

RADIUM

AS AN

INTERNAL REMEDY

J. H. CLARKE, M.D.

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J. K. Bangs

RADIUM
AN
INTERNAL REMEDY



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[RADI]

RADIUM AS AN
INTERNAL REMEDY
ESPECIALLY EXEMPLIFIED IN CASES OF
SKIN-DISEASE AND CANCER

BY

JOHN H. CLARKE, M.D.

LONDON: HOMŒOPATHIC PUBLISHING CO.
12, WARWICK LANE, E.C. . . MCMVIII

Accession No. 6984

Date 05. 04. 2017

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TO THE MEMORY
OF
PAUL FRANÇOIS CURIE, M.D.
WHO CONDUCTED THE FIRST HOMŒOPATHIC
DISPENSARY FOR THE POOR IN LONDON, AND
INTRODUCED HAHNEMANN'S SYSTEM TO THE
COMMON PEOPLE OF ENGLAND
AND OF
HIS ILLUSTRIOUS GRANDSON
PIERRE CURIE
THE JOINT-DISCOVERER OF RADIUM
THIS BOOK IS GRATEFULLY DEDICATED BY
ITS AUTHOR.



PREFACE

RADIUM, the wonder-child of twentieth-century science, is in a peculiar way a property of Homœopathy. It was discovered by the son and daughter-in-law of a well-known homœopathic practitioner of Paris, who was himself the son of a still more famous homœopath and missionary of medical science, who made England the land of his adoption and his life's labours. Thus England has a claim to the parentage of Radium as well as France, and Radium becomes another strand in the bond of *l'Entente Cordiale*.

The astounding phenomena connected with Radium and its impalp-

able, invisible, but nevertheless potent emanation have done more to compel the world of science to acknowledge the power of the infinitesimal, and to confirm from another side the discoveries of Hahnemann in the realm of drug action, than all previous discoveries in physical science put together.

It was therefore not merely fitting, but imperative, that Homœopathy should take steps to make doubly its own the child which had done so much honour to its parentage. And as France rightly claimed to be its birthplace, it was plainly the duty of England to introduce it into the nursery of the homœopathic materia medica.

Prior to the experiments narrated in this volume Radium had been used exclusively for its burning properties as one of the many escharotics in the

destruction of new growths. Thanks to the method of Hahnemann, Radium now stands revealed as a curative power that may be applied in everyday practice by every practitioner who is acquainted with the rudiments of Homœopathy. It is no longer an external remedy, but it is a remedy which may be taken internally and used for curative purposes in a very wide circle of diseases. Thus the wonders of Radium revealed by physical science are matched by new wonders in the realm of medicine, and Radium as a remedy stands forth as a new creation, a living entity, capable of indefinite growth and development.

The principal part of this volume was communicated to the British Homœopathic Society at its meeting in March, 1908, and by the Society's permission is now reproduced in the present form. The discussion which

followed the reading of the paper brought out new facts, which I have been glad to incorporate with the others. I am indebted to Dr. Molson for a valuable experience of his own, which I have incorporated in the provings, and in the Schematic arrangement of the symptoms.

In presenting a new remedy for the first time it is essential to give the data as fully as possible. When the first observations have run the gauntlet of further experience and received the confirmation of practice, it is possible to dispense with some of the detail, but at the risk of being prolix I have given provings and cases with as much completeness as I could.

It only remains for me now to commend the new remedy to the thoughtful consideration of all homœopathic practitioners. I have no wish to dogmatise about dosage or methods of adminis-

tration. I am quite prepared to learn that my own can be greatly improved upon. Nor do I think that homœopaths should neglect the external application of the remedy. Radium may be applied externally in homœopathic form as well as in the form of rays. Some practitioners have found that the local application of *Tuberculin* and other nosodes is a great assistance to the internal action of the remedy in cases where the application is practicable. In the same way I would suggest that *Radium* in homœopathic potencies may be usefully applied externally as well as given internally. If the warrant of Hahnemann should be asked for this it would not be difficult to obtain it.

JOHN H. CLARKE.

8, BOLTON STREET, W.

May 6, 1908.

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CHAPTER I

INTRODUCTORY



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CHAPTER I .

INTRODUCTORY

EARLY in the year 1903 the scientific world was stirred to its depths by the announcement of a discovery which bade fair to revolutionise every accepted canon of physics. M. and Madame Pierre Curie had been for some time engaged in the study of Uranium and other radiant elements. Their labours resulted in the isolation of the mineral Polonium, and later

on of another element which vastly eclipsed every other in radiating power, and to which they very appropriately gave the name of *Radium*.

The wonderful properties of this substance, which gives out light, heat, and gases without apparent diminution in weight, was at once seized upon by investigators in the world of physics, and medical investigators took it up in their turn.

The X-ray and coloured light treatment of affections of the skin and of cancer was already established when Radium was discovered, and it was natural enough that Radium rays should be tried in cases similar to those in which

X-rays had been employed. A number of successes, more or less complete, were reported, and for a time Radium-ray treatment was so much in vogue that the supply could hardly meet the demand, in spite of the extremely high price of the salt. In addition to the trials on patients, experiments were made on animals by a number of observers, and some were made on plants.

But these observations were one and all concerned with the effect of the rays of Radium. As yet there were no data for its internal administration. In order to supply this want, early in 1904 I instituted some experiments on healthy human beings with a homoeopathic

preparation of the most active of the Radium salts, Radium bromide, or, in homœopathic terminology, *Radium bromatum*.

The results of my experiments and the subsequent confirmations in clinical cases, are detailed below. But I may be allowed to say a word as to the difference between the homœopathic and the allopathic methods of studying drug action. And, first, as to the results: In allopathic practice Radium took an immediate place. Every practitioner who could possibly manage it either procured or borrowed a bit of Radium to try on some case or other. Some were successful, but most were not. Soon the Radium fever subsided,

and now it is only here and there a specialist among the allopaths who uses Radium at all.

This is precisely the same fate which has befallen hundreds of good remedies in the allopathic school. Why is this? The reason is obvious enough to one who knows. The allopath school looks at drug action from one side only—the side of clinical results; whereas the homœopathic looks at it from the side of experiment on the healthy as well. It would be just as sensible to expect to people the earth with a vigorous race of people of one sex only as it is to furnish the materia medica with living curing remedies which have only been observed in one side of their

action. Experiment on the healthy and testing on the sick are the counterpart of one another, as Hahnemann has shown in the drugs he has made to live in the pharmacopœia. Thus *Aconite*, *Belladonna*, *Pulsatilla*, *Thuja*, which stepped out of his materia medica, are creatures which were new to the world of his day, and which are more living and vigorous now than they were when he introduced them. The reason is that they were well-begotten children of the masculine art of drug-testing on the healthy and the maternal art of their use in the cure of the sick.

I do not wish it to be understood that I put my setting of

Radium forth as a model of its kind or as anything to compare with the masterpieces of Hahnemann; but I do put it forward to show what may be done by any one who will follow in his footsteps; and slight and imperfect as the work may be, I nevertheless maintain that as a result of Hahnemann's method we have now for homœopathic use a living and growing entity in *Radium bromatum* such as did not exist hitherto. It is now open to all to use it in medicine intelligently, and every clinical observation will add to our sum of knowledge and to the efficiency of Radium as an agent in the cure of the sick. It is open to all to repeat the provings already

made in other preparations and potencies. All will help; and I most cordially invite the homœopathic body to do their utmost to develop this potent remedy.

Before proceeding to give the details of the provings, I will briefly summarise the facts that had been ascertained up to the time that the provings were made.

A priori it would seem exceedingly unlikely that such a potent physical agent as Radium has proved itself to be should be anything other than a great power when used internally as a remedy. But how were the indications for its use to be found, and the best preparations in which to administer it? For the homœopath there is but

one answer to these queries—*try*. Thanks to the enterprise of Mr. Armbrecht, all workers with Radium, be they homœopathists or physicists, have an opportunity of carrying out their experiments. Mr. Armbrecht prepared homœopathic attenuations of *Radium bromide*, and the 30th potency of this salt is the one I decided to put to the test first of all both for provings and curative work.

