence.

Many of our colleagues residing in London and the suburbs have expressed a desire to receive as guests during the Congress their confreres from the provinces, with their wives, if possible. All, therefore, who are willing to do so are requested to send their names to Mr. C. Knox Shaw (the Hon. Local Secretary), 19, Upper Wimpole Street, W.; and, on the other hand, all who wish to avail themselves of this hospitality are requested to send their names to Mr. Knox Shaw. Gentlemen who thus offer their hospitality will kindly understand that they may invite personally those whom they would wish to have as guests, while otherwise Mr. Knox Shaw will arrange for them. It is thus hoped that no one need go to an hotel unless he prefers to do so.

Should you know of any colleague who has not received

this circular will you kindly let me know.

The enclosed post card is to be filled up and returned to me as early as possible, but not later than May 15th. Of course, if any colleague cannot make his arrangements before this date, the post card would be received up till the day of meeting, but it is earnestly hoped that all will return the post card as early as possible.

> I remain, yours very truly, D. Dyce Brown, Hon. Sec.

PRÉCIS OF PAPERS.

Dr. Clarke's paper, "The Doctrine of Signatures and the Law of Similars." Provings, though the chief, not the only source of indications for the use of drugs.—The doctrine of signatures explained.—Many common uses of drugs traceable to this source.—Confirmation in homeopathic provings.—The field of the law of similars a very wide one.—The limits of utilisable Correspondence not yet ascertained.

Mr. Wilkinson's paper, "Associated Symptoms occurring in both Provings and Disease without obvious Pathological Basis." Associated symptoms.—Examples under Bryonia, Causticum, Colocynth, Hyoscyamus, &c.—Suggested explanations.—The value of such association as an argument to support the law

of similars.

Précis of Dr. Burwood's paper not received.

SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

The seventh meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thursday, April 14, 1898. Dr. R. Hughes took the chair, in the

absence of the president and vice-presidents.

The following specimens were shown: 1. A pedunculated uterine fibroid removed by abdominal hysterectomy, Mr. Knox-Shaw; 2. Vermiform appendix removed for relapsing catarrhal appendicitis, Mr. Knox-Shaw; 3. Vermiform appendix, with contents, removed for relapsing appendicitis,

Mr. Dudley Wright.

The evening was devoted to a discussion on "Cough Remedies," which was opened by three short papers, the first by Dr. MacNish on "The Cough of Pulmonary Diseases," followed by Mr. James Johnstone, F.R.C.S., on "Reflex Coughs, other than of Pulmonary Origin: their Physiology and Treatment," and a third paper by Dr. Lambert on "Throat and Nervous Coughs (so called)."

These papers furnished ample material for discussion, which

centred chiefly round whooping-cough, in which disease various results had been obtained by the speakers as to the effect of homeopathic remedies on the duration and severity of the disease. Dr. Hughes reckoned the average duration at eight weeks; Dr. Dyce Brown, four weeks; Dr. Goldsbrough, six weeks. Drs. Hughes and Dyce Brown spoke highly of Drosera in high dilution, 12 to 30, and considered it must be given thus for satisfactory results. Dr. Goldsbrough recommended 1x and ϕ , Dr. Day 1x and 3; with this drug in the 1x preparation Dr. MacNish had expressed great dissatisfaction. For the later stages of the disease Dr. Dyce Brown recommended Cuprum or Veratrum album. He also highly recommended Nitric Acid 1x or 1 for the cough of pulmonary diseases after the acute stage is over. He said that in cases of so-called stomach cough there will be found present a general catarrh of pharynx and stomach, and for this condition he recommended Merc. biniod.

Dr. Goldsbrough had found *Pulsatilla* useful for the barking cough at puberty and during pregnancy. Drs. Vincent, Green, Dudgeon, Knox-Shaw, Newbery, and Galley Blackley

also took part in the discussion.

The readers of the papers then replied. Dr. Lambert, in his reply, mentioned the value of *Arnica* in whooping-cough where the paroxysms are preceded by crying, and also in other painful paroxysmal coughs, and also cited the case of a lady of middle age who for eighteen months after an attack of whooping-cough had a paroxysm of cough every morning, with a whoop and expectoration of thick mucus, who was cured in three days by *Coccus* 6.

INSTITUTIONS.

THE ADELAIDE CHILDREN'S HOSPITAL.

WE have received the Twenty-first Annual Report of the above-named Institution, perhaps the most important of special hospitals in Australasia. It is interesting as being one of the hospitals which prove that it is not impossible for homeopaths and allopaths to work side by side when they make up their minds so to do. In acknowledgment of the services of our colleague, the Hon. Dr. Allan Campbell, the new buildings of the hospital have been called "The Allan Campbell Buildings." We congratulate our colleague, and trust that the Institution

with whose origin and progress his labours have been so closely identified may receive all the support which its enlarged sphere of usefulness requires.

HAHNEMANN CONVALESCENT HOME AND DISPENSARIES, BOURNEMOUTH.

During the past year the medical work of the Home and Dispensaries has maintained its usual standard of efficiency.

In-Patient Department.—75 men and 69 women have been under treatment in the Home during 1897, a total of 144.

OUT-PATIENT DEPARTMENT.—251 patients have been visited at their homes and at the Cottage Home, and 1,224 visits paid them.

The out-patients seeking relief at the two Dispensaries have numbered 759, with 2,079 attendances, being 419 at the Western, with 1,205 attendances, and 340 at the Eastern, with 874 attendances. The results of treatment amongst the outpatients may be tabulated as follows:—

Recovered				613
Improved				239
Not improved		91 U 0 15 11 3V		27
No report		- 4.		39
Under treatment			land in the	86
Died	1	DESIGNATION OF	odalla	6
				eaout
				1.010

Of the six deaths, two were from phthisis, aged 26 and 34 years respectively, two infants from tubercular enteritis, one infant from meningitis, and one adult, aged 60 years, from heart disease.

DEVON AND CORNWALL HOMEOPATHIC HOSPITAL.

Annual Meeting.

Supporters of Devon and Cornwall Homeopathic Hospital and Three Towns Dispensary held their annual meeting at Plymouth on March 25th. Colonel Armstrong presided. The medical report stated that in the in-patient department there had been a slight increase, 142 patients having been admitted into the Hospital, as against 141 in the previous year. Of this number 125 were either cured or relieved, four were not relieved, one was discharged at his own request, one was

incurable, three died, and eight remained under treatment at the end of the year. In the out-patient department the record of work was no less satisfactory. There were 112 patients remaining under treatment on December 31, 1896, and 3,283 patients were admitted during the year, making a total of 3,395. Of this number 2,606 were cured or relieved, in 438 cases the result could not be ascertained, 187 were not relieved, 31 died, and 142 were remaining under treatment at the end of the year. Of the patients 348 were cases of accident or other sudden emergency—an increase of 98, as compared with the record for the previous year. There were 13,596 attendances of out-patients at the dispensary—an increase of 236, compared with the previous year. There were also 3,619 visits paid to patients at their own homes by the medical officer and district nurse. In the department devoted specially to diseases peculiar to women, under the care of Dr. Cash Reed, there had been 1,870 attendances during the year. Dr. Alexander continued to give his services on Tuesday mornings for diseases of the ear, throat, and nose, and on Thursday evenings for diseases of the eye. The latter department was of comparatively recent introduction, but the number of attendances of patients was increasing, and there was every prospect that it would prove as popular as other branches of the dispensary. The regular attendance given by the hon, dental surgeon. Mr. L. E. Sexton, had now fully established this department of the Hospital. The number of patients was increasing, and the usefulness of the institution had been considerably extended thereby. The services also of the nurses appointed for district work were invaluable.

The principal cause of anxiety in connection with the institution is that of finance. Although the committee have striven to maintain the strictest economy in all departments, the honorary treasurer has to face a deficiency on the current account of the year besides that of the previous year, and they earnestly appeal to the public to enable them to carry on the

work free from this ever-embarrassing burden.

In order to meet the balance on the building renovation account, and to reduce the deficit on the current account of the past year, a bazaar was held early in this year, and as a result the building-renovation debt has been extinguished and the current deficit somewhat reduced. It is proposed to meet the heavy balance still standing against the institution as a consequence of increasing deficits by appropriating £500 from the reserve fund. But there will be still need of more annual subscriptions and in larger amounts, more donations, and if possible a good endowment fund, and the committee earnestly commend the consideration of this appeal to their friends and

supporters who feel disposed and are able to help the institution in a more liberal form.

The Hospital Saturday Fund was not such a success as in previous years, and this institution in common with others received a less amount from the public than it has been accustomed to do, but the Hospital Sunday Fund was rather more than in the previous year.

PREPARATION.

MURDOCK'S LIQUID FOOD.

WE have received a sample of the above-named food from Messrs. Heath & Co., 114, Ebury Street, London, S.W., who have been appointed the sole wholesale agents for it in Great Britain. Murdock's Liquid Food is one of the few perfect forms of nourishment for invalids, and can be retained by the weakest stomach. It is an extract of raw beef, mutton, and fruits, free of insoluble matter, and can be absorbed without requiring a digestive effort.

EXTRACTS.

A FEW TETANUS CASES.

By P. C. MAJUMDAR, M.D.

I. Tetanus Neonatorum, Babu Sreedhon Chandra Ganguli's baby aged seven days. Child born without much suffering on the part of mother, and doing well.

On the seventh day of its birth it was crying bitterly and

showed signs of inability to suck.

There was stiffness in the sterno-mastoid muscles; distortion of face, eyes suffused, difficult and noisy respiration.

I was called the next day. It was on the 16th of November, 1883. I found extreme suffering, the whole body was bent backwards with strong rigidity of the muscles.

Face turgid, dark red in colour; profuse perspiration on the face, and scanty on the whole body. Pulse frequent and small.

Belladonna 6x every three hours. I visited next morning. No stools, abdomen tympanitic, respiration difficult, painful and stertorous, could not swallow a drop of milk. Parents anxious lest the child should die of inanition. Feverless but perspiration copious and still warm. Fits almost every second.

Opium 6x every three hours. In the evening almost the same. Tympanites much less, no stools, respiration

less embarrassed.

Opium 30 every six hours a dose.

Better in every respect next morning. Fits less frequent, rigidity of the sterno-mastoid considerably reduced, still the child could not swallow, could not suck. Milk was tried drop by drop, sometimes there were signs of its getting in.

Continued Opium four times a day.

Much relieved, and in course of a fortnight the child

perfectly recovered; no other remedy was needed.

II. Tetanus Neonatorum cured. Noorchand's grand-daughter, a baby two weeks old, plump and healthy, navelstring cut in the usual way and healed up nicely. She was exposed to rainy, moist air at night; showed symptoms

of lockjaw the next day.

Jhara, Phuko and other means were resorted to without any benefit. The case was in my neighbourhood and I was called the next morning. The child was in a state of intense agony. Fits every second or two almost; rigidity of all the muscles of mastication and back; opisthotonos fully developed.

I explained to the mother the grave nature of the disease and administered a few doses of *Aconite* 3x every

four hours.

Six doses of the remedy were taken without any benefit. Fits as frequent as before and their intensity greatly increased; no stools; could not swallow a drop of milk. Breathing short and frequent, pulse thready. Gave Strychninum 30 every two hours. Many doses were given during the day and night. She was in almost the same state at my next visit. Medicine continued every three hours.

No better, though the interval seemed a little longer,

in other respects the same.

The same medicine every six hours; there was a decided improvement noticeable now. Medicine less frequently, only three times in twenty-four hours.

The child gradually recovered under this remedy and a complete cure was effected in the course of two weeks. The cure was a slow one.

This is the only case in the whole of my practice up to date in which I have been able to effect a cure by Strychninum. It is a curious fact that this remedy bears so close a resemblance to tetanus both symptomatically and pathologically, but yet its effect is not well marked.

III. My third case is one of true traumatic tetanus and not in a very young child. It is the case of a young lady aged 16, of delicate constitution, otherwise healthy.

She was brought to Calcutta from her father's place by her father-in-law rather dejected in spirit. But nothing wrong happened, she being in a perfect state of health.

In the evening of 29th of January, 1894, the index finger of her right hand was jammed in a door, and that gave her a contused wound there. This was so slight that no particular notice was taken of it.

In the next day she noticed signs of lockjaw, a slight pain in the muscles of mastication and little difficulty in opening the mouth. A homeopathic physician gave her a few doses of *Arnica* and *Arnica* lotion was applied to the affected part.

No amelioration resulted and the lady presented graver symptoms. Power of mastication was gone, the body was bent backward, and fits occurred, renewed on slightest touch. The fits were not very intense. There was no doubt about the grave nature of the illness and I was sent for in the evening. I examined her and pronounced the case to be tetanus.

Hypericum 6x was given, one dose every four hours. Action of this remedy was so prompt that the patient got relief in the course of a couple of hours. The pains in the finger were very severe and they were mitigated almost instantly. Three more doses of the medicine were taken, when I got the report that she was much better.

Same remedy continued, and in two days' time she was perfectly recovered.—Indian Hom. Rev.

AGARICUS PHALLOIDES.

THE following account of the above-named fungus is quoted in the *Pacific Coast Journal of Homeopathy* of February. *Agaricus phalloides* reproduces the symptoms of Asiatic cholera more completely than any other agent.

"THE DEATH CUP, OR FALSE MUSHROOM.

"The Death Cup (Amanita phalloides) is the most poisonous of all the fleshy fungi. It is found in summer and autumn throughout the greater part of the United States, growing upon the grounds in woods at medium and lower elevations.

"The stem is white; when young it is solid, but afterwards becomes somewhat hollow and pithy. The base is surrounded by a characteristic cup-shaped appendage, the remnant of a veil which covers the entire plant when young. The length varies from three to five inches. The cap is viscid when moist, and is generally smooth and satiny; but it may sometimes bear fragments of the outer covering or veil. The gills and spores are white. Several varieties of the plant exist, the one most common having a white or yellowish cap, but this may be green or spotted when growing in deep shade. The general shape is much like that of the common mushroom. It is also like that of the fly amanita (Amanita muscarina), which is, perhaps, more common but less poisonous. From the former it is distinguished by its basal, cup-shaped appendage, and a child can usually distinguish the fly amanita by its more brilliant colouring. The handling of specimens and breathing of the spores have given rise to pronounced uneasiness. The spores are also suspected of having caused trouble by contaminating edible fungi deposited in the same baskets. The fresh fungus is very inviting in appearance, and has no bad taste when eaten raw or cooked. There is no uneasiness felt by the victim until from nine to fourteen hours after eating. Severe abdominal pain then sets in, which is rapidly followed by nausea, vomiting, and extreme diarrhea, the alvine discharges assuming the peculiar rice-water condition characteristic of Asiatic cholera. These symptoms are persistently maintained, but without loss of consciousness, until death ensues, as it does in from two to four days.

"The Year Book of the Department of Agriculture (1896), from which the above notes are taken, adds another of the frequent but unconscious tributes to the principle of Hematherapy, in the following statement: 'There is no known antidote for phallin. The ultimate effects are only to be offset by transfusions of common salt, or by blood taken

fresh from the veins of some living animal."—Ex.

A PECULIAR ACTION OF SAW PALMETTO.*

By VERNON W. STYLES, M.D., Riverside, California.

In the spring of 1895 I was called to see J—, a painter, aged 62, who was suffering with lead colic. After making him as comfortable as I could, I left him with medicine, and returned in the evening to find the colic much relieved, but said he wanted some medicine for his kidneys. On inquiry, I found he was suffering constant desire to urinate, which was difficult and attended with strangury; was obliged to get up several times every night, and said he had been suffering this way for several weeks. On examination I found he was suffering with senile hypertrophy of the prostate. While inquiring into his habits, I found he was a constant user of tobacco, smoking some, but chewing constantly all day long, if his work was where he could. He told me he had used it to excess for fifty years. I assured him it was no doubt an injury to him, and his wife asked me to give him something to prevent his using it. I told them I would consider it, and left him some Saw Palmetto o, to be taken fifteen drops three times a day, for the prostatic trouble, and thought no more of the tobacco business. About a year afterwards he met me on the street and wanted to know what the medicine was I gave him. saving it was the most wonderful remedy he had ever taken. I asked him why he thought so, and he said he had never had any desire for tobacco since taking it. In talking with him a few days ago he asked me if I did not, at the instigation of his wife, give him the Keelev cure for the tobacco habit!

Now what was it?—"Suggestive therapeutics?" or was it Saw Palmetto?

[In the Homeopathic Recorder of March 15th Dr. Hale publishes additional provings of Sabal. serr., in which the symptom "fears to fall asleep lest something should happen" repeatedly occurs. Dr. Hale suggests that this symptom, "fear of going to sleep," may be characteristic.—Ed. H. W.]

^{*} This article, from the *Pacific Coast Journal of Homeopathy* of February, 1898, forms an interesting addition to the information concerning this drug contained in Dr. Hale's monograph reviewed in our March issue.

KEROSENE FOR SORE FEET.

Interesting Case.

By E. Z. BACON, M.D., Chicago.

Miss S. S., aged 27, from her earliest remembrance has suffered from swelling and tenderness of her feet. She never could run about in her bare feet as children

generally do on this account.

She gave the following symptoms: On removing her shoes and stockings at any time her feet swell and burn, and at times itch, and on going to bed at night she always tries to find a cool place for them. The swelling was more on the ball of the foot, puffing it out so full and round that one could hardly distinguish the toes.

On placing the foot upon the ground or floor the sensation was as if the skin would crack open, and even every thread in the carpet was distinctly felt. Feet generally cold with fetid foot sweat. She was also suffering from catarrh. Her many symptoms called for Nitric Acid, which was given her in the 200th attenuation, a powder morning and night.

Under the influence of Nitric Acid her catarrh improved, but the feet remained the same. After some weeks Sulphur and then later Silicia was given without any reason unless it was the burning and fetid perspiration, and, as might be expected, without any result.

A number of months passed, when I was again called to prescribe for those feet. On retaking the case I learned that when she was three years old she was severely scalded, and that she was immediately wrapped in cotton and kerosene oil. Now her symptoms did not call for Petroleum, yet there were a few that made me think of that remedy, and I thought that possibly all this trouble might be the result of the kerosene.

So I told the young lady to put a teaspoonful of kerosene in a clean tumbler and place it under the hydrant, and then turn the water on with sufficient force to throw the current to the bottom of the glass; to let the water flow for eight hours, and then to bring me a

2-dram vial full of the water from the glass.

This she did, and I made a third attenuation of what she brought, using alcohol as a menstrum. A drop of this was given on No. 6 pellets, and repeated ten weeks later. This was one year ago last summer, and my patient has had no trouble with her feet since, although she had suffered for more than twenty years.—Medical Visitor.

SENECIO AUREUS IN PUERPERAL MANIA—A CASE.

By SELDEN H. TALCOTT, A.M., M.D., Ph.D., Middletown, N.Y.

EVERY homeopathic remedy has its individual sphere of action. Each drug exerts its inherent and peculiar influence upon the human system. Many of the proven remedies produce similar effects in a general way, but in spite of this fact each drug has its own face, and form, and power. The efficacy of a remedy depends largely upon its selection and application. If the symptoms of disease are matched accurately by a drug whose proven symptoms correspond precisely with those of the case in question, then the results are prompt and satisfactory.

It is not often that we are called upon to use the remedy known as *Senecio aureus* for the cure of insanity, but one patient, who came under our care and observation last year, was promptly relieved by the administration of

this drug. The case was as follows:

No. in our record book, 4723. The patient was a female; age, twenty-six; married; two children; was admitted to the Middletown State Homeopathic Hospital June 17, 1896. This patient was suffering with her first attack of insanity, and it came on suddenly. There was no history of insanity in the family of either her father or mother. Her friends stated that she had worried continuously during her pregnancy for fear that the coming child might be born dead, as her first one had been. The child was born June 8th; it was strong and healthy. June 17th, as above stated, she was admitted to the hospital. When admitted she was in a condition of very violent acute mania. She looked like a strong and healthy woman physically; that is, she was large and portly, but of flabby texture. She was very much excited mentally, and emotional to the hysterical degree. Her temperature was 103, her pulse 112, and respiration 28. During the three months following admission she improved but slightly in a physical way; her maniacal excitement continued without abatement. and she was much disturbed all the time. At one time her temperature was 105, but usually it ranged about 103. She took the usual remedies such as Aconite, Baptisia, Belladonna, Hyoscyamus, Pulsatilla, and Stramonium, as they seemed to be indicated, but she made no mental improvement. We do not often see a patient remain so much excited for so long a time after child-birth. While such cases may not recover in several months, the symptoms usually subside, in part at least, after two or three months of careful treatment. In this case the bodily temperature remained high; the patient was very active physically, and the mental state was that of a wild. violent, and almost uncontrollable person. We ascertained at last that the lochia had subsided suddenly after childbirth, and that the menstrual flux had failed to appear. On account of the amenorrhea, coupled with a continued mental excitement, severe pain in the head, great nervous irritability and sleeplessness, and hysterical erethism, we gave her Senecio aureus in the third decimal dilution, drop doses every two hours. She took the first dose of Senecio on the fifteenth day of September. In less than three days she was improved; and on the 21st the record states that she "seems more quiet and rational than at any time." On the 24th the case-book shows that she is "improving every day." On the 26th "appears more rational; sleeps well." She menstruated in October for the first time in several months. On the 20th of October she seemed to be free from delusions and well balanced in mind, but was not very strong in body. She made slow progress in the line of physical recuperation, and though fat and healthy in appearance she was unable for many weeks to endure the fatigues of ordinary occupation. Such weakness of the entire bodily system sometimes follows attacks of severe maniacal excitement.

In response to the wishes of her friends, we allowed her to return home on a thirty days' parole. She was comfortable for a short time after reaching home, and then relapsed, returning to us on the seventeenth of November. At that time she was excited, violent, and destructive. This condition seemed to be partially relieved by the use of Belladonna, but improvement not being as complete as desirable, we again gave Senecio aureus. From this time she improved rapidly, both physically and mentally. She menstruated naturally, and all the physical and mental

functions were again performed in a normal manner. The patient was allowed to return to her home on the 15th day of February, 1897 (on a thirty days' parole), and was discharged recovered March 17, 1897. Since that time she has remained in good health, both physically and mentally.

While the proving of Senecio is not very elaborate, and while there are but few mental symptoms recorded, we find enough to lead us sometimes to the use of this drug. It seems to have a place of action midway between the fierce, hot, pugilistic mental state of Belladonna, and the mild, tearful, and changeable condition of Pulsatilla. Recovery from perpetual mania is seldom effected unless the menstrual function is re-established, and in attaining this desirable end the efficacy of Senecio aureus may be more fully recognised in the future.—North American Journal of Homeopathy.

HUMAN AND BOVINE TUBERCULOSIS.

WE reproduce the following article from the *Medical Press* of March 30th, as it strongly bears out the contentions repeatedly urged in our pages by Mr. J. Sutcliffe Hurndall.

"THE IDENTITY OF HUMAN AND BOVINE TUBERCULOSIS.

"The progress of science has established without doubt the fact that human and bovine tuberculosis are identical. The record of the instances of infection from human beings to lower animals, from one animal to another, and from the lower animals to man is now a specially lengthy one, and further evidence upon the subject goes on accumulating. Moreover, that there is an intimate connection between tuberculous diseases in man and animals is plainly demonstrated by the fact that where cattle are few or absent the prevalence of tuberculosis in man falls to a low ebb. Inquiry into this point shows that in the northernmost countries of the world, where reindeer takes the place of cattle in the farms, tuberculous disease is very infrequent in comparison with those countries where cattle abound. Thus there appears to be a good deal of truth in the statement of Dr. Charles Creighton that, owing to the peculiar errors of nutrition in the domesticated bovine species all over the world, cattle are the real fountain and source of human tubercle. As showing how

tubercle can be transmitted from man to cattle, mention may be made of the following remarkable incident, related by a French veterinary surgeon. In an admirably kept stable, containing twenty-four cows and one bull, all in good condition, tuberculosis had never been known; but in 1886 two of the cows began to cough. They were handed over to the butcher for slaughter, but one was so markedly tuberculous that it had to be condemned. In due course all the cows in the same row were attacked, one after the other. They were sent to the slaughter-house as soon as they became ill, but in 1892 the tuberculin test showed that of the twenty animals composing the herd seven were tuberculous. All these seven animals belonged to the same row, the twelve in the other row being quite sound; and the autopsies on the seven animals confirmed the diagnosis. An inquiry, instituted for the purpose of discovering the cause of the contamination of the stable, revealed the fact that in 1883, three years before the recognition of the first cases, the farmer had engaged as cowherd a man who suffered from pulmonary tuberculosis. This man, who used to cough and expectorate constantly, slept in the stable immediately over the two cows which were the first to fall ill. This cowherd resided here until 1891, having been treated for phthisis in the meantime. The conclusion, then, seems inevitable that the cows were infected from the sputa of this tuberculous man. The importance of facts such as these cannot be over-estimated. They undeniably point to the supreme necessity of keeping all possible sources of tuberculous infection away from cows. There should be just as much care exercised in excluding the tubercle bacillus from milk as there is in preventing its contamination with the bacillus of typhoid. The first line of defence under these circumstances is undoubtedly the prevention of contamination, and with that strict attention to the detail of cleanliness, such as is absolutely essential, we cannot see why tuberculosis should not ultimately become a rare disease, both in mankind and cattle. prevalence of the disease in the latter is presumably due to the remarkable susceptibility to tuberculosis among the bovine species, recalling the same idiosyncrasy displayed among guinea-pigs. An interesting fact which may be here mentioned is that in Colorado (U.S.A.) there is a remarkable freedom from tuberculous disease in human beings, and the reports of the State veterinarians show that only 2 per cent. of the cattle react to tuberculin. The disease, indeed, is so rare among Colorado cows as almost to be a curiosity. it does occur, it is usually either in animals which have had the worst of care in regard to overcrowding, or in imported animals; investigation has repeatedly shown native animals are immune. The question, then, of bovine tuberculosis resolves itself largely into keeping tuberculous cattle away from man, and tuberculous men away from cattle. In each case if the isolation were perfect the disease could not be disseminated, but the difficulty is to ensure that isolation. For the most part much good has in the past few years resulted from the tuberculin test as applied to cattle, and we may hope for still better records in the future from the employment of this test. But it is rather a measure which shows the effects resulting from locking the cow-house door after the cow had been stolen — to paraphrase a well-known proverb. Undoubtedly the point to aim for is the prevention of infection among cattle, for there can be no question that the chief part in the dissemination of tuberculous disease in human beings is due to the infected milk derived from tuberculous cows."

REVIEW.

LLANGAMMARCH WELLS.*

This excellent little guide to Llangammarch and district will be welcome to the increasing numbers who visit this important health resort, to which a writer in our own pages was among the earliest to draw attention. Llangammarch is the Nauheim of this country, and in its Barium springs it has a distinct advantage over the original Nauheim of Germany. Homeopaths do not need to be told of the virtues of Barium in cardiac affections, and Nature has sometimes a method of preparing dilutions which possess properties peculiarly their own. But it must not be supposed that Llangammarch is only for cardiac invalids; it has many other virtues as well, which are duly set forth in Dr. Jones's brochure, including golf and fishing and every other attraction for those who have no need to drink the waters, but only wish to spend an enjoyable holiday.

Ferrum Phos in Raynaud's Disease.—Dr. Halbert, in a full article on Raynaud's disease, relates a case in which, though at first amputation of fingers and toes seemed inevitable, cure set in and progressed under the steady administration of ferrum phosphoricum 6x trit.—The Clinique, November.—J. B. H. S.

^{*} Llangammarch Wells as a Health Resort. By. W. Black Jones, M.D., B.S. (Lond.), D.P.H., Resident Physician Llangammarch Wells. London: J. M. Kronheim & Co., Bangor House, Shoe Lane, E.C. 1898. 6d.

ANSWERS TO CORRESPONDENTS, NOTES AND QUERIES.

** In this department we shall be happy to reply to any inquiries relating to homeopathy or to the matter of our magazine that our correspondents may like to address to us. We cannot, of course, undertake to give medical advice in particular cases, which is the business of a medical attendant; but if our medical readers like to put queries to each other regarding points of practice or puzzling cases, we shall be happy to insert queries and replies.

"F. C." ATTENUATIONS.

DEAR SIR,—I should thank you very much to inform me, through the columns of The Homeopathic World, where I could find a full account of the operations for making attenuations denoted by the letters F. C.—e.g., "Phosphorus mm. F. C.," &c., &c.

Thanking you in anticipation,

Yours faithfully,

"GLYCYRRHIZA."

REPLY.

"F. C." denotes "Fluxional Centesimal," a term applied by Dr. Skinner to the attenuations made by the apparatus invented by himself. As only two or three of these instruments exist, these attenuations cannot be made except by those who possess them. Dr. Skinner has himself made by far the greater number of F. C. potencies that exist. Most of them can be obtained from Heath & Co., 114, Ebury Street; Keene & Ashwell, 74, New Bond Street, S.W.; and Epps, 170, Piccadilly, W.—Ed. H.W.

NOTIFICATIONS.

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

SUCCESSION TO PRACTICE.

Dr. VINCENT GREEN, Wimbledon. — Dr. Vincent Green, having taken over Dr. Molson's practice at Wimbledon, is now residing at 13, Lingfield Road, North Wimbledon. He is at home before 10 a.m., and from 2 to 3 p.m., except on Wednesday and Saturday afternoons.

CHANGE OF ADDRESS.

Dr. Rendall has removed to 1, Coates Crescent, Edinburgh. He is at home from 2 to 3 daily, and 7 to 8 p.m. except Mondays and Fridays.

Dr. Arthur Roberts, Ilkley and Harrogate.—Dr. Roberts has opened consulting-rooms at 19, Parish Ghyll Road, Ilkley, where he

attends during the season (May 1st to October 1st), 9.30 to 10.30 a.m. daily; and during the winter (October 1st to May 1st), 9.30 to 10 a.m., except Saturday and Sunday. His consultation hours at 2, Princes Square, Harrogate, are, during the season (May 1st to October 1st), 12.30 noon and 3 to 5 p.m. daily, except Saturday and Sunday, and in winter (October 1st to May 1st) 2 to 3.30 p.m. on Mondays, Wednesdays, and Fridays.

GENERAL CORRESPONDENCE.

MIND, MATTER, AND THE VITAL FORCE.

To the Editor of The Homeopathic World.

Sir,—In the article from the American Homeopathist of February 15th, quoted in your last number, Dr. Kraft says (p. 175): "A sufficient illustration of the wonderful vital reaction—call it that, or vital force, or anything you like, but it is something different from chemistry or from pure materialism—is shown in the 30th dilution." Will you kindly allow one who is no chemist to be presumptuous enough to express his doubts on the conclusion arrived at by the learned editor? Prof. Attfield says that one of the principal objects of the science of chemistry is to teach the manner in which the elements severally combine. In the 30th dilution there must certainly be some of these elements, and they must certainly combine with other elements in the system; then surely such combination of elements comes, or ought to come, within the province of the science of chemistry. If up to the present time chemists teach nothing of the combinations of such highly attenuated elements, the natural conclusion seems to be simply that they do not yet know that branch of the science of chemistry, which perhaps is what Dr. Kraft means, although similar words are often used in reference to chemistry in its widest and absolute sense.

Every one admits that many of the processes at work in the body are different from those of the laboratory; but a great deal more would be required to prove that such processes do not belong to the domain of chemistry. Kingzett, in his Animal Chemistry says: "The chemical decompositions for ever occurring in the living body are all included in two processes, viz., those of hydration and oxidation; that is to say, they are decompositions depending upon the assimilation by substance of the elements of water or upon the action of oxygen." The context shows pretty clearly that by chemical combinations he

means the whole of the analytical and synthetical processes which are going on in the body successively, or even together.

A little further on the author says: "The remarkable thing to be noted is that, whereas, out of the body, it is difficult to make air or oxygen itself effect certain decompositions, yet, in the body, oxygen is the only substance which is utilised for purposes of oxidation. There is this difference to be observed, which throws some light upon this curious fact, viz., that the substances which undergo oxidation in the body are probably the simpler molecules which have been first produced from larger molecules by hydration."

May I ask here whether this may not rationally and scientifically account for the fact that the 30th dilution will sometimes accomplish more than the mother tincture, and

vice versâ?

After referring to the "marvellous power existing in the protoplasm of brain matter," Mr. Kingzett remarks: "Allowing that the larger number of principles met with in the living body are products of analytical or destructive change, there yet remain a scarcely inferior number of other principles which, as they do not exist in our food, must be regarded as the products of synthesis or construction, elaborated in the body itself." Here is a chemist who has made a long study of animal chemistry, and who appears to consider all the active processes at work in the living body to be chemical processes, the majority of which he admits that neither he nor any other chemist at present understands; for he ends the chapter by lamenting the fact that "at present there is no such philosophy (i.e., of chemical physiology), but only a number of oases of facts, between some of which certain probable relations are dimly visible. But the connection is broken at almost every point, and thus we are left with a semi-rational view of life and a less rational science of medicine."

Dr. Samuel Brown, in an appreciative criticism of homeopathy, complained, in 1843, of the science being "too gasiform"; and I fear that, in these days, he would have said it is too ethereal, spiritual, metaphysical. Although body, mind, and spirit are most intimately connected, and although they act and react on each other in an infinite variety of ways, yet there appears to be too great an inclination on the part of many homeopaths to consider certain changes which take place in the human organism to be metaphysical, simply because they cannot at present be explained by the known laws of chemistry. In this connection homeopaths generally may hope for great things from Prof. Elmer Gates and the brilliant microscopical discovery which he has already made and hopes to follow

up.

Dr. Gallavardin considered (see The Homeopathic World, vol. xxvii. 540) that highly attenuated medicines are brought into the radiant state of Faraday and Crookes, and which the latter has shown to be the "borderland where matter and force seem to blend." He adds that "medicines thus brought to the radiant state are no longer subject to chemical reactions, and can then be administered effectively in foods and drinks, and at times even in poisonous liqueurs such as absinthe." Dr. Gallavardin succeeded in effecting his beneficent cures by means of the 30th or 200th attenuation of certain medicines. not given at random, but selected homeopathically; therefore the radiant state of the medicine was only one of the factors in effecting the cure. I presume that the other factor must have been the chemical affinity—may I say the radiant chemical affinity?—between the attenuated medicine and "the simpler molecules" of Kingzett, "which have been produced from larger molecules by hydration"—whether the morbid, or healthy molecules, or both, I know not; but ultimately, I suppose, the action of the medicine would extend to both.

In reference to Dr. Cooper's cases cured by *Ornithogalum umbellatum*, may I mention that the bulbous roots of that and of *O. nutans* are said to be nutritious and wholesome, whilst of *O. pyrenaicum* Dr. Hooker says the young shoots are sold as French asparagus? According to his authority, *Allium* is not only a distant genus, but belongs to a different tribe from

that containing Ornithogalum.

Yours, &c., FERRUM.

Our correspondent will find the best solution of his difficulty with regard to the distinction between "vital" and "chemical" forces in Mr. Picken's article on "Physics and Medicine" in our issue of July last (vol. xxxii, p. 300-301). In reply to Dr. Licorish's dictum that "all vital forces are in reality physical forces," Mr. Picken, whilst recognising the essential unity of all forces, organic and inorganic, maintains that "reality cannot be predicated of any one of these orders of forces any more than of any other of them." All are derivative, each order being latent in and derived from the next lower in grade. To our thinking the reaction of the organism to high potencies, and even to Dr. Cooper's arborivital tinctures, belongs to a different order of things from anything which modern chemistry has undertaken to elucidate.— Ed. H. W.]

THE STRYCHNINE ANTIDOTE IN SNAKE-BITE.

To the Editor of The Homeopathic World.

Sir,—In consequence of statements made by the advocates of the Strychnine treatment, that, since the introduction of Struchnine as an antidote in snake-bite, the mortality resulting therefrom has steadily decreased each year, and has now become almost nil, I wish to state that results undoubtedly show that such is not the case, and that Strychnine has failed to prove itself to be such an infallible antidote as its advocates would have us to believe. Almost from the first I had my doubts as to its subsequent success, and pointed out the danger to be combated in introducing such a powerful poison into the system. As it is next to impossible to determine the quantity of snake-venom injected into a person bitten, so also is it a difficult matter to estimate the size of the dose of Strychnine required to antidote that venom, and, should the quantity of Strychnine injected be above that required, serious consequences, if not death, must follow. Unfortunately, my doubts have proved themselves to be only too well founded. Records show that the greatest number of deaths from snakebite in any single year have occurred since the introduction of Strychnine as an antidote, and this fact alone should impress upon its advocates the folly of making such contradictory statements. It is also a fact that there are to-day a large and increasing number of medical men who have lost all the faith they once had in the treatment; whilst others, undecided apparently as to its value or otherwise, combine the Ammonia with the Strychnine treatment, injecting both drugs. Again, it is all very well for medical men to make use of the antidote, but it must be admitted that it is a dangerous one to place in the hands of a layman, who is, perhaps, totally ignorant of the effect of the poison and the size of the dose to be injected. In a case of snake-bite, should the person bitten die under the Strychnine treatment, a medical man can give a certificate of death to the effect that the deceased died from the effects of snake-bite. But with the layman it is otherwise. His chances are, should the patient die, that he will be arrested on a charge of manslaughter. It will thus be seen that the antidote (if such it may be called) is a very one-sided one after all.

I remain, yours faithfully, FREDERICK KOPP.

Greenwich, N.S.W., March 16, 1898.

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET BLOOMSBURY.

Hours of Attendance: - Medical (In-patients, 9.30; Out-patients. 2 .0), Daily; Surgical, Mondays, Tuesdays, Fridays, and Saturdays, 2.0; Diseases of Women, Tuesdays, Wednesdays, and Fridays, 2.0; Diseases of Skin, Thursdays, 2.0; Diseases of the Eye, Mondays and Thursdays, 2.0; Diseases of the Throat and Ear, Wednesdays, 2.0; Diseases of Children, Mondays and Thursdays, 9.0 a.m.; Operations, Tuesdays, 2.30: Dental Cases, Thursdays, 9.0 a.m.

MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Anderson (Izett). Yellow Fever in the West Indies. Cr. Svo. (Lewis. 3s. 6d.). Barlow (Walter Sydney Lazarus). A Manual of General Pathology for

Students and Practitioners. 8vo, pp. 808. (Churchill. 21s.)

Hale (Edwin M.). Saw Palmetto (Sabal Serrulata.) Serenoa Serrulata): its Serrulata. Serenoa Serrulata): its History, Botany, Chemistry, Pharmacology, Provings, Clinical Experience, and Therapeutic Applications. pp. 96. (Homeopathic Publishing Co. Net, 3s.)

Hall (F. de Havilland). The Medical Examination for Life Assurance with Remarks on the Selection of an Office. Cr. 8vo, pp. 72. (Simpkin. Net & 6d.)

Net, 2s. 6d.)

Holland (Hon. Sydney). Two Lectures to Nurses of the London Hospital. 8vo, sd., pp. 40. (Simpkin. 1s.) Ince (Joseph). The Latin Grammar of

Pharmacy for the use of Medical and Pharmaceutical Students, including the reading of Latin Prescriptions, Latin-English and English-Latin Reference Vocabularies and Pro-sody. 7th ed. Cr. 8vo, pp. 376. (Baillière. 5s.)

Kelsey (C. B.). Surgery of the Rectum and Pelvis. Roy. 8vo. (Kimpton. Net, 30s.)

Lippincott's Pocket Medical Dictionary. Including the Pronunciation and Definition of 20,000 of the Principal terms used in Medicine and the Allied Sciences, together with many elaborate Tables. Edited by

many emborate raties. Entitled by Ryland W. Greene. 12mo, leather, pp. 420. (Lippincott. Net, 5s.) Mallory (F. B.) and Wright (J. H.). Pathological Technique. A Practical Manual for the Pathological Labora-

tory. Roy 8vo. (Rebman. 14s.)

Monsarrat (K. W.). Surgical Technics
in Hospital Practice. A Handbook for House Surgeons, Students, Dressers and Others Engaged in Hospital Work. Cr. 8vo, pp. 132. (J. Wright & Co., Bristol; Simpkin. Net, 3s.)

Net, 3s.)

Moore (Jas. E.). Orthopedic Surgery,
Illust. Roy. Svo. (Rebman. 14s.)

Moullin (C. Mansell). Inflammation
of the Bladder and Urinary Fever.
Svo. pp. 164. (Lewis. 5s.)

Robert (R.) Practical Toxicology for
Physicians and Students. Translated by L. H. Friedburg. Roy. Svo.
(Baillière. 10s. 5d.) (Baillière. 10s. 6d.) Senn (N.). Tuberculosis of the Genito-

Senin (N.). Tuberculosis of the Genito-Urinary Organs, Male and Female. Illus. Roy. 8vo. (Rebman. 17s.)
Smith (Ernest A.). A Manual on Dental Metallurgy. Cr. 8vo, pp. 296. (Churchill. 6s. 6d.)
Surgery—Part 5. Injuries and Diseases of Muscles and Nerves (Club-foot, Whitlow, Ganglion, &c.). Venereal Diseases. Regional Surgery. Injuries and Diseases of the Head. (Catechism Series.) Cr. 8vo, sd., pp. 64. (Simpkin. 1s.)

Categorism Series.) Cr. ovo, sd., pp. 64. (Simpkin. 1s.)

Surgery. Part 6. Reginal Surgery: Face, Nose, Mouth, and Tongue; Esophagus, Hare-Lip, Neck, Tracheotomy, &c.; Thorax and Mamma. (Catechism Series.) Cr. 8vo, sd., pp.

72. (Simpkin. 1s.)

Taylor (Robert W.). A Practical

Treatise on the Sexual Disorders of the Male and Female. 8vo. (Hirshfeld. Net, 12s.)

Tomes (Charles S.). A Manual of Dental Anatomy, Human and Com-parative. With 263 Illustrations. 5th

ed. 8vo, pp. 604. (Churchill. 14s.)
Whitman (Walt.). The Wound
Dresser. A Series of Letters Written from the Hospitals in Washington during the War of the Rebellion. Edited by Richard Maurice Bucke. Cr. 8vo, pp. 212. (Putnam's Sons.

TO CONTRIBUTORS AND CORRESPONDENTS.

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

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

envelope.

All advertisements and business communications to be sent to the "Manager" of the Homeopathic Publishing Company, 12, Warwick Lane, Paternoster Row, London, E.C.

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

CORRESPONDENTS.

Communications received from Mr. Erskine White, Liverpool, N.S.W.; Dr. Waddington, Bradford; Mr. R. H. Bellairs, Oxford; Mr. John Parnell, London; The Hon. Dr. Campbell, Adelaide, South Australia; Dr. Dudgeon, London; Dr. Green, Wimbledon; Dr. Hansen, Copenhagen; Mr. Jesper, Southport; Dr. J. T. Talbot, Boston, U.S.A.; Dr. J. T. Kent, Philadelphia, U.S.A.

BOOKS AND JOURNALS RECEIVED.

Hom. Review.—Allg. Hom. Zeit.— L'Art Médical.— Rev. Hom. Française.—Hahn. Advocate.—Chemist and Druggist.—Zoophilist.—Animal's Friend.—Gaz. Méd. de Paris.—Archiv. f. Hom. — H. Maandblad.— La Homeopatia.—Minn. Hom. Mag.—H. Envoy.—H. Tidsskrift.—Hom. Phys.—Il Secolo Om.—

Amer. Medical Monthly. — Pub. Health Journal.—Med. Century. —Amer. Hom. — Med. Monat. f. H. — Healthy Life. — Critique. — Hahnemannian Monthly.—Hom. News.—Vaccination Inquirer.-H. Recorder. — Clinique. — Med. Times. — H. Monatsblätter. — H. J. of Obst.—Pacific Coast J. of H. -Med. Counsellor.—Zeit. Berl. V. H. A.—Rev. Hom. Belge.— Gaz. Médicale.—J. of Orif. Surg. -New Eng. Med. Gaz.—Calcutta Journal of Medicine.—Life of V. By Richard Met-Priessnitz. calfe.—Manifesto of Anti-Vaccination League.—Seventh Annual Report Humanitarian League.— Report Children's Hospital, North Adelaide.—Thirty-eighth Annual Massachusetts Homeo-Report pathic Hospital.—Surgical Technics. K. W. Monsarrat.—Smallpox at Gloucester. W. R. Hadwen, M.D.

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HOMEOPATHIC WORLD.

JUNE 4, 1898.

OUR CONGRESS NUMBER.

In accordance with a suggested possibility we mentioned last month, we have delayed our present issue in order to include as much as possible of the proceedings of the Congress. It seemed to us that as the Congress takes place so near the beginning of the month it would be a pity to ask our readers to wait till the news was a month old. We trust we shall meet the approval of 'our readers by this arrangement; and we must ask those of our contributors who may not find the articles they have kindly sent us in the present number to excuse the unavoidable delay. They will appear at the earliest possible date.

We shall not offer any comment here on the Congress proceedings, but we have no doubt they will be found of sufficient interest and importance to make amends for the delay and the disarrangement of the ordinary matter.

NEWS AND NOTES.

THE HAHNEMANN MONUMENT.

We are glad to announce that the Hahnemann Monument Fund has reached a total of over 6,762 francs. We shall be pleased to receive contributions from any other of our readers who may wish to have a share in fitly marking the last resting-place of our honoured master.

It is a matter of much satisfaction that Dr. Cartier has succeeded in acquiring an excellent site in the Père Lachaise cemetery, to which the body of the Master has now been removed from the obscure corner of Montmartre where it was first laid. The date of the removal was fixed for May 24th.

THACKERAY'S DAUGHTER AND HOMEOPATHY.

THERE is an interesting passage in Mrs. Ritchie's *History of Pendennis*, quoted in the *Daily Chronicle* review (May 17th), which shows a wholesome appreciation of homeopathy in the Thackeray household:—

"When Helen Pendennis, so to speak, lay dying, Thackeray's younger daughter said, 'Oh, papa, do make her well again; she can have a regular doctor and be almost dead, and then will come a homeopathic doctor, who will make her well, you know."

Pendennis was dedicated to Dr. Elliotson, who lost his practice through his courage in investigating the phenomena of hypnotism, which was then tabooed by the profession, and has since become so respectable. Thackeray considered that he owed his life to Dr. Elliotson.

THALLIUM FOR BALDNESS.

In the "French News" column of the *Chemist and Druggist* we came across a note on the effect of *Thallium*, which we have no doubt homeopaths will soon turn to good account. Here is the paragraph:—

"CURIOUS EFFECT OF A REMEDY.

"Dr. Huchard read a paper at the last meeting of the Paris Academy of Medicine on Acetate of Thallium, which was formerly advocated by Dr. Combemale, of Lille, as a medicament against profuse perspiration in certain cases of serious illness. It appears, however, that its useful influence is counterbalanced by the fact that it causes the hair to fall off with great rapidity. Dr. Huchard exhibited at the meeting several photographs of patients who had become quite bald in several days. He was consequently very emphatic against the use of the remedy."

There is all the difference between the two schools in this note. To the allopath this is a "curious effect" merely,

and serves to condemn the drug. To the homeopathic it brings to light a new remedy for a troublesome affection

which is by no means too well provided for.

Thallium is a rare metal, whose atomic weight is 204.2, its symbol being Tl. It receives its name $(\theta a \lambda \lambda \delta_{\mathcal{G}})$, a green shoot) from the green line it gives on the spectrum, through which it was discovered by Crookes in the residuum left from the distillation of selenium. Thallium has a bluish white tint and the lustre of lead; is so soft that it can be scratched by the finger-nail. Specific gravity, 11.8. It belongs to the lead group of metals but has peculiar reactions of its own. It is used in the manufacture of a glass of high refractive power.

ODIUM MEDICUM IN THE U.S. ARMY MEETS A DEFEAT.

The following paragraph appeared in the Evening Post (New York) of May 17th:—

"HOMEOPATHISTS IN THE SERVICE.

"The monthly meeting of the Homeopathic Medical Society of Germantown, was given up largely to discussion of the movement now in progress to prevent discrimination against homeopathic surgeons and physicians in the matter of Government appointments to army

and navy positions.

"Letters were read from homeopathic graduates who believe that they have been discriminated against. William T. Satchell wrote that he made application to the commander of the Pennsylvania State Naval Reserve 'for permission to enlist as surgeon's assistant or in the hospital corps. He informed me that the Naval Reserve was a purely old-school organisation.'

"Another letter was from a graduate who wrote that at the recruiting office he was told that students from Hahnemann were eligible as privates in the hospital corps, but that to enlist as a surgeon the

applicant must be 'old school.' "—Philadelphia Ledger.

Under the heading "Homeopathy Wins a Victory," the New York Herald of the same date published an article, from which we take the following:—

"By a curious train of circumstances Dr. Charles F. Adams, of Hackensack, N. J., owes his commission as captain and surgeon in the National Guard to the fact that he is a practitioner of the school of homeopathy, which hitherto has not been recognised in the military service.

"Dr. Adams went to the camp at Sea Girt as assistant surgeon of the Second New Jersey regiment. He was examined last week by Surgeon Gargos, of the United States Army, and Surgeons Lawson Godfrey and Terriberry, of the National Guard. The doctor, who graduated from Brown University and rowed in the 'Varsity crew, passed the physical examination with flying colours, and was credited with the highest possible rating for his professional acquirements. In spite of this the examiners refused to accept him, on the ground that he was a homeopathist, having obtained his medical education at the New York Homeopathic Medical College and Hospital, from which he graduated with the highest honours.

"Colonel Hine disapproved strongly of the action of the Board of Examining Surgeons, and declared that Dr. Adams's rejection would be a serious loss to the service. He called the attention of the Brigade Commander to the matter, and an appeal was made to Governor Voorhees. It happened that Dr. Grady, surgeon of the Second Regiment, had been forced to retire owing to ill health, and the Governor immediately appointed Dr. Adams to the vacancy, with the commission of captain and surgeon, to the great satisfaction of the officer's numerous friends in the service."

THE CAREFUL DUKE.

THE following obituary notice appeared in the *Chemist and Druggist* of May 7th. We reproduce it principally for the interesting item referring to the Duke of Wellington's carefulness as to the amount of drugs he put inside him:—

"March.—On April 28rd, at 4, Magnus Street, Newark, Mr. William March, chemist and druggist. Aged 77. After serving his apprenticeship in Stamford, Mr. March spent two years in Paris and Boulogne, and subsequently came to London to a West-end establishment which was patronised by the famous Duke of Wellington. In after years Mr. March used to show to his friends with much pride some of the prescriptions which he dispensed for the Iron Duke, narrating how he (the Duke) would weigh every pill himself before taking it, no matter by whom it was compounded. He afterwards bought the business in Newark, which he carried on in partnership with his former apprentice, Mr. Cherrington, until 1887."

PROPOSED HOMEOPATHIC HOSPITAL FOR EDINBURGH.

THE Edinburgh Evening Dispatch of April 23rd contained the subjoined announcement, which we rejoice to see. A drawing of the proposed building illustrates the paragraph. We wish our northern confrères every success in their praiseworthy efforts.

"For the past fifteen years or so there has been a homeopathic dispensary in the west end of the city, and the number of patients has been growing yearly. Encouraged by this success, the committee have resolved upon another step forward, and are obtaining sub-

scriptions for a homeopathic hospital. Such institutions already exist in London, Liverpool, Brighton, and other large towns, and it is confidently expected that Edinburgh will be able to support such an institution at the West End without difficulty. A suitable site is being arranged for, and plans. It is proposed to place the buildings on a corner site in the Haymarket district."

Dr. Cowperthwaite on Spider Poisons.

In reprinting the admirable lecture by Dr. Cowperthwaite on Spider Poisons, which appeared among our "Extracts" in The Homeopathic World for March, we omitted to state that it was taken from the *Medical Era* that is now enjoying a second vigorous period of existence under the able editorship of Dr. Chas. Gatchell. We need not add that the omission was a pure oversight, and we offer our apologies to Editor Gatchell.

ORIGINAL COMMUNICATIONS.

THE EVOLUTION OF THE SCIENCE OF MEDICINES.

Presidential Address by Dr. Eubulus Williams.

My Lords, Ladies, and Gentlemen,—When you did me the honour of electing me to the dignity of President of this Society in September last, I scarcely realised the responsibilities which necessarily accompany such an honour, and I can only hope to satisfy your expectations with the assistance of your cordial help and support.

Difficulty assails one at the start in selecting a subject for the address. Every path seems to have been trodden by my predecessors; from every field of knowledge, so much has already been gathered and so wisely arranged, that one can only hope to follow as a gleaner, and gather up here and there what others have dropped. We, like our forefathers, are ever seeking after some new thing; progress is our aim, forward is our watchword.

To-day the longing to alleviate the pains of suffering humanity, and the desire to know that which will prevent much of this suffering, is keener than ever before; and yet, when we look back over the pages of history, we find that the ancients, whom we belittle in our ignorance were not so very far behind us. We are tempted to exclaim, "There is nothing new under the sun," and that after all the thousands of years during which Knowledge has been courted, her latest suitors have not won from her many more favours than her younger and earlier lovers in the world's history.

This is the day of studying growth and development. Evolution has become a common word in our language, and though I cannot hope adequately to trace the evolution of the science of medicine, I hope by here and there pointing to the page of history to indicate some of the phases through which it has passed, since it first emerged from the darkness of ignorance and superstition to the light of the scientific knowledge of to-day—light which we flatter ourselves is very bright, but which, no doubt, our successors will find dim and dull and still clouded with much ignorance, and possibly darkened by some

To the savage, the man who can heal is as a god. his mind disease is a demoniacal visitation, and the physician who can exorcise the devil is stronger than the evil one, and therefore revered as a divine being; also it is considered well to propitiate his favour by gifts. This sentiment is still found among savage races and is probably a survival of the feeling which all men had in the infancy of the human race, and was the cause, as civilisation grew up, of that union of medicine with priestcraft, the one having power over life and death in this life, the other possessing power over life and destruction in the world to come; and this accounts for the intimate connection between religion and medicine from

the earliest till comparatively recent times.

Probably in prehistoric times accident discovered to a few individuals, who had the wit to put two and two together, even before they could count, that certain vegetable productions had the power of alleviating pain or curing an illness, especially if accompanied by prayers and incantations to the demons or gods who were supposed to be punishing the victim. The prayer or charm was held to be the potent factor, though the medicine, when easily obtainable, was considered a useful if not a necessary adjunct. Charms were worn as a preventive against disease and evil of all kinds till comparatively recent times, and indeed to this day among individuals of the most advanced and civilised races; and long after people had learnt the art of writing it was thought sufficient to swallow the written prescription if the drugs mentioned in it could not be obtained; and considering the composition of some of the prescriptions that come down to us, it was probably far better for the patient that he should swallow a little papyrus and ink and much good advice, rather than the baneful concoctions with which these tyros in the gentle art of healing would have

hurried their patients out of the world.

Apart from conjecture and guesses at the remote past, the authenticated history of medicine is a long one. we look at one of the ancient civilisations, and that not the most ancient—at Egypt, for instance—we find that as early as 4366 B.C., Teta, a king, wrote a book on anatomy; so that anterior to that time there must have been some knowledge of the human body, and possibly there were some men who made a practice of dissecting; but the badly set limbs among some of the mummies which have been brought to light show that the knowledge of anatomy was very elementary, though for the purpose of preserving the body very ingenious devices must have been known to them for removing the brains through the nostrils. The heart, lungs, liver and intestines were also removed from the body before it was laid in the solution for preservation, the spaces made by the removal of these parts being filled with aromatic spices and disinfectants; also frequently charms against evil and destruction were laid in as well as on the body. Though the processes of preservation of the mummy varied in different periods, we have every reason to believe that the art of embalming was known at least 4,000 years B.C. and probably still earlier. Besides the book of anatomy already mentioned we also know that during the reign of King Sent (4000 B.C.) "the redaction of the medical papyrus was carried out." *

We learn from Ebers that in Egypt in the thirteenth century B.C. there was a school of physicians attached to the College of Priests.† It would seem to have been the custom at that time for the medical students to receive a preliminary training at one of the four great universities in that country; only a few remained to the end of their

^{*} The Nile, E. A. Wallis Budge, p. 213. † Uarda, vol. i. p. 32, Ebers.

course at Thebes; after passing the examination of a scribe the most gifted were sent to Heliopolis, the most celebrated medical faculty of the world, whence they returned to Thebes—at that time the capital city—to practise their profession. (Legend points to this same University of Heliopolis as the seat of learning where "Moses became learned in all the wisdom of the Egyptians.")

They were made physicians to the King, and were consulted in all serious cases. Being attached to some priestly college, whoever needed a doctor sent to the temple, and a statement was made of the complaint for which the doctor was required.

It was left to the principal of the medical staff to select and send the man he thought best suited for the case, and the physician was paid out of the funds of the temple. The patient

paid or not, as he liked, to the temple treasury.

Diodorus writing in the time of Julius Cæsar says: "The physicians have a public stipend and make use of receipts prescribed by the law, made up by ancient physicians; and if they cannot cure the patient by them, they are never blamed; but if they use other medicines they are to suffer death, inasmuch as the law-maker appointed such receipts for cure as were approved by the most learned doctors, such as by long experience had been found effectual, though Aristotle says the Egyptian physicians were allowed after the third day to alter the treatment prescribed by authority, and even before, taking upon themselves the responsibility." "*

From Diodorus also we learn that there was a rule that doctors should not demand fees on a foreign journey or on military service, when patients were treated free of expense.

The physician, then, was an officer of the State, and State paid, as were the priests of that time; both also were holders of and derived the greater part of their incomes from private property, and were often members of princely houses. The theological and the medical orders of the priesthood were the aristocracy of the nation. The Egyptians regarded the human body as so sacred that even when the necessary act of cutting it before it was embalmed was performed, the man who gave the first cut with his sharp flint instrument was looked upon as an outcast and a pariah who could not even live and associate with respectable men, but was forced to live apart; and though he duly performed the indispensable duty, he was execrated and obliged to flee directly he had performed the operation. As early as the thirteenth century B.C. not only do we get mention of the practice of surgery as distinguished from

medicine, but we learn that there were specialists for the different parts of the body: "each physician treats a single disorder and no more," some devoting themselves to the eye (the Egyptian occulists being very famous), "others undertaking to cure diseases of the head, others again of the teeth, others of the intestines, and some those which are not local,"* and the embalmers who in Genesis t were spoken of as physicians were a distinct order apart from those who ministered to the living. The artificial teeth found in the jaws of some of the mummies testify to the skill of the dentists, and some have even gone so far as to assert there are traces of gold-stopping to be found.

Midwives assisted at the birth of children, § though it was

customary to call in the physician in difficult cases.

Though at this time it was the custom to employ magic and religious formulæ to cure the sick, as well as the remedies suggested by scientific skill, the physicians themselves being at the same time priests and the utterers of these magical formulæ, there are evidences that some among them had a distinct aversion to the employment of the magical art in conjunction with medicine, but to avow it openly and to practise it was to run the risk of incurring the indignation of the orthodox, and probable expulsion from the College of Physicians, if not actually to incur heavy punishment besides.

Vivisection was carried on, and comparative anatomy studied by a few devotees of the science, and there are also indications that parts of the bodies of criminals were sometimes secretly dissected in the desire to know the structure of the human frame, but the sacredness with which the human body was regarded by the Egyptians and the necessity for preserving it as much like life as was possible, effectually prevented any systematic and adequate study of the human anatomy, and probably has much to say to the very slow growth of surgery on the soil of Egypt.

Though weak in surgery, in medicine they were more proficient, and it is curious to find in the Berlin museum a travelling medicine chest from Egypt "prettily and com-

pendiously fitted up." ¶

It is also interesting to note that in a papyrus of the fourteenth century B.C. "Isis is to be called upon to destroy the germs of disease," ** also in Plutarch's Isis and Osiris the

^{*} Herodotus, ii. 84.

[‡] Ebers' Egyptian Princess, i. 184.

Ebers, op. cit. ii., note 42.
Ebers' Egyptian Princess, vol. ii. note 31.

^{**} Ibid., vol. i. note 289.

⁺ Genesis 1. 2.

"fumigations" mentioned as disinfectants are very reasonable.*

From Herodotus we learn that not only was the study of medicine of very early date in Egypt, but the medical men there were held in much repute and were so widely famed that they were sent for from other countries. Cyrus, King of Persia, and his successor Darius both sent to Egypt for physicians.† Their knowledge of medicine was also celebrated by Homer in his Odyssey.‡

Pliny also tells us that in later times post-mortem examinations began to be made in order to discover the nature of

maladies.§

It would seem that the Egyptians considered that the majority of disorders proceeded from indigestion and excess in eating, and so, as Herodotus tells us, "For three successive days in each month they purge the body by means of emetics and clysters, which is done out of regard for their health, for they have a persuasion that every disease to which men are liable is occasioned by the substances whereon they feed."

Among the Persians, too, a high value was set on the medical art in a very early age. Pliny indeed maintains "that the whole of Zoroaster's religion was founded on the science of medicine," and it is true there are a great many medical directions in the Avesta. Among the detailed list of medical fees we find that "the physician shall treat a priest for a pious blessing or spell, the master of a house for a small draught animal, and the lord of a district for a team of oxen," so that among the Persians the physician's fee depended, not on his skill or the time or care devoted to his patient, but on the wealth and social standing of the sick man. Even in those days it was necessary for the physician to pass a kind of examination. "If he had operated thrice successfully on bad men, on whose bodies he had been permitted to try his skill; he was pronounced 'capable for ever.' If on the other hand three worshippers of the Divs died under his hands, he was pronounced 'incapable of healing for evermore.'"

It is to the Arabs, who derived it from Egypt and India, that Europe is indebted for its first acquaintance with the science of medicine, which grew up in the school of Salerno, and a slight memento of it is still retained in the Arab symbols used by our chemists.** The next step takes us across the Mediterranean to Greece, and there, 540 B.C., we find the celebrated physician Hippocrates. He was supposed to be descended from the

^{*} Ebers' Egyptian Princess, vol. i. note 289.

[†] Herodotus, ii. 77. § Pliny, xix. 5.

[†] Odyssey, iv. 229. || Rawlinson's *Herodotus*, ii. note 84.

[¶] Ebers' Egyptian Princess, vol. ii. note 18.
** Rawlinson's Herodotus, p. 137, note.

divine Æsculapius, who, if we may believe that Homer treated historical fact largely decorated with myth in his Iliad, probably really existed in an early period in Greece, and after his death was revered and worshipped as a god, temples being erected to him, one of the most famous of which was at Epidaurus, where, among the ruins, may still be seen the marble couches on which the patients waited in the precincts of the sacred building till the priests of the temple could minister to their healing.

If, too, we can trust Homer for the fact, there were in his time, and earlier, military surgeons; they ranked with the officers as leaders, and their profession of healing by no means prevented them taking their place at the head of their troops in

battle.

We are not in a position to know whether Hippocrates was the lineal descendant of Æsculapius, or whether it was mere repute on account of his following the same profession, as it was usual in those days for the sons to succeed their father, and for professional callings to be hereditary, but his is a personality so prominent in the history of medicine that it cannot be overlooked.

In his day physical and metaphysical sciences were combined. As in Egypt the science of theology and medicine were closely connected, so in Greece we find that some theory of the universe and man's relation to it was an indispensable

part of a physician's mental outfit.

As it was held that the universe was made up of the four elements—fire, earth, air, water—so it was supposed that there were four humours in the living body—black bile, yellow bile, blood, and phlegm—"out of the excess or deficiency or misproportion of these four humours there arise diseases; by restoring the exact proportion diseases are cured."*

And as he observed that Nature generally restored the balance of health by the expulsion of her ill-humours, he was led to assist her by somewhat drastic treatment, if one may judge from his use of *Hellebore* and other irritant poisons.

Hippocrates took a long step forward when he rejected supernatural causes of disease, and attributed it not to the ill-will of some god or goddess, but to insanitary conditions.

Until quite recent times epilepsy was regarded as an evidence of demoniacal possession, and in the present day among the Dervishes it is looked upon as a particularly holy state when induced by their extraordinary devotions; but of epilepsy the Greek physician said, "Men regard its nature and cause as divine from *ignorance*. No one disease is either more divine or more human than another, but all are alike divine, for each

^{*} Russell, History and Heroes of the Art of Medicine, p 30.

has its own nature, and no one arises without a natural cause." *

That in thus speaking, he was far in advance of his times is shown by the fact that Origen, one of the early Christian Fathers, is far behind him in knowledge when he says, "It is demons which produce famine, unfruitfulness, corruptions of the air and pestilence," † and to this day there are many who attribute great plagues and pestilence to a punishment for wickedness, rather than to a neglect of sanitation and proper precautions against the spread of infectious disease.

Hippocrates also appreciated the fact that reticence was a very desirable, if not actually a necessary, qualification for the wise physician. He says: "Whatever in my professional practice or not in connection with it I see or hear in the life of man which ought not to be spoken of abroad, I will not divulge,

as reckoning that all such should be kept secret." ‡

There was a time before Hippocrates, when it was held that disease was only to be removed by the application of its contrary, e.g., "If the skin is too dry, apply moisture; if too hot, apply cold." But it was left to Galen, the renowned physician of the second century A.D. to enunciate the famous principle contraria, contrariis, curantur, though perhaps his greatest innovation in the practice of medicine was the importance he

attached to the indications afforded by the pulse.

This Galen, born at Pergamos in A.D. 131, obtained honours in the schools of philosophy, and then went to Alexandria, where he studied for some time in the great school of anatomy in that city. At twenty years of age he became physician to the temple in his native town, and when thirty-four years old he went to Rome, and soon acquired great renown, as was evidenced by the illustriousness of his patients and the largeness of his fees, which, even for those days, was enormous. One of his most famous cures was that of a philosopher who was suffering from the effects of an overdose of *Theriacum*, and was cured by Galen by the administration of the same medicine in proper measure.

This homeopathic treatment would seem to have been accidental, however, for, besides being opposed to his famous principle, this learned physician was sometimes as indiscriminate in his use of nostrums as the veriest quack, if we may judge from some of his prescriptions. For the cure of dysentery he offers no less than nine recipes of compound drugs, § with dis-

interested impartiality.

There is, however, a much earlier recognition of the homeo-

^{*} Quoted by Russell, op. cit.

[†] Quoted by Russell, op. cit. § Russell, op. cit., p. 88.

[‡] Quoted by Russell, op. cit.

pathic law as indicating a rule for the selection of a remedy in the lines of Antiphanes, about B.C. 404, beginning—

"Take the hair, it is well written,
Of the dog by which you're bitten," &c.*

At the beginning of our era the physicians in Rome were mostly of the slave class, and though useful to their masters were domineered over by the powerful magnates of the State; the position of a medical man in the great Roman Empire being very different from that high standing of an earlier civilisation,

of which we have previously spoken.

The status of the physician is not dependent on, neither does it necessarily advance with, the increase of scientific knowledge; in the early stages of history, as we have seen, it is rather the reverse, except for favoured individuals here and there like Galen, who, however, found his position in Rome so intolerable; on the one hand, because his profession was looked down upon by the powerful, and on the other because he was execrated by his professional confrères for his popularity and success, that he would only remain for a few years at a time in the capital of the empire.

The Romans in the period of their greatness, as is well known, made considerable use of various kinds of baths and utilised the mineral and thermal springs known to them for bathing purposes, but it is not so well known that a medical friend of Cicero † was the first to employ the shower bath; he also trusted much to diet and the proper use of friction and

exercise.

To the Arabians we owe the earliest treatise on small-pox by Rhazes, who also wrote twelve books on chemistry, about the tenth century A.D., and, what perhaps was even more beneficial to the race, the introduction of mild aperients, such as *Senna* and *Rhubarb*, in place of the more drastic treatment of earlier physicians.

The spread of Christianity marked the period of medical eclipse. The sun of science was once more darkened by dense clouds of superstition and its accompanying ignorance, and it is not until in comparatively modern times, some time after 1162, when medicine was formally divorced from theology,

that scientific knowledge again began to grow.

This enforced separation was to the credit rather of theology than of medicine, because it was owing to the mistreatment of the "therapeutiæ," as the medical priests were then called, that the religious orders fell into disgrace with the people, and it became necessary to rescue the reputation of theology by

^{*} Quoted by Russell, p. 81. + Asclepiades, see Russell, pp. 80-1.

finally and definitely separating the two sciences, and "the practise of the healing art was from that time forbidden to a

priest."*

Though the rank superstition which accompanied much of the early Christianity, its wonder-working relics of saints and innumerable miracles (most of which in the present day can only be regarded as the children of ignorance), was a foe to medical science and for centuries a great hindrance to its practise, yet it is to the Christian doctrine of charity that we owe the introduction of hospitals for the sick poor, which in early times were instituted by the monks, and this same spirit of charity has shown still more and richer fruit in the well-appointed hospitals and infirmaries of the present day.

(It is due to heathen Rome to mention that before the introduction of Christianity, it was regarded as the duty of the

State to relieve and care for the sick poor.)

To the same religious orders thanks are due for the preservation of medical, as well as other literature, and for the culture which was unobtainable outside the monasteries in

that age.

The commonplace saying, the day is darkest before the dawn, finds its fulfilment in the history of medical science in England in the fourteenth century, when at the time of the Black Death the unavailing efforts of the physicians to arrest the spread or cure the victims of the plague led to utter distrust of the doctors by the people, and the medical men themselves lost all confidence in their physic. But the keen desire of the human race to live rose in revolt against this rest in fatality, and men began to search diligently for means to avert the evil, and for remedies to cure the disease. The old orthodoxy was powerless and none were so conservative in their practises or so faithful to tradition as the medical men, but when the people's faith in them and their faith in tradition was shaken, then the stone was set rolling, slowly it is true, for the acquisition of more knowledge and the discovery of new things, and it has gone on rolling ever since in spite of clinging to time-honoured custom and an almost instinctive horror of innovation.

Perhaps the most advanced thinker in the medical world in the seventeenth century was the celebrated German physician Paracelsus, who struck the first note of his emancipation from medical tradition at the very beginning of his career by publicly burning the works of Galen and Rhazes. Though as a man one cannot admire him, nor can one uphold the mercenary spirit which invaded the domain of his professional life, yet in his bold seeking for truth by investigation and in expe-

^{*} Russell, op. cit. p. 99.

rience, in a time when such were rare, he is worthy of honourable mention and his advice to the physician may be quoted. He says, "If a man wishes to learn much of disease let him travel far, if he do so he will acquire great experience. Countries are the leaves of nature's code of law—patients the only books of the true physician. Reading never made a physician—only practice." In Paracelsus, however, we are reminded of the ancients who tried to simplify everything in nature by reducing it to a numerical system. He maintained a threefold order in nature, as theologians held the doctrine of the Trinity, so he taught that everything in nature conformed to this principle, and that medicine consists of philosophy, astronomy, alchemy; a man is made up of three parts, body, soul, and spirit; the world of three elements, water, air, earth; to which there correspond mercury, sulphur, and salt. †

In the next century Harvey's name is conspicuous. Unlike Paracelsus, he was imbued with a profound respect for his teachers; yet to him belongs the great merit of devotion to truth and determination to follow it at all hazards. Though under the patronage of Charles the First we learn from Aubrey's life of the discoverer that "after his book on the circulation of the blood came out, he fell mightily in his practice. It was believed by the vulgar that he was crack-

brained, and all the physicians were against him."

Lord Bacon early in the seventeenth century advocated the collection and publication of authentic remedies, and, moreover, indicated the weak spot in the medical science of his day. He complains that the medical faculty "have no particular medicines which by a specific property are adapted to par-

ticular diseases."

The necessity for specifics as a reliable and scientific method of curing disease is brought out still more strongly a few years later by Robert Boyle, who at the same time advocates small doses and deprecates the mixing of drugs; he held that the system of prescribing many ingredients in one recipe, though it might cure the patient, hindered the advancement of medicine, as the physician was then unable to judge of the effects of each separate ingredient, and so could not learn from experience as much as he otherwise might.

It was reserved to Sydenham to accidentally discover the first specific towards the close of the seventeenth century. Though still clinging in practice to the evacuant treatment taught by Hippocrates, he was dissatisfied with it, and regarding it only as provisional, he felt after new truths and sought "to arrest the natural course of disease by the administration of specifics." So that when introduced from America

by the Jesuits, Peruvian bark was shown to be the specific for ague, he was prepared to accept it as the first of his expected

discoveries in a new field.

He was a follower of Hippocrates in that he held that Nature must be studied by considering how Nature, let alone, would work, so that, by treading in her footsteps, the symptoms of disease might be subdued. He evidently departed somewhat from the common practice of his time in advocating less interference with Nature under the plea of assisting her. He said: "I often think we forget the good rule festina lente, that we move more quickly than we ought to do, and that more could be left to Nature than we are at present in the habit of leaving her. To imagine that she always wants the aid of art is an error, and an unlearned error too."

But he took a further step in advance of his predecessors by indicating as an alternative to watching and following Nature's methods, that specifics *must* be discovered and used, and pointed out that by the method of treating diseases by specific

remedies "we attack the malady directly."

He was regarded by the College of Physicians of his day as half a lunatic, they frowned on him and did what they could to hinder his success, and even endeavoured to expel him from that illustrious Society. If to be abused when alive and worshipped when dead is one of the orders of merit, then Sydenham must be placed among the honoured ones of the earth.

A century later the profession again shook its head over Jenner, when in 1798, after twenty-five years of patient investigation in the meadows of his native valleys, he came to London, full of his discovery of the potency of cow-pox inoculation to give immunity to men from small-pox, the terrible scourge of that time, which annually claimed some

40,000 victims.

Though his discovery was quite in accord with the speculations of his master John Hunter, who himself had bidden his pupil not "think but try," and if true was to be the means of saving the lives of thousands of men, he failed to enlist the sympathy or help of his professional brethren, and after three months of ineffectual work he retired again to the country, there to prepare, and in the same year to publish, his treatise.

Shortly after, however, as is well known, the worth of his discovery was acknowledged, and to this day men and women all over the world are reaping the benefit of his toil in discovering and making known the beneficial effects of vaccination.

In his case it was not left to posterity to bestow well-earned fame, for during his lifetime he received from the British

nation a gift of £10,000, which was not so very generous considering his discovery had cost him £6,000, and though the nation gratefully acknowledged that his labours had resulted in the saving of 40,000 lives annually, it showed by its action that it paid better to kill the King's enemies than to save lives

to fight for him.

To the work of the late Dr. Russell, entitled History and Heroes of the Art of Medicine, I am indebted for much of the information made use of in this paper, and enough has been said to show that what the talented author has written is true when he says, "If we accept progress we must say farewell to orthodoxy,"* and that farewell to orthodoxy means persecution from contemporaries for all pioneers of truth, and it is often reserved for subsequent generations to revere and bless the social martyr for his precious gifts to suffering humanity, of the results of thought and study and his courage in proclaiming honest conviction in the face of scorn and ridicule, if not, as in earlier times, at the risk of social ostracism or actual imprisonment.

In such an assembly as this I need only mention Hahnemann as one such pioneer who by his discovery in therapeutics of the law *similia similibus curantur*, and for the revolution in the practice of medicine brought about by him, is not unworthy to take his place by the side of those illustrious men already

named.

But his life and work are too recent and too revolutionary to have won the world's praise as yet. His departure from the traditional paths was too great for orthodoxy to have caught him up so soon. For, to us followers in his footsteps, who also are somewhat in the shade with him, it is encouraging to remember that the heterodoxy of one age frequently becomes the orthodoxy of the next, and to reflect that posterity may reward the man who is not only independent enough to embark on original research and has the boldness to depart from the beaten track in following the results of his studies, but who has the still greater courage to avow his departure from traditional opinions.

Such a man may earn for himself the derisive smile, if not the openly expressed opposition of those who, lulled in the arms of orthodoxy, calmly drift through life, secure in the good opinion of their contemporaries, but to whom posterity raises no monument to tell of some new scientific height achieved by laborious effort, and the overcoming, not only the inherent difficulties of an upward path, but the surmounting of the obstacles traditional bigotry plants in the way to arrest the progress of all who would forsake the beaten track and would fain try to discover for themselves a new road to truth. Far be it from me to despise tradition—where should we be without our valuable past? Tradition is good, excellent, as a point of

departure, not as a resting-place.

This is an age of toleration. As civilisation advances so does a more tolerant spirit prevail; and this more genial atmosphere is even penetrating that most conservative of corporations, the medical profession, and the honours bestowed in this country upon Simpson, Lister, and a host of other well-known names, testify to the fact that now, in this age, it is not always left to posterity to discover a scientific benefactor.

In such serious matters as the spread of disease and questions of life and death it is well, nay imperative, that we should pause before departing from traditions marked with the approval of time; but a backward glance at the history of medical science in the past warns us against too profound a

trust in tradition if, as we profess, progress is our aim.

One prophet has even ventured to foretell the status of the physician in the twentieth century, and though we may not be able to follow the late Mr. Bellamy* in his methods of attaining his ideal commonwealth, he has indicated "a consummation devoutly to be wished" which we all would welcome, and to the attainment of which every true lover of humanity would lend his aid, even though, as he says, it should lead to the extinction of the present genus of medical men, only, however, "to open new and finer fields of work" to their successors in the profession.

He prophesies that the advance of the science of sanitation will tend to "the disappearance of conditions inimical to health," that the economic independence of women advocated by him and her "physical rehabilitation will result in untold benefits to the race;" and that "the people generally" will be "no longer in the state of ignorance as to their own bodies that they seem formerly to have been," so that in the future the doctors may look forward to being "merely specialists and experts on subjects that everybody is supposed to be well

grounded in."

He goes on to state that, with which we must all agree, sectarianism has been a great hindrance in the advance of medical science, and only too truly he says, in a backward glance at the present century, "You will scarcely need to be reminded that in your day medicine next to theology suffered most of all branches of knowledge from the benumbing influence of dogmatic schools," the influence of such bigotry being to discourage original thought and retard progress.

The twentieth century curriculum indicated by him leaves little to be desired.

"There are really no conditions to *limit* the course of physicians. The medical education is the fullest possible, but the methods of practice are left to the doctor and patient."

And may not we also look forward in the twentieth century to the tardy recognition by the world of the great work done by the discoverer of a scientific law in therapeutics, and hope for an adequate appreciation by succeeding generations of the benefits conferred on the human race by SAMUEL HAHNEMANN?

THE DOCTRINE OF SIGNATURES AND THE LAW OF SIMILARS.*

By John H. Clarke, M.D.

While engaged in the study of the remedies comprised in the homeopathic materia medica, more especially of those belonging to the vegetable kingdom, one cannot fail to be struck with the correspondence often observable between outward peculiarities of flower or form in the drug and the organ or malady for which it has been found remedial. It would almost seem that it is to be the lot of homeopathy to rehabilitate the ancient doctrine of signatures, developed and glorified by Paracelsus, and possibly utilised by Hahnemann himself and the older homeopaths for suggestions as to the properties of drugs, the outlines of which were filled out by provings and clinical observations.

The Century Dictionary thus defines the meaning of the word "Signature" in this connection:—"An external natural marking upon, or a symbolical appearance or characteristic of, a plant, mineral, or other object or substance, formerly supposed by the Paracelsians (and still by some ignorant persons) to indicate its special medicinal quality or appropriate use. The medical theory based upon this conception, known as the Doctrine of Signatures, took note of colour (as yellow flowers for jaundice and the bloodstone for hemorrhage), shape (as that of the mandrake and ginseng), various peculiarities of marking, &c. Many existing names of plants, minerals, &c., originated from this theory. See kidney-wort, man-

^{*} Read at the Annual Homeopathic Congress on June 3rd.

drake, scorpion-grass. Also called sign, seal, and sigil."—I have to own myself, gentlemen, one of those "ignorant persons" alluded to in the above admirable definition. As the negro preacher remarked, by way of consoling his flock for the trials of life, there is one place where you are always sure to find sympathy; and when asked, Where? he replied with emphasis, in the Dictionary! I confess it has never failed me. An unrepentant sinner, however, I am going to air my ignorance on this occasion,

and even venture, it may be, to defend it.

Let me premise that there is sometimes more hidden likeness in superficial resemblances than might at the first blush be supposed. We talk about going "to the root" of a matter as if in the roots of a plant the chief characteristics were to be found. No doubt, if we had the vision, we should observe differential characteristics in every microscopic bit of every plant, but the unmistakable features are oftener found in the blossom or fruit. So it is with disease: it is in the symptoms—the blossom of disease, exanthem,—(as our allopathic friends are beginning to discover) that the sigil or signature of the malady is most in evidence; and it is Hahnemann's great glory to have demonstrated that the best drug signatures are to be discovered in the out-blossoming symptoms experienced by the drug-prover. But that does not say that drug-provings abrogate the older doctrine of signatures. On the contrary, I maintain that in many instances our provings show that there is an amount of truth in it unsuspected by the hyper-sophisticated intellect of an age that boasts of its knowingness.

Taking it on its lowest basis, an admirable mnemonic is to be found in the correspondence between physical appearances and symptoms; and if there is an art making more demands on the memory of details than homeopathy I have yet to hear of it. The case of the Eye-bright, Euphrasia, will at once occur to you all. The signature of the plant is its eye-blue flower; and how true the inference of the ancients was as to its medicinal properties homeopathic provings and uses have amply demonstrated. And I cannot suppose that this is merely a curious coincidence, of use only for the exercise of medical small-wit. There is not only such a thing as an irony of fate, which we often hear about, and sometimes experience, there is also, if I may so say, a

wit and humour in the very nature of things. contention is that we ought to investigate this and make the most of it, and not the least, as the present tendency would seem to be. "Making fun" of a circumstance is one thing, and enjoying the humour of a situation and making good use of it is quite another. Putting the matter, therefore, on the lowest grade of utility, that of a mnemonic, there is no reason why we should not use the eye-likeness of Euphrasia to stamp indelibly on our minds the chief sphere of action of the remedy. And to go back to the examples of our sympathetic dictionary—"the yellow flowers for jaundice, the bloodstone for hemorrhage"---a teacher of materia medica would find it of no little assistance to point out to his class the yellowness of Hydrastis, the "golden seal" with its "Turmeric root," the yellow flower of Calendula, the yellow juice of Chelidonium, the yellow stain of Nitric Acid, and the yellow colour of Chrome of Sulphur, of Picrate of Iron (to mention only a few), as evident in medicines which powerfully affect the and as for the bloodstone in hemorrhages. when we remember that it is iron which gives it the colour, we cannot but admit that in this case also the signature is a true one.

But I do not think we exhaust the utility of signatures by regarding them merely as useful mnemonics. We talk glibly enough about a "Universe," but few of us really believe in it. If we did we should recognise that everything in the universe bears relation to everything else, and we should expect to find the correspondence cropping out in many directions, the connecting-links of which we are quite unable to trace. The reason why we do not see more of them is that, having so much knowledge of other sorts pressed upon our attention, our minds have no leisure to take in large knowledge of a simple kind. The ancients had the advantage of us in this respect, and hence arrived at certain kinds of knowledge which the laborious efforts of later centuries have done little more than confirm. Modern science rightly enough teaches us to look below the appearances of things to find realities beneath. This creates in our minds a habit of suspecting that which is obvious. Hence it frequently happens that by our very efforts to penetrate beneath appearances, we miss much which is all the while lying on the

surface. But there is no reason why we should not be aware of this habit, and by adjusting our mental vision look at nature with the wide-open eyes of childhood as well as with the keen and narrow gaze of the scientist.