The points supplied by those who had worked with Radium as an external remedy were not many, but they were distinctive enough. In the first place M. Curie himself supplied a leading indication. It may be said, indeed, that he was actually its first prover. “If there

is one thing I know about Radium," says M. Curie, "it is that *it will burn.*" In the *Pall Mall Magazine* of October 17, 1903, is an account of a visit paid to M. and Madame Curie by Mr. F. Lees, and in the course of the interview M. Curie made the following remarks:—

"The doctors think that they can cure lupus and polypus—perhaps cancer—with it, but I know nothing about that, it is their business, not mine. But *it will burn.* I can testify to that. I put a tiny bit of a salt of Radium in an indiarubber capsule, fastened it on my arm and left it there ten hours. When I took it off the skin was red, and the place soon turned into a wound, which took

four months to heal." He pulled up his sleeve and showed a white cicatrice the size of a shilling, with the skin round it puckered and discoloured. "Another time I tried it for half an hour only. A wound appeared *at the end of a fortnight*, and took another fortnight to heal. On a third occasion I tried it for eight minutes only. *Two months later* the skin became red and a bit sore, but it soon passed off.

The *lateness* of the appearance of the symptoms, and the long time it took for the ulcers resulting from the burns to heal, are noteworthy points in these experiments. Many important symptoms of the provings appeared a long time after the dose was taken.

The tremendous energy thrown out by Radium will naturally suggest to the homœopath a centrifugal action—an antipsoric effect—in throwing central diseases out upon the skin. Hence homœopaths will not be surprised to find in it a remedy in many affections appearing on the skin. The use of Radium among allopaths has been confined to its employment as an external agent in external affections, notably epithelial cancer, lupus, nævi, port-wine stains or nævi-flammei; and Mr. Armbrecht informs me that he had frequently seen warts disappear after a few applications of the rays. I shall be able, I think, to show homœopathic warrant

for many of these "allopathic" uses.

It was a saying of the late Dr. R. T. Cooper that "the allopaths' externals are our internals." It will be apparent later on that the *external use* of a remedy does not preclude an *internal action*; but the cases in which Radium has been used successfully as an internal remedy proves that Dr. Cooper was right. Dr. Cooper had another saying which evinced much practical insight—"The allopaths' crude doses are the homœopaths' infinitesimal doses." He meant by this that the allopath often worked on correct indications but spoiled his work by the crudity of his dosage. Homœo-

paths would obtain certain results by infinitesimal doses where allopaths often failed with the crude drug.

In addition to M. Curie's experiments, on himself many observations have been made on animals and some on patients. Plants have also come under experiment. Under the action of Radium rays plant growth and development are checked, ferments lose their power, protozoa are first stimulated and then die. Culture growths are arrested and then die. Shelled organisms are more resistant than those containing chlorophyl. In animals, development and regeneration are retarded. Red corpuscles lose their hæmoglobin and

salts into the serum. The central nervous system is peculiarly sensitive to the action of Radium, and young animals are more susceptible than the older ones.¹

Dr. Roux made experiments on animals early in 1904. When a tube containing Radium was placed near the skull of a small animal (*e.g.*, mouse) paralysis and death followed. If it was hung above a cage containing the animals the same effect followed, but at longer intervals. Among the effects noticed by Roux were redness and irritation of the conjunctivæ of the animals.

¹ Louis Hussakof, *Med. Record*, July 1907; *Brit. Med. Journ.*, September 21, 1907.

· The first effect of Radium held near the human skin is to cause an intense erythema, which leaves behind a brownish pigmentation, unless it has been severe enough to lead to ulceration.

These were the data available from general medical literature. I will now proceed to give an account of the provings.

CHAPTER II

PROVINGS OF RADIUM BROMATUM



Accession No..... 6984

Date..... 05.04.2017

CHAPTER II

PROVINGS OF RADIUM BROMATUM

It may not be out of place to say a word or two on the subject of "provings." The word "proving" is a technical word in homœopathy. It means a record of effects produced in a healthy person by one or more doses of a given drug. The word is adopted from the German word "Prüfung," which means *trial* or *test*, rather than our word "proof." In testing a drug on the healthy it is necessary for the person

making the test to be absolutely neutral. He must note exactly what happens—he has no other say in the matter. He cannot tell the drug he is about to take which organ it is to act on; he cannot even ask it what effect it will have on any particular organ: he must wait and see whether it will condescend to act on the organ at all. The prover, or tester, must record the new sensation he experiences, and he must further note the peculiar circumstances and conditions under which the sensation appears or disappears, or increases or diminishes. Unless a symptom is clearly characterised it is of comparatively little use as an indication for prescribing.

The sensitiveness of different individuals to any given remedy varies enormously. In some it will produce many symptoms, whilst in others it will produce few or none. Hence the necessity for a considerable number of provers of any remedy, though any definite symptom—even if it is only one—is of value.

The dosage of the drug proved should be varied. In some the potencies will evoke more symptoms than the crude drug, whilst the opposite will be the case with others. In any case the drug should not be given in poisonous doses, which overwhelm the organism and preclude the evolution of its finer characteristics. The

records of poisonings are of value in making up the picture of a drug for homœopathic use, but their value is much less than that of provings, and the risk to life involved is not warranted. However, accidental or criminal poisonings may be laid under contribution for curative indications.

For my own experiments I made use of the 30th centesimal potency of *Radium bro.*, and this proved sufficiently effective.

PROVING I.

Mr. A. B., aged about 50, blue eyes, clean-shaven, nervous-sanguine temperament, good health.

April 22nd, 1904.—Took six globules of *Radium bro.* 30.

April 26th (fourth day).—Discovered two white patches on penis, one at root, one on right side. These patches were covered with fine scales and proved to be of the nature of psoriasis. They cleared off and others appeared on other parts of the organ; had circular or serpiginous edges. This recurred for many months. There was absolutely no abnormal sensation in them.

May 2nd (eleventh day).—Shivery; bilious feeling; stools paler than normal and more frequent. This condition lasted three days, when the shivering departed.

May 5th (fourteenth day).—More

mucus in nose without having taken cold.

May 7th (sixteenth day).— Bowels very relaxed still, stool in loose bits, parts almost watery, darker in colour. (This condition lasted many days; sometimes the stools were light, sometimes there were tags of mucus. They did not become normal till July 27th.) This morning tongue very sore, right side, about the middle. A callosity or corn on the inner border of right foot, which had been present at least twenty years, was found to be almost gone; it disappeared completely soon after and has not returned.

May 19th (twenty-eighth day).— Eyes smart and look red; this was

noticed by others. This passed off and reappeared with greater intensity later. Passed away about June 7th.

June 5th (forty-fifth day).—For a few days the skin of the face has been irritable; this day is very much so. This condition gradually became worse, and lasted altogether over two months. The skin became thickened and, when scratched, which gave the greatest relief, exuded a clear moisture. It was worse after washing (which caused oozing) and after shaving (shaving could only be done, in consequence, every second day); relieved by washing with *very hot* water; worse at night when warm in bed. It prevented sleep, and a

pocket-handkerchief had to be kept applied to absorb the exudation. The sensation was an intense itching, and scratching was intensely delightful, but could only be sparingly indulged in, as it was followed by burning and stinging along with oozing.

June 12th (fifty-second day).—For several days past has had pain under left scapula. It appeared to have passed off upon 11th, but was felt on waking on 12th; worse on moving and putting shoulder back, better after rising.

August 5th (eighty-eighth day).—A small naevus (of the canceroderm variety) about centre of chin to the right of middle line has turned black. In a few days this

scaled off and the nævus was cured.

August 7th (ninetieth day).—After several vain attempts to arrest the march of the proving, which was becoming well-nigh intolerable. *Tinct. Rhus venenata* 3x was given as a possible antidote. This it proved to be. The next day the face was decidedly better, and, under the continuance of this remedy, the skin gradually became normal, after scaling.

August 9th (ninety-second day).—The skin could be rubbed and scratched without causing any oozing. In a few days it was possible to resume the daily shave.

August 29th (112th day).—A

slight recrudescence occurred, and again *Rhus ven.* was taken. The same thing occurred the following spring after motoring. At times during the proving there was slight inflammation at the umbilicus.

PROVING II.

Miss X., aged 34, rather dark, bilious temperament, somewhat athletic build. Took *Radium bro.* 30, six globules, on June 3, 1904, at 10 p.m.

June 4th (second day).—Dry mouth in morning. Headache in occiput in the morning; a tight feeling increasing on motion. In evening indefinite toothache.

June 5th (third day).—Still

headache, increased on moving about. No appetite for lunch, feels sick, cannot eat meat (this symptom lasted many months). Tongue white. Chest feels tight, as if she could not get air enough. Hands cold.

June 6th (fourth day).—Still feels sickish. Unable to eat bacon for breakfast. Can only eat fish for dinner. Weight, 9 st. 3½ lbs.

June 24th (twenty-second day).—Still off appetite for meat: gets a stuffed-out feeling after food. Cannot smoke (the prover, as a rule, smoked cigarettes and inhaled). Bowels confined.

I now began to treat her for the condition, and ordered *Sulph.* 30 night and morning.

July 6th (thirty-fourth day).— Got indigestion after the *Sulph.*; symptoms continue. The period, which is due, has not appeared. Skin of face very dry. An eruption which she had on the chest before taking *Radium* had disappeared. Tendency to piles last three weeks. Earache in right ear to-night. *Pulsatilla* 30 was given, and afterwards *Merc. viv.* ʒm.

July 13th (forty-first day).— Much pain in ear, stitching, throbbing. The ears were syringed, and much wax removed from both and *Hydrastis* 30 given.

The ear continued to give trouble, though in a less degree, and she was deaf off and on. The indiges-

tion and stuffed-up feeling alternated with earache or pain in the chest. The period now came on, and was no different from ordinary.

July 20th (forty-eighth day).—Has been able to smoke the last two days. Weight 8 st. 13 $\frac{3}{4}$ lbs., a loss of 3 $\frac{3}{4}$ lbs. The patient looked very ill all this time.

July 27th (fifty-fifth day).—Feeling very seedy, as if going to be ill; as if she could hardly crawl about. Throat sore; ear aching; feels as if bruised inside. Aversion to meat continues.

I was getting anxious about this prover, and as soon as I found an opportunity, after I had discovered in *Rhus ven.* an antidote

to *Radium*, I gave that medicine on August 27th (eighty-sixth day).

August 29th (eighty-eighth day).—This morning, for the first time, ate bacon for breakfast. Had no indigestion to-day. Period rather less painful than usual. An old boil on the thigh became active. Corns which have given no trouble for years became very painful.

° PROVING III.

Mrs. W., aged 48, tall, grey eyes, nervous. Much troubled with neuralgia and headaches after influenza, but at the time of the proving free from them.

June 3rd (first day).—10 p.m.
Radium bro. 30, six globules.

June 4th (second day).—Prick-
ing and peppery sensation in left
nostril in evening.

June 5th (fifth day).—Generally
seedy to-day. Much headache.

June 10th (eighth day).—Has
been off appetite, especially for
meat.

Old symptoms now returned,
and the prover had to be treated
for them, thus the proving had to
be considered at an end.

PROVING IV.

Dr. T. G. Stonham has kindly
given me the following account of
a proving made on himself:—

“On *February 24th*, 1906, I
took five drops of *Radium 30x*

before breakfast and again before lunch.

“*February 26th* (third day).—Noticed some secretion on the lashes of the right eye on waking.

“*February 27th* (fourth day).—Right eye began to feel sore, with occasional sticking pains and increased secretion. There was some general malaise. The eye symptoms continued through the week. The eyes were < reading and artificial light; > closing the eyes. The eyes were injected as to the sclerotic vessels traversing it up to the cornea both from the inner and outer sides. Occasional itching of the lids (< upper lid).

“*March 3rd* (fifth day).—Examined by Dr. Macnish, who

reports: ‘Blenorrhagia of right eye; injection of sclerotic and slight injection of the lower part of the cornea; slight infiltration of the lower part of the cornea; the eye looks watery; tension the same in the right as in the left eye; pupil of right eye dilates less actively than that of the left; it also contracts more sluggishly. Slight patchy erythema diffused over the forehead.

“*March 4th* (tenth day).—Woke with right eye very painful, with a feeling as if there was a foreign body in it; better after going out into the air. For the rest of the day felt it very little.

“*March 5th* (eleventh day).—Right eye much better. Left eye

has had a sensation as if a loose eyelash were in it on several occasions, not very painful; slight soreness of ball of left eye. A few injected vessels run over the sclerotic to the cornea in the left eye.

“*March 6th* (twelfth day).—Both eyes much better. All symptoms rapidly cleared off from this date.”

I will now give a proving of another description, and a very remarkable one it is. I take it from an article by Dr. Burleigh Parkhurst, of Los Angeles, California, which appeared in the *Pacific Coast Journal of Homoeopathy* of June, 1904. Dr. Park-

hurst's article I consider one of the most valuable contributions which have hitherto appeared on the action of this remedy. I shall make large quotations from it, and I wish here to record my most cordial thanks to Dr. Parkhurst for publishing his experience. He has used *Radium* internally as well as externally, and I believe the first internal use recorded is that contained in his article. I quote now from his article what I term

PROVING V.

Dr. Parkhurst says : "The most remarkable experiment that I have ever seen reported was that of Goldberg of St. Petersburg. He fas-

tended to his arm 75 mg. of Radium in a box, the exposure being made through a mica window. The box was strapped to the arm for three hours. The strength of the Radium is not stated, but probably it was a low grade Radium, because of the quantity used, and also because at that time low grade Radium was more commonly used.

(Fourth day.)—"In four days after the exposure a red patch appeared, which became larger and increased until on the fourteenth day there was a necrotic ulcer, which spread in a serpiginous form.

"Later, four other similar ulcers appeared on the *chin*, on the *hand*, and one in the *groin*, affecting the tissues down to and including the

corium. These lesions broke down in a superficial sloughing ulcer, which increased for several days and then retrograded and gradually healed, the *distant lesions healing first*.

(Twenty - first day). — “ After three weeks the first lesion on the arm was an atonic ulcer in process of repair. From first to last there was no pain, no swelling or heat locally, and no fever or other constitutional symptom. The ulcer was cold, necrotic and torpid.”

“ You will notice,” continues Dr. Parkhurst, “ that this is very different in action from an X-ray dermatitis, and therefore the action of the Radium rays is definitely differ-

ent from the action of the X-ray. I think that the ulcers which appeared at parts distant from the site of exposure are of considerable significance, although I have seen no comment made upon it. To my mind, taken in connection with certain characteristics in a case of my own, which I will call your attention to later, *there is some kind of metastatic action.* It seems to me most probable that *the blood serum is one of those substances which are capable of becoming radio-active, and that in this case the blood became radio-active and had an effect on the tissues distant from the point of exposure* wherever from any cause the vitality was weakened."

The italics are mine. Passing from this proving, I will now give a case treated with Radium rays by Dr. Parkhurst, because this case shows so plainly the *constitutional* action of the rays and confirms certain points in the provings detailed above.

In this connection I may say that, though I had marked Dr. Parkhurst's paper for future reference, I was unaware of its essential importance until I studied it recently. Great was my pleasure to find that many of the symptoms of my provings were confirmed by Dr. Parkhurst's observations.

"The first case that I got for experiment with Radium," says Dr. Parkhurst, "was one of inop-

erable carcinoma of the cervix. The woman should have been operated upon six or eight months previously. When I was called in the case was in the last stages. She probably had not more than ten days or three weeks to live. Locally the vagina was entirely filled with a mass which involved apparently the posterior wall of the uterus. The vagina was so completely filled that it was difficult to get the finger within the introitus vulvæ. The systemic condition was one of apathy and torpor. She was œdematous from one end of the body to the other. She was in a jaundiced condition, had not slept without an opiate for a considerable time, could not

raise herself from the pillow nor turn herself in bed, profoundly anæmic, had no appetite, no action of the bowels to speak of, passing very little water, and was beginning to have, with a weak heart action, a dangerous dyspnœa. Mentally she was torpid and apathetic, and it was evidently only a question of days before she would drop away. You can see that this was not a very favourable case for the action of any remedy. Treatment with *Radium* was only suggested as a last resort, and with the understanding that nothing was expected beyond the mere satisfaction of knowing that everything that could be tried had been tried. But almost from the

first the effect was startling. The patient died, it is true, but for some time the favourable results of the change of treatment were most interesting, and, as I say, startling. I should like to give the history of this case somewhat in detail.