Some time ago, when making a study of Cistus Canadensis, I was struck with one characteristic developed in the provings. The common names of Cistus, as you know, are "Rockrose," "Ice-plant," and "Frostweed." Hering quotes from the United States Dispensatory this description: "It grows in low, dry, mica-slate hills and serpentine rocks. It is abundant at the foot of Pine Rock, New Haven, in the barren plains, and seems to be dependent on the presence of talc (magnesia). It is said "—and here is the point to which I wish to draw particular attention—"that in the months of November and December these plants send out near the roots broad, thin, curved ice-crystals, about an inch in breadth, which wilt in the day and are renewed in the morning."

Now, you may ask, what possible connection can there be between the physical appearances or peculiarities of a plant and the effect on the human organism of the same plant after it has been macerated with alcohol or boiled down into a decoction? That I cannot answer; all I can say is that in the provings of Cistus a sensation of coldness is one of the commonest symptoms met with. Here, for example, is a selection:—"Forehead cold, and sensation of coolness inside forehead, in a very warm room; cold feeling in nose; sensation of coldness of tongue, larynx, and trachea; saliva is cool; breath feels cold; empty and cool eructations; cool feeling in stomach before and after eating; cold feeling in whole abdomen."—It may be said that sensations of coldness are common to scores of medicines, and that is true. But coldness of the tongue, of the saliva, and of the breath are not common symptoms; and I cannot help feeling that there is some occult connection between the electric properties of the plant which favour the production of ice about it, and the chilling effect of the drug on the body when taken. At any rate, I put down in my private materia medica "unusual sensations of coldness" as a keynote for the use of Cistus; and curiously enough, I did not have long to wait before an opportunity arose for testing it. A patient came to me about that time complaining of coldness of the whole left side of the body, and she feared that paralysis was coming on. I

prescribed *Cistus*, and there was soon an end to the one-sided coldness, and the fear of paralysis along with it.

The rule "Let likes be treated by likes," as we generally understand it, refers to the likeness between drug effects and disease effects on the symptom plane. But I do not see why we should not extend the meaning of the rule and include within the sphere of the correspondence plant-or drug-appearances and organ- or disease-appearances. If we take this view of it, the doctrine of signatures may fairly be brought within the four walls of the homeopathic formula.

Before proceeding further I should like to make it clear that I do not claim for all drugs the possession of signatures. They may all have them for anything that I know, but we have not yet learned to read the signs. Nor do I contend that the signs, when found, are of superior value to provings or to clinical observations. What I do maintain is that in them we may find pointers of great value. They may be used either to supplement provings, or to confirm them; and to

suggest uses when provings do not exist.

Take, for example, the "Shepherd's Purse" (Thlaspi bursa pastoris). So far as I know there does not exist any proving of this plant, but it is recognised by almost all homeopaths as an uterine remedy of the very first How was this discovered? I ask any one to look well at the seed-vessel of this common weed and see if they cannot discern a signature of the most obvious kind in its shape: the very counterfeit of a virgin uterus. again, a remedy which has recently been used by homeopaths who have adopted it from the eclectics—Echinacea Angustifolia. It possesses a root which turns black on exposure, whence its name, "Black sampson," is drawn. The keynote for its employment is given as "black tongue." It is used in diphtheria and low typhoid conditions, with or without this symptom, but it is most specially indicated in cases where a black tongue exists. Dr. Burnett has recorded excellent results from Fragaria vesca in conditions where the strawberry tongue is a prominent feature. Elaterium, the Squirting Cucumber, has a signature impossible to mistake. I have never had an opportunity of witnessing the bursting of the seedvessel, but I am told by those who have that the report is most strikingly suggestive. The bulb of squill exudes a

juice that is the very counterpart of mucous, and this in all probability first suggested its use as an expectorant.

But signatures are by no means confined to outward appearances. Habitat has frequently suggested the medicinal properties of plants. It is a common idea that every country or district produces the remedy for the particular kind of illness that may be most prevalent in it. The subject has never been thoroughly worked out, but instances of it are not difficult to find. I may mention the bog-bean, *Menyanthes*, a notable ague remedy, which, as belonging to a fen-county, I heard about when I was a boy. The anti-rheumatic properties of Salicin may be typified in the damp places in which the willow grows; and I believe Dr. Cooper got his idea of *Lemna minor* (a valuable remedy in catarrh, as I can attest) from its flourishing in ponds. "Aggravation from damp" is the leading indication for its use.

But I need not weary you with more examples, plenty of which will no doubt occur to you all. My aim is rather to open up the subject and set the minds of my hearers working in this direction. It is well for us to know our medical materials in an all-round way, and not merely as something in a bottle with a label on it, and a list of

symptoms in a book.

Before concluding I wish to enter a plea for a wider range in seeking indications for the employment of drugs. I don't think my worst enemy—if I have the honour to possess one—will accuse me of ever having manifested symptoms of being a wobbler in the faith. I have sought to practise it to the extent of my knowledge and ability, fully alive to the fact that homeopathy is much too big to be completely mastered by any one man in a lifetime. On the other hand, I am not aware that my membership of the homeopathic confraternity, or of the B.H.S., ties me down to prescribe only on symptoms that have actually been produced in provings on the healthy. That provings are the most fertile source of trustworthy indications I fully believe; but I do not think when Hahnemann penned his "Essay on a New Principle for Discovering the Curative Powers of Drugs," he had any idea that the curative powers discovered in other ways were to be discarded; and if he did mean that, I should say he had made a mistake. Provings are the foundation and superstructure of our art, but there are many other elements

that can usefully be employed in the complete equipment of the edifice, and among them the ancient doctrine of signatures should occupy, as I contend, a place of no small importance.

ARBORIVITAL MEDICINE.*

SUBJECT: THE DOCTRINE OF SIGNATURES FROM A MODERN POINT OF VIEW.

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

DEAR DR. CLARKE,—I see from the notices of the forthcoming Homeopathic Congress that you intend to contribute a paper upon the Doctrine of Signatures, which is to be submitted to discussion.

As, however, but ten minutes will be allotted to each speaker, and as I could not reasonably claim the special grace of being allowed to speak for a longer time than other members, I may, I think, reasonably ask to be excused for adopting the somewhat unusual procedure of putting my ideas forward in pamphlet form.

This is the more necessary as, unfortunately, there is no English homeopathic journal open to me, except that edited so ably and for so many years by yourself, but which as you know is not seen by many of the members of the Congress, being by many considered too popular for the maintenance of professional interests.

It is evident that if the subject of the Doctrine of Signatures is to be discussed at the present day, the very doctrine itself will require to be modified so as to bring it

into accord with modern thought.

I do not know whether any clearly defined statement is to be found in the older writers of this doctrine, but the very general idea that prevails is that the appearance of the roots or other parts of plants very often serve as a guide to their administration in disease owing to a real or fancied resemblance to the diseases they cure.

Thus, for example: H. More in his Immortality of the Soul, art. "Antidote against Atheism," book ii. ch. vi. says:

^{*} A copy of this Open Letter has been presented to each member of the Annual Congress.

"We now come to the Signatures of plants. I demand whether it is not a very easie and genuine inference, from observing that several herbs are marked with some mark or sign that intimates their virtue, what they are good for, and there being such a creature as man in the world that can read and understand these signs and characters; hence to collect that the Author both of man and them knew the nature of them both."

The Doctrine of Signatures may be considered the creation of what I would term the Domestic School of Medicine, and which was constituted principally of herbalists and imperfectly educated medical practitioners; this school was succeeded by the Allopathic and then by

the Homeopathic Schools.

It is very evident that if this be a right view to take of what is termed the Doctrine of Signatures it must be of very limited application and of very doubtful utility.

In fact, modern thought has discarded it in toto, and the very mention of anything of the kind amongst our professional brethren, and still more amongst the allopathic fraternity, is simply the signal for outbursts of ridicule and scorn. It is, however, very often the case that old ideas like these, very often are found to be based upon interesting facts, and that they accorded very accurately with the scientific position of the time. The fact of disuse does not in such a case imply absurdity or even inutility; it may not imply any more than a severance of thought from the facts upon which the Doctrine was based. Dispassionately considered, therefore, it can do no harm to revert to the subject and to consider it in the light of modern thought upon matters medical.

What is our position at the present moment?

It is this, taking of course the Homeopathic School as the exponent of advanced medicine: We have proved a large number of remedies upon the healthy and have established the fact that the symptoms produced by their provings enable us when met with to recognise the remedy to which they belong and to serve as indications for its prescription in disease. From proceeding in this way we get a knowledge that is both extensive and accurate of the actions of many substances. The only question is whether in our everyday search for agents that will act curatively upon disease we are justified in allowing ourselves to be directed in our inquiry by symptoms

alone for what we require. Before proceeding to discuss this, it is necessary to be quite alive to the limitations to be placed upon inquiry; thus, we must bear in mind we are dealing only with plant-remedies. The Doctrine of Signatures has for us no application, or for purposes of argument must be considered as having none, to substances taken from the mineral kingdom.

Then we must also bear in mind what we are looking for is the direct curative action of remedies and not the coarse derivative effects contemplated by both the

Domestic and by the Allopathic Schools.

There are many men in the ranks of homeopathic practitioners who continually reiterate the statement that symptoms and symptoms alone must in every case be our guide to the administration of the true curative remedy, and who, like the Irish bank clerk, show their qualification for their post by an exhibition of oratorical denunciation

and vituperative display.

But a little calm consideration will show that symptoms cannot always be available for the purpose required. Suppose oneself landed in a strange country upon the roads of which sign-posts exist; these sign-posts will be very useful in "giving the route," so to speak—that is to say, in indicating the roads along which it is necessary to travel in order to arrive at any given destination. The sign-posts point out the route, but any real knowledge of the roads and of the country adjoining them must be derived from an actual acquaintance with surrounding objects.

And thus with our plant-remedies; while the symptoms enable us to recognise the plant, and to apply it in disease, the difficulty remains that we must first find out what are the symptoms, and not only so but have them on all occasions available—which of course is impossible,

never has been done and never will be!

Even repertories are not always available to meet the exigencies of practice, and even were they so, the difficulty in finding from them the indicated remedy is proverbial.

The question then arises, Can we be helped in our

search for the true curative remedy by Signatures?

A reply to this will necessitate a definition of the term Signature to meet the requirements of Arborivital, or if you like the term better, advanced medicine. By the term Signature must be understood any feature connected with plant life that suggests the use of such plant

as curative for any form of disease.

To return to our parallel of a stranger in an unknown country: the Signature will represent the sign-boards erected in the country, and it will depend upon his recognition of these sign-boards and his ability to decipher them whether the stranger will not alone reach the various destinations he requires, but whether he will reach them in the most expeditious manner possible.

The Signatures, or sign-boards, may enable him to travel along the most direct routes, but it will depend entirely upon his own intelligent observation whether he notices the various objects in his journeyings with care

sufficient to enable him to recognise them again.

A real acquaintance with the country can only be gained by familiarity with the entire scenery; the actual knowledge of the topography has first to be acquired before the *habitual* knowledge necessary for the re-

cognition of the various places will be gained.

In like manner the symptoms produced by a drug may be likened to the objects that constitute the scenery en route, and it is upon our ability to recognise these symptoms—upon, in fact, our habitual knowledge of the drug, that our ability to recognise it, and a fortiori to

apply it in disease, will depend.

Keeping in mind this illustration, we get a true conception of what, as I take it, ought to be understood by the term Signature. It may be considered simply as a sign-board that is represented by the habits, habitat, venation, foliation, branching, &c., of the plant. When, therefore, in my introduction to Arborivital Medicine published in the January and February numbers of 1893 of the Hahnemannian Monthly, I advocated a consideration of "the colour, form, habitat, and habits of plants," as being a possible aid to the acquisition of the indicated remedy, it was not at all with a view to the permanent substitution of such outside helps for the more dependable symptomatic knowledge that should follow.

It is only reasonable that the researches of scientific men in other branches of human knowledge should be utilised if possible for the benefit of suffering humanity. And when botanical experts tell us that the members of certain natural orders of plants have properties in common—the Labiatæ with their lipped corollas and square stems being non-poisonous, the Solanaceæ with their starred flowers adherent calices and perforate anthers being poisonous, the Rosaceæ with their delicate-coloured bloom being fruit producers, and so on, and so on—it is surely incumbent upon us to take advantage of such knowledge as suggesting, as it so often does, the line of action likely to be taken if proved by any particular

plant-remedy.

Certainly the attempt to force inquirers to repudiate suggestions or signatures so received is in no respect better than the attempt of the priests in pre-Reformation times to suppress all freedom of thought upon religious matters. But more than this: we resort in our everyday practice far more to Signatures than might be supposed; thus, Hahnemann proved the Bryonia Alba, but in many homeopathic pharmacies it would be impossible to find such a drug, although called by this name; the fact being that by common consent we have substituted our own Bryonia Dioica for the German Alba variety. Obviously there can be no possible justification for supposing that the symptoms of the one plant are the same as those of the other, except upon the principle of Signatures, nor can our practical experience with the Dioica variety have been instigated except by the morphological resemblance between the two. Practically. we have discarded the symptomatology of Bryonia Alba, and have allowed ourselves to be guided by the Signatures of Bryonia Dioica. And many examples of the same sort of thing could be adduced.

To censure the man who pursues the same course is

far worse than

"Compounding for sins they're most inclined to By damning those they have no mind to."

For, with all of us, the temptation to follow a more royal road to the indicated remedy than is afforded by

symptomatology is irresistible.

A reply to the above argument may be made that the reason for using the improved Bryonia Dioica instead of the pathogenetically superior Bryonia Alba is that the constituents of the two plants are identical; this would be feasible if we were dealing with chemical constituents

alone, but there is not the slightest reason for supposing that plants that vary morphologically are identical in their vital properties. Similar they may be, hence the necessity for Signatures; identical they cannot be, hence

the necessity for provings.

I think, dear Dr. Clarke, you were present when Dr. Skinner, at one of our little meetings, referred to the virtues of Hydrangea in Diabetes. On returning home I went to my bookshelf and took down Rhind's Vegetable Kingdom, and other works. There I found the Hydrangea described as the thirstiest shrub known,

especially when in the act of flowering.

It was with great delight that I met our friend Dr. Skinner some days afterwards and pointed out this remarkable feature to him. No litera scripta records his reply, but I am sure he will forgive me for considering it as the reverse of flattering. And yet why on earth should not the great thirstiness of this plant be taken into account when its use in disease is under consideration?

The chief question for us ought to be whether a circumstance of this kind can be made of practical utility; it is absurd to condemn our use of it if serviceable.

We are not so well off for curative remedies that we

can afford to throw aside Signatures.

When we were walking in Kew Gardens, in search of Ledum Palustre, you will remember my hazarding the opinion that its leaves were somewhat spear-shaped—I had never seen the shrub.

This I did from a belief that Alfonse Teste—the greatest writer on the rapeutics since Hahnemann's time—to whom we are indebted for the recommendation of the Ledum for penetrating wounds, bee and wasp stings, &c.. must have been guided thereto by some special

morphological feature of the plant.

I am quite prepared to hear that the leaves and other parts of many plants are more suggestive than is Ledum to penetrating wounds—or was it of the inflicting weapons?—mais n'importe. The important matter was that Teste saw what others had not; nor can I comprehend how such a matter could have been discovered by symptomatology alone. A proving could not do more than Signatures in the matter of penetrating wounds; it could but suggest the use.

My reason for supposing Teste to have been thus guided is from a study of the Preface to his *Materia Medica*, where he often refers to Signatures, and I certainly consider the severe criticism to which he was subjected to have been uncalled for, and probably accounts for his silence in later years.

But so it will ever be; a matter like this of Signatures, the real value of which depends entirely upon the specialised vision of the observer, will excite the ridicule of those whose vision has not been exercised thereupon, and I can only conclude by congratulating you upon your courage in bringing it forward before a hostile audience.

May the fact of your having done so lead to the

betterment of mankind!

Very sincerely yours, ROBT. T. COOPER, M.A., M.D.

PHYSIOLOGY OR PHILOSOPHY?

By P. PROCTOR, L.R.C.P. EDIN.

My previous communication to the World has, I hope, answered its purpose in showing that Dr. Dudgeon and Dr. Elmer Gates are not necessarily opposed to each other, but are only treating of things from different points of view, and there I might let the matter rest were it not that Dr. Dudgeon makes a couple of statements that are worth noticing on their own account, apart altogether from his dispute with Dr. Gates. The first one is to this effect: "I should like very much that Dr. Proctor would show us from his experience what a spiritualised product is, and how the mind can be so regarded. As the mind is a property of a certain kind of organised matter, perhaps he will explain how a property of matter can be a spirit, or a 'spiritual product,' if he prefers that term." Now if we grant the assumption made here that mind is the product of matter, how it is produced is the very thing we should like to know. Sensation, thought, and volition admittedly are not physical, and yet they are bound up with physical processes. Tyndall states the difficulty very plainly in the following passage:

"Thus far our way is clear; but now comes my difficulty. Your atoms are individually without sensation, much more are they without intelligence. May I ask you then to try your hand upon this problem? Take your dead hydrogen atoms, your dead oxygen atoms, your dead carbon atoms, your dead nitrogen atoms, your dead phosphorus atoms, and all the other atoms, dead as grains of shot, of which the brain is formed. Imagine them separate and sensationless, observe them running together and forming all imaginable combinations. This, as a purely mechanical process, is seeable by the mind. But can you see or dream, or in any way imagine how out of that mechanical act, and from these individually dead atoms, sensation, thought, and emotion are to arise?" This is my reply to Dr. Dudgeon's question, and if he can give us any help in the case we shall all be very much indebted to him. Possibly he may have to resort to

Dr. Elmer Gates for assistance!

The other point relates to the theory of vitality. It is a marvellous thing that life has been manifesting itself before the eyes of mankind all these ages, and it still remains inscrutable and enigmatic. Physiologists to this day are divided into two camps regarding it, whether to look upon it as a separate and distinct force, or only as the outcome of the physical forces acting on the common properties of matter, to be resolved into these again at death. But it was never doubted that it was a force, whencesoever its active powers were derived. When therefore Dr. Dudgeon says, "Vitality is not a force, but is a property of a peculiarly organised matter, which, like all other matter, may certainly be acted on by the forces of nature, but whose property of vitality is not correlated to them," we must open our eyes and see that we are not the victims of an unconscious jugglery with words. I am not so presumptuous as to attempt to settle what vitality is, but in discussing the matter something may be done in the way of defining the terms used that may prevent the result being a mere logomachy. In the present case that is very necessary regarding the terms property and force, which, if not opposed to each other, are at least placed in separate categories and considered as distinct. What is meant by "property"? Scientifically speaking, I take it to mean any quality that is inseparable and inalienable from matter, that is inherent in it and part of its constitution, such as extension, divisibility, indestructibility, &c., qualities that are simply regulative; but gravitation, cohesion, and chemical affinity also belong to it, and they are active and capable of doing work and therefore are forces. We continually speak of the force of gravity, the force of cohesion, and the force of chemical affinity. this be admitted, then we have certain properties attaching to matter that are forces. Therefore ipso facto we cannot place property and force under separate categories, for the same thing may be both at the one time. Physicists, it may be observed, are now using the term force for the attractive and energy for the dispersive powers of nature, thus placing the control of the universe under the two elementary powers of attraction and repulsion. Howsoever this may be as an abstract view of things, I have never heard it denied that gravitation, cohesion and chemical affinity were properties of matter. then, does Dr. Dudgeon's statement stand that he regards vitality as a property and not a force? Further definition of the terms is evidently wanted.

Some confusion of thought has resulted in the past from regarding all exhibitions of power as necessarily due to those forms of it as seen in light, heat and electricity, but if the term energy be used in the case of these latter, whilst force is limited to the powers inherent in and inseparable from matter, greater clearness of

thought will be obtained.

Some years ago, it may be remembered, Dr. Guernsey threw out the suggestion that in the process of preparing high dilutions the medicinal properties of drugs might be transferred to the vehicle as if we were dealing with the transferable forces of heat, light and magnetism. If, as is contended here, the force of chemical affinity, to which the medicinal property of drugs is due, is of the nature of a property, it is inseparable from the substance of the drug, and therefore there can be no parallel between it and the manifestly fugitive qualities that belong to heat and magnetism. A speculative error of this kind may have practical consequences.

It may be remarked that nothing here is of the nature of an explanation of the nature of vitality, for that is too large a subject to be considered in this discursive way. I am only trying to throw a little more exactness into the use of the terms employed, but there is one idea germane

to the subject that I should like to mention. Upon whatever sources vitality may be dependent for its activity, the notion that it can be simply a property of matter meets with this difficulty. Properties are permanent possessions of matter, but life is not such. In all individuals there is a beginning and an end, and the gradual weakening of the vital energies after the meridian of life is passed looks more like the exhaustion of an imparted force than the impossible conception of matter losing its properties. If life were, as Dr. Dudgeon says, a property of matter, one does not see very clearly why it should not be continued indefinitely, for matter is not in the habit of losing its properties. A piece of mechanism wears itself out in the process of doing work, but life has the faculty of selfrenewal. Nevertheless the renewal becomes less and less perfect, and the organism finally ceases its activity altogether. Why, therefore, this should occur is, on the hypothesis that life is a property of matter, another problem for a solution.

I am afraid Dr. Dudgeon will complain that I am answering his questions by asking others, but the difficulties are there, and are not of my creating, and they are, in brief, these: First, the difficulty of regarding life as a property of matter; secondly, in regarding it as not a force; and thirdly, in regarding mind as the product

of something that is not mind.

The last item would land us very soon in metaphysic, and may perhaps better be left to the Journal of Mental Science, but the study of vitality may be discussed appropriately in a medical journal, and any light that can be thrown upon it must surely be of advantage to us as medical practitioners.

A CODE OF ETHICS.—Speaking of a code of ethics, it can be truthfully said that honest men and women do not need it, and knaves will not heed it. A code of ethics is like a law without a penalty. It sounds well, but accomplishes nothing.—Exchange.

Rhododendron.—The indication "worse in stormy weather" was never better exemplified than in a case of Dr. Moffat's, published in the North American Journal of Homeopathy for June (p. 401). The patient was a child of ten, of gouty inheritance, who for some years had suffered intensely during the winter, though well in the summer. Last autumn the pains (which had been intercostal, sciatic, &c.) assumed the form of prostrating headaches. Rhododendron, in the mother tincture, after three weeks seemed to have effected a complete cure, so that in January Dr. Moffat could report her quite well and independent of weather.—J. B. H. S.

ANNUAL HOMEOPATHIC CONGRESS.

The forty-ninth session of the Annual Congress of Homeopathic Practitioners of Great Britain took place at the Homeopathic Hospital on Friday, June 3rd, 1898, under the presidency of Dr. Eubulus Williams, of Clifton.

The proceedings opened at 10 a.m. with the reading of the President's address, before a large gathering of ladies and gentlemen, in the Board-room of the Hospital. A full report of the address, which is of exceptional interest, will be found

in another part of our present issue.

Among those present were Dr. Eubulus Williams, President, Dr. Dudgeon (London), Dr. Dyce Brown (London), Dr. Christopher Wolston (Edinburgh and London), Dr. Goldsbrough (London), Dr. Pope (Grantham), Dr. Proctor (Birken-Dr. Byres Moir (London), Dr. A. C. (Northampton), Dr. Epps (London), Mr. Norman (Bath), Dr. Hawkes (Liverpool), Dr. Hawkes (Ramsgate), Dr. Hayward (Birkenhead), Dr. Capper (Liverpool), Dr. Newberry (London), Mr. Johnstone (London), Dr. Bodmen (Devizes), Dr. Bodman, jun., Dr. Ramsbotham (Leeds), Mr. Knox Shaw (London), Mr. Frank Shaw (St. Leonard's), Dr. Galley Blackley (London), Dr. Carfrae (London), Dr. E. B. Roche (Norwich), Dr. Murray (Folkestone), Dr. Madden (Bromley), Dr. Burford (London), Dr. Clarke (London), Dr. Neatby (London), Dr. Powell (London), Dr. Neild (Tunbridge Wells), Dr. H. Nankivell (Bournemouth), Dr. F. Nankivell (Sydenham), Dr. Perey Wilde (Bath), Dr. Roberson Day (London), Dr. George Clifton (Leicester), Dr. Cooper (London), Dr. Black-Noble (London), Dr. Gilbert (Reigate), Mr. Dudley Wright (London), Dr. Charles Black-Robert (Reigate), Mr. Dudley Wright (London), Dr. Charles (Reigate), Mr. Dudley (R Dr. Charles Blackley (Southport), Dr. Pullar (London), Dr. Stonham (London), Dr. Hamilton (Newcastle), Dr. Nicholson (Clifton), Dr. Murray Moore (Liverpool), Dr. Renner (London), Dr. Hayle (Rochdale), Dr. Scott (Huddersfield), Dr. Storrar (Southport), Dr. Stopford (Southport), Dr. Shirtliff (Malvern).

Dr. Dudgeon proposed a vote of thanks to the President at the close of the address. Dr. A. C. Clifton seconded, and the

vote was carried with acclamation.

After an interval for the receipt of subscriptions, Dr. Clarke read his paper on the "Doctrine of Signatures and the Law of Similars."

Discussion.

Dr. Dudgeon said the instances given by Dr. Clarke were very interesting and pertinent, but Dr. Dudgeon thought, on the whole, the doctrine had been a great failure. The *Orchis* had not been a success in diseases of the testicle, and *Phallus*

impudicus had not fulfilled the promise of its signature. He thought the flower of Euphrasia was not very much like an eye. In his own experience he had found it effective in a case of rheumatic sclerotitis, but he did not know that it would "brighten" the eye. Rubia and Rhatany had been recommended for hemorrhages on the signature of their redness, but that might be due to their styptic properties. The Saxifrage (stone-breaker) was not of special use that he knew of for stone. Aristolochia was formerly used for snake-bite, but if this is effective it could not be attributed to any signature. On the whole he did not think "signature" could be regarded as a

safe guide to practice.

Dr. Proctor had listened with pleasure to the paper. could hardly call this "advanced medicine," but rather retrograde. The subject was certainly one of interest, but the impression left on the mind was this—we have had the doctrine of signatures for thousands of years, but what had it done for medicine until the homeopathic method was brought to light? As the same time the universe was a universe, and we ought not to be surprised at analogies cropping up. He would say that the doctrine of signatures is really the guide the lower animals possess in choosing their medicines, and he would restrict signature practice to the medication of animals (laughter). He had read that certain African natives, when they come across a new fruit, offer it to a monkey. If he eats it and prospers, all right; if he die, they leave it alone. He thought the Africans were thus really following Hahnemann's method of drug-proving. He asked, Are we going to be on the side of the man or on that of the monkey?

Dr. Dyce Brown did not understand that Dr. Clarke would recommend this as a means of getting indications for prescribing, but it was a very interesting subject, and it was useful to have a romantic and poetical side-light thrown on our practice once

in a while.

Dr. Percy Wilde said his own experience of the doctrine of signatures arose from tracing the history of drugs and why they fell out of use. Many drugs (*Bursa pastoris* among them) were dropped out of the old-school materia medica because no active principles could be found in them to account for their curative virtues. They remained out until homeopathy restored them. He would be sorry to see homeopathy in any way mixed up with the doctrine of signatures.

Dr. Goldbrough said he never quite knew whether to take Dr. Clarke seriously or not. He doubted whether it was safe to adopt a childlike spirit with regard to childlike doctrines. He suggested that it (the doctrine of signatures) might have arisen as an afterthought, the resemblance being found after its

useful properties had been discovered. Still there is something in the doctrine of correspondences, which, however, rests on an entirely different basis. It is a question of biology, and he thought Dr. Clarke had put us on a wrong scent. The whole doctrine is a remnant of mental childhood.

Dr. MURRAY MOORE said that he did not consider the doctrine of signatures a doctrine at all. It was a mere col-

lection of old traditions.

Dr. Cooper said the subject as a matter of discussion was hardly calculated to be so well worked out in a meeting like this as in articles in journals. However, he was glad to add anything he could in connection with the matter, as it had been brought forward. We had not to go back to the old doctrine but to consider how far this doctrine could be brought to our own uses. He defined the position of our school as being that our provings provide definite knowledge. But, notwithstanding this, there are many difficulties in the way. For instance, we have an enormous number of symptoms—too numerous to use. Again, it is difficult to find healthy persons on whom to make provings. He had obtained symptoms of medicines given to deaf persons, and had used them successfully in treating disease. But he feared we were too scientific nowadays to accept these. The question, he said, is, Can we make use of the doctrine of signatures? In order to do this he thought we should have to redefine the word. We ought to confine its use to plant remedies, with which we come into relation with the laws of life. He would thus define signatures as—"any features in plant life that could afford indications for their use in disease." He illustrated his meaning by Calendula. It was suited to persons who had aggravation from damp. This he could not understand until he found that the flower closed when there was gloom, as a cloud passing over. most noticed from 9 a.m. to 3 p.m., and here he obtained the times of aggravation. He had cured many cases of spinal irritation on this indication of the remedy.

Dr. Madden, like Dr. Goldsbrough, did not take Dr. Clarke seriously. To be of any use the doctrine of signatures ought

to be universal.

Dr. Pritchard said the subject was interesting, and instanced *Hamamelis* and *Millefolium*, as blood-red plants or flowers, for hemorrhage. He thought we wanted remedies that produced pathological conditions. There is too much surgery and antitoxins and too little homeopathy; provings also are wanted. St. Paul had given us authority for this when he said "prove all things."

Dr. Herbert Nankivell said the doctrine of signatures was an interesting relic, but of no use, as we have a nobler

and better method of finding indications for drugs. He wondered there were not more instances of correspondence than there were.

Dr. J. W. HAYWARD thought the subject was not sufficiently

serious.

The President, in calling upon Dr. Clarke to reply, said he thought that probably if asked no two men would give the

same definition of what a signature is.

Dr. Clarke thanked the Congress for the cordial reception his paper had received, and he assured Drs. Goldsbrough and Madden that he was never more serious in his life than when he wrote it. He thought one reason why the doctrine of signatures had fallen into discredit was that before Hahnemann's time no one knew how small a quantity of a medicine was enough for therapeutic purposes. They got the right remedy, but gave too much of it, and spoiled their cases. He still believed there was a vast deal of use to be made out of the doctrine rightly taken.

On the invitation of the members residing in London and suburbs the members of the Congress lunched at the Holborn

Restaurant at one o'clock.

At two o'clock punctually the Congress reassembled and selected Leicester as the place of meeting for 1899, the date being fixed for the second Thursday in June.

The following officers were elected: President, Dr. Byres Moir; Vice-President, Dr. George Clifton; Local Secretary,

Dr. Mason.

Dr. Burwood's paper on "Barometrical Pressure in Relation to Disease" was then read. The object of his paper was to show the effect of sudden fall of barometric pressure on the human body, specially in relation to cardiac weakness. By careful observations for sixteen years he had been able to predict when certain patients would require his assistance by watching his aneroid. He also traced epidemics of diphtheria to high atmospheric pressure, accompanied by drought and little or no wind. He had also been able to trace sudden outbreaks of diarrhea to a fall of barometric pressure.

The discussion was opened by Dr. HAYLE (Rochdale), who drew attention to the complicated nature of the subject. He thought the magnetic influences were very important, and had more to do with the frequency of deaths in the early morning than barometric pressure. The body temperature was always lower at night, sometimes, after deep sleep, being as low as 95 in health. This was due, he thought, to vitality being at a low ebb as result of magnetic influences of the earth. He also remarked that a sudden barometric fall was very rare after an

anticyclone.

Dr. Nankivell (Bournemouth) had noticed epidemics of pulmonary hemorrhage, which he attributed to low barometric pressure. He also spoke of the effect of high altitudes on the circulation.

Drs. Murray More, Dyce Brown, Byres Moir, Madden, Jagrielski, and W. T. P. Wolston also took part in the discussion. Dr. Burwood then replied.

Mr. Wilkinson then read a paper on "Associated Symptoms occurring in both Provings and Disease without obvious Patho-

logical Basis."

The object of his excellent paper was to show that the association of certain symptoms which was produced both by disease and by certain drugs tended to place the law of similars on a par with other natural laws. He compared the association of distant symptoms to the over-tones produced on stringed instruments in an orchestra. His paper deserves careful study, and would tend to abolish the pathological prescribing so universal among modern homeopaths.

The following gentlemen took part in the discussion, Dr. Hughes, Murray Moore, Goldsbrough, Pullar, Moir, Stonham, Galley Blackley, and Proctor, none of whom, according to Dr. Wilkinson's reply, seemed to have grasped

the intent of his paper.

In the evening the members of Congress, with their friends, ladies as well as gentlemen, dined together at the Holborn Restaurant.

SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

The eighth meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thursday, May 5, 1898, at a quarter to eight o'clock; Dr. Neatby was in the chair.

Dr. Galley Blackley read a paper "On the Physiological and Therapeutic effects of some of the Principal Hematics," of which the following is a synopsis: 1. Iron—its relation to chlorosis; 2. Arsenic—its relation to profound anemias, idiopathic, or otherwise; 3. Phosphorus—its relation to pernicious and other anemias; 4. Lead—its correspondence to pernicious anemia; 5. Mercury—the true remedy for syphilitic anemia.

A good discussion ensued, opened by Dr. Hughes, who raised the questions whether *Iron* in anemia acted as a food or

homeopathically, and whether Phosphorus acted on the blood

directly or through the liver?

Dr. Nankivell (Bournemouth) spoke of the value of Arsenic in pernicious anemia. He advised giving it hypodermically in doses of ten drops of the 2x daily. This method causes no symptoms of irritation, and he had used it thus without inconvenience in a case where the 3x internally produced eczema at once. Dr. Goldsbrough recommended Ferrum Acet. 3x in cases of anemia accompanied by great pain in the epigastrium. Dr. Neild mentioned the fact that anemic patients in Tunbridge Wells, where the water comes from chalybeate springs, still need Iron and do well on it. Dr. Lestock Reid mentioned a very interesting case of severe anemia resembling pernicious in a patient who had long suffered from "tic," and was in the habit of taking various coal-tar products for its relief. He first treated the neuralgia without much effect, and then proceeded to treat the anemia (which he thought was due to the coal-tar drugs). He gave Plumbum with rapid improvement in general health and relief to the neuralgia. A complete cure resulted. Dr. Dyce Brown recommended Levico water and the Llandrindod Wells. Drs. Madden, Byres Moir, V. Green, Purdom, and the President also took part in the discussion. Dr. Blacklev in his reply referred to the use of Manganese in chlorosis and anemia, and with reference to the Protosalate of Iron said that in cases where constipation is present it relieves it in a few days.

Dr. Byres Moir then presented a communication on "Medicines of use in Septic Conditions, with especial reference to Ulcerative Endocarditis." The medicine which he had found of most service in ulcerative endocarditis was Naja. A short discussion followed, in which Drs. Epps, Goldsbrough, Carfrae, Nankivell, Blackley, Dudley Wright, Day,

and Neatby took part.

TROPHIC LESIONS IN GENERAL PARALYSIS.—Cololian (Archives de Neurol., March, 1898) records 57 cases of general paralysis of the insane with reference particularly to the occurrence of trophic lesions in this disease. Of these cases 33 were men, 24 were women. The commonest lesion was found to be alopecia, which occurred in 26 cases. Changes in the teeth and nails occurred next in frequency—19 and 17 cases respectively. Ichthyosis occurred in 11 cases, and other skin lesions (for example, bulle, edema, and zona) with less frequency. General wasting occurred only in 3 cases, muscular wasting only in 1 case. Cutaneous pigmentation, hematuria, perforating ulcer, and erythema were only found in isolated cases. In most of the cases more than one trophic lesion occurred, and in only 8 of the 57 cases was there no evidence of trophic lesion.—British Medical Journal.

REVIEW.

FRENCH HOMEOPATHIC PHARMACOPEIA.*

WE have received from the publishers a copy of the above, which has been compiled and published in accordance with a resolution passed at the International Homeopathic Congress held at Paris in 1889. The book is well printed on good paper, and consists of 400 8vo. pages. It is divided into two parts.

The first part deals with the general methods of manufacture, the vehicles employed, the methods of dis-

pensing, &c.

The second part is divided into three chapters. Chap. i. deals with the vegetable materia medica, chap. ii. with animal substances, chap. iii. with chemical and mineral substances. These divisions are certainly new in the compiling of an official pharmacopeia, and will commend themselves alike to doctors, pharmacists, and students. The general directions are plainly and simply placed before the pharmacist. The fresh plant tinctures are made in a different manner from that ordered in our pharmacopeia, following more closely the American There is, however, a total absence of the tables for calculating the percentage of moisture, &c. This we consider detrimental to the value of the book. and, what is more important, to the tinctures, as they must necessarily vary very considerably in the mother tinctures, and thus in all the dilutions. For those doctors who prefer to give the plants in their entirety there is in the majority of the vegetable substances an alternate method of trituration prepared from the dry plant.

The fresh plant tinctures are divided into three classes,

the modes of preparation being slightly varied:—

Indigenous plants with much juice.
 Indigenous plants with little juice.

3. Exotic plants.

Tinctures of these latter the compilers recommend to be imported from the countries to which the plants are indigenous.

^{*} Pharmacopée Homœopathique Française, régidée sous le patronage de la Société Française d'Homœopathie par H. Ecalle, L. Delpech, et A. Peuvrier (Pharmaciens à Paris), avec la collaboration de MM. les Docteurs Marc Jousset et Vincent Léon-Simon.

Part ii. chap, i. consists of the names, natural orders, descriptions, and parts used of the vegetable materia medica. Chap. ii. consists of the animal materia medica. These are slightly different from ours, but the same in number. It includes the following omitted by the B. H. P.: Apis Mel., Blatta orient., Castor equi., Formica, Murex, Ol. jecor. asel., Salamandra aquat. The following, which are given in the B. H. P., are omitted in the French: Theridion, Aranea Scinenia, Cimex, Mygale, Doryphora, Trombidium, all except Theridion being included in the Appendix of partially proved remedies only. Chap, iii. deals with the chemical and mineral substances. Methods are given for making the chief of them, but there is a total absence of test solutions by which to determine their purity, and we are sorry that such an important part should be omitted.

The Appendix contains one remedy, viz., *Thyroidin*, the preparation of which is carefully and fully described. It also mentions that extract of pancreas, liver, testicle, brain substance, &c., can be prepared in the same manner.

There is a notable absence of ointment bases, glycerines,

liniments, &c.

The volume closes with an index and a complete alphabetical table of the French names. The compilers have endeavoured, and we think succeeded, in making the book a valuable addition to homeopathic literature. It is not simply a book of directions, as it contains the principle uses of the more important medicines, thus making it a useful work for the doctor and student as well as the pharmacist. Although not entirely free from error, it shows that much care has been bestowed upon it by the compilers. We suggest that future editions should be bound in cloth, with cut edges.

Apis for Boils and Carbuncles.—Dr. Sulzer find this the best medicine for assuaging the pain of furuncles and carbuncles, and securing a favourable course for them. He gives the 3x or 4x, two drops every two or three hours.—Hom Recorder, September, p. 405.

-J. B. H. S.

Bryonia Chlorosis.—Dr. Van den Berge has the highest opinion of bryonia in this condition. He relates a case where nourishing diet and ferruginous mendication had accomplished nothing, while bryonia 30 and more moderate nourishment cured in a fortnight, though the malady had lasted for months. In stout subjects he finds calcarea a useful ally.—Journ. Belge d' Homæopathie, July-August.—J. B. H. S.

ANSWERS TO CORRESPONDENTS, NOTES AND QUERIES.

** In this department we shall be happy to reply to any inquiries relating to homeopathy or to the matter of our magazine that our correspondents may like to address to us. We cannot, of course, undertake to give medical advice in particular cases, which is the business of a medical attendant; but if our medical readers like to put queries to each other regarding points of practice or puzzling cases, we shall be happy to insert queries and replies.

FAKIRS' DISPENSARY, LUCKNOW.

WE have received from Lucknow a letter signed by several gentlemen stating that the notice of the Dispensary in our February issue is incorrect. Though formerly a public one it is now a private concern. And so far from being the only dispensary in Lucknow where homeopathic medicines are distributed to the poor, there are several others in the city.

Obituary.

DR. CLAUDIUS BUCHANAN KER.

HOMEOPATHY has lost in Dr. Ker one of its earliest and ablest defenders. The contemporary and friend of Henderson, Drysdale, Russell, Black and Madden, he did much by his numerous articles in the British Journal of Homeopathy to illustrate by theory and practice the advantages of the system of Hahnemann. Of a retiring disposition, he did not often put in an appearance at the congresses of homeopathic practitioners, and was consequently not personally known to many of his colleagues. but by those who were privileged to enjoy his friendship he was greatly esteemed, and his loss will be deeply felt by a large clientele of those who benefited by his great practical skill in Cheltenham, where he practised for more than half a century. A relative and intimate of Tennyson, he was an enthusiastic admirer of the poetry of the late Poet Laureate long before it was appreciated by the general public. His literary tastes led him to take an active part in the foundation of the Royal Crescent Library of Cheltenham, of the council of which he was a member, and at one time president. He continued in the active practice of his profession to the last, though of late years his health was rather feeble. An attack of influenza on the 6th of May proved rapidly fatal, for the following day he died. Dr. Ker was a graduate of Edinburgh University, 1844, a member of the British Homeopathic Society, and of the Society for Psychical Research. He leaves a family of two sons, one of whom is in the medical profession, and three daughters, whose names are well known in connection with the Ladies' College of Cheltenham.

[A correspondent has favoured us with the following additional particulars of our deceased colleague]:—

After a residence of fifty-three years in Cheltenham, during which time he continued to the last in active practice, Dr. C. B. Ker passed away on May 7th, after a very short illness, at the age of seventy-seven.

He was a native of Greenock, and graduated in Edinburgh in 1844. In 1856 he married Isabella, daughter of General Sir David Leighton, by whom he was pre-

deceased.

Dr. Ker was a well-known figure in Cheltenham society, and was highly esteemed and respected for his sterling integrity of character.

ARTHUR JOHN OCKENDEN, M.R.C.S.

WE very much regret to learn that our respected colleague, Mr. A. J. Ockenden of Brighton, has succumbed to the after effects of an attack of influenza at the early

age of forty-three.

Mr. Ockenden was a student of Guy's Hospital and qualified in 1874. He was a conscientious homeopathist and a careful and capable practitioner, as we have frequently had opportunity of knowing through patients who had been under his care. His acquaintance with the materia medica was unusually extensive and accurate. Mr. Ockenden had never enjoyed robust health.

Cheffenhau of the council of space to we a manby, and at one time the section.

GENERAL CORRESPONDENCE.

POISONOUS BULBS.

To the Editor of The Homeopathic World.

SIR,—Enclosed kindly find stamps amounting to seven shillings, for which please send me bound volume of HOMEOPATHIC WORLD for 1897. I intend getting them bound every year in future.

I am sending per same post a bulb, used by a Kafir doctor here with a fatal result in two cases out of six. Would you kindly hand them to some homeopathic doctor for proving, and let me know the result. Kindly let me know name and order of plant. The evidence of the district surgeon here (who is an

allopath) at the inquest was as follows:-

"On making a post-mortem examination of the two bodies I found a greenish-white substance in the stomach. Blood vessels on the surface of the heart were extremely congested; on the internal surface of the stomach there were several raised patches like blisters; these extended the whole length of the bowels. The heart was very much contracted, and in one case the doctor stated it as his opinion that the contraction must have been so violent that it caused rupture of the apex."

The native witnesses all stated that within five minutes of administration very severe vomiting took place, copious perspiration, difficulty of breathing; death within half an hour.

Those who recovered through the administration of a root are still (ten days after) suffering from vomiting and purging, although better.

The root administered as an antidote I cannot procure.

The plant was pounded, mixed with water and Kafir beer, and each patient was given about a pint of the mixture.

Hoping this might interest the faculty, and that it may be of

some use.

I am not a qualified doctor, but am often called upon to do the work, as no homeopathic medical man is to be got within two hundred miles.

With a hope that I have not taken up too much of your

valuable time,

I am, Sir, yours obediently, Wm. V. S. Cockson.

Engcobo, Tembuland, South Africa. April 20, 1898.

[We have received the bulbs in good condition, and are taking steps to have them identified. But in order to do this

it will be necessary to have them grown. We would suggest that our correspondent should send the whole plant to a competent botanist in the colony. When we have further information we will let our readers know, and also when we have preparations ready for provers.—Ed. H. W.]

VARIETIES.

GALL STONES IN NEWLY BORN INFANTS.—John Thomson (Edinburgh Hospital Reports, vol. v.) records the case of a male child who became jaundiced two days after birth, and, getting steadily weaker, died on the twentieth day. The urine was brown; the motions vellow, and later green, but never clay-coloured. There was no ordinary meconium, but yellow matter like ochre was passed. At the necropsy no abnormality of the bile ducts was noticed; the liver was normal to the naked eye, but microscopically showed commencing cirrhosis and some fatty infiltration. The gall bladder contained one calculus weighing 25 mg., which was elongated and constricted in the middle, a smaller one, and several fragments. Their combined weight when dried was 30 mg. Their composition showed biliverdin and traces of cholesterin. The author has collected six other cases with biliary calculi in which jaundice was present either at or immediately after birth. In all death occurred within one month. In the only two in which a description of the bile ducts is given abnormalities were found. Probably in this class of cases the same conditions are present which give rise to congenital obliteration of the bile ducts.-British Medical Journal.

Dangers of the Nasal Douche.—Lichtwitz (Sem. Méd., November 26, 1897) deprecates the routine prescription of the nasal douche in all cases of hypersecretion of the nasal mucous membrane. Irrigation is called for only when the nasal fossæ require clearing of pus and crusts, for instance, in idiopathic ozena. This affection is mainly limited to the nasal fossæ properly so called, and irrigation is in such a case the most fitting form of procedure. An ordinary syringe or enema syringe with suitable nozzle should be used. In all other nasal affections irrigation is inadequate or useless; it is even danger-Repeated flooding of the mucous membrane may give rise to olfactory lesions. Antiseptics are highly injurious, and pure water is badly borne; the physiological solutions of sodium chloride, sod. bicarb. or sod. sulph. are the only harmless liquids. In numerous cases irrigation has caused the sense of smell to be temporarily or permanently diminished or lost. Distressing frontal or occipital headache may result owing to the liquid passing into the sinuses. The injection of irritating liquids may even set up inflammation of these cavities. The most skilful and careful irrigation is insufficient in many cases to prevent the resulting headache. A very grave complication is the penetration of the liquid into the middle ear, suppurating otitis media occasionally supervening. In acute coryza, especially in children, douching should never be practised. In one such case known to the author mastoiditis followed irrigation of the nasal cavities. The predisposition to otitis is increased after retronasal operations, in particular after ablation of adenoid vegetations. For eight years the author has given up all irrigation after pharyngotonsillotomy, and during that period has met with no case of postoperative complication.—British Medical Journal.

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET. BLOOMSBURY.

Hours of Attendance: - Medical (In-patients, 9.30; Out-patients, 2.0), Daily; Surgical, Mondays, Tuesdays, Fridays, and Saturdays. 2.0; Diseases of Women, Tuesdays, Wednesdays, and Fridays, 2.0; Diseases of Skin, Thursdays, 2.0; Diseases of the Eye, Mondays and Thursdays, 2.0; Diseases of the Throat and Ear, Wednesdays, 2.0; Diseases of Children, Mondays and Thursdays, 9.0 a.m.; Operations, Tuesdays, 2.30; Dental Cases, Thursdays, 9.0 a.m.

MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Althaus (Julius) On Failure of Brain Power (Encephalasthenia): Its Nature and Treatment. 5th. ed., enlarged. Cr. 8vo. (Longmans. Net, 5s.)

Atkinson (T. Renell). Aids to Examinations in Medicine, Surgery, Mid-wifery, and the Allied Sciences. Part ii. 12mo, sd., pp. 170. (Bail-lière. 2s.)

Bastian (H. Charlton). A Treatise on Aphasia and other Speech Defects. With Illustrations. 8vo, pp. 374.

(Lewis. 15s.) British Pharmacopæia (The). lished under the Direction of the General Council of Medical Educa-tion and Registration of the United Kingdom, 1898. 8vo, pp. 468. (Spottis-

woode. 10s. 6d.)

Coles (Alfred C.). The Blood: How to
Examine and Diagnose its Diseases. With 6 Coloured Plates. 8vo, pp. 872. (Churchill. 10s. 6d.) Gribble (J. D. B.) and Hehir (Patrick).

Outlines of Medical Jurisprudence for India. 4th ed. Revised and Corrected. Edited by Surgeon-Major Patrick Hehir. 8vo, xxv.— 498. (Higginbotham & Co. (Madras). (Thacker.

Jayne (H.). Mammalian Anatomy: A Preparation for Human and Com-parative Anatomy. Part 1, The Skeleton of the Cat Compared with the Skeleton of Man. Illustrated. Roy. Svo. (Lippincott. Net, 21s.)

Kelly (Howard A.). Operative Gyne-cology. Roy. 8vo. (Hirschfeld. Net,

Mann (J. Dixon). Forensic Medicine and Toxicology. 2nd ed., Revised and Enlarged. Roy. 8vo, pp. 698. (C. Griffin. 21s.)
Manson (Patrick). Tropical Diseases.

A Manual of the Diseases of Warm Climates. With 88 Illustrations and 2 Coloured Plates. Cr. 8vo, pp. 424. (Cassell. 10s. 6d.)

Pearmain (T. H.) and Moor (C. G.). Applied Bacteriology. An Intro-ductory Handbook for the Use of ductory Handbook for the Use of Students, Medical Officers of Health, Analysts, and Sanitarians. 2nd ed. (University Series.) 8vo, pp. 480 and Plates. (Baillière. Net, 12s. 6d.)

Rose (William) and Carless (Albert).

A Manual of Surgery for Students and Practitioners. (University Series.) 8vo, pp. 1,162. (Baillière. 21s.)

(W. S.). Lectures on Thayer Malarial Fevers. 8vo. (Hirschfeld.

Thompson (C. J. S.). Notes on Pharmacy and Dispensing for Nurses. (Burdett Series.) Cr. 8vo, pp. 101. (Scientific Press. 1s.)
Wood (H. C.). Therapeutics; Its Principles and Practice. 10th edition of

Treatise on Therapeutics. Revised. Roy. 8vo. (Smith, Elder and Co. 18s.)

TO CONTRIBUTORS AND CORRESPONDENTS.

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

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

envelope.

All advertisements and business communications to be sent to the "Manager" of the Homeopathic Publishing Company, 12, Warwick Lane, Paternoster Row, London, E.C.

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

CORRESPONDENTS.

Communications received from Mr. R. H. Bellairs, Oxford; Dr. Purton, Birkenhead; Mr. W. Pumfrey, Wantage; Dr. Dudgeon, London; Dr. Stanley Wilde, Cheltenham; Dr. Cooper, London; Dr. Kafka, Carlsbad; Mr. Tembuland, Cockson, Engobo, S. Africa; Dr. Croucher, St. Bexhill; Leonard's and Rosenan, Kissengen; Dr. A. C. Clifton, Northampton; Messrs. Ghosh, Kishore, J. N. Sen, Ghosh, Lucknow.

BOOKS AND JOURNALS RECEIVED.

Hom. Review.—Zoophilist.—Chemist and Druggist.—H. Recorder.—Hahn. Advocate.—Gaz. Méd. de Paris.—Il Secolo Om.—Allg. Hom. Zeit.—Indian Hom. Review.— Edinburgh Evening Despatch.—Med. Counsellor.—Archiv. f. Hom.—N. A. J. of

Hom.—Pacific Coast J. of H.—Hom. News.—Med. Century.—Minn. Hom. Mag.—Amer. Med. Monthly. — Amer. Hom. — H. Monatsblatter.—Clinique. — Pub. Health Journal.—J. of Orif. Surg.—Med. Times.—Star Lore.—Rev. Hom. Française.—Med. Monat. f. H.—Critique.—Vaccination Inquirer.—Hahn. Monthly.—Hom. Phys.—New Eng. Med. Gaz.—L'Art Médical.—Med. Advance. H. Tidsskrift.—The Medical Treatment of the Drink Habit. Dr. A. S. Kennedy.

The Homeopathic Morld.

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Snake-venom—its Action and Effect. Annual Congress of Homeopathic Practitioners.

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HOMEOPATHIC WORLD.

JULY 1, 1898.

"THE PROGRESS OF HOMEOPATHY."

In December last we put forth an appeal to the homeopaths all over the world to close up their ranks and unite in proclaiming the truth of which they are the custodians; and we showed that in that way it would be possible for homeopaths to make a successful effort to obtain the privileges to which they are entitled, both individually and as a school, wherever these are denied to them. We have had many gratifying assurances that our words were not uttered in vain; but, so far as some of the proceedings of the late Congress are concerned, we are fain to confess that they do not seem to have made any serviceable impression on the official circle of the British homeopathic body.

We are not now alluding to the addresses or the discussions. These passed off with all becoming smoothness; and the address of the President, which is always the chief feature of the day's business, is in every sense worthy to compare with those of previous years. We had the privilege of publishing it in full last month, and we have no doubt readers have found it intensely interesting and instructive from beginning to end, and above all things readable and well written. Dr. WILLIAMS is to be heartily congratulated on his effort. It is a pity he does not contribute to our literature more often.

But the matter we have more particularly on our mind in writing this article is the Congress dinner.

As we have frequently remarked, there are few more

potent methods of advancing therapeutic knowledge than the close interchange of ideas and experiences that take place between earnest therapeutists when they meet around the social board. It is for this reason among others that we look upon the Congress Banquet as one of the most important functions of the day; and we trust the ladies will not misunderstand us when we say that we regard a certain innovation of recent years as not being an unmixed good. The Congress dinner, in our opinion, should be a purely "shop" affair. But so long as it is graced with the presence of the non-professional fair sex, we cannot be sufficiently hard hearted to confine our conversation or our thoughts to conquests (actual and possible) achieved by our remedies over disease. Therefore, though we should lose much in the way of brightness and the amenities of life, we are strongly of opinion that the objects of the Congress would be better attained if some other way of securing the good offices and social graces of our lady friends for the purposes of the Congress could be devised. At the International Congress this was done by means of an opening soirée, and there is no reason why this should not become an annual institution.

Another point to which we take exception is the musical accompaniment. That this is extremely diverting we do not deny. But then it is just the diversion that we object to. The progress of therapeutics in general and of homeopathy in particular should be the all-pervading idea of the Congress, from the President's address to the last of the after-dinner speeches. That is what brings, or is supposed to bring, the members together, and we cannot but think that the lapsing of the Congress into the embellishments of song in recent years is a symptom of the general decay of the earnestness for which the pioneers of homeopathy were so remarkable. We thought we heard one combatant of the old guard allude to it as "fiddling while Rome is burning." Perhaps that was not quite justified; but it must be

remembered that our battle is not won by a very long way. Our American cousins wonder how it is that we do not obtain the privileges they have long ago secured for themselves. The reply to that is, because we are not so much in earnest. When we have won the privileges we seek, and have gained the position in the profession and before the public, which we are entitled to, then will be the time to call in the musicians to make merry for us. In the meantime the questions that bring us together should be of sufficient interest to sharpen our appetites and afford pabulum for conversation.

The next point to which we would direct attention is the speeches. We are not of those who regard after-dinner speeches, when the dinner has a "cause" for its raison d'être, as mere garnish to a feast, therefore we think the toast list a matter of real importance. The toast of the evening on June 3rd was "The Progress of Homeopathy." We are unable to criticise either the speech of the proposer or that of the responder, as, unfortunately, neither speech penetrated to the quarter of the room where our reporter was sitting. But we think we shall be within the bounds of exactitude if we say that neither could be described as a particularly rousing affair. We have no knowledge of the inner working of the official ring, so we cannot tell how it came about, but it certainly struck us as curious that for such a toast as that there should have been selected two gentlemen who are so exceedingly modest about their homeopathy, that they do not allow their names to appear in the Homeopathic Directory.

This piece of official management is what our friend Dr. Dudgeon would call the cult of Mr. Turveydrop carried to an extreme. If the progress of homeopathy in Great Britain depends on advocates whose homeopathy is of no more robust a type than this, there is no wonder that the progress is in a backward direction, and that the list of its avowed professional adherents is less by almost one-third than what it was some dozen years ago.

Other toasts of the evening, notably that of "Our

Visitors," proposed by Dr. Burwood and replied to by Mr. Stilwell, created more animation, but the speech which met with the best reception was one which did not appear on the official programme at all. An allusion by Mr. Stilwell to the presence of an American guest, Dr. Goldsmith, of Cincinnati, was received with great cheering, as is every allusion to America in our public gatherings now. When Mr. STILWELL sat down there were loud calls for Dr. Goldsmith from all parts of the room, and in response he rose and made the speech of the evening. It was a speech full of the animation, earnestness, confidence, and belief in homeopathy which accounts for the position homeopaths hold in America to-day, and formed the strongest contrast to the modest tone of homeopathic progressists on this side of the water. Dr. Goldsmith made graceful allusion to the growing friendship between the two branches of the English-speaking family, which have too long been separated by misunderstandings, and we trust that one result of the rapprochement will be the adoption on the part of British homeopaths of the methods which have made for progress in the great Empire of the West. The essential feature of those methods, as Dr. Goldsmith said, was mainly this: the persistent bringing before the public and the authorities of the truth of the system without troubling about what might be said by anybody. It is, in fact, the positive method advocated in our "Plea-for-Solidarity" article of December last.

We have only one more criticism to make on the subject of the dinner, and that has reference to the seating. Small detached tables are in a way very cosy, but they break up the function and destroy its unity. In this way they may be taken as, to some extent, typical of the very defect we complain of in British Homeopathy—its individual isolation and want of solidarity. But that is not the only point. The organising powers seem to think that members are not capable of finding seats for themselves, and therefore the whole party must have

places allotted to them by some grandmotherly official like so many children who need to be taken care of. In one instance we heard of, a guest had been invited for the express purpose of meeting a member from the provinces. By some cast-iron regulation the inviter found himself seated by his guest, while the friend who wanted to meet the latter was helplessly planted in a distant part of the room. All this is very nice, very official and orderly, but also very dead. Let the President and official members of the Congress have their places allotted to them, but for the rest, members should be free to group themselves as their inclinations lead them—a matter which the officials with all their wisdom and prescience can hardly be expected to divine.

NEWS AND NOTES.

Dr. Shelton on Solidarity.

We have received from Dr. George G. Shelton, of New York, a copy of his valedictory address delivered before the Homeopathic Medical Society of New York, on January 15th last, on the occasion of his retiring from the presidential chair. The title of his address (which has been printed by the Society) is "Aggression or Concession—Which?" It is marked by singular eloquence throughout, and pleads for the union of all schools of medical thought in the one endeavour to advance the therapeutic art. Dr. Shelton shows, as we have done, that envy, hatred, and malice are no legitimate children of reform, and are not even its necessary attendants. We will make a few quotations from the address itself:—

"If, then, as I have endeavoured to show, the difference, or at least the bitter antagonism, between the two schools did not originate in the consideration of the "Law of Similia," as an abstract question of science; if the causes of the antagonism were essentially unreasonable and have largely passed away; if within the old school itself the most antagonistic views are tolerated and revolution is the order of the day; and if our own law has through many decades continually proved the justice of its claim to scientific consideration and honour—why should

we not form one brotherhood united in the search for truth and human

"The question as thus put greatly simplifies the problem. If we can sweep into the rubbish-heap of the past, as unworthy of respect, nearly everything that has made the division what it is, we have left for adjustment only practical conditions and scientific problems which intelligent men can discuss without rancour and with regard to some of which at least reasonable compromises, involving no sacrifice of principle, may be reached. Instead of hostile and bitter aggression the way may be open in more than one particular to friendly and sensible concession. To present a programme for such readjustments of the practical relations of the two schools is, however, not at all my present purpose. I can merely call attention to a few considerations which bear more or less directly upon some of the points which such a programme involves.

"And, lastly, let me say that whatever development of knowledge and change of belief the future may bring forth, we ourselves cannot, if we would, depart from the above position. We cannot merely on demand, without a rational change of conviction, alter or change our adherence to the law. We have accepted it; we practice under it; our belief in it increases from day to day with our growing experience of its truth. We believe it to be a law of nature, and holding that conviction we cannot choose our course. If our law is found to be no law; if our truth is shown to be untruth, we will discard it with joy; but, as long as the case stands as it stands now, we can never recede from our position or cease to stand firm in its defence, and, when it is ignored or attacked, to be aggressive in its support.

"And let us never forget what is the real issue involved. It is not the demonstration of a theory, not the perpetuation of a dogma, not the survival of any particular method. It transcends all of these; it is above all sects and all schools. It is the unification of all efforts that have for their ultimate end the physical welfare of our fellow-man. Already there is harmony in surgery with its brilliant achievements; in pathology, which has converted the winding path of diagnosis into a broad and grand highway; and in hygiene, which protects our homes, purifies our food, and prolongs our lives. To these should, and eventually will, be added unity in therapeutics—a common understanding of the laws of disease and of their cure and a common practice based on certain and far-reaching knowledge. Let us manfully do our part to help the one Truth thus to come by its own."

HAHNEMANN'S FUNERAL.

In our last issue we briefly alluded to the great ceremony of the removal of the body of Hahnemann from Montmartre cemetery to Père-Lachaise. We give this month a fuller account of the interesting proceedings. An

official account has been published in French in the form of a pamphlet of twenty pages, a copy of which has been kindly forwarded to us. We learn from this that the subscription list has risen to 7,613 francs. It is still open to our readers to send their contributions, if they have not already done so.

ACTION OF THYROIDINE ON THE SEXUAL SYSTEM.

THE Medical Press of June 1st contained the following note, which it would be well for homeopathists to bear in mind for use in cases of this kind.

"THE ANAPHRODISIAC ACTION OF THYROIDINE.

"Anaphrodisiacs are not greatly in demand in therapeutics, though various drugs are known to exert incidentally a depressing effect on the genital functions. According to Dr. Rivière, of Lyons, Thyroidine is one of the latter group, and he reports two typical cases of men who sought relief from exaggerated obesity in the thyroid treatment. They both lost weight very rapidly under the influence of the drug, but observed with surprise, not unmixed with apprehension, that the sexual function had fallen completely into abeyance. This condition persisted for some time after the cessation of the treatment, though the function was eventually restored. It is suggested that this 'therapeutical castration' may possibly help to explain the inhibitory influence exerted by the gland on the growth of uterine myomata and especially on the hemorrhage which their presence occasions. On the same lines there is reason to believe that Thyroidine may prove useful in the treatment of prostatic patients whose troubles are due to congestion of the genito-urinary apparatus."

ODIUM MEDICUM IN TASMANIA.

However much we may long for union in the profession, there is no alternative but combination to defend our liberties when the cause of enlightenment is threatened by the dominant majority. The *Mercury*, of Hobart, Tasmania, of April 21st last contains an account of a successful meeting held in that town to champion the cause of liberty against an attack by the trades-unionists of the camp of traditional medicine. We quote from a report of the meeting.

"DIVISION AMONG THE HOBART DOCTORS.

[&]quot;A large and influential meeting was held at the Temperance Hall

last night, at which Mr. G. S. Crouch presided, to discuss the position of homeopathy, owing to the formation of a branch of the British Medical Association in Hobart, and the determination of its members not to cousult with nor assist in any way medical practitioners practising the homeopathic system of medicine. Dr. Gibson announced that owing to the action of the allopaths he had engaged a homeopathic medical assistant from Melbourne to enable him to carry on his practice without assistance from any Hobart allopath. Dr. Benjafield was unable to be present, but he wrote a letter of sympathy with the movement, and expressing his determination to help in every way possible. He stated, however, that he had only heard rumours of the action by the allopaths.

"The following resolutions were passed unanimously:—

"Moved by Mr. E. C. Nowell, and seconded by Alderman Benjamin, and carried—'That in the opinion of this meeting it is desirable to form an association for the furtherance of the cause of homeopathy in Tasmania, and the spread of the truths of similia similibus curantur.'

"Moved by Mr. H. T. Gould, and seconded by Mr. J. Ridley Walker, and carried—'That all present form themselves into a committee, with power to add to their number, and that such committee meet as soon as possible to draw up rules.'

"The meeting was enthusiastic, and many of the adherents of

homeopathy in Hobart were present."

Оорнови.—Е. Saalfeld (Berl. klin. Woch., 1898, No. 13), in view of the observations of L. Landau on the oöphorin treatment of nervous symptoms occurring in women about the climacteric period, gave oöphorin preparations to women suffering from acne rosacea and cutaneous disorders at the menopause. Saalfeld thinks the results were satisfactory. In a woman, aged about 20, double oöphorectomy was followed by nervous symptoms, adiposity, and a lichen-like eczema over most of the body. Great improvement followed the use of oöphorin, both in regard to the skin eruption and the other symptoms, and the weight was also somewhat reduced. Saalfeld likewise treated cases of acne, and of seborrhea of the scalp with loss of hair, which often occur in chlorotic women. He obtained some good results in these cases, in certain of them better than the results obtained by chalybeate and local treatment. On the whole, though the results were not so good as those obtained in climacteric troubles, he thinks opphorin may be used with advantage in some such cases to aid external treatment. A woman, aged 20, had from childhood been troubled with prurigo. The peculiarity of this case was that during the menstrual periods, and for a short time after them, considerable relief from the itching was observed. Oöphorin treatment gave good results, although many other methods of treatment had previously been tried without any definite benefit.-British Medical Journal.

ORIGINAL COMMUNICATIONS.

ACCOUNT OF THE REMOVAL OF HAHNEMANN'S BODY.

On the 24th of March, 1898, the body of Samuel Hahnemann was exhumed in the cemetery Montmartre, and removed to the renowned cemetery of Père-Lachaise.

The ceremony commenced at 8.30 a.m., and was witnessed by thirty-five persons, beside the civil authorities. There were present Dr. Süss-Hahnemann, grandson of Samuel Hahnemann, from London; M. Cloquemin, vicepresident of the Transatlantic Company, who represented the Baroness of Boeninghausen. The International Committee of Hahnemann's tomb was represented by Dr. Richard Hughes (Brighton) and Dr. François Cartier, of Paris, secretary of the Committee. There were also present five laymen and the following medical men: Drs. Léon Simon, Parenteau, Conan Jousset, sen. and jun., Mimier, Faure (J. B.), Guinard, Faure (Élie), Tissot, Dezon, Nuguay, Boyer, Love, Chancerel, sen. and jun., Geo. Tessier, Triehon, Penurier, Heermann, Vautier, Koenick, Girardeau, Ecalle, and Bernard Arnulphy, from Chicago; also Dr. Gannal, who had assisted his father at the embalmment of the body fifty-five years ago.

Dr. Cartier opened the proceedings by a long speech, in which he drew attention to the necessity of identifying the body as being actually that of Hahnemann, and for this purpose he had obtained permission to have the leaden coffin opened, which had been interred not in the Hahnemann vault, but in the Lethière vault. The coffin which they were about to remove bore a leaden seal, marked "Patent Embalmment Gannal." Both the State records and those of the cemetery pointed to this coffin as Hahnemann's, as also the information furnished by Dr. Süss-Hahnemann, who had been an eye-witness,

and other relatives.

M. Cloquemin then thanked the French Homeopathic Society and doctors in the name of the Baroness of Boeninghausen for the work they were carrying out, in which she took a great interest.

Dr. Léon Simon then spoke, and concluded his remarks with the words, "Hail, Hahnemann! we bow before thy venerable remains, to which we, more fortunate than our predecessors, are able to render the honours due to them. Full of faith in the future, we appoint a meeting-place before thy mausoleum for the physicians who shall be present at the Congress of 1900. Thy tomb will appear the more beautiful to them illumined by the dawn of the next century, which will certainly see the triumph of thy doctrine."

Dr. Hughes then spoke in the name of English Homeo-

paths, and then Dr. Süss-Hahnemann.

The opening of the coffin was then commenced, Dr. Gannal directing the proceedings. He at once noticed that the coffin lid had been screwed, and not soldered, and expressed his fears that the body would not be well preserved. When the coffin was opened all present were struck with the small stature of Hahnemann. The coffin was found to contain a quantity of water, which had leaked in through the lid not having been soldered, and as a result the body was found to be quite decomposed and the features altogether unrecognisable; but Dr. Gannal fortunately found in the coffin a number of articles which established the identity of the body beyond doubt, and these are described in detail as follows:—

1. The wedding ring of his second marriage, inscribed—

Samuel Hahnemann, Mélanie de Hervilly. Verbunden, Coethen, 18 Janvier, 1835.

The ring was replaced on one of the bones of the hand

at the order of the Commissioner of Police.

2. The gold medal of the French homeopaths. At Hahnemann's feet there was found a bottle stoppered with emery and sealed. It was found to contain papers relating to the Gannal process of embalming, the gold medal given by the French homeopaths to their master, and an autograph letter of Hahnemann's widow, which formed the third proof found in the coffin. The medal was admirably preserved, and on one side represented a profile of Hahnemann, the work of David d'Angers, the sculptor of the famous bust which serves for the production of his portraits. The other side contains the inscription—

À LEUR MAÎTRE, LES HOMEOPATHISTES FRANÇAIS.

Similia Similibus Curantur.

This medal had been struck in bronze, and Dr. Boyer

produced an identical copy. The medal was replaced in the coffin.

3. The autograph letter of Hahnemann's widow, a photograph of which was allowed to be made. M. Cloquemin and Dr. Heermann recognised the handwriting without the slightest hesitation. The Revue Homeopathique Française publishes a facsimile of the letter.

At 10 a.m. the ceremony at the Montmartre Cemetery ended. The lead coffin was enclosed in a wooden one, on which the old plate was nailed, and also a new one, a very large copper plate engraved with the name Samuel Hahnemann.

The coffins of Hahnemann and his widow were then conveyed to the Père-Lachaise cemetery, ten of the

party accompanying them.

The site of the new tomb is in the most celebrated corner of this renowned cemetery where all that France has achieved of greatness in science, fine art, and war is represented. Music is represented by Rossini, Auber, and Donizetti. Poets and famous writers are found there. Racine lies close to Hahnemann's side; a little further on Molière and Lafontaine. The sciences are represented by Gay-Lussac and Arago, and the celebrated phrenologist and physician Gall is a little further down than Hahnemann; and on the same side one sees the tombs of the field-marshals Ney, Davout, &c. This is sufficient to show that the remains of this great and famous man have at last found a worthy resting-place. A temporary railing and a crown will be the simple ornaments placed on the tomb till the day when the homeopaths of the whole world complete the work of reparation in honour of their respected master.

PROPERTY AND FORCE.

By R. E. DUDGEON, M.D.

I FEAR Dr. Proctor and I will never come to a right understanding unless we agree on the meaning of the terms we employ. Dr. Fletcher, at the commencement of his excellent *Rudiments of Physiology*, gives a short list of the meanings he attaches to the scientific words

and terms he employs throughout his work, and I think it may be useful for our discussion if I follow his example by defining what I understand by some of the terms I have employed in my communications. 1. Force. For a definition of this word I may take that given by Meyer, in his Mechanik der Wärme (p. 265): "Force is that which is expended in the production of motion," or that given by Grove in his Correlation of the Physical Forces (p. 16), as "that which produces or resists motion." 2. Property. I may take Dr. Proctor's definition, "any quality that is inseparable and inalienable from matter, that is inherent in it and part of its constitution." If that is true of matter in the abstract, we may say of the various kinds of matter that their properties are what characterises them, and that without these properties they would cease to be these kinds of matter.

Hence "vitality," as I said in the May number of the H. W., "is not a force, but is a property of a peculiarly organised matter, which, like all other matter, may certainly be acted on by the forces of nature, but whose property of vitality is not correlated to them." This Dr. Proctor considers "a jugglery with words." Well, I am serenely indifferent to this reproach, or sneer, as I may term it, for I find that Dr. Beale, in a recent number of the Lancet (Feb. 22nd), which I saw for the first time only to-day, says almost precisely the same thing. "Life," says he (meaning vitality), "cannot be included among forces and forms of energy. Neither can it be shown to be correlated with any of these." Fletcher defines vitality as "the property which characterises organised beings of being acted on by certain powers otherwise than either strictly mechanically or strictly chemically." And he says: "Life is the sum of the actions of organised beings, resulting directly from their vitality so acted on."

Dr. Drysdale, in the tenth chapter of his learned work on *The Protoplasmic Theory of Life*, says: "Nothing has, I think, of late hindered us from forming a clear conception of the nature of life, so much as the way in which the relation of the physical forces to the action of living beings has been received. And this has mainly arisen from a want of due care in distinguishing force from property."

Dr. Proctor talks of "the force of chemical affinity," but

chemical affinity according to the above definitions is a property and not a force. Chemical attraction, on the other hand, is a force.

Dr. Proctor says: "We cannot place property and force under separate categories, for the same thing may be both at the same time"; and he gives as an instance gravitation. But gravitation or weight depends on the condition in which matter is placed and merely expresses the force which draws masses of matter together. As Drysdale says (p. 212): "Matter without weight is not only conceivable, but it is easy to calculate the position in space where matter can have no appreciable weight at all. . . . And it is perfectly easy to conceive, although no such state exists as a reality, matter totally devoid of all force. and in which it would retain all its inherent qualities or properties unimpaired." Therefore gravitation or weight is something external to matter—a force acting on it but not a property or quality of matter, which still remains matter even though removed from the influence of this drawing or attractive force. So I must dissent entirely from Dr. Proctor's dictum that "the same thing may be both [property and force] at the same time." To my mind they are absolutely and essentially different.

In reply to my request that he will explain how a property of matter can be a spirit, Dr. Proctor gives a quotation from Tyndall which he will pardon me if I say is quite irrelevant, for as far as I know no one has attempted to show how any combination of dead chemical atoms can produce sensation, thought and emotion. All we know is that these mental manifestations are produced in the brain when it is acted on by the vitality, and that they cease completely when the vitality is withdrawn, though the composition of the brain

matter is apparently unaltered.

Tyndall's remarks might just as well be applied to any substance organic or inorganic as to the brain. For instance, if by chemical analysis we find that a substance—say sugar—is composed of so many atoms of carbon, oxygen and hydrogen, how could we imagine that these atoms in any combination could furnish us with a substance that will sweeten our tea or our toddy? The proposition is as absurd as if we should take a complicated piece of machinery—say a watch—bray it up in a mortar, weigh accurately the respective quantities of

brass, steel, gold and jewels that enter into its composition, and from this analysis of its component parts infer the uses and powers of the machine, or from its pulverised elements reconstruct a going watch. Chemical analysis throws no light whatever on the nature of vitality, nor would a knowledge of the exact proportion of the organic compounds or elementary atoms of which we find it to consist after death, enable us to reconstruct from them anything like the living protoplasm. In fact, it is probable that the elements of which we find the dead protoplasm to be composed did not exist in the living protoplasm in a state of ordinary chemical combination (v. Beale, Protoplasm, p. 281); and assuredly vital action is in many ways quite different from chemical action. So, on the whole, I am not disposed to credit those pronounced vital-principlists, Prometheus, Pygmalion and Frankenstein with having made human beings except in the natural way, and I doubt if we shall ever discover

"What medicine 'twas that Paracelsus Made a man of, as he tells us."

Dr. Proctor says: "If life were, as Dr. Dudgeon says, a property of matter, one does not see very clearly why it should not be continued indefinitely, for matter is not in the habit of losing its properties." Now, I do not say "life" but "vitality," but as the two are often confounded, although I have explained that life is the manifestation of vitality, I will therefore presume that Dr. Proctor means by life what I mean by vitality or irritability. Well, as vitality is a property of matter in a certain state of organisation, and as life is manifested when the organisation is maintained in a state of integrity, it follows that if this integrity is lost or injured the vitality is altered or destroyed. As the peculiarly organised structure which is called protoplasm, of which vitality is a property, depends for its maintenance and existence on stimuli and pabulum, it is easy to comprehend how improper, excessive or deficient stimuli or pabulum may cause degeneration and destruction of the protoplasm, hence disease and death, and so the property of this matter is impaired or lost. And it is probably because of the failure of the necessary supply of appropriate stimuli or pabulum that life is not continued

indefinitely and that disease occurs and death overtakes

us at all periods of existence.

The same thing occurs in the case of inorganic matter. If sugar is subjected to certain agents which we may liken to the unsuitable stimuli of the vitally endowed protoplasm, it loses its property of sweetness and develops a new property of sourness, or a quite different property of alcoholity (if I may be allowed to coin such a word).

When we consider the number and variety of the noxe to which our delicate organism is exposed, the infectious "miasms" (to use Hahnemann's expression) that surround us, our own wilful and accidental lapses from the known and unknown rules of hygiene, our conscious and unconscious errors as to food and drink, not to mention the millions of morbific germs and microbes that are constantly seeking to invade the protoplasmic sanctuary of vitality and to injure or destroy it, the marvel is not that we don't live for ever, but that so many of us attain to or surpass the Mosaic limit of life—threescore and ten or fourscore years.

I make no pretension to explain the nature of vitality, which, like many other qualities of organised and unorganised matter, must, I fear, ever remain inexplicable. But I contend that an acceptance of the protoplasmic theory of vitality will aid us, as no other theory will, to acquire a rational view of many of the phenomena of life and, I may even say, commend to our reason the therapeutic rule of similia similibus with its minimal doses of

stimuli to vitality which we call medicines.

ARSENIC IN CLOTHING.

By Chas. E. Waddington, M.R.C.S. Eng., L.R.C.P. Lond.

Many years ago it was a very common thing to find in our wall-papers colouring matter which contained large quantities of arsenic, and at the same time an equally common thing to find people suffering from the injurious effects following the use of such wall-papers. Thanks to the efforts of medical men and the co-operation of the manufacturers, a wall-paper containing arsenic is now almost a thing of the past. I have been struck lately with the great necessity for sounding a warning note as to the prevalence of arsenic in clothing. My attention was first

drawn to it from several cases of poisonous symptoms (which came under my care) due to its presence in wearing apparel. There appears to be a great taste, or fashion, for bright reds and magentas, and it is these which are the most dangerous. Not that all reds, scarlets and magentas are so, but almost, if not entirely all, which are not fast colours are dyed with an arsenical aniline. If on washing the material to be worn the water is stained with the red dye, or if the skin gets coloured from the effects of perspiration, acting on the red material, it is imperative that the garment should be discarded at whatever cost.

The following two cases will suffice to illustrate clearly my contention, viz.: That articles of wearing apparel are sometimes dyed with arsenical dyes, and that these are

injurious to health.

A gentleman under my care for an illness of another kind developed an acute eczema, with intense itching and burning all over the body, being kept awake during the night, and for many nights scarcely sleeping at all. Remedies which I gave him, and which I had been accustomed to see act very quickly, gave no relief at all; so I came to the conclusion there must be some constant renewal of the cause of his trouble. I therefore made a careful examination, and found his feet stained with the scarlet dve from the socks he had been wearing. I cut a piece out of the sock, tested it, and found it loaded with arsenic, and he informed me he had had a present made of a dozen pairs, and had been wearing them for some time. I advised him to discontinue wearing them, and without any treatment especially directed to the skin, with the exception of frequent warm baths, the itching, eruption, and sleeplessness disappeared.

Another case of eczema I find the patient wearing a red garment, lined except in the region of the collar, and where the collar touched the skin was a necklace of eczema, with a similar eruption on the chest, with great-

exhaustion and general malaise.

John Woolman, the old Quaker worthy, many years ago (and is it not applicable in the present day?) lamented on the devastation wrought in our villages by the presence of dye-works, saying, "Why do we dye cloth? Is it not to hide dirt?" and advised people to wear self-coloured materials. There are many reds, dyed with cochineal, which are fast colours, and all fast colours are harmless.

These cases are striking, and I thought the publication of them might do good in drawing attention to a still-existing evil.

2, Marlboro Road, Manningham, Bradford,

THE KARLSBAD SEASON, 1897.

By Dr. Th. Kafka, Karlsbad.

The weather last year was somewhat more favourable than in 1896, when there occurred in the low-lying streets even a slight inundation, in consequence of continuous rains. Therefore there were not so many diseases from catching cold, as, for instance, bronchial catarrh, angina faucium, and cases of influenza. Most patients, who arrived in greater numbers than ever before (only Americans were less numerous), complained of abdominal stasis, hypertrophy of the liver, hemorrhoids (a good adjuvant to the cure of the last was the Hamamelis ointment)—in short, of symptoms of plethora abdominalis, a term which, if already somewhat obsolete, will always be used, because it is very characterising. Chronic catarrhs of the stomach, ulcus ventriculi, intestinal catarrhs, diseases of the bile, namely gall-stones, contributed again an important contingent. I had a case to cure where the gall-stone had already passed out of the gallbladder, but would not come out of the bowels; there had come on already a kind of miserere, till at last one gallstone, the size of a dove's egg, was evacuated with indescribable pains after copious enemas with oil and glycerine. Some smaller ones were passed later, representing a great quantity in all. Further, there were chronic catarrhs of bladder, with and without hypertrophy of the prostatic gland, pyelitis with obligate abundant excretion of red gravel, the so-called lithemia. Diabetes mellitus had also many representatives; one case of diabetes (5 per cent. of sugar in the urine) in a girl of fourteen years, where the urine contained also acetone and uric acid, and gave the well-known acetone reaction, who had been treated already two months at a clinical institute in East Prussia without effect, and who was fervently recommended to me by a late patient of mine, was cured entirely after the use of the water-cure in seven weeks, taking them very moderately, and after a

very cautious regulation of the dietetic regime. In the end she got completely free of sugar, and her weight had increased two kilos = four pounds. Another case, a gentleman of about forty years, a glass and china merchant from South Germany, came to Karlsbad with about 6 per cent. sugar. The case was the more interesting because the patient a short time before had acquired a severe gonorrhea at Leipsic, where he stayed in order to visit the Exhibition. In spite of not being able to follow strictly the dietetic regime for the diabetes on account of the gonorrhea, because I ordered him to drink much milk, the so-called sterilised fat milk free of sugar, according to Professor Gærtner, and water (acidulated water of Bilin), he got completely free of sugar, and cured of his gonorrhea. I ordered him to take in the beginning Sulph., besides the Mühlbrum, and later Merc. sol., and finally Cannabis.

Gout, the so-called arthritis urica, I had often to cure, accompanied also by cutaneous symptoms, as, for instance, eczema on the hands and the feet, and lobes of the ear; also cases of phosphaturia were favourably influenced by the spring. The arthritics praised the good effect of the springs in combination with the baths of Sprudel and mud. The accompanying skin diseases were also cured

very nicely.

Diseases of women at the climacteric period, such as chronic peri- and parametritis were favourably influenced by the Karlsbad waters; also disorders of menstruation, if

connected with abdominal plethora.

Nervous headaches and tic douloureux, which were very often observed to be associated with plethoric conditions of the abdomen, have been improved by Karlsbad waters, if not always cured, as I learned by letters received later. Old peritoneal exudations were much improved, and vanished sometimes entirely as the effect of the Karlsbad waters.

In spite of tuberculosis and syphilis being always mentioned as contra-indications against Karlsbad, a case of papulous-maculous syphilide in an inspector or surveyor of forests, a man of thirty-six years, who visited his parents, and took the waters here, was cured after having taken fourteen Sprudel baths. The rash, of a copper brown colour, was localised remarkably on the forehead and chest. There were no other secondary symptoms.

The healing power of Karlsbad is not exhausted in this short review, but I hope that it is sufficient to direct the attention of my honoured confrères to these unparalleled baths of worldwide reputation. Also the most enthusiastic adherent of high dilutions should not be frightened at directing to Karlsbad patients suitable for it, what is put before patients being a mixture of the single elements homeopathically potentised, and not a concoction out of the allopathic kitchen; but mother Nature offers the springs in the most appropriate combination. The knowledge and many years' experience of the homeopathic physician practising at these springs is guarantee for them not being taken immoderately, but in small quantities, which are adapted to every disease, and also for the observation of the appropriate dietetic regime.

SINGING IN THE EARS.

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

To-day (May 13th) I received this letter: "Dear Dr. C.,—On the 30th of last June I saw you about the crackling in my deaf ear, which entirely ceased the next day, not-withstanding a rather tiring expedition in the country, and only returned yesterday, May 11, 1898, with a throat cold. The crackling comes and goes at short intervals.—Very sincerely yours, A. H."

In the above case the lady is about sixty years of age, and has had noises in the ears for certainly five or six years—singing and crackling noises—always worse after travelling or fatigue, and especially bad in her left, the deaf ear, the accompanying symptoms being a tendency to giddiness, a fulness in lower chest, probably flatulent, confined bowels, rheumatic pains in the limbs, worse on right side, and lumbago. The dose to which her letter refers was a single one of *Kali hydriodicum* 30.

As an addition to the many cases of tinnitus cured with *Kali hydriodicum* I have from time to time reported it is interesting.

30A, George Street, Hanover Square, W.

MATERIA MEDICA MISCELLANY.

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

Silica in Intermittent Fever.—Dr. C. S. Kali has recorded an interesting confirmation of some Silica symptoms in the following case. M. N. D., æt 35, robust, well-built man, had had fever for two days. paroxysm came from 8 a.m. to 10 a.m. There was a severe chill, during which he noticed icy coldness of the feet and legs as far as the knees. Heat was excessive and perspiration profuse all over the body. He used to drink water in the hot stage. On these indications he gave Silica 30, and for two days slight improvement took place. He decided to change the potency, but found he had only the third trituration, which he gave every three hours. That day the attack was slight and next day there was no fever at all, and the medicine was given three times a day. In two days more the patient was quite well.—Am. Hom.

Rhus Tox. in Vesicular Eczema.—The following case is reported by Dr. Morgan among other instructive and interesting clinical cases in the Hahnemannian Advocate:—

March 20, 1897.—Saw Rev. De R. P., rector of a fashionable church. He was suffering from an eruption which thickly covered his hands and arms, legs and feet, palms and all, with fine watery vesicles, which burned like fire and itched intensely, and heat aggravated. The case looked like one of Rhus poisoning, but the patient said it was nothing of the kind. Gave Rhus Tox. m. m., one powder and S.L., Q.S.

March 21st.—Was soon easy. Slept well at night, and

vesicles drying up. Feeling well. Cont.

March 24th.—Apparently well.
March 26th.—Was called again. Same eruption out all over, only a little redder than before. Symptoms same, but more severe. Rhus Tox. m.m., one powder, and S.L. Better in one hour. Cured and well ever since.

Subsequently he learned that he had been poisoned by Rhus Tox. some years before, and had frequently shown

signs of it since.

Grindelia Robusta in Asthma.—The following case is reported by Dr. Herbert W. Foster in the American Homeopathist: Patient, man nearly seventy years old, subject to asthmatic attacks in which he would awaken suddenly in the night—the room seeming "too small" for him — and gasp and struggle for breath. In a few minutes he would get a little quieter, and just as he would commence to lose himself again in sleep, would suddenly awaken, frightened and gasping, because he seemed to have forgotten to breathe, and would usually spend the remainder of the night sitting up, in order not to forget to breathe and repeat the experience indefinitely. He would dread to retire the next night on account of fear of the same experience. Grindelia Rob. 30 dil. relieved him at once. He now always keeps a few of the powders on hand, one of which always gives him immediate relief, and insures a good night's rest.

Lachesis in Prolapsus Recti.—Dr. A. C. Bhaduri, of Calcutta, was called to see a patient whom he found in extreme agony owing to prolapse of the rectum, which could not be replaced on account of the contraction of the sphincter. Manipulation of the part produced so much pain that the patient would not allow it to be touched again. He decided to attempt reduction under chloroform, but in the meantime gave Lachesis 30 on the indication of a stitching pain passing upwards, the other symptoms corresponding. Within one hour of the administration of the remedy the prolapsed portion spontaneously returned, and the patient felt quite well.—Am. Hom.

Crocus Sativus and the Sequelæ of Rhus Poisoning.—Dr. Morey, in Medical Century for February, gives the following interesting verification of the action of the above remedy:—

"Miss M., a domestic, in the month of July, 1895, was poisoned by Rhus. A day or two later she was a pitiful looking object. Her face, neck, chest, arms, and hands were terribly inflamed, red as scarlet, badly swollen and watery vesicles appeared here and there. The itching and burning were almost unbearable. Under Belladonna and Rhus internally and the application of Oxide of Zinc ointment externally, to relieve the itching and burning, the case appeared to make a rapid recovery and the patient was able to go to her home several miles away in about a week. The poisoning, as I afterwards learned, occurred during her menstrual period. About the first of September, this year, and without, to her knowledge,

having been near the ivy again, she had another severe attack very similar in character, and this time also it developed during the menstrual period. A short time ago she came to me again, very much alarmed, as her old trouble was apparently developing rapidly and as bad as ever. Upon questioning her carefully I learned that since she was so badly poisoned she has frequently had some recurrence of the eruption and always at the menstrual period. She said her flow came on about a week before she came to me the last time, that it was very scanty, dark, and clotted, as had been the case for some time; that she had only fairly begun to flow when she ceased suddenly and then the eruption appeared.

"The scanty, very dark and clotted flow led me at once to think of *Crocus*, which I gave alone. A few days later she reported that the first dose re-established the flow, which was normal both in quantity and colour, and the

eruption at once disappeared entirely."

"AUTO INTOXICATION."

By R. H. Bellairs, M.A. Oxon.

No one who follows the trend of modern "orthodox therapeutics" will fail to observe the avidity with which certain straws are snatched at by those who cannot swim, yet are loth to sink.

"Auto intoxication" is one of these straws; yet it is worth consideration, even by homeopaths, who occasionally forget pathological minutiæ in their devotion to the

indicated remedy.

Undoubtedly the gastro-intestinal tube is in many instances a great brewery wherein are evolved toxines and ptomaines without count; ferments that go far to make diseases obscure and wondrous stubborn to treat. These products are analogous from a pathological standpoint to the gouty products—ureal soot, as Burnett terms them—which, in common with the uric acid diathesis, must be eliminated before the total disease is removed.

There are two diseases in particular wherein "auto toxis" must be regarded as a definite entity to be dealt

with—neurasthenia and diabetes mellitus.

Two recent allopathic writers have related the brilliant results obtained by intestinal antisepsis in these patho-

logical conditions.

Homeopaths will probably not find any place in their therapeutic scheme for sulpho-carbolates cr salol; but they will carefully bear in mind the immense importance of keeping the liver, that master laboratory of the blood,

and the blood filters in perfect order.

It is not good practice to either sterilise ptomaines or to sweep them away with castor oil, or melachol, or any other "mild but efficient laxative." Rather let us bear in mind the fact that fetid flatus, fetid excretions, and such symptoms are of the greatest importance, and that we have remedies homeopathic to them in various phases of illness, such as Baptisia, Carbo V. (in high potency), Kali Phos., Ptelea trifoliata, and many others as well.

SNAKE-VENOM-ITS ACTION AND EFFECT.

Being a reply to arguments advanced by those favouring the Bloodpoison Theory.

By Frederick Kopp, Greenwich, N.S.W.

III. THE CHLORIDE OF LIME ANTIDOTE (continued).

IT appears to me that the new antidote (Chloride of Lime) is not making much headway in the matter of securing a low death-rate. I have also noticed that since my criticism of the antidote in The Homeopathic WORLD some three years ago very little has been heard of it, and its advocates have been very quiet. Medical men in the meantime appear to have divided their attention in making use of either the Ammonia or Strychnine treatment, the advocates of the latter very often injecting the former after the latter—a course that certainly does not speak well for their faith in the Strychnine cure. But more of this anon. I very much fear that the Chloride of Lime antidote is doomed sooner or later to be relinquished; and as Professor Halford claims that the "Calmette Treatment" proves the truth of the theory that snake-venom is a "blood-poison," the same theory appears to me to be resting on a very rickety foundation, and will require a little propping up to keep it from collapsing altogether. But time will tell whether this latest production of the Institut Pasteur has any right to the claim urged in its favour by its introducers. When Mr. Willoughby made the statement that "animals who have been so poisoned by snakevenom, that assuredly they would have died if they had been left alone (as their companions poisoned at the same time and same manner did one and all die), have been treated by the 'Calmette' antidote and recovered," and declared that the Pasteur claim therefore demanded attention, he evidently never dreamt that Professor Davies would later on with his experiments show that the "Calmette" antidote, like a good many other Pasteurian productions, does not always act at the time when its services are required. Dr. Calmette some time ago confidently asserted that the injection of either the Chloride of Line or the Hypochlorate in small quantities under the skin renders the animal venomproof, and also that the serum of such animals is an antidote against snake-venom. He also stated that half a c.c. of this serum added to one milligramme of cobravenom rendered the latter harmless, and that three drops of a solution of the Chloride of Lime powder (bleaching powder) are sufficient to destroy in a test-tube the activity of a milligramme of cobra-venom. He further stated that in seven cases of animals in which a fatal dose of snake-venom had been injected, on the "immunity serum" being injected there were six recoveries. Professor Halford also stated that it was astonishing that so small an amount of free Chlorine should have so powerful an effect in antidoting the action of the snake-venom; he had found hitherto that all experiments made had proved snake-venom to be indestructible, which had led him to the belief of the existence of a ferment in snakevenom. In the experiments made by Professor Davies, however, the wonderful antidotal powers of the Chloride of Lime, mentioned above by both Dr. Calmette and Professor Halford, appear to have been conspicuous only by their absence, for in each case the antidote proved to be worse than useless, and the bitten animal died. The second dog, it will be remembered, had the Chloride of Lime injected as soon as the symptoms of snake-poison set in, which took place five minutes after the animal had been bitten. In ten minutes, however, the dog had gone over to the great majority, and the only consolation (if

such it can be called) to be derived therefrom is that the animal apparently died almost painlessly. This is perhaps one point to be considered in favour of the "Calmette antidote"—viz., a painless (or almost so) death. It is a pity that this antidote was not injected in the case of Mr. Astley, who, on November 12, 1896, at Bullock Mountain, about fourteen miles from Glen Innes, N.S.W., after swimming in the early morning, and while drying himself, was bitten by a large tiger snake, and died in fearful agony about ten minutes afterwards. The new antidote ought to have acted like a charm in this case in smoothing his way to the other world. The fourth dog in Professor Davies's experiments had also Chloride of Lime injected ten minutes after it was bitten, but, as the Struchnine antidote had been administered previously, I shall pass this case over, and refer to that of the fifth dog. In this case the Chloride of Lime was injected both before and after the introduction of the snake-venom, and vet it had no effect on the snake-poison. The dog certainly appeared to recover rapidly, and lived for three hours; but, considering the quantity (1½ ozs.) of the antidote injected, and the high opinion expressed by Dr. Calmette and Professor Halford of the powers thereof, the animal should not have died at all.

The death-rate in connection with the various antidotes still remains unaltered, and the following table shows at a glance which antidote has been the most successful in the treatment of snake-bite:—

Name of antidote used.	Where used.	Death-rate per cent.		
Chloride of Lime				
"Immunity Serum."	Tested on animals	4.		14.28
Strychnine Other treatment $(Am$				
monia, &c.)	Human cases treated.	•••	••	4.1

Judging by the above, the Chloride of Lime appears to be as unsuccessful in its effects as those two other scientific frauds known as the Pasteurian inoculations in the treatment of both hydrophobia and anthrax, which my scientific friend, Mr. J. Collinson, of Wolsingham, Durham, England, declares to be not only "without any practical value, but positively dangerous to man and beast," the former having been the cause of no fewer than three hundred deaths since its introduction. I must confess that I am obliged to receive anything hailing

from the Pasteur Institute with the greatest caution and suspicion. Mr. Howard Willoughby some time back made the following remarks: "I have repeatedly pointed out as regards one antidote after another, when brought forward with a great flourish, that there has been no compliance with test conditions, and that, however astonishing and satisfactory recoveries may seem in individual instances, yet in reality they prove nothing, for, though the sufferer may have been sufficiently poisoned to produce alarming symptoms, he may not have been fatally poisoned. And the Australian cases have been almost all complicated by the administration of Alcohol in large quantities, usually sufficient to produce insensibility, and often with evil effects." Mr. Willoughby also quoted from a letter sent to him by the late Mr. Vincent Richards on the subject in the following terms: "If a fatal dose has been injected and the animal has recovered, there is an apparent antidote. But, so far, all drugs have failed when thus tried, and so has the treatment last recommended to us (the Struchnine treatment). The Australian recoveries are either recoveries from a non-fatal dose of the poison, or from alcoholic poisoning. They are not recoveries from a mortal dose of snake-venom." Mr. Willoughby makes an allusion to antidotes being brought forward with a "great flourish" which eventually have proved themselves to be "great failures," but, I am afraid that the antidote which he so ardently advocates will have to join (unless something very extraordinary happens) the rank and file of those antidotes which have come before, and which he so much disdains. Mr. Willoughby has also spoken of the "disheartening failure" of the antidotes now in use, but if ever there was a "disheartening failure," it is certainly the result of the experiment made by Professor Davies on the fifth dog. If ever an antidote had a fair chance of proving itself successful, it was the one in this case, as it had the advantage of being already present in the system to withstand the introducton of the snake-venom, and, moreover, was also injected after its introduction; so that the snake-poison was under the disadvantage of being attacked in front as well as behind. The new antidote, however, did not "come off."

Let me, however, be not misunderstood. I have not the slightest intention, even for a moment, of throwing

ridicule on any new antidote (whatever it may be) for the successful treatment of snake-bite, and nothing would give me greater pleasure than to find that the Chloride of Lime antidote really and truly could boast of and command a lower death-rate than that of any other. But I must speak of things as I find them, and, so long as the treatment by Ammonia Fort., Ammonia, Kali Perm., &c., is down as low as 4.1 per cent., and the Chloride of Lime as high as 26.66 per cent. (a difference of over six times in favour of the former) I cannot honestly recommend the latter in cases of snake-bite. Snake-venom is a peculiar poison. Dr. Weir Mitchell, when writing on the indestructibility of the snake-venom, said: "Freezing has no effect; boiling has no effect; strong Nitric Acid, strong Sulphuric Acid, has no effect. After these powerful acids had been mixed with the venom they were neutralised; but the venom, when injected into the subcutaneous tissue, produced death." He also stated that when mixed with Ammonia or Soda or Potash, and each mixture injected, no effect was found to have been produced on the virulence. Be that as it may, however, there is no getting away from the fact as to which antidote has the lowest death-rate and which has the highest, and as it is only safe for us to judge by the results as we find them, honour must be given to that antidote to which the honour is due. Having thus gone into the result of the treatment by Chloride of Lime on the dogs mentioned as treated by Professor Davies, I shall now draw the attention of my readers to the results achieved by the Strychnine antidote, to which I shall devote the next section of this paper in next month's issue of THE HOMEOPATHIC WORLD.

(To be continued.)

CHELIDONIUM AND CANCER.

By R. H. BELLAIRS, M.A.

SINCE publishing a note on the above connection in The Homeopathic World I have received from a correspondent the following interesting communication:—

"With regard to your note on *Chelidonium*, Mrs. — was for *two years* under the influence of *Chelid.* ϕ for gall-stones, which it prevented, and improved the con-

dition of the liver, &c.; but during that time, when taking Chelid. in five-drop doses three times a week, she developed cancer in the left breast (as result of a blow). It was about seventeen months growing before it was noticed, during the whole of which period she was taking Chelid. After being noted it grew rapidly. The breast was excised two years ago; no return of malady."

The above case (a clear proving of Chelid.) points

many morals to the wise.

Firstly. If you do not wish to excite pathogenetic symptoms do not continue to take large doses of a very poisonous drug, which Mr. Denisenko emphatically states *Chelid*. to be, adding that great caution is necessary in its administration.

Secondly. A drug which will not cure gall-stones in less than two years is *not* the indicated remedy: *ergo* it is

a poison; ergo it will provoke a proving.

Thirdly. The indiscriminate use of mother tinctures, which is becoming so rife nowadays, is an unsafe proceeding, except in acute cases, where only a few doses are necessary to provoke reaction.

Fourthly. The fact that the cancer developed rapidly while the patient was taking poisonous (?) doses of *Chelid*, and yet did not recur after excision, seems to show a

specific relation between drug and disease.

Fifthly. Certain types of liver disease appear to be forerunners of the development of cancer. I suppose that something goes wrong in the blood evolution, and

sets up systemic poisoning.

A few days ago I read in an allopathic journal of cancer developing in the course of a prolonged *Arsenic* treatment. This in the case of a well-known homeopathic remedy for cancer (not presumably in toxic doses, if it is to be remedial) supports my claims for *Chelidonium*.

It is, however, too absurd to suppose that homeopathic cures can be resultant from doses which are calculated by all known homeopathic standards to induce heroic provings in the takers. Let it again be repeated that Chelidonium majus is a virulent poison, not a bland "herb simple."

SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

Session 1897-1898.

THE ninth meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thursday, June 2, 1898, the eve of the Homeopathic Congress, at a quarter to eight o'clock.

The Secretary of the Section of Surgery and Gynecology, Dr. Johnstone, had arranged for a clinical evening, when the

following cases, specimens, &c., were exhibited:

CASES.

Uterine fibroid with cancer of breast and also	
floating kidney	Dr. Burford.
Vaginal hysterectomy for uterine cancer (with	the programme
specimen)	Dr. Burford.
Ovariotomy (with specimen)	Dr. Burford.
Cystic enlargement of gall bladder, continuous	
improvement under Berberis	Dr. Burford.
Intracranial tumour. Boy, age 4	Dr. Day.
Friedreich's disease. Boy, age 5	Dr. Day.
Pseudo-hypertrophic muscular paralysis. Girl	Dr. Day.
Intra-uterine amputation of forearm in a child	Dr. Day.
Lymphangioma of axilla. Girl, age 7	Dr. Day.
Lower level or Jacksonian epilepsy with paresis	may brink the majors by July
of left upper extremity. Woman, age 20	Dr. Goldsbrough.
Tumour of breast (disappearance under Phyto-	
lacca after diagnosis of cancer and advice of	10 to
immediate removal)	Mr. Johnstone.
Abdominal tumour (malignant?)	Dr. Neatby.
Uterine fibroid	Dr. Neatby.
Life the second of	
Specimens.	
II 1 1	
Uterus removed by vaginal hysterectomy for	Dr. Burford.
cancer	Dr. Burford.
Ovarian tumor removed by operation	Dr. Duriora.
Hydrocephalus, spina bifida and talipes valgus in a full time foetus, delivered without	
craniotomy (breech presentation)	Mr. Johnstone.
Aneurism of first part of aorta, within the	mi. somistone.
pericardium, from a man of 48. Heart	
weight, 2 lbs	Dr. Moir.
Advanced calcareous changes in the mitral	meli er ogeren isal
valve in a man of 30 years, with history of	
rheumatic fever 15 years before	Dr. Moir.

Double dermoid ovarian cysts with multilocular simple cyst, removed from same patient by	
operation	Dr. Neatby.
Ovarian dermoid and papillomatous cysts re-	
moved from same patient post mortem	Dr. Neatby.
Uterine fibroid, showing hard and soft tumours, removed by operation	Dr. Neatby.
Uterine appendages and appendix vermiformis removed at one operation	Dr. Neatby.
Gallstones removed by cholelithotomy	Mr. Know Shaw.
Epithelioma of rectum removed by the trans-	
sacral route	Mr. Wright.
Papilloma of bladder removed by suprapubic cystotomy	Mr. Wright.
Vesical calculus, removed by suprapubic cysto-	
tomy	Mr. Wright.
Renal calculus, removed by suprapubic cystotomy	Mr. Wright.
Salivary calculus, removed from sublingual gland	Mr. Wright.
John Laft, and American Late Co.	
7.7 T	

MICROSCOPIC, X-RAY, AND LANTERN EXHIBITS.

Series of permanent microscopical preparations of the blood	Dr. Galley Blackley.
Radiograph of a foot with supernumerary toe	Mr. Knox Shaw.
Some new hematological apparatus	Dr. Galley Blackley.
Microscopical slides showing—	Bi. Guiley Blackiey.
A. Paget's disease of nipple.	
B. Scirrhus carcinoma of axillary gland	Opening probabilities and tells
from the same patient	Mr. Knox Shaw.
Exhibition of lantern slides	Dr. Neatby.
Exhibition of new X-ray fluorescent screen	
(presented to L.H.H. by F. Adair Roberts,	M G 1 G 11
Esq.)	Mr. Gerard Smith.
Exhibition of the method of producing high	
vacuum in X-ray tubes, by the mercury fall	12 Settiment backing and A
pump	Mr. Gerard Smith.
Exhibition by lantern of series of microphoto-	
graphs	Mr. Gerard Smith.
Microscopical preparations of streptococci, gono-	
cocci, &c., illustrating the use of carbol-fuchsin	
as a differential stain	Mr. Johnstone.
Microscopical sections (various)	Dr. Neatby.
microscopical seculons (various)	Di. Readby.

After the meeting the President of the Society, Dr. Neatby, entertained the members at supper at Frascati's, Oxford Street.

Dulcamara in Rheumatism > by Motion.—"In case of rheumatoid troubles better from motion when *Rhus* and *Aconite* fail try *Dulcamara* 3x."—Sanderson.—*Hom. Envoy*.

EXTRACT.

THE APPLE AS A USEFUL MEDICINE.

By A. ATKINSON, M.D., Baltimore, Md.

PERHAPS the strangest medicine for diabetes is the apple, the sourer the better. A diabetic patient in Lancaster County, Pa., used a great deal of cider. He voided large quantities of urine, but he soon found that the sweet cider produced too much sugar, and was compelled to discontinue its use. Thus we see that the cider consists of only the juice of the apple, yet every kind of cider will not answer in diabetes. This gentleman makes one-fourth of his diet now consist of raw apples. He often uses them to the exclusion of all other food. He prefers, as best suited to the non-formation of sugary urine, the so-called Smokehouse apple, which is very tart—that is, it is full of malic acid, without the accompanying sugar we find in the Sweetning and other apples commonly with green or vellow skins, like the Yellow June apple. When this Smokehouse apple is fresh (green) from the tree it bites the tongue from its excessive tartness, making fissures in the mucous membrane. Mr. L. uses as many as a quarter of a peck of these apples each day when they are in season. It is not an apple that keeps well; as it ages it loses its sourness, and does not serve him then as food capable of averting sugar. A gentleman of Wilmington, Del, a diabetic, is on sour apples when they can be had, and he thanks Mr. L. for his improvement during the season of sour apples. Mr. —— of Lewisburg, Pa., was also benefited by apples.

The Hospital, a London paper, says: "Chemically the apple is composed of vegetable fibre, albumin, sugar, gum, chlorophyll, malic acid, gallic acid, lime, and much water." Furthermore, the German analysts say that the apple contains a larger percentage of phosphorus than any other fruit or vegetable. This phosphorus is admirably adapted for renewing the essential nervous matter of the brain and spinal cord. It is, perhaps, for the same reason that old Scandinavian traditions represent the apple as the food of the gods, who, when they felt themselves growing feeble and infirm, resorted to this fruit for renewing their powers of mind and body. Also the acids of the apple are of signal service for men of sedentary habits whose livers are sluggish in action, these acids serving to eliminate from the body noxious matters, which, if retained, make the brain heavy and dull, or bring about jaundice, skin eruptions, and other allied troubles. Some such experience must have led to our custom of taking apple-sauce with roast pork, rich goose, and

like dishes.

The malic acid of ripe apples, either raw or cooked, will neutralise any excess of chalky matter engendered by eating too much meat. It is also a fact that such fresh fruits as the apple, the pear, and the plum, when taken ripe and without sugar, diminish acidity in the stomach rather than provoke it. Their vegetable salts and juices are converted into alkaline carbonates which counteract acidity. A good ripe, raw apple is one of the easiest of vegetable substances for the stomach to deal with, the whole process of its digestion being completed in eighty-five minutes. Gefrard found that the "pulpe of roasted apples mixed in a wine-quart of faire water, and labored together until it comes to be as apples and ale—which we call lambswool—never faileth in certain diseases of the vaines, which myself hath often proved, and gained thereby both crowns and credit." "The paring of an apple, cut somewhat thin, and the inside whereof is laid to hot, burning, or running eyes at night. when the party goes to bed, and is tied or bound to the same, doth help the trouble very speedily, and contrary to expectation is an excellent secret." "A poultice made of rotton apples is of very common use in Lincolnshire for the cure of weak or rheumatic eyes. Likewise in the Hôtel des Invalides of Paris an apple poultice is used commonly for inflamed eyes, the apple being roasted and its pulp applied over the eyes without any intervening substance. Long ago it was said apples doeasily and speedily pass through the belly; therefore, they do mollify the belly. And for the same reason a modern maxim teaches that 'To eat an apple going to bed, the doctor then will beg his bread."

Sweet cider to which the powdered carbonate of iron has been added, say zi to the gallon of cider, makes an admirable hydragogue tonic (chalybeate), useful in all forms of dropsy and easily tolerated in Bright's disease, the iron making up for the debility which the watery purgation would without it have induced, and the writer has found the addition of salicylate of sodium to the above mixture to be useful in rheumatic attacks. Fruits were given us before drugs, and they all have some medicinal virtue. Prunes, apples, pears, figs, peaches, are all aperient, and how much better it is to keep the liver and bowels. free from clogging by pleasant laxatives than by resorting every few days to drastic saline purgatives, or to calomel and its. varied compounds. Fruits do not debilitate by excessive purgation, but only induce soft stools, which empty the intestines, while they soften the biliary secretions. In cities the inhabitants are only beginning to appreciate the health value of fruits, and now the markets and provision stores supply them at moderate figures. They counteract the heating effects of too much salt meat, and help to digest our overstarchy foods.—

American Homeopathist.

NEW PREPARATIONS.

NEW FOOD PREPARATIONS.

THE name of new foods is getting to be legion, and the inventor of each claims that his preparation is in sympathy with some well-established theory of medicine or of disease. It is a new idea, however, to construct a complete system of diet as a branch of sociology, wherein the sciences of biology, chemistry, and anthropology must be harmonised—i.e., diet must be discussed in relation to the destiny of the race or cosmic ends. This is the philosophy of diet rather than the science thereof.

At all events this comprehensive work has been undertaken by Mr. W. A. Macdonald (Health Stores, King St., Tower Hill, E.), author of Humanitism; The Scientific Solution of the Social Problem; Science and Ethics; Reformed Dietetics; Food and Population, &c., after many years' study and travel in France, Germany, America, &c., as well as in England. Mr. Macdonald has recently established a factory where he prepares foods

upon the principles laid down in his writings.

Mr. Macdonald has never been able to find out what is meant by the phrase "cooking animal," which civilised man is on all sides asserted to be. He has asked: "What change of structure and function must an animal undergo before it can be classed as 'cooking'?" He has obtained no answer, and asserts that his anthropological studies convince him that no such animal has ever existed or can ever exist. For him a so-called "cooking animal" is a degenerate animal, degenerated largely through the culinary art, but his methods are purely experimental. He and some of his followers have successfully lived for years on foods which are most palatable and nourishing when eaten raw, and there is a German doctor who puts all his patients on a raw diet, on the ground that it requires a strong and sound digestive apparatus to cope with cooked foods. The foods which are palatable in their raw state are fruits, nuts, and salads, and those who follow out the system more or less strictly are in England called Fruitarians, although in Germany, where the system has spread much more rapidly than with us, the movement would not be understood by that name. The cause is championed in

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Germany by Frau Volchert, who, by mincing, grinding, pulping, &c., makes dishes which contain cereals, legumes, vegetables, and roots, as well as fruits, nuts, and salads, while Mr. Macdonald, the leader of the movement in England, proceeds by different methods. He holds that amongst Fruitarians the use of cereals and legumes (except when eaten before they ripen) is an unsettled question, and so he derives his starch from the chestnut.

The following embrace his best-known preparations

under the name of the "N.R." series :--

I.—"N.R." FRUIT AND NUT BREAD.

This bread is composed of about a dozen (varying somewhat according to the season) of the most nourishing and digestible nuts and dried fruits, and is principally intended for people having defective teeth, and who cannot thus masticate fruits and nuts thoroughly. It has a cheesy consistency, and when retained a few minutes in the mouth will melt away into a liquid. The nuts are ground into a fine flour, and then pulped with the fruit into a homogeneous mass. The raw materials are blended together in such a manner that the nutrients (starch, sugar, oil, proteids, acids, salts, &c.) are in their normal proportions as near as possible, although for some people, according to their doctor, there would be a deficiency of nitrogen. This objection may be overcome by eating the bread with salads, which are highly nitrogenous, and which at the same time give the necessary bulk, as well as supply the necessary proportion of organised water. In some cases. however, the bread may be eaten with fresh fruits, and it is not desirable to eat it with cooked sloppy foods at the same meal.

II.—"N.R." JAMS.

These jams are composed of pulped dried fruits, which are first soaked in a non-aqueous, flavourless liquid, which makes them more nourishing and helps to preserve them, although the original flavours of the fruits are not disturbed. They are of a cheesy consistency, and are moulded into loaves, which may be sliced and eaten with bread, or, when soaked in warm water for several hours, make a very palatable food and drink combined.

III.—"N.R." VEGETABLE CHEESE.

This has the consistency and colour of cheese, but not the chemical composition. There is a very soft, oily nut in our market known as the pine kernel, or pignolia, which cannot be advantageously used in the manufacture of fruit and nut bread. When ground into a fine flour it forms the basis of the vegetable cheese. When the flour is made to cohere by means of wild Alfalfa honey, and mixed with a few other ingredients, it makes a palatable dish, and has the medicinal effect of being mildly laxative, although, unlike the "N.R." bread, it is not claimed to be a well-balanced food.

IV.—FRUIT TONICS.

These drinks, made either strong or weak, are composed of the natural acids, sugars, and salts of dried fruits after being treated with distilled water, without the application of heat, and are intended chiefly for people having too weak a digestion to cope with solid foods to any appreciable extent. These tonics are very refreshing, and, although medicines or flavouring substances may be added, it is usually very difficult to improve the natural flavours derived from the fruits. Wild honey dissolved in lemonjuice and added to the tonics often improves them for many patients. The residue, formed from the juice mixed with the fine particles of the fruit obtained while straining, makes a very palatable and nourishing jam of the consistency of gruel.

The most advanced Fruitarians go against the use of common salt and other mineral salts of all kinds, also against manufactured preparations in which the nutrients are separated from their original combinations, so that they only use sugar in the forms of fruit and honey, oils in the form of nuts, &c. The "N.R." foods are not an abuse of this principle, as they are merely mechanical combinations

of the raw material.

We have tested a number of Mr. Macdonald's preparations, both on our own table and in practice, and we have no hesitation in saying that they constitute a valuable addition to our food supply, and at the same time a marked advance in the art and science of dietetics.

REVIEWS.

SURGICAL TECHNICS.*

This little book will doubtless prove of great service to house surgeons and junior men, for whom it is intended. It deals with all the duties due to the patient who requires a surgical operation of any kind, including preparation for operation and after treatment. It deals with personal asepsis, the charge of the patient, the operating theatre and operation. Then follows a useful chapter on special cases, beginning with brain operations, and dealing with operations on the mouth and pharynx, and for empyema, abdominal operations of various kinds, bladder and rectal operations, and such like. The latter portion of the book deals with dressings, instruments, and drainage, and closes with an appendix on surgical rules for nurses. The book throughout is practical and well written, and contains many a useful hint and warning.

DOCTOR AND PATIENT.+

This unpretentious little book deals in a thoroughly wise spirit with a subject requiring much delicacy in the handling. In his Introduction Dr. Gersuny says:—

"The most diligent student of the learning of the schools commences the actual practice of his life's profession in the position of an awkward novice who has to begin learning afresh. Most of us experience this in ourselves, and every one sees it daily in others. The young doctor, especially when he begins to practice, finds himself in a position at once perplexing and embarrassing. Not every one has the tact and presence of mind to strike the right course and so avoid the galling consciousness of having behaved foolishly.

"In this little book the writer has tried to discuss the commonest relations between doctor and patient, not with the intention of presenting them in full detail, nor with the pretension of drawing up any stereotyped method of conduct, but looking at the matter from the

* Surgical Technics in Hospital Practice. By K. W. Monsarrat, M.B., F.R.C.S.E., Assistant-Surgeon Liverpool Cancer Hospital. Bristol: J. Wright and Co. Price 3s. net.

[†] Doctor and Patient: Hints to Both. By Dr. Robert Gersuny, of Vienna. Translated, with the permission of the author, by A. S. Levetus, with a preface by D. J. Leech, M.D., F.R.C.P., of Manchester. Bristol: John Wright & Co. London: Simpkin, Marshall, Hamilton, Kent & Co., Ltd.; Hirschfeld Bros., S2, High Holborn. Cloth, 2s. net.

wholly subjective point of view. He trusts that this attitude of his will not be to the reader's disadvantage, since it is calculated to invite opposition and also to rouse a spirit of reflection which tends to clearness of observation. Although this book is primarily intended for medical men, the writer has endeavoured to make it readable for the general public, for whom, indeed, many points have been specially dwelt on."

The subject of the first chapter is: "Relative position of patient and doctor—Confidence—Choice of a doctor; " and it is headed with the quotation, "Even patients require a certain special education." The other chapters deal with topics like the following: "The first visit;" "The frequency and length of the doctor's visits;"

"Misconstruction and abuse of the doctor's statements:"

"Harmful influence of the persons about the patient;"

"Corruption of doctors by the public;" "Consultation;"

In his preface Dr. Leech compares Dr. Gersuny's work to that of the late Dr. C. West, entitled The Profession of Medicine: Its Study and Practice, Its Duties and Rewards, but Dr. Gersuny treats his subject in a very much larger spirit than did the English writer. We trust Dr. Gersuny's book will find a large circle of readers, and we can endorse the sentiment (but not the grammar) of Dr. Leech, who says in his preface: "They (readers) cannot fail to rise from the perusal of Dr. Gersuny's book without feeling better for the wise counsel he gives and without having received an incentive to do that which is right and maintain at its highest point the honourable position of the profession." There is an evident redundance of negatives in this sentence either "fail to" must be eliminated or else the two " withouts."

A word, in conclusion, for the translator, whose work is The book does not read like a translation admirably done. at all.

PRIESSNITZ.*

MR. METCALFE is to be congratulated on having produced a thoroughly interesting book on a profoundly interesting subject. Vincent Priessnitz, the peasant medical genius

^{*} The Life of Vincent Priessnitz, Founder of Hydropathy. By Richard Metcalfe. Published by Metcalfe's London Hydro., Limited, Richmond Hill, Surrey. 1898. Cloth, 3s. 6d. net.

of Austrian Silesia, is certainly one of the world's heroes, and has perhaps done more to humanise medical practice than any other medical reformer, excepting Hahnemann himself. The story of his early years and the struggles of his family is very well told by Mr. Metcalfe. He had his attention drawn to the therapeutic virtues of water, it is said, by an animal which he happened to see curing itself of a wounded limb at a spring. There is a story of this kind to be found in connection with many medical innovations. He cured animals on his farm with cold water, and by the time he was fifteen he was the unofficial medical adviser to the neighbourhood. At the age of eighteen he met with a severe accident, and the surgeon who was called in said if he recovered he would be an invalid for life. With cold water Priessnitz cured himself, and from that time forth water-cures became the leading interest of his life. His practical genius was soon recognised by his neighbours, and the fame of his cures spread so rapidly that it became necessary to establish a special institution for the reception of those who sought his cure from a distance.

Mr. Metcalfe has admirably described the early struggles of the reformer, which remind us very strongly of the struggles that have attended every effort to better medical practice. The chief difficulty, of course, lies in the medical profession itself, which is always very sensitive about being reformed. Priessnitz was lucky enough to be under an absolute monarchy and to secure the favour of the court early in his career. This was due, it must be said, to the report of Baron Turkheim, a medical man himself, who was sent to investigate Priessnitz's treatment. With a courage and a candour which do him infinite honour, Turkheim gave a very fair and even eulogistic account of the treatment, and advised against the closing of the Graefenberg establishment, for which the faculty had agitated. Thus was Priessnitz left to pursue his way in peace.

But not only did Priessnitz find in the faculty his worst enemies, he also found in it his worst pupils. "Doctors have learned too much," Priessnitz used to say. "If they wish to become good water-doctors, they must begin by forgetting a great deal of their previous experience in the treatment of diseases by medicine. Doctors have neither knowledge of, nor faith in, the healing virtues of cold water, and therefore do not use it with the necessary confidence."

However, we are glad to learn that one of Priessnitz's sayings has not come true. We are told that he often said sadly to his friends, "If, after my death, my establishment should fall into the hands of a doctor, it will soon be ruined." Priessnitz found a most competent and enthusiastic successor in Dr. Schindler, who died in 1890.

Mr. Metcalfe gives an account of Father Kneipp's relation to Priessnitz and of cognate cures, notably the semi-starvation cure of Schroth—a cure which appears to work when everything else has failed. We are somewhat astonished that no mention is made of the work of Smedley, of Matlock, who certainly did much to popularise hydropathy in this country.

Priessnitz's career may be said to have lasted from 1817 to 1851. He was thus, though a much younger man, for a long period a contemporary of Hahnemann's and especially of the actively reforming portion of the latter's career. The two ran parallel with each other, so

to speak, but never came in contact.

Mr. Metcalfe's book is profusely illustrated with portraits of Priessnitz and his family, of his birthplace and institution and daughter institutions, and also of eminent workers in the field of hydropathy.

NOTIFICATIONS.

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

NEW ADDRESSES.

Dr. A. R. Croucher, Bexhill.—Dr. Alexander R. Croucher, of 26, Church Parade, St. Leonards, attends at Ingleside, Albert Road, Bexhill-on-Sea, from 3 to 6 p.m. on Mondays and Thursdays, and on other days by appointment, during the months of June, July, August, and September.

Dr. Rosenau, Kissengen.—Dr. Albert Rosenau attends at No. 1,

Kurzarten, Kissengen, Bavaria, during the season.

GENERAL CORRESPONDENCE.

AN IMPORTANT USE OF CACTUS.

To the Editor of The Homeopathic World.

SIR,—Eight or nine months ago I found that my temporal arteries were much swollen and very hard to the touch. I began to fear that if this continued it might lead to the bursting of the arteries, and suffusion of the brain and apoplexy. Remembering, however, the power of *Cactus* in dispersing congestion, I determined to try it in this case, and accordingly took during the day several doses of *Cactus* 1x. This proved perfectly successful. In a day or two the arteries were reduced to their normal condition.

F. H. B.

" LOBELIA RUBRA."

To the Editor of The Homeopathic World.

SIR,—In the November number of THE HOMEOPATHIC WORLD (No. 383, vol. xxxii. page 502) mention is made of a certain Lobelia in the following terms: "A well-known naturalist— Mr. Bray—has watched the Australian iguana in combat with the snake, run away after being bitten, and eat the indigenous Lobelia rubra, and return unhurt to the combat. Post-mortem examination of the iguana shows stomach full of the leaves of Lobelia rubra." On reading the above I was somewhat puzzled, I must confess, as to what member of the Lobelia tribe was indicated by the descriptive name of rubra, as I had never heard of it before. Being personally acquainted with Mr. James Bray, in a conversation I had with that gentleman on the subject, he informed me that he was unaware of the source from which the writer of the lines quoted above got his information, but that the Lobelia that he found in the stomach of the iguana was Lobelia purpurascens, and not Lobelia rubra, of which, he admitted, he had never heard before. Mr. Frederick Turner, F.L.S., F.R.H.S., &c., also wrote to me in the following terms: "There is no plant indigenous to Australia called Lobelia rubra, not even as a synonym." It will therefore be just as well, should any tinctures or triturations be made from . this plant, that the proper botanical name should be made use of in labelling them, and this is my sole reason for penning these lines. I may state here that I shall fully deal with Lobelia purpurascens as an antidote for snake-bite in my article on "Snake-venom, its Action and Effect," now running in The HOMEOPATHIC WORLD, and I shall therefore refrain from

making any further remarks on the subject of this interesting member of the *Lobelia* tribe until then. Being a personal friend of Mr. James Bray, I will be in a position, when the time arrives, to give all the latest information procurable in connection therewith—giving an outline not only of its discovery but also the result of experiments made by Mr. Bray himself, as I have obtained full permission from that gentleman, who is himself an author and a great authority on our Australian venomous and non-venomous reptiles, to do so.

I remain,

Yours faithfully,

Greenwich, N.S.W., April 18, 1898. FREDERICK KOPP.

THE FRENCH AND BRITISH HOMEOPATHIC PHARMACOPEIAS.

To the Editor of The Homeopathic World.

SIR,—In your review of the new French Homeopathic Pharmacopeia at p. 282 of your current number, you remark: "It includes the following omitted by B.H.P.: Apis mel., &c." Will you allow us to point out that Apis mellifica has never been omitted from any edition of the B.H.P., and the same may be said of Murex purp., which is also included in your list of its omissions.

Yours faithfully,

E. Gould and Son.

59, Moorgate Street, London, June 9, 1898.

SIR,—In stating that the B.H.P. does not contain a preparation of *Apis mellifica*, the meaning I intended to convey was that it has no preparation of the whole bee. The B.H.P. preparation, though called *Apis mel.*, is really *Apium virus*. The inclusion of *Murex purpurea* in the absent list was an oversight which I regret.

I am, etc.,

Your Reviewer.

AN EXTENSION OF THE DOCTRINE OF CORRESPONDENCES.

To the Editor of The Homeopathic World.

SIR,—I have often thought I might afford your readers a little entertainment, at least, and possibly some instruction, if I sent you a few remarks upon a very old-world subject—a subject which in my opinion has not in this century received

any of the consideration which it certainly deserves from the

medical profession.

I am the more encouraged to broach this topic in your journal, as, under your skilful guidance, it has always maintained a pioneer attitude to truth. I am aware, too, that most of your readers, having already sacrificed much of personal comfort and professional reputation for the progress of medical science, recollecting their own past experiences, will not be disposed to taboo rashly any new or strange subject, but will rather subject it to the most rigorous but fair-minded criticism

and investigation.

The subject I have entitled "An Extension of the Doctrine of Correspondences." As homeopaths we are all familiar with the correspondence between the symptoms presented by a disease and the symptoms produced by the drugs we find most efficacious in the cure or alteration of the same. In this journal we have got beyond discussing whether there is any real value in the text we preach: we have experimented, we have proved the soundness of our position as therapeutists by practical demonstration. The rationale of how it does it opens up a wide field, and has caused infinite and often acrimonious discussion. We are all entitled to our own views, but for the present purpose we will rest upon common ground in simply acknowledging the fact that there is an intimate correspondence between the symptoms of disease and the drugs which have proved curative.

Similarly I hope to show that there is a correspondence between the temperament of every individual and the influences pervading our terrestrial atmosphere at the moment of his or

her birth.

This is a very old statement—as old as Abraham, most likely older. But Hippocrates gets the credit of having preached the homeopathic doctrine two thousand years ago—so both these doctrines are hoary with respectability. It was left, however, for Hahnemann to rediscover, amplify, develop, and prove that that ancient guess at truth was capable of more extended application than the historic father of medicine had ever imagined. So, although there have been isolated Hermetic philosophers and physicians all through the ages, it has not yet become accepted as a medical axiom that man is a part of universal nature, that he is a microcosm of the macrocosm, that he is intimately related to the ambient, in which he lives and moves and has his being, and subject ever to its perpetually changing influences.

There is a common saying that it is a poor problem that does not work both ways. Suppose in a case of drug-poisoning we find a definite series of symptoms, then from the definite

series of symptoms we reasonably infer the identity of the

drug.

Similarly—observe I try to keep close to a position capable of most rigid scrutiny—if I am told that a person born at a particular time and place will certainly suffer at a certain age from a particular disease, and I find out that the person born at that time, &c., is so afflicted, I reasonably infer that there must be some correspondence or subtle connection between the influences pervading the atmosphere and that individual.

Or, conversely, if I find a person so afflicted, and I conjecture that he was born on such a date as I know from the nautical almanac such malefic influences were predominant, and I am told my conjecture is correct, then, you see, the problem, working harmoniously both ways, demonstrates

conclusively the correctness of my inference.

The old Hermetic axiom, "as it is above so it is below," here holds good, and I only restate it in other words when I affirm that the viability, health, and temperament of an individual are matters that can with some degree of certainty be adjudicated upon from a study of the atmospheric influences prevailing at the moment of birth. Now to demonstration—for I feel that unless the above axiom will stand that test, it is of absolutely no value.

This is a subject to which for some years I have in my spare time given a good deal of attention. I have made it somewhat of a scientific hobby—have made observations on about three thousand cases, so I do not speak without a great deal of experience in support and corroboration of the few

examples you will have space to chronicle.

Now as to the viability of children. I attended in labour Mrs. H. She was delivered of a son—fourth child—the others now living. The case was in every respect normal; the child plump and hearty. After consulting my nautical ephemeris, to find out what influences were at that time predominant, I took occasion quietly to inform the father that I had a poor opinion of the stamina of the child, that he would be in danger of dying at three months' old, but that, in any case, he would never rally if he got any little bronchial trouble, as he was disposed to do. The boy nearly died at three months of diarrhea, but got quite well enough. He was only too good—disposed to be fat and quiet. At fifteen months he got subacute bronchitis, and quietly passed away after only two days' illness.

Another case occurred in the family of one of my own relatives. A boy was born March, 1896. The father sent me the exact time of his birth. After a careful study of the influences then prevailing, I came to no good opinion of the

youth's prospects, so I referred the father to a gentleman who has for some time made a business of this science, and whose judgment I have generally found very correct. He said the child could not possibly live long—it might probably die in May, but in any case could not survive the approaching November. Now this boy was always big and plump—the admired of all beholders—never ailing anything. The father ridiculed the idea of any delicacy in the boy, so much so that he kept on sending bulletin postcards every few weeks announcing the flourishing condition of the baby to the gentleman who had the temerity to predict such ominous things. In October the child got a little ailing—teething the doctor said—and died of the same in a couple of days.

These are both cases in which the lack of stamina was inferred from a study of the influences prevailing at the moment of birth, the results fully confirming the diagnosis and prognosis, as post mortems are said to do at Vienna. The deduction from these and suchlike observations is that there are healthy and sickly times in which to be born. Fortunate indeed are they whom the Fates endow with a strong

constitution.

As I remarked before, it is a poor problem that won't work both ways, so I may cite the following case which came under my observation at the hospital. A very intelligent-looking but very deformed man came in. I ventured the suggestion that he was born in a certain month in the year, which he admitted was correct. He, however, very much astonished me by remarking that a certain well-known investigator into this science had told him the exact day of the month and the year he was born, judging only from the personal appearance of the patient. This is an example of precision in relating effects to antecedent corresponding causes which one rarely comes across, but I must admit it is the consummation of talent we should all, as scientific physicians, earnestly strive after. Some of your readers will shrug their shoulders and say, "If we admit, as it seems we must, that these correspondences do exist, wherein lies the practical utility from a medical man's point of view?" The practical utility will be discovered by every student for himself as he works his way into the science. Solvitur ambulando.

The practical value of the study in my experience lies here: The diagram representing the moment of birth is the key to the temperament of the individual—the clue to the tendencies to disease which are liable to crop up in the lifetime of nearly all of us. Given the radical temperament, we see at a glance the strong and the weak spots in the physical and mental frame; we know at once which order of remedies (homeopathic

i.e. correspondial) will generally be of use; we can generally surmise whether the illness is to be of short or long duration; whether convalescence will be speedy or retarded, or whether a fatal termination is not likely to be the result. In short, this science is not only the key to diagnosis in doubtful cases where our ordinary methods are at fault, but also the key to prognosis which, as yet, is scarcely a part of medical science at all.

A subject holding out such prospects of extension of powers (and I have only hinted at a few of them) should certainly invite every physician, who is also a true student of nature, to give it his unbiassed and careful investigation.

Yours, &c., Q. E. D.

VARIETIES.

Indirect Thyroid Medication.—A curious instance of indirect thyroid medication was recently communicated by Dr. de Gassicourt to the French Academy of Medicine in respect of an infant three months of age, the offspring of a goitrous mother, and itself the possessor of a bilobed congenital goitre. The mother was given a daily dose of thyroidine, equivalent to about twenty grains of thyroid gland, for five consecutive days, followed by an interval of five days, the treatment being continued in this intermittent fashion for several months. No symptoms of thyroidism were at any time noted in either mother or child, but already at the end of six weeks some diminution in the size of the maternal goître was observed. In about six weeks the improvement in the child was most marked, and in four months the tumour had altogether disappeared, the child's general condition in the meantime having undergone corresponding amelioration.—Medical Press.

Mallein for Glanders.—In the last edition of Veterinary Counterpractice (p. 101), it is stated that mallein, an extract of the products of the bacillus of glanders (B. Mallei), is being largely used for diagnosing the disease. It may be obtained, with full instructions as to its use, from Messrs. Willows, Francis, Butler & Ayscough Thompson, 40, Aldersgate Street, E.C. Its merits are evidently becoming more widely appreciated. At a meeting of the Central Veterinary Medical Society, held on March 3rd, Mr. W. E. Taylor, M.R.C.V.S., veterinary surgeon to the London Road-car Company, read a paper on "Mallein and its Uses," in which he insisted that mallein was an infallible test for glanders when no clinical symptoms were present, and the horse appeared to be in perfect condition. He had tried it on 4,000 horses within the last few years; all the horses that reacted to an injection of mallein were slaughtered, and in every instance post-mortem examination discovered the presence of disease. Professors M'Fadyean, Macqueer, Penberthy, William Hunting, F.R.C.S., and Veterinary-Major Nunn all agreed with Mr. Taylor as

to the value of mallein for diagnostic purposes in detecting the early stages of glanders, and a resolution was unanimously carried: "That this meeting is convinced that the experience possessed by British veterinarians has thoroughly established the reliability of mallein for diagnostic purposes in horses suspected of glanders."—Chemist and Druggist, March 12th.

A CASE OF CHOREA DUE TO FRIGHT.—The remote effects of shock or fright to the nervous system may afford grounds for much divergence of opinion. For example, a child aged twelve years, the son of highly neurotic parents, happened to be in a railway accident in which three or four people lost their lives and many were severely injured. After the accident the boy walked home in company with his parents seemingly none the worse for his adventure. When eleven he had an attack of rheumatic fever, which lasted for some weeks. and ultimately left him in a debilitated condition. About a week after the accident he developed symptoms of chorea. The convulsive movements of the hands and facial muscles were extremely well marked. The features at times were distorted, articulation impeded. appetite irregular, and temper irritable. A soft systolic murmur was audible at the apex. The patient was confined to bed and treated with arsenic and cod-liver oil. As soon as convalescence was established he was allowed plenty of fresh air and exercise. The case, at first severe, made a speedy recovery. The question arises in this case as to the cause of the disease. Was it due to the rheumatic fever which such a short time previously preceded the attack or to the fright of the accident? Fright, I think, must be considered as an exciting cause in a subject predisposed.—WM. GLADSTONE COOK, L.R.C.P., in British Medical Journal, May 21st.

ASTHMA FROM ASPARAGUS.—Among the curiosities of medical literature are the stories, many of them well authenticated, of the peculiar susceptibility of some unfortunate individuals to certain odours and emanations. Among the substances which have been known to produce attacks of spasmodic asthma are roses, musk, tea, ipecacuanha, the odour of a cat, fried fish, the dust of oats, malt, rice, feathers, wool, and that caused in the demolition of old houses. Dr. Eugène Deschamps has added asparagus to this long list. He has published a full clinical report of a victualler over forty years of age who suffers from severe spasmodic attacks of coughing whenever he attempts to prepare raw asparagus for the cook. He is arthritic Twenty years ago he became a cook, and remained so and nervous. for a long time, but was temperate, and hence suffered little general ill-health, except from slight anæmia. From the first, however, he found that whilst trimming asparagus in the kitchen violent sneezing, coryza, and running of the eyes set in. Within half an hour dyspnea followed, with cough and expectoration. All these symptoms used to vanish within an hour or two. Hence he managed to continue at work, and rose to be chef in large hotels. But whenever he assisted the under cooks in dressing asparagus the fits returned worse than before. He now owns a restaurant. Last spring he helped his own cooks on a busy evening, and plucked a few stalks of asparagus. The fits of asthma came on at once with unusual violence, and he was ill for several days. There was free expectoration, and much corvza

troubled the patient for some time. Dr. Deschamps gave iodides and bromides, with morphine in infusion of senega, cocaine and borax lozenges, and inhalations of steaming solutions of marsh mallow and poppy. Neither fever nor albuminuria was observed. The increase of intolerance of asparagus is remarkable, as the patient is better off in every respect than he was twenty years since—prosperous, contented, and strong. He can peel onions, carrots, turnips, and other roots with perfect comfort, but after plucking a considerable amount of salsify mild sneezing and coryza set in, but without dyspnea. has all along been able to eat asparagus freely, as the meal is never followed by any of the troublesome symptoms. Dr. Deschamps dwells on hay asthma, and states that he has seen a marked case of ipecacuanha asthma, a disorder, as has been said, noted by other observers.—British Medical Journal.

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET. BLOOMSBURY.

Hours of Attendance: - Medical (In-patients, 9.30; Out-patients, 2.0), Daily; Surgical, Mondays, Tuesdays, Fridays, and Saturdays, 2.0; Diseases of Women, Tuesdays, Wednesdays, and Fridays, 2.0; Diseases of Skin, Thursdays, 2.0; Diseases of the Eye, Mondays and Thursdays, 2.0; Diseases of the Throat and Ear, Wednesdays, 2.0; Diseases of Children, Mondays and Thursdays, 9.0 a.m.; Operations Tuesdays, 2.30; Dental Cases, Thursdays, 9.0 a.m.

MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

- Burnett (J. C.). Diseases of the Skin. Their Constitutional Nature and Cure. Fcap. 8vo, pp. 263. 3rd Edition Revised and Enlarged. (Homeopathic Publishing Co. 3s.)
- Cuff (Herbert, E.). A Course of Lectures on Medicine to Nurses. 2nd Edition. Cr. 8vo, pp. 286. (Churchill. 3s. 6d.)
- Davies (N.E. Yorke-). Food for the Fat. The Dietetic Cure of Obesity, with chapters on the Treatment of Gout by Diet. 10th Edition Revised and Enlarged. Cr. 8vo, pp. 144. (Chatto. Sewed, 1s. and 1s. 6d.)
- Furbringer (Paul). Text Book of the Diseases of the Kidneys and Genito-Urinary Organs. Translated from the German by W. H. Gilbert. In

- 2 vols. Vol. 2, 8vo. (H. K. Lewis.
- Hewlett (R. T.). A Manual of Bacteriology, Clinical and Applied, with an Appendix on Bacterial Remedies, &c. Cr. 8vo, pp. 448. (Churchill. 10s. 6d.)
- Illustrated Handbook for the Rescue, Release from, and the Resuscitation
- Release from, and the Resuscitation of the Drowning, &c., &c. 16mo, pp. 104. (Life Saving Society. 1s.)

 Ireland (W. W.). The Mental Affections of Children. Idiocy, Imbecility, and Insanity. 8vo, pp. 454. (Churchill. 14s.)

 Kelynack (T. N.). Renal Growths: Their Pathology, Diagnosis and Treatment. With 96 Illustrations. 8vo, pp. 286. (Pentland. Net, 12s. 6d.)

TO CONTRIBUTORS AND CORRESPONDENTS.

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

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

envelope.

All advertisements and business communications to be sent to the "MANAGER" of the Homeopathic Publishing Company, 12, Warwick Lane. Paternoster Row, London, E.C.

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

CORRESPONDENTS.

Communications received from Mr. Frederick Kopp, Greenwich, N.S.W.; The Rev. F. H. Brett, Carsington; Messrs. E. Gould & Son, London; Mr. W. A. Macdonald, London; Mr. Alban E. Bellairs, Sidmouth; Dr. Waddington, Bradford.

BOOKS AND JOURNALS RECEIVED.

Hom. Review. — Zoophilist.— Chemist and Druggist.—H. Recorder.—Hahn. Advocate.—Gaz. Méd. de Paris.—Allg. Hom. Zeit. -Archiv. f. Hom.—N. A. J. of Hom.—Pacific Coast J. of H.-Hom. News.—Med. Century.— Minn. Hom. Mag.—Amer. Med. Monthly.—Amer. Hom.—H. Monatsblätter.—Clinique. — Pub. Health Journal.—J. of Orif. Surg. —Med. Times.—Med. Monat. f. H.—Critique.—Vaccination Inquirer.—New Eng. Med. Gaz.—

H.Tidsskrift.—Animals'Friend.— H. Envoy. — H. Maandblad. Calcutta J. of H.—Hobart Mercury .- Healthy Life .- Calcutta J. of Med.—Secolo. Om.—Repertory to the Cyclopedia of Drug Pathogenesy. Compiled by Dr. Hughes. Part II.—Syphilis, Congenital and Acquired, by Dr. Roberson Day. — Cheltenham Homeopathic Dispensary. Annual Report.—Aggression or Concession-Which? by George E. Shelton, M.D.—Diseases of the Skin. 3rd ed. Dr. Burnett.

The Momeopathic Morld.

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ORIGINAL COMMUNICATIONS:

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Eubulus Williams. The Doctrine of Signatures and the Law of Similars, by John H. Clarke, M.D.

Aborivital Medicine. By Robert T. Cooper, M.A., M.D.
Physiology or Philosophy? By P.
Proctor, L.R.C.P. Edin.

Annual Homeopathic Congress.

SOCIETY'S MEETING:

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MEDICAL AND SURGICAL WORKS.

TO CONTRIBUTORS AND CORRESPON-DENTS.

HOMEOPATHIC WORLD.

AUGUST 1, 1898.

A NOTABLE JUBILEE.

THE June number of the Hahnemannian Monthly gives the history of a noteworthy event in the world of therapeutics. On May 12, 1898, the Homeopathic Medical College, Pennsylvania, celebrated the completion of fifty years of its existence as a fully-equipped degree-conferring medical school. In the year 1869 it united with the Hahnemann Medical College, and, under the name of the Hahnemann Medical College and Hospital, it is to-day one of the most vigorous and most important hospitals and medical schools in the world. When we come to think that for fifty years America has possessed a fullyequipped medical school devoted to the cause of homeopathy, we cannot but feel a twinge of shame that in the Old World we remain where we are found to-day compelled to accept our education and diplomas from an alien and antagonistic school of therapeutics.

Among those who were chosen to deliver the addresses was Dr. William Tod Helmuth, one of the earliest of the graduates of Hahnemann College. The choice could not possibly have been happier, for that brilliant orator and surgeon was never heard to better advantage than in the address which may be read in the *Hahnemannian Monthly* for June. Dr. Helmuth has treasured up from his student days newspaper cuttings from journals of those times, recording the public announcements and opening

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ceremonies of fifty years ago, and these appear in facsimile woven into the address.

Following a reproduction of the advertisement of the first course of lectures, Dr. Helmuth makes the following striking remarks:—

This was the public announcement of a great fact, viz., that homeopathy was to be taught in a legally chartered and fullyequipped institution to all those who desired a medical education. No one at that time could imagine the immense significance of such an announcement. It marked an era from which in all time to come the progress of our school, as a school of medicine, would be dated. The statement is verified to-day in the computation and celebration of our first half a century. My friends, there are epochs in the annals of science as well as eras in the history of nations of which the world takes note. Old Father Time regards them as his landmarks, and Chronology respects them in her computations; they mark the mighty events which have transpired in the history of the past, and serve as monuments on which to rear deductions for the future. The foundation of the first college to teach homeopathy was an epoch in the progress of its science. It was a focus from which have radiated streams of knowledge in every direction. When the position of homeopathy in those days is considered and a comparison is made with its present status. I can boldly say that no new science ever introduced, no innovation in medicine ever announced, no system of therapeutics ever inaugurated since the time of the 80th Olympiad has spread with such amazing rapidity and settled itself so permanently among the intelligent and educated portions of the community as homeopathy. The opposition that it encountered, the ostracism it received, the ridicule that was showered upon it, the persecution its early upholders were called upon to evidence, the fanaticism, bigotry, and intolerance of the old school in those times are matters of history, and need not be repeated here. I was only cognizant of the latter portion of this fierce and demoralising ebullition of sentiment; but even then I can call friendships estranged, social relations sundered, kinship ignored, expulsion from societies and ejection from hospitals frequent—so deep was the feeling of the dominant school toward those who believed they saw in the law of Similia Similibus Curantur a better, safer, and more reliable method of curing the sick. To-day there are in the United States

- 9 National Homeopathic Medical Societies.
- 2 Sectional Homeopathic Medical Societies.
- 33 State Homeopathic Medical Societies.
- 85 Local Homeopathic Medical Societies.
- 39 Homeopathic Medical Clubs.

66 General Homeopathic Hospitals.

74 Special Homeopathic Hospitals.

57 Homeopathic Dispensaries.

20 Homeopathic Medical Colleges.

31 Homeopathic Medical Journals.

These statistics are perfectly authentic, have been prepared with great care, and are taken from the Report (1897) of the Committee of Organisation, Registration, and Statistics, presented to the American Institute of Homeopathy at its last meeting.

After this all that is left for us of the Old World to say is Floreat Columbia! and to follow, as best we may, the noble lead she has given us. The Fourth of July is coming to be a festival for the reunion of English-speaking peoples all the world over, and as we pointed out before the new movement had come to the surface, it is a date on which homeopathists, at any rate, are especially entitled to rejoice. For we little doubt that if there had never been an Independence Day, the Old World traditions in medicine would have clogged the wheels of medical progress on the other side of the Atlantic, if not as disastrously as here, still as seriously as they do even now in the British colonies.

Dr. Helmuth concluded his address by reciting one of the brightest of his poems we remember to have read, taking the form of an address to medical students. Dr. Helmuth prefaces it with these touching words:—

My whole life has been interwoven with that of medical students. My hair has turned white in their service, the wrinkles have come upon my forehead, the crow's-feet have gathered about my eyes, the spectacles have become an integral part of the man, temper begins to wane, and muscularity abates; but I find no diminution in my attachment to the medical student, and, what is more, I think my classes know it. Therefore I feel I have acquired the right to address a few words in conclusion to these young men. I have taken the liberty to put them into verse.

ACONITE.—When fear is especially marked in a case Aconite is apt to prove curative regardless of other symptoms.—Hom. Envoy.

NEWS AND NOTES.

TASMANIA.

The battle for medical liberty in Tasmania goes merrily on. Here is an item from the Launceston Daily Telegraph of May 12th:—

" HOMEOPATHIC LEAGUE.

"A meeting of this Association was held on Thursday evening last at Mr. Henry Ritchie's office, when it was unanimously decided to amalgamate with the recently formed Homeopathic Association in Hobart, the whole to be called 'The Homeopathic Association of Tasmania,' with centres in Hobart and Launceston, and in all probability branches on the North-West and West Coasts and other districts. The amalgamated associations promise to become in the future a strong organisation, as members are flocking in from all parts, the objects being "To demonstrate the scientific basis of homeopathy; to advocate that all legally qualified medical practitioners shall hold the same professional status whatever system of medicine they may employ, and to keep the adherents of homeopathy in touch with one another.' At the meeting the establishment of a homeopathic cottage hospital in the near future was warmly advocated."

We have received also the first number of the Tasmania Homeopathic Journal, dated Hobart, June 1st. It is a vigorous little sheet of the missionary order. In the Announcement it states that "all that homeopaths ask for is a 'fair field and no favour,' being convinced that their system will stand any test to which it may be subjected." A long and useful career to our new contemporary!

. The Homeopathic Directory—An Object Lesson.

In its notice of the British, Colonial, and Continental Homeopathic Directory the Minneapolis Homeopathic Magazine makes the following pertinent remarks:—

"This little volume has been prepared fully up to date by leading homeopathists in each country named, and should be in the hands of all homeopathists, particularly those going abroad or sending patients abroad, for they may need medical attention and should know to whom to go for proper care. The death from typhoid in Italy last year of our lamented friend Dr. Dunn, of Chicago, is a case in point, he having died under allopathic care at Naples, not knowing there was a homeopathist in the city."

SCHÜSSLER.

We regret to learn that the well-known propounder of the "Biochemic" theory of medicine has passed away. William Heinrich Schüssler was born at Zwischenahn on August 21, 1821, and died at Oldenburg in April last, the cause of his death being apoplexy. The *Homeopathic News* gives what looks like a speaking likeness of the doctor. Whatever may be thought of Schüssler's theories, there can be no doubt that he has introduced some valuable remedies into the materia medica, and he throws some new light on some of the old ones.

As we go to press we learn that another veteran homeopath has passed away in the person of Dr.

Gailliard, of Brussels.

ARSENIC IN WOOL.

In connection with Dr. Waddington's article in our last month's issue the following from the *Chemist and Druggist* of July 16th will be read with interest:—

"Mr. John H. Pearse, President of the Kidderminster Chamber of Commerce, makes a startling revelation in the *Lancet* regarding the presence of arsenic in wool. He says that it is nearly if not quite impossible to buy any sheep's wool (home or foreign grown) which does not contain 0.009 per cent. of arsenic—that is the maximum quantity allowed by the Swedish Government. This arises from the fact that all sheep growers are obliged at certain seasons to dip their sheep in a special chemical preparation to keep the animals healthy and in good order, and it is admitted that all effective sheep-dips contain arsenic. Messrs. Cooper & Nephew, of Berkhampstead, state that they supply dip sufficient each year for one-fourth the sheep in the entire world, and Mr. Pearse understands that it is their opinion that one-half the woollen fabrics worn in England are made with Cooperdipped (that is, arsenical-dipped) wools. The arsenic from the dip clings so tenaciously to the wool-fibre that even the two or three scourings with hot water, soap, and alkali, together with the various other treatments and manipulations of carding, combing, spinning, dyeing, and weaving which the wool or yarn goes through before it becomes finished cloth, fail to destroy or get rid of the drug. Mr. Pearse's object in calling attention to the matter is that he may get advice from medical men as to the maximum quantity of arsenic which might be permitted in wool without injury to the health. Swedish Government's regulation hampers English wool-manufacturers who do trade with Sweden, and Mr. Pearse mentions that 'the Swedish Government have condemned a heavy carpet because it contained one-thousandth part of a grain of arsenic in sixteen square inches—that is, 1 gr. (possibly in a completely non-volatile form) in a

piece of carpet ten feet square.' It cannot be said that any compound of arsenic in a carpet is 'non-volatile,' in the sense that it will remain in the carpet and not get into the air and be breathed. The latter it will do, just as wool itself is found in the air we breathe.''

HOMEOPATHY IN HASTINGS.

A REPRESENTATIVE of the Hastings and St. Leonards Observer (July 2nd) has been interviewing Dr. A. R. Croucher (thrice mayor of the borough) on the status of homeopathy in the town. It appears that an ostrichheaded leader of the allopathic fraternity in the town had reported in the previous week's Observer the ancient cry that homeopathy was dying out. Dr. Croucher had little difficulty in demonstrating to the unprofessional mind that homeopathy was very much alive in Hastings and the neighbourhood, and that it was only by dint of resolutely shutting out the light that the aforesaid eminent allopath could prevent himself from recognising the fact.

EXIT COMPULSORY VACCINATION.

AFTER the recent fiasco over the Government Vaccination Bill compulsory vaccination can never again be saddled on the British nation. This is one more sign that after all the world does move. Whatever the virtues of vaccination may be, it cannot be denied that no matter how "pure" the lymph may be vaccination is bloodpoisoning at its best. The Chemist and Druggist of July 23rd, under its "Westminster Wisdom" column, aptly sums up the situation as it is left by the Bill in its present shape.

"THE CONSCIENTIOUS OBJECTOR.

"The proposed abandonment of compulsory vaccination is another testimony, if one were needed, to the almost irresistible power of a minority knowing its own mind against a merely sceptical majority. The ordinary layman or laywoman submits to medical dictation when on a sick-bed, but resents it with accumulated energy in health. Medical men are themselves responsible for this state of feeling. They get so accustomed to the exercise of authority in their daily work that they cannot get out of the habit when they approach controversial topics; and it is only human to rebel against an oracle. The amendment of the Vaccination Bill carried this week was, in some form or other, in-

evitable when the principle of respecting the conscientious objector at all was once conceded. To fine him once and then let him disregard the law as much as he liked was absurd. It was granting impunity to those who could afford it. But the plan of devolving on magistrates the duty of deciding whether an offender has neglected his legal duty conscientiously, or otherwise, is a peculiarly hopeless compromise. The bonā-fide traveller has bothered the Bench enough; but the problem concerning him was after all a physical one, and soluble. The conscientious objector presents psychical difficulties which nobody can resolve."

ORIGINAL COMMUNICATIONS.

"BAROMETRICAL PRESSURE" AS A FACTOR IN MEDICINE.*

(Being some interesting facts not strictly Medical, but having an important bearing on Disease and its Treatment.)

By T. Wesley Burwood, L.K.Q.C.P. and L.M. Ireland; L.R.C.P. and L.M. Edin.

Towards the end of the month of January, 1882, I was brought face to face with a puzzle which gave me much personal chagrin, though it eventually has proved a source of much satisfaction, as it opened up a line of thought which to me has been very useful. How frequently in the experience of all of us have our failures

been fruitful for good!

I had been in regular attendance on a gentleman whose name is well known. He had been my patient off and on for some years for trivial ailments, and I flattered myself I knew everything it was possible to know about him. He had been a most healthy man, never having had a serious illness since childhood. His habits were those of an English gentleman, and until a few months before his death he might have been seen on horseback in "The Row" every morning of his life when in London. He, however, towards the end, showed signs of edema in the feet, due to heart trouble. There was no valvular lesion, though latterly marked dilatation was evident. There was no albumen in his urine, and his present condition might be summed up as due to old age (eighty-four).

^{*} Read at the Homeopathic Congress, June 3rd.

I had seen him one day about 6 p.m. He was jolly and jocular, with nothing to indicate anything like a sudden collapse; his respiration was normal, and his pulse and temperature satisfactory. To my surprise, when I called about noon the next day, I found my notion the dead!

patient dead!

On inquiring of the nurse, who was a woman of experience, what had happened, she said he went to sleep as usual between 10 p.m. and 11 p.m., but woke soon after one, complaining of breathlessness, his heart beating very fast and irregularly. This went on until gradually he became pulseless, and he breathed his last at 6 a.m.,

five or six hours after first awaking.

When I left him the previous afternoon I told the friends I considered his condition highly satisfactory, and yet within twelve hours he was dead! I felt my position acutely, as I feared lest the friends might consider I had not fully grasped the situation, and that my reputation was endangered, which, however, did not prove to be the case. During the rest of the day I turned over in my mind every possibility that could have arisen, but derived no satisfaction from any of my cogitations.

Taking up the evening paper after dinner I saw an account of a "Terrible Gale," which led me to wonder whether that had anything to do with my patient's sudden death. And this led me to the outcome of this paper.

Now I was not, nor am I, a meteorologist; but the facts are these. For four or five weeks before my patient died the weather had been what is commonly known now as anticyclonic, and on referring to the charts published daily by the Meteorological Society I found the barometer had stood between 30.2 and 30.8 for nearly five weeks. But about midnight there was a sudden fall—the glass dropped to 29.1, and before the gale was over it had fallen to 28.5.

Now what does all this mean? I am not going to give you a lecture on the barometer; we all know what that is, and few look at the instrument as it hangs in their entrance-hall, excepting simply to see what the weather for the day is likely to be. To me it is that, but it is also a great deal more.

Now, we all know when the barometer stands at 29 inches it means the atmospheric pressure registers 15 lbs. on every square inch at sea-level; consequently when

the glass indicates 30 inches there must be more than 15 lbs. pressure to the square inch, and more still as the mercury is forced up to nearly 31 inches, which latter point I have only seen once in sixteen years' daily watching every morning and night.

Professor Darwin, in an article in the Fortnightly Review, says: "The barometer ranges through fully two inches. Hence, when the barometer is very high, every square foot of the earth's surface supports about 140 lbs. more than when it is low, and 140 lbs. to the square foot

is 1,800,000 tons to the square mile."

What, then, happened on this sudden fall taking place? My explanation is—my patient's heart had been beating strenuously for some weeks against all this extra pressure, and when this pressure was suddenly taken off—like a horse going uphill with a heavy load behind him, the traces suddenly breaking, the horse gallops away free—the heart's action was increased, the overloaded heart and lungs became oppressed, a clot was gradually formed in the cardiac cavities, and soon life became extinct.

I have during all these years of observation seen very many cases of one kind or another so affected, and I can assert, without fear of contradiction, that any one interested in this subject will find notices of sudden death in the obituary of the morning papers after a sudden rapid falling of the glass accompanied by a gale of wind or a hurricane; and many of these are cases which no doubt have been a puzzle to the medical men in attendance when their patients have suddenly passed away without any apparent cause.

You may have a powerful heart bounding and thumping away, driving its blood with increased violence into the cerebral vessels, and should there be a weak, atheromatous spot, cerebral apoplexy is the result, and your patient, who goes to bed apparently quite well, is found lifeless in the morning. This applies also to epistaxis, pulmonary and renal hemorrhages, angina pectoris, also

in pruritus vulvæ, and many other conditions.

This brings me to an interesting point, which has frequently been discussed, though I have never seen it mentioned in connection with my subject—that is, why so many deaths take place in the night or early morning. I believe this is due to conditions to which the barometer can testify.

Captain Greenstreet, R.N.R., a man of great intelligence, who made observations extending over many years and in every part of the globe, showed me the automatic readings from his aneroid, and saying "that it mattered not in what part of the world he was, there was always a slight and sometimes great falling in the mercury between 3 and 5 a.m.," and my theory is, I think, substantiated thereby.

There is not a medical man of experience present but can call to mind patients so susceptible and sensitive that before they get out of bed in the morning they are able to tell the wind is easterly, while another, who may not be affected by the east wind, will emphatically tell you there is going to be thunder, and you may rely on their prophecy coming true. That there is in some patients what I call "meteorological susceptibility" I can prove, as numbers of my patients keep an aneroid in their bedrooms, which they watch night and morning, and so regulate their action and mode of living accordingly.

My friend, Dr. Reed Hill, when he was living with me, was so aware of this fact that if he were disturbed in the night by a gale of wind he would say at breakfast, "We shall get a telegram directly from Mrs. So-and-So," and surely enough before noon that telegram came; or I would say, "We must look after Mr. So-and-So's heart while this gale continues; and we invariably found it necessary, for the patients had had restless nights, with wakefulness and palpitation, which nothing could account

for.

Many years ago I was attending an elderly lady suffering from bronchitis and weak heart. During the progress of her illness the barometer ranged very high, and on coming downstairs after visiting her one day I was met by the patient's son-in-law, a retired judge, who inquired "how Mrs. — was." I replied, "She is going on as well as she can, and as long as the barometer stands as high as it does there is no immediate danger, but if there should be a sudden fall we may expect disastrous results." In less than a week the mercury fell one night, a gale sprang up, and on going to the house next morning I inquired of the footman how my patient was, and was told she had had a restless night. On reaching her bedroom I found the family watching her breathe her last. That same morning, between five and six o'clock, I was called to see an old lady of 84, who had had a bad attack of dyspnea.

palpitation, and diarrhea in the night, and who died shortly before nine o'clock the same morning. That same afternoon, at or about three o'clock, the public were shocked with the news of the sudden death of Sir S. Northcote at the Foreign Office. It may be interesting to the members if I recall to them the sudden death of Archbishop Benson in Hawarden Church, which took place during a hurricane

and a rapidly falling barometer.

In the spring of 1887 there were several letters in the Lancet from different medical men, asking if any of their confrères could account for so many calls to patients suffering from diarrhea, the attacks coming on on a certain Saturday. The same inquiry was repeated in the next week's issue. I may say in passing I looked carefully, and found no reply was ever sent. On this same Saturday, when I went into luncheon, I found a telegram from a patient I had recently taken to Brighton, and before the meal was over I had another from a patient in Essex, and a third in Acton, and a fourth in Hanwell, all of them with sudden attacks of diarrhea. For the next few days I was busy with fresh cases, all of which dated their ailments from about midday on Saturday; some were men, some were women, all under different conditions as to health, locality and age. Nothing in the shape of indiscretion in diet could account for it. For three weeks previously the weather had been anticyclonic, the barometer standing from 30.2 to 30.6. On the Friday evening the glass showed signs of downward movement, and by midday on Saturday a gale of wind had come into activity, and with it quickened action of circulation, more blood was driven through their susceptible liver, more bile thrown out, peristaltic movement increased, and in all these cases Merc. Cor. quieted this internal disturbance, and held the trouble in check.

Another instance in connection with this alteration in barometrical pressure occurred during a summer holiday in Switzerland. I was stopping with my wife and one of my daughters at Engleberg (3,314 feet above the sealevel), and at the same hotel I found a well-known West End physician, who had arrived twenty-four hours before we did. We hobnobbed together and sat at the same table. On the third morning after his arrival he came to me after breakfast, asking me to prescribe for him for an attack of diarrhea. On inquiry he said "they" had

given him bad salmon for dinner the day of his arrival and this was the cause, upsetting his sensitive liver. Others who sat at the same table, and who had been in Engleberg some days, and partook of the same, were not affected. My friend said he had taken rhubarb pills to no purpose, so he asked me what he should do. I said, "Leave physic alone, eat as usual, and drink only Cognac until the bowels are quiet." I asked him how long he had taken to get from Harley Street, and whether he had rested en route? He said he had left Charing Cross at 11 a.m., and in the afternoon of the following day reached Engleberg. I suggested he should give the fish the benefit of the doubt, and that the diarrhea was most likely due to his rapidly rising to the elevation in which he now found himself. I explained had he quietly stayed at Lucerne twenty-four hours, which is only 1,437 feet above the sea, and accustomed his heart to the altered pressure, it might have been altogether different.

Many visitors to Switzerland to whom time is precious rush away from London and find themselves in Alpine heights before they hardly know where they are, and consequently are frequently attacked by the malade de

montagne, which natives never experience.

Some years ago I had the widow of a clergyman under my care, who suffered from attacks of cardiac irregularity, palpitation, and dyspnea. She had no cardiac lesion. There never seemed to be any cause, as far as she knew, for the attacks, which were very distressing to herself and alarming to her friends. On one occasion I was sent for, and found her with a tumultuous, irregularly throbbing pulse and much distress. The attack came on in the early morning, and when I arrived about noon she was very exhausted, and looked it. Her temporal arteries were working synchronously with her radial pulse and her heart. During this time we were passing through an equinoctial gale. I at once gave brandy on the "similia similibus" principle, and gave strict injunction as soon as the breathing was easier, and the heart's action quieter, to stop the brandy, and, moreover, to watch the barometer and give small quantities of stimulants only on a falling glass. Some weeks after this, one tempestuous Sunday morning, about 11 o'clock, I happened to be passing the house, and casually dropped in to see how the atmospherical disturbance was affecting her. I found a messenger had been already sent for me, but I had left home before his arrival. I was met at the door by one of the daughters, with tears in her eves and almost choked with her sobbing, saying, "I was only just in time." I hurried upstairs, and found the bed surrounded by members of the family, all weeping. The patient was in a state of loquacious delirium, saying she was "so happy," and with clasped hands was "seeing angels ascending and descending." I inquired how long this had been going on, and was told she had awakened about 5 a.m., very distressed as usual, and had been "rapidly sinking" ever since. Her pulse on my arrival was most regular and full, 110 to 120, and not the least like what I had noticed on previous occasions. I inquired how much brandy had been given, when a bottle of Martell's Three Star was shown me, the contents of which, except a little at the bottom, had been given since she awoke. I told them there was no need for further stimulants for the next twenty-four hours, and at the end of that time she would be her usual self. Needless to say the angels all disappeared, and on my next visit the following day she had recovered from the intoxication which her too fond children had helped her to induce. The old lady has since died of senile decay, finally expiring during an equinoctial gale last spring.

Another condition which I have found almost invariably affected by the sudden lowering of atmospheric pressure, is purpura hemorrhagica. Mrs. —, a lady nearly sixty years of age, has during the last five or six years been subject to purpura. She always knows when she is developing purpuric spots by the local pains, and these attacks are always more present during the period of a rapidly falling glass. One one occasion she suddenly became deaf in one ear during a gale of wind, and when I saw her I diagnosed hemorrhage in the tympanum, which was confirmed by a West End aurist of great repute. In the summer of that year she took a house in an elevated position in the Lake District, and almost as soon as she arrived she suffered with palpitation of heart and fresh accession of spots. When she became accustomed to the elevation her cardiac action became regular. and the remaining part of the visit was happy and free from unpleasant symptoms, unless a gale of wind happened

to arise.

Now, in connection with ears, one often sees patients suffering from noises in the head, who will tell you the degree of severity differs very much — some days very little, at others quite unbearable. If you suggest to them to watch the indication of the aneroid, they will tell you they are always better on a rising and worse on a falling

glass.

Another class of cases in which I have been very interested is epilepsy, and often have been astonished at the coincidence of epileptic attacks with rapid lowering of atmospheric pressure. In connection with this I was surprised on one occasion to find the father of a young lady under my care had made observations for the last ten years in connection with his daughter's attacks, and he found she was always well during a rising glass, or a prolonged anticyclonic period, but she always had an attack when the mercury rapidly fell, and this usually in the early hours of the morning.

Another patient, a sweet, lovely little chappie of eleven years, is always more free from his attacks during days and weeks of anticyclonic periods. But recently he had

nineteen fits in five days on a falling barometer.

On one occasion, in November, 1897, one Monday morning at six o'clock, four of my epileptic patients had attacks at the same hour, and this was eighteen hours after my pocket aneroid had registered 31 inches at the end of Hastings Pier, but at the time of their attack the glass had fallen suddenly to 29.5. I am not at all inferring that all cases of epilepsy are due to this cause, for we know they are not. Still, as so many epileptics do have their fits in the early morning, I think I am justified in saying in all probability they are induced by rapid alterations in atmospheric pressure, affecting the circulation in the brain.

Diphtheria.—Another interesting feature in connection with this subject. In the prolonged anticyclonic periods which sometimes prevail for weeks together there may be at the same time an absence of rain, and consequently our drains and sewers are lacking water, while the atmospheric pressure keeps down and imprisons the sewer gases. Some years ago I demonstrated this in connection with an epidemic of diphtheria. I was inquired of by the Medical Officer of Health whether I had among my patients any cases of diphtheria or sore throats? I replied,

"I had no more under treatment than usual after a prolonged period of drought, whether that drought was caused by an absence of rain in summer or by frost in the winter."

In studying carefully the meteorological phase of the epidemic, I found the outbreak took place on January 22nd. Five weeks previously—i.e., from December 17th, a period of thirty-six days—there had been no rainfall at all, consequently the drains were in a state of quiesence. Between these same dates the average height of the barometer was 30.30. This showed the atmospherical pressure was of very high range, and spread over a long period. Consequently, when the barometer falls, this great pressure being taken off, the obnoxious imprisoned sewer gases are liberated, and escape through faulty joints and defective traps and valves. Given a long period, with a high atmospheric pressure, coupled with defective closets and drains, one can predict almost to a certainty when the glass falls there will not only be sporadic cases of diphtheria, diphtheritic throats and follicular tonsilitis, but in districts where numbers of houses have their closets, &c., faulty there will be in all probability an epidemic of the disease. If at the time of the fall there is a gale of wind to blow away the miasm, all well and good; but if there is little or no wind the gases are not easily dissipated. A falling barometer and a dead calm are very important factors, and in this case, on January 14th, the barometer began to fall, and continued doing so steadily during the 15th, 16th, 17th, and 18th, which days I looked upon as the incubation period of the epidemic, as there was a dead calm on the 14th, very little wind on the 15th, and still less on the 16th and 17th.