“ We began very carefully, because we did not know how active the Radium might be upon normal tissue. The Radium used was 10 m.g. of pure *Radium bromide* in a glass tube, the same tube that I have shown you already. I believe it to be of a radio-activity of over 1,000,000 ; at any rate, it is the highest grade of Radium that I can get in the market to-day. I wrapped this small tube in cotton and that again in lead foil, in

such a way as to allow the end of the tube to project from the covering. I inserted this to the bottom in a glass vaginal plug, and inserted this within the vulval opening as far as it would go. For the first few treatments the exposure was five minutes every day. It was then increased to ten minutes for five treatments, when, from the action of these eight treatments, the result was so marked that we gave her placebo to watch the case. These marked results were as follows:

(Third day).—“ After three days' treatment the discharge from the vagina had become very profuse, and she was much easier as to general comfort, and began to be

interested in what was going on. (Sixth day).—On the sixth day she sat up in bed. She had begun to want something to eat and the dyspnœa was getting less. (Eighth day).—On the eighth day discharge was still going on, the dropsy was improving, the jaundice was disappearing, the tumour was so much less in size that there was quite a space around it in the vagina. She was much more cheerful and in every way was much better. *She had been sleeping regularly without any opiate whatever, almost from the first, and had a movement of the bowels quite naturally.* For a week she had placebo, during which time the favourable action continued. She was bright and

cheerful and there was some slight redness beginning to appear in her cheeks. The tumour was getting less in size, and, as I say, the improvement was general. About this time we made an examination of the tumour with electric light and found the abnormal tissue covered with a white necrosis, which was continually sloughing off, sometimes in fluid, sometimes in flakes and even in shreds. From this time on progress was continuous and of the same character, until once she got out of bed by herself, although she had to be helped in again, and the tumour finally became so small that the whole vagina was patulous and we could make out

only the hardness in the body of the uterus and some small masses around the external os posteriorly, which were apparently getting less.

(Twenty-first day).—“On the twenty-first day this improvement began to cease. Her appetite began to get less; the urine, which had been almost normal, increased, and she began to feel weaker again. We began to increase the dosage of the Radium, which we did until we were giving fifteen minutes' exposure every day; but we could not bring back the improvement, as she gradually failed, with return of the old symptoms of dropsy, heart failure, and finally dyspnœa, and she died in a few days, dropping off very quietly from exhaus-

tion, with no pain or discomfort, the end coming within four or five days of the cessation of improvement. We had been so surprised by the action of the Radium in this case that we did not know what to expect. We hardly believed that the woman could live, and yet the improvement was so remarkable that we were almost willing to believe anything. As it was, instead of having her drop off in torpor in a few days, we kept her alive, comfortable, bright and happy for the better part of a month. And I believe that if we had had this case much earlier it would have been a case of carcinoma cure; but it was too far gone, and

There was not enough vitality left to carry the thing through. Several things in connection with this case I should like to note. *When we began treatment there was a small, nevus-like spot on the end of the nose, which had been increasing for some time. This, under the action of Radium, apparently decreased until it disappeared altogether.* It seems to me that this must be due to some action similar to the metastatic spots that I spoke of in Goldberg's case. If this action of Radium was not through the blood, how did it come about? Another characteristic result is one which I have noticed in every case where Radium has

been used locally. *The bowels began to move normally, and continued to act as long as she lived.* The action on the dropsy and on the kidneys seemed to be similar.

Thus far Dr. Parkhurst's case strikingly illustrates the constitutional action of Radium when externally applied, and it shows that the action is not merely local, as is generally supposed. It fully confirms proving No. 1 in a most important detail—the disappearance of a canceroderm on the face, as well as in the relaxing effect on the bowels.

PROVING VI.

Dr. J. Cavendish Molson, of 82, Wimpole Street, writing under

date April 11, 1908, has kindly given me the following account of an observation made by himself:—

“After taking a dose or two of a trituration not higher than 45x I got such *sudden* and *violent shocks* of pain in the lower branches of the fifth cranial nerve on the *left side* of my face that I decided to leave this remedy severely alone. The pains were without premonition, abrupt, and of lightning-like suddenness, and so intense as to call forth an interjection!

“I had no idea of ‘proving’ *Radium*, nor can I recall why I took the doses. Probably they were taken out of curiosity (when

working in my laboratory), to see what effect would be produced.

“As I have never had such pains before nor since, I connected them with the *Radium* salt.

“The incident is probably a year old.

“Had I known of your interest in this element I would have kept a better record of events. I obtained from Mr. Ambrecht a 12x trituration and worked this up to 45x by regular decimal steps.”

In a subsequent letter Dr. Molson says the “shock”-ing pain of *Radium* has left an indelible impression on his mind.

PROVING VII.

The following observation I think is deserving of being classed among the provings:—

In a case of psoriasis in a lady, æt. 49, mentioned by Dr. Cooper, *Radium* relieved the inflammation and irritation of the skin, and had a markedly soothing effect on the whole condition, but produced the following new symptoms:—

About the third day some blisters appeared on the dorsal aspect of the first three fingers of the left hand, just above the nails.

On the fourth day the left eyelid became inflamed.

CHAPTER III

CLINICAL USES OF RADIUM BRO-
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CLINICAL USES OF RADIUM BROMATUM

HAVING related the effects of *Radium bromatum* on healthy organisms, and some observations on patients, it is now my duty to give the counterpart of the picture and show the uses to which the experiences of the provings have been put. A proving is of little value until it has been put to the test of clinical use. Clinical experience with a remedy con-

firms and amplifies the provings, and reveals those symptoms of the provings which are more characteristic, and even develops new symptoms. The double picture will be found epitomised in the Schematic arrangement of symptoms which concludes this work.

Before going on to detail my own cases I will conclude my quotations from Dr. Parkhurst by giving his. He used "Radio-active water," and this is the first record I know of in which the remedy was used internally.

DR. PARKHURST'S CASES TREATED WITH RADIO-ACTIVE WATER.

"I have personally used," says Dr. Parkhurst, "*Radio-active water*,

or at least water which I supposed to be radio-active, inasmuch as I had exposed it for from twenty-four to forty-eight hours to the action of the Radium. I administered it internally in two cases, the patient taking several glasses of the water in twenty-four hours.

“CASE 1.—NEURASTHENIA, CONSTIPATION, ACNE ROSACEA.

“The first case was one of neurasthenia, with an undiagnosable condition in the epigastric region, with a great deal of pain about the pylorus, no tumour or other local lesion discoverable. We tried Radium-water in hopes of quieting the pain. She was very constipated, and we noticed that

the bowels began immediately to act more regularly. Her appetite increased, and the power to taste, which had been absent, gradually returned. She also reported that a catarrhal condition of the larynx improved. The most remarkable result, however, and the one for which I report this case, was the improvement in an old acne rosacea about the nose and cheeks. This condition began to clear up at once, and when we left off treatment was practically well. She took four glasses a day of the water, which was prepared by immersing the glass tube of the Radium in a gallon of water for twenty-four hours. This woman had been addicted to morphine

and other drugs to quiet her nerves, and of course that complicated the case. She had the Radio-active water every day for four weeks, when I stopped treating her, because I could not see that I was doing her enough good to advise her to keep on.

“CASE 2.—ACNE ROSACEA.

“A sister of the last patient, a stout, florid woman, had a similarly unhealthy skin, marked rosacea of the face, wished to take Radium-water because it helped her sister so much. She took it for two weeks, and the rosacea was very markedly improved, but she stopped treatment before the

rosacea was well, because she said she did not like to drink so much water. She was taking four glasses a day of water prepared at the same time and in the same way as that I was giving her sister."

AUTHOR'S OWN CASES.

I will now record some of my own cases, and I may point out that in nearly all of them a single dose of the remedy was given in exactly the same potency as that used in the proving. This disposes of the somewhat specious "explanation" of homœopathic cures by postulating an "opposite action of large and small doses." The dose which caused

was the dose which cured, and the potency was the same in both.

CASE 3.—PRURIGO.

A colleague consulted me about himself in October, 1906. He was suffering from an itching of the arms chiefly, but extending all over the body. I first suggested *Æthiops antimonialis*, and here is his report thereafter:—

“*November 3, 1906.*—I have been on *Æthiops* since I saw you, but with little or no improvement, and this itching hide of mine makes life a burden. No definite symptoms, except aggravation towards evening and night, worse on the arms and neck, but

extending more or less all over, not burning itching, but simply irritation with raised surface after scratching. Have tried everything likely—*Urtica*, *Croton tig.*, *Copaiva*, *Antipyrin 2x*, &c., &c., and am really getting desperate.”

This forcibly reminded me of proving No. 1, and so I prescribed a single powder containing six globules of *Radium bro.* 30. In a week he reported himself distinctly better. The improvement steadily went on to complete cure in a few weeks' time, without further repetition of the remedy.

CASE 4.—PRURIGO.

Mrs. C., aged 84, had a paralytic attack affecting the left side of the

body in March, 1906. The disease followed influenza, and was probably occasioned by it. The patient was previously otherwise healthy, except that she was somewhat feeble in her legs.

May 20th, 1907.—She wrote from the country to ask if I could do anything for an intolerable itching seizing her day and night at intervals, affecting the back across the shoulders and down the backs of the arms. A carbolic lotion which had been prescribed by an allopath failed to give any permanent relief, though it eased temporarily. *Rad. bro.* 30. gr. iv. in powder, one dose.