From what I have advanced I wish it to be distinctly understood I only find these conditions in the patient on a sudden and rapid falling of the glass. A north-east gale may be raging with fury, the glass rising all the time, and during its continuance the patient may be delightfully comfortable, but it is when the storm suddenly subsides and the mercury runs down the patient is distressed.

On a slowly progressive downward tendency of the glass the patient is not so much affected, as he has had time to accommodate himself, though unwittingly, to

the altered circumstances by which he has been surrounded.

Now, with regard to treatment, this must be carried out, in my opinion, by each patient having the homeopathically selected remedy suited to his own individual case, as much care being taken in the diagnosis of the medicine as in the diagnosis of the disease. In the majority of the cases at the time of the attack brandy or whisky or ether in small doses will be most beneficial. The usual cardiac remedies, all of which are so well known to the members present, will of course be found useful. In the intervals general constitutional treatment will be necessary to so fortify the patient that he may be able to battle with the trouble to which his peculiar idiosyncrasy has made him liable.

I do not wish my medical friends to infer I consider all diagnoses are referable to alterations in atmospheric pressure. But I do say, where every other factor is carefully weighed, and no satisfactory conclusion is arrived at, the probabilities are the barometer will settle the difficulty, especially where the disturbance is func-

tional rather than organic.

Professor Darwin, in the article before mentioned, which was published in February, 1887, says: "It is found that earthquakes are indubitably more apt to occur where there is a rapid variation of the pressure of the air, indicated by a rise or fall of the barometer, than in times of barometric quiescence, and the connection between barometric variations and earthquakes should make us reflect on the forces brought into play by the rise and fall of atmospheric pressure."

Now, why should not the human subject be interfered with by these same influences? Our very familiarity with these changes may easily blind us to the greatness of the forces which are so produced, and I am convinced many present, if they will take the same trouble and

interest I have done, will be equally satisfied.

Though there may not be enough to enlist the interest of the Congress in what I have advanced, I have found it very useful from an etiological point of view, as well as a help in diagnosis, prognosis and treatment.

glass the palient is that so much effected, as bother ind

PROPERTY AND FORCE.

By P. PROCTOR, L.R.C.P. EDIN.

Allow me to assure Dr. Dudgeon that no reproach or sneer was intended when I referred to the dangerous ambiguity of words, and if he will refer to my paper he will find that I said "the unconscious jugglery," thereby

expressly excluding motive or intention.

I think we are agreed upon the definition of property and force; the former being defined, in brief, as a permanent possession of matter, and the latter as the power of doing work. My contention is that of the properties of matter some are passive and simply regulative and some are active, such as gravitation, cohesion, and chemical affinity. These are active properties, and are certainly capable of doing work, and why Dr. Dudgeon should seek to deprive matter of these recognised properties and reduce it to the elementary conditions of simple extension and inertia passes my comprehension, unless it be that, having decided in his own mind that a property must of necessity be a passive quality, he is unwilling to grant to matter any of the active ones that are universally assigned to it, and therefore seeks to bend the facts to fit his case, and to act up to the advice of Fritzerl Schnall—

"Go in for Wahrheit,
And for Pure Reason seek;
If it land you in a bog-hole
Den die dere—like a brick!"

If, however, his intention is not so inflexible, and he is willing to discuss the point at issue, I would take up the arguments he advances against gravitation being regarded as a property of matter. He quotes Drysdale to the effect that matter might possibly exist without gravity, and that there are imaginable conditions in which matter is devoid of weight. Now these two suggestions may be admitted at once. It is possible to conceive of matter being devoid of gravitation and devoid of chemical affinity and cohesion and elasticity without actual destruction, and such a condition obtains in our ideas of chaos. As, however, we are dealing with a cosmos, where things are orderly and observe their place and

function, it is our duty to discover what the properties of matter actually are rather than what they could be imagined to be in an ideal world. Again, as regards the possibility of matter being placed in positions where it has no weight, this contingency is well known to physicists and satisfactorily explained. Professor Tait, in his work on The Properties of Matter, shows that bodies placed within a hollow sphere with a shell of uniform density possess no weight owing to the attractions opposing and balancing each other; and, again, there is a spot somewhere between the earth and the moon where the same obtains. That bodies may be in a state of equilibrium as regards gravitation is a recognised fact, and does not suggest any doubts to the scientific mind as to its being a permanent and, as far as can be known, a universal attribute of matter, and so, by the terms of the definition, a property. What gravitation owes its power to is not known, whether it is due to a vis a tergo or a vis a fronte -both views having their advocates; but the one thing that is agreed upon by physicists is to regard it as a property of matter, and it is so considered in all treatises on the subject that I am acquainted with. Professor Tait in his work on The Properties of Matter gives thirty pages to the nature and laws of gravitation. If Dr. Dudgeon refuses to accept their teaching I think he should show good reason for so doing, and so placing himself in opposition to the scientific world, and unless he recants his heresy I can see nothing for it but that our respected colleague must be handed over to the secular arm "to be dealt with mercifully and without shedding of blood." As is well known, gravitation is only one of the active properties wherewith matter is endowed, and if that could be explained away the others, such as impenetrability, elasticity, cohesion and chemical affinity, with its attractions and repulsions, would have to be dealt with and disposed of before matter could be reduced to that ideal minimum that apparently presents itself to Dr. Dudgeon's mind. But as a matter of history, so far from the physical universe being divested of active elementary properties the tendency of physicists nowadays is to endow matter with more and more innate activity, and according to the theory of the vortex-atom, matter actually exists by its own active force and its unceasing motion, and if these ceased it would no longer be matter.

So that, after all, matter may not be the dead thing it appears, but may be instinct with the "promise and

potency of all terrestrial life."

It is evident that if this matter were to be discussed by the expression of merely individual opinion it might go on for ever, but as there is a tribunal to which the case may be referred, I beg to ask Dr. Dudgeon to adduce the authorities in support of his contention, and I call on Professor Tait's The Properties of Matter, Balfour Stewart's Elementary Physics, Faraday's The Forces of Nature, and Ganot's Physics in support of mine. Before we take a step further let this point be settled by the authorities, by whose decision I am willing to abide, and when that is done it may be worth while discussing the bearing of the point upon the theory of vitality, for which purpose alone the matter has any interest for me.

OCIMUM CANUM.

Translated for The Homeopathic World.

LAST summer a lady came to see me from the country. She said she had been for several years under allopathic treatment without benefit. At length the physician said there was nothing the matter with her and advised her to get married. So she resolved to consult a homeopathic physician. She was a stout blonde, who had formerly had diphtheria, and as a sequela of this disease nephritis. Her present symptoms, which she has had for a long time, are as follows: When she rises in the morning she feels a sort of tension in the sinciput, which hinders the movements of her eyes. Many days she has shaking through the whole body followed by angry excitement; on those days she has urging to urinate and passes much clear urine. She is much given to melancholy and loss of love of life. On making any exertion she has a feeling of being swollen, but when she rests she feels elastic and light. Appetite small. After eating she feels empty and sick, but it does not amount to vomiting. Stools scanty and like sheep's dung; parts of the food pass undigested. The urine changes colour frequently. Catamenia regular. The right ovarian region is very sensitive to pressure, and she has there frequent shooting pains associated with backache. Before the period she gets always a slight eruption on the face. I first gave Thuja and Apis, and, as she had been much dosed with Iron, Pulsatilla and Dulcamara 3 alternately. After fourteen days she came again and said she was not much better. She brought some urine, which was tested. deposited a large white sediment and had a greasy skin on the top. Under the microscope the sediment proved to be triple phosphates. I gave now Ferrum peroxid. rub. 3, and Coccus Cacti 1st trit. alternately. months later I heard from her that she was better, but still far from well. I repeated the last prescription. Some weeks later she told me that she had often violent attacks of diarrhea, scalding when urinating, and constant spasmodic pains in the renal region; the former symptoms continued, and there was still a sediment in the urine. I now gave Ocimum Canum 30, five drops in water twice a week. A month later she reported that she was quite well.—Boffenmeyer, Hom. Monatsbl. xxiii. 40.

CURARE IN DIABETES.

Translated for The Homeopathic World.

Mr. Gr., at 50, came to me on the 1st of September. 1889, with all the symptoms of diabetes—dryness of mouth, great thirst, emaciation, profuse flow of urine, which contained 5:11 per cent. of sugar. He got Curare 4 three times a day. He maintained a strict anti-diabetic diet, which he had practised for a long time previously, as he knew he had diabetes. On the 29th of September he felt much better. He continued the medicine until the 20th of October, when the urine was again examined, and was found to be free from sugar. I now allowed him to take the ordinary food of a healthy person, while continuing the medicine. On the 8th of December the urine was examined and found to be free from sugar. The medicine was continued until July, 1890, and during this period the urine was frequently examined and found to contain no sugar. On the 15th of March, 1891, he came again with 1.24 per cent. of sugar in the urine. I now prescribed Natr. phosph. 2, but though he continued this till June

no improvement was observed. On the 11th of June he again got Curare 4. On the 19th of July, no sugar in the urine. Soon after this he had an attack of typhlitis, and whilst this was under treatment the diabetes was not attended to. After this the patient was not seen until the 10th of March, 1895, when he came under treatment for catarrh of the bladder. When this was relieved he seemed quite well, and the urine on examination showed no sugar. In May, 1896, he came again with 2.02 per cent. of sugar in urine. Under the use of Curare all the symptoms disappeared, and on the 12th of July no sugar could be found in the urine. Now, 5th of December, 1896, the urine is quite free from sugar.— BURKHARD, Zeitsch. d. Berlin. Ver. xvi. 1.

Mr. H. came on the 25th of October, 1895, with 6.68 per cent. of sugar in urine. He had been under strict anti-diabetic diet for four weeks. He got Curare 4. On the 11th of November the sugar was down to 1.85 per cent. But on the 12th of December it had again risen to 2.21 per cent. From this time it steadily decreased, and on the 17th of March, 1896, was found to be quite free from

sugar.—Ibid.

ARBORIVITAL MEDICINE.

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

SUBJECT: OVARIO-UTERINE IRRITATION.

A LADY, influentially connected with the Press, asked me to take up the case of a poor, broken-down lady living near Brighton, and who was unable to come and see me.

At my request for particulars the patient, on April 28th

last, sent the following:-

"I was first taken ill about September, 1896; always suffered much at the monthly periods, but at this time severe flooding set in, which would last about six or nine days.

"Always had a weak heart, not diseased; what the

doctors called a trembling heart.

"About this time great sleeplessness set in, which was treated with *Sulphonal*; this did no good. This sleeplessness has continued till now, and I get no rest unless under a *Chloral* and *Ether* draught. The monthly periods now

occur sometimes twice or three times a month, with less loss than formerly; but I have a new symptom lately—vomiting of blood, perhaps half a pint at a time. My doctor has told me this is from ulceration of the stomach. Very little appetite; never without pain in the womb.

"I have had very bad attacks of acute hysteria for

more than a year.

"The doctors say one ovary is affected, and unless I go under an operation cannot be cured. I have had great suffering in it from neuralgia at different periods of my life; had rheumatic fever about ten years of age. Diarrhea has continued off and on for six months, all food affecting the bowels very quickly; and extreme retching lasting for hours, especially from about two o'clock in the morning till breakfast time. This is much worse at the monthly times and when so sleepless.

"My heart has been treated to allay the pain with

Chloroform and Bromide.

"The doctor only tells me I have womb complaint

with ovarian irritation, which causes acute hysteria.

"I am almost insensible for hours together, and I get severe attacks of twitching of the limbs at night, like convulsive movements and severe shaking fits; cannot keep still for one moment.

"The doctor who last attended me said I was in an

extreme state of nervousness.

"My age is 36; no children; married 18 years; never had a miscarriage."

This was the report I received, and I returned the

paper for further particulars, thus:-

Any pain at pit of chest? Reply: Constant and very great pain.

Flatulence? Reply: Not much.

Monthly period—(a) colour, (b) duration, (c) pain? Reply: Sometimes very brilliant in colour, other times dark; lasts about five or six days; excessive pain before and during the time; never without pain in the womb, and very tender on pressure. The loss occurs generally twice a month.

In reply to this sad tale of suffering I sent Viscum

album ϕ A, which was taken May 1st.

May 12th.—"Is feeling much better; had a rather bad monthly period last week; severe pain after being twelve days overdue; still sleepless; pains in ovaries nil."

June 6th.—Writes: "Is much better; monthly period has come naturally and with less pain; very sleepless still and much diarrhea; appetite bad."

Again, Viscum alb. ϕ A.

June 24th.—Writes: "I am glad to say I am very much better in every respect; all the bad symptoms are abating,

and I sleep better; my nerves seem stronger also."

I do not wish readers to run away with the idea that this case has been absolutely cured; it is quite enough to limit ourselves to the report, which evidences a remarkable and speedy alleviation to a long period of most excruciating suffering.

As to my reasons for prescribing Viscum album.

They are, firstly, its well known effects over choreic symptoms. Here we had a trembling heart, twitching of the limbs at night, and severe shaking fits, with a cataleptoid state of insensibility for hours.

The prescription of *Viscum* was amply justified by the Hahnemannian principle that the symptoms and not the names merely of diseases are to correspond with the

remedy.

Many articles have from time to time appeared in our journals as to the power of *Viscum album* in St. Vitus's Dance; that of Dr. John Wilde, in the February, 1868, number of the *Monthly Homeopathic Review*, was parti-

cularly in my mind at the time of prescribing.

Secondly, I had in mind the remarkable paper from Dr. E. M. Holland in February 15th No. 1898 of the *Homeopathic Recorder*, and which had been copied from the *Medical Summary*, on the oxytocic properties of the mistletoe, and in which the writer expresses his opinion that the *Viscum album* is far superior in labour cases to all remedies he had hitherto tried.

KREASOTUM.

Communicated by Alfred J. Pearce.

Among some papers of my late father's, Dr. C. T. Pearce, I have found the following proving of *Kreasotum* in the handwriting of the late Dr. Henry Thomas, who was my father's assistant, in Northampton, in the year 1855.

[&]quot;Kreasotum.—June 17, 1855. While calling to see

Whitworth, observed a bottle of kreasote and smelled of

it twice. In an hour or two afterwards had—

"Pain, bruised aching—somewhat like that of Glonoine but not of such a fine throbbing character—in and over the right external angular process of the frontal bone. At 5 p.m. noticed, while eating, a bruised, aching sensation in molars and bicuspidati of right side.

"June 18th. Toothache returned during meals; and after supper also similar pain in the left molar teeth. Ten p.m., pain in left ex-angular process. Seven p.m., aching in right molars from crown to root, especially upper jaw. Toothache worse while drinking warm cocoa and while masticating bread, but better with cold water in mouth. The aching in right ex-angular process worse on pressure.

"June 19th. Had griping pain in the transverse colon at 7 a.m., while lying in bed, with great urging to stool, relieved on standing and moving about. Urging to stool all day. Six p.m., lying on couch, griping returned. One p.m., bleeding from right nostril (bright blood), slight, stopped with cold water. Eight p.m., slight griping above umbilicus, left side, while writing.

"June 21st. Tendency to toothache at 6 p.m., and for some days after, in right molars, which are principally

sound—some have been plugged with gold.

(Signed) "H. T.

"Northampton, July 16, 1855."

Dr. H. Thomas was then a spare, healthy, active, and sanguine young man; devoted to his profession, and keenly observant of the action of medicines. I have a vivid remembrance of him—I was then in my fifteenth year—and he frequently related to me his observations of the action of medicines. I retain the original notes as a memento of one for whom I have a great regard.

SENECIO.

By Observer.

In connection with the article on the use of Senecio aureus in puerperal eclampsia in the May Homeopathic WORLD, the following abstract from the Edinburgh Medical Journal for the same month is interesting:

ON THE USE OF THE SENECIOS IN FUNCTIONAL AMENORRHEA.

By W. E. FOTHERGILL, M.D.

Senecio, Groundsel belongs to the tribe Senecioidæ suborder Tubulifloræ of the Compositæ. "Juice is taken in beer or a decoction with honey, vomits gently. Outwardly applied is useful for inflammation of the paps and for king's evil" (Blanchard). In 1831 Finazzi described it as useful in epilepsy. The ragwort (S. Jacobæa) and some other species were used in popular medicine as emmenagogues. In old English herbals it was called the "Female Regulator," and in America S. aureus, as "Life Root," has been used in menstrual derangements. Murrell made a 1 to 10 tincture of the whole plant of S. Jacobæa and took ½ drm. thrice daily, increasing the dose to \(\frac{1}{4}\) oz. four times daily, with no injurious effect. Liquid extracts were used in doses of 20 drops four times daily and also Senecin, minimum dose 2-3 grs. three or four times daily. He mentions cases from which he concludes that it succeeds in cases in which the menstrual flow having been established was suspended in consequence of exposure to cold or some similar cause. It failed in cases of amenorrhea associated with anemia until the latter condition was relieved. It is useful in cases in which the menstrual flow has never been established, and in four cases of vicarious menstruation; it not only anticipates the period but increases the quantity. It promptly relieves the pain and headache in dysmenorrhea. It is apparently not ecbolic.

Dalché and Heim gave it to pregnant guinea pigs without producing abortion or otherwise affecting the pregnancy. They mention two cases in which it relieved amenorrhea, and from these and other cases conclude that the drug relieves painful menstruation if the reproductive organs are healthy. They remain doubtful whether Senecio provokes the menstrual flow, and offer no hypothesis as to its mode of action. They used a solidified extract of S. Jacobæa and S. Vulgaris in pills of 2 to

4 grms.

Bardet and Bolognesi conclude that *Senecio* has the constant property of producing menstruation though administered in small and harmless doses; that it tends to regularise menstruation but does not relieve pain in

the intervals and does not increase the discharge. They suggest that it produces congestion of the reproductive organs and contraction of the uterine muscle. Dr. Fothergill says these two last are open to criticism, as they convey the impression that *Senecio* causes menstruation both by producing pelvic congestion and uterine contraction.

Dr. Fothergill in his own observations used three preparations: (1) A 1 in 10 tincture of S. Jacobæa, made by Munro of London; (2) the known resinous substance of Murrell Senecin, made into 1 gr. tabloids by Burroughs and Wellcome; (3) A 1 in 1 extract made as in Kirkby's formula. Doses given were 1–3 drms. of tincture, 2–3 grs. of Senecin, and 20–30 m. of the extract, each of them three or four times daily.

The cases in which the drug was applied fall into four

groups and tend to answer the questions—

1. In pregnant women, does Senecio cause abortion?
2. In amenorrhea, does it cause menstruation?

3. In persons menstruating regularly, does it cause the flow to appear earlier than usual?

4. In dysmenorrhea, does it relieve pain?

A series of cases is given illustrating its use. Dr. Fothergill sums up by saying he considers that Senecio is not an ecbolic; that it will not provoke menstruation in cases of marked anemia or advanced phthisis, but will do so in functional amenorrhea. He differs from Murrell in that he considers the discharge is not increased, and in this he agrees with Bardet and Bolognesi, but differs from their views regarding the mode of action of the drug. He does not think it of much use in the relief of pain in dysmenorrhea. It is of no use in amenorrhea from congenital and local defects.

He agrees with Murrell in thinking that the resinous "Senecin" contains the emmenagogue principle and not the alkaloids which Lutz states are found in the

root alone.

Wiet found by experiments on frogs and guinea pigs that *Chlorohydrate of Senecionine* (an alkaloid) destroys the excitability of motor nerves but leaves intact the irritability of muscle. In sufficient dose it is a curariform poison. Effect on sensory nerves doubtful. It slows the heart's action and in fatal doses stops the heart in systole.

Chemical composition: Senecic Acid, an organic acid

found in S. Koempferi. It differs from the Senecic Acid found in S. Canicida, a Mexican poisonous species. The action of this latter acid is: a phase of excitement followed by a state of depression, then convulsions occur, first clonic, later tetanic, finally reflexes are suppressed, heart and respiration are arrested. S. Canicida is recommended by Mexican physicians in epilepsy.

Senecion, a brown resinous substance. Senecionine and Senecine, alkaloids.

MATERIA MEDICA MISCELLANY.

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

Some remedies in Pneumonia—Iodine, Sanguinaria.— Dr. Brown, of Shippensburg, Pa., claims to have aborted in forty-eight hours several cases of pneumonia which, from their rapid onset, threatened to terminate in severe attacks. The remedy used to achieve this result was Iodine in drop doses of the tincture every one or two hours. The indications for its use are severe chill, short, dry cough, rapid rise of temperature, developing hoarseness, great tightness of the chest, early expectoration of blood, and tearing, stabbing pains in both sides.

As the cases progress, if they complain of great dryness in the throat, have red cheek on the affected side, cough with tough, rusty sputum, stitches and burning in the chest, with inability to lie with head low, both breath and sputum smell bad, afternoon aggravation—if these symptoms develop Sanguinaria is his sheet-anchor. In fact, this remedy and Phosphorus are the principal ones

for the later stages.—Med. Cent.

Tela aranea in Asthma.—Dr. Kershaw, of St. Louis, who has used this remedy for some time, says of it: "This remedy has done me excellent service in some old cases of asthma, in which other remedies have failed to do a particle of good. Some bronchial coughs too were relieved by it with surprising rapidity. I find it also of great benefit in persistent sleeplessness, the patient becoming quiet in a short time, and passing into a light, natural sleep, from which he awakes invigorated and refreshed. I am not able to give clear indications for its use; but a little more experience will, no doubt, decide

its range of action. When, however, it acts at all, it

does so rapidly."—Hom. News.

Tuberculinum Kochii in tuberculosis of the Iris.—Dr. L. Schepens reports a well-observed case of tubercle of the iris in which Arsenicum, Sulphur, and Kali bic. were without effect, while Tubercul. K. 6 given twice a day caused an immediate arrest of the growth and a speedy clearing away of the deposit.—Jour. Hom. Belge (J.B.H.S.).

The Symptomatology of Convallaria.—In both sexes convallaria causes colicky pains, fulness in the hypogastrium, with soreness, worse from sneezing, coughing, and the like, and with desire for stool. The evacuations are, at first, normal, with smarting at the anus (in the male prover), but afterwards they become thin, brown, and

offensive, with tenesmus.

Both sexes suffer from sore aching in the lumbar region. In the female there were, in addition, labour-like pains in the sacro-iliac synchondroses, extending thence across the pelvis, and once up the back, when nausea and faintness supervened. The uterus felt as if it had descended and was retroverted. There was also a cord-like pulling from the navel to the pelvic organs. The lady felt better when sitting leaning forwards. In the morning, on raising the head from the pillow, she felt faint and dizzy, as in morning sickness; relieved by vomiting mucus.

She also suffered from hot, suffocating feelings, with slight sweat; fluttering of the heart, and a sensation as if the heart stopped beating and then started again,

causing a faint, sick feeling.

Convallaria is a valuable addition to our materia medica. It affects the vaso-motor nerves, which are weakened. There follow, as a consequence, sweat, hot flushes, soreness of the tissues, feeling of abdominal fulness, weak heart, &c.

As the drug has an affinity for the lower parts of the abdomen, the hypogastrium soon becomes sensitive, as does also the lumbar region, and smarting of the anus, diarrhea, and colic, show its effect upon the bowels. In the female doubtless the uterus is congested and falls out of place.

But, further, there is a depressing effect upon the vital powers, and there are also organic changes resulting from the action of the *Convallaria Majalis*. All this is apparent in the lowered temperature, the "smoke-coloured" face, weak heart-muscle, general prostration, and in the condition of the urine, which contains sugar and an excess of phosphates.

It compares with Sepia, Lilium Tig., Helonias, and of course Digitalis. If the modality "better sitting leaning forwards" is characteristic, it will afford a convenient

differentiation.—Hahnemann Monthly.

KEY-NOTES—PRACTICAL ONES.

By AGRICOLA.

Another Hit Therapeutic—Frontal Lotions.

Consequent, probably, to influenza, possibly to some unknown drug action, I had for some four years become frequently subject to a distressing vertical vibration of the line of vision of the right eye, of the eye globe itself, and also a twitching of the eyelid. The condition was becoming steadily more pronounced and I myself more anxious as to its probable ultimate result.

One day I had made an aqueous solution of *Potassic bichromate* of a *pale lemon tint*. At that moment the eye condition was unusually troublesome. "Let's see what influence this remarkable salt has upon the eye as an external application," I exclaimed. Result—cure of the eye trouble, and as the cure was affected many months

ago, I consider the cure a permanent actual cure.

Many instances of prompt cures of various ophthalmic troubles have followed the above therapeutic hit. Of course, the literature homeopathic of the drug (K₂Cr₂O₇) Potassic bichromate had already anticipated my experiences, but that was in a causative sense rather than a curative one, I believe.

It is well to say that the cure was preceded first by an intense frontal headache of some hours (this always follows the use of the lotion); then by a profuse lachrymation of the right eye, the attacks of the latter being periodic and of an hour's duration.

SNAKE-VENOM—ITS ACTION AND EFFECT.

Being a reply to arguments advanced by those favouring the Blood-poison Theory.

By Frederick Kopp, Greenwich, N.S.W.

V. THE STRYCHNINE ANTIDOTE. (Continued.)

Professor Davies's experiment with Strychnine in the case of one of the dogs bitten by a tiger-snake appears to have had the same result as the experiments made some years ago on dogs and cats with the same antidote. It has been found that, although there appears to be an antagonism between the toxic effects of snake-venom and Strychnine, the convulsions of Strychnine being arrested very speedily when injections of snake-venom were resorted to, these convulsions also not appearing in the case of frogs that had had injected a fatal dose of snake-venom, and only slightly in the case of cats, vet all the animals experimented on died. It has, however, been explained by the advocates of the Strychnine antidote that this 100 per cent. rate of mortality is the result of injecting overdoses of the Struchnine; that it has been proved by the experiments that, should the quantity of Strychnine injected be even only slightly above that required, cats and dogs almost all invariably die, and that in such cases their motor nerve-centres give way and collapse altogether. This must be very comforting news to those who pin their faith to experiments made on animals, and who are under the impression that drugs have the same effect on man as they have on the brute creation. I will now mention two or three cases of snake-bite in which Strychnine has been used as the antidote. and in which symptoms of Strychnine poisoning appear to have set in in conjunction with the toxic effects produced by the snake-venom.

Case 1.—A child, ten years old, the case reported by Dr. Wrigly, Glen Innes, N.S.W. The symptoms caused by the snake-venom were a comatose, cyanosed condition, pupils fully dilated, and the heart acting feebly. Galvanism was applied over the heart, and Liquor Strychnine was injected; Brandy and beef-tea were also administered in small quantities. There were muscular twitchings immediately before death.

Case 2.—Reported by Dr. Hayes, Warragul, Victoria; a child three years old. The symptoms produced by the snakevenom were vomiting, slight drowsiness, gradually increasing (while under the Strychnine treatment) to coma. Liq. Strychnine was injected, until spasmodic movements of the limbs and head took place, which continued until death; m viij. of the Strychnine are said to have been injected.

Case 3.—Reported by Dr. Helsham, Richmond, N.S.W., the age of the patient being 25 years. The snake-venom symptoms were unconsciousness, shallow respiration, feeble pulse, and dilated pupils. M xxvj. of Liq. Strychnine were injected within twenty-five minutes. Sharp tetanic convulsions then set in, and there resulted also retraction of the head and risus sardonicus. The tetanic convulsions came on and off for two hours, and an enema, containing forty grains of Potassium Bromidum, had to be made use of. The patient eventually recovered. In this case Strychnine was injected to antidote the snake-venom, and Bromide of Potash had afterwards to be administered to anti-

dote the Struchnine.

Case 4.—Reported by Dr. Ray, Seymour, Victoria, the case being that of a youth, sixteen years of age. The symptoms developed by the snake-venom were a tendency to coma. Liquor Strychnine, m clxxx., were injected within six hours. Well-marked toxic symptoms were then developed, and the injections had to be ceased, as the muscles of the face and neck became strongly affected, and the muscles of respiration were so much influenced as to render breathing rather difficult. The toxic symptoms subsided about half an hour after the last of the injections, and the patient appeared to be recovering. Two hours afterwards, however, he became comatosed, when mlx. of Liq. Strychnine were injected. No effect was produced, and the patient gradually sank and died, death being apparently due to paralysis of the respiratory organs.

Case 5.—Reported by Dr. McDonnell, Toowoomba, Queensland, the age of the patient being eight years. The snakevenom symptoms were hematemesis, pupils widely dilated, respiration slow and drowsy, the mind being, however, clear. Later on (after injection of Liq. Strychnine) the patient became cyanosed and collapsed. M xxviij. of Liquor Strychnine were injected, which produced slight tetanic spasms in the arms, and death resulted in $1\frac{1}{4}$ hours after the treatment began.

Case 6.—Reported by Dr. Yeatman, Auburn, South Australia, the age of the patient being 45 years. The symptoms produced by the snake-venom were coma. The patient had been freely dosed with Alcohol, and the unabsorbed Alcohol was got rid of by prompt emetics. M xv. of Liquor Strychnine were then injected, which was followed in about three hours afterwards by strong convulsions. The patient, however, recovered, but the nervous system was affected for months afterwards.

On perusing the six cases mentioned and described above, it will be seen at a glance that under the Strychnine treatment there is always present the danger that the patient, instead of dying from the effects of snake-bite, succumbs to the toxic action of the antidote. The warning, therefore, uttered by me some years ago is thus fully justified by most convincing facts in proof thereof, which have been brought to light since the treatment of snake-bite with Strychnine was first introduced. I am aware that I have been accused, by those holding different opinions to my own, of being "unreasonably prejudiced" against Strychnine as an antidote. It may not, perhaps, be generally known that I was inclined to receive the new antidote most favourably when it was first introduced; but it was not long before I discovered that the results obtained thereby were not up to what I expected them to be. I found that the death-rate per centum, instead of being lowered by the new antidote, was raised to over three times that under the old treatment, namely, by Ammonia, Permang. Potash, &c. I also saw the risk that had to be encountered in using the injections, lest a too large quantity of the antidote should be administered. It will thus be at once evident to those who know anything at all about the subject, that there is not the slightest "unreasonable prejudice" in my "opposition" (as some choose to call it) to the Strychnine treatment. I have only spoken of the antidote as I have found it. More or less than this I cannot honestly do. Mr. James Bray speaks very truly when he says:—"The serious part of the whole question, in so far as 'antidotes' are concerned, is to determine at the time when a person has been bitten by a venomous reptile whether venom insufficient, sufficient, or more than enough has been injected by the reptile. That is almost an impossibility for man to do. Science, up to the present time, is in the dark in so far as to trace venom in a human being after death through snake-poison."

There is another case that I would like to mention, reported by Dr. Pain, of Queensland, to the Australian Medical Gazette. The patient (a young man) at the time was in a collapsed and cyanosed condition. The treatment consisted of prompt incision and ligature, and the injection of mxlv. Liquor Strychnine within $2\frac{3}{4}$ hours. The patient was also freely dosed with Brandy and Ammonia. He recovered in six hours. Two treatments appear to have been followed out in this case, or, more properly speaking, a combination of two, and it would be interesting to know which drug benefited the patient most. The treatment followed out appears to me to have been one in which the

doctor thought it was "better to be sure than sorry."

THE ACTION OF STRYCHNINE AND OF SNAKE-VENOM—A COMPARISON.

I shall now compare the action of *Strychnine* with that of snake-venom in the form of the following table, by which the difference of the two poisons can be seen at a glance:—

Symptoms of Strychnine Poisoning.

Nausea, vomiting, feeling of suffocation, great difficulty in breathing, restlessness, fear, and great uneasiness, jerkings and twitchings of the head and limbs, trembling and shuddering of the whole frame, periodical convulsions, in which the head is jerked violently backwards, the hands clenched, the limbs stretched out, and the whole body at the time becoming stiff and bent in the form of an arch. The convulsive spasms affect the chest, which is fixed, thereby arresting the breathing, so that the face becomes dusky and congested, and has a wild, anxious, drawn appearance, with the eye-balls prominent and staring, the lips livid, and the muscles of the face contracted with a ghastly grin, which is known technically as risus sardonicus. Electric-like shocks of pain in various parts of the body, starting in the back, and extending afterwards down the arms and legs. The mind remains perfectly clear, and the convulsions are spasmodic, lasting for a minute or more. The peculiarity of these convulsions is that the slightest breath of air, a movement, or even the sound of a footstep, will bring on another attack, the most trivial cause being sufficient to develop a fresh spasm. There are also spasms of the respiratory muscles and rigidity of the abdominal muscles. The pupils are not affected. Occasionally there is frothing at the mouth, which is sometimes mixed with blood, caused through the tongue being injured by the teeth. The patient feels greatly exhausted during the intervals between the spasms, and the convulsions, which are tetanic, become progressive in violence. respiration becomes more and more disturbed, being very short, and the pulse is irregular. The symptoms very closely resemble those of tetanus, only that the muscles of the jaw are generally the last to be affected in Strychnine poisoning. The patient is conscious of the accession of each fit. Death ensues

Symptoms of SNAKE-VENOM Poisoning.

Heaviness of the lower extremities, followed afterwards by paresis and partial paralysis, which gradually gives place to general paralysis. Paretic condition of the muscles of the legs, the walk becoming staggering and unsteady, upper extremities the last to be affected, generally retaining their power of voluntary motion even after the muscles of the neck have become paretic; head sinks to one side, or is held up with great difficulty. Deadly pallor and coldness of the skin, which assumes an ashy hue, caused through the blood receding from the skin, a condition closely resembling that peculiar to extreme anemia. Deadly faintness and agonising feeling round the heart. Small, frequent, and compressible pulse. Accumulation and engorgement of the blood in the abdominal veins. Respiration greatly interfered with, it becoming quicker and shallower, the blood becoming almost stagnant in the abdominal veins. Sinking of the blood pressure to 0. Occasionally there is internal hemorrhage from rupture of the capillaries. of the gastric mucous membrane, caused through general engorgement of the portal circulation. Dilatation of the pupils of the eyes, with dulness and dryness of the cornea, the anterior surface of the eve-balls also becoming dry; immovability of the nostrils, the naso-labial fold becoming obliterated. Parting of the lips, the lower jaw hanging down, as the lower jaw is not held up by the muscles connected with it; protrusion of the tongue. Paralysis of the soft palate, pharynx, and esophagus, apnea. Absence of all reflex action. Complete extinction of consciousness. and coma. Death results from paralysis of the heart and anemia of the nerve centres. Snake-venom acts as a depressing nerve-poison on motor nerve-centres, and affects the sensory sphere. It acts violently and quickly when injected into a vein, but not when brought into contact with the stomach, unless

Symptoms of Strychnine Poisoning.

either from suffocation through paralysis of the muscles of the chest, or else from exhaustion from the repeated convulsions. The poison affects the motor nervecentres and also the sensory sphere, the spinal system being disturbed with its functions. It also acts more violently and quickly when injected into a vein than when brought into contact with the stomach. Strychnine over-stimulates the nervous system. Postmortem: Muscles rigid and stiff, lungs, brain, heart, veins, and spinal marrow filled with blood, as from asphyxia.

Sumptoms of SNAKE-VENOM Poisoning.

that organ has an abrasion or means of allowing the venom to be introduced into the circulation. Snake-venom paralyses the nervous system. Post-mortem: Accumulation of blood, of a thick, tar-like condition, in the abdominal veins. the heart itself being almost blood-

(To be continued.)

SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

Annual Assembly.

First Meeting.

THE tenth meeting of the session was held at the Homeopatic Hospital, on June 29th, at 8 p.m., Dr. Neatby, the president, being in the chair.

Norman P. Webster, L.S.A., M.C.P.S. Ontario, George

Place, Guernsey, was elected a member of the Society.

The evening under the auspices of the Section of Materia Medica and Therapeutics was devoted to a discussion on gastric remedies, introduced by Dr. Stonham, who read a very good, concise paper on "Simple Dyspepsia."

The discussion was commenced by Dr. Galley Blackley, who spoke of the value of hard food, such as biscuits, the mastication of which by mechanical pressure caused an excretion of saliva. He also alluded to the value of Apomorphia in the vomiting of pregnancy. He thought the drug acted reflexly as well as by direct stimulation of the vomiting centre.

Dr. Ord alluded to the importance of finding peculiar symptoms in the drug provings, because in certain provers all drugs produced the same group of dyspeptic symptoms,

and these were therefore of little or no value. He raised the question of the difference between the chemical and homeopathic action of drugs such as alkalies or carbon in the stomach. He thought their action was in the same line. He said that small doses of lemon-juice will cure some cases of acid dyspepsia. He also mentioned a case of Borborygmi, due to worms.

Dr. Byres Moir emphasised the importance of worry as a cause of dyspepsia. He thought it was a mistake to stop too many kinds of food, and that the use of liquid diet was overdone in cases of flatulent dyspepsia. He had found *Kreosote* and

Tabacum of great value in vomiting.

Dr. Goldsbrough spoke of the value of $Capsicum \ \phi$ in one or two drop doses for the vomiting of alcoholics. He said that $Nux \ V$. should be given in the higher dilutions, except to people accustomed to free living and alcohol, who should have it in the ϕ or 1x tincture. He often used $Plumbum \ Acet.$ where there existed great irritation of the gastric mucous membrane and severe pain in the stomach associated with a dark or black coating of the tongue and constipation. He had found a "lemon drop" very useful for heartburn and acidity.

Dr. Washington Epps said that for the noisy flatulence of nervous patients *Ignatia* was the best remedy. He gave a rough differentation between the pains calling for *Argent*. *Nit*., *Kali Bich.*, and *Ars*; when the pain is at the cardiac end of the stomach *Argent*. *Nit*. is indicated, when general, *Arsenicum*, when at the pyloric end, *Kali Bich*. Pain preceded by cramp

in the calf he had cured with Cuprum.

Dr. E. B. Roche thought *Bryonia* should not be used in low dilution for dyspepsia. He had more often seen aggravation produced by *Bryonia* low than with any other remedy. He

used the 12th mostly.

Dr. Goldsmith (Čincinnati) said he had found *Iris* a very valuable remedy in some dyspepsias, and *Hep. Sulph.* for nervous dyspepsia. And for gastralgia *Mag. Phos.* and sometimes *Strych. Phos.* were excellent remedies. He said there was a recognised form of dyspepsia in America produced by coffee-drinking.

Dr. Newbery mentioned a case of bilious attacks with right supraorbital headache, preceded by seeing zigzags; *Ignatia* invariably relieved, and if taken as soon as the zigzags

appeared it would avert the attack.

Dr. Lambert thought it a mistake to limit the use of Lycopodium to intestinal flatulence; he had frequently seen cases of undoubted gastric flatulent dyspepsia cured by Lycopodium, usually in 30th dilution. Referring to Dr. Ord's remarks, he said he had seen a case where charcoal biscuits gave very little relief in flatulence, but *Carb. Veg.* acted very well. He had also found *Carb. Veg.* of special value in flatulence accompanying heart disease.

Dr. Roche (Clapton), Mr. Knox Shaw, and Dr. Neatby also

took part in the discussion, and Dr. Stonham then replied.

Second Meeting.

The eleventh meeting of the session was held on Thursday, 30th, at the same place, at 8 p.m. Dr. Cash Reed (Plymouth), Dr. Ord (Bournemouth), and Dr. E. B. Roche (Norwich) were elected Fellows of the Society, and Dr. J. J. Gawler Pritchard, of Dewsbury, Yorks, was elected a member.

The meeting was purely of a business character dealing with the report of the council, the treasurer's statement, a report from the indexing committee. The honorary secretary (Mr. Knox Shaw), on resigning his office, gave an account on the

work of the Society during his period of secretaryship.

Dr. Burford moved an amendment of the laws dealing with the editor of the Journal and secretary of the Society, to the effect that there should be "editors and secretaries" instead

of only one of each; and his resolution was passed.

The officers for the next session were elected as follows: President, Dr. A. C. Clifton; Vice-Presidents, Dr. Geo. Burford and Dr. Washington Epps. Dr. G. Blackley was re-elected Treasurer, and the office of Secretaries still remains open.

The members of the council and of the various committees

were also elected.

During the evening Messrs. Down Bros. gave a very excellent exhibition of surgical instruments and appliances; and Messrs. Young, Pentland & Kimpton of recent medical and surgical books.

INSTITUTION.

CHELTENHAM HOMEOPATHIC DISPENSARY.

THE Forty-second Annual Report of the Cheltenham Homeopathic Dispensary has been issued by the physician, F. G. Stanley Wilde, Esq., L.R.C.P., L.R.C.S., Edin., and runs as follows:—

In the past year (ending April, 1898), 296 new patients have applied for relief at the Dispensary.

The total number of attendances amount to 1,746. The visits paid to patients at their homes amount to 760, as against 501 in the preceding year. Although this department has markedly developed of late, it could be still further extended if subscribers' tickets were more readily obtainable, and if the fact that patients can be attended at home were more generally known.

The spontaneous expressions by the poor of the benefits derived by treatment from the Dispensary are an ample and a gratifying testimony of the usefulness of the Institution, and should be an incentive to those who, knowing the advantages of homeopathic treatment, have not hitherto become subscribers.

FOODS, ETC.

DEVONSHIRE (WHIMPLE) CYDER.

We have received from Messrs. Henry Whiteway and Co., of Whimple, Devon, a case of cyder containing samples of various kinds, and we are pleased to report that we find them one and all of excellent quality. The advance of cyder in the favour of the public as a beverage we take to be a very wholesome sign. As appears in the article quoted last month on "The Apple as a Medicine," there is much to be said in favour of the apple whether as medicine, food, or drink. And that cyder retains the antigout virtues of the apple seems to be shown by the Devonshire proverb that "Gout, eczema, stone, and gravel fly from their enemy cyder." We have often heard it stated, and never heard it contradicted, that in the cyder district gout and rheumatism are almost unknown.

The one important thing about cyder is that it must be pure—it must consist of the apple, the whole apple, and nothing but the apple. There are cyders on the market which are so many attempts to improve on the natural apple, and impose on the palate of the public by the addition of water, saccharine, chemicals, and artificial aeration. But this is fatal so far as the cyder is concerned. Adulterated cyder is a fraud of the first magnitude.

Cyder pure has one great advantage over its rival beverages, beer and stout. It contains only 3 to 4½ per cent.

of alcohol, in comparison with 12 to 14 per cent. in the latter. This should be a matter of interest to those who would assist temperance by advocating cyder drinking in place of beer drinking. In apple-growing districts the labouring classes will invariably give preference to cyder over beer. And it may not be known generally, but the teetotaler's wine, ginger beer, if placed in a sunny window, will generate a fermenting strength of alcohol up to 2 and even 2½ per cent. Cyder pure contains the exact natural strength of alcohol for keeping purposes, i.e., preserving properties for many years; and in its natural state it is certainly the most wholesome and one of the most delicious of all fermented beverages. Another important point is that cyder does not provoke thirst like beer; on the contrary it assuages this craving of nature more than any other drink. We are glad to learn that cyder is finding its way into our public schools as a beverage for the boys in place of beer. Eton leads the way in this matter. We are certain that the move is a very good one.

Three things are needed in the successful production of cyder:—(1) Technical skill, *i.e.*, the knowledge of manipulation of the liquor during fermentation; (2) cleanliness in all matters connected with racking, &c.; and finally the alpha and omega of success must be the quality of the

fruit.

Owing to the argillaceous nature of the soil at Whimple—a moisture-retentive clay—a variety of fruit trees such as cannot be found elsewhere, many of them of excellent eating quality, has given this immediate district a reputation which is well known among the farmers and cyder growers throughout the county of Devon. Owing to this well-nigh infinite variety of apples it is no exaggeration to state the Whimple orchards produce over a dozen pure cyders, each of a distinct character. Thus every phase of taste may be satisfied. It seems strange, but in very few places will there be found more than one sort of cyder; so that a person who likes "dry" cyder can only procure sweet, and vice versâ. From the samples supplied to us, we believe that the most fastidious taste can be satisfied in the cellars of H. Whiteway and Co.

The samples that have been submitted to us are "Sweet Alfred," "Woodbine Blend," Fair Maid of Devon," and

"Whimple Specialité." The "Sweet Alfred" and "Fair Maid of Devon" are named from the apples of those names. The former is sweeter than the other and more effervescent. The "Whimple Specialité" is a very light, refreshing, thin drink. The "Woodbine Blend" is the one we favour most, as it is dry and can be taken either alone or with food of any kind. Sweet cyder does not go very well with meats. These are bottled cyders, but H. Whiteway and Co. supply cyder in barrels, and naturally this comes cheaper. We trust that with the increasing enlightenment of the age, this "wine of our country" will steadily supplant malt liquors as a native beverage. And we regard those who provide it pure as benefactors to the public.

REVIEWS.

BURNETT'S DISEASES OF THE SKIN.*

THE next best thing to a new book by Dr. Burnett is a new edition. The third edition of Dr. Burnett's well-known *Diseases of the Skin* is enlarged by the addition of a *Third Part*, and this is what Dr. Burnett has to say of it:—

"In this third edition I have added Part Third, dealing with the cure of alopecia areata by constitutional remedies, without any local applications whatever. And it seems to me that if the disease can be healed by the exhibition of constitutional remedies in purely dynamic dose, the said disease must itself be of a constitutional quality, as the nature of the curative means indicates the nature of the malady."

To our thinking Dr. Burnett amply proves his point, and we commend the perusal of his interesting and valuable experience to all therapeutists who aim at constitutional cures.

^{*} Diseases of the Skin: their Constitutional Nature and Cure. By J. Compton Burnett, M.D. Third edition. Revised and enlarged. London: Homeopathic Publishing Co., 12, Warwick Lane, E.C. 1898. Price 3s.

REPERTORY TO THE CYCLOPEDIA.*

THE DRUG PATHOGENESY-PART II.

We have received the second part of Dr. Hughes' great work, carrying the Indexing down to the Digestive System. In our review of the first part we gave our opinion on the plan of the work, and therefore need not enlarge upon the subject again. The plan having been chosen it is necessarily adhered to, and it only remains for us to congratulate Dr. Hughes on having advanced so far with his great task.

THE SCIENCE OF THE STARS.

This work, the second edition of which is now before us, deals with and explains the views of the ancient astronomers who do not limit the science of the stars to the laws governing the motions of the heavenly bodies, as astronomers since Kepler have done. It treats the subject in such a way that it can be easily understood by those who might naturally be repelled by mysterious-looking symbols and rows of figures incalculable by the unmathematical. In our opinion the subject is one of very great interest. It is an undisputed fact that all the members of our planetary system act and react on one another in an infinity of ways, and it seems to us most unlikely that that influence should be purely a physical one. The practical importance of the subject depends on the degree in which is may be possible to bring its conclusions within the compass of everyday life. We have already much more knowledge than we can digest with anything like comfort, and if astrology is to be added to our daily wants, we fear it will have to be put up in some condensed form, so that our minds can absorb and digest it without any additional effort. For those who wish to know what the subject is all about, and what can be said for astrology as distintinguished from astronomy, nothing could be better than this interestingly written little book by Mr. Pearce.

^{*} A Repertory to the "Cyclopedia of Drug Pathogenesy." Compiled by Richard Hughes, M.D. Part II. Eyes—Ears—Face—Digestive System. London: E. Gould and Son, 59, Moorgate Street, E.C. † The Science of the Stars. By Alfred J. Pearce. 2nd Edition. London: Glen and Co., 328, Strand. 1898. Cloth. Pp. 210. Price 3s. 6d. net.

EXTRACTS.

THE DOCTRINE OF SIGNATURES.

The paper read at the late Congress on the above subject has aroused more than an ordinary amount of attention both in homeopathic circles and outside. A furious letter by Dr. Stopford in the Homeopathic Review of last month condemning the Council for allowing such a paper to be read has found a number of sympathisers. On the other hand not a few have expressed to us their warm approval of the paper. It has been widely reported and commented upon in the general press, and it has even induced the British Medical Journal to break the conspiracy of silence, and devote to it a good-humoured if critical leading article. It must be allowed that the discussion of the paper was one of the most interesting and animated that has ever taken place at the Conferences, and though the opinion of the speakers was distinctly adverse they were one and all constrained to admit that the subject was interesting, and that there was "something in it" which was all that the reader of the paper contended for.

We subjoin two notices: one from the American Homeopathist, the other from the British Medical Journal.

Dr. John H. Clarke, the able editor of The Homeopathic WORLD, read "The Doctrine of Signatures and the Law of Similars" before the Annual Homeopathic Congress (London) on June 3rd. In looking over the report of the discussion following this paper (which we publish in full) we note that Dr. Clarke seems to be alone in his advocacy of the signatures of plants as a means for identifying their use in homeopathic practice. Dr. Robert T. Cooper published his discussion in pamphlet form and circulated it among the members at the Congress. Dr. Cooper is a firm believer in the value of signatures of plants. The Congress, however, either regarded the doctrine as futile, a relict of a forgotten past, or else that Dr. Clarke was not serious in his presentation of the subject. What a wonderful sanhedrin the Constituted Congresses of English Homeopaths seem to be! Only a little while ago we read of the treatment accorded a member of another Congress for daring to speak favourably of the high potency. We believe with Dr. Clarke that the Doctrine of Signatures is by no

means an idle study. It will be found of great value in the learning of materia medica.—American Homeopathist, July 1st.

HOMEOPATHY AND THE DOCTRINE OF SIGNATURES.

Our friends, the homeopaths, claim to be representatives of "advanced medicine," and speak, with the pity that is akin to contempt, of the "old school." They describe that strange creature of their own fancy, the "allopath," as following pede claudo in the track of their triumphant advance, gathering such intellectual spoil as he can. A particularly good opportunity of picking up unconsidered trifles of this kind was afforded the other day by the grand annual review of the homeopathic army of Great Britain, which took place in London. We have therefore looked with eager anticipation to the appearance of the full record of the proceedings on that occasion in the hope of finding some spark of new truth which, Prometheus-like, we could steal for the enlightenment of the darkness of our orthodoxy. Nor has this hope been unfulfilled. We have found what we believe to be the true light of "advanced medicine." Though this proves to be but a little candle, we nevertheless think it a duty to place it where it may throw its rays further than it is likely to do in "advanced" journals, so that it may shine like a good deed in a (scientifically) naughty world.

On the occasion to which we refer, Dr. John H. Clarke delivered himself of a discourse on the "Doctrine of Signatures and the Law of Similars," in which he made the following statement: "It would almost seem that it is to be the lot of homeopathy to rehabilitate the ancient doctrine of signatures developed and glorified by Paracelsus, and possibly utilised by Hahnemann himself and the older homeopaths for suggestions as to the properties of drugs, the outlines of which were filled out by provings and clinical observations." That Hahnemann in his fine frenzy drew inspiration from the doctrine of signatures is probable enough, for the prophet of homeopathy was, as Voltaire said of another prophet, capable de tout. Neither have we any difficulty in believing that the glorious destiny of resuscitating the doctrine of signatures, which was well described by Dr. Ayrton Paris as "the most absurd and preposterous hypothesis that has disgraced the annals of medicine," is reserved for homeo-The doctrine of signatures has so long been buried in the limbo of dead delusions that some readers may be curious to know something about it. We may therefore recall the fact that it was a belief that every natural substance possessing medicinal virtues of any kind indicates by an obvious and well-marked character or "signature" the disease for which it is a remedy, or the purpose for which it should be employed. Thus, a flower with a bright yellow colour should be good for jaundice, bloodstone for hemorrhage, and so on. As a typical example may be cited the "signature" of tobacco as given by an ancient writer: "In the first place, the manner in which the flowers adhere to the head of the plant indicates the infundibulum cerebri and pituitary gland; in the next place the three membranes of which its leaves are composed announce their value to the stomach, which has three membranes." Paracelsus says that those who profanely doubt the value of signatures make God a liar, for it is "He that maketh medicines out of the earth and marketh them so that we may recognise their uses." When the "signature" is not clear the scientific use of the imagination comes into play. Thus, Paracelsus assures us that the frog is a specific for the plague. If we ask what Sir Toby Belch would call his "exquisite reason" for this statement, he answers, like the typical Scotchman, with another question: Why is the frog so strangely made unless it be that he is a cure for the plague? The plague is a disgusting malady, and your frog is a disgusting beast; could "signature" be plainer? As further proof, adds the learned Bombastes, take the fact that when plague is coming frogs have black spots on their tongues. But by attentive study we can get still more information out of our batrachian indicator. Only mark how many frogs sit upon one another at an unusual time; if there be ten or twenty or more, just so many human bodies shall there be thrown upon one another in one grave. Even the modern physiologist could not get more knowledge out of a frog than can be extracted with the help of the master key of this wonderful doctrine of "signatures."

This is the "ancient doctrine of signatures, developed and glorified by Paracelsus, and possibly utilised by Hahnemann himself," which it seems to Dr. Clarke to be the lot of homeopathy to rehabilitate. To do him justice, he "glorifies" it himself as much as any medieval mystic. He suggests that "a teacher of materia medica would find it of no little assistance to point out to his class the yellowness of hydrastis, the 'golden seal' with its 'turmeric root,' the yellow flower of calendula, the yellow juice of chelidonium, the yellow stain of nitric acid, and the yellow colour of chrome, of sulphur, of picrate of iron (to mention only a few) as evident in medicines which powerfully affect the liver." Why is Thackeray's favourite "Chambertin with vellow seal" omitted? Surely that bears a distinct liver "signature." Dr. Clarke says that "we talk glibly enough about an 'universe, but few of us really believe in it. If we did, we should recognise that everything in the universe bears relation to everything else." Believing firmly in a universe, we recognise that in it the doctrine of signatures bears the relation to truth and reason which darkness bears to light. Dr. Clarke's "advanced" views appear to have surprised even his brethren in Hahnemann, who hardly knew whether or not to take him seriously. Perhaps, like the fat boy in Pickwick, he only wanted to make their flesh creep.—British Medical Journal, July 2nd.

A CASE OF STRAMONIUM POISONING.

On January 9th at noon Mrs. H., aged 53, took a teaspoonful of an antiasthmatical powder in mistake for liquorice powder. At 12.45 p.m., when sitting down to dinner, she could not understand a dry feeling in her mouth, which sipping water did not affect in the least; at the same time her sight became blurred, and she experienced a peculiar sensation of swelling in her eyes; lifting the glass to moisten her lips she exclaimed at the weight of it, and feeling herself getting worse she told her husband to go for the doctor, and from

this time remembered nothing till about 6 or 7 p.m. When I saw her at 2 p.m. her condition bore a remarkable resemblance to a case of delirium tremens; her face, however, which was markedly pale, was not expressive of suspicion or anxiety, nor was there any clammy perspiration, the skin being perfectly dry. Her eyes were bright and staring, the pupils dilated, but not excessively, and absolutely insensible to light. The flow of ideas was very rapid, and her speech so fast that only at times could any sense be made of what she said. Mirthful delirium and hallucinations were very prominent, but illusions and delusions were markedly absent. Although she often attempted to rise she seemed unable to do so from inco-ordination of the lower extremities. Sensation, however, was perfect. The power of swallowing at first seemed absent, but if she was prevented from returning what was placed in her mouth she swallowed it. Breathing was quiet, but the pulse was very rapid, thready, and compressible. After using the stomach-pump freely Nitrite of Amyl and Digitalin (hypodermic) was administered, and shortly afterwards *Pilocarpin* ($\frac{1}{3}$ gr.). Recovery after the use of the latter was remarkably rapid.—B. Henry Shaw, M.B., B.Ch., B.A.O.(R.U.I.)., Cradley Heath, Staffordshire.— British Medical Journal.

A CASE OF OPIUM POISONING TREATED BY PERMANGANATE OF POTASSIUM.

I was recently called to Mrs. S., aged 64 years. She had swallowed by mistake half an ounce of laudanum fifty minutes previous to my seeing her. On my arrival at 8.45 a.m. she had just vomited from the effects of a mustard and water draught. I found her collapsed, and very drowsy; her skin was cold; pulse very weak and thready; and both pupils contracted to the size of pin heads. I gave her at once a hypodermic injection of one-twentieth of a grain of Hydrochlorate of Strychnine; this had the immediate effect of strengthening the pulse. I then made a solution of Potassium Permanganate by breaking up three 2-gr. pills in three pints of water. From my previous knowledge of the patient I knew it would be useless to try to pass a tube into the stomach unless she was unconscious, a stage I did not wish her to Accordingly I had to employ this method of lavage of the stomach. I made her swallow half a pint of the solution (1 gr. in 10 ounces) every five minutes, and between the doses induced vomiting by irritating the fauces. At the end of twenty minutes I made her swallow a pint of the solution and retain it in the stomach. She then felt better, and the drowsiness was not so great. Two hours after the accident the pupils were normal and the pulse strong, but great sleepiness still remained. At 12 noon she took four grains of Permangante of Potassium dissolved in half a pint of water, and the same again at 2 p.m. I gave instructions that she was to be kept awake till 6 p.m., and milk and water in equal parts to be given at frequent intervals. Next day the patient felt quite well, but complained of dryness of the throat and mouth from the parching effect of the Permanganate solution; she ate well, and felt no other inconvenience from her unfortunate mistake.—Wm. Walton Don, M.D., Edgware Road, W.—British Medical Journal.

ANSWERS TO CORRESPONDENTS, NOTES AND QUERIES.

** In this department we shall be happy to reply to any inquiries relating to homeopathy or to the matter of our magazine that our correspondents may like to address to us. We cannot, of course, undertake to give medical advice in particular cases, which is the business of a medical attendant; but if our medical readers like to put queries to each other regarding points of practice or puzzling cases, we shall be happy to insert queries and replies.

A. Nerv de Vasconcellos requests information as to the symptoms of rheumatic deafness and the action of *Viscum album* thereupon, referring specially to our February number, where the subject is referred to

Rheumatism is one of the causes of a gradually developing inflammatory process that affects the ear and causes deafness; it is, in fact, a vascular deafness that it causes. We are not aware of any more definite indications for *Viscum album* in deafness than those given in our February number.

GENERAL CORRESPONDENCE.

OUR CRITICISM ON THE CONGRESS.

To the Editor of The Homeopathic World.

SIR,—The opening remarks in your July number have the true ring about them; they are pertinent and called for; and most true homeopaths—both professional and lay—will agree with every sentence, and wish that similar speaking-out were more frequent in our journals. If our editors would every now and then adopt such a tone they would help to keep us in the

right way. "To err is human," and to degenerate is characteristic of all our functions, both social and professional. We require to be occasionally reminded of our "first estate,"

and to be pulled up.

There have been many grumblings about our Congresses of late—that they are not worth the time and sacrifices involved in attendance; that there is little homeopathy and less science about them; that, in fact, they are nothing like what they used to be, and no comparison with the gatherings in America: all the more to be regretted because by them we challenge the criticism of our brethren of the old school, and invite publication in the lay press.

I wish every homeopathic practitioner in the country would

read your remarks.

Yours truly, John W. Hayward.

61, Shrewsbury Road, Birkenhead. July 5, 1898.

[We have had quite a number of expressions of opinion to the same effect.—Ed. $H.\ W.$]

VARIETIES.

Antimonium crud. For Effect of Candy, Wine, and Cold Water.—For ill following too much candy Antimonium crud. 3 is a good remedy. Per contra, it is also said to relieve the bad stomach effects of sour wine. Another indication for Antimonium crud. 3 is when cold water either internally or externally disagrees.—Hom. Envoy.

THE TREATMENT OF OBESITY.—Kisch, of Marienbad (Wien. med. Presse, March 13, 1898) deprecates too rigidly uniform measures in the treatment of obesity, which should be carefully adapted to each individual case. He discusses the principal indications under seven heads: (1) All dietetic excess should be avoided; three, or at the outside four, meals a day should be permitted and no food allowed in the intervals. The quantity and variety taken should be based upon the heat-giving properties of the food substances; Kisch gives the value of some of the principal diets in calories, and recommends that no more than the amount necessary to provide the minimum number of calories should be allowed. (2) As regards quality, the first essential is an adequate supply of proteids; a moderate amount of carbohydrate may be allowed but the fat must be reduced to a minimum. Piquant seasonings are to be avoided as they may stimulate to dietetic excess. (3) The consumption of fluid is not to be limited unless symptoms of cardiac failure are present; such liquids as are fancied, with the exception of alcohol, may be taken at any time, but moderation is to be observed at meals, Cold water, especially if charged with carbonic acid, is to be preferred; anemic

subjects should drink less than plethoric. The amount allowed must be restricted when signs of fatty affection of the heart are present. .(4) The author is a strong advocate of exercise and active movements in the treatment of plethoric obesity, the state of the heart being always taken into consideration; they are of particular value in increasing the activity of oxidation processes. In anemic subjects, however, these advantages are counterbalanced by the increased nitrogenous waste which may injuriously affect the heart. In these patients passive movements and massage are accordingly to be recommended. (5) Great importance is attributed to diminution in the hours of sleep, during which the activity of metabolism is reduced; sleep should be entirely forbidden during the day. (6) Tissue change is also to be increased by baths, particularly in springs rich in carbon dioxide, which are most stimulating to the skin. Turkish baths are also of value if the heart is sound. (7) Finally, it is of importance to secure a pure air, rich in ozone, especially in a high and wooded neighbourhood. The lungs are thus stimulated to greater activity, and the effect is aided by the change in the patient's habits and occupations.—British Medical Journal.

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET. BLOOMSBURY.

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MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Clarke (J. H.). Heart Repertory. Compiled mainly from the Author's Work on Diseases of the Heart and

Arteries. Pp. 30. (Homeopathic Publishing Co. 2s. 6d.)
Colton (Ruel P.). Physiology, Experimental and Descriptive. Illus-

trated. Cr. 8vo, pp. xv. 423. (Scientific Press. 6s.)

Cripps (Harrison). Ovariotomy and Abdominal Surgery. Roy. 8vo, pp. 634. (Churchill. 25s.)

Daw (W. H.). The Care of Consumptives. (The Burdett Series, No. 7.)

Cr. 8vo, pp. 79. (Scientific Press. 1s.) Ellison (M. A.). A Manual for Students

of Massage. 8vo, pp. 136. (Baillière.

Net, 3s. 6d.)

Ferrier (David) and Turner (William Aldren). An Experimental Research upon Cerebro-Cortical Afferent and Efferent Tracts. 8vo, sd. (Dulau. 3s.) Jakob (Dr. C.). Atlas of Methods and of Special Pathology, &c., of In-ternal Diseases. Authorised Trans-lation from the German. Edited by A. A. Eshner. Cr. 8vo. (Rebman. Net, 12s. 6d.) Joal (Dr.). On Respiration in Singing. Translated and Edited by R. Morris Wolfenden, Illustrated, Cr. 8vo.

Wolfenden. Illustrated. Cr. 8vo, (Rebman. Red, 4s.)

Klein (E.) and Edkins (J. S.) Elements of Histology. With 296 Illustrations. Revised and Enlarged ed.

12mo, pp. 512. (Cassell. 7s. 6d.)

Martindale (Wm). The Extra Pharmacopeia. Revised in accordance with the "British Pharmacopeia," 1898. Serotherapy, Organotherapy, Medial Pefrayance and Miscola Pefrayance and Miscola Pefrayance. Medical References, and a Thera-peutic Index by W. Wynn West-cott, M.B. 9th ed. 18mo, leather, pp. 654. (H. K. Lewis. 10s. 6d.)

TO CONTRIBUTORS AND CORRESPONDENTS.

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

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

envelope.

All advertisements and business communications to be sent to the "Manager" of the Homeopathic Publishing Company, 12, Warwick Lane, Paternoster Row, London, E.C.

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

CORRESPONDENTS.

Communications received from Mr. Frederick Kopp, Greenwich, N.S.W.—Dr. Cooper, London.—Mr. A. J. Pearce, London.—Dr. Clifton, Northampton.—Mr. J. Meredith, Lydney.—Dr. Proctor, Birkenhead.—Dr. Hayward, Birkenhead.—Dr. Dudgeon, London.

BOOKS AND JOURNALS RECEIVED.

Hom. Review.—Zoophilist.—Chemist and Druggist.—H. Recorder.—Hahm. Advocate.—Gaz. Méd. de Paris.—Allg. Hom. Zeit.—Hom. News.—Med. Century.—J. of Orif. Surg.—Pub. Health Journal.—Clinique.—H. Monatsblätter.—Amer. Hom.—Amer. Med. Monthly.—Pacific Coast J. of H.—Med. Monat. f. H.—H. Envoy.—Critique.—Vaccination Inquirer.—Healthy Life.—Rev. Hom. Belge.—La Homeopatia.—Il Secolo Omeopatico.—Hastings

and St. Leonards Observer.—H. Physician.—Med. Counsellor.—Zeit der Berlin, V. H. A.—Star Lore.—Launceston Daily Telegraph.—Hahn. Monthly.—Indian Hom. Review.—Calcutta Med. Jour. (May and June.)—N. Y. Med. Times.—J. of Hom.—Tasmanian Homeopathic Journal.—Report Tunbridge Wells Homeopathic Hospital and Dispensary.

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THE

HOMEOPATHIC WORLD.

SEPTEMBER 1, 1898.

THE DOCTRINE OF SIGNATURES AND HOMEOPATHY.

THE paper on the above topic read by Dr. CLARKE at the Congress in June last still continues to excite a good deal of interest. Our esteemed contemporary, the Monthly Homeopathic Review, in its August issue, waxes eloquent in denouncing both the doctrine of Signatures and the reader of the paper. Dr. CLARKE may congratulate himself that he has inspired the Review to write the most readable leader that has appeared in its pages for many a day. It is a little remarkable, however, that our contemporary, whilst damning the paper by "bell, book, and candle," does not present its readers with the paper itself, but only dwells on the adverse portions of the speeches in the debate. Now the real point to be considered is the question of fact: Is there, or is there not, sometimes, a correspondence sufficiently obvious to strike an observant person between the characters of drugs or plants and their therapeutic properties? Opinions are of no use in settling this question, but it may nevertheless be useful to put on record some of the opinions expressed regarding this terrible paper in the debate as reported in the July number of the Review. We quote from the Review's report, as it is almost verbatim.

[&]quot;Dr. Dudgeon said they had all listened with great interest to the admirable paper read by Dr. Clarke. . . .

"Dr. Proctor remarked that, in common with the rest of the members, he was bound to say he had listened with pleasure to

Dr. Clarke's paper. . . .

"Dr. DYCE Brown said he must acknowledge that he had been extremely interested in Dr. Clarke's paper. . . . It was an interesting, romantic, and poetic way of looking at the matter, and he considered it delightful to have it brought before them, and it threw a curious side-light on homeopathy."

[From this it is evident that the *Review* editorial does not represent the whole editorial college.]

"Dr. Percy Wilde would be very sorry if any pressure were brought to associate the doctrine of signatures with the doctrine of similars. He was, none the less, much interested in Dr. Clarke's paper.

"Dr. Murray Moore thanked Dr. Clarke for enlarging the scope of our knowledge of drugs by a paper on drug signatures. Instead of treating it contemptuously they ought to welcome practical hints and

suggestions.

"Dr. Cooper had gained a great deal of knowledge from the matter

of signatures.

"Dr. PRITCHARD said it was interesting to know what the members thought of the subject, and while he was listening to the paper and thinking of the extremely interesting subject, and some of the drugs having to do with medicine, he thought of a few others. They were *Millefolium* and *Hamamelis*, both used as styptics and being of a deep red colour, and *Gamboge*, which has a colour extremely like the discharge in diarrhea. . . .

"Dr. Nankivell thought Dr. Clarke had given them an interesting paper, and one which had certainly given rise to the most interesting

and amusing discussion he ever heard at a Congress."

After publishing opinions of this kind it seems a little ridiculous of our contemporary to make out that the paper was nothing short of an outrage. We think that there was expressed quite a respectable balance of opinion in favour of the idea that there does exist some correspondence between drug-signatures and drug-effects; and we do not see how it could possibly be otherwise. Nor can we comprehend why it should be thought a deadly heresy to suggest that there may be some occult link between the redness of coral and the coral-red eruptions which *Corallinum* cures, or between the colour of the yellow jasmine's

flower and the yellowness of the *Gelsemium* stools. Science is rapidly translating all the phenomena of the external world into terms of vibrations and wave-lengths; and if the same vibrations are retained by substances, whether in the liquid or gaseous state, as is shown by their properties of light absorption, why should the vibrations which produce plant-characters observable to the eye not be retained in plant tinctures and exert analogous vibrations on other susceptible parts of the human organism?

It is a little singular that no notice has been taken by any of the critics of the paper of the crucial instance brought forward by Dr. CLARKE, the case of Cistus. Cistus, the "ice-plant," favours the formation of ice. and it also produces ice-cold sensations in all parts of the body when taken internally. Now if, as the paper maintains, the Universe were really believed in as an UNIT, the outcropping of such correspondences between apparently unrelated phenomena would not excite surprise; seeing that everything must be related to everything else. If, then, in the case of Cistus, and in numerous other instances, such a correspondence can be demonstrated, there is every reason why we should keep an observant eve on nature for possible correspondences, and put the substances to the test of a proving. Dr. CLARKE did not put forward the idea that signature was to take the place of proving. HAHNEMANN is quoted by the Review in denunciation of the doctrine of signatures, and he was quite right to denounce it as a sufficient means of ascertaining the properties of drugs; but that does not prove that he was above using hints obtained from this source. Take the very case of Hupericum. He speaks in contempt of the ancient physicians who "considered Hypericum perforatum, whose vellow flowers on being crushed yield a red juice (St. John's Blood), useful in hemorrhages and wounds." And yet, it may be asked, was it from provings that the first hint of the use of Hypericum as a vulnerary was obtained? We think not. HAHNEMANN did not denounce the doctrine of signatures any more severely than he denounced the orthodox medicine of his day, but it was from orthodox practice that he took the curative properties of Cinchona, and made of them the foundation-stone of his glorious system of medicine. Arnica was called "Fallkraut" before Hahnemann proved it. Hahnemann's provings confirmed the correctness of old observation; and Dr. CLARKE maintains that they will do the same for many of the inferences of the doctrine of signatures. HAHNEMANN was far too great an artist to refuse to pick up therapeutic facts whenever he could find them, whether in orthodox medicine, in folk-lore, in Dioscorides, in Paracelsus, or in signatures. But his startling innovations in medicines were sufficiently "flesh-creepy" to make him chary of telling quite all he knew or thought.

There is nothing which so shocks the propriety of our contemporary, the Review, as Dr. Clarke's statement that he chose the topic because it was calculated to make his audience's "flesh creep." It was quite true, and at the same time quite justifiable. But that is a very different thing from saying that it was his mere intention or even his first intention in bringing the subject forward. Homeopathy is a very large subject, and being vital it must admit of growth. There is a large section of homeopaths in this country who think it is rather a limited affair. It must not go beyond a certain height in the attenuations it uses, and it must not prescribe on symptoms unless those symptoms have been observed on healthy persons and on a sufficient number of these. When Dr. Clarke, on another occasion, read before the British Homeopathic Society a paper on Ocimum Canum and Trombidium in high potencies he made his audience's "flesh creep" no less than on this. In that case one thing of horror was that he had followed HAHNEMANN'S lead in prescribing Ocimum Canum on symptoms observed cured in its use on the sick. But he had good clinical matter to report, amply confirmed since then, and his object was to stir up the minds of his hearers to a new train of thought.

One curious feature of this protest is that it is chiefly those who have no terms strong enough in which to condemn Hahnemann for admitting clinical symptoms into his *Chronic Diseases* without distinguishing them, who are most horrified with Dr. Clarke for tarnishing Hahnemann's name by associating signatures with homeopathy. They must be allowed to blaspheme the master themselves to their hearts' content, but they are horribly shocked when another only seems to them to do it on another point. We have ample confidence that the reputation of Hahnemann and Homeopathy is sufficiently well established to be able to take care of itself.

It is necessary for all of us to have our flesh made to creep now and then. It is the law of progress. There is no condition so hopelessly moribund as that in which we shut ourselves up within certain limits of knowledge and observation, and there is nothing so wholesome as to be stimulated out of it by something which makes the "flesh creep." As a "flesh-creepist" Dr. Clarke cannot hope to emulate Hahnemann's example, but he is not discouraged on that account, and endeavours as best he may to follow humbly in the master's footsteps.

Early Diagnosis of Scarlatina.—The diagnosis of eruptive fevers at the onset is often so delicate, especially in light forms, that it is useful to report the slightest symptoms (Journ. Univ. Med. Sci.; Med. and Surg. Reporter). Valli-Attiles especially notes the occurrence in scarlet fever of vomiting entirely different from that observed in other eruptive fevers. The vomiting occurs very early, before any other morbid manifestation, and in the absence of any previous gastric troubles; it surprises the child in the midst of play and before the appearance of headache, malaise, fever or initial angina. In a number of cases of scarlet fever without exanthema the diagnosis was decided solely by the vomiting and the angina following it. The proof that this symptom belongs to the scarlet fever and not to an ordinary angina is that several cases of angina where it existed were complicated with nephritis, and that children subject to recurrent angina never vomited until the day they had scarlet fever and its characteristic angina.—Medical Times.

NEWS AND NOTES.

"THE VIRUSES AS INTERNAL REMEDIES."

Dr. H. Kruger, of Nimes, has sent us a copy of his circular announcing the appearance of his forthcoming work on the above subject. It is a work of great interest and importance, and will deserve the careful study of all therapeutists. As the expense of production is great it will be issued by subscription, and the date of its appearance will depend on the amount of support obtained. The work will be sold to subscribers at 5 fr. provided they subscribe at once; to non-subscribers it will be 7 fr. 50 c. On application to Dr. Kruger, 6, rue Porté d'Alais, Nimes, France, a circular will be forwarded. Subscriptions should also be sent to the same address. The work is in the French language.

A Confession.

The Medical News of New York, an allopathic journal, in its issue of July 26th last, devoted a leading article to a Bill promoted in the New York Legislature "To provide for the examination and appointment of medical expert witnesses in certain cases, and for the regulation of their compensation." Whilst acknowledging that there was a good deal to be said for the Bill although it was fostered by the Homeopathic State Medical Society, the News found in it one fatal clause—it left to the judges the power of appointing the experts in any case. This would never do, says the News, for the simple reason that "it was notorious that judges selected their physicians from the ranks of the homeopaths!"—and not bad judges either!

"FORWARD!" THE WORD IN THE U.S.A.

Mr. Petrie Hoyle, now of San Francisco, who sent us the above-named cutting, adds in his interesting letter the following:—

"I understand the homeopaths in U.S.A. are making demands to be allowed a percentage of army positions. They take the stand that (besides more favourable statistics) they and their followers are taxpayers to a very large degree, and therefore have a *right* to a percentage of positions, more especially as many of the officers and soldiers have been accustomed to and prefer their mode of cure. The homeopaths in U.S.A. are aggressive for their rights.

—And in this country we hardly dare show our noses in the *Homeopathic Directory* for fear the *Lancet* or the *British Medical Journal* might think of looking in!

SILVER NITRATE IN PNEUMONIA.

CACCIANIGA (Gazz. degli Osped., May 1, 1898) has treated six consecutive cases of acute pneumonia with Silver Nitrate. In all the cases crises occurred in the first two days, the pulse frequently fell, the local symptoms remained unchanged, that is, did not disappear with the fall of temperature. The dose given was from '005 grm. to '015 grm. per diem divided into ten doses in pill form. During treatment no other medicine was given. Ages of the patients were from twelve to sixty years.—British Medical Journal, June 4, 1898, Epitome No. 464.

Are not these doses rather small? It will be seen that the amount of Silver Nitrate taken in one dose varied from 0005 to 0015 grm. in each pill, this is roughly $\frac{1}{125}$ to

grain.

SODIUM CARBONATE AND SODIUM SALICYLATE IN RHEUMATISM.

MORDHORST has been working on the mode of action of Sodium Carbonate and Salicylate in rheumatic affections. Under the term rheumatism he includes all the painful affections of tendons, muscles, and fasciæ, and joints, and regards it as an early stage of gout. He holds that the symptoms are due to small deposits of urates in the tissues, and the beneficial effect of salicylates he attributes to a solvent action on them.

He found that (1) sodium carbonate, bicarbonate, chloride, &c., added to a solution of sodium hydrate saturated with uric acid cause a precipitate of urate of sodium in small globules. (2) These remain unchanged some time, but gradually form needle and star-shaped crystals of sodium biurate. (3) Sodium salicylate hinders this and can also dissolve already formed crystals. Mord-

horst believes a similar action to occur in the tissues where urates have been deposited. (4) Acids tend to precipitate urates in the body, while salicylate, carbonate, and bicarbonate of sodium hinder this. (5) Sodium salicylate hastens the change of urates from globular crystals to needles which tend to remain in the joints and give rise to true gout, hence the chronicity and relapses. (6) Globular urates are capable of oxidation, needles are not. (7) Sodium carbonate and bicarbonate do not directly hasten the solution of urates, but do so indirectly; by combining with uric acid they lessen its amount in the fluids, and hence urates already formed are more easily dissolved.— Centralbl. f. innere Med., Leipzig, April, 1898.

"Headache Powders."

Under the above heading the British Medical Journal of April 13th contained the following timely note of warning—

"In his quarterly report on the health of the Borough of Chorley, Lancashire, Dr. J. A. Harris, the Medical Officer for the district, calls attention to the indiscriminate sale and purchase of the various so-called headache powders. He states that under his direction the county police obtained six or seven samples from different shops in the town, and had them submitted to analysis. In every case the quantity of the active ingredient was found to be in excess of the maximum dose of the drug allowed in the British Pharmacopæia. These remedies belong to the class of the analgesics, the members of the group in common use for this purpose being Acetanalide or Phenyl-acetamide, Phenazone, and Phenacetin or Para-acet-phenetidin. Their properties were fully considered in the Section of Pharmacology and Therapeutics at the meeting at Edinburgh, where Professor Stockman (Glasgow) opened a discussion on The Therapeutic Value of Recent Synthetic Analgesics: their Benefits and Attendant Risks. There was a general expression of opinion that these drugs required to be handled with the greatest possible care, and that a slight error of judgment with regard to dosage might be followed by disastrous results. All these substances depress the heart's action, and in toxic doses diminish the force of the respiratory act. We are given to understand that a common formula for headache powders is Acetanalide (70 to 75 per cent.), Caffeine (10 per cent.), the rest being bicarbonate of sodium. The danger is not obviated by selling a poisonous drug under a fanciful name. We concur with Dr. Harris that it is impossible to say how much harm may follow the constantly growing practice of taking these remedies. At present they are not included in the scheduled list of poisons, so that an obstacle is placed in the way of taking legal steps against the vendor."

ORIGINAL COMMUNICATIONS.

AN OLD STORY.

By Dr. Dudgeon.

At the recent meeting of the British Medical Association in Edinburgh, Dr. G. W. Balfour, consulting physician to the Edinburgh Royal Infirmary, delivered the following Presidential Address to the Section of Medicine, entitled—

Personal Experience of an almost forgotten Episode in Medical History.

It has struck me that a few words from personal experience in regard to a now almost forgotten episode of medical history might prove both interesting and instructive. There are not many now alive who remember the time when blood-letting was the panacea for almost every ailment, and when patients could be no longer safely bled they were certainly leeched or cupped. There must be few survivors of the time when one of the earliest lessons in surgery was to distinguish between an ordinary blood-clot and one which was buffed and cupped, or who were taught that in uncomplicated pneumonia such confidence was to be placed in blood-letting that "the only essential action of the prognosis was the day of the disease on which the treatment was commenced," as it sometimes failed when delayed more than two or three days from the commencement of the disease. Yet such were the earliest lessons in medicine which I received, lessons which were daily exemplified in the wards of the old Royal Infirmary. When within a year of my graduation I made my way to Vienna with the view of studying homeopathy, which had iust made a convert of one of our ablest professors (Henderson), I occupied my time at first in improving my knowledge of percussion and auscultation under the world-renowned Dr. Joseph Skoda, and you may imagine my astonishment when I found that in his wards the severest cases of pneumonia were treated with poultices and regulated doses of Extractum Graminis (hay tea) and with nothing else unless much pain was complained of, when a few grains of Dover's powder were superadded. The excellent results obtained by Skoda with his hay tea sufficed to dispel the clouds of mysticism which had been raised by homeopathy, while the success of Dietl in the same class of cases in another hospital with simple Aqua Colorata showed that there was nothing specific even in hay tea, and confirmed the unmistakable conclusion that, as Skoda put it, pneumonia tended not to dissolution but to resolution, and that the large blood-lettings thought necessary for its treatment were, to say the least, uncalled for. Much stress continued to be laid upon the necessity for blood-letting in the Edinburgh school, though it had ceased to be carried to such an extreme as in the immediately preceding generation. On my return from Vienna I read to the Medico-Chirurgical Society of this city a report of what I had observed in the wards of Skoda, with an account of 392 cases of pneumonia treated on what might be termed the expectant principle, and showing a mortality of only 54, or 1 in 7\frac{1}{4}, equal to 13.7 per cent. I pointed out that the Vienna cases were certainly not less sthenic than those in Edinburgh, that they had the disadvantage of being daily unceremoniously auscultated, percussed, and lectured over, which was not the custom in our infirmary in those days, and that they had not the advantage of having been freely bled, yet their mortality was only 13.7 per cent. In the reports of our own infirmary during the five years and three months from July 1, 1839, to Sept. 30, 1844, there are recorded 253 cases of pneumonia which escaped the lecturing and had the advantage of being freely bled, and of these 91 died, a mortality of 1 in 2.78, or 35.9 per cent., showing a proportion of recoveries of nearly 3 to 1, or over 20 per cent. in favour of those who were not bled, to say nothing of the time gained by their more rapid recovery or of the less exhausted condition in which the patients were left, whereby they were sooner fit to return to the duties of active life. I urged upon the society the importance of giving the eclectic system of treating pneumonia a fair trial, throwing out the suggestionmade to me by a distinguished Austrian physician—that possibly some change in the type of the disease might underlie the apparent change in its relation to perturbative treatment. My words fell on deaf ears, and the conclusion arrived at may very well be summed up in the words of one of the ablest physicians of the day—Dr. John Gairdner: "Nothing was better established than the good effect of blood-letting in Edinburgh, whatever might be the case in Vienna. . . . Of the benefits of early blood-letting he entertained no doubt whatever; they were positive, immediate, unequivocal, and admitted by almost every physician whose experience and judgment entitle him to consideration; and if Dr. Balfour or any one else could shake his conviction in the truth of his opinion he would also succeed in producing in his mind a general distrust of medical evidence in all cases of every description, since in no case whatever can we have evidence which is stronger or more satisfactory." I need not pursue the subject further; the eclectic treatment passed gradually into the hands of the general practitioner, and within less than ten years the late Professor Bennett wrote: "It is admitted that the practice of bleeding in acute inflammations has within a recent period undergone a great change; that whereas it was formerly the rule to bleed early, largely, and often repeatedly, now such bleeding is rarely practised and is not necessary." After this we had the war of opinions in regard to whether this change was due to a better knowledge of the natural history of the disease and of its pathology, or to an actual change in the type of the disease which had become less sthenic in character and no longer required the same heroic remedies. But into this I need not enter: it forms part of the history of medicine, and the object of this short sketch is to point out the importance of a knowledge of this subject. We are now on the threshold of new discoveries and of quite a new pathology, which is indeed but a higher development of ideas which have long been slumbering in the professional mind—the connecting links being Dwight, Raspail, Hallier, and Pasteur—but which seem likely now to attain a development of the highest importance for the well-being of mankind. It is well, however, in the light of the past to remember that disease may be recovered from under many different forms of treatment. The practical certainties of our art in all ages have been sufficient for the welfare of mankind, and we must be careful never to subordinate to any vague ideas of what may possibly be curative of disease that which is, after all, the paramount object of our art—the relief of suffering.