May 24th.—Itching not quite so persistent. Begins at 2 a.m. and

lasts till the lotion is applied. (After a week the lotion was discontinued.)

June 6th.—Attack now begins 3 a.m. and lasts till 4 a.m., then dies down till breakfast. It is intolerable for the hour.

June 16th.—I was in the country and had an opportunity of seeing the patient and her attendants. The latter were very emphatic about the improvement. The patient did not, at that date, disturb her nurse at all in the night, and the irritation did not come on until 5 a.m. There was none at all during the day. I was able to satisfy myself that there was no eruption of any kind. The skin was perfectly smooth

and natural, except for a very slightly roughened patch over the left scapula. Repeat *Rad. bro.*

July 4th.—Better.

July 21st.—Well.

CASE 5.—CORN OF RIGHT FOOT.

I gave to a gentleman, aged 60, who had long had an eruption of psoriasis on the back, a single dose of *Radium bro.* 30 on July 27th, 1906. There was no marked effect on the eruption, but the patient noticed that a corn fell off from the right foot, though a similar corn on the left foot was unaffected.

CASE 6.—ECZEMA.

Mr. A. D., aged 34, tall, fair, reddish hair, subject to hay-fever, and during one attack had an abscess in the nose, after that he had boils in various parts, and following the boils, eczema. He had taken in his time "gallons of tonics," and in spite of that had been losing weight steadily for the last two years. He had been twice vaccinated, the last time two or three years before I saw him. Before the boils came out he used to suffer from headaches. The localities in which the eczema was worse were the penis, scrotum, and groins, which were vividly red and moist. The axillæ were also

affected, and there was a good deal about the face. In the groins the irritation was excessive, affected, no doubt, by the patient having hernia and being compelled to wear a truss. *Thuja* 30, and afterwards *Sulphur* 30 at bedtime, were given, and *Nux v.* 30 in the morning. On February 3rd, 1905, the condition was as follows: Left eye swollen up; light very painful. Eczema on face, axillæ, groins, penis, scrotum. Itching very great on hairy parts. Without discontinuing the morning dose of *Nux v.*, which he had been taking some time, I stopped the *Sulphur* and gave a single dose of *Rad. bro.* 30.

March 6th.—Better. Irritation

decidedly better. Axillæ clear. Scrotum very much better. Slight eczema in moustache. The back has come out in a crop of acne, which is spreading partly over the chest. He feels more fit. Freer from headaches. *Not repeated.*

April 3rd.—Eczema got very much better. Then, fourteen days ago, boils came again. Headaches lately troublesome. Bowels act daily. Anus irritable; a little external bile. Eczema rather vivid where truss presses. Scrotum not bad. Chest and back spotty. Repeat *Rad. bro.*, one dose.

May 12th, 1905.—Eczema decidedly better. Penis and scrotum nearly well. No hay-fever. Right

eyelid feels heavy and right eye hurts if he reads at night.

Repeat.

July 12th.—Scrotum all right. Very much better altogether. Very little hay-fever.

In this case and the next the skin trouble was most severe about the generative organs. The fact that in prover No. 1 the first manifestation appeared in this region gave one point of similarity—*locality*. And although in the prover there was no irritation in this part, there was very great irritation elsewhere, and this gave a second point of similarity. It is quite practicable to combine the qualities of separate symptoms in choosing a simile.

CASE 7.—ECZEMA SCROTI.

Mr. M. T., aged 28, had had syphilis seven years before, and had still some faint symptoms of it about him. But he was more psoric than syphilitic, though in general health strong and robust. This patient was also a hay-fever subject. One of his chronic ailments was a serpiginous eczema of the scrotum, which scaled at times, and at times got moist and oozing; it involved the penis to a slight extent, and was attended with a good deal of itching.

May 5th, 1904.—Scrotum, which has been better under *Primula obconica* for some weeks, is again sore. R. *Rad. bro.* 30, 24 num-

bered powders numbers 1, 11, and 17, medicated with 6 globules of the remedy. One at bed-time in numerical order.

May 30th. — In a week the scrotum began to improve and got practically well; to-day it has started again a little.

After this *Primula obconica* was again given; then *Psorinum* in view of hay-fever. During the latter part of the time the scrotum got worse, and on July 25th *Rad. bro.* was repeated in a single dose, and again on August 26th and September 4th. The scrotum kept well till the latter part of the time, and then other remedies were given. On December 1st *Rad. bro.* was again given, but

without good result. On October 1st following it again did good for a time. In this case the relief was only temporary.

CASE 8.—ECZEMA PREPUTIALIS.

Mr. J. C., aged 43, had eczema of the inner surface of the prepuce and glans and also about the anus, which gave him a good deal of annoyance. I had given him several remedies with some improvement, but not permanent. On October 28th, 1907, the itching was giving a good deal of trouble, and I prescribed *Rad. bro.*, repeating it at intervals of ten days or so.

November 25th, 1907. — Much

better; penis better; anus nearly normal. A fortnight after receiving *Rad. bro.* had an irritable patch on the right foot, which disappeared later. *Repeat.*

CASE 9.—ECZEMA PERINÆI.

On *March 6th*, 1907, Mrs. N., aged 54, consulted me for piles, which she had had about a year, and constipation, which she had several years. But her biggest trouble was an intolerable irritation about the anus, spreading for a considerable distance round which was an angry area of eczema, which had been present three months. As the patient had been vaccinated four years

previously, and as the vaccination "took tremendously," I put her on *Thuja* 30 to start with. Under this all symptoms became worse, and *Graphites* 6 given later did not improve matters.

April 4th.—Bowels acting better, but irritation very bad; skin feels very dry as if baked. Irritation comes suddenly; is just as bad when the attacks are on, but is freer in the intervals. *Rad. bro.* 30, numbers 1 and 17, in 36 powders, one night and morning as numbered.

April 22nd.—Reported herself rather better. No more medicine.

May 2nd.—Anus looks very much better. Patient had been constipated for two or three days,

and had to use glycerine suppositories. Irritation better after that. *Aescul. hip.* 30. gtt. v., in wine-glass of water, morning on rising. *Rad. bro.* 30, numbers 1 and 11 in 24 powders, one at bedtime as numbered.

May 28th. — *Annus practically well in appearance*, though at times irritable. Stools normal.

The eczema was cured: it was *Radium* which started the cure and completed it.

CASE 10.—NEURASTHENIA, ETC.

A neurasthenic lady, 32, consulted me on February 4, 1908, complaining of severe anal irritation, worse at night, constipation

and indigestion. I gave her *Rad. bro.* 30, one dose in ten days.

March 24th.—She reported herself much better in all respects, bowels acting better, digestion better, and also the irritation. She has gained 3 lbs. weight in the month.

CASE 11.—ACNEOUS ERUPTION OF FACE, ETC.

Mrs. J., 70, troubled with a very chronic acneous eruption of the face; had influenza early in 1908, which left her in a weakened state, suffering from nausea, and at times disordered bowels with yellow stools. On March 5th *Rad. bro.* 30 was given once in ten days, and in a month she returned

saying that the medicine had *suitèd* her particularly well. The face was very much better, the bowels were all right, and the nausea gone.

CASE 12.—PSORIASIS.

Miss N., 38, who suffered from a very aggravated form of psoriasis which covered practically the whole body, has received on two occasions *Rad. bro.* 6 in repeated doses with very great benefit. At the present time the eruption has nearly cleared off under the remedy.

CASE 13.—PSORIASIS.

The following case has been recorded by Dr. le Hunte Cooper :

A lady, 49, suffering from psoriasis affecting arms, right thigh, waist, and knees. The spots were red and inflamed, and actual pain was felt in them. The irritation was very noticeable, having \ll after 5 p.m. and in the early part of the night. *Rad. bro.* had a thoroughly soothing effect on the whole condition, both inflammation and irritation having lessened. New symptoms appeared as detailed in Proving 7.

CASE 14.—PRURITIS VULVÆ.

Dr. Burford cured with *Rad. bro.* 30 a case of pruritus vulvæ.

CHAPTER IV

CARCINOSIS AND CANCER

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HITHERTO the experience I have related has been for the most part exemplified in diseases of the skin. I now come to give some evidence of the power of *Radium* over the cancerous diathesis, for which I think "carcinosis" is a convenient term, and over cancer itself. It was as a cancer remedy that *Radium* was first tried extensively, and with some encouraging success.

Here, in Dr. Robert Cooper's phrase, "The allopaths' externals are our internals," for although my evidence in this direction is at present scanty, it is sufficient to show that the remedy used internally has a very definite relation to the disease. Our business is to find out the proper indications for its employment and the best form in which to administer it. I think that the provings I have been able to conduct and the accumulated clinical evidence will at least be a first step in this direction.

There are no cures for cancer in the abstract, and there never will be; for the sufficient reason that cancer is not an abstract disease. There are hundreds of different

shades of disease included under the term "cancer," and it is the art of the physician to select the proper remedy for each. That all cancers are not incurable is becoming recognised even by the allopaths themselves. Homœopaths have always known it, but not many have had the courage to undertake the cure of cases of cancer in face of the dominating authority of the surgeon's knife. *Radium* is destined, in my opinion, to put one more instrument into the hands of the physician for the medicinal cure of cancer—which is the only real cure when all is said and done.

CARCINOSIS.

The two cases I am now going to relate are those of a sister and brother, and the worst trouble of each was in the nose—internally and externally. The chief point in the family history was this: Their mother, who belongs to a well-known Jewish family (the father being English), is subject to facial acne of a very aggravated type. Her father died of cancer. Not being under my care, I have had no opportunity of trying *Radium* in her case. The mother's acne I regard as a benign expression of the cancer taint, or, as I call it, carcinosis. The affection in the children I consider as being

of the same nature, only at another remove.

CASE 15.—ERYTHEMA OF FACE
AND NOSE WITH NASAL CATARRH.

Miss P., aged 20., was brought to me on July 3rd, 1907, complaining of an eruption which she had had on the nose since she was 15, that is to say, when the periods began. She was tall, well-developed, and, but for this disfigurement, a particularly handsome girl. She had had measles and whooping-cough in infancy and chicken-pox after she was 15. She was unvaccinated.

The present trouble was this. She had a red shining nose, the redness invading the adjacent parts

of the face. The nose burned and itched. It was aggravated by any form of exercise, which caused her nose to bleed and made it painful. In addition to this, there was catarrh^e with green discharge, filling five handkerchiefs in the day. The redness was worse after meals.

The patient also suffered from painful menstruation. The periods were regular. The pains were referred to the region of the ovaries and the legs. She began to feel pain a week before. She had moist hands and feet. She had had no chilblains for two years and not severely then. She was much worse in cold weather.

I first prescribed *Carcinosin* 100. This made no marked change,

though there was less discharge and less bleeding than formerly at the end of a month.

July 23rd, 1907.—R. *Rad. bro.* 30, gl. vi. (single dose).

August 27th, 1907.—This time she reports a marked change. The nose does not now bleed half as much as it used to do. It bleeds once a week, and this occurs on rising in the morning. This improvement has been observed the last fortnight. Formerly any kind of exercise would cause bleeding; this is not so now. The discharge continues, especially after tennis. Walking does not affect it. There is still itching all over the face, including the nose. *Repeat.*

September 26th, 1907.—Very

much better. *Bleeding entirely stopped.* Appearance better, but gets very blue when the weather is cold. Has had much pain at the period, and the pain is worse then. *Repeat*; also *Caulophyllum* 3, every hour at the period when there is pain.

October 24th, 1907.—Decidedly better. Catarrh entirely ceased. Bleeding only occurs if the weather is intensely cold and she is out in it. The redness of the nose improves as the day advances. *Caulophyllum* shortened the pain of the period. *Repeat.*

She was kept on the remedy till December 3rd, when this note was made: Nose feeling much better. It is much less red and so is the

face. There is no burning now ; it only itches in the cold.

CASE 16.—PAINFUL NASAL
CATARRH.

A. P., aged 19, in a military college. Came to me June 15th, 1907, complaining of trouble with his nose. He was very tall and stoutly made, considerably over 6 ft. in height, dark, rather heavy cast of features. He had suffered from impetigo till he was 14. He has very moist feet. In summer the feet sweat profusely and are extremely unpleasant. Is rather morbid ; dreams much and talks in sleep. Not vaccinated. Is constantly getting colds in his head.

His nose is sore and cakes up. Has a burning sensation. When he plays games the nose swells. I found the nose was in a state of chronic catarrh; the throat was red and granular. He always has a sore throat and the feeling of a lump in it.

I first prescribed *Cadmium sulph.*, and on this he made considerable improvement, so I continued it till August 24th. After this I did not see him till October 12th, and then the condition was as follows:—

Nose gets very puffed at times, though there is not so much discharge. The mucous membrane of the throat is very dark, congested, and swollen. The aperture

of the nostrils was narrowed by congestion. ℞ *Rad. bro.* 30, one dose.

I did not see the patient again till December 19th. Was much better after the last medicine and kept better till a week before—that is to say, for nine weeks. Feet much better; do not sweat now. *Repeat.*

I have seen this patient recently, and his only trouble now is excessive sebaceous secretion of the skin of the nose. The throat is much better.

These two cases bring me to another case which further develops the relation of *Radium* to cancer. We have seen in the proving No. 1, and in one of Dr.

Parkhurst's cases, that superficial nævi — so-called canceroderms— have disappeared under the drug's action. No doubt millions of people have these little nævi who never develop, and never will develop, cancer. All the same, I nevertheless regard this as one of many points of indication of the tendency, and more especially when they are numerous. Therefore I regard their presence as one among many indications for the cancer nosodes. The fact that *Radium* has removed them proves to my thinking a certain relation of *Radium* to the cancer diathesis, and their presence in any case forms one indication for the exhibition of *Radium*.

In the two last cases mentioned, and in the one now to be described, these were not noticed, but the symptoms of carcinosis were sufficient without them. Moreover, they were all young subjects, and canceroderms do not usually appear till middle life.

CASE 17.

Lieutenant H., aged 27, of the Indian Army, was invalided home early in 1907 for what was supposed to be appendicitis.

He had been perfectly well up to November, 1906. He had a splendid family history. Had been vaccinated twice, the last time in 1903, when it "took."

He was inoculated for typhoid in 1900. On April 21st, 1907, he was operated on by Mr. Watson Cheyne, who found a sarcomatous tumour which could not be removed. Mr. Cheyne performed enterostomy, making a new passage for the fæces, and thereby prolonging the patient's life.

The physician who attended the case with Mr. Cheyne kindly gave me the following details on October 2nd, 1907 :—

“Mr. H. came from India with an abdominal tumour, for which Mr. Watson Cheyne operated. The condition seems to be a sarcoma growing from the wall of the small intestine, and with an extensive glandular infection. A short

circuit was made between the small intestine and the transverse colon. This has acted quite well, and there has been but little gastro-intestinal disturbance. He has slight flatulence, and occasionally passes a small amount of blood *per rectum*.

“The tumour varies, but is considerably larger than it was at first. He has had injections of Coley’s fluid m xv. twice a week, and this has definitely retarded the progress of the growth. He has, however, become more and more cachectic, especially during the last few weeks.”

When I first heard of the patient he was living at Richmond, and was under the care of local

médical men. As they had told the patient's father that there was no hope for him, he called on me to ask if I thought Homœopathy could do anything. I said I thought that was very possible, but I should like to see the patient before saying anything definite. In the end he was brought to London and put under my care.

When I first saw Mr. H. I received a shock—I did not expect to find things so far advanced. He was dreadfully emaciated and cachectic, as described in the letter quoted above. But I, nevertheless, took him in hand, and under *Ornithogalum* ϕ in unit doses, and later *Natrum cacodylicum* in $\frac{1}{4}$ gr.

doses three times a day, he held his own. Then came an attack of Indian fever, which *Ipecac.* 30 successfully dealt with. Before coming under my care he had been under the influence of tinct. opii., and I did not cut this off altogether, but very small doses sufficed to relieve pain when present.

I now come to the *Radium* episode of the case, and though it is only an episode I think it worth mentioning because there is some corroboration of it from another quarter.

On October 8th it was noted that he had had much pain in the body, so a dose of *Ornith.* was given.

October 15th.—Has been feeling

weaker daily. To-day, after a two hours' sleep, he had violent pain. Was unable to take any lunch. Diarrhoea set in and he passed much blood. Very depressed this week. ℞ *Rad. bro.* 6, globules .iv. in powder, twenty-four of these, one every four hours.

October 17th.—Has had some bleeding at stool this morning, but not much. Pain not nearly so acute. *Repeat.*

October 21st.—No more bleeding.

This patient recently passed away—over five months after I took him in hand.

He developed intolerance of the cacodylate, and at the desire of his

friends and with my concurrence he was put on Violet-leaf treatment, but a very severe diarrhœa developed, which was with great difficulty controlled. In fact, it never was completely controlled till the end. Either with the stool or separately from it, was purulent discharge, and at times clots.