Dr. G. W. Balfour may well term the unwillingness of the dominant school to abandon methods of treatment even after they had been proved to be pernicious, "an almost forgotten episode," for men are naturally prone to forget what is not creditable to their wisdom. It is now more than fifty years since Sir John Forbes, the editor of the British and Foreign Medical Review, wrote his celebrated denunciation of the ordinary treatment and his almost prophetic appreciation of the probable effects of Hahnemann's teaching and practice on traditional medicine. "Hahnemann's name," he said, "will descend to posterity as the exclusive excogitator and founder of an original system of medicine, as ingenious as many that preceded it, and destined to be the remote, if not the immediate, cause of more important fundamental changes in the practice of the healing art than have resulted from any promulgated since the days of Galen." Forbes's appreciation of homeopathy and depreciation of the ordinary system created such strong protest from all quarters of the allopathic fraternity, and had such a disastrous effect on the sale of his periodical, that he seems to have been frightened at the storm he had raised and anxious to find some means of modifying the severity of his censures of old-school physic and retracting his moderate laudations of homeopathy. He accordingly commissioned Dr. G. W. Balfour, who had just obtained his medical degree and was going to Vienna, to inquire into the practice of homeopathy in that city, where there was a small homeopathic hospital under the charge of Dr. Fleischmann. Dr. Balfour's report is published in Forbes's Review for October, 1846. He followed Fleischmann's practice daily for nearly five months, and gives a very fair account of the cases treated in the hospital during three months of that time. "The general results of the treatment during the three months reported of," says Forbes, "were, we think, such as would have satisfied many practitioners of our ordinary medicine." The disease that seemed to interest the reporter more particularly, and which is reported most fully, is pneumonia.

The strong opinion relative to the necessity of bloodletting in this disease entertained by the ordinary physicians in this and other countries made it important to ascertain whether it could be successfully treated without this severe method. Dr. Balfour reports nineteen cases in considerable detail all except two. Three cases died, two of which were apparently moribund on admission, one having died the day after admission, the other after two days. The number of cases observed was not sufficient to enable a conclusion to be formed as to the success or otherwise of homeopathy in the treatment of this disease, but they sufficed to show that pneumonia of the severest character recovered without blood-letting or any of the antiphlogistic treatment hitherto held to be indispensable in this disease. Dr. Balfour also observed a number of cases of pneumonia treated by Skoda without medicine and with a strikingly small mortality. He says that the results obtained by homeopathy were "emulated if not excelled "by Skoda's expectant treatment, which is hardly borne out by the larger number of cases collected by Dr. Routh in his Fallacies of Homeopathy, who gives the homeopathic mortality in 783 cases as only 5.7 per cent., whereas, according to Balfour, Skoda's mortality was 13.7 per cent. in 392 cases. How Skoda's results "sufficed to dispel the clouds of mysticism which had been raised by homeopathy," as he tells us in his Edinburgh address, is not very obvious, for they only show that under the expectant treatment the mortality was 8 per cent. greater than under the homeopathic. What he means by "the clouds of mysticism raised by homeopathy" is utterly incomprehensible, for in his report of his observations in the homeopathic hospital he shows that Fleischmann made no mystery whatever about his practice, but freely allowed him to examine all the patients and to see day by day what medicines were prescribed and to watch their effects on the course and progress of the diseases without let or hindrance.

Dr. Balfour's account of the reception by his allopathic colleagues of his demonstration of the vastly superior results of the expectant (why he calls it "eclectic" I cannot imagine) treatment of pneumonia over the "perturbative treatment," pursued in the Edinburgh Infirmary, is very instructive. Though the proportion of recoveries was upwards of 20 per cent. in favour of the

non-bleeding plan, the allopathic school, as represented by Dr. Gairdner, remained as firm believers as ever in the efficacy of blood-letting, and would most likely have so remained till this day had not their patients rebelled against their sanguinary treatment and insisted on those milder measures without bleeding of which they had heard reports. The allopathic practitioners, seeing that they would lose their patients altogether if they did not abandon blood-letting in acute inflammatory diseases, made a virtue of necessity and discarded their lancets. But to cover their retreat without abdicating their pretensions to infallibility they invented the wonderful fiction of a change in the type of the disease, which now no longer required those powerful antiphlogistic remedies that had heretofore been absolutely necessary to combat the former and more sthenic form of inflammatory affections. I had always hitherto imagined that Dr. Alison was the original promulgator of this ingenious device for saving the credit of the doctor while revolutionising his practice; but Dr. Balfour fathers the suggestion on a distinguished Austrian physician whose name he unfortunately withholds, so that we are unable to award him the credit he deserves for such an invaluable aid to allopathy in her embarrassing dilemma.

At the end of his communication Dr. Balfour, discarding his position as a faithful reporter of the cases observed by him in Fleischmann's hospital, assumes the air of infallibility so commonly met with in that very superior person a newly-fledged graduate of medicine, and pronounces ex cathedrâ, as it were, his verdict against homeopathy in these words: "The strength of the homeopathists lies not in the greater rationality or practical superiority of their treatment, but is founded on the weakness of allopathy [poor allopathy!]; they do not help their patients, but—if they are strict homeopaths are for ever shut out from helping them. In their treatment of acute diseases—their success depends entirely on the hitherto unrecognised powers of Nature-all the magic influence of their infinitesimal doses of *Phosphorus*, &c., being emulated if not excelled by the heroic virtues of Extractum Graminis" (Skoda's treatment of pneu-

monia).

But Dr. Balfour's report supports none of his conclusions. By his own showing the claims of homeopathy to superior results are satisfactorily established, and, as I have shown, the success of homeopathy, even in that very disease pneumonia, which Dr. Balfour specially selects for comparison, is 8 per cent. better than Skoda's do-nothing treatment, and 30.2 per cent. superior to the "meddlesome and perturbative" treatment of the Edinburgh Infirmary. The comparison is still more favourable to homeopathy if we take into consideration the duration of the disease under the different methods as shown by Professor Henderson. Whilst under venesection the duration was 35 days, under tartar emetic treatment 28.9 days, and under expectant treatment 28 days, under homeopathy

it was only 11.66 days.

However, Dr. Balfour's report gave Sir John Forbes the opportunity he desired of retracting his quasi favourable opinion of homeopathy and prophesying its imminent discomfiture and disappearance. "The great and manifold divisions already existing among the homeopathists," he writes (though he does not say what those divisions are, and homeopathists, I may say, are quite unaware of them, as all are firmly united under Hahnemann's grand therapeutic rule, similia similibus curentur, and our differences are merely with respect to minor details of dosage and unimportant theoretical speculations which have no practical value) "seem to lead irresistibly to the conclusion that the beginning of the end of homeopathy is already come. If we have the very best authority for believing that a house divided against itself cannot stand, we can hardly doubt that the house of Hahnemann is now tottering to its fall." * Fifty-two years later we find Sir William Broadbent prophesying the speedy extinction of homeopathy in equally figurative language. For him

^{*} Forbes's vaticinations of the speedy downfall of homeopathy and his partial retractation of the severe things he had said about ordinary practice did not avail to mitigate the wrath of the partisans of old-school physic caused by his previous laudation of the genius of the great modern medical innovator, and his own outspoken condemnation of traditional medicine in his memorable words: "Things have arrived at such a pitch, that they cannot be worse. They must mend or end." The circulation of his Review fell off to such an extent, that he had to discontinue its publication. Nor did the appearance, ten years later, of his Nature and Art in the Cure of Disease, suffice to rehabilitate him in his former position as the champion of orthodox medicine, though he there characterises homeopathy as "an utterly false and despicable system," and "one of the greatest and most singular delusions that has ever been entertained by the professors of the healing art." He tries hard to say a good word for allopathy, but only succeeds in "damning it with faint praise."

it is a belated ghost that is about to disappear in consequence of the visible dawn of scientific medicine. Prophecies regarding the near advent of a grand time for medicine have been as plentiful as blackberries as long as I can remember. One would think that the spirit of the illustrious Wilkins Micawber inspired these hopeful vaticinations of something good turning up in the "near future." Dr. Balfour himself, in his Presidential Address is, like Saul, also among the prophets. "We are now," he says, "on the threshold of new discoveries and of quite a new pathology . . . which seem likely now to attain a development of the highest importance for the well-being of mankind." Well, we wish the men of light and leading would make haste and cross the threshold they have been tarrying on so long and get their sun of scientific medicine above the horizon, even should it scare away the belated ghost of homeopathy. But, alas! I fear that I may not live to see the glorious epoch of scientific medicine so often foretold but so persistently refusing to appear. The house of Hahnemann which, according to Sir J. Forbes, was tottering to its fall half a century ago, seems more steadfast and unassailable than ever, and scientific medicine never advances beyond the dawn or the threshold. Eheu, fugaces labuntur anni! and as yet no saving scientific medicine has appeared, and that accursed thing homeopathy, like Jeshurun, "waxes fat and kicks "most vigorously."

REMINISCENCES.

By Dr. A. C. CLIFTON.

I. MY EARLY LIFE.

[We have had submitted to our perusal a series of articles of an autobiographical nature, together with the History of Homeopathy in Northamptonshire by our venerable confrère, Dr. Arthur Clifton, of Northampton. We have read them with intense interest ourselves, and we have no doubt our readers will do the same, without any further introduction from us. These articles are to be followed by others narrating Dr. Clifton's reminiscences of forty years' practice as a homeopath.—Ed. H. W.]

I HAVE been told, and I have no reason to doubt the correctness of the statement, that I am the eldest son of eight children, from Samuel and Sarah Clifton, and that

I was born on the twenty-second day of December in the year 1825, in the village of Guilsborough, in the county of Northampton, a place four miles distant on the one side from Naseby, on the field of which the memorable battle was fought between the Royal forces of King Charles the First and the "Ironsides" of Oliver Cromwell's army. On the other side of Guilsborough, five miles distant, is Althorpe, the country seat of the Spencer family, who played an important part in the history of England at that time, and have done so to a great extent ever since, down to the present Earl Spencer, who has also maintained the traditions of his ancestry in favour of liberty and the well-being of "the people" of the United Kingdom of Great Britain and Ireland, and of the oppressed everywhere.

A short distance from Althorpe is its parish church of Brington, in which are the tombs of some of the immediate ancestors of George Washington, the founder of American Independence, and in which church may be seen the brasses and heraldic arms—"the Stars and Stripes"—of the family, which are now the national emblems of the great country of America. Hence in these several aspects of the history of Northamptonshire I claim for it a no mean place, and a large kinship myself with our colleagues in America.

At the very immature age of twelve years I was taken from school, and was articled as an apprentice for five years to Mr. William Williams, surgeon and apothecary, in my native village, who had a large and general medical practice among the upper, but more especially the middle and lower classes of the community, in about fifteen villages, and holding, as he also did, medical appointments in that Poor Law Union, and to sick and benefit clubs, I had great opportunities for the observation of the medical treatment by Mr. Williams and his assistants of the sick people in that region.

During the first two years or so I did little more than accompany my master in his gig on his daily rounds; during the next two years or so I was instructed in the compounding of drugs and in general dispensing work, and still further in the art of venesection from the arm, and by means of the scarificator and cupping-glass from other parts of the person, inasmuch as at that time vene-section in those ways, as well as by the application of

leeches, was almost of daily occurrence; in fact men came to the surgery, on Sundays especially, to be bled from the arm to the extent of ten to twelve ounces. At the same period blister plasters, moxas, together with large and powerful doses of drugs, were the order of the day. The blue pill, black draught, tartar emetic, and Calomel were the greatest favourites, hence the well-known dictum of Dr. Isaac Lettsom—

"I bleeds and I physics and I sweats 'em, And if they dies—I lets 'em."

To that kind of practice and teaching I was a victim; consequently in the last year of my apprenticeship, when I had to do the rough-and-tumble work of visiting some of the lower class of patients, especially at night, I adopted the same line of treatment, and just to show more precisely what it was like, take the following as an example: About eight o'clock at night in the month of February. with the snow on the ground, I was sent a mile distant to see an agricultural labourer, who I found (as I thought) was suffering from pleurisy. I bled him from the arm to about ten ounces, and gave him some tartar emetic and Calomel. On my return home I was sent another mile off to see a poor woman, who I also found apparently suffering from pleurisy. I was more merciful to her, and only took about six ounces of blood from her arm, and gave her smaller doses of tartar emetic and Calomel. On my return home at 11 p.m. I found another messenger demanding my services at Naseby, four miles off, to see a man who I was told "had a bad 'plectic fit." When I arrived I found him suffering from a drunken bout, and as he had a very red and congested face, and looked as if venesection would do him good, I again, and for the third time that night, used my lancet, and took twelve or more ounces of blood from his arm, applied a blister plaster to the back of his neck, and gave him five grains of Calomel, and on the following day supplied him with a winebottle of physic, containing Epsom salts, nitrate of potash, a little peppermint water, and the remainder aqua pura—a tablespoonful to be taken every four hours. In relation to those cases, and the heroic treatment so called, I know they all recovered, and lived for some years, but how long I cannot say, as I shortly afterwards left the neighbourhood, and heard no more of them.

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About two years afterwards, and while I was an assistant to a chemist in the south of England, I was ill from pleurisy, and was treated in a similar manner, and I now bear about my person the marks of the scarificator, and of twenty leeches, and I also took a lot of physic. In about six months I recovered, but whether through the measures that were employed, or in spite of them, by the efforts of nature, who can tell? but of this I feel assured, that I would have been cured far quicker and better by homeo-

pathic treatment.

In the course of my journey to the third patient, which I have related, a somewhat unique personal experience may not be without interest. I was accosted by two gipsies near their camp, who asked me the nearest village where they could get a doctor, as a lady in the camp close by was very ill. I told them I was a doctor, but a very young one, on my way to see another patient, but if I could render any help I would; consequently my services were gladly accepted. I saw the lady, and in about half an hour I put a fine baby boy into her arms, promising to see her again on my return, and which in about an hour I did, when I found her happy and comfortable. It was then about 12 p.m. I noticed an odour of something being cooked, and was told they were going to have their supper, and I was invited to join them, and as I was both cold and hungry, my horse being taken care of, I accepted the kind invitation. I sat myself down on a log of wood. The pièce de resistance was a hedgehog in a crust of clay, baked in a wood fire, a viand which I found equal to any boiled or baked rabbit, both in appearance and taste, I had ever partaken of. The vegetable consisted of roasted potatoes (from what source I did not inquire), but the whole constituted a meal fit for a king were he hungry, for the said hedgehog is a much cleaner animal with regard to its food and its surroundings than the common hog or pig so called. I may also add in relation to the event that it was the first midwifery case I had assisted in, and it happened when I was scarcely seventeen vears of age.

A few months afterwards, at the expiration of my apprenticeship with Mr. Williams, I left him, he wanting an older and more experienced man than myself, and as my parents were unable to send me to any medical college or school, I took a situation with a chemist and druggist,

and continued to fill similar positions for about three

years.

During my convalescence from the severe illness of pleurisy, which I have already alluded to, I formed a warm and personal friendship with a young lady in Northampton, which shortly ripened into an engagement for marriage as soon as circumstances could with prudence permit. Towards that object it was needful I should get a home and a business, but I had scarcely any money of my own, nor could my immediate relatives help me. I had, however, a large circle of friends who promised me their support if I began business, and acting on the proverb, "Nothing venture, nothing have," I took a house and shop in the town, and furnished my house with the barest necessaries for living. A friend fitted up my shop on credit, and a wholesale drug house in London supplied me with fifty pounds' worth of drugs and druggists sundries entirely on credit, and in that way I commenced business, a method very speculative in character, and that generally would be condemned, and which I at this time cannot justify, except on the convenient principle that "the end sanctifies the means."

My friends rallied round me, and gave me their support and influence, so that I soon acquired a good general business, and in about a year or little more I paid most of my creditors, moved to a better house and shop, and married the lady upon whom I had set my heart and affections, and with whom I lived in happy union as my

wife for many years until her decease.

A SULPHUR CASE.

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

A LADY, aged 37, thin and delicate looking, consulted me January 21, 1886, with the following symptoms:— Fulness as if tied in the hepatic region, coming on sometimes from the spine; it first appeared in the spring of 1884. Had a particularly bad attack in September, 1885, when in Ireland; used to come on when eating. Salmon, crab, sausage, &c., disagree and bring on the pain.

The pain comes gradually, and will sometimes take

twelve hours to reach a height, and then it goes away

equally gradually. Relieved by heat.

Patient had had neuralgia of the right arm ten years ago, nearly lost all power of movement, and the pain then seemed to leave and to go to her throat. Is said to be gouty, but certainly is very neuralgic, for she constantly gets neuralgia of the right side of the face, and has had all her teeth extracted for it.

The hepatalgia is sometimes accompanied with flatus; skin non-perspiring. The pain comes on after the bowels move, but her bowels are regular. Has had fissure of the anus and been operated upon for it, and has been under High Dilution treatment in Paris. Monthly period regular, but has been scanty; a good deal of dysmenorrhea. Urine high coloured when the pain is on, otherwise clear. Liver not large; tongue slightly fissured; some leucorrhea.

This patient had been knocked about from doctor to doctor, and had been in the Hospital for Women, Maryle-

bone, where she underwent repeated examinations.

The treatment of her case was very simple. I gave her half a drop of $Sulphur \phi$ in three doses, in water, seven drops to go over the fortnight, and at the end of this time—February 4, 1886—she reported herself very much better and that the violent pain had gone—the pain as if tied in the right side; the bowels incline to constipation.

I therefore ordered a bottle of $Sulphur \phi$ pilules to keep by her, and not until now—June, 1898—has she had the slightest reason to consult me, and is now being treated

for wholly different symptoms.

The indications for Sulphur were a persistent tendency to neuralgia and a gradually increasing and decreasing pain, and one that was spread over an interval that was a multiple of three. Sulphur pains seem to last three, six, nine, or twelve hours, and so on, and to reach a height at, especially, noon and midnight, but also at 1.30 a.m., 3.0 a.m., 6, 9, 12, and in afternoon at same hours; but in our patient's case the pain lasted twelve hours and then gradually declined and the skin remained dry. Had the skin perspired and had the pain suddenly disappeared, I would have preferred Acid Sulphuricum.

30A, George street, Hanover Square, W.

MATERIA MEDICA MISCELLANY.

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

Pulsatilla in Puerperal Mania.—Mrs. L., 27, blue eyes, brown hair, stout but flabby, with family history of insanity, was delivered March 25, 1897, after normal gestation, labour also being normal and recovery prompt. Three to four weeks later began to act queerly and was found to present the following symptoms: Whole personal appearance changed, formerly very particular as to it, now the opposite; sad, staring look; sits continually looking out of window. Full of anxiety as to future of herself and baby. Does not want to see any one; weeps over her condition; wants to kill herself and child. Sleepless at night. All symptoms < at night. One dose of Puls. 200 cured in ten days.—Dr. W. Follet in Am. Hom.

Euphrasia in Vomiting from Hawking Mucus.—Dr. A. B. Eadie, being consulted by patient who suffered from vomiting his breakfast, the act being caused by an attempt to clear his throat of offensive mucus, failed to do more than palliate with a number of prescriptions till he gave Euphrasia 2c for some intercurrent malady, which cured the vomiting. Last autumn he met with the same symptom in a man who vomited his breakfast every morning on going to work on clearing his throat of offensive phlegm. He had suffered from it all the previous winter. The same prescription cured at once.— Ibid.

Phosphorus in Septic Peritonitis.—Dr. Howard Crutcher has narrated a case of a girl of sixteen attacked by perforating appendicitis. Her friends refused operation till he considered it too late to be of any avail, but yielding to their clamours he operated and found a large abscess behind the colon freely communicating with the peritoneal cavity. Prolonged flushing and drainage completed the operation. Up to the fourth day the patient progressed more favourably than he had dared to hope, and on the fifth, to use his language, "the crash came with a vengeance"; the pulse was 130, the mind wandering, the urine and feces passed without restraint and it was evident that the girl was rapidly sinking. Arsenic was given repeatedly without avail. The doctor sent a message to the students who were nursing her that death was inevitable, but a hot saline enema might prolong life. On

attempting to give the enema the rectum was found to be open and no resistance was offered by the sphincter ani. Greyish white fecal discharges, watery and offensive, passed constantly. The students, recognising the indications for *Phosphorus*, gave a dose of that remedy, and instead of dying the girl got well.—*Ibid*.

Veratrum Viride in Croup.—Dr. Searle, in an article entitled "Clinical Certainties" says Veratrum Viride is more valuable in croup than all other drugs combined. A few drops of tincture in water, frequent teaspoonful doses during the night and less frequent ones during the day quickly and certainly dispose of all forms of croup except the membranous, and even in that controls the fever and spasm, thereby aiding Kali bich. and other remedies.

The Tongue of Veratrum Viride.—There is a peculiar-looking tongue not seldom seen in practice, and when it is found no matter what the disease Veratrum Viride is certain to cure. On the edges it is moist and of natural pink colour, coated or not, but the central portion from tip to root is dry and dark red, looking as if a hot poker had been applied to it. A tongue like this or any minor approach to it positively indicates the employment of this drug.—Hahn. Month.

PROPERTY AND FORCE.

By Dr. Dudgeon.

IF Dr. Proctor thinks that his expression, "jugglery with words," ceases to be a reproach or sneer by his qualification of it as "unconscious," I cannot agree with him, for to me the adjective seems to aggravate and intensify the sarcasm of the phrase. It is as though he had said: "He is such a fool he does not know the meaning of the words he juggles with." As he says that "no reproach or sneer was intended," it would perhaps be as well, in place of indulging in such "dangerous ambiguity of words," that he set himself to disprove my proposition that vitality is not a force (in which I am supported by Beale, our greatest authority on vitality) and cease to imagine that he has disposed of it by applying disparaging epithets to my expression and making the totally unwarranted and incorrect statement that "it was never doubted [by physiologists] that it was a force," when he knows that Fletcher, Drysdale, and Beale not only doubted but brought most cogent arguments to support their contention that vitality is not a force and is not

correlated with any of the natural forces.

I suppose I must consider it a testimony to the unanswerableness of my arguments that Dr. Proctor makes no attempt to reply to them, but contents himself, in his latest communication, with making an elaborate attack on a merely incidental remark of mine that gravitation is a force and not a property of matter. In lieu of argument or proof, Dr. Proctor refers me to the works of a number of authors which he has read or wishes us to believe he has read, and which he tells us support his contention. It would have been more satisfactory had he given quotations from his authorities testifying to their belief that gravitation is a property of matter in the sense of Dr. Proctor's own definition—"a quality that is inseparable and inalienable from matter, that is inherent in it and part of its constitution," and that it is not merely a force. which Grove thus defines: "that which produces or resists motion." To my mind gravitation is no more an inseparable, inalienable and inherent quality of matter than heat, which is present in all matter but is not of the essence of matter. We can imagine matter without heat, though no one has as yet seen it, not even Dr. Dewar, for though he has succeeded in producing extraordinarily low temperatures, he has not yet got down to the absolute zero of caloric; and Dr. Proctor admits that matter may exist without appreciable weight.

A property of a substance is something peculiar to it alone, or conjointly with a limited number of substances, but gravitation is common to all substances and is therefore peculiar to none. It brought the historic apple down on Newton's head and it holds the planets in their orbits.

An "active property," by which term Dr. Proctor implies a property that is at the same time a force, is, I suspect, an invention of his own. He seems very proud of it, and I do not wish to put him out of conceit with it, though it strikes me as being pure nonsense, a contradiction in terms like Queen Constance's "odoriferous stench" and "sound rottenness."

One word in conclusion as to Dr. Proctor's method of carrying on a discussion. It is not usually considered to be good form in controversy to attribute to your opponent

statements he has not made for the purpose of making him appear ridiculous. But this is what Dr. Proctor has done. He says: "Why Dr. Dudgeon should seek to deprive matter of these recognised properties, and reduce it to the elementary conditions of simple extension and inertia passes my comprehension." As I have nowhere done or said anything even remotely resembling this, it "passes my comprehension" why Dr. Proctor should have made such an absolutely unfounded statement. It may be smart, but it is not fair fighting—c'est magnifique, mais ce n'est pas la guerre.

It is hardly courteous to accuse me of placing myself "in opposition to the scientific world," when, in fact, he only means that I differ from himself, for I have vet to learn that Dr. Proctor is the exponent of the views of the scientific world, that many-headed monster, which has almost as many opinions as heads. At all events he has not shown that the scientific world or any conspicuous denizen thereof holds different views from myself as to the distinction between property and force, whereas I have quoted to him authorities of no mean repute who

agree with me.

In the turmoil of our strife about property and force, philosophy and physiology, the original theme concerning vitality has been lost sight of. Dr. Proctor omits all allusion to it in his last communication, and discourses learnedly about vis a tergo, vis a fronte, cohesion, chemical affinity, vortex atoms, and other things which have no, or only a remote, connection with the matter in hand, and he pelts me with the titles of books which he says are all on his side, though he gives no quotations to prove that they are. All these irrelevances don't help us a bit to settle the question whether there is or is not a distinct immaterial or spiritual entity called vital force or principle (identical with mind according to Prof. Gates) which presides over all the operations of organised beings; and they must be a weariness to the reader, as they cannot fail to suggest to him the familiar operation of drawing a red herring across the scent. Hence it appears to me desirable to close a discussion that has become sterile and can lead no whither, as the disputants are unable to agree on the elementary principles that underlie the subject, and seem to be only engaged in the unprofitable labour of ploughing the sand.

[We think our readers have now had this subject sufficiently clearly presented from both sides to enable them to make up their minds upon it without further discussion.—Ed. H.W.]

SIGNATURES—KEYNOTES.

By AGRICOLA.

Some four years ago, having occasion to call upon my young friend the amateur analyst alluded to in my paper in The Homeopathic World, on "Lead in Water," I was struck with astonishment by the dull yellow tint of the whites of his eyes and of his complexion, together with a peculiar expression of his countenance; by the unusual apathy of his manner, and then by the yellow-stained colour of his fingers up to the second joint, and of his nails. "Have you been immersing your fingers in nitric acid more or less diluted, or in bichromate solution?" I asked. "In nitric acid," he replied, "and frequently so during the past ten days." "Are you aware that a somewhat similar tint, but of a more dirty, dusky hue, is present in your eyes and countenance?" I then asked. "Oh yes; and I am under allopathic treatment for disordered liver-action."

Shortly after this I was informed that he was most seriously unwell, and also suffering from agonising molar toothache. Molar after molar was extracted sound as a bell and, of course, without relief to the pain.

Now let our readers study in the materia medica of their school the pathogenesis, scant as it at present is, of *Nitric Acid*.

I Ivillio Acid.

SNAKE-VENOM—ITS ACTION AND EFFECT.

Being a reply to arguments advanced by those favouring the Blood-poison Theory.

By Frederick Kopp, Greenwich, N.S.W.

IV.—THE STRYCHNINE ANTIDOTE.*

The Strychnine treatment made use of on one of the dogs bitten appears to have favoured no better than the

^{*} By an inadvertence No. V. of this series was allowed to appear in place of this in our August number.

antidote that I have just reviewed (Chloride of Lime). By referring to my paper on "Snake-bite and the Strychnine Treatment" in THE HOMEOPATHIC WORLD of February, 1894, my readers will note that I made the following remarks: "In using such a powerful remedy as Strychnine great care should be exercised lest the patient, instead of dying from the effects of snake-bite, collapses under the Strychnine treatment. Instead of injecting in large doses, as has been, and is at times done, it should be injected gradually, so that the nerves be not completely overpowered by the drug and tetanic spasms take place, resulting in death. Naturally, when two such powerful poisons are fighting one against the other in the human system, it is not surprising that under the combined strain the motor nerve centres should give way. And for this reason I hold that more care should be exercised in the future use of such a powerful lifedestroying drug. I do not sound this note of warning Cases have occurred in which the patients needlessly. would undoubtedly have recovered, had it not been for the overdosing of the Strychnine." The verdict of the doctors that the dog experimented on by Professor Davies died from the effects of Strychine poisoning, and not from those of snake-venom, shows most emphatically that I was right in sounding the note of warning just quoted above. "Yes," exclaimed an ardent advocate of the Struchnine treatment to me the other day, as I was just leaving his pharmacy, after acquainting him with the result of the Davies experiment in Victoria, "but the dog must have had too much Strychnine injected, or else it would have "There were such a number of eminent recovered." medical men present," I replied, "some connected with the Melbourne University, that surely one or two at least amongst them must have known what size of a dose of Strychnine would have been necessary to antidote the quantity of snake-venom injected." I regret that I have not been supplied with the information as to the amount of Strychnine injected in the case of the dog; the fact, however, remains that the antidote, and not the snakevenom, killed the dog. Mr. James Bray, the eminent naturalist, has thus given his opinion of the Strychnine treatment, and being a man of practical experience, and one who has studied the subject from beginning to end, his words bear a good deal of weight. It will be seen

that Mr. Bray does not appear to have much confidence in either the Ammonia or Strychnine treatments, and he speaks very strongly in condemnation of the latter. He says: "During the last ten years the public mind has been exercised very much on the questions of death from snake-bite, and the endeavour to find out some antidote against the virus of our poisonous reptiles. The very same interest was in force years ago, on the occasion of the Ammonia antidote of Dr. Halford, of Victoria, which at the time created quite such another 'rage' as did Strychnia when brought before the general public during the last eight or ten years by Dr. Mueller, of Yackandandap, Victoria. Whether Strychnia is destined in the future to be laid aside, and meet the same fate as the Ammonia treatment, is yet to be seen. Certain it is. that there are to be found among medical men as many opponents to Strychnia as a possible antidote as there are to be found in its favour. If anything more than another will tend to lessen its confidence, so far as the general public are concerned, it will be found coming from the very author of its introduction amongst us, Dr. Mueller. This gentleman is more than enthusiastic in espousing Strychnia as an infallible antidote to snake-bite. He is fanatically, at times, inclined to press it under public notice by utterances and written matter that will not bear the light of day. Dr. Mueller recently wrote: 'More especially when confronted by the undeniable fact that since the introduction and proper use of my treatment (Strychnia), the mortality from snake-bite has steadily decreased from year to year, and is now almost nil.' Almost the same words were used in 1891 by the doctor, as will be seen on referring to the Medical Gazette of that year, and a few years previous, and a year or two following he used the words, 'Scores of lives would have been lost, had not Strychnine come on the scene!' The following carefully-prepared details speak for themselves as against declarations coming from so prominent a man. Dr. Mueller first commenced the use of Strychnia as an antidote some six years before 1888-that is, in the year 1882—but, in order to give the doctor the date of his having made the matter public property, we will date the introduction of Strychnia as an antidote from the year 1888. Starting from that year, we find the total deaths from 1888 to 1895 amount to 44, making an average of

5½ for each year. In this return it must be noted that the returns for 1894 are not yet completed, and for 1895 the last four months of the year have yet to run. Now, let us take the whole of the years ever since a record has been kept by the Registrar's department, and we find that before Strychnia came into use, from 1876 to 1887, equalling twelve years, the total number of lives lost through snake-bite is 55, or an average slightly over 41 deaths per year. Another matter that will rivet one's attention is the fact that since the introduction Strychnia, and comparing each yearly death-rate total for the whole twenty years from 1876 to 1895, it will be found that the greatest yearly death-rates in any one single vear happened since Dr. Mueller's treatment of Strychnia as an antidote, namely Queensland (1889), 10; New South Wales (1890), 10, and Victoria (1887), 7."

While fully agreeing with Mr. Bray's remarks concerning the Struchnine treatment, I must, however, beg to differ when he states that Ammonia has been laid aside, and has met a fate which may yet be the destiny of Strychnine. Ammonia, in my opinion, is very far from being laid aside, as I shall show further on. I have shown, in a previous portion of this paper, that Ammonia has so far had a death-rate lower than that of any other known antidote, being over three times lower than Strychnine and the Immunity Serum, and over six times that of the Chloride of Lime. With such a great point in its favour, it is hardly likely that it will be abandoned in favour of an antidote having a much higher death-rate. I shall, before completing this paper on "Snake-venom— Its Action and Effect," show, by giving as examples cases treated by Ammonia, that that drug has been successfully injected in a number of cases which had developed extremely dangerous symptoms of poisoning by snakevenom. I shall also point out, in connection therewith. the effect and influence of the drug (after being injected) on the symptoms developed by the snake-venom, so that my readers will be able to see for themselves that Ammonia is yet a very long way off from being set aside. When another antidote has been discovered, having a death-rate lower than 4.1 per cent. of the number of persons bitten, then, and not until then, there will be time enough to lay it aside in favour of such an antidote. At present, however, there are still a large number of people who, dissatisfied with both the Strychnine and Chloride of Lime and Immunity Serum treatments, place their confidence in, and depend on the old treatment by Ammonia should they have the misfortune to be bitten by a snake. I have selected the following four recent cases of snake-bite as bearing on the question of treatment as relating to Strychnine and Ammonia, which I trust will prove interesting to my readers. They are as follows:-

Case I.—Mr. Hobby, a miner on the Upper Shoalhaven, was bitten by a snake while prospecting at Oranmier, N.S.W. He was in the act of crossing a creek on a log, in jumping from which he alighted on the snake. which curled around his leg, and bit him just above the ankle. He at once took the lace out of his boots and used it as a ligature. After he had tied it as tightly as he could, he took out his knife and cut out the flesh from around the wound, and made the best of his way to the nearest house, Mr. M. W. O'Connell's. He was very weak, and much exhausted when he got there, the distance being about three-quarters of a mile. Mrs. O'Connell had some Ammonia in the house, which she applied to the wound. The prompt and timely precautions which were taken had the desired effect, and Mr. Hobby soon recovered from his misadventure.

CASE II.—Mr. James Greggs, who, like Mr. Hobby, mentioned above, was engaged in mining operations, but in this case at Little River, in the Braidwood district. N.S.W., was bitten by a snake on the calf of the leg. He was at the time gathering up some sticks of wood to make his tea, when he trod on one. Mr. Greggs immediately went across to Mr. Pitcairn's place, which was not far distant, and that gentleman tied a ligature above the wound, scarified it, and applied Ammonia. Subsequently he was taken into Braidwood, where he was attended by Dr. Llewellyn, and was soon all right again.

CASE III.—At Goulburn, N.S.W., a young man named Mr. D. P. M'Killop was bitten by a small brown snake. He was out on a bicycle, and while sitting down to take a rest, he felt a stinging sensation. On looking round he saw the snake, which had bitten him on the thigh. Strychnine and Ammonia were administered, and the patient, whose symptoms were for a time serious, gradually recovered.

CASE IV.—A lad, named M'Pherson, aged 14 years, the son of a selector at Lowther, N.S.W., sixteen miles off, was thrice bitten on the hand by a brown snake, four feet long. His father ligatured his wrist and arm, and the boy rode to Lithgow in an hour, knocking up one horse, and at Bowenfels borrowing another. Dr. Leeper, of Lithgow, made two injections of Strychnine before 9.30 a.m., and gave him whisky and Ammonia during the day. No bad symptoms having set in by 9 p.m. the boy's recovery was expected by the doctor, which

subsequently took place.

In the first two cases mentioned above the Ammonia treatment was successfully used, both patients recovering. In the other two Strychnine was first injected, and then resource was had to Ammonia, the two patients also recovering. Examples of cases similar to the two latter are by no means isolated ones, and it appears to be becoming the practice of those doctors who all along have been advocating the Strychnine treatment to use Ammonia as an auxiliary. I do not for a moment question the right of a medical man to make use of any antidote that he considers to be the most effective for the recovery of his patient, but I nevertheless think that such a doctor can have very little confidence in the efficacy of Strychnine as an antidote in snake-bite when he has to fall back on Ammonia, or, at least, make use of it to assist him in antidoting the snake-venom. It also appears that both the patients in the cases of which the above duplicate of antidotes were administered recovered. and it would be very interesting to learn whether Dr. Leeper and the other medical man, whose name is not mentioned, give the credit of the recovery to the Strychnine or the Ammonia. Judging from the above reports, together with the two preceding it, it appears to me that the Ammonia had a large say in the matter.

In the case treated by Dr. Leeper it was at first stated that the bites had been inflicted by a tiger-snake, but on subsequent inquiries it was found that the reptile had been a brown one. This, however, makes little difference, as the brown snake is one of the most venomous known on the Australian continent, some authorities going so far even as to assert that in the virulence of its venom it does not come far behind the death-adder. I have been told of a case in which a dog died within an hour after

being bitten, the animal being in convulsion in twenty minutes after the bite had been inflicted. I may also here state that the brown snake is much dreaded, not only on account of the activity of its venom, but also because, as its colour is so similar to the dry twigs and sticks with which the Australian bush is so plentifully strewn, it is not very easily distiguishable, and the unwary thus run the risk of either treading on it, or else picking it up in mistake for a stick. This danger is especially great to children while gathering "gum-sticks," which, blazing easily, are made use of in the lighting of fires. This species of snake is also very active, and is said to possess the power of springing backward as well as forward.

(To be continued.)

Sulphate of Soda as Antidote to Carbolic Acid.—Every physician should keep on hand sulphate of soda to administer in carbolic acid poisoning. It is a prompt and safe antidote.—Medical Times.

FLEAS.—It is a rather curious circumstance that the flea indigenous in most civilised countries, and so ready to invade any house in Europe which is not kept scrupulously clean, does not seem to flourish in Central Africa. The larva of the flea must have for its development a dry place, and can then support life on any casual animal or vegetable refuse. It is now said, however, that the flea is becoming established in Central Africa, and Dr. Baumann is given as authority for the statement that several villages on the shores of Lake Victoria had been deserted in 1892 owing to a plague of fleas. Dr. R. A. Freeman, in his Travels and Life in Ashanti and Jaman, recently published, relates a curious example of the way in which the flea can multiply in Africa and the relative ease with which it may be exterminated. During a visit to Bontuku in 1888 the flea was apparently introduced into the mess-hut by the party from the coast. The fleas rapidly increased in numbers, until, he writes, "As I sat in the hut a dense cloud of black specks appeared on my white clothes, and steadily advanced upwards, so that I was compelled to brush them off every minute to prevent them from swarming on to my neck and face." Remembering the flea's need of a dry place for its larval stage, Dr. Freeman got rid of his enemies by keeping the floor of the mess-hut and of his tent constantly flooded with water for a time. In a few days hardly a flea was to be seen-a very satisfactory but rather surprising result. In this case, probably, the flea was not P. irritans, the flea of man, but P. serraticeps, the flea of the dog and cat. Dr. Freeman, however, remarks that the common flea (*P. irritans*) is very rare in West Africa. There must be many tourists in the mountains of Switzerland and along the fjords of Norway, who are now wishing that the same were true of those more civilised countries.—British Medical Journal.

EXTRACTS.

A VALUABLE ADDITION TO THE MATERIA MEDICA.

Dr. W. W. Winthrop, of Fort Worth, in Florida, gives his experience in the Texas Record, with a plant found in the Everglades of Florida, called by the Indians Husa. The plant, as yet unclassified, is of a dirty whitish-green colour, with a ball-like white formation at its summit, where the flower should be, and slightly lobulated and to all appearances like a small cauliflower. It grows in clumps in moist, shady places, particularly on the hummocks at the root of the cabbage palm. It is of a low order of plants, above the mosses. probably a cryptogam and indigenous to the Everglades. claimed by the natives that the plant is a perfect antidote for all snake bites and stings of insects. A negro in the presence of Dr. Winthrop allowed himself to be bitten several times by mocassins freshly caught, whose poison is ranked among the most virulent of snake-poison. After each bite the negro chewed a little of the herb, which he said counteracted the venom. This was probably true, as no bad effect followed the bite. Dr. Winthrop, in subjecting the plant to the strongest tests, finds it one of the most diffusable stimulants known. acting immediately.

Dr. Winthrop and other physicians who have joined in the tests find the plant not only a perfect antidote for narcotic poisons, but an infallible cure for the opium habit. it takes the place of opium, sedative but not narcotic, supporting the patient fully. It produces slight elation, but no somnolent effect. A physician cured himself of the opium habit with it, of twenty-three years' standing, having used as high as forty grains of morphine a day. The effect upon him he said was delightful, making him feel as comfortable as one would feel after a satisfying meal. The testimony of several physicians whom Dr. Winthrop invited to test the drug in the opium habit was that it was a perfect success, never having failed where the patient wanted to be cured. Dr. Winthrop is a man of high standing in his profession and his testimony seems to be so positive as to exclude doubt as it regards his statements. The field of action as a diffusable stimulant is so vast that when thoroughly tested it may prove one of the most valuable remedial agents in the materia medica.—New York

Medical Times.

THE BENEFICIAL EFFECTS OF ONE DISEASE AS REGARDS ANOTHER.*

By Harry Campbell, M.D., F.R.C.P., Physician to the North-West London Hospital.

(From the "British Medical Journal," April 30th.)

ONE disease may act beneficially as regards another by preventing or curing it.

I. THE PROPHYLACTIC EFFECTS.

These can be dismissed in a few words, since our knowledge of them is limited. Passive pulmonary congestion and hypertrophous emphysema would appear to diminish the tendency to pulmonary tuberculosis. Certain germ diseases, again, are preventive of others. Thus the bacillus pyocyaneus counteracts the activity of the B. pneumoniæ and the micrococcus erysipelatis. The various exanthems, on the other hand, do not confer immunity against one another, numerous instances having been recorded, from Murchison downwards, of two or more of them coexisting. One other instance of prophylaxis: Sir Dyce Duckworth refers to the fact (observed by Diday and J. Hutchinson) that typhoid fever and pneumonia cause the postponement of the secondary symptoms of syphilis for from three to five months.

II. THE CURATIVE EFFECTS.

These are much more marked and well defined, and will be

considered under five headings:

1. Metastasis.—This may be defined as the disappearance of disease from one part concurrently with its appearance in another. Thus, a urethral discharge may suddenly disappear—temporarily, at least—upon the supervention of orchitis, coryza upon the occurrence of pneumonia, quinsy upon the development of gouty arthritis. Dr. Mutch, of Brixton, saw an instance of the latter: Husband and wife were stricken with quinsy; when the former was in the height of the distress caused by the swelling, he developed acute gout in the toe, and forthwith, as if by magic, the throat trouble subsided; in the wife it ran the ordinary course. Now, the important question we have to ask regarding these cases is whether the occurrence of the new disorder acts curatively

^{*} Read before the Brixton Medical Society, January 19th. The writer has supplemented his paper by information gained at the discussion which it called forth, and also at the discussion on the same subject held at the meeting of the North-West London Clinical Society on February 17th. He is under great obligation to Dr. J. R. T. Conner, who has generously placed a mass of valuable literary material at his disposal.

towards the one which it replaces. Perhaps the best examples of metastasis are afforded by functional nervous disorders. which shift their site or alter their expression from moment to moment, and day to day, or from year to year. Thus, in the course of an hour or two headache may give way to backache, backache to a fit of palpitation, and this again to an attack of gastralgia; and similarly, in the lapse of years, we may find migraine, spasmodic asthma, and angina pectoris successively displacing one another. Here again the question arises whether the supervention of the new disorder does not tend to keep its predecessor at bay, thus acting beneficially towards it. The probability is that it does. The alternation of morbid phenomena may be regarded as a variety of metastasis. As instances, we may mention the alternation of glycosuria and eczema, deafness and vertigo—both of which have been observed by Dr. James Taylor—eczema and asthma. Dr. Denne, of West Kensington, has told me of a woman who is a great sufferer from dyspepsia. A short time ago she developed eczema upon the back of the neck. Since then the dyspepsia has much improved, and each shows a tendency to alternate in intensity with the other. I have recently had under observation a patient of Dr. Chittenden's, who has twice had a severe attack of urticaria, which on each occasion has terminated in a copious hematemesis. Whether we regard these cases as alternations of symptoms merely or of actual diseases is of small import. This is a purely academic question. What is important for us to note is that the latest morbid development appears to hold its predecessor in check. Nay, who can doubt that in Dr. Chittenden's case the hemorrhage had something to do with the disappearance of the eruption? The phenomena of counter-irritation are probably related to those of metastasis. Just as an attack of orchitis arrests a urethral discharge, or an eczematous eruption relieves an asthmatic seizure, so a violent stimulation of the skin may help to subdue a deep-seated inflammation. Dr. Dickinson² has attempted to show on physiological grounds that counterirritation is valueless; but, when we reflect upon the phenomena of metastasis, we shall be more inclined to believe in the efficacy of that traditional method of treatment. In this connection I would refer the reader to a pamphlet written more than sixty years ago, for an opportunity of reading which I am indebted to the kindness of Dr. Shaw Mackenzie.3

2. Mechanical Effects.—The good effect of one disease upon another may be largely due to mechanical causes, as in the cure of ringworm by the induction of suppuration or of lupus by syphilitic ulceration, an instance of which was recently recorded by J. Ross MacMahon. A remarkable example of

this kind of cure is related by Dr. Green, of Brixton. A man had for some time suffered from a troublesome loose cartilage in the knee-joint. One day he injured the affected joint, and arthritis ensued, with the result that the loose cartilage became fixed by adhesions, and he ceased to be troubled with it any further.

3. The Beneficial Effects of Trauma.—It is by no means rare for an accident to act beneficially upon the health. The following are cases in point:

Case of Chronic Rheumatism Cured by a Severe Accident.—A lady who had been a constant sufferer from rheumatism, some fifteen years ago met with an accident necessitating the amputation of both legs. Since then she has been wholly free from the rheumatism. This good result is doubtless in part due to her being no longer subject to great modifications of temperature (since she is compelled to keep in one suite of rooms), and in part to her having almost entirely abandoned a meat diet; but it does not seem improbable that the accident or the operation had some direct effect.

Case of Syphilitic (?) Periostitis Cured by Fracture of the Humerus (communicated by Mr. Kennard).—A man with a history of syphilis which had not been adequately treated complained of deep-seated pain above the external condyle of the humerus. After three months of this pain, which only yielded to opiates, the patient sustained a comminuted fracture of the lower part of the humerus. He was treated in the ordinary way, and made a good recovery. Since the accident the old pain has completely disappeared.

Case of Psoriasis Disappearing after an Operation (related by Dr. W. Knowsley Sibley).—A woman with scirrhus of the breast had widespread and inveterate psoriasis. After removal of the diseased breast the psoriasis rapidly subsided.

Case of Nervousness and Irritability greatly Improved by an Accident.—The following is extracted from a private letter: "Mr. A. met with a severe accident to his foot whilst riding. Strange to say, ever since this he is wonderfully changed; so much less irritable and domineering, and if he does get put out it is over and done with quickly, whereas before he would make the whole house uncomfortable for two or three days. He still limps, and could not shoot at all this summer, nor ride this winter, and, for one of his active habits, his lameness is a constant trial, and yet he is generally cheerful over it; so it is doubly wonderful. I get on very well with him now, and we talk politics, and often have a joke, whereas before I was often snuffed out if I ventured to address him, and made to understand that he considered me a rather unnecessary encumbrance in his house."

4. The Beneficial Effects of Febrile Disorders.—It will be convenient to treat this important branch of the subject under several sub-headings.

(a) Certain general but only temporary effects of fever may be first considered. Though doubtless the curative influence of febrile disorders is often largely due to the development of toxins, the direct effect of the fever itself must not be neglected. Febrile reaction would appear indeed to be a defensive mechanism. Lowey and Richer 5 have shown that the resis-

tance of rabbits to the virus of pneumonia, diphtheria, and hog cholera is increased, if before inoculating the virus the temperature be raised by injuring the corpus striatum. Some of the curative effects of high temperature will now be mentioned. If a diabetic is attacked with fever—for example, typhoid sugar may temporarily disappear from the urine, the excess of sugar in the system being presumably burnt off. Fever may likewise dry up a purulent discharge, as from the vagina or urethra, or from a wound. It may also, especially if acute, cause the absorption of callus, and even of new growths. Chronic tonsillar hypertrophy may subside temporarily or permanently under an acute fever like scarlet fever or pneumonia.6 Fever may also exercise a beneficial effect upon Thorsch 7 records a case of this disease in leucocythemia. which a rapid diminution in the size of the liver, spleen, and lymphatic glands occurred during the active fever of pneumonia, the leucocytes falling to one-third their previous number. Other cases of this kind have been recorded, but in all instances the effect has been temporary only.

(b) We may next consider those cases in which the general health has been improved, or some specific disorder cured, by the occurrence of an exanthem. Most physicians have seen instances of improved health following upon a specific fever -typhoid, for instance. Surgeon-Major G. H. Younge, A.M.S., writes me that he used to suffer greatly during the hot weather in India. "The very sight of food would excite nausea, the liver never acted properly, and there was a constant tendency to diarrhea with putty-coloured stools. I lost weight, became markedly anemic, and suffered from frequent febrile attacks." All this was, however, removed by an attack of malignant typhoid, since which he has enjoyed perfect health, the appetite and digestion being now always good, and the hot weather not affecting him the least. Dr. Younge has likewise kindly furnished me with the account of the first of the subjoined cases:

Case of Improved Health following Cholera.—A very delicate strumous-looking man was a martyr to dyspepsia, and never felt well. After a severe attack of cholera, which nearly carried him off, he greatly improved in health, declaring that "he felt in better health than he ever remembered to have done before."

Case of "Rheumatism" Cured by Typhoid Fever (communicated by Dr. C. C. Vigurs, of Newquay, Cornwall).—A man of about 50 years of age had suffered for many years from rheumatism. In 1880 he had an attack of typhoid fever, and since then he has been quite free from his old enemy.

Case of Anemia, &c., Cured by Scarlet Fever (communicated by Dr. St. John Kemm, Worle, Weston-super-Mare).—The patient had been suffering greatly from anemia and leucorrhea, had only twice menstruated, and then very scantily. At the age of 17 she contracted scarlet fever, and in

the last week of that illness she menstruated freely, and has continued to do so quite regularly since. Her leucorrhea and anemia have disappeared,

and she has become quite strong.

Case of Dyspepsia Cured by Typhus Fever.—A medical man writes to me: "For the first two years of my career as a medical student I had very indifferent health, being troubled with dyspepsia, gastric and intestinal. An attack of typhus fever contracted in hospital had a very beneficial effect in banishing all my troubles, and it was a matter of universal comment among my friends that I was a great deal stronger-looking after than before my attack of typhus."

Case of Rhinoscleroma Cured by Typhus.—Lubiner seconds a case of "rhinoscleroma in a man, aged 35, in whom the swelling and infiltration were so considerable that his nostrils were almost entirely blocked." The patient developed typhus, "on recovery from which all nasal obstruction had vanished, nothing but slight thickening of the mucous membrane

being visible.'

Case of Impaired Eyesight Improved by Small-pox (Mauthner?).—A boy, aged 3 years, developed basal meningitis in consequence of a fall upon his head. Some time afterwards the sight failed, and was finally lost in the right eye. The patient, however, completely recovered his sight after an attack of small-pox, a result Mauthner attributes to the influence of the small-pox virus in causing absorption of the exudation at the base of the brain.

Case of Pulmonary Tuberculosis greatly Improved by an Attack of Scarlatina (Lemoine 10).—Directly the scarlatinal eruption appeared "the lung symptoms rapidly subsided, the râles almost disappearing, and the cough and expectoration ceasing, and after the disappearance of the eruption the improvement continued."

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¹ Sir Dyce Duckworth, The Lumleian Lecture, 1896, The Sequels of Disease. ² W. Howship Dickinson, Occasional Papers on Medical Subjects. ³ Counteraction viewed as a Means of Cure. London: John Epps, M.D. 1832. ⁴ J. Ross MacMahon, Lancet, November 27, 1897. ⁵ A. Lowey and P. F. Richter, Canada Lancet, October, 1897. ⁶ D. E. Corminas, Lancet, June 23, 1888; E. F. Benham, Lancet, July 4, 1896. ⁷ Thorsch, Wienklin. Woch., May 14, 1896. ⁸ Lubiner, Berl. klin. Woch., October 5, 1891. ⁹ Mauthner, Med. Week., April 27, 1894. ¹⁰ Lemoine, Journ. de Méd., June 10, 1896.

(To be concluded.)

A New Symptom of Cancer.—G. Bogdan (Brit. Med. Jour.) relates the case of a woman, aged forty-eight, who suffered from cancer of the stomach. The disease had gone through a long period of latency. The patient presented on each cheek a patch of wine-red discoloration formed by the dilatation of the superficial venules; the stain showed out sharply against the pale yellow of the surrounding skin. On the strength of this symptom alone Bogdan was able to make a diagnosis of probable cancer at a time when there was yet no other manifest sign of that affection. He looks upon such superficial varicosities on the cheeks as a valuable help to the only recognition of certain cancers; he has seen it in about two-thirds of the cases of cancer which have come under his observation; it is particularly frequent in cases of epithelioma of the stomach and uterus, but less common in malignant disease of other organs.—Medical Times.

REVIEWS.

SYPHILIS: CONGENITAL AND ACQUIRED.*

Dr. Day has issued in pamphlet form two articles contributed by him to the Homeopathic Hospital Reports. The former deals with a number of cases of syphilis in children, presenting many points of importance and interest in their management. The latter deals with a number of miscellaneous cases, among them a case of Friedrich's disease cured by Gelsem 1x, and a case of tuberculous ulcer of the face cured by *Tuberculinum* (Koch) 30 gtt. iii. twice a week, *Boracic Acid* ointment being used externally.

MEDICAL TREATMENT OF THE DRINK HABIT.+

In this small pamphlet Dr. Kennedy has given a very intelligible account of the condition with which he is dealing, and describes a new treatment which he has employed in a number of cases with marked success. Dr. Kennedy acknowledges his indebtedness to the Association for the Study and Cure of Inebriety (U.S.A.) for his knowledge of the plan in which the administration of the Auroterchloride of Sodium plays a prominent part. Dr. Kennedy makes no allusion to the so-called "Keeley cure," in which it is commonly stated that gold is also used. Probably as the "Keeley cure" is a secret method, Dr. Kennedy felt it was not possible to make any useful comparison with it. The method described by Dr. Kennedy is at once simple and reasonable, and we think he has done well to bring it forward. The pamphlet is deserving of the careful study of all practitioners.

† The Medical Treatment of the Drink Habit. By A. Stoddard Kennedy, L.R.C.S., L.R.C.P., Edin. London: Simpkin, Marshall, Hamilton, Kent & Co., Ltd. Paper cover, 6d.

^{*} Syphilis: Congenital and Acquired. By J. Roberson Day, M.D., Physician for Diseases of Children to the London Homeopathic Hospital. London: John Bale, Sons & Danielsson, Ltd., 85-89, Great Titchfield Street, Oxford Street, W. 1898.

ANSWERS TO CORRESPONDENTS, NOTES AND QUERIES.

** In this department we shall be happy to reply to any inquiries relating to homeopathy or to the matter of our magazine that our correspondents may like to address to us. We cannot, of course, undertake to give medical advice in particular cases, which is the business of a medical attendant; but if our medical readers like to put queries to each other regarding points of practice or puzzling cases, we shall be happy to insert queries and replies.

Mr. Kay, Brisbane, is thanked for his interesting communications.
Mr. Petrie Hoyle, San Francisco.—Your letter and enclosure duly received, for which accept our best thanks. You will see we have

made use of both.

BENNINGHAUSEN.

To the Editor of the Homeopathic World.

SIR,—I have got a copy of the *Therapeutic Pocket-Book* of Bœnninghausen, by Allen (1891), and I make use of it. I am, however, unable to make use of the relationships given in the last chapter of the book. I am sorry the editor does not say in his preface how this portion is to be used. In the Bœnninghausen's original preface given in the book he says, in paragraph 1, page ix., that this part is to be used (1) for the recognition of the genius of the remedy, (2) for testing and making sure of its choice, (3) for judging the sequence of the various remedies. I should be obliged to you if you or one of your readers gives illustrations to show clearly how the relationships are to be used to know these three things.

I have also another difficulty. I do not understand the remarks made by Bænninghausen regarding concomitant complaints in paragraph 4, page viii. of the preface. Will you kindly throw some light on the subject and give some clear illustrations.—Yours sincerely,

Poonah, July 24, 1898. K. G. Kelkar. [Will some reader enlighten our correspondent?—Ed. H.W.]

NOTIFICATIONS.

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

REMOVAL.

Dr. Cavendish Molson, of East View, Woking, having arranged to take the practice of the late Dr. Ockenden, of Brighton, has removed to 41, Sackville Road, Hove.

OPENING.

SOUTHEND.—A correspondent writes that there is a good opening in this rapidly increasing seaside resort for a homeopathic practitioner who could see his way to pay one or two visits a week for the purpose of seeing patients.

Obituary.

DR. STAMMERS MORRISSON.

By the death of Dr. Morrisson homeopathy has lost an able practitioner, and his many patients have to mourn the loss of

their highly valued medical adviser and friend.

Dr. Morrisson was born in Liverpool on June 13, 1842. Losing both parents by death while very young, he went out to Tasmania to an aunt who resided there. He remained in that colony until the time arrived for him to complete his medical curriculum. He entered at University College, London, as a medical student; and, after taking the diploma of the Royal College of Surgeons, was appointed house-surgeon to University College Hospital for six months. A diligent student, he had the benefit of being well trained under the late Sir John Erichsen and John Marshall. He was also ophthalmic assistant.

In 1875 Dr. Morrisson became a licentiate of the Royal College of Physicians. In 1868 he received the diploma of

M.D. of the Philadelphian College.

Dr. Morrisson published several very useful pamphlets on malarial influenza, on the permanence of the cure of consumption, &c. He was a very good diagnostician, and was very successful in the homeopathic treatment of pulmonary phthisis. He practised for more than thirty years in Clapham, Brixton, and Camberwell, and was consulted by patients from all parts of London and several provincial towns.

His first serious illness, due chiefly to overwork, attacked him in the year 1874. He afterwards contracted pleurisy and abscess followed. He recovered his strength after passing a winter in Morocco and another in the South of France.

In August, 1895, he became seriously ill again; in February, 1898, he had an attack of cardiac debility, followed, in March, by very serious symptoms which compelled him to take to his bed. In May he went to Bexhill, but although at first he regained some little strength he gradually succumbed, and passed peacefully away in the early morning of July 23rd, to the deep sorrow of his wife and young daughters. He was a good husband and a loving father. Many of his patients have from time to time spoken to me of him with the deepest regard; and since his death Mrs. Morrisson has received a pile of letters all speaking in terms of the highest praise of him, and expressing the sincerest sympathy.

To his widow and children his loss is irreparable. He was cut down in his prime by a cruel illness, despite the most

skilful treatment by medical friends who rank high in their

profession.

The writer well remembers him in his student days as a pensive, quiet, industrious young man; in his prime as a wise and skilful physician, and in his home-life as a kindly disposed and blameless paterfamilias. Even as a young man Dr. Morrisson looked delicate; it may be that residence in Tasmania unfitted him to withstand this climate on his return to England, especially the London winter, when following the arduous duties of the profession. His mind was acute, reflective, and deep. He had strong religious feelings. His writings show that he entertained a high regard for poetry, and that he had the faculty of expressing his thoughts and conclusions clearly and well.

Alfred J. Pearce.

Oakdene, Hendham Road, Upper Tooting.

GENERAL CORRESPONDENCE.

THE CASE OF MR. THEOBALD.

To the Editor of The Homeopathic World.

SIR,—In May, 1894, the Council of the Royal College of Surgeons deprived me of my diploma. The offence alleged against me was the use of secret remedies—Count Mattei's being named. But in their actual proceedings they did not confine themselves to this. They tested the remedies by chemical analysis—a proceeding which might easily be applied to remedies used every day by homeopaths. As the result of this analysis was nil, I presume they considered my practice fraudulent, though they gave me no opportunity of proving my bonâ fides. This alone shows that my chief offence is that I am a homeopath. And this is confirmed by the fact that a petition in my favour presented last year, signed by sixty-six medical men, was entirely rejected. No reply to it has ever been made.

The fact also that the offence—whatever it was—was of a trifling character, inadvertent and unconscious; that my general character and competency has never been questioned; that the book in which Matteism is advocated is entirely withdrawn from circulation, and that the rule of restoring a diploma, in cases of no unpardonable atrocity, after two years, is not applied to me—all this

shows that I am looked upon as utterly undeserving

of clemency.

The law which I was alleged to have violated does not, in the opinion of good lawyers, apply to my case at all, but only to the use of remedies where the secret and the property in it belongs to the offender. Secret remedies are perpetually used and commended by medical men, and no notice is taken, simply because they are not proprietary. Moreover, the very law used against me no longer exists. It has been repealed. It might be supposed that any outstanding penalty under the extinct law would also be reprieved. But I am still made to suffer for the doubtful violation of an obsolete statute, referring to a matter of casuistry, not of morals.

This action is not only cruel and oppressive, it is, I believe, quite illegal, and it is my intention to test this in the law courts. But in order to do this I must be supported by my medical brethren and by the public. I wish first of all to publish such of the documents referring to my case as are necessary for a full comprehension of it, and to circulate this publication very widely—sending a copy to all Members of Parliament, to all practising homeopaths, and to all the leading journals. By this process I hope to obtain the sinews of war for the battle in

the courts. Now, first of all, I ask my brethren to

help me to bear the costs of publishing the story of this great iniquity.

Yours, &c.,

32, Lee Terrace, S.E.

R. M. THEOBALD.

THE DIAGNOSIS OF GLANDERS AND TUBER-CULOSIS.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—In perusing The Homeopathic World for July I note that you have reproduced among "Varieties" a note from the *Chemist and Druggist*, headed "Mallein for Glanders," and I desire to thank you for giving prominence to the subject in your valuable journal; I do so all the more because this method of procedure in diagnosing a particular form of disease is precisely the principle that I advocated some time back in connection with tuberculosis.

From evidence derived in the practices of several well

known veterinary surgeons, it is quite clear that tuberculin is as reliable an agent in diagnosing the existence of tuberculosis among cattle as mallein is in detecting the presence of

the glanders bacillus in the horse.

While it is of the first importance in the interests of horse owners from an economical standpoint that a reliable method of detecting such a disease should be recognised, I maintain that a much deeper and more far-reaching interest attaches to these agents when viewed from their curative standpoint; it has been left to the homeopathist to discover the possibilities existing in this direction, but alas! progressive as the homeopathist is in medical science and art, even he has been terribly slow and apathetic in availing himself of the experience gained by a few members of the school respecting this class of remedial agents; moreover, if the homeopathists do not take heed to their ways they run the risk of allowing the allopathists to pass them in the therapeutical race so far as these particular agents are concerned, for it has been discovered by some members of the veterinary profession when making postmortem examinations of animals that had been, or were, the subjects of glanders and tuberculosis, and which had been respectively inoculated with cultivations of the viruses of glanders and tuberculosis, that distinct evidence existed of lesions peculiar to these forms of disease which had undergone change, while the bacilli present in the lesions were dead, thus giving rise to the suggestion which has been put in so many words as follows, viz.: "Does inoculation of the cultivated virus cure the disease?" The question was, of course, met scepticism on the one hand, and with ridicule on the other by the majority, but in the minds of those who accidentally made the discovery, and in those who are more apt to think for themselves than to accept the ipse dixit of so-called leaders, the question is still simmering, and, as I have asserted ad nauseam both in public speech and print, the subject is one which must come to the front in the long run; and I now desire to put it to all interested in the welfare of homeopathy and the spread of its principles, Are we to stand aside and allow the credit of this knowledge to pass into other hands?

I ventured to suggest months, if not years, ago that the proof of the value of *Tuberculin* as a therapeutical agent is within reach under conditions that would not only involve no loss, but absolutely result in profit from a commercial standpoint, while the value of the scientific work that could be carried out under the conditions I indicated is absolutely inestimable. But, as with everything that is worth doing at all, capital is an essential requisite. Personally, I am free to admit, I have not influence enough to reach the monied

persons who could float such an undertaking, but I unhesitatingly say the homeopathic medical practitioners have that influence if they would only exercise their powers. And when one bears in mind that consumption carries off more victims annually than all other diseases put together, it certainly is a marvellous thing that a class of men whose supreme duty it is to mitigate disease, and whatever tends to promulgate and spread the same, do not see their way to encourage the inquiry into and the adoption of methods which investigation is almost daily proving (though indirectly and blindly) to be capable of development in this direction. And this might easily be done if the medical profession would co-operate with me.

I am, sir, yours faithfully,
J. SUTCLIFFE HURNDALL, M.R.C.V.S.

Sussex Villas, Kensington, W., August 12, 1898.

A LEAF FROM DR. HANSEN'S COMING BOOK.

To the Editor of The Homeopathic World.

Dear Colleague,—As many have expressed a wish to see a page of my Materia Medica and Therapeutics of the Rare Homeopathic Remedies, I will beg you to insert this sample page in The Homeopathic World for September. My book is elaborated from twenty to thirty sources, and added are practical clinical experiences from the colleagues, and also from my colleagues here in Copenhagen. The book will be very good for the busy practitioner.

Yours very truly,
OSCAR HANSEN, M.D.
Wester Boulevard 15, Copenhagen, Denmark, W.

A SAMPLE PAGE OF TEXT-BOOK OF MATERIA MEDICA AND THERAPEUTICS OF THE RARE HOMEOPATHIC REMEDIES: A SUPPLEMENT TO A. C. COWPERTHWAITE'S TEXT-BOOK OF MATERIA MEDICA AND THERAPEUTICS.

By Oscar Hansen, M.D., Copenhagen, Denmark.

Ampelopsis quinquefolia.

Therapeutics.

Chronic hoarseness in patients which were scrofulous in the youth.

Amygdala amara (et persica).

Characteristic Symptoms.

Dark red injection of fauces, uvula, and tonsils. Sharp lancinating pains so that the patient must cry out. Considerable difficulty in swallowing. General prostration.

Therapeutics.

Diphtheria. Tonsillitis.

Anacardium occidentale.

Characteristic Symptoms.

Vesicular eruption on the face usually, but also on other parts of the body. Intolerable itching with umbilicated pustules, as in small-pox. Erysipelatous eruption on the face, spreading from the left to the right. (In the proving of *Rhus* the erysipelatous inflammation goes from right to left.) Stiff neck, worse from beginning to move. *Anacardium occidentale* is antidote to *Rhus* erysipelas.

ANANTHERUM MURICATUM.

Characteristic Symptoms.

Pressure and burning pains in the bladder, with urging to urinate every minute; the bladder cannot hold the smallest quantity of urine. Urine turpid, thick, full of mucus. Incontinentia of urine with involuntary urination when walking, and at night in bed during sleep. Pains in the uterus, as if it was twisted and compressed. Burning pains in the uterus, extending into the kidneys. Swelling and spasm of uterus. Sterility. Itching and eruption like lichen.

Therapeutics.

Cystitis. Incontinentia urinæ. Dysmenorrhea, neuralgic and spasmodic. Recommended in Lichen simplex.

SENECIO GRACILIS.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—In the March number of The Homeopathic World (vol. xxxiii. No. 387, p. 142) "Ferrum" states that he has been puzzled in tracing my Senecio gracilis, my proving of which appeared in the February number, pp. 74–80. I must confess that I felt somewhat surprised at "Ferrum's" confession, as I was under the impression that this variety of Senecio was well known to all students of botany. However, we all have to learn, and should any of my readers at any

time feel "puzzled" as to the botanical or technical name of any member of the vegetable kingdom mentioned in any of my provings that shall hereafter appear in this journal, I shall only be too pleased to enlighten them. Our mutual friend, the editor, to whom my thanks are due for his prompt reply to "Ferrum" at the foot of the latter's published letter, very correctly states that Senecio gracilis is mentioned by Hering, in his Guiding Symptoms, as an analogue of Copaiva, producing like symptoms on the mucous membranes. I may add that I have since been informed that it is also mentioned by no less an authority than Dr. Edwin M. Hale, Professor of Materia Medica and Therapeutics of the New Remedies in Hahnemann Medical College, Chicago, and the author of Lectures on Diseases of the Heart, Characteristics of New Remedies, &c., in his Materia Medica and Special Therapeutics of New Remedies, in which he is said to state that Senecio gracilis is merely a taller, slenderer variety of Senecio aureus (the "Golden" Senecio). Dr. J. H. Clarke also draws attention to the Cyclopedia of Drug Pathogenesy, which states that Senecio gracilis is only a variety of Senecio aureus. Mr. J. H. Maiden F.L.S., Director of the Sydney Botanical Gardens, states that Senecio gracilis, Pursh, is synonymous with Senecio aureus, Linn. He describes it as a very variable American species, growing in swamps and on wet banks from Newfoundland to Florida and Texas on one side, and from British Columbia and Sierra Nevada to California on the other side. It is also described in Pursh's Flora of North America as Senecio gracilis and in Asa Gray's Flora of North America as Senecio aureus. Dr. Massy states Senecio gracilis as useful in anemic dysmenorrhea, especially when the strumous habit is present. Senecio symptoms, like those of Sulphur and Mercurius, are aggravated at night. To those familiar with the symptoms peculiar to Senecio aureus, it will be at once evident, on perusing my proving of Senecio gracilis, that the latter has many symptoms common to the former. In fact, these two Senecios are so closely similar in many of their symptoms that medical men have informed me that they have made indiscriminate use of both. I touched on this in The Homeopathic World as follows: "Having properties identical with Senecio aureus, as has been borne out in the proving of both plants, physicians have made use of both plants, some preferring aureus, and others gracilis." My proving of Senecio gracilis has convinced me of its great value in affections of the lungs, kidneys, catarrhal headache, catarrhal ophthalmia, coryza, catarrhal diarrhea, and in all catarrhal affections of the mucous membranes. Its success in the treatment of female complaints (more especially in amenorrhea, dysmenorrhea, profuse, premature or scanty, irregular, and retarded catamenial flow. leucorrhea in place of menstruation, or even chlorosis) has been so great that it has earned the name of "Female Regulator," by which it is familiar to many, and many a poor sufferer of either of the complaints mentioned above has had cause to bless Senecio gracilis for a speedy and complete restoration to normal health. As an analogue to Pulsatilla nigricans, Calcarea carbonica, Sepia succus, Caulophyllum thalictroides, Erigeron Canadense, and Helonias dioica, Senecio gracilis must always be looked upon as a reliable remedy in diseases of women, where the symptoms are identical with those peculiar to the action of the drug in health. Trusting that "Ferrum" will now no longer feel "puzzled" in tracing my Senecio gracilis, which, to describe briefly, is but a variety of Senecio aureus, with which he is, no doubt, acquainted. I remain, yours faithfully,

FREDERICK KOPP.

Greenwich, N.S.W., April 30, 1898.

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET. BLOOMSBURY.

Hours of Attendance: - Medical (In-patients, 9.30; Out-patients, 2.0), Daily; Surgical, Mondays, Tuesdays, Fridays, and Saturdays, 2.0; Diseases of Women, Tuesdays, Wednesdays, and Fridays, 2.0; Diseases of Skin, Thursdays, 2.0; Diseases of the Eye, Mondays and Thursdays, 2.0; Diseases of the Throat and Ear, Wednesdays, 2.0; Diseases of Children, Mondays and Thursdays, 9.0 a.m.; Operations, Tuesdays, 2.30; Dental Cases, Thursdays, 9.0 a.m.

MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Lewis (Percy G.). A Manual of Medical Exercises. 16mo, pp. 50. (Bale. 1s.)
Lewis (Percy G.). The Relief and Cure of Spinal Curvatures. Containing over 50 Original Illustrations. Cr. 8vo, pp. 220. (Bale. 4s. 6d.)
Murrell (William). Aids to Materia Medica. Part I. Introduction and Inorganic Materia Medica. 12mo sd., pp. 92. (Ballilère. 2s.)
Penrose (Charles B.). A Text Book of Diseases of Women. Illustrated. 2nd ed. 8vo. (Rebman. 20s.)
Phipson (Dr. T. L.). Health Notes and Curiosities of Medical Science. Cr. 8vo, pp. xiv.-205. (Routledge. 2s.)
Retrospect of Medicine (The). A Halfyearly Journal, containing a Retro-Lewis (Percy G.). A Manual of Medical

yearly Journal, containing a Retro-spective View of every Discovery and Practical Improvement in the

Medical Sciences. Edited by James Braithwaite, assisted by E. F. Trevelyan. Vol. 117, January-June, 1898. 12mo, pp. 452. (Simpkin. 6s. 6d.) Schafer (E. A.) The Essentials of His-

tology, Descriptive and Practical. For the use of Students. Illustrated

For the use of Students. Illustrated by nearly 400 Figures. 5th ed. 8vo, pp. 372. (Longmans. 8s.) Snow (Herbert). Twenty-two Years' Experience in the Treatment of Cancerous and other Tumours. With an Introduction on the in-creasing Prevalence of Cancer, and the Remedy for that Increase. 8vo,

pp. 200. (Baillière. 5s.)

System of Medicine (A.). By Many
Writers. Edited by Thomas Clifford
Allbutt. Vol. 5. 8vo, pp. 1074. (Macmillan. Net, 25s.)

TO CONTRIBUTORS AND CORRESPONDENTS.

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

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

envelope.

All advertisements and business communications to be sent to the "Manager" of the Homeopathic Publishing Company, 12, Warwick Lane, Paternoster Row, London, E.C.

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

CORRESPONDENTS.

Communications received from Mr. Frederick Kopp, Greenwich, N.S.W.—Mr. Meredith, Lydney.—Mr. A. J. Pearce, London.—Dr. Dudgeon, London.—Mr. Kay, Brisbane, N.S.W.—Dr. Kruger, Nimes, France.—Dr. Sircar, Calcutta.—Mr. Petrie Hoyle, San Francisco.—Dr. Oscar Hansen, Copenhagen.—Rao Saheb K. G. Kelkar, Poona, India.—Dr. Carman, London.

BOOKS AND JOURNALS RECEIVED.

Chemist and Druggist.—H. Recorder.—Hahn. Advocate.—Gaz. Méd. de Paris.—Allg. Hom. Zeit.—Hom. News.—Med. Century.—Monthly Hom. Review.—Amer. Hom.—Pacific Coast J. of H.—Vaccination Inquirer.—Il Secolo Omeopatico.—Rev. Hom. Belge.—Pub. Health Journal.—Med. Monat. f. H.—La Homeopatia.—

H. Physician. — Med. Counsellor. -Zoophilist.—Animals' Friend. -L'Art Médical.-N. A. J. of H. -H. Maandblad.-Clinique.-J. Belge d'H.—Missionary Herald. —Research.—Jour. B. H. S.— Rev. Hom. Française.—Archiv. f. Hom.—Critique.—Astrological Magazine.—Calcutta J. of Med.-H. Tidssk.—Indian H. Review.— Minn. H. Mag.—Med. Times.— J. of Hom.—New Eng. Med. Gaz. —8th Announce-Annual ment Philadelphia Post-Graduate School of Homeopathics.

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TO CONTRIBUTORS AND CORRESPONDENTS.

THE

HOMEOPATHIC WORLD.

OCTOBER 1, 1898.

THE POWER OF THE MIND OVER THE BODY.

For some months past an interesting discussion has been carried on in our pages centring round the question of the origin and nature of mind. Is the mind the product of the brain? or is the brain the product and the instrument of mind? Without stopping to decide which—if either—of these theories is correct, it may be useful to give some attention to the question of how far the body is capable of being influenced by the operations of mind, whether it be the person's own mind or another's.

It is plain that the world is entering upon a new era in the investigation of mental phenomena. The selection of Sir Wm. Crookes, an ardent spiritualist, to fill the office of president of the British Association for the Advancement of Science is a sign of the times which cannot be ignored. Hitherto academic science has fought very shy of anything transcending its powers of measurement and definition. It has concerned itself exclusively with form: with essential force it has, so far, declined to have anything to do. But it will not be able to shirk the task much longer: questions are daily knocking at the door of Science demanding an answer, which the science of the schools can neither respond to nor ignore. Crookes has had the courage to face the problem squarely, in the same fashion that he has faced and conquered scientific-

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problems of another kind; and we will quote (from the Daily News of September 8th) the weighty passage in which he refers to his—

"PSYCHIC RESEARCHES.

"No incident in my scientific career is more widely known than the part I took many years ago in certain psychic researches. Thirty years have passed since I published an account of experiments tending to show that outside our scientific knowledge there exists a force exercised by intelligence differing from the ordinary intelligence common to mortals. This fact in my life is, of course, well understood by those who honoured me with the invitation to become your president. Perhaps among my audience some may feel curious as to whether I shall speak out or be silent. I elect to speak, although briefly. To enter at length on a still debatable subject would be unduly to insist on a topic which-as Wallace, Lodge, and BARRETT have already shown—though not unfitted for discussion at these meetings, does not yet enlist the interest of the majority of my scientific brethren. To ignore the subject would be an act of cowardice—an act of cowardice I feel no temptation to commit. stop short in any research that bids fair to widen the gates of knowledge, to recoil from fear of difficulty or adverse criticism, is to bring reproach on Science. There is nothing for the investigator to do but to go straight on 'to explore up and down, inch by inch, with the taper his reason'; to follow the light wherever it may lead, even should it at times resemble a will-o'-the-wisp. I have nothing to retract. I adhere to my already published statements. Indeed, I might add much thereto. I regret only a certain crudity in those early expositions which, no doubt justly, militated against their acceptance by the scientific world. My own knowledge at that time scarcely extended beyond the fact that certain phenomena new to science had assuredly occurred, and were attested by my own sober senses, and, better still, by automatic record. I was like some twodimensional being who might stand at the singular point of a Riemann's surface, and thus find himself in infinitesimal and inexplicable contact with a plane of existence not his own. I think I see a little farther now. I have glimpses of something like coherence among the strange elusive phenomena; of something like continuity between those unexplained forces and laws already known. This advance is largely due to the labours of another association of which I have also this year the honour to be president—the Society for Psychical Research.

"TELEPATHY A NEW STARTING-POINT.

"And were I now introducing for the first time these inquiries to the world of science I should choose a starting-point different from that of old. It would be well to begin with telepathy; with the fundamental law, as I believe it to be, that thoughts and images may be transferred from one mind to another without the agency of the recognised organs of sense—that knowledge may enter the human mind without being communicated in any hitherto known or recognised ways. Although the inquiry has elicited important facts with reference to the mind, it has not yet reached the scientific stage of certainty which would entitle it to be usefully brought before one of our sections. I will therefore confine myself to pointing out the direction in which scientific investigation can legitimately advance. If telepathy take place we have two physical facts—the physical change in the brain of A, the suggester, and the analogous physical change in the brain of B, the recipient of the suggestion. Between these two physical events there must exist a train of physical causes. Whenever the connecting sequence of intermediate causes begins to be revealed the inquiry will then come within the range of one of the sections of the British Association. Such a sequence can only occur through an intervening medium. All the phenomena of the universe are presumably in some way continuous, and it is unscientific to call in the aid of mysterious agencies when with every fresh advance in knowledge it is shown that ether vibrations have powers and attributes abundantly equal to any demand, even to the transmission of thought. . . . Confirmation of telepathic phenomena is afforded by many converging experiments, and by many spontaneous occurrences only thus intelligible. The most varied proof, perhaps, is drawn from analysis of the subconscious workings of the mind, when these, whether by accident or design, are brought into conscious survey. Evidence of a region, below the threshold of consciousness, has been presented, since its first inception, in the proceedings of the Society for Psychical Research; and its various aspects are being interpreted and welded into a comprehensive whole by the pertinacious genius of F. W. H. Myers. Concurrently, our knowledge of the facts in this obscure region has received valuable additions at the hands of labourers in other countries. . . . Whilst it is clear that our knowledge of subconscious mentation is still to be developed, we must beware of rashly assuming that all variations from the normal waking condition are necessarily morbid.

"CURES BY SUGGESTION.

"The human race has reached no fixed or changeless ideal; in every direction there is evolution as well as disintegration. It would be hard to find instances of more rapid progress, moral and physical, than in certain important cases of cure by suggestion. . . . This is not the place for details, but the vis medicatrix thus evoked, as it were, from the depths of the organism, is of good omen for the upward evolution of mankind. . . . It has been characteristic of the

leaders among the group of inquirers constituting the Society for Psychical Research to combine critical and negative work with work leading to positive discovery. To the penetration and scrup'ulous fair-mindedness of Professor Henry Sidgwick and of the late Edmund Gurney is largely due the establishment of canons of evidence in psychical research which strengthen while they narrow the path of subsequent explorers. To the detective genius of Dr. Richard Hodgson we owe a convincing demonstration of the narrow limits of human continuous observation.

"LIFTING THE VEIL.

"It has been said that 'Nothing worth the proving can be proved nor yet disproved.' True though this may have been in the past, it is true no longer. The science of our century has forged weapons of observation and analysis by which the veriest tyro may profit. Science has trained and fashioned the average mind into habits of exactitude and disciplined perception, and in so doing has fortified itself for tasks higher, wider, and incomparably more wonderful than even the wisest among our ancestors imagined. Like the souls in Plato's myth that follow the chariot of Zeus, it has ascended to a point of vision far above the earth. It is, henceforth, open to science to transcend all we now think we know of matter, and to gain new glimpses of a profounder scheme of Cosmic Law. An eminent predecessor in this chair declared that 'by intellectual necessity he crossed the boundary of experimental evidence, and discerned in that matter, which we, in our ignorance of its latent powers, and notwithstanding our professed reverence for its Creator, have hitherto covered with opprobrium, the potency and promise of all terrestrial life.' I should prefer to reverse the apophthegm, and to say that in life I see the promise and potency of all forms of matter. In old Egyptian days a well-known inscription was carved over the portal of the Temple of Isis: 'I am whatever hath been, is, or ever will be; and my veil no man hath yet lifted,' Not thus do modern seekers after truth confront Nature—the word that stands for the baffling mysteries of the universe. Steadily, unflinchingly, we strive to pierce the inmost heart of Nature, from what she is to reconstruct what she has been, and to prophesy what she shall yet be. Veil after veil we have lifted, and her face grows more beautiful, august, and wonderful with every barrier that is withdrawn."

It is impossible to regard this utterance as other than a very notable pronouncement, and the occasion of it an epoch-making event; and coming almost concurrently with a weighty discussion on Hypnotism at the British Medical Association's meeting, it clearly shows that men of

science, and particularly those devoted to the sciences connected with medicine, will have to turn their attention to the invisible forces of life. How clearly Hahnemann foresaw the line of progress is evidenced by the serious attention he gave to the phenomena and uses of mesmerism on the one hand, and the great importance he attached to the mental symptoms of drugs on the other. For plants and minerals are not devoid of mind, and their mental properties can be discovered by his method of experimenting with them. The mind of Gold is different from the mind of Arsenicum, and the mind of Pulsatilla is the very antipodes of the mind of Nux. To homeopathists the new researches into mental phenomena are of value and interest far beyond what they can be to those of the old school. It would be absurd to suppose that hypnotism or mesmerism marks the limit of our powers of using mind-force for therapeutic purposes. It is practically still a virgin field for exploration. HAHNEMANN and his followers have used the mind-forces embodied in natural substances, and every subsequent discovery has proved the magnitude of his genius; but the scientific use of mind-force direct upon mind without the intervention of the ordinary vehicles—a kind of wireless telegraphy open up, as Sir W. Crookes says, a new starting-point.

It may be useful in this connection to reproduce three extracts illustrating the power of mind over body, which we have taken from various sources at different times.