On January 10th there was an extreme amount of pain, and clots passed with discharge. *Rad. bro.* 6 was given in single dose. After this there was less pain and no clots. In February the diarrhœa continued uncontrolled. I followed the *Radium* with *Rhus ven.* 3x every two hours, and for the first time for many weeks the diarrhœa stopped, showing, as I

thought, a complementary action on the part of *Rhus ven.* and *Radium*. The improvement unfortunately proved only temporary and the inevitable happened. But there is this much to be said, during the five months that he was under homœopathic treatment the pain he endured was nothing to be compared to what he had previously.

I mention this case because I saw in the *Homœopathic Recorder* of June, 1907, a note to this effect: "Dr. Pixley, of Pittsfield, Massachusetts, says that *Radium* 6x trit. has a strong action on cancer, especially on bleeding cancer; it dries it up and alleviates the pain."

I think this is very likely, and the steady cure of nose-bleeding in the young lady with the cancerous family history gives further support to this. The question of which is the best potency to use is an important one, which only experience can decide.

In reference to the three last cases there are one or two practical remarks which I should like to make. If the mother of the first two could have been treated throughout her pregnancies for the cancerous diathesis which she undoubtedly inherited — treated, I mean, more especially with cancer nosodes and other remedies like *Radium* which are related to cancer, in all likelihood the children would

have escaped the trouble for which I treated them, just as children do escape when syphilitic mothers are treated specifically during their pregnancies.

The other point is of a different kind. Why did Mr. H. contract cancer? I cannot trace the smallest sign of heredity in his case. I have seen in several cases cancer develop after ordinary blood-poisoning (from sewer gas, for example). Dr. Robert T. Cooper maintained that this was a common cause of cancer. Was there anything of that kind in this case? The only thing that I could discover was the anti-typhoid inoculation. I merely throw this out as a suggestion,

and whether it be the fact or not, it was the chief seat of action of the typhoid poison that the disease attacked.

Cures of cancer with Radium-rays were early reported. In July, 1903, Gussenbauer, of Vienna, reported a cure of a case of cancer of palate and lips in a man aged 61, who had been previously operated on and finally given up as incurable.

In 1905 Max Einhorn, of New York, reported satisfactory results of treating œsophageal cancer by means of Radium contained in a hard rubber capsule and allowed to remain in contact with the stricture for half an hour or an hour.

In the *Homœopathic World* of

July, 1906, an important note quoted from the Paris correspondent of the *British Medical Journal* is of interest in this connection. The writer says: "It had been hoped that medicine would be able to take a signal revenge in another field. The radio-therapeutic treatment of cancerous affections at first seemed full of promise. We all know those little epitheliomas which the people, in their figurative language, call 'graveyard flowers' because they are generally seen on the faces of those who are nearing the end of life. A characteristic of these little tumours is to resent all familiarities, more particularly those of a surgical nature. More delicate in their

action, the X-rays sometimes favourably influence these growths, and we see some disappear as by miracle after five or six carefully regulated applications. Alas! evil is always close to good, and now our enthusiasm for the new method must suffer abatement. The treatment is not always free from danger, and at a recent meeting of the Société de Dermatologie various speakers stated that, together with instances of cure, they had seen the lymphatic glands corresponding to the region treated attacked by the disease. What, then, is to be done? If the disease is left to itself the patient dies of cachexia. If not, he dies of the treatment. The only conclusion

that seems warranted is that we must do our best to avoid epithelioma."

There is another possibility which does not seem to have occurred to this writer, namely, to give the remedy in a different way, by the internal method in infinitesimal doses, and this is the more important since he does not tell us how epithelioma may be avoided. The observation of the evil and the good going hand in hand is of particular interest to homœopaths who know how to avoid the evil and choose the good. If X-rays and Radium-rays could not stir up cancer they could not cure it.

CHAPTER V

SCHEMATIC ARRANGEMENT OF SYMPTOMS

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SYMBOLS USED.

IN the subjoined Schema every symptom is referred to the proving in which it occurred by a number appended to it, and also the day of the proving on which the symptom appeared. The sign (^x) means that the observation is from an experiment; (°) means that the symptom is a cured one; (<) means aggravated by, or worse;

(\succ) means ameliorated by, or better.

Clinical.—Acne. Cancer. Carcinosis. Constipation. Corns. Eczema. Epistaxis. Erythema. Hæmorrhage. Hæmorrhagic cancer. Lupus. Nævus. Neuralgia. Neurasthenia. Nose, affections of; catarrh of; redness of. Ophthalmia. Prurigo. Pruritus ani; et Vulvæ. Psoriasis. Skin affections generally. Trachoma. Tic douloureux. Ulcers. Warts.

Characteristics.—Whether given internally or applied in the form of Rays, *Radium* manifests a powerful action on the skin. It produces an intense irritation, which is \prec at night and when warm in bed. This I regard as one of the keynotes of the remedy. Whether the itching is accompanied by an eruption or not the remedy has cured in numbers of cases. The action of

Radium is very deep and long-lasting. It is also very slow in developing its full effect. The eyes, which belong to the same developmental area as the skin, were markedly affected in the provings, as was also the nose. The disappearance of the small *nævi* denotes an action on the blood-vessels, which is further shown in the cure of the case of epistaxis and the control of bleeding and pain in the cancer case.

Radium is rather predominantly right-sided. The symptoms (of eyes) move from right to left. In one prover there was an alternation between the symptoms of the ears and chest with symptoms of the stomach. In contradistinction to the general right-sidedness Dr. Molson's very striking symptom of the sudden shock-like lightning pains in the lower face occurred on the *left* side. This symp-



toni should find its counterpart in many cases of facial neuralgia.

The *Time* of the remedy is < at night and in the early morning hours. *Temperature* gives < by warmth of bed; but > by bathing with *very* hot water. The eye symptoms were > in the open air. < By shaving; washing; motion (headache). The eyes were < by reading and > by closing them; < by artificial light. The skin is > by scratching.

Relationships.—Radium bro. is *antidoted* by Rhus ven. and possibly Tellur. It is *followed well* by Rhus ven., Sepia and Calcarea. It compares with Calcarea in < by wetting; and with Carbo anim. in < by shaving. In pruritus ani it compares with Blue light. With Lycopod. in the direction right to left; and also in sudden, shock-like pains. In cancer and carcinosis, compare the cancer nosodes, Hydrastis,

Conium, Cundurango, &c. Compare also cognate remedies—Uran. nit., Tellur. In a paper read before the British Homœopathic Society on May 7th, 1908, Dr. Stonham developed the comparison between *Tellur.* and *Radium* in some detail. They both affect most markedly the eyes, skin and nerves, which belong to the same developmental area. The symptoms of *Tellurium*, like those of *Radium*, were late in developing and long-lasting in their duration without repetition of the dose. *Tellurium* is found in nature associated with *Radium*, and some specimens of *Tellurium* are radiant. These specimens have been proved to contain one of the eight different rays which comprise the *Radium* emanation. Dr. Stonham related a case of an affection of the nose in an elderly man which was diagnosed by a skin specialist as rodent ulcer. A *Radium* application was made

for one hour. Eleven days afterwards the patient came to Dr. Stonham with a severe *Radium*-burn of the part. Redness and a pricking sensation had come on the day following the application, and then Dr. Stonham applied a *Calendula* and lanoline ointment and gave internally *Tellur.* 6. Some ten days later the patient reported that the nose went on unimproved for several days and then suddenly improved. A month later both the burn and the original trouble had quite disappeared.

SYMPTOMS

Mind.—From being torpid and apathetic became cheerful (cancer of uterus treated locally with *Radium*).

Head.—Headache in occiput in morning; a tight feeling, worse on motion; lasted some days (2.—2nd d.).
—Much headache (3.—3rd d.).

Eyes.—Eyes smart and look red (noticed by others). Passed off and reappeared with greater intensity later. Disappeared entirely in three weeks (1.—28th d.).—Some secretion on lashes of right eye on waking (4.—3rd d.).—Right eye began to feel sore with occasional sticking pains and increased secretion; symptoms continued through the week, < on reading, < with artificial light, > on closing eyes; sclerotic vessels injected, running to cornea from both sides; occasional itching of lids, worse upper (4.—4th d.).—“Blenorrhagia of right eye; injection of sclerotic and slight injection of lower part of cornea; slight infiltration of lower part of cornea; eye looks watery; tension same in right as in left eye; pupil of right dilates less actively than left and contracts more sluggishly” (4.—5th d.).—Woke with right eye very painful with feeling as if foreign body

in it, better after going out into the air; rest of day felt it very little (4.—10th d.).—Right eye much better; left eye has had sensation as if a loose eyelash were in it on several occasions, not very painful, slight soreness of ball of left eye; a few congested vessels run over the sclerotic to cornea in left eye (4.—11th d.).—Left eyelid inflamed at outer corner (7.—4th d.).—°Trachoma.

Ears.—Earache right ear (2.—34th d.).—Much pain in ear, stitching and throbbing. The ears were syringed and much wax was removed from both; the ears continued to give trouble for some days after this, and there was deafness off and on (2.—41st d.).—Indigestion and stuffed-up feeling alternating with earache (2.—41st d.).—Throat sore, ear aching; feels as if bruised inside (2.—53rd d.).

Nose.—Much mucus in nose with-

out having taken cold (1.—14th^{d.}). Pricking and peppery sensation in left nostril in evening (3.—2nd.).—°Small naevus-like spot on end of nose which had been increasing some time disappeared (case of uterine cancer treated locally).—°Catarrh with green discharge.—°Epistaxis.—°Burning sensation in nose.

Face.—Sudden and violent shocks of pain in lower branches of fifth cranial nerve, left side so intense and of such lightning-like suddenness as to call forth an exclamation (G).—Skin of face very irritable; this gradually got worse, and lasted over two months; the skin became thickened and broke in places, when scratched (which gave the greatest relief) exuded a clear moisture; < by washing (which caused oozing); < by shaving (only possible on alternate days); > by bathing in very hot water; < at night when warm

in bed ; it prevented sleep, and a handkerchief had to be kept applied to absorb the exudation ; though scratching relieved the intense itching, it was followed by burning and stinging, with oozing (*Rhus v.* cured) (1.—45th d.).—Small nævus on chin turns black, scales off, and disappears (1.—88th d.).—Skin of face very dry (2.—34th d.).—Slight patchy erythema diffused over forehead (4.—5th d.).—Serpiginous ulcer on chin (5.—18th d.).—°An old acne rosacea about the nose and face (cured in two cases with *Radium-water*).—°Erythema of nose and face.—°Acneous eruption of face.

Mouth.—Tongue very sore right side, about the middle (1.—16th d.).—Mouth dry in morning (2.—2nd d.).—Tongue white (2.—3rd d.).—°Power of taste returned.

Throat.—Throat sore, ear aching (2.—55th d.).

Appetite.—No appetite for lunch (2.—3rd d.).—Aversion to meat; this lasted many months (2.—3rd d.).—Cannot eat bacon for breakfast (2.—4th d.).—Unable to smoke (2.—22nd d. This lasted till 46th day of proving; on 86th day prover received *Rhus ven.*, and two days later was able to eat bacon for breakfast).—Off appetite, especially for meat (3.—8th d.).—°Appetite increased and sense of taste returned (*Radium-water*).

Stomach.—Nausea (2.—4th d.).

Abdomen.—Inflammation of umbilicus (1) — Stuffed-out feeling after food (2.—22nd d.).—Indigestion and stuffed feeling, alternating with earache or pain in the chest (2).—Serpiginous ulcer on groin (5.—18th d.).—°Hæmorrhage from bowels in case of sarcoma of intestines.—°Pain about the pylorus (*Radium-water*).

Stool and Anus.—Stools paler

than normal and more frequent (1.—14th d.).—Stools very relaxed, in loose bits, partly almost watery, darker in colour; sometimes tags of mucus; did not become normal till ten weeks later (1.—16th d.).—Bowels confined (2.—23rd d.).—Tendency to piles the last three weeks (2.—34th d.).—^oBowels act naturally from the first (cancer case treated locally; previously constipated and under opiates).—^oFrom being constipated bowels became regular. (*Radium-water*).—^oIntense eczema around anus and extending to vulva, with great irritation.—^oBloody stools; clots in the motions (in case of cancer of intestines).

Male Generative Organs.—Eruption of psoriasis on penis, with circular or serpiginous edges (1.—4th d.).—^oEczema, moist, of penis, scrotum, groins and anus cured.—^oSerpiginous eczema in syphilitic and psoric subject

relieved for a time.—°Eczema of skin and inner surface of prepuce with irritation; eczema about anus.

Female Generative Organs.—Period delayed (2.—34th d.).—Period a week late, but not otherwise abnormal (2.—41st d.).—Period rather less painful than usual (2.—88th d.).—°Pruritus vulvæ.

Respiration.—Feels as if she could not get air enough (2.—3rd d.).

Larynx and Trachea.—°Catarrhal conditions of the larynx improved (*Radium-water*).

Chest.—Chest feels tight as if she could not get air enough (2.—3rd d.).—An eruption has disappeared from the chest during the proving (2.—34th d.).—Pain in the chest alternates with indigestion and stuffed-up feeling.

Back.—Pain under left scapula; < on moving, < by putting shoulder back, > after rising (1.—52nd d.).

Upper Limbs.—Hands cold (2.—3rd d.).—Serpiginous ulcer on hand (5).—Blisters on dorsal aspect of first three fingers of left hand just above the nails (7).

Lower Limbs.—A callosity or corn on inner border of right foot, which has been there twenty years, was found to be almost gone; it disappeared completely soon after (1.—16th d.).—°A corn fell off the right foot.—Irritable patch appeared on right foot in patient taking *Radium bro.* 30, fourteen days after taking the dose.—Fœtid foot-sweat relieved.

Generalities.—Sudden, lightning-like “shock”-ing pains (6).—Indigestion and stuffed-up feeling alternate with earache or pain in the chest (2.—41st d.).—Looked ill nearly all the time of the proving; lost 3½ lb. in weight (2).—Feels very seedy as if going to be ill; as if could hardly

crawl about (2.—55th d.).—Some general malaise (4.—4th d.).—°Relieved pains of cancer and enabled to sleep; removed jaundice and dropsy; restored life and cheerfulness from a state of apathy and collapse in same case (action of rays).—°Feels more fit.—Central nervous system, (especially in young animals) very sensitive to Radium; animals die of paralysis.^x—Red corpuscles lose their hæmoglobin.^x—Plant growth and development checked.^x—Protozoa first stimulated, then die.^x—Regeneration retarded.^x—Development retarded.^x—Ferments lose their power.^x

Sleep.—°Sleeps regularly without any opiate (cancer case treated locally).

Fever.—Shivering, bilious feeling, lasting three days (1.—11th d.).—°Fœtid sweat of feet relieved.

Skin.—Eruption of psoriasis on penis with circular or serpiginous

edges (1.—4th d.).—Skin of face very irritable; this gradually got worse; the skin became thickened and broke in places, and when scratched (which gave great relief) exuded a clear moisture; < on washing (which caused oozing); < by shaving (only possible alternate days); > by bathing in very hot water; < at night when warm in bed, preventing sleep; scratching, though it relieved, caused burning and stinging (1.—45th d.).—Small naevus on chin turns black and falls off (1.—88th d.).—Skin of face very dry (2.—34th d.).—An eruption, which she had on the chest before taking *Radium*, has disappeared (2.—34th d.).—Slightly patchy erythema diffused on forehead (4.—5th d.).—The skin became red, the place soon turned into a wound which took four months to heal (M. Curie. Application to arm for ten hours).—Wound appeared

at end of fortnight and took another fortnight to heal. (Ditto. Half-hour's application).—After two months skin became red and a bit sore, but it soon passed off (Ditto. Eight minutes' application).—Intense erythemæ which leaves a brownish pigmentation, unless ulceration follows (Roux). Blisters on dorsal aspect of first three fingers of left hand just above nails (7).—°Psoriasis (two cases).—°Acneous eruption on face.—In four days after exposure a red patch appeared, which became larger and increased until on 14th day there appeared a necrotic ulcer which spread in a serpiginous form. Later four other smaller ulcers appeared on the chin, on the hand, and one in the groin, affecting the tissues down to the corium. These lesions broke down in a superficial sloughing ulcer, which increased for several days, and then retrograded and gradually healed, the

distant lesions healing first. After three weeks the first ulcer on the arm was an atonic ulcer in process of repair. From first to last no pain, swelling, heat or fever. The ulcer was cold, necrotic and torpid (5).—^oTwo cases of acne rosacea of face (*Radium-water*).—^oCorn dropped off right foot.—^oEczema of scrotum and penis and axilla cured.—^oPrurigo worse at night (two cases).

Aggravations. — Shaving ; washing ; warmth of bed (skin). Motion (headache).—Worse by reading ; artificial light (eyes).

Time.—Worse at night.

Ameliorations.—Bathing in very hot water.—Scratching.—Closing eyes (eyes).—Open air (eyes).

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