The first is from the Berlin Letter of the British Medical Journal of April 23rd last:—

[&]quot;A curious case of anto-suggestion has just occurred in Berlin. A domestic servant, a strong and healthy girl, aged 25, came into hospital complaining of agonising pain in the chest and dyspnea. She thought she had swallowed her artificial teeth in her sleep, as she had not been able to find them on awakening, and had had terrible pain ever since. A careful examination was made, but failed to reveal any trace of the tooth-plate. As, however, the girl's sufferings showed no signs of abatement she was kept in the hospital and put to bed. Next morning a fellow-servant of the girl presented herself to the matron, bringing the supposed corpus delicti—a plate with nine teeth

—in her hand. It had been found under the mattress. The sufferer saw her teeth, and in the same moment all her pain was gone, her asthma disappeared instantaneously, and she left the hospital and returned to work as well and strong as ever."

The next is taken from a recent number of Light:—

"A VIVID IMAGINATION.

"The Boston Transcript tells the following story, illustrating in a rather novel way the independent action of imagination:—

"'A day or two before Christmas a lady was coming out of Park Square, across Boylston Street, to the Common. The crossings were muddy and very slippery. She had been dodging waggons and cars, and was picking her way across the muddy streets when she saw, coming down the Boylston Street incline, a double team attached to a heavy express waggon, with a projecting pole in front. She slipped on the wet crossing, and the little accident so delayed her movement that the team was upon her almost before she knew it. The speed of the horses was so great that the driver could not have checked them or diverted them in time to save her. She made a desperate struggle to get away and slipped again, and at this instant the pole of the rushing waggon grazed so closely to her cheek that she felt its rushing movement. It was here that the psychological phenomenon referred The lady distinctly heard and felt the cracking and crunching of her own bones under the wheels of the waggon; she was, in her own consciousness, completely under the wheels of the vehicle, where she was being fatally run over. At the same instant this thought flashed through her mind: "There is no means of indentifying me except a railroad commutation ticket in my bag, which has my husband's address written on the cover. How dreadful for him to hear of this in this way!" Then there came to her senses a sort of panoramic picture of her husband and children at home, with no way to find the Christmas presents, which she had hidden away in various places about the house! Her imagination recalled every separate spot, with all the details of its surroundings, in which these presents were located—some in the attic, some in closets, some in bureaus, &c.

By this time the lady had reached the curbstone, and had not been run over at all! The whole affair had taken place within three feet of the curb, and had, of course, occupied only the merest instant of time. The impression of the breaking bones, the wheels going over her, and all the rest, had been pure imagination, and had come to her at the very instant when the pole of the waggon brushed so closely to her face. Nevertheless, she carried away an ache in every bone, and could not, for some time, disabuse her mind of the sensation of having

been actually run over."

The third is from the New England Medical Gazette of last July:—

"THE POWER OF THE IMAGINATION.

"Dr. Preston Steele, of Titusville, Pa, tells the following story in the New York *Medical Journal*, a story not merely highly entertaining, but also thoroughly illustrative of the power of mind over matter. He says:—

""On Monday, November 15, 1897, I was called to see a primipara, aged twenty years, in labour. The labour was a rather quick and easy one. The child weighed seven pounds and a half. The next day both mother and child were doing well. At twelve o'clock that night, or twenty-four hours after the delivery, I received a telephone call to come at once. Upon my arrival I was told that blood-poisoning had set in, and was shown a large, irregular-shaped spot upon the abdomen. The spot was of a dark bluish colour, very sensitive to the touch, and measuring perhaps seven inches in diameter. The patient complained of terrible pain over the region of discoloration. The pulse and temperature were normal.

"'Upon a close examination I discovered that she had used a flannel bandage with the maker's stamp on one end. The use of warm water and soap was followed by instantaneous and complete recovery."

These incidents—and the well-known phenomena of maternal impressions may be included in the same category—show what a mighty power that should be utilised for human progress lies waiting for the scientific explorer.

Calendula in Carbuncle.—Dr. S. G. A. Brown relates a case of carbuncle, in which after operation by crucial incisions the mischief went on spreading until a solution of succus calendulae, 1 in 6, was applied. "The effect was marvellous. Pus began to disappear rapidly, the inflammatory extension ceased instantly, and temperature

dropped."—Hahn. Monthly, March.

"Witch Hazel." or "Wych Hazel."—The correct name for Hamamelis virginica, according to an American journal, is not witch hazel but wych hazel. Formerly hazel had a very wide meaning, and included the elm. One of these elms (Ulmus montana) was the favourite wood for making wyches or provision-chests, and therefore became known as the wych hazel or elm. Hamamelis received from the American settlers the name of wych hazel from the resemblance of the leaves to those of the wych hazel or elm of the Old World.—

Chemist and Druggist.

NEWS AND NOTES.

HOW HOMEOPATHIC MEDICINES KEEP.

A WELL-KNOWN London firm of homeopathic chemists have kindly permitted us to make use of the following interesting letter which supplies unimpeachable evidence of the keeping-powers of homeopathic medicines when properly prepared and put up. Mr. Dina's letter also contains some interesting facts regarding fever in the tropics. No doubt he would find Dr. Hayward's lectures of use in this connection.

"In October, 1875, on my request, you forwarded me in Ceylon, a chest of your homeopathic medicines in globules in stoppered bottles; I believe it will be of some interest to you to know how long these medicines remained in good state. From 1875 to 1879 I remained in Ceylon, from 1879 to 1880 in Paris, from 1880 to 1889 in Algiers, from 1889 to 1894 in Madagascar, from 1894 to 1896 in Mauritius Island, from 1896 to 1898 in Algiers.

"During all the time I used your medicine with full success. I tried some of the French medicines bought at Marseilles, not with good effect. With the exception of all the acids, which decomposed the pilules, the medicines remained in good order for twenty years.

"In a few months I am going back to Mauritius, where the fever is prevailing in the low country; the colony is not swampy; this fever broke out in epidemic in 1867, and since it has remained in an endemic state in the colony and causing a great source of revenue to the allopathic physicians, who have not found any other remedy than Quinine in all its different forms, which does more evil perhaps than the disease itself. There is not a homeopathic doctor in the colony. My only resource is to apply myself to you to guide me in the medicines to be used in the case.

"The mentioned fever is intermittent and attacks the several organs of life very severely; it is sometimes characterised by hematuria, in which case it is almost invariably fatal. This fever, I believe, was introduced into the colony from India. I read the same symptoms mentioned in Victor Jacquemont the French naturalist, in India, but not one doctor in Mauritius has studied this illness, in following out its different phases. Every newcomer to the colony is much struck by seeing the faces of the population living in the low districts; the only remedy to this fever is to go up hill country, where after one year about it will disappear from the system. A good homeopathic physician, I am sure, will find a remedy if it is studied in the island, and will realise a great fortune very soon.

and mark bevieres addenormally and to "Yours faithfully, "Would be considered and the least leas

[&]quot;12, Boulevard Gambetta, Algiers, Africa." August 10, 1898."

A CHANCE FOR THE CHARITABLE.

THE following appeared in the Missionary Herald of the Baptist Missionary Society of July:—

"The Rev. Khristanga Biswas, of Bishtapore, Calcutta, desires very earnestly to appeal for the gift of a homeopathic medicine-chest. He writes: 'If any friend should be led to respond to this appeal the gift will probably relieve many suffering folk, and so help us to secure an entrance and welcome into many homes that otherwise would be closed.' We shall be glad to send out to India such a gift at the earliest date practicable."

"COVERING UP SYMPTOMS."

In the course of a leading article on "Hypnotism" the British Medical Journal of September 10th makes the following remark:—

"The physician should continue to attack the real fortress of disease, and not content himself with covering up symptoms with soporifics, tangible or intangible."

Most admirable sentiment! but—if this is put in force, what will become of nine-tenths of orthodox medical practice?

SULPHONAL POISONINGS.

In the same number of the *Journal* an illustration of the "covering up" method is given by Dr. R. D. Hotchkis, who reports a case of Hematoporphyrinuria as a warning of the dangers which accompany the administration of *Sulphonal*. It was given to an insane woman, aged 54. Here are some of the salient points:—

"By July her bodily health had considerably improved, but there was no appreciable mental change. In August she had a relapse, and her condition became serious. She would not keep in bed, but insisted on standing all day, slept badly, resisted everything that was done for her, and soon presented a most miserable and wretched appearance. Sulphonal was now begun in 20 gr. doses at night, and this was steadily given for three months, with the result that her restlessness and resistiveness were lessened. The depression and confusion of mind still remained. The dose was increased to 15 grs. night and morning for three weeks, and then for a fortnight it was changed to 10 grs. This brings us up to January 3rd, when the first symptoms of hematoporphyrinuria appeared (see below). Death

occurred on January 29th. The peculiar coloration of the urine had ceased a week or more before death."

Dr. Hotchkis comments on the case as follows:—

"The stages of this form of poisoning were well marked in this case. There were first acute gastric symptoms, shown chiefly by constant retching, vomiting, and soreness over the epigastrium, but no definite tenderness or swelling. This lasted about six days, but there was no sharp line of demarcation between this and the stage of progressive paralysis, which began imperceptibly, and could not easily be distinguished for the general weakness and emaciation. The legs were first affected, and then the arms. Twitchings of the muscles came on six days after the paresis had become apparent, and the muscles most affected were those of the face and the flexors of the arms. Though aggravated by attempted voluntary movement they were always present in sleep. During the second stage the irritability of the stomach disappeared completely, and the patient was able to take without obvious discomfort large quantities of nourishment. . . . Albumen had been present in small quantities since admission, and with the onset of the hematoporphyrinuria it increased slightly. As the disease progressed the increase became marked, especially after the first week, and remained so till the end. The colour for the first two days was deep claret; then it became light claret, and oscillated between these two shades for the first fortnight, when it gradually assumed its natural colour. microscopical examination revealed two conditions: for the first ten days generally, though not always, red blood cells were seen shrivelled or disorganised, as though the hemoglobin was gathered up into a heap."

His final advice is never to give Sulphonal for any length of time—if at all—unless it is quite certain that the kidneys are perfectly healthy. We give elsewhere an extract describing the hemoglobinuria produced by Quinine.

Addison's Disease Cured by Suprarenal Extract.—Dr. Beclère presented in February last to the Société Médicale des Hôpitaux an undoubted case of Addison's disease, in which a definite cure of three years' standing had been effected by hypodermic injection of a fluid extract of the suprarenal capsules. Ingestion of these as fresh food had been previously tried without success.—L'Art Médical. J. B. H. S.

A Novel Method of Reduction of Hernia.—The powdered root of Veratrum viride is said (C. Flexon, Mercks Report, Penn. Med. Jour.) to be used by the Dree Indians of British America as an aid in the reduction of hernia. The patient is made to lie on his back, naked; a pinch of the powder is drawn into his nostrils. Violent sneezing is the result. This, together with pressure over the tumour by another person, often produces a speedy reduction of the hernia.—Medical Times.

ORIGINAL COMMUNICATIONS.

REMINISCENCES.

By Dr. A. C. CLIFTON.

II. HOMEOPATHY IN NORTHAMPTON.

ITS INTRODUCTION, "SMALL BEGINNINGS, LARGE RESULTS."

In 1847 Dr. John Epps, an eminent physician and practitioner of homeopathy residing in London, was induced to come to Northampton to contest the borough against one of the Whig members who then represented it in the Commons House of Parliament, Westminster. Dr. Epps was unsuccessful in his wooing of the constituency, but while that was the case he did more good and lasting service by sowing the seeds of homeopathy among the friends with whom he stayed during his campaign, which seeds, moreover, germinated and took root in the minds of several persons, determining them, whenever they might require a medical man in any serious illness, they would, if it were practicable, have homeopathic treatment.

About two years afterwards, and when I had been in business as a chemist and druggist in the town only a short time, at the request of a customer I procured a few medicines from Mr. James Epps, homeopathic chemist in London (a brother of Dr. John Epps) and with those medicines I also received some tracts on homeopathy. Up to that time I had been quite ignorant of the new system of medicine, but the arguments adduced in its favour in the said tracts led me to inquire further into its merits, and put the matter to a practical test in the treatment of slight cases of disease which came under my observation.

Here it is needful to observe, by way of explanation, that at that period of time pharmaceutical chemists not only prescribed over the counter but visited patients to a much greater degree than now, and without hindrance from the medical profession; hence, when shortly afterwards I was requested by an old friend to visit his daughter who was ill I did so, but when I found she was suffering from acute disease of one hip joint and her case too serious for me to undertake, Dr. Epps was sent for; he, however, was unable to visit her, and sent Mr. Chas.

T. Pearce, a medical student at University College and Hospital, London. Mr. Pearce, after seeing the patient, confirmed my diagnosis, and gave me special instruction for homeopathic and general treatment of her case. After an interval of a fortnight he saw her again, found her better, and prescribed according to her need. Several other persons then consulted Mr. Pearce, and as they in a few weeks were benefited by his treatment, they brought others to him.

After about eight weeks, the first patient being restored to health, there was no need for Mr. Pearce to visit the town on her account, but as her case had become talked about, and many persons desired to have his advice and treatment, I arranged with him to continue his periodical visits for a specified sum on each occasion, which I guaranteed him at my own risk, whether patients were few or many, trusting to recoup myself by the fees from the patients and their prescriptions as best I could.

This arrangement lasted about a year, at the end of which time, from having lost the patronage of allopathic physicians in the dispensing of their prescriptions by reason of my connection with homeopathy, and from other causes of a like nature, I found myself largely out of pocket by the transaction; nevertheless, from what I had seen of homeopathy and from what I had learned with respect to its principles, "I lost no heart of hope," but felt sure the cause would win in the long run, if it could only have a fair field with a resident homeopathic practitioner.

Very shortly afterwards, viz., early in 1851, Mr. Pearce having finished his studies and obtained the diploma of "The Royal College of Surgeons, Eng.," many persons desired him to settle in Northampton as a medical practitioner, and which I also strongly urged upon him, promising that I would then put homeopathy before the public and help to make it known in a way that he as a professional man could not, but which I as a tradesman

alone could.

Mr. Pearce determining on that course, I relinquished my old business and took a fine shop in the best position in the town, had it fitted up handsomely, and well stocked with homeopathic medicines and requisites for the sickroom, and in the front window a large bust of Hahnemann, which had not been seen by many persons, and which naturally led people to inquire who Hahnemann was and what he had done! For their information in that respect I supplied them gratuitously with literature in relation both to the man Dr. Samuel Hahnemann,

and the principles and practice of homeopathy.

That action, which I am sure as a whole gave a great impetus to the cause, nevertheless led some of my timorous but faithful friends to shake their heads, and suggest the possibility (at least) of my being "off my head," and that I might become a fit subject for a lunatic asylum, from having risked my all on such a doubtful and speculative matter. Facts, however, turned out very different to their fears, inasmuch as I not only held my ground for five years and kept clear of the Lunacy Commissioners, but also from my business had been able to make provision for a change of circumstances then forced upon me, owing to a difference which had arisen between Mr. Pearce and myself, and leading me to go to London to study medicine, in order to acquire a legal position as a homeopathic practitioner; hence my career as a homeopathic chemist then came to an end.

MATERIA MEDICA MISCELLANY.

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

Senecio Aureus in Puerperal Mania.—The following case is reported by Dr. S. H. Talcott. The patient was twenty-six years of age, married, and had two children. She had worried over the possibility of her child being stillborn, and nine days after its birth was admitted to the Middleton State Homeopathic Hospital in a state of acute mania. Intense mental excitement continued for three months, in no way relieved by the usual remedies. The temperature remained high; the patient was very active physically, and the mental condition was that of a wild, violent, almost uncontrollable person. It was at last ascertained that the lochia had suddenly subsided after childbirth, and that the menses had failed to reappear. On account of the amenorrhea, coupled with a continued mental excitement, severe pain in the head, great nervous irritability, sleeplessness, and hysterical erythism, Senecio Aureus 3x was given in drop doses every two hours. In less than three days she was

improved, and after a month's continued improvement she menstruated, and seemed to be well balanced in mind though weak in body. She had one relapse, which Senecio relieved, and after this she rapidly recovered normal health.—Am. Hom.

Verbena Hastata in Epilepsy.—Dr. J. N. White treated a boy of five for epilepsy developed during whooping-cough. For five months Sulphonal controlled the paroxysms, which occurred without it several times a day. Meanwhile bromides, purges, Oxide of Zinc, and other allopathic remedies were given with no permanent effect. Finally Dr. White stopped the Sulphonal and put him on Verbena Hastata, 12 minims every four hours, omitting the midnight dose. From first dose of Verbena Hastata the boy began to improve. He would have contractions of the muscles of the arms and legs and look wild for a minute or more for the first week, but after that he never had another symptom. He was kept on the medicine, as above, for six weeks, and now he takes twelve drops three times a day.

He has not had any symptom in over two months, and all that wild vacant look is gone; and he plays, eats, sleeps, &c., as if he had never been troubled with

epilepsy.—Ibid.

Nitric Acid in Cancer of Liver.—Dr. Mohr mentions the case of a man who had a great deal of trouble with vomiting and constipation, with occasional attacks of diarrhea and some hemorrhage from the bowels. He was treated for some months for gastralgia; he had been treated for some years for constipation, and occasionally for diarrhea, particularly when it was associated with hemorrhage and led to considerable depletion. An examination revealed cancer of the liver. He suffered tortures with the stomach and liver; he could not sleep, he could not take nourishment without causing a great deal of pain; and it was mostly followed by vomiting, so that he became very much emaciated and anemic. Nitric Acid in the third decimal dilution stopped his pain in the liver and stomach, it stopped his vomiting, it stopped his constipation, he had movements from the bowels every few days, quite well formed, and ultimately died of cancer cachexia, without suffering one hour's pain after he got that Nitric Acid."—Ibid.

Epiphegus in Headache.—Dr. A. Von der Suhe reports two cures of headaches with this remedy. The first case occurred eight years ago in the person of a young lady who suffered from occipital headache which was induced by excitement such as shopping or going out in the The pain extended from the occiput over the vertex towards the forehead, but was most severe in the occipital region. It obliged her to go to bed and made her very nervous, and she had only a little restless sleep. Epiphegus 30 relieved after a few doses and cured in a few days. The cure was complete, for she never suffered in the same way again. The second case was a school teacher who for several months had frontal headache, the pain extending into the eyes. It occurred every schoolday during lesson hours, and after school would gradually pass away. He gave Epiphegus 30 four times a day for a week. She had had no more headaches till time of report, i.e., two months.

The keynote of the remedy is headache induced by

mental strain.—Am. Hom.

Mother-of-Pearl and Periostitis.—"Six cases of a very rare disease—the so-called periostitis of mother-of-pearl workers—have lately come to Berlin for treatment. The symptoms are very painful swelling of the bones of the extremities, accompanied by fever, continuing for weeks and even months, but rarely leading to suppuration. The cause is thought to be the constant breathing of mother-of-pearl dust (consisting of about 95 per cent. carbonate of lime and 5 per cent. concholine, an organic substance) mixed with the water that is used in polishing, turning,

&c."—Monthly Hom. Review, April (J. B. H. S.).

Thuja in Suppressed Gonorrhea.—Dr. C. E. Fisher narrates the following: "A medical friend had gonorrhea in early life. It ran the usual course, subsiding under constitutional treatment in due season, and for many years there seemed not to be any effects traceable to it. Finally, locomotor ataxia symptoms began to show themselves. I suspected that the old gonorrhea might, perhaps, be responsible. Acting upon this hypothesis, I prescribed a few doses of Thuja, and after two weeks of treatment there began to be evidences of urethral moisture, and within a week more he was showing a plentiful discharge of thick, creamy pus. With the appearance of this his nervous symptoms began to

improve, and in the course of a few weeks he was apparently well, neurologically speaking, but was draining like a sugar-tree. Any sudden suppression of the urethral discharge would be followed by increase of nervous symptoms, while, on the contrary, he felt well physically and nervously so long as the flow continued. For more than six months this lasted, the patient improving steadily, until finally, under Thuja, Sulphur, and Psorinum, administered almost if not altogether empirically, though always in the higher attenuations, the discharge gradually subsided, the patient remaining well."—Am. Hom.

ASSOCIATED SYMPTOMS.*

By C. J. WILKINSON, M.R.C.S. Eng. L.S.A.

In our daily pursuit of the simillimum we have to listen to the patient's statement of his symptoms, and to examine his body for some objective signs which may reveal the cause and the pathological explanation of them. He has been but a poor observer of diseased nature who has not noticed that there are certain symptoms of which a patient complains suâ sponte as an essential and integral part of his case, while there are other symptoms the connection of which with his sufferings is so little obvious, that he is apt to leave them unmentioned, as outside the sphere of his present complaint; and yet the association of these outlying and apparently accidental symptoms with those which are clearly of the very essence of his disease is, more often than not, a valuable indication or guide to the selection of the curative drug. Though these associated symptoms are of course present in the provings of drugs, and are frequently mentioned as valuable guides in the choice of the true simillimum, I have been astonished that I have not found any systematic treatise uponthe frequency and the meaning of their association. And vet it is clear, I think, that an explanation or rationale of the law of similars must be sought in some such direction as this.

For a successful *cure* by means of following this law, it is not necessary that the disease shall exhibit every symp-

^{*} Read before the British Homeopathic Congress in London, June, 1898.

tom produced by provings of the drug used, but it is necessary that every symptom of the case to be cured should be found in the artificial disease induced in provers by the drug selected for cure. It is, indeed, a truism to us that the expectation of cure is in direct proportion to the accuracy of the simillimum. On the other hand, I think that most careful prescribers will have noticed that single symptoms may sometimes be relieved, the rest of the symptoms remaining untouched, by drugs which contain these single symptoms, but not the totality of symptoms of the case, in their provings; that is to say, the success achieved by the drug is still in proportion to its degree of similarity. It follows, then, that the covering of these outlying, but associated, symptoms of disease by like symptoms in the drug or simillimum, is an essential part of a perfect prescription, and this makes the nature of their association in both spheres (disease results and drug pathogenetic effects) an important item in the questions that must be met before the true inwardness of the law of similars can be exposed and comprehended.

But, in the modesty of conscious ignorance, I do not propose to face such a tremendous issue as this. I prefer, rather, to mention a few instances of such associations of symptoms as occur frequently in the daily round, and are found also in the pathogenesy of drugs that are needed in the prescriptions of every day; associations of symptoms, however, the pathological basis of which involves some speculation and may give rise to discussion. It may be that a statement of difficulties, and of possibly mistaken explanations, may result in some light being thrown upon

the question in its entirety.

There is a form of cough for which we are frequently called upon to prescribe, and which has the following characteristics: There is irritation and soreness in the pharynx, and some soreness in the trachea; there is aphonia, the voice showing a tendency to "cypher" or to change its note in the middle of a word or sentence; there is tickling extending from the larynx to the Eustachian orifice; the cough is short and dry, that is to say, there is little or no phlegm expelled from the mouth, though some may be raised as far as the pharynx, when it slips back again; it is greatly aggravated by change from a warm into a colder air. It is a cough of small pretension, but the patient complains that he is shaken by it much more

than the sound of it would lead one to infer. It shakes him greatly, so that he suffers from involuntary micturition from the impact of the cough upon the contents of the abdomen. This involuntary spurting of urine with a cough at once suggests the prescription of Causticum, though it is a symptom which occurs also in the provings of Scilla and of Natrum Muriaticum. It is a symptom of which the causa causans, the ultimate cause, is by no means clear. Let us for a moment consider the mechanism of coughing. "In the act of coughing there is most often an inspiration followed by an expiration; but when the lungs have been filled by the preliminary inspiration, instead of the air being easily let out again through the glottis, the latter is momentarily closed by the approximation of the vocal cords; and then the abdominal muscles strongly acting, push up the viscera against the diaphragm, and thus make pressure on the air in the lungs until its tension is sufficient to burst open noisily the vocal cords which oppose its outward passage. In this way a considerable force is exercised, and mucus and any other matter that may need expulsion from the lungs or trachea is quickly and sharply expelled by the out-streaming current of air."

"Now it is evident that pressure exercised by the abdominal muscles in the act of coughing acts as forcibly on the abdominal viscera as on the lungs, inasmuch as the viscera form the medium by which the upward pressure on the diaphragm is made, and of necessity there is quite as great a tendency to the expulsion of their contents as of the air in the lungs. The instinctive, and if necessary voluntarily increased contraction of the sphincters, however, prevents any escape at the openings guarded by them, and the pressure is effective at one part only,

the rima glottidis.*

Now it is evident that the spurting of urine on coughing in such cases as we are now considering depends upon some failure of the sphincter vesice, whether it amounts to a partial paresis, or only to such an interference with its innervation as lengthens its reaction time, and prevents it from contracting early enough to prevent catastrophe. A glance at the provings of Causticum shows that they abound in paralytic symptoms; the face, the eyelid, the lips and tongue, and the muscles of the pharynx are all apt to suffer in this way, but the urinary muscles seem to be the subject of its especial selection; we get a picture of loss of power in the sphincter, followed by loss of power in the detrusor, running on to vesical catarrh.

But what is the meaning of this association between a

^{*} Kirke's Handbook of Physiology, p. 225.

common enough result of "catching cold" and an affection of the third to the fifth sacral segments? Is there anything in modern pathology which can be brought to explain it? And yet precisely this association has been provided against in the

provings of Causticum.

I pointed out elsewhere a few years ago that the visceral nerves controlling the calibre of vessels in the ovaries, the large intestines, bladder and uterus have their upper limit of origin in the spine, at the level of the fourth and fifth lumbar vertebræ, the highest point of origin also of the lumbo-sacral cord; and I regard this as the explanation of those reflex pains in the sciatic nerve which so frequently accompany or rapidly follow irritation in the viscera I have mentioned. A consideration of the pathogenetic symptoms of *Colocynth* will show how fully this anatomical point explains the otherwise rather mysterious association of ovarian pain or rectal catarrh with pain in the hip or ankle, and even atrophy of the muscles in the

thigh and leg.

There is a collection of symptoms with which we are often confronted which follows the ingestion of certain fishes (even when these are fresh), oatmeal (in some sensitive people), or the drinking of large quantities of cold water while the skin is sufficiently gorged with blood to leave the viscera comparatively ill supplied. The symptoms are commoner in America, where iced water is a frequent beverage, than here. The trouble begins with a general sense of oppression, most marked in the chest; there is cutting pain in the stomach accompanied by eructations of sour flatus, followed by waterbrash of a particularly sour nature. The temperature rises to a considerable height, and there is vomiting of the contents of the stomach followed by large quantities of sour, watery fluid. An urticarial rash appears very suddenly; so suddenly that it seems to be the result of the effort of vomiting; the eyelids swell with effusion, the lips thicken, the skin presents numerous spots, papular, raised from the surface of the skin but flat in themselves, often at first themselves white, but surrounded by large zones of pinkish hyperemia. Diarrhea frequently sets in, with griping pain in the hypogastrium; the stools are soft and papescent, and have a peculiarly musty smell. The rash fades and diminishes, but fills up again every few hours, bringing a return of tremendous irritation. Now, it has long been recognised that these symptoms indicate the absorption of some albumose or toxin from the gastric and intestinal walls, but it is only during the last few months that the modus operandi of the albumose has been established; it has been found to depress the action of fibringen, and so to lower blood-coagulability. Hence, the edema of the eyelids, the swelling of the skin, and the discharge of fluid from both mouth and bowel may be regarded as so many serous hemorrhages from blood which is

deficient in coagulability.

Now, this picture of symptoms, with its explanatory pathology, interests us at present mainly on account of the exquisite way in which both are covered by the provings of Pulsatilla. Not being myself a good subject for the action of Pulsatilla, I have not yet been able to prove, as I hope to do, that this drug in pathogenetic doses does actually lower the coagulability of the blood; but this is more than probable, since I have noticed often that those who are most prone to such urticarial attacks—that is to say those whose coagulability, if not always low, is subject to comparatively easy impairment—are of exactly the Pulsatilla temperament—" persons who, by the relative predominance of the adipose tissue in their composition, by the whiteness of their flesh, the roundness of their forms, the mildness of their disposition, and their fitful moods, exhibit all the marked features of the female sex."*

Farrington (Clinical Materia Medica, p. 323) gives venous obstruction as the keynote of Pulsatilla. "You must remember," he says, "that the drug acts upon the vascular system, especially upon the right heart, and upon the veins and capillaries. Thus we find that whatever weakens the venous portion of the circulation, whatever retards the return of blood to the heart, must of course provoke just the class of symptoms for which Pulsatilla may be indicated." Undoubtedly Pulsatilla has this action in its provers, but I do not believe that this action alone will satisfy the requirements of its pathogenesy. Granted the action upon coagulability, many of the Pulsatilla conditions become comprehensible, especially the anemia which Dr. Blake has already taught us to regard as an auto-

intoxication or result of albumose poisoning.

These examples will perhaps illustrate as well as others the association of symptoms occurring in both pathogenesy and disease; but the list will be indefinitely extended in the mind of every one. The tendency for symptoms curable by Nux Vomica to become worse between three and four o'clock in the morning is daily thrust under our notice, and the explanation of the symptoms, involving the digestive system, is a commonplace one amongst us. But what of the cough and the hemoptysis, with their same hour of aggravation? What is the pathological explanation of it? How shall we explain, again, the association of pleurodynia with herpes of the lip? and yet, more than once, I have seen the two associated in practice and found Ranunculus curative.

When a note is struck in an orchestra it will be found that

^{*} Teste, quoted in Hughes' Pharmacodynamics.

all strings and all brass instruments will vibrate to it which are tuned to notes in the common chord of the note struck. notes which are evoked in this manner are known as overtones, and I think that the association of symptoms is somewhat analogous to this law of sound. And I regard this analogy as not being entirely fanciful, for the following reason. in music receives an arbitrary title after the earlier letters of the alphabet, but we know that its individuality or essence depends actually upon the number of vibrations or sound-waves which it sends out in any given time. We can understand, too, that the string which is plucked to emit a given note, can be subdivided into a practically unlimited number of parts; furthermore, we can realise that the note does not stand alone for the result of the vibration of the whole string, but also for the vibration of all the aliquot parts of its entirety. We may state it also in this way—that the number of vibrations in a given time does not stand only for that number itself, but also for all the factors of which that number may be the product; thus, a note which has two hundred vibrations in the second does not represent only two hundred vibrations, but also twice one hundred, four times fifty, ten times twenty, and so forth, and it is the presence of these factors which stimulates other instruments at rest in the room to vibrate in sympathy with them, and overtones are the result.

Now, our nomenclature of disease is either purely arbitrary, as in the use of such terms as mumps, measles, the yaws, &c., or it is based upon the name of the organ or part of the organ which is most obviously affected, as in such names as myelitis, ovarian cyst, and so forth. Of the actual nature of disease, as opposed to its phenomena, we still know very little. Of the number of its vibrations (so to speak) we are very ignorant. Of the different factors of which that number may be composed (to continue the metaphor) we know absolutely nothing. But regarding disease in this light, we are helped to understand how each factor may set up its own reflexes, and how byproducts of disease of the nature of associated symptoms may result.

To consider disease thus curiously is to presuppose a pathology which transcends any which the microscope or the testtube has yet revealed to us—a matter at which imagination need not boggle, when we remember recent advances. And for us such a view has especial fascination.

The fact that associations of symptoms in disease apparently the most accidental, associations the most baffling of explanation, are found associated also in the same sequence, subject to the same conditions of periodicity, of amelioration and aggravation, in the proving of the curative drug, leaves us no longer with similia similibus curentur as a maxim of occasional utility, but raises the statement similia similibus curantur as the formula of one of the great laws of nature.

HINDRANCES TO PROGRESS.

By a Practitioner.

A SHORT time ago a gentleman came to see me suffering from very painful piles, with which he had been confined to bed for two months in the slender—as he considered it—hope of being able to avert an operation. He had had to travel by railway in order to see me, and was obliged to stand erect the entire time, so painful was it for him to assume a sitting posture. I prescribed, promising that in a week, in all probability, he would experience great relief. In a week he returned, looking a different man, and completely divested of all thought of an operation. Some three weeks afterwards I met the friend by whom my patient was recommended, and naturally inquired why the latter had not been to see me. "Well," said he, "the fact is he cannot afford the fee." "Afford the fee!" said I. "Why, he was to have paid thirty guineas for the operation." "Yes, that is so; but it was his brother who was to have found the money, and when the latter heard he was being cured by medicine, the fraternal man of money declared he would pay for an operation all right, but he wasn't going to pay for hemorrhoidal sufferings being treated by d—d medicines."

The incident is narrated simply to show what is one at

least of the hindrances to the progress of medicine.

SNAKE-VENOM—ITS ACTION AND EFFECT.

Being a reply to arguments advanced by those favouring the Bloodpoison Theory.

By Frederick Kopp, Greenwich, N.S.W.

VI.—CHLOROFORM AND STRYCHNINE.

During a conversation I had recently with an ardent advocate of the *Strychnine* treatment in snake-bite, he stated that he had at one time read in a work of fiction, written by a distinguished English novelist (Charles Reade, if I remember rightly), how *Chloroform* had been made use of in the case of

a man poisoned by Struchnine, the inhalation of Chloroform successfully controlling the terrible and violent tetanic spasms of the latter poison. Each time before the advent of a spasm Chloroform was administered to the patient by inhalation, with the result that the spasm was completely controlled and passed The spasms became less and less frequent, and at last ceased altogether, the patient making a good recovery. My friend concluded that, as Chloroform very much resembled snake-venom in its action, and was so effectual in antidoting the spasms of Strychnine, the latter poison must therefore be a certain and unfailing antidote against snake-venom. admit that Chloroform undoubtedly has some of the most prominent symptoms peculiar to poisoning by snake-venom, the following being examples: Death-like pallor and livid colour of the skin (anemic), especially of the face, the tongue, and the nails; protrusion of the tongue; dilatation of the pupils of the eyes. The pulse becomes slower and very irregular, the respiration shorter, deeper, then almost imperceptible, and finally ceases altogether. The head falls to one side, and the pulse sinks down to 30 and 40. There are sometimes convulsions, and finally collapse, death resulting from paralysis of the respiratory and cardiac nervous system causing suffocation. After death there is found an accumulation of froth and mucus in throat and lungs, the brain is congested, and the mucous membrane of the stomach inflamed. The brain is also often found in an anemic condition, and the heart is generally empty of blood, and at other times it, as well as the veins, contains dark blood, the blood generally being thinner than usual. According to Dr. Martin there is no alteration in the corpuscles of the blood, and the drug appears to affect largely the nervous system. Some of the symptoms mentioned above coincide with those found in poisoning by snake-venom, but there are other symptoms absent, which are very prominent in the latter poison, while, on the other hand, there are symptoms present which are not to be found in snake-venom. It is, moreover, an undeniable and well-known fact that in poisoning by Chloroform one of the most effectual antidotes is Ammonia. It is recommended that 10 m. Liquor Ammonia, diluted with 40 m. of water, are to be injected in the vein of an arm in case of poisoning by the former drug.

I remember once curing a rather desperate case of *Chloro-form*-poisoning with the above drug (*Ammonia*). The patient, a lady, twenty-one years of age, had come across a bottle containing *Chloroform*, and, out of curiosity, inhaled the same. I found her in an unconscious condition, frothing at the mouth, the respiration being very deep and short, and the pulse very slow and irregular. The eyes were closed. I immediately loosened

all tight clothing, and very cautiously held Liquor Ammonia to the nostrils. It was some time, however, before the desired effect took place, the patient gradually gaining consciousness, and the other symptoms disappearing. The patient for days afterwards felt extremely weak, and complained of pains in the head. After the patient had recovered consciousness I had her removed out into the open, so as to enable her to fill her lungs with plenty of fresh air. I afterwards administered 5 m. doses of the Ammoniated Tincture of Valeriana every hour for three or four hours, and then every few hours, the object being to counteract the evil after-effects of the Chloroform, and the drug answered admirably, and fully satisfied my highest

expectations as to its beneficial effect for the same.

According to the above it appears to me to be rather unfortunate for the advocates of the Strychnine treatment, and for those who believe that Chloroform is almost identical with snake-venom in its action and effect, that Ammonia has the potent power to antidote the toxic symptoms of Chloroform. Such, however, has been proved to be the case, and therefore it remains that all those who argue that snake-venom and Chloroform are almost identical in their toxic effects as opposed to those of Strychnine, really and truly, are unconsciously at the same time declaring in favour of Ammonia as an antidote in snake-bite! According to their argument, snake-venom is an antidote to Strychnine, and therefore Strychnine must be an antidote to snake-venom, the action of snake-venom being identical also with that of Chloroform. It has, however, been shown above that Ammonia is one of the most effectual antidotes in Chloroform-poisoning. It also remains a fact that the Ammonia treatment in snake-bite can boast of a rate of mortality of 4.1 per cent., as against 13.2 under the Strychnine treatment. Facts are, indeed, stubborn things.

STRYCHNINE AND SNAKE-VENOM—A COMPARISON.

By comparing the symptoms of these two powerful poisons, Strychnine and snake-venom, as given in the preceding table, some marked differences between their several actions will at once be noticed. Whereas, in poisoning by Strychnine the patient is painfully conscious of all the terrible symptoms developed through the action of the poison, the person who has been bitten by one of our Australian colubrines, towards the latter end becomes completely unconscious of all his surroundings, and gradually sinks into that deep sleep from which there is no awakening in this world. The complete subjugation of the psycho-motor centres takes place very early in poisoning by snake-venom, and finally culminates in paralysis and a complete state of coma. There is a functional

depression of the motor-cortical centres of the hemispheres. which may range from a mere sleepy feeling to an entire loss of consciousness, and an absence of all reflex action, accompanied with complete paralysis. It has been noted that, with the advent of the above, general paresis of all organs governed by the vaso-motor centre, and also the voluntary muscles, is gradually intensified, until it emerges into a complete state of paralysis, the reduced force of the motor nerve-currents in the ideo-motor sphere, in the nerve fibres connecting the nerve cells one with the other, producing either mere sleep, or else a state of complete torpor and coma, in accordance with the amount of the venom injected and carried into the system. This is, no doubt, the result of the action of the venom on the motor-nerve cells, which it paralyses, and consequently causes a suspension of the motor-nerve currents. It will also be seen by the symptoms shown above, that in Strychnine poisoning, death results either from suffocation through paralysis of the muscles of the chest, or else from exhaustion from the repeated convulsions. On the other hand, in poisoning by snake-venom, death is caused by paralysis of the heart and anemia of the nerve centres. Strychnine over-stimulates the nervous system, whereas snake-venom paralyses it.

THE UNDERWOOD ANTIDOTE.

It will be remembered that, in the case of the third dog bitten during the experiments made by Professor Davies, the wound inflicted by the tiger-snake was excised immediately afterwards, and Underwood's Antidote rubbed in on the raw surface, a drachm of the antidote being at the same time given through the mouth. In other words, the antidote was administered both externally and internally. But what was the result? Ten minutes after the bite had been inflicted the symptoms of poisoning by snake-venom set in, and the dog lived a little over an hour after being bitten, though for the last ten minutes the beating of the heart was the only sign of life. The only result of the antidote was that it prolonged the animal's agony for an hour or so more than that of the dog who received no treatment whatever. The snake-venom, as in the case of the four other dogs, won the day. I may here state that as the Underwood Antidote was mentioned in the experiments as having been made use of, it devolved upon me, in the interest of medical science, to make some inquiries as to its composition, more especially so as it has been hinted by some to be purely an ammoniacal preparation. I wrote to the directors of the Sydney Museum, as being the most likely place from which I could obtain the information required, but to my

surprise received a reply that they had never heard of the Underwood Antidote! I wrote to a Sydney weekly journal, and received the reply that I had better write to Underwood himself, as he was the most likely person to supply me with the information. Now, as Underwood has been dead for a number of years, and the postal authorities have not yet made arrangements as to the delivery of letters to the spirit-world, I found myself unable to take advantage of this well-meant piece of advice. I inquired of several medical men, who would have been only too pleased to help me over the difficulty, but were unable to do so, as they either had never heard of the antidote in question, or else, having looked upon it as an unscientific fraud, had not taken the trouble to bother themselves as to its composition, and, as their time was fully taken up in their daily routine of work, they were unable to assist me in making inquiries into the matter. I also wrote to the Melbourne University, from whence I received a reply that my letter had been handed round to several professors, but none could answer my question. As a last resource I wrote to Mr. James Bray, a gentleman who has made the subject of snakes and snake-bite a life-long study, and knows more about the venomous and non-venomous reptiles of Australia than any other authority living. Through his kindness I was able to glean that, although he was aware of the composition of the antidote, he was not in a position at the time to give me the full extent of the information asked for, but stated that it was of vegetable origin, and not an ammoniacal preparation. In other words, its composition was a secret known to only a few. With this information I had, therefore, to be contented and satisfied. However, I have done my best in the matter, and have spoken of the antidote as I have found it, without prejudice.

THE HISTORY OF THE UNDERWOOD ANTIDOTE.

The following extract from a newspaper, published some years ago, would have led one to believe that the antidote in question was certainly an infallible one, and that the dog to whom it was administered could do nothing less than recover. In fact, he could not possibly help doing anything else. The extract reads as follows:—

[&]quot;It is greatly to be regretted that the secret of the antidote discovered by a convict in the early days for snake-bite, was never revealed, as it would have been the means of saving many valuable lives. It appears that this convict, whose name has slipped my memory, while going about his daily work in Tasmania, discovered an antidote for snake-bite, so efficacious in its results that he would allow the most venomous snakes to bite him all over the body, and, applying the remedy, suffer no incon-

venience. The people in the township were naturally anxious to discover what the antidote was made of, but its discoverer refused to reveal the secret, unless a free pardon and a certain sum of money were granted him by the Government. This, unfortunately, was refused, and the convict accordingly kept his secret, though asserting that the antidote was 'something they trod upon every day.' It is said that the antidote was discovered by him in the following remarkable way: he came one day on a snake fighting with an iguana. The iguana, when bitten, went and ate the leaves of a certain plant, and then renewed the combat, and it was the leaves of this plant which the convict found possessed such valuable antidotal properties. The discoverer was one night induced to go to an old hotel, a great drinking resort in those days; and when his companions had made him completely drunk, they took the bottle containing the antidote, which he had with him, and then persuaded him to let himself be bitten by a very venomous snake, as he had often done before. When however, he wished to apply the antidote, they refused to give it to him, unless he revealed the secret; but this he refused to do, and, consequently, died from the effects of the poison. Unfortunately for suffering humanity, the secret of the precious antidote, which exceeded in value a thousand free pardons or a mint of money, died and was buried with him."

According to Mr. Bray, Underwood is said to have based his antidote on the one discovered by the convict mentioned above, and to have asked the Victorian Government for a considerable sum of money, in consideration of which he would reveal the secret. The Government, thereupon, made experiments with the antidote in 1860 or 1862, the result of which showed it to be a failure. The application for money was therefore refused. According to the "Proceedings of the Royal Society" at Hobart, about forty years ago, it has been shown that, in the case of human beings, as many have died as recovered of those who have made use of the antidote in cases of snake-bite. This would make the death-rate of the Underwood Antidote 50 per cent., or in other words nearly twice as high as that under Chloride of Lime, nearly four times as high as the Immunity Serum and Strychnine antidotes, and over twelve times as high as that under Ammonia, &c. It will thus be seen that the Underwood Antidote is anything but a success in the treatment of snake-bite. It will also become evident to my readers that the dog mentioned in Professor Davies's experiments as having been treated with this antidote, did the proper thing after all when it stretched itself out and died.

THE TRUE PHYSIOLOGICAL ACTION AND EFFECT OF SNAKE-VENOM.

Having now completed my criticism of the various antidotes made use of in the experiments conducted by Professor Davies, I shall now proceed to deal with the question of the true physiological action and effect of snake-venom when introduced into the circulatory system of human beings, and shall show to those members of the medical profession and others, who

appear to be so very confident that the venom is simply nothing else than a blood-poison, that their arguments, backed up and supported as they generally are with the usual stiff dose of abuse, are totally in opposition to scientific facts and investigation. In Australia there is every opportunity offered for scientists to fight out this vexed question as to the true physiological action of snake-venom, and Mr. James Bray speaks truly when he says: "It may not be a matter to congratulate ourselves upon, yet, nevertheless, no country in the world possesses to so great a degree such a wealth of ophidian life as New South Wales, and so easily under certain conditions to be secured, whereby experiments could be tried, without the disadvantages that the scientists in far-away countries have to contend with in the securing of venom from reptiles. Unfortunately in this colony, however, we have, so far as our State scientists are concerned, paid too much attention to scientific research that has simply resulted in nil, while the more practical part of the question seems to have been entirely lost sight of." It is to be sincerely hoped that my opponents, the blood-poison theorists, will take a more practical and common-sense view of the question. It should be borne in mind by them that abusing the other side is no proof of the correctness of their views, but, on the other hand, is rather a sign of the weakness of the position taken up by them. It is a notable fact that, for the last seven or eight years, with even their strongest arguments they have been unable to upset any of my statements, or disprove the correctness of any of my arguments in favour of snake-venom being a nerve-poison, acting on motor nerve-centres. They have been unable to silence me with either abuse or sarcasm, and I still hold firmly the position I took up ten years ago in favour of the nervepoison theory, which, I contend, is alone supported by undeniably and well proven solid facts. I shall now proceed to expose the fallacy of the blood-poison theory, and would invite the special attention of my readers thereto.

(To be continued.)

IRIS VERSICOLOR 12 XX IN DIARRHEA.—Miss H. B., age 19 years, single. Daughter of former patient. Employed in business. Duration about two years. Pathogenetic symptoms: low spirited and feverish. Throbbing and shooting pain in right side of forehead, accompanied by nausea and vomiting, anorexia. Clinical symptoms: headache changing sides in different attacks. General feeling of exhaustion. Limbs aching as of tiredness. Remarks: The case seems to be a hereditary one.—Dr. Emanuel M. Baruch, North American Journal of Homeopathy.

EXTRACTS.

BLACK-WATER FEVER AND QUININE.

Dr. Hayward has followed up his pamphlets on African malarial fevers by the following valuable letter, addressed to African merchants, captains, and missionaries, which we reprint from the *Liverpool Mercury* of August 16th last.

To the Editors of the "Liverpool Mercury."

GENTLEMEN,—As the nature and treatment of African fever are of such vital interest and importance to the merchants and seamen of our port, I beg you will allow me to call their attention to some very remarkable statements on the subject by Professor Koch, who has lately returned from Africa, whither he had been sent by the German Government to investigate the nature of, and devise some improved treatment for, the fever which is so deadly to the commercial employes and the missionaries sent out to Africa.

On his return Dr. Koch read, before the German Colonial Association, a paper on the results of his investigations. A translation of this paper was given in the Scotsman for July 30th; and the London Standard of the same date, in commenting on the paper, says Dr. Koch's views have made a great sensation amongst the medical men in London, and speaks of them as of great interest and importance to British physicians; of course they are; but I think they are of even greater importance to African merchants, seamen, and missionaries; at any rate, the waste of human life and of quinine is of more importance and cost to them than to physicians.

In order not to trespass too much on your valuable space, I will draw attention to only a very few of Dr. Koch's statements, and will give them only in brief, recommending a careful perusal of the whole paper. After an exhaustive study of the nature of the disease and the usual treatment of it, Dr. Koch asserts that tropical fever—African fever—is a malarial disease, caused by and depending upon a parasite in the blood, the life-history of which he has carefully studied and made out. He admits that the black-water type is the

most dreaded of all the forms of tropical fever; but he says. "Black water fever is not peculiar to the tropics: it is not very rare in Italy; in Greece it is said to be pretty frequent." And he maintains that the so-called "blackwater" fever is not a malarial fever at all; but, he says, "it generally is nothing more nor less than quinine poisoning." "I have never," he continues, "come across a single case where quinine poisoning was out of the question." And he says further: "When a tropical doctor suspects that a patient has malaria he at once gives him quinine; and, to be quite sure, he gives it to him in the morning, at noon, and in the evening, generally in doses of 15 grains; next day he repeats the treatment, and so These wild quinine therapeutics, which are, it is true, excusable—they simply do not know what to do will, I confidently hope, now cease. . . . I am convinced that when this view has gained more ground, and when tropical doctors learn to use quinine more cautiously, and perhaps use other medicaments—Arsenic or Methylene Blue, for instance—in suitable cases, black-water fever will vanish altogether from the category of tropical diseases." He maintains that ordinary tropical fever is an easily cured disease; but that by the routine use of quinine it is converted into the fatal black-water type. What a severe indictment against the ordinary treatment! I quite agree with Dr. Koch; and I hope our merchants will accept this view of the question, and on this authoritative assurance will cease to supply their ships' medicine-chests with the ounces of quinine they are at present expected to furnish. And if African missionaries and sea captains could be brought to accept these views (and your advocacy will encourage them to do so), they may also be brought to give up the present reckless poisoning with quinine, and rely on non-poisonous but curative treatment in this, at present, deadly disease. Such treatment I had the honour to advocate before the Liverpool Chamber of Commerce, in 1896, in a paper read before the African section, at the request of Messrs. Elder, Dempster & Co. I am pleased to find that Dr. Koch entirely corroborates the views I then put forward. JOHN W. HAYWARD, M.D.

Birkenhead, Aug. 15, 1898.

INDICATIONS FOR RHUS.

By Dr. T. C. Duncan.

"For strain of vocal cords," Dr. Hills says, "after singing I have found *Rhus* a valuable remedy."

Dr. Hering says: "I give this remedy to public speakers

after great exertion in speaking."

Dr. Martin says: "I have recommended Rhus for garrulous old women who sometimes have sore throat, with stiff feeling, when waking from sleep, which goes away after talking awhile."

Influenza—air passages seemed to be stopped up; dry, hard tickling cough, worse in evening until 12 p.m.;

stiffness in back and limbs.

Cough dry, teasing, caused by tickling in bronchi, uncovering even a hand; cough with tearing pain in the chest, stitches, profuse sweat and pain in stomach; worse evening and before 12 p.m., or morning soon after waking, from talking or sitting still.

Sputa: Acrid pus, grayish-green cold mucus of putrid

smell, pale, clotted or brown blood.

Perspiration: Oppression, as if the breath was stopped at the pit of the stomach, worse after a meal, anxious, as if not able to draw a long breath.

Stitches in chest, worse when at rest and while sneezing

and breathing; also when sitting crooked.

Tingling in chest with tension in intercostal muscles, worse at rest.

Pneumonia with typhoid symptoms often from reabsorption of pus, also with tearing cough and restlessness, *quiet makes* pain and dyspnea *worse*.

Hemoptysis from over exertion, blowing wind instruments; bright blood, pain in lower part of chest, renewed

from least mental excitement.

In epidemic bronchitis, cough brought on by putting the hand out of bed. It is excited by a tickling under the middle of the sternum and aggravated by laughing or loud talking, by motion, every current of cold air and at night burning heat, dry tongue, restlessness, great debility, pain in the bones, worse during rest.

Dr. Miller relates a case of dry cough during the day, wrenching the stomach; excited by talking or singing, shoulders and cervical muscles stiff and lame on first

moving, better during exercise. Rhus 200 cured this case.

A violent pain in the back as if broken, is the great characteristic of Rhus in backache according to Professor Dewey. It is more characteristic than the symptom "relief from motion," for Rhus may be indicated when the patient is worse from motion.

Rhus seems to be especially suitable to affections of the deeper muscles of the back. There are great pains on attempting to rise, showing, thus, the aggravation on

commencing motion.

It is more suitable to the chronic forms of lumbago

(Aconite suits the acute form).

Rhus backache is better from pressure, likes to lie on something hard, but is worse in bed at night.

Rhus pains are relieved by bending backwards.

Hypertrophy (uncomplicated) from violent exercise. Organic disease of heart with sticking pains and sore-

organic disease of heart with sticking pains and soreness, numbness of left arm.

Chest and heart feel weak after a walk, trembling sensation of the heart.

Palpitation violent when sitting still.

Pulse accelerated, weak, faint and soft, trembling or imperceptible, sometimes seems quicker than the heart beats, irregular, affected by beer, coffee, or alcohol.

The effects of Rhus upon the heart are briefly given by

provers.

"Some violent pulsating stitches above the pericardial region, so that he was obliged to cry aloud while sitting

in the evening (after ½ hour)."

"A disagreeable sensation of weakness of the heart, trembling of the heart." This I take to be a primary symptom, and should not be italicised, as it is not curative, but palpitation so violent while sitting still that the body moved with every pulse." That is secondary and curative.

"Pulse slow at times, irregular (after \(\frac{3}{4}\) hour).

"Pulse 1.20 at 2 p.m. (after 18 hours) and fifth day 110.

"Pulse 130 (after two days)." Pulse still high (sixth day)."

Feels pulse in back part of head (cerebral hyperemia). (1) "Pulse at first full and strong, but slow, (2) afterwards small, frequent, and compressible." It is proper to

emphasise "pulse rapid" because we see that it is

secondary and a therapeutic guide.

Angina. Tremor about the heart. Stitching pain in the left side of the chest, which threatens to arrest the breathing, especially during violent exercise, both when standing or walking; coming and going the part being painful to the touch. Paralytic pain in the left arm, which is quite numb occasionally, especially when in a state of rest; tingling in the arm when moving and rubbing it. The left arm is colder than the right. Painful tension in the muscles of the left side of the chest and the left arm, worse in rest; chilliness, little appetite.

Rhus 8,000, one dose, cured the case. Ann. II. p. 307.

Reucherts Therapeutics.

Carditis. Rhus may be employed in the various affections of the heart when complicated with measles, scarlatina, or rheumatism. Palpitation worse during rest, stitching in the region of the heart, with painful lameness and numbness of the left arm, aching in the left arm worse at night.

Palpitation. In nervous palpitation of the heart the poison oak acts well when the patient is better from continued motion, or when the affection is occasioned by

getting wet.—Medical Visitor.

NATR. SULPH. IN ASTHMA FROM EXERTION.

By WM. E. LEONARD, M.D.

Mr. C. has for years had an attack of asthmatic breathing, so marked as to herald his approach at some distance, and coming on after any unusual exertion. He is a tall, strong man, with no family history of lung trouble, albeit rather narrow-chested. Examination of the lungs during a period of remission disclosed no lesion or abnormal sounds, except coarse rales along the larger bronchi. In April, 1896, an especially severe attack, brought on by severe physical exertion, "the worst spell" he has ever had, was promptly relieved by Natr. Sulph. 200x; and occasional doses since have caused the attacks to disappear almost entirely for the first time in many summers.—Homeopathic News.

THE BENEFICIAL EFFECTS OF ONE DISEASE AS REGARDS ANOTHER.*

By HARRY CAMPBELL, M.D., F.R.C.P., Physician to the North-West London Hospital.

(From the "British Medical Journal," April 30th.)

(Concluded from page 421.)

FINALLY, reference may be made to the influence of measles

in arresting whooping-cough.

- (c) Febrile disorders may exercise a beneficial effect upon mental disease, a fact which has engaged the attention of alienists for some years past. Among the fevers which have acted in this way are typhoid, erysipelas, cholera, and intermittent fever, and Wagner has recommended the injection in mental affections of the erysipelas virus as being the least dangerous of the four. As we should expect, the cases which are most benefited are the milder and more recent ones. The good effects have in several instances been permanent. Dr. James Taylor referred, in the discussion on the subject of this paper, to the beneficial effects which fever sometimes exerts on epilepsy, and Lannois 2 has recorded a case of this disease which was improved by erysipelas but made worse by typhoid fever.
- (d) The beneficial effect of erysipelas on other diseases must now briefly engage our attention. As Mansell Moullin 3 observes, "It has been known for many years that not only malignant growths, but chronic ulcers of the skin, lupus nodules, syphilitic sores, and other affections occasionally disappear with great rapidity after an attack of erysipelas. have already pointed out that the virus of this disorder may do good in epilepsy and mental affections, and it has been known to act similarly in other disorders. Féré 4 refers to its good effect in affections of the eye, including leprosy, trachoma, irido-choroiditis, and orbital tumours. Jonathan Hutchinson 5 has seen nasal polypus, Schwimmer 6 cicatricial keloid, and Terret 7 callus rapidly absorbed under its influence, while Solles 8 and Chelmouski 9 bring forward evidence to show that it is serviceable in tuberculosis. The curative effect of erysipelas on lupus appears to be a matter of common observation. Lastly, I would refer to its remarkable influence on acute vellow atrophy of the liver, a striking instance of which
- * Read before the Brixton Medical Society, January 19th. The writer has supplemented his paper by information gained at the discussion which it called forth, and also at the discussion on the same subject held at the meeting of the North-West London Clinical Society on February 17th. He is under great obligation to Dr. J. R. T. Conner, who has generously placed a mass of valuable literary material at his disposal.

was cited by Dr. Joseph Dulberg, of Manchester, in answer to a letter of mine published in the *British Medical Journal*, as a occurring in the practice of Professor Leube, of Würzburg. It strongly suggests the advisability of trying Coley's fluid in cases of this kind.

(e) The poison of influenza appears to have potent curative effects. It has apparently cured a case of gonorrheal cystitis ¹¹; and Dr. Shirtliff, ¹² of Malvern, has recorded the similar cure of a lady, aged about 60, who for some time had been under his treatment for chronic catarrh of the upper respiratory tract. "On the very day influenza came on the catarrh suddenly and completely ceased," and had not returned when the patient was seen five weeks afterwards. Mr. W. M. Scott, ¹³ M.R.C.V.S., has seen an opacity in the cornea of a horse disappear under the influence of influenza; but perhaps the most remarkable instance of the curative influence of this disease is that related to the Brixton Medical Society by Dr. Knight:—

A lady, aged 45, suffering from malignant disease of the liver, contracted influenza, and was so ill that she made her will, and Dr. Knight thought she would die. But from that time onward the liver shrank, and the patient seemed to get quite well. The tumour, however, returned in eighteen months, and the patient eventually died.

(f) The influence of vaccination in curing disease requires some mention here. It has been thought to protect against influenza, ¹⁴ and has been used in the treatment of pulmonary tuberculosis. ¹⁵ There is no doubt that it acts beneficially in whooping-cough ¹⁶ and certain chronic affections of the skin, a fact pointed out by Sir James Grant ¹⁷ as early as 1863, as well as by other observers. Dr. Milson, of Hampstead, regards the presence of eczema as an argument for, rather than against, vaccination; and Dr. Mutch, of Brixton, has seen obstinate eczema clear up after it.

5. I now propose to record a few miscellaneous cases showing

the same beneficial action of disease.

Case of Chronic Rheumatism Disappearing upon the Supervention of Cancer.—A woman in early life had two attacks of rheumatic fever, which left her a martyr to "chronic rheumatism." When 58 she manifested unmistakable signs of malignant disease of the liver, and ever after all

signs of joint trouble completely disappeared.

Case of Paralysis Agitans removed by Hemiplegia (communicated by Mr. C. H. Fowler, Potter's Bar).—A farm labourer, aged 73, had, until two years ago, suffered from paralysis agitans for a period of twenty years. It was of a very severe type, affecting the head, arms, and lower extremities, and quite diagnosable a considerable distance away. Two years ago he had an attack of right hemiplegia (probably embolic), and it was immediately noticed that the tremor had quite ceased, not only on the affected

side, but bilaterally. From this attack he made a good recovery, and his tremor has not returned.

Case of Migraine removed by an Acute Auditory Affection.—The patient —Dr. T. Reuel Atkinson, of Sherborne—himself published the case in the Lancet, August 27, 1892, and the following facts have been kindly communicated to me by him. "In 1891 I lost the partial hearing in my right ear, and in April, 1892, this was followed by an almost total loss of hearing in my left ear. Before that I had for as long as I can remember suffered from attacks of periodic sick headache, and constipation more or less. Since losing my hearing I have had no constipation and no migraine." In a second letter Dr. Atkinson writes: "I am unable to tell you much about the nature of my deafness; the mischief is in the internal ear, and that is almost all I know about it. As to the cause I am quite in the dark. I can but surmise that it may have followed upon an unrecognised influenza. I am absolutely free from headache now. Formerly I never went a month without one, and rarely a fortnight, and when I had a headache it usually lasted all day till the evening. The headaches were usually accompanied with vomiting, but now I am never sick nor sorry."

Two Cases of Diabetes apparently Cured by the Occurrence of Cancer (communicated by Mr. W. A. Easte, Hanslope, Bucks).—A man was thrown out of a cart, and diabetes set in and lasted from four to five years, when the symptoms of diabetes abated, the sugar almost entirely disappearing from the urine. Shortly after this he died, the post-mortem examination revealing cancer of the stomach. The other case was that of a woman, about 45 years of age, whom Mr. Easte had been attending during some years for diabetes. The patient developed malignant disease of the rectum, and since the discovery of this all the symptoms of diabetes have been absent.

Here I must end a very inadequate paper on a very important subject. It has, however, one merit—that of being the first attempt (so far as I know) to deal with this subject in anything like a systematic and comprehensive manner. I earnestly hope my remarks will do something to stimulate inquiry in the direction indicated. The inducements are great. Already observation of the curative action of erysipelas has given a clue to treatment, with brilliant results; and who knows but that we may discover other clues which shall help us to still greater achievements? I am sanguine enough to

REFERENCES.

believe we shall.

¹ Julius Wagner, Brit. Med. Journ., June 4, 1887; J. Keay, Brit. Journ. of Ment. Science, April, 1896; American Med. Surg. Bulletin, May 30, 1896. ² Lannois, Lancet, December 15, 1894. ³ Mansell Moullin, Lancet, May 2, 1898. ⁴ Féré, Brit. Med. Journ., February 2, 1896. ⁵ J. Hutchinson's Archives, vol. iv., p. 79. ⁶ E. Schwimmer, Œsterr. med. ch. Pres., 1887, No. 27. ² Ferret, Le Progrès Méd., November, 1886. ⁸ M. Solles, Lancet, September 22, 1888. ⁹ A. Chelmouski, Deut. med. Woch. No. 14, 1891. ¹ J. Dulberg, Brit. Med. Journ., May 2, 1896. ¹ Goldberg, Centralb. f. inn. Med., June 29, 1895. ¹ E. D. Shirtliff, Brit. Med. Journ., April 11, 1896. ¹ W. M. Scott, Lancet, July 25, 1896. ¹ Goldschmidt, Berl. klin. Woch., November 19, 1890. ¹ Juriansky, Vratch, 1891, No. 41, p. 923. ¹ Bolognini, Med. Week., 1895, 41; Cavalieri, Gazz. d. Osp., June 1, 1894; E. Müller, Gaz. Méd. de Strasbourg, July 1, 1891. Th. Purcell, Brit. Med. Journ., August 29, 1891. ¹ Sir James Grant, Med. Times and Gaz., March 14, 1863.

IDENTITY OF AVIAN AND HUMAN TUBERCULOSIS.

In a communication on this subject, presented to the Congress of Tuberculosis recently held in Paris, Nocard said the bacilli of avian and human tuberculosis were distinguishable from each other by a number of characters the most important of which were the following: The different appearance of the cultures which in the case of human tuberculosis were dry and warty, and in the avian disease were fatty, shining, and soft; the temperature at which the micro-organisms ceased to grow, which in the human was 42° C., while the avian bacilli continued to develop at 43° C. and 44° C. Moreover, the action on animals was different; the fowl almost invariably showed itself refractory to inoculations of human tuberculosis, but succumbed rapidly after inoculation of the avian virus. On the other hand, the dog died of tuberculosis after intravenous and intraperitoneal inoculations of human cultures, whilst it was impossible to infect him even by means of enormous doses of avian cultures. The guineapig was relatively refractory to avian virus injected under the skin, but reacted to very small doses of human tuberculosis. The rabbit was equally susceptible of infection by either virus, but after infection with human cultures the animal died of generalised tubercle, whilst after avian infection it died of bacillary septicæmia. The horse was hard to inoculate experimentally, but the animal sometimes developed tuberculosis spontaneously, and the disease occurred in two forms, abdominal and pulmonary. These two types corresponded to two different sources of infection; Nocard has recently found that bacilli isolated from the pulmonary form have the properties of the human tuberculosis, while those from the abdominal form approximate to the properties of the avian virus. Man, like the horse, appears to be susceptible of both forms. Two years ago Nocard found in the sputa of a phthisical patient bacilli which by the characters of their cultures and the effect of inoculation very closely resembled avian bacilli. Man may therefore, he concludes, under certain conditions not yet determined, be infected by avian tuberculosis, and there is therefore some danger in the use of tuberculous birds as food. A strong argument in favour of the identity of human and avian tuberculosis is the fact that the disease may be introduced into an uncontaminated poultry yard by a keeper suffering from phthisis whose expectoration contains bacilli. Nocard says that the experimental failure of Straus and himself to infect fowls by making them swallow tuberculous sputum cannot be regarded as evidence to the contrary,

the condition of a laboratory and of a poultry yard being altogether different. He added that he had been able to furnish the final proof of the identity of human and avian tuberculosis by transforming a culture of human tubercle bacilli into avian. He filled sacs of collodion with a culture of human tuberculosis or glycerinated broth, and placed them in the peritoneum of fowls. After six to eight months the fowls were killed, when the sac was generally found to contain nothing but liquid. But it also contained more bacilli than it did originally; the culture was fully alive, and when sown again it was found that it had acquired all the morphological properties of avian tuberculosis. Inoculated in fowls it was harmless. After three or four passages in the same way through the peritoneum of fowls, cultures more completely transformed were obtained which killed guinea-pigs and rabbits in just the same manner as avian tubercle did, and which were pathogenic in fowls. Nocard concludes that avian and human tuberculosis are two varieties of the same species, and not different species.—Brit. Med. Jour.

QUININE HEMOGLOBINURIA.

Murri (Arch. Ital. de Biologie, Tome xxviii., fasc. iii., 1897) reports a case of this affection. A girl, aged seventeen, contracted tertian ague in July, 1888. In spite of treatment she was not cured in January, 1894, and was still taking quinine. At that time she had an attack of ictero-hemoglobinuric fever directly after taking quinine, and subsequently whenever quinine was taken such an attack was observed, consisting in rigors, vomiting, followed by smoky urine, and lastly, jaundice. The spleen became larger and firmer, and sometimes the liver enlarged also, with hypochondriac pain. the beginning of an attack there was simple polyuria, then from being acid the reaction became alkaline, and lastly, peptone, serum albumin, globuline, hemoglobulin, and urobilin, hyaline casts, epithelial renal cells, and leucocytes, but no red corpuscles or bile pigments appeared. After an attack the above all disappeared, the serum albumin and An examination of the blood showed there peptone last. was a diminution of the number of red corpuscles, but the malarial parasite could never be found. In spite of this effect of quinine it had its usual influence in prolonging the interval between the attacks of true malaria. The author gives reasons for believing that quinine hemoglo-binuria occur only in those whose organs have been altered by malaria, quinine alone being insufficient to produce it. (1) For twenty years he has been trying to produce quinine hemoglobinuria in animals without success. (2) In a healthy man 75 or even 300 gr. of quinine produce no hemoglobinuria, while in this girl, after malaria, 1.54 gr. did with absolute certainty. (3) No case of quinine hemoglobinuria has been reported which was not complicated by malaria. (4) The proof that one has not to do with an idiosyncrasy in a person with whom malaria is a coincident is furnished by the fact that quinine intoxication appears in most cases, sometimes after a good many doses have had to be taken —that is, after the malarial poison has had time to act on the organism, but not before. (5) It is not produced by an intolerance gradually set up by repeated doses of quinine, for large and repeated doses are often given in non-malarial diseases, and yet not a single case of quinine hemoglobinuria has been reported in these. (6) This hemoglobinuria is almost unknown in Europe, except in Sicily and Greece, and becomes relatively frequent in extra-European countries where malaria is more virulent. (7) The author's patient had three icterohemoglobinuric attacks after the malaria was cured, and without any quinine having been given. This shows that the hemoglobinuric mechanism had become so easily set in motion that its usually specific stimulus (quinine) could be replaced by others, though exactly what these were could not be discovered. It seemed as though the biological change left in the patient by malaria would not be permanent, for some months after the patient had been cured of her malaria and had had no quinine attacks, a little over 1½ gr. of quinine given experimentally had very little effect, and even $7\frac{3}{4}$ gr., though causing intoxication (fever, albuminuria, peptonuria, urobilinuria), produced no hemoglobinuria.—Brit. Med. Jour., Aug. 27th.

THE WONDERFUL POSSIBILITIES OF LIQUID AIR.

THE NEWEST THING IN SCIENCE.

In the June Cosmopolitan may be found a startling "Account of the Commercial liquefaction of air, from the pen of Mr. Charles E. Tripler, the man whose long and patient work has made the seemingly impossible, possible." Mr. Tripler's experiments seem more like magic than reality, but they demonstrate a most wonderful and practical scientific discovery, destined, in many ways, to supplant the use of electricity and steam.

As of special interest to our readers we excerpt the

concluding portion of Mr. Tripler's paper, with the added suggestion that the entire article as it appears in the Cosmopolitan, should be read by the medical profession:—

"The possibilities in medicine and surgery are numerous. By means of this process air absolutely free from germs could be furnished in any amount; and if the stimulating effect of an excess of oxygen were desired, it could be had without trouble, quite free from the impurities which now often make this gas objectionable. The temperature of hospital wards, even in the tropics, could readily be cooled to any degree prescribed by the physicians in charge; and by keeping the air about yellow fever patients down to the frost point, the nurses would be perfectly protected against contagion and the recovery of the patients themselves facilitated. Again, the cauterising cold which liquid air is capable of producing might be used in cases of cancer with great advantage, as compared with nitrate of silver, since, while it absolutely destroys the flesh to which it is applied, its action is perfectly under control and can be stopped in an instant. This is far from being true of lunar caustic. It is probable, also, that hay fever, asthma, and even consumption could be greatly relieved without change of climate by this pure, cool, germless air.

"Its possible use as a high explosive in war has already been adverted to. Further, military authorities are already making inquiries as to its application to the cooling of guns when in action, and there is no reason why it should not prove highly efficacious and of great value in this way.

"Still more important, however, will be its service as a motive force on warships, or, indeed, on any ship. It can be handled with perfect safety in an ordinary engine, in the same manner as steam, but without requiring oppressive heat, for, as we have seen, the ordinary heat of water is quite sufficient. Freed from the necessity of carrying an immense weight of coal, yet furnished with a motor capable of producing any amount of power needed, vessels would be able to make voyages of any length, at a speed equalling that of the swiftest torpedo-boats, running at a rate of from forty to forty-five miles per hour. And in submarine boats the motor itself would supply all the air required for breathing, abundant, cool and pure, instead of generating overpowering heat and stifling gases, as is the case at present.

"It is also worth while considering its application in connection with the difficult problem of aerial navigation, which would probably be solved, since all that is now wanted, practically, is a motor sufficiently light and strong and safe. With liquid air no fire would be needed—the heat of the surrounding atmosphere would be entirely adequate; and for this reason, and because there would be no moisture to affect them, the boilers could be made of paper. Aluminum, scarcely heavier than paper, yet nearly equal to copper in ductility, could be used for the coils and other necessary parts of the mechanism. The potential applications of liquid air are simply revolutionary; it is probable that even electricity is not destined to be of greater service to mankind. At present, in the best engines, 90 per cent. of the energy theoretically existing in the coal consumed is dissipated. This enormous loss liquid air will enable us to obviate."—Critique.

REVIEW.

SIGHT-SINGERS' AID. PARTS I. & II.*

WE are pleased to notice this work by the wife of our well-known colleague, Dr. J. Hamilton Mackechnie, of Bath. Any help to the learning and teaching of correct singing is of national importance, and our musical friends tell us that Mrs. Mackechnie's work is eminently qualified for achieving that end. It is impossible to sing well without breathing well; and unfortunately the art of breathing is only understood by a very small minority of cultivated mankind, having been lost in the process of civilisation. Singing is one of the likeliest means of restoring the art, and, in the interests of hygiene as well as of harmony, Mrs. Mackechnie's book has our heartiest good wishes for its success. The work is dedicated, by permission, to Sir Frederick Bridge.

^{*} Sight-Singers' Aid. Parts I. & II. By Mrs. A. L. Mackechnie. London: Robt. Cocks & Co. Price 8d. each net.

NOTIFICATION.

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

Dr. Molson's address in Brighton is 42, Sackville Street, Hove; it was erroneously given in our last issue as 41.

GENERAL CORRESPONDENCE.

A CLOSING WORD FROM DR. PROCTOR.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—In deference to your suggestion that the discussion between Dr. Dudgeon and myself has gone far enough to enable your readers to judge for themselves, and as Dr. Dudgeon declines to pursue the argument further, I have no alternative but to act on your suggestion, with some regret that Dr. Dudgeon did not further enrich your pages with the products of his reading and reflection.

I would ask permission to make one remark with regard to the unfortunate phrase, "the unconscious jugglery with words." My intention was to saddle words and not Dr. Dudgeon with the deception they sometimes practise on the unwary. After this second and more explicit disavowal of any intention to impute motives to Dr. Dudgeon I think he ought to accept it as fully as it is offered.

As regards the use of the term "active properties," which Dr. Dudgeon thinks I must have invented, I am of the opinion that he must have used the phrase himself thousands of times, and certainly if our medicines did not possess some "active properties" they would be of little use to our patients.

In conclusion, I would refer your readers to an interesting paper on "Vitalism," by Prof. Haldane, in this month's *Nineteenth Century*, the two sides of the controversy on that subject being fairly represented.

Sir Wm. Crookes, in his presidential address to the British Association, incidentally referred to some of the points that have cropped up in this little discussion, and your readers will see how necessary it is, in discussing an abstruse question like this of vitality, to use language that is clearly defined and, as far as possible, free from all ambiguity.

Yours, &c., P. Proctor.

HAHNEMANN CONVALESCENT HOME, BOURNEMOUTH—AN APPEAL.

To the Editor of The Homeopathic World.

SIR,—Great additions have been made to this Home during the present summer. The roof has been removed throughout, and a full storey has been added to the

building.

The committee will thus be enabled to grant a very large increase of cubic space to each patient, and will, if the funds are sufficient, increase the number of beds from twenty-seven to thirty-three. Better accommodation will now be provided for the nurses and domestic staff; so that we may expect the administration of the Home (which will remain in the hands of Miss Hill) to be carried on with even greater energy and thoroughness than before. The prominence which has of late years been given to the value of the Open-air Treatment of phthisis has led the committee and the medical staff to the conclusion that the erection of ample balconies on the south front of the Home is an urgent necessity; and they have consequently entered on a large and hitherto unprovided-for expenditure for this purpose. A two-tier balcony, corresponding to the ground and first-floor levels, is now in process of erection. It will face due south, and will be protected by glass screens from east and west winds; on the north it will of course be sheltered by the building A lift is also to be erected, which will be used in the service of the Home, and for the carriage of patients. The cost of this lift has been most generously defrayed by a friend who desires to remain anonymous.

An expenditure of £2,500 has been altogether incurred

on the structure itself, and of this sum only £1,200 are in hand, while no provision has as yet been made for the extra furnishing which will be required. It will, therefore, be readily seen that much and generous help is still needed. Contributions to the building fund will be gratefully received by the treasurer, the Rev. F. Young, Fremantle, Marlborough Road, Bournemouth, or may be forwarded to the National Provincial Bank of England, Bournemouth. But help may also most appropriately be extended to us by assisting the Bazaar that is to be held in the Mont Dore Hotel Assembly Rooms early in November next; any articles, useful or ornamental, suitable for the purpose, will be gladly received and acknowledged by Mrs. Nankivell, Penmellyn, Bournemouth, the convener of the Ladies' Committee, and by Mrs. Hardy, West Chevin. The Hahnemann Home is a charity for the three kingdoms; its doors are open to all suitable cases sent on subscribers' recommendations, and not 1 per cent. of those received in the institution belongs, in the first instance, to this district. We have no hesitation, therefore, in urgently claiming your help in this our need.

> Yours faithfully, HERBERT NANKIVELL,

September 15, 1898.

Chairman of Committee.

THE CASE OF MR. THEOBALD—AN OFFER.

To the Editor of The Homeopathic World.

SIR,—Referring to Mr. R. M. Theobald's letter in your last issue, I am prepared to give £10 10s. and to guarantee another £10 10s. towards his expenses provided there be found in homeopathy ten other qualified practitioners equally solicitous for the welfare of freedom of opinion.

My name must remain in your keeping, Mr. Editor,

and I think you can answer for my bona fides.

Most truly yours,

September 2, 1898.

M. D.

VARIETIES.

The Action of Kola on the Heart.—Kola suppresses the desire for food and prevents muscular fatigue; but, secondarily, it produced grave myalgias of the heart-muscle in the provers. Therefore, it may be employed in the myalgias of bicyclists, athletes, &c. This drug resembles arnica, and it deserves to be better proved.—Professor Dungan.—Hahm. Monthly.

Lemon-Juice as a Preventive of the Gonorrheal Ophthalmia of the Newborn.—Dr. Szawelski (Gazeta Lekarska) saw during his stay at Professor Pinard's clinic in Paris the application of lemonjuice in gonorrheal ophthalmia with remarkable results. Several drops of lemon-juice are put in the conjunctival sac. It is entirely harmless and is at hand in every household. He reports a striking case with good results.—Journ. Obstet., &c.

Amblyopia from Tea Drinking.—Dr. Kenneth Campbell. of Edinburgh, reports a case of amblyopia in a vigorous man of 46, in which, after other possible causes had been eliminated in vain, it was found that he drank copiously of strong tea. A suspension of this habit led to a speedy recovery.—L'Art Médical, April. J. B. H. S.

Xanthoxylum in Uterine Fibroid.—Dr. Majumdar reports a case of uterine fibroid in a woman of 56, in which, guided by neuralgic pains in the right ovary, and a history of dysmenorrhea during the catamenial life, he gave xanthoxylum 3x. After taking this for about six months the health had cleared up and the tumour had disappeared.—Indian Hom. Review, February—March. J. B. H. S.

TREATMENT OF WOUNDS BY STEAM. — Beyer (Deutsch Med. Wochenschr., Feb. 4, 1898), observing the satisfactory results which follow the use of steam as a disinfectant for surgical dressings, has applied it to granulating wounds, abscesses, &c., to facilitate cicatrisation, directing upon them at a distance of 50 cm. (20 inches) a jet of steam at a temperature of 53 degrees C. (127 degrees F.). The results were most favourable, and ulcerations which were resistant to treatment rapidly healed under the influence of the steam. — Medical Times.

ALLIUM CEPA AND ARSENICUM IN HAY FEVER.—A youth, age 18, had the following symptoms (how long not stated): photophobia, lacrimation, great injection of conjunctiva, coryza with constant watery discharge from nose, dyspnea, râles in air passages and violent cough. Allium cepa 30 cured him gradually, though he was unable to alter his mode of life.—Lutze, Arch. f. Hom., vii. 45.

Another case, where the disease had lasted for years; photophobia with scalding tears, dry coryza, cough and asthma. Arsen. 30 cured quickly and permanently.—*Ibid*.

Warts Cured by Calc. Carb. 30.—"A man came to me with warts on the back of his right hand. I counted eighty of the largest I had ever seen. The number of small ones it was impossible to count—the back of the hand and fingers was completely covered. I gave him calc. carb. 30. In a week all the large warts had turned black and shrunk, showing a red rim around each at the base; within a fortnight they had all fallen off, and his hand was perfectly free from any trace of warts."—Heale, Amer. Homeopathist, May 2. J. B. H. S. Curare in Diabetes Mellitus.—Dr. Barckhard, of Berlin, reports

excellent results from curare, 4th dil., in a number of cases of diabetes mellitus. The discovery of the power of this poison to induce glycosuria, made by Claude Bernard, is well known.—Journ. Belge

d'Homeopathie, March-April.

Alumina 30 in Psoriasis.—Pathogenetic symptoms: "Potatoes especially obnoxious." Clinical symptoms: The lesion extended from the left elbow to the finger-tips, invading the palm. Jerk of the head toward right shoulder. At times all troubles seemed to locate in stomach. Remarks: Alumina promptly relieved.—Dr. W. S. Talcot, North American Journal of Homeopathy.

BORAX IN CONSTIPATION.—Child of seventeen months had had no movements of bowels for "months and months," without the aid of enemas. Pathogenetic symptoms: "Aphthous patches covered portions of the hard palate. Clinical symptoms: In the earlier history the child had shown great dread of downward motion. Had weaned itself. Constant crying, but no tears. Remarks: Condition entirely relieved within twelve hours.—Dr. W. S. Talcot, North American Journal of Homeopathy.

IRIS VERSICOLOR 20 M. (DR. M. BARUCH) IN DIARRHEA.—Mrs. W. B., aged 44 years, married, children. Diarrhea since youth. Treated at various times without success by different physicians. Pathogenetic symptoms: mind irritable. Frontal headache with nausea and sometimes with vomiting. Clinical symptoms: headache returning every eight days. Remarks: More than one year has now elapsed without return of symptoms.—Dr. Emanuel M. Baruch, North

American Journal of Homeopathy.

BEER YEAST IN DIABETES.—The diet can be varied in diabetes if two or three tablespoonfuls of beer yeast are taken during the day at meals, disguised in beer or white wine (Gaz. Med de Liebe.). It promotes assimilation and destroys the sugar derived from the food, while preventing the accidents that follow an exclusive meat diet. It is especially useful in cases in which the sugar is chiefly derived from the food, but is beneficial in all. It should be discontinued for a few days from time to time, or less taken every three or four days.

-Medical Times.

IRIS VERSICOLOR 2x IN DIABETES MELLITUS.—Mr. J. B., age 36 years, single, merchant. Duration several years. Pathogenetic symptoms: mind low-spirited, dulness of mental faculties. Dull, throbbing supraorbital pains, chiefly on the right side, with nausea, urine sometimes vomiting in the morning. Eructations, anorexia, urine pale and copious. Clinical symptoms: burning in the pancreas. Urine of increased specific gravity and containing sugar. Feeling of tiredness and exhaustion and weakness of lower limbs. Remarks: Treated by various physicians. Pronounced hopeless by last medical adviser. Symptoms began to disappear and sugar to decrease within the first week. After suspending the remedy for two weeks the symptoms and sugar began to reappear. Disappeared again on readministration of drug, which was continued for eight weeks. Ten months have since elapsed, without the slightest observation of diet and no symptoms have returned.—Dr. Emanuel M. Baruch, North American Journal of Homeopathy.

A THIRSTY CHILD.—An illegitimate child, named John Waite, who died at Sunderland at the age of two years, was, said the mother at the inquest, a fearful drinker. He would drink anything, no matter

what, and would play for hours pulling out and pushing in corks into bottles. She had to be always watching him. Last Saturday afternoon the oil man came, and after filling the lamp-bowl she went to the door for more oil. Returning, she found deceased on the table with the lamp at his mouth, drinking the paraffin oil. He became sick, but soon recovered. Syphons seemed to bother him, but he was getting to understand them. A neighbour said the child seemed always thirsty, and would "rummage" round the bottom of her cup-Twice or thrice she had caught him drinking from the paraffin-oil bottle. A month ago he fell into the rain-water tub whilst trying to get a drink from it. The child's last drink was from a mixture of oil of cloves and laudanum which the mother had got for her toothache.—Chemist and Druggist.

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MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Burnett (J. C.). The Change of Life in Women and the Ills and Ailings incident thereto. Fcap 8vo, pp. 184, Homeopathic Publishing Co. 3s. 6d. Hare (F. E.). The Cold-Bath Treatment of Typhoid Fever. The Experience of a Consecutive Series of 1,902 cases Treated at the Brisbane Hospital.
With Illustrations. 8vo, pp. 208.
(Macmillan. Net, 6s.)
Hartridge (Gustavus). The Refraction

Hartridge (Gustavus). The Refraction of the Eye. A manual for Students. With 104 illustrations. 9th ed. Cr. 8vo, pp. 284. (Churchill. 6s.). Lawless (E. J.). First Aid to the Injured, and Management of the Sick An Ambulance Handbook and Elementary Manual of Nursing for Volunteer Bearers and others. The Bearer's Companion. Illustrated with 49 Engravings. Cr. 8vo, pp. 278. (Scientific Press. 3s. 6d.) pp. 278. (Scientific Press. 3s. 6d.)

Lucas (E. W.). Practical Pharmacy.
An Account of the Methods of
Manufacturing and Dispensing
Pharmaceutical Preparations. With
a Chapter on the Analysis of Wine.
With 283 Illustrations. Roy. 8vo,
pp. 544. (Churchill. 12s. 6d.)
Maddox (Ernest E.). Tests and Studies
of the Ocular Muscles. Illustrated.
Cr. 8vo, pp. xv—427. Wright (Bristol). (Simpkin. Net, 10s. 6d.)
Playfair (W. S.). A Treatise on the
Science and Practice of Midwifery.
9th ed. 2 vols. 8vo. (Smith. Elder

science and Fractice of Midwhery.
9th ed. 2 vols. 8vo. (Smith, Elder & Co. 28s.).
Ruddock (E. H.). The Stepping Stone to Homeopathy and Health. 13th ed., improved and enlarged. With Clinical Directory. 15 mo. pp. 366 Clinical Directory. 16 mo, pp. 366. (Homeopathic Publishing Co. limp, 1s.; cloth, 1s. 6d.)

TO CONTRIBUTORS AND CORRESPONDENTS.

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

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

envelope.

All advertisements and business communications to be sent to the "Manager" of the Homeopathic Publishing Company, 12, Warwick Lane, Paternoster Row, London, E.C.

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

CORRESPONDENTS.

Communications received from Mr. F. Kopp, Greenwich, N.S.W.—Dr. Cooper, London.—Dr. Proctor, Birkenhead.—Dr. Hayward, Birkenhead.—Dr. Nankivell, Bournemouth.

BOOKS AND JOURNALS RECEIVED.

H. Review—Chemist and Druggist. — Zoophilist. — Animals' Friend.—Allg. H. Zeit.—J. of Homeopathics.—H. Envoy.—H. Physician.— La Homeopatia.—Gaz. Méd de Paris.—Reformador. Hahn. Monthly.—J. of Orif. Surg.—Pacific Coast J. of H.—Med. Times.—Med. Century.— L'Art Médical.—H. Recorder.—Tasmania H. Journal.—American Homeop.—Rev. Hom. Belge.—Calcutta J. of Med.—II. Secolo Om.—H. Maandblad.—Archiv. f.

H.—N. A. J. of H.—Critique.—Minn. H. Mag.—Hom. News.—Clinique.—Indian H. Review.—New. Eng. Med. Gaz.—J. Belge d'H. — Vacc. Inquirer. — Pub. Health Jour.—Healthy Life.—Library of Health.—Hahn. Advocate.—H. Monatsblätter.—H. Tidsskrift.—Hahn. Med. Coll. Announcement (Chicago).—Tests and Studies of the Ocular Muscles, by Ernest E. Maddox, M.D.—Essentials of Therepeutics, by W. A. Dewey, M.D., 2nd Edit.

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THE

HOMEOPATHIC WORLD.

NOVEMBER 1, 1898.

OLIGODYNAMIS.

TRULY everything comes to him who knows how to wait. Hahnemann launched on the world his discovery of the power of the infinitesimal and the means to obtain, fix, and apply it. He was laughed to scorn, as are his followers to-day; nay, many who profess to be his followers are among the foremost of the merrymakers. But this did not matter to Hahnemann. His discovery was launched, and he knew the world of recognised science could not help coming round to it in the end. Among the first of unwilling witnesses was DARWIN with his experiments with Drosera. He was almost afraid to say what his experiments taught him. Tyndall gave new support by his researches, and he put the result in the aphorism, "Billows are incompetent to produce effects which are readily produced by ripples." Many workers in many fields have brought new evidences to confirm the testimony of HAHNEMANN, but none have brought such signal power to bear on the research as the late CARL VON NAGELI of Switzerland.

In another part of our issue we quote entire from Dr. Kent's *Journal of Homeopathics* a paper read by Dr. Wm. P. Wesselhoeft of Boston before the International Hahnemannian Association, in which he gives an account of Nagell's researches.

Last summer we had the pleasure of a call from Dr. Wesselhoeft, who was then fresh from a journey on

the Continent, where he had been studying Nagell's work on his own ground; we are therefore glad to have in print the details he then gave us in the course of a very interesting conversation. To those who are accustomed to use high attenuations of remedies there is nothing in the article to cause astonishment; but the patient and independent researches of Nagell, who was not a medical man and probably knew little or nothing of homeopathy, ought to open the eyes of those who have sneered at the "bottle-washers" who have made their attenuations by machinery.

"Oligodynamis," Dr. Wesselhoeft tells us, is a term used by Nageli to denote a force, the presence of which can be demonstrated in action on certain fresh-water algae long after all chemical trace of the metal originating the force has been lost. Such action lies between a proportion of copper of one part in 100,000,000 parts of

water and one in 1,000,000,000 parts of water.

And it must be remembered that this action is a positive, direct action exerted on a vegetable organism, and not on a highly organised animal body endowed with a nervous system. Knowing, as we do, the enormously multiplied sensativeness of the human organism in a state of disease to the homeopathically related medicinal force acting in a negative way, what is the excuse for putting any limit whatever to the extent to which attenuations may be carried? Faraday's dictum, that "Each atom extends throughout the whole of the solar system," is being proved by the facts of homeopathic practice—a fitting return for all that men of science are constantly doing for the truths of homeopathy.

We will now quote a passage in which the bottlewashing method of attenuating medicines receives its scientific sanction. Not that the sanction is required in the face of the clinical test; but for the sake of those homeopaths who are not happy unless they have the consent of the enemy wherewith to console themselves, we reproduce it. "NAGELI'S experiments had their origin in the revelation that water drawn from a brass faucet, or water distilled in copper vessels, had a fatal effect upon Spirogyra. He then began to 'potentise' this water, i.e., reduce the amount of poison. He distilled one litre of water in glass retorts, suspended four clean copper coins in this water during four days, and found that this solution killed his plants in a few minutes. When this water was poured away, the glass rinsed and washed carefully, and again refilled with neutral water, the Spirogyra also died in a very short time. If, however, the glass was washed out with diluted nitric acid, and refilled with fresh neutral water, the plants flourished and remained healthy. This proved conclusively that a copper force was imparted to water from the walls of the glass vessel. Rinsing, washing, brushing, and even boiling had little effect upon the glass; not till a mineral acid had been used did the glass vessel lose its oligodynamic properties.

"Again he found that this oligodynamic water poured into a new, clean glass vessel transferred its poisonous properties to the walls of the glass, and in turn was again able to medicate neutral distilled

water.

"He says: 'Glasses with oligodynamic after-effects (nachwirkung), lose their power very slowly after being repeatedly refilled with neutral water, which is allowed to stand in them for a while, and somewhat more rapidly if they are boiled in neutral water."

The *Dynamis* of Hahnemann, and the *Oligodynamis* of Nageli are one and the same, as Dr. Wesselhoeft well points out.

Euphrasia in Prolapsus Ani.—A girl aged six, with prolapsus ani after dysentery, was treated for nine months without relief. On account of a characteristic attack of coryza, euphrasia 30th dil. was given every three hours. On the occurrence of a painless diarrhea on the fifth day the prolapsus disappeared. During the whole time the child could not sit down, corresponding to the symptom of euphrasia, "pressure down in the anus when sitting."—Bruckner.—P. C. J. H. Polyneuritis Mercurialis.—In 1893 Leyden showed to the

Polyneuritis Mercurialis.—In 1893 Leyden showed to the Berliner Verein fur innere Medicin a patient in whom after a course of mercurial inunction acute ataxia developed. Since then several cases have been observed. Leyden found support for his view that the trouble was a mercurial polyneuritis, in Letull's experiments on animals. Letull, however, did not succeed in producing a condition similar to polyneuritis. This has now been done by Heller on rabbits, in which he produced not only the clinical manifestations of the disease, but also the pathological alterations demonstrated post mortem by aid of the microscope.—Berlin. klin. Wochensch. 47, 1895.—N. A. J. H.

NEWS AND NOTES.

" MATERIAL MEANS."

The orthodox medical world is in somewhat of a quandary just now. What with hypnotism inside the fold, and Christian Science and Peculiar-Peopleism outside, the prospects of "Drug-olatry" do not look very bright. In one recent case a patient survived a whole month under "Christian Science," after having been given up by five regular doctors, who then refused to certify. We are glad to find at least one orthodox medical journal take a fairly sensible view of the situation. The Medical Press of October 19th says:—

"The death of a military officer under treatment by the self-styled 'Christian Scientists,' has recently excited a certain amount of hostile criticism, but justice constrains us to admit that in this particular instance no harm could possibly have attended their ministrations, seeing that the doctors in attendance had 'given him up.' If these presumably well-meaning but deluded creatures would always withhold their assistance until the victim had been declared past medical help there would indeed be little reason to complain. All that the law requires is that there should not have been negligence such as would be held to have occurred if skilled assistance were withheld to the evident detriment of the patient, as, for instance, after injury, and secondly, that the treatment actually employed shall not have itself been prejudicial to the patient's chances of recovery. Moreover, when the patient is an adult in full possession of his reason and faculties it would be difficult to deny him or her the right to decide what treatment, if any, shall be applied."

For our part we do not see why people should wait until ordinary doctors have given a case up before resorting to measures they have faith in; but with that exception we endorse our contemporary's remarks. Seeing that orthodox medicine has so little idea of curing except by serums and inoculations we think anybody is justified in trying any method which commends itself to his judgment. A notable point in this case was the jury's censure of the lady who treated the patient, for neglecting the use of "material means" in the treatment. But how about the highly respectable hypnotism endorsed by Sir Wm. Broadbent? Is this a "material means"? Another point which strikes us as curious in this and in the Peculiar People cases, is that the jury and witnesses are all asked to take the

oath on the New Testament. Now it is very evident if the central Figure of the book were to visit nineteenth century England and to carry on the same work as the book relates of His earthly career, He would be prosecuted as an unqualified practitioner, and have the General Medical Council and various medical trades-union defence societies (in spite of the Guild of St. Luke) ready to take action against Him for infringing their rights, and neglecting to use "material means." The qualified hypnotist, of course, being inside the fold, escapes this danger. Sometime ago an unusually bright officer of a court of justice was administering the oath to a Mahommedan witness, and wishing to spare his feelings wound up the oath with the words "So help you Koran!" This suggests a thought. Would it not be more decent to swear the jury and witnesses in cases like these on, say, Quain's Dictionary of Medicine, 2nd edition? The 1st edition wouldn't do—it is out of date. If the courts should still persist in swearing Peculiar People and Christian Scientists on the New Testament, we should advise the latter to take a hint from an old lady witness, who, a short time ago, was offered the book to kiss, but instead of this, opened it, and finding the print very small, exclaimed, "I can't read this." Now this these persecuted healers might insist on doing, culling the most striking texts bearing on their tenets and refusing to be sworn on the book unless the coroner or other judge had admitted that the texts were true. It is too absurd to persecute people for showing they really do believe what all the world only professes to believe. The author of Erewhon was not far wrong when he said that the natives of that strange country professed to put all their trust and treasure in the "musical banks," as the churches are there called, but really it was only the other banks that they had faith in. The coroner's jury with its faith in "material means" is an eloquent confirmation of the jibe.

Mr. Harold Frederic and Doctors.

The following appeared in the Westminster Gazette of October 24th:—

"In the late Harold Frederic's book, *Illumination*, the following allusion to medicine derives new interest from the revelations of the

coroner's inquest. The Rev. Theron Ware, in his first interview with Dr. Ledsmar, is uncertain whether he may not be talking to a doctor of something else than medicine, and decides on venturing the

question:

""Oh, yes, it is medicine,' replied Ledsmar. 'I am a doctor three or four times over, so far as parchments can make one. In some other respects, though, I should think I am probably less of a doctor than anybody else now living. I haven't practised—that is regularly—for many years, and I take no interest whatever in keeping abreast of what the profession regards as its progress. I know nothing beyond what was being taught in the "sixties," and that, I am glad to say, I have mostly forgotten.'

"'Dear me,' said Theron, 'I had always supposed that science was the most engrossing of pursuits—that once a man took it up he never

left it.'

"'But that would imply a connection between science and medicine,' commented the Doctor. 'My dear sir, they are not even on speaking terms.'"

PLAGUE-SPREADING RATS.

LORD LISTER, who prophesied dreadful results from the escape of a plague-stricken rat from a Bombay ship in Belfast Lough, will be interested to read that a rumour is spreading in Vienna that two rats infected with the plague bacillus have escaped, while the others were cremated. Great consternation prevails, for if they reach the drains leading to the Danube it is feared they may cause the spread of the disease.

MR. J. SUTCLIFFE HURNDALL, M.R.C.V.S.

Our readers will be pleased to learn that our eminent representative in the veterinary world has been elected president for the year of the Central Veterinary Medical Society, whose headquarters are 10, Red Lion Square. We offer our warm congratulations to Mr. Hurndall, and are glad to find that the prejudices which disgrace the world of human medical affairs are unknown among those who care for sick animals.

Some Uses of Methylene Blue.

A CORRESPONDENT sends us the following items:

'E. Thomson states that methylene blue is valuable in habitual headache and hemicrania. Dose given is 1.5 grs. with equal parts of

powdered nutmeg to prevent irritation of the bladder."—St. Petersb. Med. Wchnschr., May, 1898.

"Cardamates, of Athens, gives 10 to 12 grs. ten hours before an expected malarial attack. It is found to act well in combination with *Quinine*, and is useful in cases where *Quinine* alone has failed. Immunity from material poison seems to follow its continued use. It is apt to cause cystitis."—Therap. Gaz., Detroit, July, 1898.

Methylene blue is an aniline derivative, and should be compared with aniline. Both are analogous to *Arsenic*, and have a powerful action on nuclea tissue. Given in homeopathic preparations there will be no need of nutmeg to counteract the unpleasant effects.

FUNCTION OF THE GLANDS.

We take the following from the Chemist and Druggist of October 22nd, as it illustrates our repeated contention, emphasised in our work on Diseases of the Glands and Bones, that the wholesale excision of these organs is thoroughly bad practice:—

"A CURE FOR CANCER.

"Dr. Herbert Snow, the well-known cancer specialist, has made an important observation in respect to cancer, about which he writes a preliminary note to the Lancet. He has observed that in certain forms of cancer the lymph-glands are not affected at all, and has come to the conclusion that it is the function of these glands not only to arrest, but actually to destroy, the protoplasm of cancer. In the ordinary course of events this takes place only up to a certain point. Eventually the gland is overpowered by stress of numbers, but under some circumstances the resistance is long-continued, and the number of infective particles killed must be considerable. On the supposition that a natural secretion is the active agent, Messrs, Warrick Brothers made for him an extract of fresh lymph-glands, and this he administered in sundry cases with apparent benefit, and never with any bad symptom. A gentleman seen in July, 1897, going down hill very fast with advanced cancer of the stomach, and very unlikely to survive beyond November or December, had his life prolonged until last April. Dr. Snow appeals to some competent physiologist to take the matter up."

THE PRINCIPLE OF HOMEOPATHY.

MR. W. Buist Picken has contributed to the *Homeopathic Review*, and by courtesy of the *Review* to the *New*

England Medical Gazette, an article on "The Principle of Homeopathy." This article originated in certain criticisms by Dr. Proctor in his presidential address of last year on Mr. Picken's "Science of Homeopathy," and the article is in the form of a reply to Dr. Proctor. But it is also much more, carrying on the idea of the correspondence from the region of phenomenal science into the plane of noumenal philosophy. As we were the first to give Mr. Picken's views to the public, we shall take an early opportunity of giving our readers an account of his latest and probably his last pronouncement on this topic.

Arborivital Medicine.

WE print elsewhere an article from *Invention*, which gives an interesting account of Dr. Cooper's new departure in homeopathic therapeutics. Dr. Cooper has issued a second edition of his *Problems of Homeopathy Solved*, which we hope to review next month.

HOMEOPATHIC MATERIA MEDICA.

At the next meeting of the British Homeopathic Society on November 3rd, Dr. Hayward, of Birkenhead, is to open a discussion on "The best means of bringing our materia medica up to date." There ought to be a good and useful discussion on this very vital subject. Materia medica and homeopathy are practically identical.

THE DIRECTORY, 1899.

By the time this number is in our readers' hands the circular for next year's *Directory* will have been distributed. We urge upon all to give every possible support to the compilers of this most useful annual. We are glad to learn that Dr. Clifton, of Northampton, has signified his intention of giving it his support and is using his influence to induce outsiders to come in.

ORIGINAL COMMUNICATIONS.

"LIGHT AND LEADING" AT THE MEDICAL SCHOOLS.

By R. E. DUDGEON, M.D.

The monotonous mediocrity of the October opening orations at the medical schools was this year agreeably diversified by the address delivered in connection with the Charing Cross Hospital by the renowned Berlin pathologist, Professor Rudolf Virchow. His subject was Recent Advances in Science and their bearing on Medicine and Surgery. It was, I think, rather cruel to put our only peer, Lord Lister, in the chair, for it was not long since he, as President of the British Association for the Advancement of Science, had delivered an address on a similar theme, viz. The Interdependence of Science and the Healing Art, and as President of the British Medical Association had made the flesh of his Belfast audience creep by suggesting that a plague-stricken rat "might make its escape from a ship coming from Bombay to Belfast Lough, might carry the plague ashore and communicate the taint to human beings, with dreadful results!" That a sense of the contrast between his own recent addresses and this one of the great German professor must have upset his lordship is evident from the little speech he made at the conclusion of the address, "expressing his sense of the profound debt they owed to Professor Virchow for his learned, profound, and beautiful address," which is an exquisite specimen of the most profound bathos. Perhaps Lord Lister was overcome by the unmerited praise Dr. Virchow gave him as the deviser of methods of cleanliness in surgery for which "he will always be reckoned amongst the greatest benefactors of the human race." The carbolic acid spray, by which, and not by cleanliness, Professor Virchow's "old friend" attained to fame and fortune, was mercifully not alluded to, as it has long been discarded by the profession and has been repudiated by its inventor, who, in Virchow's own city of Berlin, confessed himself ashamed of having proposed it. With a lively consciousness of this, the noble chairman must have felt a thrill of relief and gratitude to the lecturer that he abstained from any

allusion to the unfortunate spray and credited his lordship with having invented something to which he had no His agitation was manifest in the extraordinary little speech he made about the profound debt of the profession for the profound address of the German professor. No doubt a medical lord is an imposing figure-head at a medical meeting, but I would suggest that on such an occasion he should be invited to preside in his peer's robes and coronet, when he would create a much greater impression, provided he could be persuaded to abstain from making a speech, for, to use the expression of the Hibernian orator, "he never opens his mouth without putting his foot in it." Even at the complimentary dinner to Professor Virchow, at which he presided, in proposing the health of the illustrious guest he insinuated that he was wrong in some of his conclusions, and he asserted that Virchow's Cellular Pathology had "swept away the false and barren theory of structureless blastema," which was a slap in the face to Dr. Lionel Beale, who was present, but of course could not defend his view.

Professor Virchow, besides being the greatest living authority in pathology, is well known as the ablest exponent of the doctrine of Schwann and Schleiden with regard to the cell being the ultimate element of all vital processes, the seat of vitality in fact, so it was but natural that in this address he should introduce the views with which his name is so intimately connected. Perhaps it was slightly inconsistent that he should be selected to deliver what is termed the "Huxley Lecture," as Huxley had latterly discarded the cell theory and, as his lecture in Edinburgh in 1868 shows, had adopted the protoplasmic theory of life. But Professor Virchow makes no allusion to the later opinions of Huxley, he merely re-states his own opinions as though there were none other worthy of notice. He dismisses the theory of a vital force with contempt. "During last century," he says, "an assumption was made, with ever increasing conviction, of a special force —vital force. . . . Time has, however, passed judgment upon it and to-day no one continues to speak of vital force." I think he is mistaken here in both these points. A vital force or principle is much older than the last century and it is still spoken of and believed in by some highly respectable physiologists.

But the professor still holds that the cells are "the

ultimate constituents of all tissues," they are for him "the living elements," "the anatomical basis of all biological analysis." In short, or, as he elsewhere says, "the ultimate morphological unit in which there is any manifestation of life." They are, according to him, the seat and the source of life or vitality. But a perfect cell consists of the cell-wall, the nucleus, and the endoplast or contents of the cell, and life and vital actions can be observed to be carried on where no cell is discernible. Any one who has watched an ameba or rhizopod through the microscope sees a mere drop of transparent, structureless protoplasm without a trace of cellular formation, without a cell-wall or a nucleus, and yet this colourless drop of pellucid jelly exhibits "the promise and potency" of many of the attributes of highly organised animals. It moves about against gravity; it avoids contact with its fellow amebas; it throws out and retracts into itself processes which perform the functions of legs and arms; it seizes on any small objects which may come in its way and serve it as nutriment, draws them into its body, and assimilates to itself as much of them as may contribute to its own sustenance and rejects the unassimilable parts. In short, this drop of unorganised jelly, without a trace of nervous matter or circulating fluid, acts just like an animal endowed with organs, senses, affections, intelligence and emotions; it offers an illustration of vitality independent of organisation, and gives a refutation of the notion that the cell is the indispensable "living element" of all plants and animals. It is singular that Professor Virchow, in his address, makes no allusion to what Drysdale calls "the protoplasmic theory of life," nor to its great exponent, Dr. Lionel Beale, nor even to his countryman, Haeckel, a distinguished advocate of that theory. Protoplasm or bioplasm, as Beale prefers to call it, according to that theory, is a gelatinous substance that is found everywhere in living plants and animals; it has no apparent structure, is homogeneous, transparent, and colourless. It is the only seat of vitality and is the source of all vital actions; it is the sole active agent in the formation of all tissues and organs, of cells as well as more elaborate structures, is acted on by stimuli and nourished by the pabulum brought to it by the circulation or otherwise. Its action is not chemical but vital or metabolic. It is matter in a certain but unknown

arrangement of its molecules; when this arrangement is altered by chemical or other unsuitable stimuli it produces abnormal structures or it loses its vitality and becomes dead matter, incapable of any more vital action; in this state it may be utilised as pabulum or thrown off as excrementitious matter. The organised tissues it creates are not living matter, they can only be called living by virtue of the particles of protoplasm they contain, which is freely distributed through them and intimately interwoven among them. Protoplasm alone can make protoplasm out of the pabulum supplied

of dead protoplasm, but that teaches us nothing as to the condition or molecular arrangement of living protoplasm. It is quite probable that Virchow's cell doctrine may be true in relation to the production of morbid structures, but if so it does not follow that it is the "living element" of all animal and plant life, as Schleiden,

to it. We can analyse and show the chemical composition

Schwann and, after them, Virchow, teach.

Dr. Virchow gave no encouragement to the opinion of some eminent bacteriologists that all contagious diseases have a bacterial origin, and he instances syphilis, hydrophobia and variola, where no pathogenic microbic parasite has yet been found. The noble chairman, I imagine, must have winced a little at the mention of variola, as he had stated in his address at the British Association that "no one could doubt that Dr. Copeman had really discovered the microbe of small-pox which had so long baffled all observers," though Dr. Copeman was more modest with respect to the reality of his discovery, and Virchow denies that any such discovery has yet been

made.

On the subject of the cure or prevention of certain diseases by antitoxins, the professor makes the following curious remark: "The homeopathic notion that toxin and antitoxin are one and the same seems so foreign to our biological ideas, that very many experimental and practical proofs will be required before it can be admitted into the creed of the future." But the "homeopathic notion" is not that they are the same, but that the toxin has been modified by its transmission through the body of an animal, whereby, though still similar, the antitoxin is not identical with small-pox, but is this latter modified by

transmission through the organism of a cow. Why the obvious homeopathicity of this process should be "foreign to our biological ideas," or to any ordinary intelligence, I am at a loss to understand. But Professor Virchow loses his common sense (or is it his temper?) when homeopathy is in question, for we remember that he once said that the discovery of chloral was of infinitely greater service to mankind than all the medicines the homeopathists had

introduced into therapeutics.

Professor Virchow, being a pathologist, has naturally a contempt for therapeutics. He alludes to antitoxins and animal extracts, but does not seem to have a high opinion of them as therapeutic agents. "The new doctrine of antitoxin," he says, "is continually acquiring new adherents, but it has not yet emerged from the conflict of opinion," and "we are not yet in a position to pass a final judgment on the results of injection therapeutics;" so he relegates to the next century the task of "bringing perfect light and certainty on these points." With a lively recollection of Koch's infallible cure for tuberculosis and the part he himself had taken in the exposure of its fallacy, he could not be expected to be highly eulogistic of this method of treatment, so he prudently puts off the final judgment upon it till the next century. His noble chairman was not so cautious, for it was his extravagant laudation of Koch's injection fluid, before he knew what it was made of, that sent those crowds of doctors to Berlin to buy a drop of it for their own use. The only medical means to which Virchow accords unstinted praise is the application of methods of cleanliness to surgical practice, which is, he says, "the most beneficent reform that the practical branches of medical science have ever known," and he erroneously attributes to Lord Lister the credit of this reform.

The only other of the October addresses that particularly interests us is that by Dr. J. W. Carr. It is entitled "Fashion in Medicine," and was appropriately delivered at the School of Medicine for Women—for who are better judges of fashion than the ladies? "It is," says he, "an interesting and instructive, albeit somewhat humiliating, study to follow the influence and vagaries of fashion in pathological theories and dogmas and still more in the domain of treatment." He then proceeds to deal with a few of the chief methods which have, in comparatively

recent times, been popular in the treatment of fever and inflammation, as exemplified in such well-marked and common diseases as pneumonia, and typhoid and rheumatic fevers.

Little more than fifty years ago a fever was regarded as a sort of morbid entity to be expelled from the body by thoroughly drastic measures. The sheet-anchor of the treatment was venesection, but this was assisted by the free use of depressant and nauseating drugs such as antimony, by mercury pushed to the limits of tolerance or beyond, by purgation and by blistering, and by semi-starvation as a further inducement to the fever to depart. With present-day notions and experience these things may sound almost incredible, but read the directions laid down by eminent authorities for the treatment of pneumonia: "You bleed early from the arm and if necessary you bleed a second or third time, and if under this treatment resolution does not speedily take place you bleed locally by leeches or by cupping and likewise give tartar emetic more or less freely, to all of which counter-irritation may be superadded in the more advanced stages. Mercury is also to be given freely, even to salivation, combined with opium." Sir Thomas Watson, the leading physican of his day, lecturing a little over half a century ago, at a time when bleeding was becoming rather less popular, recommends blistering for pneumonia, but says it should not be done in a half-hearted fashion: "The patient should have a waistcoat almost, or at any rate a breastplate of blistering plaster." Speaking of the treatment of pleurisy he says: "Cover the side with leeches and, when they have sucked forth what they can, let their bites continue to discharge blood into a thick, absorbing poultice." Patients suffering from acute rheumatism seem to have undergone even more heroic treatment, probably because it naturally runs a more protracted course than does pneumonia. We have the notes of the case of a man aged twenty-eight years, treated in King's College Hospital in 1840 for two attacks of rheumatic fever; for the first attack he was in the hospital six weeks and for the second fourteen weeks, with an interval of only about a month between. I will not weary you with the details of the numerous bleedings, cuppings, leechings, and blisterings to which he was subjected; suffice it to say that in all 110 oz. of blood were withdrawn besides that which was lost by leeches, and that the latter was no inconsiderable amount may be inferred from his having as many as ten leeches applied at once to an inflamed joint. The additional fact that at one time he was also given 3 gr. of calomel every three hours is to be regarded as a mere detail of treatment scarcely worthy of note. The result hardly seems to have been satisfactory, for two months later he was readmitted, but the notekeeper appears to have got tired, for though the patient is said to have ultimately recovered the date of his discharge is not recorded. A few years later the treatment had become less heroic, but a vigorous administration of calomel was believed in by some. In Sir Thomas Watson's lectures we read: "Some have given large doses of calomel in the outset of the disease, such as half a scruple or a scruple, repeating the dose daily or oftener, with occasional purgatives perhaps, till the urgent symptoms gave way, and in this manner

I have seen the disease apparently cut short. But I have also known many instances in which the disease was painful and protracted and obstinate, although this practice was adopted early and fairly prosecuted."

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It would be easy to multiply examples of this kind of thing; I will add but one more. "A child of twenty-eight months took in nine days 350 grains of calomel and in six of these days 136 grains of jalap"; she was suffering from cerebral symptoms, upon the cause of which it is useless to speculate.

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As was inevitable, a tremendous reaction set in against the lowering treatment of fevers; Dr. Graves in Dublin taught that fever patients should be fed and not starved and desired that the epitaph on his tombstone should be, "He fed fevers." But the reaction went further and an actively stimulant treatment became the fashion. Dr. Todd of King's College Hospital, one of the leaders of the reactionary movement, thus describes his treatment in 1851 of a severe case of typhoid fever in a strongly built man, aged thirty-two years. From January 21st to the 27th the patient took half an ounce of brandy every hour. "I now," said Dr. Todd, "doubled the quantity of brandy and ordered ammonia and chloric ether every fourth hour. On the 29th I felt it needful to increase the stimulant to 5 drachms every half hour, or 30 oz. in the day. On February 3rd the stimulant was reduced by 6 oz., so that he now took 1 oz. every hour instead of 10 drachms; the chloric ether was omitted." After this the patient slowly sank and eventually died from intestinal hemorrhage on February 9th. . . Says Dr. Todd, almost pathetically: "I do not see what more we could have done; we cannot plead guilty to the charge of nimia medici diligentia." Again, a girl of fourteen years was given $1\frac{1}{2}$ oz. of brandy every hour for three days together, and for the next fortnight $\frac{1}{2}$ oz. was administered hourly, this being sometimes much increased as occasion required; she recovered. An eminent physician, not dead many years, used to teach: "There is one drug for pneumonia, it is in your Pharmacopeia—brandy, give it." It is true that not all cases were treated in this heroic fashion; still, as the idea grew that alcohol was the drug for fever, so the fashion spread, until it was given more and more freely, more and more indiscriminately.

The next fashion in the treatment of fever was the endeavour to reduce the temperature, mainly in two ways—either by the direct application of cold or by the administration of drugs. With regard to the cold treatment little need be said; its tendency on the whole has been beneficial.

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A very different matter is the artificial reduction of temperature by powerful drugs—antipyrin, antifebrin, phenacetin, &c. When first the antipyretic action of these bodies was discovered men thought that fever was for ever robbed of its terrors—that once keep down the temperature all other bad symptoms would disappear. The result

was that any rise of temperature was merely regarded as nature's invitation for a knock-down blow from a well-chosen and well-administered antipyretic drug. As a consequence the therapeutic art never perhaps in this century reached a lower level.

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Just at present there are two especially fashionable tendencies in medical treatment. The first is the use of antitoxins and animal extracts; those of us who are not unnecesarily sceptical may, in fact, look forward to the medicine of the future being enormously simplified, somewhat on the following lines. Most diseases will be grouped under two heads, those in which some organ or tissue is diseased so that its internal or external secretion is suppressed or altered, and those due to a micro-organism or the toxin produced by it. In the first case the treatment will, of course, be the administration of the suitable animal extract; the remedy is ready to hand, for already, according to a recently published work, we can select from extracts of bone marrow, lymphatic glands, heart muscle, brain, spinal cord, kidney, liver, pancreas, parotid, pituitary body, spleen, supra-renals, thymus, thyroid, and even other less likely organs. Such is the vast superstructure which has been built up on the success of the thyroid treatment; again the old fallacy that because one animal extract has done good others will be equally useful. If, on the other hand, the body be invaded by a pathogenic micro-organism it will only be necessary to inject the requisite antitoxin—that of cholera, diphtheria, glanders, plague, rabies, septicemia, tetanus, tubercle, pneumonia, typhoid, &c., &c., as the case may be. How delightfully simple will therapeutics be in the future!

After his scathing exposure of the methods and fluctuating fashions of so-called "rational" medical practice, Dr. Carr deprecates any attempt to cure diseases by means of specifics, and contends that "the highest function of medical practitioners is to be apostles and preachers of hygiene." And yet he says: "It is as requisite to be orthodox in medicine as theology." But he omits to tell us what is medical orthodoxy, nor do I see how there can be any orthodoxy, which implies a fixed creed, in a science (if it can be so called) which changes its theories and practice every decade or oftener. Surely if we are, as Dr. Carr suggests, to abandon the attempt to cure diseases by medicines and to content ourselves with hygiene and nursing, we become mere medical agnostics without a creed and without faith in physic.

Of the other addresses given at the medical schools I cannot say much. Dr. Cullingworth, at Leeds, gave rather a discouraging account of the chances of success among the vast numbers of those constantly crowding into the medical profession, and Mr. Turner, of St. George's

Hospital, drew a lamentable picture of "the inadequate pecuniary reward" obtained by doctors, and he complained that doctors were not admitted in sufficient numbers to the House of Lords, where there should be a bench of doctors as there is a bench of bishops. Well, the one solitary medical peer is not such a conspicuous success that we should pine for a multiplication of that class of noble lords, even though Professor Virchow, in the exuberance of an after-dinner speech, asserts that "Lord Lister's immortal claims to glory outshine even his exalted position." Surely there are enough of honours going about in the shape of knighthoods and baronetcies to

satisfy an ambitious profession!

On the whole, the addresses I have noticed do not afford much encouragement to the candidates for medical degrees and diplomas. It will rather puzzle a student who has been grounded in latter-day views of vitality, to be called upon by Professor Virchow to adopt what he had been taught to believe the exploded doctrines of Schwann. He must feel somewhat discouraged by Dr. Cullingworth's statistics of medical failures. Mr. Turner dashes his hopes of realising a rapid fortune or finding his way to exalted rank. Finally, Dr. Carr shows that all the past and present methods of "rational" medical practice are not only futile, but pernicious, that therapeutic nihilism is the only true creed of orthodox medicine, and that the highest function of the doctor is to become an apostle and preacher of hygiene. All this can hardly be satisfactory to the budding physician, and must tend to assuage his enthusiasm, if he has any, for the healing art. If it lead him to inquire into homeopathy, he will find there a true therapeutic rule founded on an unassailable law of nature, and subject to none of those fashionable fluctuations which proclaim the irrationality of "rational" medicine. He will not find in homeopathy greater "pecuniary rewards" than the old school offers, nor can he look forward to official posts and honours, which are the exclusive perquisites of the adherents of the dominant school; but he will derive perfect satisfaction from the conviction that his practice is guided by a correct principle and that his medicines really cure diseases, in greater numbers, in shorter time, and with less suffering to the patient than can be effected by his colleagues of the allopathic sect.

THE FURTHER GROWTH AND PROGRESS OF HOMEOPATHY IN NORTHAMPTONSHIRE.

By A. C. CLIFTON, M.D.

MR. CHAS. T. PEARCE, of Pimlico, London, M.R.C.S. Eng., after making the frequent periodical visits to Northampton for about fourteen months (already alluded to), took up his residence in the town early in 1851. Hence, as he was the pioneer of homeopathy there, it is due to his memory that his character as a professional man and a homeopath should be first noticed.

I met Mr. Pearce on the first day of his coming to Northampton, was on intimate terms of friendship with him, saw much of his practice, and, with the exception of two years, when I was a medical student in London, I lived in the town during his residence there: hence my knowledge of him and his work enables me to speak with

confidence in that respect.

When Mr. Pearce first settled in Northampton his legal qualification as a medical practitioner was, as I have related, M.R.C.S. Eng., but as only three years later he graduated as a doctor of medicine at the University of Erlangen, I shall at once, as a matter of convenience, refer to him as Dr. Pearce.

As a physician Dr. Pearce was very accomplished in the teachings and knowledge of the old school of medicine, while as a homeopath I never knew any one better acquainted with the materia medica than he was, or better able to apply that knowledge in the treatment of disease; in the use of hydropathic measures and in the general management of patients, he showed alike great tact and skill. He was also a well-read man in general literature and in some of the sciences, as a polemical writer and platform speaker he was, moreover, a man of great power and influence.

Touching on the latter aspect of his work, it should be noticed that as only a short time before he came to the town he had been mercilessly persecuted by one of the leaders of the so-called "orthodox school" for his faith in homeopathy—the "iron had entered into his soul," and made him a much fiercer fighting-man than he would otherwise have been against the teachings and practice of "old physic"; and in controversy with the upholders of that system and the opponents of homeopathy he gave

no quarter to his adversaries nor asked for any, and in fact was a very iconoclast, at the same time hardly ever descending to invective, but relying on facts as weapons both of attack and defence in relation to sub-

jects in dispute.

Further, he unremittingly and lucidly set forth on the platform and by the press the characteristic principles and practice of homeopathy in the common language of "the people," and to "the people," rather than in the technical phraseology of the medical schools; and for many years he very ably edited a monthly periodical—to wit, the Homeopathic Record—in which he laid bare the crude and fallacious allopathic treatment carried on at that day in contrast with the beneficent and more certain method of cure of disease by homeopathy, and which he illustrated by cases that came under his care and treatment, in relation to which he gave the names and the addresses of the several patients in order that they might be verified should any doubt as to their genuineness be thrown on them.

Dr. Pearce, very soon after taking up his residence in Northampton, founded and established a Homeopathic Dispensary in the town. He gave to it a large amount of personal attendance, and it rapidly increased both in size and usefulness. At the annual meetings of the subscribers to that institution and friends to the cause, to receive the reports of the work done there, there were often as many as two hundred persons in attendance, when Dr. Pearce also obtained the presence and help of several of the leading homeopathic physicians in the country, who gave their experiences in relation to the superiority of homeopathic treatment over every other method. Hence those meetings were largely a kind of home mission work for diffusing a knowledge of homeopathy.

It may be objected that such popular methods for making known the merits of homeopathic therapeutics were not in accord with the traditions and etiquette of the medical profession; but granting the truth of the assertion, it was occasioned by the dominant party in the profession, who in their societies and through their journals were doing all in their power to stamp out the heresy, and by misrepresentation prevent the laity from becoming acquainted with it; in fact, from the first day

that Dr. Pearce came to Northampton they not only boycotted and ostracised him, but held him up to ridicule and contumely with all other homeopathic practitioners, designating them as "fools and knaves," and they who resorted to them as weak-minded and deluded individuals. Under these circumstances I contend the bold and democratic policy pursued by Dr. Pearce was in that respect a beneficent one for the general community, and in fact the only policy possible short of allowing homeo-

pathy to be trampled underfoot and degraded.

In order to substantiate in some measure what I have just said, take the following as one example out of many which might be adduced. A few months after Dr. Pearce settled in Northampton an editorial article in one of the local papers appeared, in order, as its author declared, of "Exposing the charlatarry, impostures, and delusions of homeopathy." It was a scurrilous and abusive production and a gross misrepresentation of homeopathy. Dr. Pearce answered it, but his letter was refused admission in the same paper, but was published by the editor of a more liberal and a rival paper. Some other letters followed in succession, pro and con, but the one which carried the day was by Dr. Wm. Sharp, of Rugby, formerly Senior Surgeon of Bradford Infirmary, M.R.C.S. Eng., L.A.S., F.R.S. Great Britain, &c., a learned, scientific, and clear-headed man, who, after a practical examination of homeopathy, had openly espoused the cause. letter, brimming over with facts in favour of homeopathy, in opposition to the fallacies of allopathic writers on the subject, fell like a bomb in the orthodox medical camp, and greatly advanced the cause of homeopathy.

That letter, afterwards published as a tract, was the corner-stone of twenty-three other tracts by Dr. Sharp on various phases of homeopathy and other therapeutic methods, all of which were scholarly in style, rich and analytical in medical lore, hence appealing largely to the minds of the medical profession, and gained from its

ranks many converts to homeopathy.

Those tracts, as a whole, have passed through many editions, and have been powerful factors in the dissemination of the principles and practice of homeopathy over the greater part of the civilised globe; for that reason, if for no other, although the author of them has departed this life, he should never be forgotten for his work's sake,

and further, the fact of their origin having been due to the bitter opposition to homeopathy in Northampton should not be forgotten, and as I had some hand in that controversy in the press, I am glad of the opportunity of

recounting its story.

From what has been said in relation to Dr. Pearce as a physician and homeopath, together with his indomitable courage and perseverance in the field of polemics and in the face of great opposition, it will be easily understood that he soon acquired a large practice in Northampton and the county, and far beyond its boundaries. This he maintained until he had completed a period of ten years of professional work there, when, owing to his health having broken down several times, he was obliged to seek a more genial climate in the South of Englandfirst in London for a few months, but subsequently at Bournemouth and its vicinity. There he did some quiet practice, and according as his strength permitted visited many of his old patients in various parts of the country and sometimes at Northampton; he finally, however. removed to Torquay, but shortly afterwards became worse, and died there in 1883, in the sixty-eighth year of his age, having fought a good fight for "Faith and Freedom" in medicine and in a noble cause.

I am well aware that many of Dr. Pearce's colleagues took exception to some of his polemical work, and no doubt in that relation he had his faults, like every other ardent reformer battling at great odds against oppression and abuses. But I contend his faults were largely excusable, considering the opposition of the "old school" of medicine; in fact, what he did in laying the foundation of homeopathy, and building it up in Northamptonshire should cover a multitude of sins of that nature, if they were sins; but knowing the man as I did, in his earnestness and devotion to the cause, I will never cast a stone

in that direction.

Finally, in relation to the ten years of homeopathic practice by Dr. Pearce in Northampton, it should be noted that Dr. Rigg, Dr. Garratt, and Dr. Berry King came to the town and gave him some help for a time, and then departed for other spheres of work. Dr. Henry Thomas also gave him very valuable assistance for about two years, when he also sought "fresh fields and pastures new" to practice on his own account. He settled first in

his native city of Chester, where he soon acquired a good position, but afterwards removed to Llandudno, North Wales, in order to carry out hydropathic treatment in connection with homeopathic therapeutics at a large establishment there, which he did successfully for many years, until he met with an accident which led to his untimely death. He was mourned by a large circle of friends and by many patients who had received benefit from his treatment; but it was mainly as a very accomplished and progressive homeopath that he made his mark, and an indelible mark, in this country.

MATERIA MEDICA MISCELLANY.

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

Cimicifuga in Delirium of Typhoid.—Dr. M. R. Wesner reports a case of typhoid in which, after the fourth week, there remained the following symptoms: Dry tongue, subsultus, and delirium, with extreme restlessness and constant wakefulness. For four days and nights he did not sleep five minutes at a time, and that very seldom. He kept constantly talking and continually changing the subject. While lying on his back he would fall asleep, then raise his hand slowly, and by the time it reached arm's length he was awake. This he repeated at least a hundred times and always with the same result, and he never slept any longer. After trying a number of remedies without apparent result he was given, on the fifth day after the fever left him, Cimicifuga 6x in water, a dose every hour, with the most happy result. After the third dose he fell into a sound sleep which lasted four hours at least. On awakening he got another dose of medicine, and slept again. His delirium soon began to grow milder, and at the end of forty-eight hours, three-fourths of which time he slept, it had entirely disappeared, and he was perfectly rational, and he made a rapid recovery.—Am. Hom.

Pulmo Vulpis in Asthma.—The following case is attributed to Dr. V. Grauvogl, in the Homeopathic News: A woman of sixty-five suffered from persistent asthma humidus, in consequence of which she was much reduced in flesh. She could only live sitting up, bent forward; there was always lividity of the countenance, lips, and extremities, together with dropsical swelling of the legs; the

pulsations of the heart were irregular, and, in short, death seemed at the door, and was already looked for by the relatives with resignation. After she had taken two grain doses of *Pulmo Vulpis*, first trit., at an interval of an hour, improvement set in, apparent even to the relatives, but without increased expectoration, and after a third powder she could lie down and fell into a refreshing sleep, lasting several hours. In eight days she was able to engage in her domestic duties.

Crocus Sativus in Insanity.—Dr. E. T. Adams reports a case of insanity which he treated by letter only. patient was a school-teacher, aged 27, who had suffered from mental trouble for five years, and resisted all treat-Her condition varied between idiocy and acute mania, in which condition she had several times injured herself and her guardians. After some unsuccessful treatment Dr. Adams learned that the patient's menstrual flow was black and stringy. On inquiring further as to the effect of music on her, he was informed:—That when in her quiet state she would sing and croon to herself by the hour; that singing exerted more control over her than anything else, even when wild and dangerous; often in the middle of the night she would sing so loud as to wake the family; that she never heard singing without either joining in it herself or singing in opposition, according to the state she was in. On these indications he sent a dose of Crocus Sativus c.m. (F. K.). Every two weeks he had reports as to her condition, each being better than the last; she first became more gentle, then the attacks less violent and less frequent, and in three months she was quite herself again.— Am. Hom.

Kalmia in Intercostal Rheumatism.—Dr. Von der Luhe prescribed Kalmia 200 in a case of intercostal rheumatism of two days' duration, of the left side. It was accompanied by a numb sensation of the whole left arm. The pain was so intense that she could not lie down or sleep at night. The medicine was given hourly for a while, then every two or three hours. After the second dose she found relief, and was cured in three or four days. "The keynote for the selection of the remedy was the numbness of the left arm. In neuralgias and rheumatism, where you have marked numbness, Kalmia is the remedy. It acts best on the left side."—Hom. Envoy (N. A. J. H.).

Hypericum in Traumatic Neuralgia.—The same

physician records the following interesting case: "A gentleman, while abroad in Scotland, fell off his bicycle and sprained his shoulder joint and bruised the muscles of the upper arm. When he called upon me he had suffered from traumatic neuralgia for six months. Several fly blisters were tried in Scotland, but gave him no relief. His upper arm was never free of pain, sometimes very painful. He never had during that time been able to sleep well at night, but was compelled to get up and walk about his room, until it eased a little, and then he could lie down for awhile. I gave him a bottle of disks saturated with Hypericum 30. Three days after he called, and said his arm had undergone a marked improvement. The second night after taking this medicine he was able to sleep all night. His words were these: 'This was the best sleep I had in six months.' He has slept well ever since, and his neuralgia has been perfectly cured."—Ibid.

SANGUINARIA CANADENSIS—ITS THROAT AND CHEST SYMPTOMS.*

By Frederick Kopp, Greenwich, N.S.W.

In an article in the March number of The Homeopathic World I dealt with the "Head Symptoms" of Sanguinaria Canadensis. In the present paper I propose to deal with its action on the throat and chest, and will endeavour to show that it is a very valuable remedy in various diseases affecting those parts of the human body. Sanguinaria Canadensis has for its analogues those prime chest remedies—Bryonia alba, Antimonium tartaricum, Spongia marina tosta, Phosphorus, Drosera rotundifolia, Rumex Crispus, Asclepias tuberosa, and Arsenicum album, and that matchless throat remedy, Belladonna.

Sanguinaria Canadensis produces a sense of heat in the throat which is relieved temporarily by taking a deep breath of cold air. There is a pain when swallowing, and a sensation of swelling on the right side of the throat; this feeling of swelling in the throat at times almost amounts to suffocation, and produces aphonia. There is also a feeling of dryness in the throat, which is unaffected

^{*} This article should have appeared in our April number, but it did not arrive in time for insertion in that issue and has been delayed by press of matter since.—Ed. H. W.

by drinking, and a burning in the throat after partaking of honey, treacle, syrups, sugar, and such like saccharine substances. I find that in chronic tonsillitis Sanguinaria Canadensis acts well, as it tends to prevent the recurrence of this most troublesome affection. It is also very useful in those forms of sore throat in which swelling is a prominent symptom; as the drug is analogous to Mercurius solubilis Hahnemannii, its value will at once be apparent. In the sore throat following quinsy, in which ulceration is present, it may also be prescribed with confidence. Sanguinaria Canadensis also produces a troublesome tickling in the throat, generally at night, with cough of a mild character and headache. And this brings us to the chest

symptoms of the drug.

These are a constant cough, very severe, without expectoration, and with pain in the chest and redness of the cheeks: a very dry cough at night when asleep, awakening the prover, and causing him to sit up in bed, which was followed by a discharge of flatus and flatulent belching. A circumscribed redness of both cheeks, accompanied with a continual severe cough, with expectoration. feeling of swelling in the larvnx, accompanied with a dryness of the throat (which assumes a chronic form), and an expectoration of thick mucus. A continual cough, very severe, without expectoration, accompanied with a redness of the cheeks (circumscribed) and pains in the head. Cough, accompanied with coryza, and followed by diarrhea. A continual feeling of heaviness and pressure in the upper portion of the chest, with dyspnea. Pains of a shooting character beneath the sternum and in the region of the heart. Pains in the chest, either with a dry cough of a periodic character, or a cough with expectoration and sharp stitches, extending from the lower part of the chest (left side) to the shoulder. Pains of a shooting nature on the right side of the chest, with sharp stitches in the right breast. Great pressure and burning in the breast, with a feeling of heat through the abdomen. followed by diarrhea.

Sanguinaria Canadensis produces primarily a rattling, loose cough, and, secondarily, a cough, painful, dry, spasmodic, somewhat of a croupy character, with a tenacious and very scanty expectoration. For the primary symptoms, therefore, the higher attenuations of the drug should be made use of, and for the secondary the lower

dilutions, so as to assure the best results. In the treatment of chest complaints Sanguinaria Canadensis is of great value in pneumonia, in which it very often acts as well as either *Phosphorus* or *Sulphur*, as it has many symptoms identical with these two well-known drugs. The pneumonia in which it is most beneficial is that in which there is a very great difficulty in breathing, in which the expectoration is very tenacious, and of a rusty colour and brought up with great difficulty. The breathing is short and accelerated, and the patient speaks with difficulty. Dyspnea and aphonia, it must be remembered, are two of the principal symptoms of the proving. In the second and third stages of Pneumonia, in which there is much dulness on percussion, Sanguinaria Canadensis acts well, even though there should be present hepatisation and bronchial respiration. I have also found it to be of priceless value in chronic pneumonia, in which it often acts with great rapidity. In the typhoid variety of pneumonia it is also beneficial, the symptoms being the usual difficulty of breathing, a vibrating, soft, and easily compressed pulse, and livid cheeks and hands. In catarrhal croup this drug is also very useful, the symptoms calling for the remedy being stridulous breathing, and a painful crowing and spasmodic cough. It is even of greater value in pseudo-membranous croup, for which it is one of the best remedies we possess for this dangerous form of croup. In bronchitis, chronic laryngitis, tracheitis, hydrothorax, and whooping-cough, having the Sanguinaria symptoms, this drug may be administered with confidence, and it is often of great value in the hemoptysis so often met with in phthisis pulmonalis, and in pulmonary inflammation of a syphilitic character. In the latter disease it should be used in a high potency, the 200 centesimal being the most effective. In asthma, on account of the drug covering many of its symptoms, it is often of great benefit, having a marked effect on the distressing dyspnea peculiar to that disease. Again, in pleurisy, it is a very important remedy, and when we consider that this drug is an analogue of both Bryonia alba and Asclepias tuberosa (two of the best remedies we possess for pleurisy), we must but expect Sanguinaria Canadensis to hold a prominent place in the treatment of this disease. Intercostal myalgia also yields to the action of this drug. Sanguinaria Canadensis, being homeopathically related to hepatic torpor, jaundice and atony of the liver, the cough, which is often attendant on these affections, also comes under the curative action of the drug. This drug may also be prescribed with great benefit in cases of hectic fever, consequent on pulmonary inflammation, accompanied with cough, and a circumscribed redness of the cheeks. This circumscribed redness of the cheeks is one of the most prominent symptoms developed during the proving, and the remedy acts very promptly, especially if there are symptoms of languor and general torpor present—two great characteristics of this drug. In those forms of influenza in which a rawness or soreness of the throat, cough, pain in the breast, and diarrhea are the principal symptoms, Sanguinaria Canadensis proves very effective, as all these symptoms (according to the proving) are covered by the drug. In all the above cases, should indigestion be present, very satisfactory results may be expected from the use of the drug, as it is a remedy of priceless value in cases where there are a loss of appetite, nausea (of a periodic character), and deficient secretion of the gastric fluid. The drug acts as a stimulant to digestion, it excites the appetite, and acts as a tonic to the stomach. As weakness of digestion very often accompanies the various complaints enumerated in this article as coming under the sphere of this drug, the value of the drug will at once become apparent. The gastric symptoms may be mentioned here as consisting principally of a burning in the stomach of a painful character, with thirst, extreme nausea, water-brash, and vomiting, the nausea not being relieved by the vomiting. There is often vomiting of water of a very bitter taste, or of acrid and sour fluids, and pyrosis is often a most distressing symptom. There are also eructations, spasmodic, and of a very offensive character, generally arising from the fermentation of food, and the food itself often passes away undigested. It is also homeopathic to the evening diarrhea, characterised by pain in the chest, in those patients suffering from coryza and catarrh.

In concluding this article I wish to draw the attention of my medical readers to the wide sphere of action covered by this drug, and also to the comparatively little use made thereof, it being one of the most valuable drugs we possess in our materia medica. Besides the drugs already mentioned above, Sanguinaria Canadensis is also analogous to Lycopodium, Iris versicolor, Stannum, Calcarea carbonica, Arum, Bromine, Ammonium causticum, Causticum, Hepar sulphuris, Chelidonium, Lachesis, and Senega—truly a goodly array of most valuable drugs. As the result of past experience, both in the proving of the drug, and its action in the treatment of disease, I have the greatest confidence in its powers as a remedial agent, and have no hesitation in recommending its administration in those cases to which it is homeopathic.

A CASE OF PSORINUM IN SKIN AFFECTIONS.

By L. NARAIN MOOHERJEE.

Mr. J—, a young man of about twenty-two years, applied to me to be treated for his skin affection, which he called "itches." He said he was suffering from his present troubles since a year ago, and had been to doctors all over the place and applied almost every kind of external applications—ointments, &c.—which the profession as well as lay skill could prescribe for him, but all to no purpose. He received temporary relief from some, but permanent relief from none of them. After examining him very carefully I at first was of opinion that the case was one of true acarus itch, which idea I had subsequently to abandon, as no acarus could be found on his body, not even the faintest trace of any cuniculus which these parasites are accustomed to burrow in the skin. My conclusion of the case was that of an ecthyma pustula which either his former physicians might have mistaken for an itch, or had been a case of true acarus itch in the beginning, the sarcoptes hominis by this time having been entirely removed by external applications—of which the patient had used many—left a constitutional taint or dyscrasia for which the eruptions were persisting.

At the time I commenced treatment the patient was covered all over—except in the regions of head, face, and thorax—with pustular eruptions under different degrees of development, varying from the size of a millet-seed to that of a small boil discharging very foul-smelling pus and ichor. Every morning, he said, he must sit for about half an hour with a pin to let out the contents of those

that have ripened or formed pus over-night.

The patient was placed at first on Hepar Sulphuris Calcarium 3x for about three weeks, a dose every week, of course with intercurrent placebo. Hepar was prescribed more specially on account of his having been previously under allopathic treatment, and using many kinds of external ointments which might contain a lot of mineral substances. At the end of three weeks the patient was in no way better off. He was then given Psorinum 200c, two globules dry on the tongue, at first every fourth day, then every week, and subsequently every fortnight a dose. In about two weeks improvement was perceptible. The pustules, although persisting, commenced changing in their character and appearance, and in about two months vanished altogether, leaving no scar whatever, and the skin put on quite a healthy appearance, simultaneously with an improvement in the general condition of the patient. Since then, and it is now nearly more than two years, Mr. J—— is keeping quite a good health, without any kind of ailments whatever, and has picked up flesh considerably.

In conclusion I would state that whatever may be the intrinsic diagnostic value of the case in pathological point of view, whether it was a case of ecthyma pustula, or one of a mismanaged or neglected itch in which the sarcoptis hominis were killed by the previously applied external remedies, I have little or no opinion to offer, and so I leave it for others to decide from the facts mentioned herein. To my mind, a very staunch believer in Hahnemann's classification of chronic diseases, there is but little doubt that the patient had been suffering from the manifestations of a very highly developed psora, otherwise Psorinum in such a high attenuation, and given in such infrequent doses, would have been quite out of place. About radical cure of the disease I have no doubt, because the eruptions healed without leaving any scar—an indication which I always hold a sign of perfect cure in cases of skin affections.

Waltair, India.

LOBELIA PURPURASCENS.

By Erskine C. White.

I HASTEN to apologise for my want of care in writing about a Lobelia without first consulting a botanical work.

I obtained the name "Lobelia Rubra" from the Sydney Daily Telegraph newspaper, in a copy of which appeared a long account of Mr. Bray's observations, written by himself, and in which he employs the name "Lobelia Rubra."

I cannot ascertain the date of the copy—some (three) years back I believe—but I recognised the plant at once, by the name, from the rich crimson hue of the under surface of the leaves. I have noticed *red* as often as purple at different times on the leaves.

Subjoined are some of the leading symptoms and

indications:—

Head.—Overwhelming drowsiness (exactly as produced by snake venom), sickening, dizzy, headache, especially just between eyebrows.

Eyes.—Impossible to keep open, almost spasmodic

closure of lids (upper).

Mouth.—Thick slime in mouth. Tongue white and paralysed.

Heart.—Paralysed, the beats almost imperceptible.

Chest.—Sensation as if lungs were paralysed; superficial breathing.

Lungs.— Paralysed; breathing slow, almost ceases.

Intense prostration of all vital forces, and of the whole nervous system; deadly *chill without* shivering, but overpowering the system. By paralysing lungs the system becomes filled with carbonic acid gas; vomiting and coma set in.

Acts wonderfully like *Baptisia* tinct. in low typhoid conditions; combats the low, nervous prostration of La Grippe, seems to destroy the poison in the system as *Bapt*.

does in Typhoid.

Habitat.—Luxuriates in loose sandy soils, high or low land, hence contains flint in large quantities, and like Secale, Staphis., the common carrot, &c., agrees especially well with patients deficient in (Silicea) flint, and who are thus nervous, inclined to boils, of a hasty disposition, perspire profusely, and whose teeth are always decaying.

Holdsworthy, Liverpool, N.S.W., August 11th.

NOTE ON THE COMMON (DARK) WALLFLOWER AND ON THE "FOUR-O'CLOCK."

By E. C. WHITE.

I STILL notice the above taken alternately antidote the

chill and prostration of influenza.

In ϕ they remove all symptoms in three doses. I was led to use Wallflower from its feeding on *lime*, in which (and flint) I am deficient. Yet Staph does not seem to affect me.

SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

The opening meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thursday, October 6th, at eight o'clock.

Mr. Arthur Stoddard Kennedy, L.R.C.P., L.R.C.S. Edin., 45, Welbeck Street, London, W., was proposed as a member by Dr. Byres Moir and the President, Dr. A. C. Clifton.

The following specimens were shown: Hydronephrotic kidney due to stricture of ureter: successful nephrectomy, Mr. Dudley Wright; large calculus removed by supra-pubic cystotomy from a boy, Mr. Dudley Wright; round-celled sarcoma of thigh from a girl: successful amputation at hip-joint, Mr. J Johnstone; vesical calculus weighing 1,686 grains, removed by supra-pubic operation from a young man, Mr. J. Johnstone.

Dr. A. C. Clifton then delivered his Presidential Address, entitled, "The British Homeopathic Society: its raison d'être; The Growing of Souls." A title, he said, not chosen for the purpose of presenting something outré, or to shock their nerves, but because he believed in the growing of souls, and unless they grew in faith and knowledge they would wither and die. And, moreover, because he believed the chief function of the Society was for the distinct purpose of promoting the growth of soul in all its members in relation to their special calling as physicians and surgeons practising homeopathically, and in the same way extend the principles of the Society.

He then briefly outlined what he meant by Soul in the con-

nection with which he had used it.

Dr. Nield proposed a vote of thanks, which Dr. Clarke seconded, and the meeting closed.

EXTRACTS.

OLIGODYNAMIC PHENOMENA IN LIVING CELLS, AS DESCRIBED BY CARL VON NAGELI, OF SWITZERLAND.

Reported by W. P. Wesselhoeft, M.D., Boston, Mass.*

Charles Darwin astonished the scientific world in 1875 by the publication of experiments made upon insectivorous plants, in which he showed by repeated experiments (the results of which he himself was forced to acknowledge almost against his will) that the absorption of less than one-thirty millionth of a grain of phosphate of ammonia had the power of carrying a motor impulse to the tentacle of the Drosera rotundifolia, exciting a movement of 180 degrees. Darwin expresses his wonder at the action of such minute quantities "in organisms devoid of a nervous system."

Since then another scientist has arisen in Europe whose experiments with so-called insoluble substances have convinced him, and a number of pupils, that a *new force* must be invoked to explain the deadly, and sickmaking, action of metals on lower animal and vegetable organisms.

Carl von Nageli called this new force Oligodynamis, by which he wished to express the action of minutest particles of metals in aqueous solutions beyond the power of chemistry to establish.

In his studies he established the fact that the action of these metallic solutions on Spirogyra differed from chemical poisonings, not only in degree, but in the kind and manner of their action.

His experiments were begun in 1881 and continued with some interruptions till his death in 1892. Among his posthumous papers the one I am now discussing was found nearly ready for publication. This patient labour reminds us strongly of Hahnemann's work, who, with a few followers, experimented for nearly twenty years before he published his discoveries in the Organon of the Healing Art.

Nageli's experiments had their origin in the revelation,

^{*} Transactions of the I. H. A.—From the Journal of Homeopathics of September, 1898.

that water drawn from a brass faucet, or water distilled in copper vessels, had a fatal effect upon Spirogyra. then began to "potentise" this water, i.e., reduce the amount of poison. He distilled one litre of water in glass retorts, suspended four clean copper coins in this water during four days, and found that this solution killed his plants in a few minutes. When this water was poured away, the glass rinsed and washed carefully, and again refilled with neutral water, the Spirogyra also died in a very short time. If, however, the glass was washed out with diluted nitric acid, and refilled with fresh neutral water, the plants flourished and remained healthy. proved conclusively that a copper force was imparted to water from the walls of the glass vessel. Rinsing, washing, brushing, and even boiling had little effect upon the glass; not till a mineral acid had been used did the glass vessel lose its oligodynamic properties.

Again he found that this oligodynamic water poured into a new, clean glass vessel transferred its poisonous properties to the walls of the glass, and in turn was again

able to medicate neutral distilled water.

He says: "Glasses with oligodynamic after-effects (nachwirkung), lose their power very slowly after being repeatedly refilled with neutral water, which is allowed to stand in them for a while, and somewhat more rapidly if they are boiled in neutral water."

These experiments were frequently repeated, and with many variations, with precisely the same results. The

facts were irrevocably established.

It now became a duty to endeavour to explain these facts. It seemed impossible to Nageli's mind that this force could originate from a soluble combination. How could it be possible that such an incredibly minute quantity of almost insoluble metals should have such deadly effects upon living cells? How could it be possible for even a soluble substance, which adhered to the surface of a glass, to have such potency in its after-effects (nachwirkung) which had been repeatedly washed out, rinsed and boiled, and still be able to transfer to neutral water, for weeks, its death-dealing qualities?

Nageli further records an attempt to ascertain the amount of copper dissolved by suspending twelve small copper coins in twelve quarts of neutral water during four days. These twelve quarts were slowly evaporated and

the minute residue, supposed to be hydroxyd of copper, was found to be in the proportion of one part of copper to

nearly one hundred million of water.

Therefore this solution of 1:100,000,000 was capable of transferring its medicinal qualities through a series of glasses, each of which had been washed, rinsed, and each glass retained its power to transfer oligodynamic copper properties.

Nageli also demonstrated the difference between chemical poisoning and the action of oligodynamic water upon Spirogyra, observing the symptoms of the plant while under the influence of copper solutions in which no copper

could be chemically demonstrated.

He says: "There is not the least doubt that the stronger concentrated solutions of copper have a chemical poisoning effect, while those of the weaker solutions have a sick-

making effect" (before they kill).

He considers the chemically poisonous effects to lie from the proportions of one part of copper to one thousand up to one part of copper to ten thousand of water. The oligodynamic effects lie between one part of copper to 100,000,000 up to one part of copper to 1,000 million of water.

The discoveries of Nageli are exciting much interest among scientists in this field of observation. It is very singular and significant, however, that the experimenters, so far as I know, have confined their observations only to the first solutions of copper one 100,000,000 and have nothing to say about the transference of oligodynamis to

vessels in which this solution has stood.

Thus F. S. Locke (Journal of Physiology, 1895) says: "A piece of bright sheet copper 4.5 x 1.5 c.m. placed in 200 c.c. of water distilled in glass, produced complete disintegration of the tubifex in less than twenty hours. Under exactly the same circumstances in a parallel experiment, three tadpoles lived only nine hours. The marked influence of contact of distilled water with copper, either as such or in brass, amply explains the destructive 'aqua destillata,' and points to the advisability of avoidance of all contact with this metal of water to be used in physiological experiments. The result points to Spirogyra being more obnoxious to traces of copper than tubifex, for a water containing one part of copper to 77,000,000 of water kills the plant in one minute at most."

Here you will observe no mention is made of experiments with *contact potencies* mentioned by Nageli, who declares he found poisonous (or sickmaking) effects in solutions which he calculated in proportions of one part to 1,000,000,000.

O. Israel and Th. Klingmann (Virchow's Archiv., exlvii. page 293) say in their experiments corroborating Nageli's

observations:

"We used metal foils, which are more easily cleansed and measured, and extending our experiments not only to different species of Spirogyra, but also to bacteria (typhus, cholera, &c). Those experiments proved that infinitesimal quantities of metallic salts absorbed by water produce most marked disturbances in the life of lower organisms. The dissolved quantities are so extremely insignificant that they can be demonstrated chemically only by evaporating vast quantities of the solution, and every drop of this infinitesimal solution is capable of producing injury."

Then they try to prove that this action nevertheless must be chemical, but they experimented only with the first solution of 1:77,000,000 and mention nothing of experiments made with contact potencies which Nageli lays so much stress upon and which cannot be demonstrated by any quantity of zeros behind the unit. How would it be possible to demonstrate the amount of copper molecules or atoms contained in a vial in which a solution of 1:77,000,000 had stood for a while, then this vial carefully cleansed by washing and wiping and refilled with neutral water? Still this contact made the second (yes, even third and fourth) solution injurious to the plant. I think Israel and Klingmann would have found some difficulty in demonstrating the presence of copper in such proportions by chemistry.

It is the old story repeated, and Hahnemann's words should ring in our ears: "Machts nach, aber machts

genau nach."

This subject is evidently interesting a number of scientists at the present time, and I hope to be able to add more observations, which may have accumulated, at

our next meeting.

It seems that "science" is gradually advancing to our principle and doctrine in recognising forces and energies inherent in substances which cannot be grasped by the hand, seen by the eye, measured by rule, or weighed in scales, forces inherent in matter made potential by tri-

turation and potentising.

I am well aware that these solutions have little in common with our high and highest potencies except this one fact, viz., to account for the potency of such a division of matter, Nageli was obliged to invoke a new force in order to explain the energy of these solutions. His experiments were confined to a low order of plants, organisms devoid of a nervous system. Hahnemann discovered this infinitesimal power of insoluble substance while observing organisms not devoid of a nervous system, and carried his potencies up to the 30th centesimal, and even higher. Still more wonderful was his discovery that substances, which in their crude state do not evince the least medicinal effect upon the human body, become potential by dynamisation.

Nageli has called this new force, "Oligodynamis," which, translated means, "minute power," or "power of the minute." Hahnemann more than eighty years ago, wrote, pp. 269, Organon: "The homeopathic healing art develops for its purposes the immaterial (dynamic) virtues of medicinal substances, and to a degree previously unheard of, by means of a peculiar and hitherto untried process. By this process it is that they become penetrating, operative, and remedial, even those substances that in a natural or crude state betray not the least medicinal power upon the human system." Nageli calls this force by one name, Hahnemann by another; they both were on a similar scent. Hahnemann called it medicinal force (arzneikraft), because it can be observed only in its action upon living organisms, but not by chemical, physical or microscopical test.

Let me quote a few words from a paper by Dr. B.

Fincke, which I think is in point:

"Infinitesimal is that quantity which is so minute as to be unassignable. It is, nevertheless, something which has a reality, though it escapes our observation. There is an inexhaustible supply of infinitesimals in nature which the human understanding will never be able to use up in its endeavour to peep behind its mysteries. Thus it is that an essential contradiction prevails in the claims of mathematics for infinitesimals, and in the repulsion which they receive at the hands of physicists and chemists in their opposition to homeopathy, though they themselves

seem to have great need of it, as the artificial atomic and molecular hypothesis proves, which is built up to fill the void felt by their branches of science. . . . As soon as the infinitesimal can be assigned as the greatest mathematicians of this age have calculated the hypothetical atom, it loses the quality of infinitesimality. It becomes a mere minutule, . . . but the thus assigned and calculated minutule, be it ever so small, its very determination points to still smaller entities which escape, as yet, alike observation and calculation and recede into the depths of infinitesimality, though we have an idea of their existence. . . . By the progress of science, our observation discovers new values. . . . The most familiar instances in physics and chemistry are the discoveries of new substances by the spectroscope which had escaped the so far known instruments of research, and the radiant condition which matter seems to assume under the influence of electricity in a most attenuated state."

"Crookes carried the rarefication of air to $\frac{1}{200000000}$ of an atmosphere, which therefore compares to a little more than the third homeopathic potency. By Bunsen's spectroscope matter can be seen as far as the ninth or tenth centesimal potency. This is all that physical science so far has accomplished in gaining minutular values from the world of infinitesimals. Why should Hahnemann and the homeopathicians be so bitterly assailed, who by their process of potentiation of substances, and by the application of preparations thus obtained upon the human organism in health and in disease, have succeeded in showing values which far exceed the wonderful feats of modern science? It is, therefore, a great injustice that not only physicists but also members of the homeopathic profession ridicule the Hahnemannian infinitesimals and try to persuade the people that advocates of such ridiculous remedies deserve no credit or confidence, . . . and yet the reproach that homeopaths were dealing in infinitesimals was not even a valid one, because the remedies being assigned and determined by their (crude) medicinal action lost the characteristics of infinitesimality. . . Since Hahnemann's time the series of potentiation has gradually risen higher and higher till it has arrived at the five millionth potency. . . . This high potency shows not only morbific and curative power, but its action can only be seen by the electro-magnetic method of neural analysis."

"It undoubtedly follows that even such high potency is no more an infinitesimal, but a magnitude of definite value, which points to still smaller magnitudes lying beyond that limit."

This was written and published in 1882. Since then the potencies have been raised to the hundred millionth and above, and used by those homeopaths, who know how to use them, with such success that their efficiency is

established beyond a doubt.

In 1880 our colleague, Dr. Buchmann, in Alvensleben, Germany, carefully cleansed fifteen ten-mark gold pieces, placed them in a glass vessel, carefully avoiding any friction. Then fifteen gramms of distilled water were poured into the vessel, and allowed to stand for half an hour. He proved his solution on himself and on a lady, who was specially sensitive to the influence of metals. He records fifty symptoms observed, which correspond almost exactly to the symptoms of Hahnemann's collection in the pathogenesis of Aurum metallicum. The dose taken by each prover was one spoonful of the solution. He desired to show that gold was soluble in water, even after having been exposed a very short time. Dr. Buchmann's experiment preceded Nageli by one year. Buchmann knew before his experiment was made that metals were soluble from his knowledge of the action of high potencies. and this has been known by him and many others for over half a century.

Prof. Nageli's experiments are recorded in the Neue Denkschriften allegem. Schweitz. Gesellschaft, vol. xxxiii.

Part i., 1893, published in Zurich.

ARBORIVITAL MEDICINE.

THE SINGLE DROP DOSE CURE.

There is nothing within the domain of invention and scientific discovery which affects more profoundly the interest of all mankind than that concerning the cure of human ailments and the alleviation of pain. These are not the pages in which to propound any particular medical doctrine, but attention may be fitly directed to a new application of remedies and form of treatment practised with remarkable success by a well-known physician, Dr. Robert T. Cooper, for seventeen years the specialist for ear diseases at the London Homeopathic Hospital.

This scientist has discovered that it is from the fresh juice of the living plant rather than from its dried and dead roots and seeds that the best medicinal results are derived. The primary object of drying is to preserve the plant, the presence of water in it tending, of course, to hasten the putrefactive processes which all dead organic matter must undergo. The effect, therefore, is merely to make the putrefaction very much slower than it otherwise would be, and to cause it to take a different course to reach the inevitable result. Hence, if the plant is not perfectly fresh dried, it is impossible to say what changes have taken place in its curative as well as its other constituents, but it is tolerably certain that they will no longer contribute to the special efficacy for the sake of which the plant is used in physic.

The foundation of Dr. Cooper's idea cannot be better expressed than in his own words. He says: "All animal life is derived from vegetation. It has been philosophically asserted that man is but the expression of the soil, but it is equally, nay, more obviously true, that all vegetation is but the expression of the soil. From a scientific point of view, animals may be said to be moving vegetables; and the more science advances, the more difficult it becomes to define what

is an animal and what is a vegetable.

"Man's life, then, being derived from vegetation, and vegetation being placed upon the earth, so to speak, to prevent the calamities that, without it, would occur, it is not unreasonable to suppose that there must be running through vegetation a force capable of neutralising diseases, just as we know that there is material for the supply of bodily wants. That force is, I assert, the growth force, or, if you like it better, the plant force, to be found in the vegetable kingdom. In other words, the life force of plants is capable of exerting a curative effect upon the diseases of animal life."

Dr. Cooper gives to his remedies the name of "Arborivital Medicine," and their potency must be remarkable from the number of successfully treated cases quoted, both chronic and acute. We can testify to at least one case which has come under our own observation. It is surprising that there should be so many cures as those cited by Dr. Cooper in Cases of Serious Disease Saved from Operation, the treatment of which is usually regarded as almost exclusively reserved for

the surgeon.

But Dr. Cooper completes our astonishment when he tells us that it is by single drop doses, and these often given at long intervals, that his cures are effected. He defines an "arborivital dose" as a "single drop of the preserved juice of a fresh plant that is allowed to expend its action till no evidence is forthcoming of this action." He finds that "single drops of living plants, not subjected to any special preparation, are often followed by great and beneficial change in the human body not obtainable in any other way," and adds: "I can say that during the thirty years I have been in practice I have never seen such complete and satisfactory cures of obstinate and chronic disease as I have since I relied upon a single dose of medicine, allowed to act in its own way, and uninterfered with by additional doses of the same or of other drugs."

But in many instances, as can be readily supposed, "no appreciable effects will follow from a single dose, though in such cases it is not desirable to give a second dose of the same drug within a short interval: a week should elapse before a

second is partaken of."

Naaman of old said that had he been told to do "some great thing" for his complaint he would have done it, but he turned from the Prophet with scorn when advised to use a little water and be cured. And we can imagine that the very simplicity of the arborivital remedies will inspire scepticism in many who

would believingly do or swallow any "great thing."

Dr. Cooper's position in the medical world is, however, such as to command from all the highest respect for his views on the problems connected with medical science, and when it is remembered that an allopathic dose is defined as the "greatest quantity of a drug that can be given short of producing poisonous effects," not a few even of the dubious will prefer, in the matter of drugs at least, the chance of death from the drop too little to the drop too much.—*Invention*, October 8th.

SIGNATURES.

THE Homeopathic Recorder has a very instructive note on this topic, and the Homeopathic Envoy of the same date also makes reference thereto. We quote them both below:—

Apropos of the "what-will-the-medical-world-think" attitude of some of our English friends in regard to Doctor John H. Clarke's paper on "Signatures," the following from Von Grauvogl (p. 169–70), one of the most truly scientific homeopathic physicians of modern times, may not be without interest:—

"Proud of its physiological acquisitions in modern times, the physiological school labours to repudiate everything old, a priori, as if our predecessors had been incapable of making observations and practical experiences. It rejects them, however, as it does everything not brought forth by itself.

"Nothing in the history of medicine does it condemn and despise more than the signatures of old physicians, who are said to have drawn conclusions from the external characteristics of a substance as regards its effects in disease. Thus, according to the ancients, Digitalis must be of use in blood-diseases, because its flowers are adorned with blood-coloured dots; Euphrasia was famous as a remedy for the eyes, because it has a black spot in the corolla which looked like the pupil. lungs of a fox must be specific against asthma, because this animal has a very vigorous respiration, and, for sooth, what is called nettle tea must afford relief in nettle-rash, &c. The physiological school of the present day, on the contrary, knows no other point of support than the biological and etiological conditions, or the pathological products, in order to find a substance which may serve as a remedy. But are its conclusions a whit better than the conclusions of the ancients from their signatures? Because fever has the signature of heat, remedies must be used which abstract heat; this is a conclusion the same in form and value as that, because nettle-rash burns, stinging-nettle tea must be drank. I am free to confess that I have more respect for the physicians of earlier times, and presume that they made those so-called conclusions from signatures a posteriori, though incorrectly. It is very probable that they first observed the success of these remedies, and then sought, from some of their external peculiarities, a suitable characteristic according to the notions of those times; that thus the result was the main thing and the explanation entirely a secondary matter; that consequently, in the making of new experiments with such substances, a guiding principle, not at all useless, is presented; for, to subordinate accidently observed facts to the necessary laws of nature ever remains a maxim of science. Thus the only question is, to institute new experiments and observations to be able to meet the demands of this maxim rather than to reject them with self-complacent conceit of wisdom."

To the foregoing we might say that the signature of true "science" (to *know*) is that it is contemptuous of nothing save the self-complacent conceit of wisdom.—*Homeopathic*

Recorder.

Once homeopathy was synonymous with medical liberty; that was when homeopathy lived in a garret and on a crust and wasn't afraid of the cohorts of allopathy and, indeed, rather courted a fight with them than not. But now that homeopathy is well housed and fed and has obtained a standing in society there has arisen a great fear of what the medical Mrs. Grundy will say, forgetting that it was by means of the bold upholding of the truth and a contemptuous disregard of what

Mrs. G. might say or think that made the present position

possible.

The "Doctrine of Signatures" is a curious one, very old, very little known, yet which seems to contain elemental truth. Dr. John H. Clarke recently read a paper on this subject before the English homeopaths, and the only way we can account for the fuss it raised is by the theory that the members were under fear of the medical Mrs. Grundy. In our own country, too, there is something of this, else why should one of our journals in reporting a recent meeting of homeopathic physicians state that "whenever any one had the courage" to speak up for homeopathy he was "applauded"! Think of it—requiring "courage" to talk in favour of homeopathy at the meeting of a homeopathic body!

All our medicine, save a few pampered darlings of medical fashion, like "Antitoxin," "Lymph," coal tar, &c., comes to us originally from folklore, and possibly the old folk got on to them by what we now call "signatures." If this be true the doctrine is the ancestor of medicine, of whom let us not be

ashamed like a lot of parvenus.—Homeopathic Envoy.

The Calcutta Journal of Medicine for September, just to hand, contains a leading article on "Signatures" by the editor, Dr. Mahendra Lal Sircar, one of our most prominent and able representatives in India. In the course of the article he says:—

We nevertheless think that Dr. Clarke has done well to have drawn attention to a doctrine which did some, perhaps considerable, service to medicine in its nebular stage, and which, as suggestive of provings, may be of real service to it still in its present settled and advanced stage. But whether this be so or not, we fail to see the justification for the acrimonious criticism to which he has been subjected by some of our British colleagues. For men who are still the victims of relentless persecution for having emerged from ignorance and prejudice and bigotry to bind themselves and others to a particular line of thought and inquiry, is to take the last plunge into the slough of ignorance and prejudice and bigotry they have emerged from.

Bellis perennis for Results of Cold Drinks.—Schroeder, as far back as 1748, recognised the remarkable power of Bellis perennis over ills that sometimes follow the drinking of something cold when the body is overheated, or the sudden chilling of the body by getting wet when overheated. If a disease dates from such a cause try the remedy, five drop doses of the 6 (mother tincture).—Hom. Envoy.

REVIEWS.

CHANGE OF LIFE.*

THERE is no medical writer of the present day who gives to the world so lavishly of the fruits of his clinical experience as Dr. Burnett; and as Dr. Burnett emphatically believes in the possibility of cure, and makes curing his aim, his works have for the clinical worker an amount of refreshment that we look for in vain in books of the academic mould. In his preface Dr. Burnett says:—

"I have myself never heard a clinical lecture on the menopause that was the least help to me in my medical work, or one that afforded to my mind, the least satisfaction; neither have I ever read any article or book on the subject that afforded me any mental enlightenment. As far as I know my way about in medical literature, the menopause is, to say the least, a very dark region indeed, wherein we are left to grope about in quest of unknown quasi-ghostlike awfulnesses.

"I have always tried at least to strike a match in any dark corner where medical mysteries midst ghastly terrors most abound; and although the illumination emanating from one solitary match is not exactly blinding, still it is more hopeful than utter darkness."

We have no doubt readers will agree with us that Dr. Burnett has thrown much more than a match-light on this dark subject, though he has left plenty of exploring for others who may like to follow him. There is much help on clinical matters in the volume that is not directly related to his subject, but for which readers will no doubt be grateful. We have sometimes heard it said that Dr. Burnett's style is too colloquial. That is a matter of taste. What is more to the purpose is that his works have good stuff in them and are eminently easy and pleasant to read.

BIOCHEMIC THERAPY.+

THERE is a melancholy interest about this work in that it contains the last word of the author. Schuessler was seized with a paralytic stroke on March 14th, just

* The Change of Life in Women and the Ills and Ailings incident thereto. By J. Compton Burnett, M.D. London: Homeopathic Publishing Co., 12, Warwick Lane, E.C. 1898. Cloth, 3s. 6d.

† An Abridged Therapy Manual for the Biochemical Treatment of Disease. By Dr. Schuessler, of Oldenburg. 25th Edition, in part re-written. Translated by Professor Louis H. Tafel. Philadelphia: Boericke and Tafel. London: Homeopathic Publishing Co. 1898. Price 5s. when he was seeing the work through the press, and he recovered from the effects of it sufficiently to make the final corrections of the last sheet before a return of the symptoms set in. He passed away on March 30th. present volume is a faithful reproduction of the original by Professor Louis H. Tafel, the only difference being that an interesting memoir of the author is included, being translated from the Biochemic Journal (Mitth. ueber Biochemie) of May last. The translation of the work is very pleasant reading, and appears to be a very accurate rendering of the original. Professor Tafel, however, does not seem to be perfectly acquainted with technical expressions. The appearance of "cephalcematous" and "conjunctive tissue," and other like words and phrases, give an odd look to the passages in which they occur. However, the sense is always plain and that is the main consideration.

We have re-read the work in the final shape given to it by its author with very great interest. One remarkable fact which will strike most readers is that one of the remedies has dropped out. It is no longer "The Twelve Tissue Remedies," but "the Eleven." This is a very rare circumstance. Most originators of therapeutic systems tend to multiply their materials. Schuessler has left out Calc. sulph.—with an apology. This is not because it is not a useful medicine; but because it is not a constant constituent of the tissues, only appearing in two of the bile products. Sodium phosphate and Silicea are left to share its work.

Very interesting and very important is Schuessler's dissertation on the Constituents of the Human Organism, and the manner in which he traces out the indications for his remedies is nothing less than masterly. That he is right as far as he goes we fully believe, and the amount of therapeutic work which may be accomplished by one who thoroughly knows his tissue remedies is very great. Probably many a homeopath has, like ourselves, at one time of day hailed Schuessler's abbreviated therapy as a haven of rest after a storm-tossed career on the ocean of Materia Medicas and wanderings in Repertorial labyrinths.

—Not more than a dozen remedies and a tolerably uniform dosage for each! But though Biochemistry is a very great help, it is not by any means the whole of therapeutics, as no doubt many others besides ourselves have found out.

Schuessler, it must be remembered, was a very good homeopath for many years before he became a "biochemist," and though he did not think so he remained a good homeopath all through. He was something like the late Dr. Sharp, of Rugby, who dubbed homeopathy "antipraxy," and then imagined that he had discovered it himself. Biochemistry is a legitimate development of homeopathy and not something radically different from it. It is quite open to any one to choose his indications on whatever plane he thinks best. Classical homeopathy takes its indications from the symptom plane; and the indications given by Schuessler show that the indications of structure-relationship in no way contradict the teachings of homeopathy. The point of similarity in Schuessler's system is between his medicaments and the cell salts of the organism. His theory has led him to confirm many of the indications for known homeopathic remedies, to add others, and to introduce new remedies into the homeopathic pharmacopeia. His account of the chemical actions that take place in the tissues is both interesting and important; but we cannot accept it as being a complete solution of the action of his remedies. He used attenuated preparations, preferably the 12x, because he maintained that the cells required very attenuated quantities of the salts. But the theory that it is by feeding the cells that curative action ensues does not explain how the higher infinitesimals, as we can testify, bring about identical results.

But be that as it may, Schuessler has done a great work, and his book, especially this latest edition, should be in the hands of all homeopathists. We are not of those who would restrict the field of therapeutics in any of its developments which respect the canon, primum non nocere; therefore we welcome the evidences of the vitality of Schuessler's work. There should be scope for its missionary work in the allopathic ranks if their souls

can rise to the 12th decimal attenuation.

Star Lore for October (Glen and Co., 328, Strand. Price 3d.) contains, among other articles, the horoscope of the Editor of The Homeopathic World.

ANSWERS TO CORRESPONDENTS, NOTES AND QUERIES.

** In this department we shall be happy to reply to any inquiries relating to homeopathy or to the matter of our magazine that our correspondents may like to address to us. We cannot, of course, undertake to give medical advice in particular cases, which is the business of a medical attendant; but if our medical readers like to put queries to each other regarding points of practice or puzzling cases, we shall be happy to insert queries and replies.

BŒNNINGHAUSEN'S POCKET-BOOK.

As no one has volunteered to enlighten our correspondent, Mr. Kelkar, whose query we inserted in our September number, we will endeavour to do so ourselves. (1) The "Relationships" show the genius of a remedy by revealing those which are most like the remedy compared, in each of the respects tabulated. (2) By knowing the remedies most closely related in any required respect it is easy to compare them in their side relations to see which most closely corresponds all round to the case for which a remedy is sought. Having found from the list of relationships which remedies most closely resemble a medicine which has ceased to benefit a patient, it is easy to find among these the next best remedy to give. (4) Bænninghausen means, so far as we understand him, that some remedies cause concomitant symptoms much more markedly than others, and if a case occurs in which the main symptoms are found, and in which there are concomitants, be these what they may, if two remedies correspond to the main symptoms and only one of these had concomitants (of whatever kind), that would be the simillimum. ED. H. W.

NOTIFICATION.

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

OPENING-HULL.

A correspondent writes: "I venture to suggest to you that this city offers reasonable prospects of success to a good homeopathic practitioner. Hull has a population of about a quarter of a million, and is full of allopaths, and there appears to be every chance of success for a capable homeopath who could afford to make the trial, and I believe from my own knowledge he would not have to wait long."

Dr. Goldsbrough has opened West End consulting rooms at 64, Welbeck Street, Cavendish Square, W., where he attends on Tuesday, Thursday, and Saturday from 11.30 to 1.

VACANCY-KING'S LYNN.

Mr. Walter Powley, of 19, St. Margaret's Place, King's Lynn, writes to say that no one has taken up the practice of the late Dr. Rhodes Reed, who has now been over twelve months deceased. He says there are many inquirers, and he will be pleased to give particulars to any medical practitioner who might think of settling there.

LONDON HOMEOPATHIC HOSPITAL, GREAT ORMOND STREET. BLOOMSBURY.

Hours of Attendance: - Medical (In-patients, 9.30; Out-patients, 2.0), Daily; Surgical, Mondays, Tuesdays, Fridays, and Saturdays, 2.0; Diseases of Women, Tuesdays, Wednesdays, and Fridays, 2.0; Diseases of Skin, Thursdays, 2.0; Diseases of the Eye, Mondays and Thursdays, 2.0; Diseases of the Throat and Ear, Wednesdays, 2.0; Diseases of Children, Mondays and Thursdays, 9.0 a.m.; Operations, Tuesdays, 2.30; Dental Cases, Thursdays, 9.0 a.m.

MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Burnett (J. C.). Curability of Tumours

Burnett (J. C.). Curability of Tumours with Medicines. F'cap. 8vo, pp. 332.
(Homeopathic Pub. Co. 3s. 6d.)
Esmarch (Dr. Friedrich). First Aid to the Injured. Six Ambulance Lectures. Translated from the German by H.R.H. Princess Christian. 6th ed. Illust. Cr. 8vo, pp. xii-117. (Smith, Elder & Co. 2s.)
Haig (Alexander). Diet and Food. Considered in Relation to Strength and Power of Endurance. Training.

Considered in Relation to Strength and Power of Endurance, Training, and Athletics. With 5 Illustrations. Cr. 8vo, pp. 94. (Churchill. 2s.) Hare (F. E.) The Cold-Bath Treatment of Typhoid Fever. The Experience of a Consecutive Series of 1992 Cases Treated at the Brisbane Hospital. With Illustrations. 8vo. pp. 208. With Illustrations. 8vo, pp. 208.

(Macmillan. Net, 6s.)

Hartridge (Gustavus). The Refraction of the Eye. A manual for Students.

With 104 illustrations. 9th ed. Cr.

with 104 illustrations. 9th ed. Cr. 8vo, pp. 284. (Churchill. 6s.)
Kingzett (C. T.) and Homfray (D.)
A Pocket Dictionary of Hygiene.
32mo, leather, pp. 108. (Baillière, Tindall and Cox. Net, 2s. 6d.)
Lucas (E. W.). Practical Pharmacy.
An Account of the Methods of Manufacturing and Dispension Pharma

facturing and Dispensing Pharma-ceutical Preparations. With a Chapter on the Analysis of Wine. With 283 illustrations. Roy. 8vo,

with 255 Hustrations. Roy. 8vo, pp. 544. (Churchill. 12s. 6d.) Matthew (G. Porter). Clinical Obser-vations on 2,000 Obstetric Cases. 8vo, sd., pp. 72. (Simpkin. 2s.) Ostler (William). The Principles and

Practice of Medicine, Designed for the Use of Practitioners and Stu-dents of Medicine. Roy. 8vo, pp. 1,200. (Young F. Pentland. 24s.)

TO CONTRIBUTORS AND CORRESPONDENTS.

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

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

envelope.

All advertisements and business communications to be sent to the "Manager" of the Homeopathic Publishing Company, 12, Warwick Lane, Paternoster Row, London, E.C.

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

CORRESPONDENTS.

Communications received from Mr. E. C. White, Holdsworthy, Liverpool, N.S.W.—Dr. Pullar, London.—Mr.Mookerjee, Waltair, India. — Mr. Frederick Kopp, Greenwich, N.S.W.—Dr. Goldbrough, London.—Dr. Hayward, Birkenhead.—Dr. Clifton, Northampton.—Mr. Jesper, Southport.—Mr. Waddington, Bradford.

BOOKS AND JOURNALS RECEIVED.

Hom. Rev.—Chemist and Druggist. — Zoophilist. — Animals' Friend.—Allg. Hom. Zeit.—L'Art Médical.— Il. Secolo Omeop.—Gaz. Méd de Paris.—Reformador.—La Homeopatia.—N. A. J. of H.—H. J. of Obst.—Med. Century.—H. Envoy.—Jr. Orif. Surg.—Archiv. f Hom.—Med. Counsellor.—Indian Hom. Review.—Calcutta J. of Med.—H. Maandblad.—Pacific Coast J. of H.—American Homeopathist.— H.

Monatsblätter.—Hahnemann Advocate. —Rev. Hom. Française.— Mind.—Med.Times.—Minn.Hom. Mag.—Critique. — Clinique. — H. Tidsskrift.—Zeit. Berl. V. h. A.— Pub. Health Jour.—Vaccin. Inquirer.—Hom.News.—Rev.Hom. Belge.—Hahnemannian Monthly. -Biochemic Therapy, by Dr. Schuessler. Author's 25th edition, translated by Professor Louis H. Tafel, with memoir of author.— Facial and Sciatic Neuralgias, with Repertories and Clinical Cases. -F. H. Lutze, M.D.—Change of Life in Women, by Dr. Burnett. -The Problems of Homeopathy Solved, by Dr. Cooper, 2nd edition.

The Homeopathic Morld.

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Associated Symptoms. Hindrances to Progress.

Snake-Venom—Its Action and Effect.

EXTRACTS:

Black-water Fever and Quinine. Indications for Rhus.

Natr. Sulph. in Asthma from Exertion. The Beneficial effects of one Disease

as regards Another. Identity of Avian and Human Tuber-

culosis.
Quinine Hemoglobinuria.

The Wonderful Possibilities of Liquid Air.

REVIEW:

Sight-Singers' Aid. Parts I. and II.

Answers to Correspondents, Notes
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MEDICAL AND SURGICAL WORKS.

TO CONTRIBUTORS AND CORRESPONDENTS.

HOMEOPATHIC WORLD.

DECEMBER 1, 1898.

MATERIA MEDICA REVISION AND THE BRITISH HOMEOPATHIC SOCIETY.

WE fear from some of the remarks which fell from speakers and readers of papers at the November meeting of the British Homeopathic Society that some of our warnings have not been taken so seriously to heart as we could have wished. In our issue of January last we published a leading article on "The Tyranny of Words," and one of the most intolerable of the tyrants against which we warned our readers was the word "scientific." We pointed that the word "has no absolute meaning whatever"; and we concluded our reference to this fin-desiècle monster as follows: "Now if it could always be borne in mind that the word 'scientific' is a purely question-begging term unless it is (either explicitly or implicitly) qualified by a statement of the precise sense in which it is used, and of the personal equation of him who uses it, the occasion of a vast amount of personal bitterness and misunderstanding would be got rid of." After having put the matter thus plainly it was the reverse of flattering to our self-esteem to hear this pretentious adjective quoted and worshipped as if its true proportions had never been exposed. Something "scientific" in the way of a materia medica is what most speakers seemed to want, and yet no one took the trouble to explain just what he meant by "scientific."

As far as we can gather throughout all recent materia

medica discussions there are two main directions in which efforts tends. One set of workers seek to bring about some concise and practical arrangement of the materials already in our possession; the others aim at reducing the materia medica to practical limits either by re-provings on some cut-and-dried plan or by wholesale excisions on some more or less arbitrary method. We do not think that any cutting-down plan will give satisfaction to anybody, with the possible exception of those who are actually engaged in the operation. With regard to the work of presenting the materia medica, with all its latest additions and developments, in one organic whole, of immediate practical utility, such a work, in our opinion, if it is ever to be accomplished, must be the outcome of a single mind. Otherwise it must lack the coherence and unity essential to success.

But for all that there is much that may be accomplished by co-operation, and there are one or two suggestions that we would submit, with deference, to the British Homeopathic Society authorities. First and foremost is the necessity for putting the Cyclopedia of Drug Pathogenesy into schema form. Until this is done, that work is a sealed book to the practical man, notwithstanding Dr. HUGHES' Index. Next in importance is the compilation of special repertories. In plan there has been nothing better produced than the Cypher Repertory—barring the cypher, which we think a mistake. But in spite of the cypher it is often possible to find a wanted symptom by its means when it cannot be found elsewhere. Society workers would compile a Repertory of the "Course. Progress, and Direction of Symptoms," such as is found in the Cypher, completing it throughout all the departments, it would be a vast assistance to everyday homeopathic practice. Another Repertory of the "Sequence of Symptoms and Alternation of Symptoms" would be of great utility, and such a work is well within the competence of co-operative effort.

It is by work of this kind that the value of the materia

medica can be best estimated; and we are convinced that if men knew better what they wanted to look for and where to find it, we should hear less of the cry for cutting down the materia medica by any method, whether "scientific" or otherwise. We want useful roads made through our vast territories, and we want good maps. But we are not "little Englanders": we will not surrender any of the therapeutic regions we have conquered for the sake of making the work of organisation more easy.

THE DIRECTORY, 1899.

WE wish once more to call the attention of our readers to this excellent and now indispensable work; and to point out the desirability of having it as full and accurate as possible. This can only be secured by the prompt and loyal return of the circulars, filled up with the information asked for. It must be borne in mind that the *Directory* is the only means possessed by our *confrères* abroad—in the Colonies, the United States, and the Continent—of knowing who are the representatives of homeopathy in this country; and it is not polite to them to refuse them this opportunity of knowing where and when the British representatives of homeopathy are to be found.

In this connection we may point out that some gentlemen whose names appear, do not enter their consultation hours. We think it a pity that they do not, and some American readers have complained that they have been inconvenienced by not knowing at what hours to call, or direct their patients to call, on medical men on this side.

The Continental portion receives more particular revision each year of issue, and it is hoped eventually that the circular of the *Directory* may be annually sent to each of our Continental representatives. In the meantime we are glad to know that the list for each nation is compiled under the eye of the most competent local authorities.

NEWS AND NOTES.

THE HAHNEMANN MONUMENT FUND.

HOMEOPATHIC WORLD LIST.

WE are pleased to acknowledge the following additional subscriptions to the above fund:—

The second second		£	S.	d.
Dr. Burnett (London)		 1	1	0
Dr. Cooper (London)		 1	1	0
Dr. Bradshaw (London)	• • • •	 1	1	0
Dr. Murray (Folkestone)		 1	1	0
Amounts previously received		 8	1	0

Of these sums we have transmitted to Dr. Cartier £11 4s. Dr. Cartier has done noble work in regard to the whole transaction, and it will give us much pleasure to transmit further subscriptions from any of our readers who may not have subscribed through other channels. The conditions imposed by the cemetery authorities stipulate for a monument to cost not less than a named sum, which must be raised within a given time. The amount received and promised up to the present falls considerably short of the figure named, so we hope intending subscribers will lose no time in sending in their names.

DR. C. E. FISHER.

WE have been favoured during the past month by a very pleasant call from Dr. C. E. Fisher, of Chicago, the well-known editor of the Medical Century, and past president of the American Institute of Homeopathy. We were very glad to renew our acquaintance with Dr. Fisher and to exchange news with him. One very gratifying piece of information he had to give was the use he had made of the British, Colonial, and Continental Homeopathic Directory, for his mission abroad was to take charge of a patient to the Continent. As we have pointed out elsewhere, it behoves all British homeopaths to do their best to make the Directory full and complete, for the sake of our brethren in distant lands, who look to it for help and information.

A SUCCESSFUL BAZAAR AT BOURNEMOUTH.

We congratulate the homeopaths of Bournemouth on the success of the bazaar in connection with the Hahnemann Home. It was opened by the Lady de Tabley on Wednesday, November 2nd, at twelve o'clock. Their Royal Highnesses Princess Christian and the Duchess of York were among the patrons, and the latter sent some of her work to the bazaar, "hoping thus to show her true interest in, and appreciation of, the object for which it is held." The sum realised, after paying all expenses, reached the highly creditable amount of £628 17s. 9d. The expenses were £77. We understand it is in contemplation to add to the Home facilities for carrying out the open-air treatment of phthisical patients.

L. H. H. STAFF DINNER.

The Hospital Staff dinner was held this year at Kettner's, on Wednesday, November 17th, under the presidency of the chairman of the staff for the year, Dr. Washington Epps. The happy promise of last year's beginning was amply fulfilled, and a thoroughly successful evening was spent. An interesting feature of the evening's proceedings was the announcement that two members of the staff had acquired academic honours since the previous meeting, Mr. Dudley Wright having become F.R.C.S., and Dr. Spencer Cox, M.D. of Brussels.

LORD NELSON AS VEGETARIAN, TEETOTALER, AND "ANTI-SALTIST."

THE following interesting extract is taken from Dr. Beattie's account of Lord Nelson's health, quoted in that fascinating work, Mahan's Life of Nelson, vol. ii. p. 226:—

"It is true that his Lordship, about the meridian of life, had been subject to frequent fits of the gout; which disease, however, as well as his constitutional tendency to it, he totally overcame by abstaining for the space of nearly two years from animal food and wine, and all other fermented drink; confining his diet to vegetables, and commonly milk and water, and it is also a fact that early in life, when he first went to sea, he left off the use of salt, which he then believed to be the sole cause of scurvy, and never took it afterwards with his food."

HOMEOPATHY IN LONDON SIXTY-THREE YEARS AGO.

We are indebted to a correspondent for the following interesting extract from a periodical printed in 1835 (two years before her Majesty began to reign), showing how Londoners stared with astonishment when they first saw the word—

" Номфоратну.

"'It is not my intention to swell the pages with bubbles, or to throw dust into my readers' eyes' (Perseus, Sat. v. 19).

"At a certain house in Park Street, Camden Town, there is an inscription which acts like a spell upon the passers-by, stops their hasty paces, and makes them stand, gape, and wonder. Even people in carriages pull their ropes, and bid the coachman stop opposite the house; and many, prompted by curiosity, have asked for some explanation. The word which startles and puzzles them all is that which stands at the head of this paper, namely, Homgopathy, a new word not to be found in Johnson's, Sheridan's, Walker's, nor even in Webster's dictionary. . . ."

A very able account of the system follows. It is signed "The Alpine Philosopher," who, we understand, was Dr. de Prati.

THAT SINGLE DOSE.

"The rule is that the carefully-selected homeopathic remedy should act until it has completed its effects" (Hahnemann).

"The surest and safest way of hastening the cure is to let the medicine act as long as the improvement of the patient continues" (Hahnemann).

"The Single Dose, oh, wondrous fact! Effects a cure, if left to act."—Anon.

"The great mistake which the homeopathic physician cannot too carefully avoid in the treatment of chronic diseases is the too hasty repetition of the dose" (Hahnemann).

DIVISIBILITY OF MATTER.

A SEPTUAGENARIAN correspondent encloses the following extract taken from the *Shepherd* of August, 1857, on the

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above subject from the second volume of Dr. Milligen's new work, Curiosities of Medical Experience. "The passage is intended by him to illustrate the principles of the homeopathists in their infinitesimal doses. The experiments detailed also show us the difficulty of drawing any radical distinction between what we call matter and spirit, or power, because a visible particle may be divided and subdivided till it becomes invisible and imponderable, and must then, to our senses at least, possess all the attributes of spirit. Matter and spirit then are probably but the same thing after all—the two extremes of one indefinable essence."

"What appears to our feeble organs an atomic fraction may produce phenomena on the organism which we cannot comprehend, but should not, therefore, be denied. Let 1 gr. of Iodine be dissolved in 1,560 grs. of water the solution will be limpid; let 2 grs. of starch be dissolved in 2 ozs. of water and added to the first solution, and the liquor will forthwith assume a blue tint. In this experiment the grain of *Iodine* has been divided into 1-15,360. Dissolve the 400th part of 1 gr. of Arsenic in 400,000 parts of water, and the Hydric Sulphite will bring it into evidence. Let a 5,000th part of Arsenite of Ammonia be dissolved in 500,000 parts of water, and the addition of the smallest proportion of the silver will obtain a yellow precipitate. Numerous experiments of a similar nature may be daily resorted to, to prove that the most minute particles of two substances possessed of chemical infinities may be brought into action, although diluted ad infinitum. But the power that the smallest particle produces in producing natural phenomena cannot be more evidently proved than by Spallanzani's experiments in fecundation."

The observation about the identity of matter and spirit is a very acute one. There are not two sorts of "stuff" in the universe but only one. "Matter" and "spirit" are merely conventional expressions, useful for the purpose of designating the two aspects or opposite poles of it as our intelligence is able to apprehend them.

ONE AT A TIME.

WE are indebted to Mr. C. F. Jesper, of Southport, for the following interesting extract from the *Pharmaceutical* Journal of October 22nd. It is really astonishing what a highly original appearance an allopathic magnate can give himself by the simple expedient of taking a few centuryold maxims of homeopathy and trotting them out as perfectly new observations of his own. The only precaution he need take is to avoid all mention of Hahnemann and homeopathy and the thing goes down the innocent mental gullets of his auditors with assured applause:

"THE USE AND ABUSE OF MEDICINES.

"In an address to the Reading Pathological Society, Mr. Malcolm Morris has pointed out that the improvement in methods of local treatment of skin diseases is attended with certain disadvantages, since the very excellence of the numerous elegant applications, due to the inventiveness of Unna and other skin specialists, has tempted medical men to rely too exclusively upon them. To some extent the best effects of internal remedies have been masked by polypharmacy, a superfluity of drugs being ordered in a prescription to conceal a possible want of knowledge on the part of the prescriber. But however useful as a cloak for the doctor's ignorance, to the patient polypharmacy is always more or less injurious, inasmuch as every drug taken into the stomach damages to some extent the delicate machinery of the body. 'Nothing probably has hindered the progress of therapeutics as much as polypharmacy. If we fire charges of medicinal small shot at a disease, how are we to tell which of them hits the mark? And how is it possible to gain an accurate knowledge of the action of remedies if we administer them in mixtures as complex in their ingredients as the bouillabaisse so lovingly described by

"After defining the sphere of influence of internal remedies, the lecturer proceeded to describe their action, classifying them as alteratives—arsenic, antimony, phosphorus, potassium iodide, the salicylates, thyroid extract; internal antiseptics—mercury and ichthyol; and nerve sedatives, such as opium, chloral, sulphonal and phenacetin. All were spoken of as useful remedies if administered under suitable conditions, and in conclusion it was stated that in dermatology, as in every other department of medicine, progress has been greatly hindered by blind adherence to tradition and authority. 'Tradition tends to keep alive superstitions like the "constitutional" bogey; authority creates fallacies of its own.' These largely spring from an unscientific use of a multiplicity of remedies, which leads to effects being attributed to wrong causes. Voltaire says it is unquestionable that certain words and ceremonies will effectually destroy a flock of sheep-if administered with a sufficient quantity of arsenic. Similarly 'we have still a vast amount of "words and ceremonies" to get rid of in dermatological practice before we learn to use with precision the arsenic or other agent which is the efficient cause of cure in skin

diseases. ' "

MODERNISING HOMEOPATHY.

The Chemist and Druggist is responsible for this delicious paragraph:—

"Homeopathy to be Modernised."

"German homeopathic practitioners are agitated at present about a proposal to bring their principles up to date. The notion arose in

Berlin, and is due, apparently, to the progress which more rational allopathy is making nowadays. One distinguished homeopath admits that though Hahnemann and his disciples experimented under better conditions than were at that time obtained by allopaths, since then the discoveries of Schwann, Pasteur, Koch, and Lister have given advantages which homeopaths have not availed themselves of. 'Lister's antiseptic method,' says Dr. V. Sich, of Stuttgart, 'has thrown ours into the shade, and yet the local external treatment might well be supplemented by the homeopathic.' This is so much of a concession; but the Berlin proposals go a great deal further-viz.; to take the Hahnemann principles, re-examine them in the light of modern knowledge, and, by fresh experiment, bring them up to date. The proposals are not agreeable to a goodly section of homeopaths, who see in it the beginnings of a departure from that individuality which has brought homeopaths many privileges, and one of these opponents (Herr W. Steinmetz) declares that the changes contemplated, and the introduction of new and hitherto untested remedies not prescribed by Hahnemann, will not meet with Government approval, and that, consequently, the new Homeopathic Pharmacopeia, which is to come out of the experiments, will fail in its object."

Our Berlin friends are a little behind the times. The thing has already been done in this country and the result has been not inaptly termed "Burroughs-and-Welcomism." The fact is genuine homeopathy is much too difficult an affair for the average medical man. It bears about the same relation to the "modernised" article that a grand organ bears to a barrel-organ. Your "modern" prefers something simple and easy to grind.

Bradford and District Chemists' Association.

On November 15th Dr. C. E. Waddington gave an illustrated lecture before the above-named association, of which Mr. Alfred H. Waddington, of 31, Darley Street, Bradford, is president for the session. We are glad to note that the chemists of Bradford are superior to the prejudices which obtain in some other medical quarters.

Bryonia 200 in Neuralgia of the Eyeball, due to the Use of Coffee.—A gentleman not accustomed to the use of coffee drank a cup. Soon after this he had an attack of ciliary neuralgia of the right eye. Pain was aggravated by moving about. He received one dose of the above remedy. He kept quiet, and in two hours it had disappeared. This was tried several times in his case, and was always successful.—Hom. Envoy.

ORIGINAL COMMUNICATIONS.

THE FURTHER GROWTH AND PROGRESS OF HOMEOPATHY IN NORTHAMPTONSHIRE.

By A. C. CLIFTON, M.D.

My Professional Work in Northampton.

In May, 1856, on my obtaining the diploma of M.R.C.S. Eng., after a course of professional studies at University College and Hospital, London, I returned to my native county town, Northampton, as a medical

practitioner of homeopathy.

From the hostility which Dr. Pearce had encountered from the members of the "old school of medicine," I guessed they would treat me in a similar manner, especially as they knew I had been largely instrumental in bringing him to the town. course of a few months this opposition was made very manifest. While I was attending a patient, and the help of another practitioner was needful to save the life of the individual, Dr. Pearce being absent from home, several other local practitioners were applied to, but none of them would meet me because I was a homeopath. From that circumstance, and from the position in which I would be placed in future emergencies, many persons thought my practice and the cause of homeopathy would be greatly damaged. That, however, was not the case; it rather served to make me better known and advance the cause. The same kind of opposition soon became more manifest in several ways, and I was treated like a professional leper, and made to see there would be no salvation for myself unless I would renounce my faith or fight for my principles, and of the two courses I chose the latter.

My task at once became a difficult one, requiring not only all the skill which I could bring to bear on my professional work, but energy and tact in the prosecution of it. It would not have done for me to remain at home for what practice might fall in my way; it was necessary to go further afield and make the principles of homeopathy more fully known. I therefore commenced to visit several towns and large villages once in each week, five, eight, ten, and fifteen miles distant, where a few persons resided

who knew something of homeopathy, and were glad that I could be consulted there on specified days every week.

At that period of time, considering there was but little known by the lay public of the principles and practice of homeopathy, and living, as most of them did, far from a homeopathic practitioner, I instructed them somewhat in relation to the characteristics of a few medicines to meet some of the common phases of disease to which they were liable, and although in later years that was less needful, I never quite departed from it, and while in that way I lost many a fee, I gained many, and have ever believed that the more "the people" were instructed in such matters, the more confidence they would have in homeopathy, and spread abroad a knowledge of its benefits. My visits to those places brought me a large number of patients, but when Dr. Pearce left Northampton some years afterwards, and I was without a colleague, I was obliged to relinquish that work, but as the residents had acquired increased facilities for reaching me I retained most of my old patients until the close

of my professional work in Northampton.

Immediately after commencing practice I took my share of work with Dr. Pearce at the Homeopathic Dispensary which he founded and had successfully carried on, and after he left Northampton I continued the same work. That institution was largely supported by honorary subscribers who received free cards, for the needy poor to obtain medical aid at the dispensary. Persons less needy could also have similar aid on the payment of half a crown per month. There was also another and very important department, whereby all persons not in business, and unable to pay the usual medical fees of the wealthier classes, could nevertheless ensure for themselves and their families medical aid, not only at the dispensary, but at their own homes, on the payment of a small sum per month, in advance, while in a state of health and continued regularly afterwards. In that department alone, a short time before I gave up practice, there were over two thousand five hundred members, and while it was very helpful to the artizan and working classes, it also encouraged provident habits among them, and at the same time was a great teaching power in relation to homeopathic treatment.

For over thirty years I was one of the medical officers

in the town of ten or more "Lodges" of sick and benefit societies, under such names as "The Manchester Order of Oddfellows," "The Independent Order of Rechabites," and similar organisations in the country, and just to show their appreciation of homeopathy it must to their credit be told that on the conclusion of a great strike of workmen for whom collections had been made in the town, and after the expenses had been met and a balance in their favour remained, they contributed one-third of it (about twelve pounds) to the Homeopathic Dispensary, and the remainder to other local institutions. And on another occasion, when the annual meeting of the various benefit societies throughout the country was held in Northampton, the executive voted the sum of ten

pounds to the Homeopathic Dispensary.

In order to carry on the aforesaid work efficiently, together with a large private practice, I had in succession several able and legally qualified assistants, who in a few years naturally desired to practice on their own account in "fresh woods and pastures new," and in the places where they settled they made their mark, and a lasting mark, as homeopathic practitioners, and in a few years they induced others to join them in their work, and in that way homeopathy was further extended. My last assistant was Mr. A. G. Wilkinson, M.R.C.S. England, L.A.C., who, after being with me for twentyfive years, also desired to practice on his own account, and in Northampton, and from the fact of his good service during those years I encouraged him in taking that step, although I knew very many patients he had attended for me would follow him and be lost to the practice of myself and my successor, believing as I did there would still be sufficient work for myself and for any one with whom I might become associated, and that the greater the supply the greater would be the demand, in direct opposition to a protectionist policy.

After the aforenamed change I was very fortunate in securing Dr. William Ross as a partner in my practice, a gentleman who had done good work as a homeopathic practitioner for several years in other places; I found in Dr. Ross a valuable helper and colleague, not only in homeopathic therapeutics but in other aspects of professional work, with which he was practically more acquainted than I was. That arrangement lasted for about eighteen

months, at the end of which time my health so far gave way that I was obliged to relinquish active practice in favour of my partner, and I was largely satisfied in that respect from what I had seen of him with reference to his abilities and skill as a medical practitioner and as a homeopath, and because I believed he would be generally acceptable, and find favour with my former patients, and prove himself a worthy successor in the practice which I had carried on for so long a time. And now, some three years or so afterwards, I have no

reason to regret having taken that step.

By way of climax to my professional career I would say, and I hope without being considered inordinately vainglorious, that twenty years before that event, and when I took great pleasure in my work as a homeopathic practitioner, I was fired with the ambition that whenever I might have to retire from active service I would be able to leave a substantial memorial somewhere, in relation to homeopathy in Northamptonshire. Towards that end I commenced to tax my income year by year, in the same way as it was taxed by the Imperial legislature for other purposes, and set aside the moneys so accruing from

it, for such time as it might be required.

In 1895, when a new homeopathic hospital was erected in London, at a cost of fifty thousand pounds, and towards which very many of my colleagues had largely contributed, in addition to what they had obtained from their patients and friends, I determined not to be left behind in the matter. I acquired from my patients and friends considerable donations to the hospital, and as my health was then giving way, and I saw that it would soon be needful that I should relinquish active service, it seemed to me the most appropriate time for carrying out my original intention of a memorial in relation to homeopathy in Northamptonshire, and in connection with the new hospital. The funds which I had annually been setting aside for that purpose then amounted to a considerable sum; with that and something more from my private estate, I was enabled to endow an adult bed in perpetuity in the new hospital, under the name of the Northampton Bed, and I say that nothing which I have done in connection with homeopathy has given me greater pleasure, and I only wish that many of my colleagues may be able to do the same.

In this retrospect of my professional work in Northampton I have alluded to the severe hostility which in the early years of my practice I encountered from the members of "the old school of medicine," and I regret to say that it continued with no less severity for about twenty-five years, as no medical practitioner within a district of thirty miles would meet me in any difficult case, hence it will readily be seen that my position was sometimes a very anxious and trying one. During the last fifteen years, or thereabouts, I am, however, bound to admit the opposition has been less severe, inasmuch as the two leading surgeons in the town have met me in (socalled) surgical cases, and give me and my patients the benefit of their advice and skill. In several (so-called) medical cases in which the diagnosis was very obscure, and the prognosis was very doubtful, and where my therapeutic measures had been of no avail, I also had very kind and valuable advice in relation to the same from a leading physician in the town, who visited my patients, but did not feel at liberty to meet me at the bedside. For that amount of professional help, largely isolated as I was from brethren of my own faith and practice, I tender those gentlemen my hearty thanks, especially as I am sure they had no animosity to me, but the reverse, and would have gone much further in the way of help had they been free from the ethical trammels of medical orthodoxy, but as they were members of the British Medical Association, they would have exposed themselves to censure, or to being cut off from its membership, had they done more.

OTHER INCIDENTS IN MY LIFE AS A HOMEOPATH, BUT NOT CONNECTED WITH MY PRACTICE.

The first Congress of homeopathic practitioners held in this country was at Cheltenham in 1850. At that time I was a chemist in Northampton, and was but slightly acquainted with the new medical heresy, but as I was desirous of knowing more about it, I went to the Congress hoping to gain admission, although I had no locus standi to warrant it. That privilege was, however, graciously granted me, some friend having informed the executive that although an "unfledged bird" I was one of "some promise." Although I was quite a stranger

to those present, two gentlemen in particular showed me great kindness, the one Dr. Henry Madden, a very cultured and able homeopathic physician of Brighton, whom I had the pleasure of meeting on several similar occasions afterwards, and with whom I maintained a warm friendship until his death; the other gentleman Dr. Robert Dudgeon, of London, a very accomplished physician, a great scholar, an indefatigable literary labourer in connection with homeopathy, the English translator of the works of Hahnemann, and one of the editors of the British Journal of Homeopathy for forty years previous to its close. My acquaintance with Dr. Dudgeon ripened in a few years into ardent friendship, which has been maintained until the present time, and I trust will not be broken until "death do us part."

From the aforesaid occasion until now I have attended every Homeopathic Congress in this country, with the exception of four, and here by way of advice and encouragement to many of my colleagues who are not seen at such meetings so often as is desirable, I say that although I have attended those meetings often at great inconvenience and risk by leaving my practice for the time being, I never remember to have lost a patient by so doing. On the other hand, from the exchange of views with my colleagues there in relation to various aspects of our practice, and by their fraternal greetings, I have always returned home a better-informed man and more fitted for future work, which I could never have gained by simply reading the reports in our medical journals. And now, as the "winter of life" is upon me, I look back upon those episodes as some of the brightest memories dear to me, bringing to mind as they do the cheery faces, voices, and grip of many old comrades.

In June, 1876, "The Centenary of American Independence" was celebrated in Philadelphia, U.S.A., and at the same time "The World's Convention of Homeopathic Practitioners" was held in the same city, when over five hundred delegates from various parts of the world were present. In anticipation of that event the British Homeopathic Society elected Dr. Richard Hughes, of Brighton, as its delegate and representative, the Northern branch of the society elected Dr. J. W. Hayward, of Liverpool, and the Midland branch honoured me in the same way. What we saw on that occasion, and what my

impressions were of that great country, its peoples, and its institutions, particularly its homeopathic colleges and hospitals, commensurate in size and number as they were with the educational position of over fourteen thousand fully qualified homeopathic physicians, together with the uniform kindness and generosity of our transatlantic colleagues for our comfort, was set forth in our medical journals shortly after our return, and is now a matter of history, and I refer to it now mainly to relate how I then acquired a name which has stuck by me ever since. especially in that country, and which occurred in the following way. In company with my friends Hughes and Hayward, I went to the aforesaid Convention. After they had presented their cards and credentials as delegates from societies in this country and were admitted to the meeting, I unfortunately had lost my credentials and was therefore non est in that particular and was like "a pelican in the wilderness"; my friend Dr. J. W. Hayward came to my rescue, and with his ready wit suggested that as in my own country I had largely taken the side of "the people" rather than "the profession" in polemical matters I might in the dilemma in which I was then placed make that my warrant; acting on that suggestion, I presented my card signed, "A. C. Clifton, Northampton, England, M.R.C.S. (Vox Populi Homeopathica)," and by explaining to the officers of reception that as I was the representative of an unorganised community I could give no better credentials, I was admitted to the meeting. After my colleagues had been called to the platform and made their obeisance as representatives of their societies, and were accorded an enthusiastic reception, I in my turn was called upon to do the same, and as may be readily believed the novelty of my credentials with regard to the people secured for me a very hearty welcome; hence from then till now my name "Vox Populi," in which I largely glory.

On that occasion I met several of the veterans of homeopathy in that country: to wit, Constantine Hering, Adolph Lippé, Lilienthal, and that very accomplished and amiable physician Dr. Carroll Dunham, and others who have now "crossed the bar," together with many who are still in the flesh, too numerous to mention individually, and with whom I formed a warm friendship. Since that time very many of our colleagues in America, France,

Germany, and Russia have attended Homeopathic Congresses in this country, and with many of these I also formed a very cordial friendship, and am the proud possessor of their photographs, which I often look upon

with great pleasure.

In addition to my membership of the Royal College of Surgeons, England, 1856, the Homeopathic Medical College of New York presented me in 1877 with its diploma of Doctor of Medicine, in testimony of my many practical contributions to homeopathic therapeutics. I was elected a member of the British Homeopathic Society in 1861, a Fellow of the Society in 1880 a member of the Council in 1894, and president of the Society in 1898. I was also president of the Homeopathic Congress at Liverpool in 1887. My address was entitled, "Therapeutic Changes in General Medicine during the Victorian Era, their Meaning and Lessons for Homeopaths." I had a large audience of my professional comrades, who gave me a hearty reception; many also were attracted there in connection with the opening of the new homeopathic hospital in that city, and in which our meetings were held.

In 1893 a similar Congress was held at Northampton, not alone my native county town, but that of the president of the Congress, Dr. Alfred Hawkes, of Liverpool, and a convert of mine many years previously. From the great esteem in which he was held, both as a man and physician, he had a much larger audience than was usual on such occasions, hence Northampton was doubly honoured by the president being a man of its county

and a notable homeopath.

MATERIA MEDICA MISCELLANY.

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

Lycopodium in Nervous Asthma.—The following case is from a lecture by Dr. H. V. Halbert: "Mrs. S., age 28, suffered with periodic attacks of asthma; they were always ushered in by some unusual excitement and were attended by peculiar conditions of mental depression. The attack for which she came to my clinic was induced by a violent fit of anger and persisted longer than usual. She showed signs of extreme despondency

and melancholy, so much so that she would have nothing to do with her best friends. The first indication which presented itself to me was the peculiar fan-like motion of the alæ nasi, which reminded me of Lycopodium. Upon further investigation the following characteristics were observed: A constriction of the throat, simulating globus hystericus, but always induced by the regurgitation of food; an excessive appetite, which was easily satisfied; fulness of the abdomen, with flatulence; constipation, with dry and hard stools; shortness of breath, with dyspnea; a slight cough, with chest restriction; better always in the open air, and all symptoms aggravated from 4 to 8 p.m. Lycopodium 6x was given, and in two months she was apparently free from asthma and greatly

improved in many other respects."—Clinique.

Arsenicum in Asthma.—Dr. W. W. Gleason also reports a case of nineteen years' duration. The patient had for many years smelled and inhaled every quack nostrum to be obtained. Her asthma was brought on by raising arms above head, or by physical exertion. She had not missed having asthma a single night for years. Had sour taste in mouth; lips blue and dry; mouth dry; severe cough, expectoration white and frothy; used to awake after an hour's sleep at night with asthma. Bowels constipated, for ten years no action without medicine, feces in small jagged lumps. Urging constantly night and day to urinate, and must strain to pass urine, and after the act sensation as if some remained, which caused tenesmus. Circumscribed redness of cheeks; aching in forehead in afternoon and night, darting pains like needles in eyeballs, darting pains through right chest on deep breathing. Tired and very ill all the time. On November 12, 1897, she was given two powders of Arsenicum cm. Improvement commenced at once, no more medicine being needed. She has had no more asthma (date not given).—Am. Hom.

Iris Versicolor in Diabetes Mellitus.—J. B., et. 36 single, merchant. Ill several years. Low-spirited, mental faculties dull. Complained of dull, throbbing supraorbital pains, chiefly right side, with nausea and sometimes vomiting in the morning. Eructations, anorexia; urine full, copious, and increased specific gravity, containing sugar. Burning in the pancreas. Feeling of tiredness and exhaustion. He had been treated by

several physicians, the last of whom pronounced his case hopeless. Under $Iris\ V$. 2x the symptoms began to disappear and the sugar to decrease within the first week. After suspending remedy for a fortnight symptoms and sugar began to reappear, only to disappear again on resumption of the drug, which was then continued for eight weeks. After ten months, during which time no attention to diet was observed, there was no return of the symptoms.—Dr. Baruch in Am. Hom.

Amalgam fillings.—In the Hahnemannian Advocate Dr. B. L. Hotchkins gives a very interesting paper on this subject, in which he quotes three conclusive cases to show that Amalgam fillings in teeth may be the cause of local disease in the mouth and throat and also various constitutional symptoms. The cases are shortly these:—

Case 1. Man, 43, had for nearly twenty years been a great sufferer from sores in the mouth, which gradually became more frequent till for ten years he scarcely passed a month without one. For fifteen years he suffered from dyspepsia, at first only in the spring and fall of year for a month or so, the attacks gradually becoming of larger duration till he suffered nine months in the year continuously, being a little better in summer months. Medicines gave very little relief. Merc. cor. 3 moderated the sores if only taken once a day, more often produced aggravation. Nitric Acid c.m., one dose, relieved more than any previous medicine. He was then advised to have the fillings removed and Amalgam c.m. was given two weeks later, which put an end to his sufferings, and for three years he has been practically a well man.

Case 2. Mr. W., æt. 35, for four or five years during winter months suffered from three or four severe attacks of pharyngitis, which would lay him up seven to ten days at a time. The attacks began on the left side and extended to the right. He was annoyed with great accumulation of saliva, necessitating frequent swallowing. The uvula, soft palate, and tonsils were of a purplish colour. Dr. Hotchkins prescribed Lach. 30 with no relief, but throat got worse towards evening, so he sent him Merc. biniod. 1000 at 10 p.m. After one dose he slept all night and next day woke in dripping perspiration, but with throat practically well. A month later he had a similar attack, and same prescription quickly relieved. He was then ordered to have some fifteen Amalgam fillings removed

and gold substituted, and Amalgam c.m. was given. He has now passed two winters without another sore throat, and says his mouth has a clean feeling to it and he has

gained 10 lbs. in weight.

Case 3. A lad, 18, was treated for a bad suppurative tonsillitis which neither Lach. 1m. or Merc. biniod. 1m. relieved. It was accompanied by a purplish spongy condition of gums round teeth, the gums bleeding on pressure. This condition he learned had existed five or six years, and his mouth was so full of saliva that it ran out at night on to pillow. The tonsil suppurated and he recovered, but had a similar attack a month later. After this he was ordered to have five or six Amalgam fillings removed and Amalgam c.m. was given. In two weeks the quantity of saliva was decreasing and the gums bleeding very little, his perspiration was less offensive, and in time all his symptoms disappeared.

SOCIETY'S MEETING.

BRITISH HOMEOPATHIC SOCIETY.

The second meeting of the session was held at the London Homeopathic Hospital, Great Ormond Street, W.C., on Thurs-

day, November 3rd, at 8 o'clock p.m.

Miss Edith Nield, L.R.C.S., L.R.C.P. Edin., Belvedere House, Tunbridge Wells, was proposed as a member by Dr. Frederick Nield and Dr. Byres Moir; also Mr. Wm. Clowes Pritchard, B.A., M.R.C.S., L.R.C.P., London Homeopathic Hospital, was proposed as a member by Dr. Byres Moir, and Mr. Jas. Johnstone.

The following specimens were shown:-

 Post-menopausic Carcinoma of Fundus Uteri removed by Vaginal Hysterectomy Dr. Burford.
 Ovarian Polycystoma (Post-menopausic) removed by Abdominal Section Dr. Burford.

The evening was devoted to a discussion on the "Work to be Undertaken for the Improvement of our Materia Medica," introduced by three short papers: "The Systematic and Scientific Development of the Pathogenetic Material now at our Disposal," by J. W. Hayward, M.D., M.R.C.S., L.S.A.; "The Necessity for Systematic and Scientific Re-proving of

Both Old and New Drugs," by E. M. Madden, M.B., M.B.C.S.; "The Prolegomena of Modern Provings," by C.

J. Wilkinson, M.R.C.S., L.S.A.

Dr. J. H. Clarke opened the discussion. He explained that when Dr. Hayward first asked him to take part in the discussion he had declined on the ground that he was too fully occupied with a materia medica of his own; and it was only in deference to Dr. Hayward's repeated request that he would take up the Society's time that evening. He thought that the great want of the present day was not so much new provings or re-provings, as a practical arrangement of the material already possessed. Dr. Hughes had done a great work in his *Pharmaco*dynamics; but he had done it almost too well. For unambitious homeopaths found in that book such a very respectable stock-in-trade that they were apt to settle themselves down comfortably within its two boards and thank Providence they were not as the poor allopath, who had nothing better than Ringer to bless himself withal. He thought that in the Pre-Hughesite period, when men had to dig their homeopathy out of Jahr, there was a greater proportion of expert practitioners. For any serviceable re-arrangement of the materia medica it was necessary first of all to have a clear idea of the materials to be arranged, and one of the first things to be settled was what to do with clinical symptoms. He considered it unworthy of men of science to be content to hold an opinion when it was possible to be sure of the fact. He had taken the trouble to test the properties of medicines in high attenuations, and ascertained that they not only cured but at times caused symptoms. He had used in practice symptoms observed on the sick, and cured symptoms not previously known to belong to a medicine. He could find no difference in point of prescribing value between clinical and pathogenetic symptoms, and therefore he abandoned the prejudice against them which he had imbibed in his study of Dr. Hughes' Pharmacodynamics. Another criticism he had to pass on that work was that it adopted the nosological standpoint too prominently. It was useful to group together remedies most commonly indicated in different diseased conditions, so long as it was recognised as a convenience merely. When it settled down into a fixed habit of thought that there are certain remedies for certain diseases real progress in homeopathy ceased. We should always remember that we have to take our points of correspondence on the phenomenal or symptom plane. In the work which he had been engaged on for the last twelve years he had finally adopted the following arrangement. First of all he had given the name of the substance, described its place in nature. and named the preparation. Next, under the head "Clinical."

he had given an alphabetical list of the diseases it had been found curative in. Next, under another heading, "Characteristics," he had sketched as strongly as he could the chief points in its range of action, its modalities and relations. Finally, he had given a schema of its symptoms, which he considered the most essential feature. He hoped to have the first half—that is, the first volume—ready for press in a few months, and in the hands of the public in the coming year.

Dr. Ord said there were two things to be considered: (1) How to deal with the pathogenetic matter we have already. (2) The addition of new matter. He thought the Materia Medica, Physiological and Applied, a good basis to go upon, but too large. In connection with his first point he said there was no need to reproduce the Cyclopedia and Hahnemann's Materia Medica Pura. He thought pathogenetic material might be divided into two parts, one to include symptoms produced by two or more provers, and another the remaining symptoms, which he called doubtful material. These should be compared with the mass of clinical experience on record, and thus a materia medica compiled containing symptoms which have absolutely proved reliable.

Dr. Drce Brown thought a tendency existed to put old subjective symptoms in the background, and seek cruder symptoms to go upon. This he deprecated, and remarked that no one could be expected to prove drugs to such an extent as to produce the crude symptoms desired. The allopathic text-books were full of the effects of poisonous doses of drugs given to animals, and these were absolutely

useless.

Dr. R. Hughes said the time had come to make use of the pathogenetic material which we have. We were too empirical, he thought, and should go in more for the materia medica of Hahnemann. He thought it hardly generous of Dr. Ord to speak as he did of the *Cyclopedia of Drug Pathogenesy*, seeing that this work made it possible to work out the sequence of symptoms in the way Dr. Ord has formerly suggested. He was afraid Dr. Clarke's proposal to incorporate clinical symptoms in the materia medica was calculated to destroy the basis of the entire homeopathic edifice if carried out, though he would be the last to deny that the teachings of usus in morbis were of very great importance.

Dr. C. E. Fisher (of Chicago), after complimenting the Society on being able to muster such a number of members, said he saw a danger on the Continent of Europe in the country towns, and also in England a great danger of homeopathy losing ground, for the reason that the younger men in our ranks have much more formidable opposition to contend

with than formerly, the methods of the old school being to-day so much in advance of those formerly in vogue.

Dr. Neatby thought there was great need for fresh knowledge as to pathogenetic effects of drugs, and specially empha-

sised the need of female provers.

Mr. Knox Shaw put in a plea for a scientific materia medica on the lines of Drysdale's article on *Kali bichromicum*, though at less length; he thought such a materia medica would

prove absolutely convincing to any inquirer.

Drs. Pullar, Burford, Goldsbrough, and Byres Moir also took part in the discussion, and Mr. Dudley Wright then proposed that a committee be formed, consisting of the President and Secretary of the Society, with Drs. Wilkinson and Ord, to consider the matter and report to the Society at their next meeting. This suggestion was seconded and carried in due course.

INSTITUTIONS.

HAHNEMANN CONVALESCENT HOME BAZAAR.

The following, from the Bournemouth Observer of November 10th, will be read with much interest:—

Although the weather was extremely unfavourable, and many people were thereby prevented from attending the bazaar in aid of the above institution, its promoters are to be heartily congratulated on the success of their labours. In the large and beautiful hall, which was most generously put at the disposal of the bazaar committee by Mr. Kneese, the manager of the Mont Dore Hotel, there was ample space both for stalls and purchasers; and the pains that had been taken in artistically arranging and adorning the bazaar were fully justified and rewarded. The fourteen large stalls were dressed in red and white —the nursing colours—and bore the nursing badge of a large A small red cross badge also distinguished the stallholders and stewards. The goods displayed for sale were of an exceptionally attractive and useful description, comprising (in addition to the usual needlework and embroideries) beautiful copies and engravings of well-known pictures, oil and watercolour paintings, sketches, photographs, baskets, pottery, household linen, glass and china, cakes and sweets, jams, groceries, and drugs. Beautiful flowers and fruit were sent to

the bazaar by Lady Portman, Hon. Mrs. Abel Smith, and Mrs. Leeston Smith; dairy produce by Messrs. Whitcher, Isaac, and the Stour Vale Dairy Co.; vegetables by Messrs. Leverett, Frye, and Keep; and books by Mr. Powell. Flowers and pot plants were most kindly sent by Messrs. Philips, Tidy, Ratsch, The business of the bazaar was carried to a successful issue by the following ladies and gentlemen; the Dowager Countess Cairns, and Lady Kathleen Eliot, Lady de Tabley, Mrs. Wilson, Mrs. Russell, Mrs. Wilson Hogue, Mrs. Allen, Mrs. Nankivell, Mrs. Hardy, Mrs. Frost, Miss Walker. Miss McBryde Brown, Miss Carter, Miss H. L. Nankivell, Messrs. Williamson, and Messrs. Gilbert and Hall, assisted by Miss Logan, the Misses Coles, Miss Good, Miss Hull, Miss Nankivell, Miss Flory Mold, Miss Hogue, Miss Hervey, Mrs. Colman, Miss Crockat, the Misses Frankell, and others. In an excellently arranged tea-room Mrs. Melville and Mrs. Toyne, assisted by Mrs. Hake and Miss Capel, proved most successful caterers. On the platform at the other end of the hall the beautiful and ingenious hospital models were displayed, which were exhibited first in London and then at Chicago, where they took the highest commendation and a first-class diploma and prize. Sister Marion, of the London Homeopathic Hospital, herself was present to show and explain her models, and was ably helped by Sister Helen, and Nurse Ewbank, of the Hahnemann Convalescent Home, Bournemouth. Winter Garden short and successful entertainments were given at intervals, by Mr. Sidney Grandy, the well-known thought reader and ventriloquist, assisted by Miss Inglefied. Magic lantern exhibitions were held under the direction of the Rev. E. F. W. Eliot and Dr. Nankivell, and the Bournemouth Postmen's Band played selections of music in the gallery.

The opening ceremony was performed at noon on Wednesday, November 2nd. Prayers having first been said by the Rev. E. C. Ince, Chaplain of the Home, the Lady de Tabley, in a few well-chosen words, indicated the charitable purpose for which the bazaar was held, and trusted that the effort might be crowned with substantial success. Her Ladyship then declared the bazaar open, and was presented with a beautiful bouquet of chrysanthemums, dahlias, and lilies, by Miss Joyce Nankivell. A lovely basket of violets were also presented to Mrs. Nankivell, on behalf of the stall-holders by Miss Muriel Frost. The bazaar, which was open from mid-day November 2nd to mid-day November 4th, was interesting and attractive, and those who worked so hard to ensure its success must feel that they have materially helped forward the success of a most deserving local charity. The sum realised amounts to £628

17s. 9d. over and above expenses.

FOLKESTONE HOMEOPATHIC DISPENSARY.

The Eighth Annual Report (April 1, 1897—March 1, 1898) of the above institution has been issued, from which the following quotations will be read with interest:—

In presenting the Eighth Annual Report of the Folkestone Homeopathic Dispensary to the friends and supporters of the Institution, the Committee feel that they have reason to be satisfied with the year's work.

The ordinary work of the Dispensary has gone on in the usual manner, and the benevolent public has shown very

practical sympathy with it.

It may be remembered that the previous year closed with an adverse balance amounting to £32 $\overline{12}$ s. $10\frac{1}{4}$ d. The present year, however, as will be seen from the balance sheet, closes with a

balance in hand of £65 16s. $5\frac{1}{2}$ d.

The Committee have felt that, with this balance at their disposal, they ought no longer to depend upon their officers to supply instruments and other equipments. They have therefore purchased some already in use, and voted £23 to complete the equipment of the Institution.

Owing to contemplated alterations at Grace Hill, the Committee had to find a new habitat for the Institution, and, after considerable trouble, they decided to rent the rooms on the

ground floor at No. 11, The Parade (on the Bayle).

The report of the present year shows that 556 patients have been treated in connection with the Dispensary; that 2,138 consultations have been given and 514 home visits paid; that 56 patients have come under the hands of the Hon. Dental Officer, by whom 60 extractions have been performed, 72 consultations given, and 6 visits paid; that, whereas the previous financial year consisted of 15 months, while the present year has had only the ordinary share of months, both the hon. subscriptions and the patients' payments stand at about the same figure, which, if a monthly average be taken, shows an actual increase in each case of about £1 per month.

Salvia officinalis in Night Sweats.—Salvia officinalis θ in thirty drop doses has been highly commended for the debilitating night sweats of consumptives, or any form of night sweats.— $Hom.\ Envoy.$

EXTRACT.

TWO VIEWS OF CHRISTIAN SCIENCE.

I. THE ACADEMIC VIEW.

CHRISTIAN SCIENCE BEFORE THE LAW.

For the second time within a few weeks "Christian Science" has formed the subject of an inquiry in a coroner's court. In the case of Major Lester, a report of which was given in the British Medical Journal of October 15th, the jury contented themselves with returning a verdict in accordance with the medical evidence, and expressing their "strong sense of abhorrence of the so-called treatment of the deceased" by the Christian Scientist who was called in when the doctors were dismissed. In the case of Mr. Harold Frederic the jury returned a verdict of manslaughter not only against the Christian Scientist who "treated" him, but against the lady who is alleged to have used her influence to remove the patient from the care of legally qualified members of the medical profession, and to place him under that of the Christian The case will in due course be tried before a higher court, and till the law has been defined by judicial authority it would be improper on our part to make any comment on the matter from the legal point of view. It may not be out of place, however, to indicate the precise issue which has to be determined. This is not whether Christian Science is or is not a rational system of treating a disease—that is a question which neither judge nor jury will be called upon to decide. The point as to which an authoritative deliverance is required is how far it is lawful for those about a sick person, presumed to be incapable of forming an intelligent judgment for himself, to neglect ordinary medical treatment and rely solely on "faith healing." The law does not compel a man who is of sound mind to call in a doctor for himself, however ill he may be; but if he neglects to do this for his child he does so at his peril. It is true that, as things are, the "peril" is not very great, parents belonging to the persuasion of the Peculiar People generally incurring no penalty more severe than a homily from the coroner, with a recommendation "not to do it again." But this unsatisfactory state of things is due to the uncertainty of the law—an uncertainty which it is to be hoped will now be removed. Of "Christian Science" itself an account, in great part consisting of the very words of its inventor, is given elsewhere. It may seem strange that such impudent nonsense should take captive not merely the ignorant, but men of brilliant intellectual gifts. But there are many instances which prove that even a scientific training is not always a safeguard against the most abject credulity in the matter of signs and wonders. Indeed it is hardly too much to say that certain forms of mental eccentricity flourish most rankly in a soil of superficial knowledge and falsely so-called "culture."—British Medical Journal, November 12th.

II. THE UNACADEMIC VIEW.

CHRISTIAN SCIENCE?

The inquest on Harold Frederic, an ingenious and individual writer of fiction, who died during, or, at any rate, after treatment by a Christian Science healer, has excited a vast amount of interest, healthy and unhealthy. The facts shortly stated, are these: He was living with a Miss Lyon, who passed as his wife, and at a certain stage of his illness, which seems to have been rheumatic fever and cardiac trouble, a friend of his, a Mrs. Mills, a Christian Science healer, was called in. In the seguel an allopathic doctor came on the scene, but Harold Frederic died. Professional evidence was given to the effect that, had he been doctored in the orthodox way, his life would have been saved, and there was some conflicting testimony as to his complete sanity. On this the coroner's jury found a verdict of manslaughter against both Miss Lyon and Mrs. Mills, and they were committed for trial. The matter being thus sub judice, we are precluded from discussing the evidence, but there are large questions involved in the case wholly irrespective of the propriety of the verdict and the legal guilt or innocence of the accused. Christian Science purports to act by appeal to a higher Power, and its practitioners are supposed to effect cures in exactly the same manner as did the apostles described in the New Testament. The healers take fees for treatment, justifying it by a reference to the text, "The labourer is worthy of his hire," although that may not strike most of us as entirely to the point. deny, however, that they work miracles, although, to the plain man, what they profess to do is, if they do it, exceedingly wonderful. The founder of the society, a Mrs. Eddy, has written a book explaining the religious healing doctrine. in which medical terms loosely employed jostle metaphysical ideas expressed with equal looseness. It is currently stated among the Christian Scientists that Harold Frederic himself some considerable time ago was so impressed with the merits and defects of the book that he proposed re-writing it, so as to put the tenets of the sect into intelligible and readable form It is full of statements to the effect that spirit is all in all—

that matter is nothing, and mind is everything; and there is no doubt that its large and dimly outlined phrasing gave satisfaction to a large class of minds, mostly the same class which takes comfort in the orthodox metaphysic of the day. Of course these scientists declare that their list of cures is enormous, and it is a fact that a large number of men and women, mostly of fair education and good social position, have come forward and announced in public meeting that they have by its means been cured of serious illness. Whether they are right or wrong (and for our part we think them wholly wrong), they are clearly at liberty to treat themselves or allow themselves to be treated according to any method which they choose, whether they call it Christian or pagan, scientific or magical. Nor is there any reason why they should not pay for it, if they choose, so long as they perfectly apprehend what it is they get for their money. The sudden outcry against them as a set of fraudulent humbugs, who are to be put down by the strong arm of the law, is perfectly preposterous. There is no reason to believe that they are any more humbugs than the regular physicians of the sixteenth century, who prescribed all kinds of absurd things, such as live lizards as a treatment for hernia, or powdered adders for snake-bites.

The truth is, that in an extremely unscientific society like ours the faith in regular medicine, which may be perfectly justified as the result of experience, is held to a large extent, in a most unreasoning way, as a sort of superior revelation, the key to which is obtained by passing a medical examination. Outside the College of Physicians there is no salvation is a dogma largely held, though hardly avowed, by a great many of Yet we have been obliged to make very large exceptions. According to the true faith that is in allopathy, the homeopathic theory is as dangerous, as false, and as fraudulent as any delusions of faith-healer or Christian Scientist. A few years ago a storm raged over the dismissal of an allopathic doctor for the crime of attending a hospital (treating his own patients in the regular way) where other patients were treated homeopathically. For about a fortnight the Times was full of it. It is true that it was chiefly amusing to outsiders because of the evidence that it afforded that neither side made any attempt to understand what the other side was driving at. In particular, one eminent allopath stated that the extreme homeopathic dilutions were impossible, because the vessel of water needed to make them would require a diameter equal to that of the orbit But the leading homeopathic druggists demonstrated, if we recollect right, that two three-ounce vials and a pint and a half of liquid was more than sufficient. The story shows how bitter the feeling is between the two medical creeds;

how blindly men strike when they desire to crush opponents whom they regard as mischievous impostors. It is not too much to say that the orthodox view is that all unorthodox medicine is a delusion and a snare. We may be all equally convinced that Christian Science is a delusion and a snare. but that is no reason for the coercive measures against it which are now freely advocated. Nobody has had the hardihood to prosecute a parent or guardian of a child who has died because he has employed a medical man, however heretical his opinions may be. And, indeed, it is difficult to see where this might not lead us, so violent are the differences of belief as to the best method of treatment for different diseases even within the pale The homeopathic doctors, who in America are of orthodoxy. a very large body, point to the apparent fact that their patients get on as well, and live as long, as those who are under the old treatment. They point, moreover, to their hundreds of thousands of cures. The Christian Scientists points to their thousands. We may be entirely incredulous, but who is to decide—who is to trust statistics?

At the present moment a wave of anger against those who are in revolt against the old-fashioned medicine is passing over the country. The conduct of the magistrates in dealing with the Act that relieves parents who conscientiously object to vaccination shows this conclusively. Every kind of subterfuge to avoid carrying the Act into effect has been resorted to by the great unpaid, and even by paid officials of large legal experience. We regret personally that the Act was passed, holding that statistics show that vaccination has done, if not all that is claimed for it, at least something to keep down the scourge of small-pox. But even here we must admit that there is something to be said on the other side. Dr. Creighton, in a letter published in yesterday's Daily News, declares that the statistics are untrustworthy. "I say advisedly," writes the eminent author of the History of Epidemics in Great Britain, "that the figures of the Royal Commission's report are cooked." At any rate, at the moment when we are removing what is believed by most of us to be a national safeguard against small-pox, it is not the moment for coercing the faddists who practise Christian Science or any other form of faith-healing or white witchcraft. The limits of the State's right to interfere are very obvious. has a right to interfere to protect those who cannot protect themselves, such as children and imbeciles. It has a right to interfere with conduct which threatens the safety of the whole community. But there the right of interference ends. If a man with his senses about him prefers to be doctored by a faithhealer, whether he calls himself a Christian Scientist or not, in preference to Sir William Broadbent, it is his own affair. He must not risk infecting his neighbours with a disease, it is true, but this cannot be applied to diseased opinions or erroneous teaching, either in medicine or economy, or religion or politics. After all, it is probable that faith-healers do now and again succeed in curing some sorts of illness—and, undoubtedly, the regular physician now and again fails. Besides, the limits of the influence of the mind on the body cannot be laid down, and undoubtedly Dr. Bernheim, of Nancy, would have been burnt as a wizard had he lived a few centuries ago.—Observer, November 13th.

REVIEWS.

PROBLEMS OF HOMEOPATHY.*

DR. COOPER has issued a second edition of his important pamphlet, in which he elaborates his ideas on the essential action of drugs given homeopathically, and illustrates the same with cases. The "Problems" which Dr. Cooper set himself to solve were: (1) the question of dose; (2) the duration of action of the remedy; and (3) the best

mode of exhibiting the remedy.

As Dr. Cooper has well pointed out on many occasions, the idea of "dose" in homeopathy and in allopathy is an entirely different thing. The allopathic idea refers to the quantity of the material substance, whilst in homeopathy dose refers to the impact on the organism of the drug influence, no matter how much or how little of the material drug may be present. Dr. Cooper, maintains that, in many chronic cases at least, a single impact, left to work out its influence, will produce curative effects unobtainable in other ways. (2) As is borne out by his experience, an impact thus given will continue to exert its influence for weeks and sometimes months; this effect being almost analogous to the growth of a seed sown in a congenial soil. (3) This leads to his third point—the best mode of administering the remedy, which he maintains is on the tongue; as a seed must be sown in darkness, so must a germinal medicinal impact.

*The Problems of Homeopathy Solved. An Essay on Arborivital Medicine. 2nd ed. By R. T. Cooper, M.A., M.D. London: John Bale, Sons & Danielsson, Ltd., Oxford House, Great Titchfield Street. 1898. Price 6d.

We will let Dr. Cooper explain his position largely in his own words. He defines "Arborivital medicine" thus:

"By this term is meant a system or scheme for investigating medicinal action, using drop doses only of the fresh juice of plants (omitting roots and seeds), each dose being allowed to expend its influence within the body until all evidence of such influence ceases. The sign ϕA after the name of a drug means one drop, preserved, of course, with spirit, placed by itself or on saccharum lactis, upon the tongue."

Here is the idea of the "Vegetable-life Cure," worked out somewhat fully:—

"Man's life, then, being derived from vegetation, and vegetation being placed upon the earth, so to speak, to prevent the calamities that, without it, would occur, it is not unreasonable to suppose that there must be running through vegetation a force capable of neutralising diseases, just as we know that there is material for the supply of bodily wants. That force is, I assert, the growth force, or, if you like it better, the plant force, to be found in the vegetable kingdom. In other words, the life force of plants is capable of exerting a curative effect upon the diseases of animal life. Now in the vegetable kingdom we find life beginning with a seed. Were we to speak accurately, this seed is not the beginning of life, but we must let this pass. For the purpose of argument, all vegetable life begins with a seed. The same may be said of animal life. As far as we know, the same may be said of disease; and it is not too far-fetched to make the assertion that the same may be said of the cure of disease. When, therefore, Hahnemann stated that the rule is that the carefully selected homeopathic remedy should be allowed to act until it had expended its action, he was simply stating in another way that the seed of cure should be allowed to grow up in the human system until it has neutralised the disease with which it was in relationship.

"If this be the case, then, it will follow that certain conditions must be observed; for it is beyond dispute that seeds do not grow until their

surroundings harmonise with growth requirements.

"Here, then, a flood of light is thrown upon the obscurities of homeopathy. First, the seed must be sown in darkness, darkness being required for germination; in other words, the dose must be deposited in the mouth. Secondly, the seed must be sown by itself, and allowed to act, to grow under the stimulus of light, in its own way. Thirdly, there is no material in that seed, or, if you like, dose, discoverable by scientific means to explain why it should grow. Fourthly, that seed or that dose must be allowed to continue to exert its influence until its work is accomplished."

We will quote another passage in which brings out the difference between his own position and that of Hahnemann on the question of "medicinal-force-administration," if we may use a cumbrous paraphrase in order to exclude the confused ideas accruing to the old terminology.

"'The excrescences of sycosis,' says Hahnemann, 'are cured in the most thorough and durable manner by the internal administration of a few globules of the decillionth preparation of thuja, which ought to be allowed to act for the space of fifteen, twenty, thirty or forty

davs.'

"My position differs from that of Hahnemann in the assertion that the pure juice taken from the living plant is sufficient for purposes of cure, and that the processes of succussion and dilution are not necessarily required, and in furnishing a reasonable and in every way a scientific explanation of the duration of the action of the force, represented by the dose, that is thrown into the system. My explanation, therefore, conforms to the phenomena of nature, and is the only one that explains what hitherto have been obscure problems in homeopathy."

We must refer our readers to Dr. Cooper's pamphlet for the cases he gives in illustration. But we may add that we have had practical and occular evidence that Dr. Cooper has grasped a great practical truth, having examined patients who have been cured by his method of diseases of the most desperate nature. Whether he is correct or not in saying that his experience solves the problems of homeopathy is another matter. It, no doubt, does solve those problems of homeopathy which have presented themselves to his own mind, but it leaves many questions untouched. The first point that strikes us is that Hahnemann himself practised at one time in a way almost identical with this, giving drop or fractional drop doses of the expressed juice of plants mixed with alcohol; but prescribing with the extreme accuracy that he did, he observed such troublesome aggravation to follow that he had recourse to his well-known method of attenuation. We believe that Dr. Cooper's prescriptions are on broader and more general grounds, but evidences of aggravations are common. The question to be settled is this: Will a single impact of an $A\phi$ tincture develop the growth-like curative action more effectually than could be obtained from a single impact of the 3rd or 30th preparation of the same?

Again, Dr. Cooper truly says man's life is derived from vegetation. But it is also derived at one remove from the inorganic world, hence if tree life has for him curative virtues so must and does the inorganic world. This Dr. Cooper would be the last to contest. But it remains for him to show what difference there is, if any, between the curative action of a single impact of a metallic medicine and the curative action of one of his arborivital doses. If this cannot be demonstrated the arborivital theory is

not a perfect solution of the problems of homeopathy. Further, many cures are wrought, both in acute and chronic illnesses with repeated impacts of the medicinal force: How are they to be explained?

In a prefatory note Dr. Cooper makes the following

remarks:-

"The opposition of the medical press to secrecy in medicine is in every way praiseworthy, and is most certainly conducive to the well-

being of the public and to the progress of science.

"Of this there can hardly be a question—at least in regard to agents that are directly remedial in disease. But while the editors of medical journals vehemently denounce delinquents on this score, it is not a little diverting to find that they themselves are the greatest inciters to secrecy, for they invariably refuse admission to reports of any treatment that does not entirely harmonise with their own ideas. They thus compel practitioners, who have not the means to publish independently, to keep remedies undivulged.

"There is no professional journal in this kingdom—I make the statement deliberately—that will admit to its columns articles containing cases treated as simply as were those in this little brochure. In consequence of this, and especially of the opposition shown me by the editors of the Monthly Homcopathic Review, I was obliged in self defence to publish this work, and to circulate the first edition at my own expense among colleagues with whom I had worked amicably for

thirty years."

Dr. Cooper looks upon The Homeopathic World as only semi-professional, and as our readers well know we have given a warm welcome to his important researches in therapeutics. We think it a pity that original work should not be encouraged, and the fact that it may not appear to square exactly with generally accepted notions should be no bar to its reception by the journals and the members of a liberal branch of a liberal profession.

FACIAL AND SCIATIC NEURALGIAS.*

DR. LUTZE has given us in this little monograph a book of sterling value. It is the work of one who really understands and believes in homeopathy, and knows what the requirements of exact prescribing are. In his

^{*} The Therapeutics of Facial and Sciatic Neuralgias, with Repertories and Clinical Cases. By F. H. Lutze, M.D. Philadelphia: Boericke & Tafel. 1898. London: Homeopathic Publishing Co., 12, Warwick Lane, E.C. Cloth, 6s. 6d.

preface Dr. Lutze gives the following account of how he came to compile the book:—

"In the earlier years of my practice I had to treat quite a number of patients afflicted with neuralgia; and it seemed to be almost like an epidemic. Being unable to obtain any but a very few, not very characteristic symptoms, I made a study of the remedies having symptoms of neuralgia in their pathogenesis. The notes then made were added to, and I found them often of great benefit, not only in the treatment of neuralgia, but of other diseases as well; and when they had nearly acquired the proportions of this work, concluded to add appropriate clinical cases, and publish all, that others, who so desired, might benefit from it as well. Special attention has been paid to give all the modalities, as I have found myself, and heard others in the profession to express the opinion, that they often point out the simillimum."

We congratulate Dr. Lutze on the resolution he took to publish, and we have no doubt this work will prove one of the most popular handbooks of its kind. It is divided into two parts, the first dealing with facial and the second with sciatic neuralgia. Each part is concluded with an excellent repertory, and is illustrated with clinical cases which admirably serve to impress on the memory the characteristics of the remedies described. We have noted a few typographical errors—e.g., "Similimum" for "Simillimum," "Cardunus" for "Carduus," but these are trifles.

NATURAL HYGIENE.*

The name of Dr. Lahmann is known in this country principally in connection with a special cotton fabric, advocated by him for underwear, in preference to wool; but this detail of reform does not by any means exhaust the original ideas of the doctor. He has elaborated a system of diet and hygiene, and has put his theories to the test of practice in a way that entitles him to the careful consideration of the medical and scientific world. We are very glad, therefore, to see his ideas presented to the English reading public. Dr. Lahmann endorses the views of most hygienists in the matter of the necessity of fresh air. He appears also to favour many of the

^{*} Natural Hygiene, or Healthy Blood the Essential Condition of Good Health and How to Attain it. A Treatise for Physicians and their Patients on the Predisposition to and the Prevention of Disease. By H. Lahmann, M.D. (translated by Dr. H. Büttner). London: Swan Sonnenschein & Co., Ltd. 1898.

appliances of Priessnitz, and he makes references to Dr. Schüssler's Biochemic Therapy. But the root idea of his book appears to be this: A vast preponderance of diseased conditions depend on an imperfect condition of the blood, which he calls "Dysæmia," due to improper supply of the requisite salts. According to Dr. Lahmann, up till now food analysis has been almost entirely taken up with estimating the relative quantities of albumen, fat, and carbohydrates, and if any attention has been paid to the salts it has taken them in the gross. He maintains with good reason that the food salts are of the very highest importance, and the potash, soda, lime, and other salts must maintain a due proportion to one another if the food is to be right. He takes cow's milk as the normal, and tests various dietaries by comparison with this. Comparing ordinary diet in this way he shows that—

"Firstly, a food mixture may correspond perfectly with the normal food mixture with regard to the organic substances contained in it, but may differ from it very much

with regard to the inorganic substances.

"Secondly, the total amount of food-salts contained in the ordinary food of European nations is not only altogether too small, but the relative proportion of the food-salts to each other also differs widely from that of

the normal food mixture."

Dr. Lahmann works out his subject in a thoroughly detailed fashion, in which the Germans are so far ahead of all other writers, and the result is an important and original contribution to the science of feeding. Though not an out-and-out advocate for vegetarianism, he maintains that the inability of man to digest flesh without forming an undue amount of uric acid, points to a vegetable diet as being proper to him. The work is deserving of the most careful attention of all medical men.

NOTIFICATION.

Dr. Samuel Van den Berghe has removed to 36, Rue des Baguettes, Ghent. His consultation hours are from 8 to 10.

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

GENERAL CORRESPONDENCE.

PROGRESS BY DRUGGING.

To the Editor of The Homeopathic World.

SIR,—Discussing "Optimism and Pessimism in Homeopathy," the last issue of the Monthly Homeopathic Review thus divests itself in a leader: "A lady brought her husband for advice to a well-known homeopath, introducing him with a statement to this effect: that twenty years before she had suffered from a terrible cough, from which she was never free for five minutes. All the resources of old-school practice had been exhausted in vain. At last she determined to try homeopathy. The doctor she saw gave her one powder in his consulting-room. This at once stopped the cough, which never returned. She therefore desired advice for her husband, who for many years had coughed incessantly, whilst ordinary treatment seemed useless. The lady was well known to the narrator, nor was there any doubt as to the bona fides of her statement, which was corroborated by her husband. She evidently expected a similar miracle to be worked by homeopathy for him. This case, however, proved to be one of old-standing bronchitis, an instantaneous cure being evidently impossible. This was very properly explained to the patient, much to his wife's disappointment. But, encouraged by the assurance that by patience and perseverance a cure could be effected, treatment was commenced, and in a few weeks the cough had gone, nor has there been any return of bronchitis since. Both he and his wife are now staunch homeopaths."

Divested of unnecessary verbiage, we get this fact, that a lady twenty years ago was cured by a homeopath of a terrible cough with a single dose of medicine, and therefore, sought relief for her husband, but not before ordinary treatment had proved useless. The natural duty of the homeopath was therefore plain: to give a good sound rating to the husband for not having sought the advice that resulted in such benefit to his wife. This would be acting loyally to homeopathy; it would be what David Wilson, or Hilbers, or Curie, or any of the old

pioneers of homeopathy would have done. But not so the editors of the Monthly Homeopathic Review.

They thus proceed to comment: "That such sudden and almost miraculous cures are sometimes effected by a single dose of the correctly indicated remedy need not be denied. But these are distinctly rare, and exceptions to the usual results of homeopathic treatment." Oh, shade of that immortal man who said that a very minute dose accomplishes all the good the remedy is capable of performing in periods of forty, fifty, or one hundred days! I will not insult the editors by a reference to the work from which this passage is taken.

And they go on to say, "Very real harm" (whatever that may be) "is done to the cause we advocate by quoting such cases, as if they were the usual effects of our medication." Considering that the editors probably never treated a case in their lives by leaving a single dose of medicine to act, and that they actually have refused an article of mine from my having done so, it is rather rich to find them discussing single doses in con-

nection with "our medication."

And they go on, "That we should always aim at such results is true" (but whether by giving a single dose or not they are very careful not to state), but that we should encourage patients to expect them is equally untrue. By such optimism many who by more reasonable statements might be won to our cause, are discouraged, and with some justice consider themselves to have been deceived, and tell their friends that homeopathy is a delusion," and then we get the sapient pronouncement, "If the case of chronic bronchitis given above had fallen into the hands of such an optimist, we can imagine that he would probably never have consulted a homeopath again."

One can well believe the editors could imagine anything, for they leave their readers to imagine how the case of bronchitis was cured, and I, for one, imagine that the case was cured by drugging, and I look upon the whole passage as simply an advocacy of Progress by

Drugging.

Very truly yours, ROBERT T. COOPER, M.A., M.D.

November 7, 1898.

METHYLENE BLUE.

To the Editor of The Homeopathic World.

SIR,—Re your note on Methylene Blue, a gentleman from New York who had suffered excruciating pains from calculus in the kidney, giving rise to pyelitis and cystitis, told me he had derived no benefit whatever from treatment until his doctor gave him Methylene Blue, with occasional doses of Eucalyptus. Could not obtain further particulars.

November 3, 1898.

M.D.

TINCTURES FROM LIVING PLANTS.

To the Editor of THE HOMEOPATHIC WORLD.

SIR,—Dr. Cooper's plan of making tinctures from living plants is, in my own estimation, the only proper way of doing so, if we wish them to contain all the active constituents of the plant. Is it not the plan that Hahnemann recommended? The juice of a plant is its life-blood, and contains all that is needful to sustain it, and enable it to flower and fruit. For twenty-five years before I studied for the profession I made no tinctures but from living plants, except where it was impossible to get them. using dried imported drugs, such, for instance, as Pulsatilla, the greater part if not all of its active principle, anemonin, is driven off by the heat in drying it, as well as the acid that holds it in solution. The smell of dry plant tincture of Pulsatilla is not to be compared to that of fresh plant tincture. The imponderable aroma is as necessary to preserve as any part of the plant. But to my mind the much more important loss in drying plants is the loss of the agent, at least in every alkaloidal plant, that holds its active principle in solution, or the chemical agent which probably causes it to be more readily assimilated with the juices of the body. I refer to the vegetable acid. In a letter of mine to the Hahnemannian Monthly in March, and again in August, 1887, I stated that if the juice of a plant containing an alkaloid were evaporated to dryness, the addition of the same quantity of water as the water lost in drying would not re-dissolve the residue, showing that an alteration or loss had taken place, but the substance which formed the residue existed in a state of solution in the juice of the plant.

Aconitin, the active principle or alkaloid of Aconitum napellus, exists in solution in the juice of the plant, which is acid (Aconitic acid). Aconitin is not soluble in water, and but for this acid there would be none in the juice. I believe vegetable acids play a far more important part than is generally supposed, and are very necessary to the activity of the tinctures. Preparations of Squill, Lobelia, &c., are said to act much better combined with an acid than without.

Yours truly, ALFRED HEATH, M.D., F.L.S.

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Chloride	of Sodiu	m			***	•••	189.56
Chloride c	of Calcir	ım				•••	84.56
Chloride o	of Magn	esium				•••	24.31
CHLOR	DE OF	BAR	MUI	•••	***	***	6.26
Carbonate	of Cal	cium	•••	••	***	***	2.80
Silicia			***	***	***	***	1.40

308.89 grains per gallon.

"Westminster Hospital, "August 23, 1883.

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Extract from THE LANCET, Nov. 24, 1894.

"A sample of the Barium Water was obtained, sealed, and despatched to The LANCET Laboratory for detailed examination, and the results may be compared with the analysis of the sample first submitted. In the following analyses Sample 1 is the sample obtained by ourselves, and Sample 2 the sample first submitted. The results are expressed in grains per gallon (70,000 grains):—

			•	No. 1.		No. 2.
Chloride of Barium	***			6 749	******	6.490
Chloride of Sodium		•••		186.200	******	185.900
Chloride of Calcium		•••	•••	85.160		85.470
Chloride of Magnesium			•••	20.100		20,315
Chloride of Lithium	•••	•••	•••	0.847	*****	0.910
Chloride of Ammonium	***	***	•••	0.262	******	0.262
Alumina and Silicia	***	***		3.340		3.100
Bromide as Bromide	•••	•••	Dist	inct traces.	Di	stinct traces.

Total mineral matters ... 302.658 302.447

"It is important and interesting to observe that the quantity of Barium Salt has varied only within very small limits during the last ten years, as in 1883 Dr. Dupré made an analysis, in which he found 6'26 grains of Barium Chloride per gallon. The amount of Chloride of Barium may therefore be fairly regarded as constant—a fact which is of especial importance in view of the powerful action of Barium Salts. . . .

"The quantity of Barium present renders the internal administration of the Llangammarch waters quite safe, and no harm could result from drinking the water in reasonably large amounts." "One tumblerful is a sufficient dose in most cases, and two tumblerfuls should seldom, if ever, be exceeded, though the dose may be repeated three or four times a day."

"BARIUM CHLORIDE IN LLANGAMMARCH SPA, BRECONSHIRE (CENTRAL WALES RAILWAY).—This mineral water, of which a specimen was sent me some eight years ago in a Winchester quart stoppered bottle, one half being then used clinically, the remainder was on August 1 last found to be equally as fresh, &c., as when received eight years ago; it is equivalent to 4x. I have put it to the test curative in half-ounce doses for Tinnitus Aurium chronic (thirty years), hereditary in for four generations, of varying character and degree, but which under Acid Nitric 2x had become intensified and aggravated to such a degree as to resemble now the dying groans of a woman's voice upstairs, now the sharp crack here and there of the irregular discharge of a rifle corps squad, the poor sufferer often jumping up in the air as if shot, now the rat-a-tat-tat of a fashionable lady who prided herself on her accomplished manipulation of the door-knocker, each concussion being accompanied by some contractive movement in the inner ear. This powerful medicament (prescribed at the Spa in some 10-ounce doses) seems now, after some ten days' use, to have brought the tinnitus to its usual character of bourdonnement only; and the result is encouraging for a now-and-then recurrence to Barium cither as this mineral water, or as one or other of its various salts. It seems that no other Spa in the British Isles contains Barium Chloride. To my mind the presence of potassium is suggestive."—Agricola, in Homeopathic World, October, 1892.

In an article in Clinical Sk tches for August a writer says:—"Llangammarch Wells has, however, features of medical interest quite apart from the therapeutic value of its barium springs. Although it lies some six hundred feet above Ordnance datum, the invigorating character of its air is quite in excess of that which it gains by its elevation. It lies, indeed, in a wide open valley; but to the north and east it is protected by a high range against cold bleak winds. Facing north-west it has between it and the sea little else than mountainous country, and in this way Llangammarch receives a constantly changing air, having all the characters of the elevated ranges over which it passes in its passage from the sea. This probably explains the exhilarating character of the air, and is the reason why so many invalids, and especially persons depressed by overwork, so rapidly recover strength and appetite. During the past two years this result has again and again been experienced by those who have suffered from the depressing influences of epidemic influenza."

Extract from THE MEDICAL ANNUAL, 1890.

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